



# County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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December 30, 2024

To: Supervisor Kathryn Barger, Chair  
Supervisor Hilda L. Solis  
Supervisor Holly J. Mitchell  
Supervisor Lindsey P. Horvath  
Supervisor Janice Hahn

From:   
Brandon T. Nichols  
Director

## VISTA DEL MAR CHILD AND FAMILY SERVICES COMMUNITY TREATMENT FACILITY CONTRACT COMPLIANCE REVIEW

### REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contract Compliance Division (CCD) conducted a Contract Compliance Review of Vista Del Mar Child and Family Services Community Treatment Facility (the Contractor) in June 2024. The Contractor has one site located in the Third Supervisorial District. The site provides services to the County of Los Angeles DCFS placed children, Probation foster youth, Non-Minor Dependents (NMDs), and children, youth and NMDs placed by other counties.

### Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 2
PRIORITY 2 5
PRIORITY 3 0

*"To Enrich Lives Through Effective and Caring Service"*

The CCD conducted a virtual Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas: General Contract Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency and Transition Services; Education and Independent Living Plan Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

The Contractor was in full compliance with 7 of 10 applicable areas of the CCD's Contract Compliance Review: Engagement and Teamwork; Needs and Services Plans; Permanency and Transition Services; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; and Personnel Files.

For the purpose of this review, four DCFS placed children were selected for the sample. The CCD reviewed the files of the four children and interviewed two of the children in person to assess the level of care and services they received; two children refused to be interviewed. The two interviewed children were observed to be clean and well groomed. An additional three discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

The CCD reviewed five staff files for compliance with Title 22 Regulations and County contracting requirements. The CCD also conducted interviews with staff. To assess the quality of care and supervision provided to the placed children, DCFS also conducted a site visit of the Contractor's location.

The CCD noted findings in the areas of:

### **Priority 1**

- Personal Needs/Survival and Economic Well-Being (2 Findings)
  - Two children reported not receiving enough food or food to accommodate their special dietary requests.

### **Priority 2**

- General Contract Requirements (2 Findings)
  - The Special Incident Reports for two children were not submitted timely and not cross-reported in the iTrack system.
- Facility and Environment (1 Finding)
  - Fresh fruits and vegetables were not available and accessible to the children.

- Personal Needs/Survival and Economic Well-Being (2 Findings)
  - Two children reported not receiving the requested culturally appropriate personal hygiene items.

On September 5, 2024, the Children Services Administrator teams from DCFS' CCD and the Out-of-Home Care Management Division held an exit conference with the Contractor's representatives.

The Contractor's representatives agreed with the review findings and recommendations and were receptive to implementing systemic changes to improve the Contractor's compliance with regulatory standards.

The Contractor provided the attached approved Corrective Action Plan addressing the noted findings in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 371-6052.

BTN:CMM  
RW:DF:nw

#### Attachments

- c: Fesia Davenport, Chief Executive Officer  
Oscar Valdez, Auditor-Controller  
Guillermo Viera Rosa, Chief Probation Officer  
Public Information Office  
Audit Committee  
Lena Wilson, J.D. President and Chief Executive Officer, Vista Del Mar  
Bernice Karnsrithong, Regional Manager, Community Care Licensing Division  
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division  
Kellee Coleman, Assist Program Administrator, LA Region, CCLD  
Celeste M. Fitchett, MSW, Bureau Chief Fiscal and Performance Audits, CDSS



**LOS ANGELES COUNTY**  
**VISTA DEL MAR CHILD AND FAMILY SERVICES - CTF (CTF)**  
**Corrective Action Plan**  
**2024**  
**GENERAL CONTRACT REQUIREMENTS**



2. Special Incident Reports (SIRs) are properly documented.

2.2 SIRs are properly cross-reported in the I-Track System [ILS, §87061(i); Master Contract, Exhibit A-V; Master Contract, Exhibit A, SOW, Part B, §10.4][ILS, §87061(i); Master Contract, Exhibit A-V; Master Contract, Exhibit A, SOW, Part B, §10.4]

Facility

Site 1458

Site 1458

**1. Explain the Cause.**

SIRs submitted late due to human error.

**2. Corrective Action Taken.**

Reviewed regulatory time frames for SIRs with Youth Development Counselor Supervisors to avoid future discrepancies. Unit Director to continue to check for timeliness completion. Please see attached training sign-in sheet. CAP Revisions: Unit Director reviewed the regulatory time frames for input of SIR/Itracks with Unit Supervisors, Administrative Assistant/Case Coordinator and QA department. The Unit Director and Administrative Assistant/Case Coordinator will cross check the AD Report with SIR completion daily and to ensure that SIR submission has been completed daily if indicated and will send reminder to unit supervisor to ensure it is completed on time (within 24 hours). QA department to oversee and complete internal audits. Attached please find the SIR Policy and training outline.

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

QA Staff will continue to monitor and review SIR submission as soon as they receive email from Supervisors that Itrack has been submitted. QA will continue to send reminders to Supervisors regarding late submission and to add Addendum with reason for late submission in the Itrack system. QA Staff to notify the Unit Director on a monthly basis to report status of late submission of Itracks.

**FACILITY AND ENVIRONMENT**

14. Adequate supply of nutritious perishable and non-perishable foods are maintained.

14.3 Fresh fruits and vegetables are available and accessible to the children [Master Contract, Exhibit A, SOW, Part C, §15.3.10.8.2; Title 22, §§80076(a)(1) & (a)(4)] [Master Contract, Exhibit A, SOW, Part C, §15.3.10.8.2; Title 22, §§80076(a)(1) & (a)(4)]

Facility

Site 1458

### 1. Explain the Cause.

The cantaloupe and strawberries were delivered from the kitchen who did not see that it was moldy. Staff had not yet served the cantaloupe, therefore did not observe it moldy. Upon serving, staff would have noticed and not served it. Staff lacked to notice that the strawberries got molded and lacked to notice the open bag of chips.

### 2. Corrective Action Taken.

On August 9, 2024, Director of Food Services discarded all expired foods and condiments in the kitchen etc. Items were discarded prior to being informed to take pictures. On August 9, 2024, YDC Supervisors were instructed to discard all expired foods and condiments in the kitchen. Items were discarded prior to being informed to take pictures. As of August 19, 2024, new labels were sent to the units to tag all unlabeled items. YDC Supervisors were informed about the requirement for all items that were removed from package to be labeled. To avoid future occurrences the following will take place: • Kitchen Staff will send Supply Delivery Checklist to the Units every Friday with supplies. Expiration Date of products will be indicated on the Checklist. See attached Checklist. • All open goods clearly labeled with a use by date. • Units will conduct a weekly spot check on refrigerated goods • A monthly check on rotation of dried goods in the unit pantries. • A monthly check and rotation on dried goods in the main kitchen. The YDC Staff will also be completing the Living Area/Daily Inspection Sheet twice daily. See attached copy of form. CAP Revisions: The Residential Training Specialist attended the food handling certification course on 11/11/24 and a certification of completion was awarded to the Residential Training Specialist on the same day (Attached please find the Food Handling Certification). The Residential Training Specialist will instruct the direct care staff who handle food in the content of the course attended. This training is being scheduled now. CAP Revisions 2: The Residential Training Specialist will train all staff that have access to the children's food in the food handling, food safety and food preparation training. This includes the kitchen director, kitchen staff, supervisors and as well as youth development counselors. In addition to monthly checks, the main kitchen orders fresh produce and it's delivered every 3 days to the units to avoid delivering spoiled produce.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Kitchen Staff will submit copy of completed checklists to the Director of Quality Management on a monthly basis to ensure compliance and for the Director of Quality Management to report information to the Health and Safety Committee.

## PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

65. Children report being provided with a sufficient supply of their own personal hygiene items that meet their needs [Master Contract, Exhibit A, SOW, Part C, §17.6.2; ILS, §§87072(c)(6)(B) & 87088(c)(3); Title 22, §§84072(d)(6)(B), 84088(c)(3)].

Facility

Site 1458

Site 1458

### 1. Explain the Cause.

The receipts did not clearly have a description of the products that were purchased for the youth needs.

### 2. Corrective Action Taken.

During Client admission, Admission Coordinator will ask Placement Worker if client has any special needs related to products (i.e. for hair or hygiene) (See attached form). The information will be obtained from worker and will be passed on to the treatment team. Unit Staff responsible for purchasing items will be completing the form called Hair and Hygiene Products Details (See attached form) and attaching receipts to this form. Supervisors will also review and approve this form prior to being submitted to the Quality Assurance Department. Please see attached training sign-in sheet. Please see attached admission form. CAP Revisions: Youth are consulted regarding their hygiene needs upon admission day by their primary direct care staff and then regularly thereafter. This topic is also part of the daily living group note and is reflected in the documentation (please see attached Daily Living Group Note). Youth to verbally request from their primary staff specific hygiene item needed. The hair and hygiene product form was created for the purpose of identifying specific products for hair and hygiene that our clients may need. The admission coordinator shall ask the client and worker upon admission, if any specific products are needed for hair/hygiene or skin. If any are needed, then the admissions coordinator will communicate this information to the unit supervisors via email. When a specific product is purchased for hair, hygiene or skin, this form shall be submitted by Youth Development Counselor Supervisor and forward along with the receipt to QA on a monthly basis. See attached Personal Hygiene Policy and Protocols. CAP Revisions 2: See attached revised Personal Hygiene Policy and Protocols dated 11/13/24.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Quality Assurance will collect the Hair and Hygiene Products Details form with receipts from the Units on a monthly basis to ensure compliance. Quality Assurance will scan documents to have ready for audits.

66. Children report being provided with enough food [Master Contract, Exhibit A, SOW, Part C, §15.3.10.8; ILS, §87072(c)(11); WIC, §16001.9(a)(3); Title 22, §§80076(a) & 84072(d)(11)].

Facility

Site 1458

Site 1458

### 1. Explain the Cause.

Old potatoes and expired food items were delivered to the unit from the main kitchen.

### 2. Corrective Action Taken.

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