



County of Los Angeles

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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August 12, 2025

To: Supervisor Kathryn Barger, Chair
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Supervisor Lyndsey P. Horvath
Supervisor Janice Hahn
Cynthia May Miller for
From: Brandon T. Nichols
Director

WEST COVINA FOSTER FAMILY AGENCY DBA SUNRISE HORIZON CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contract Compliance Division (CCD) conducted a virtual Contract Compliance Review of West Covina Foster Family Agency (FFA) dba Sunrise Horizon FFA (the Contractor) in April 2025. The Contractor has one office located in San Bernardino County. The office provides services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties and Non-Minor Dependents.

Key Outcomes

| |
|-----------------------------|
| NUMBER OF PRIORITY FINDINGS |
| PRIORITY 1 1 |
| PRIORITY 2 18 |
| PRIORITY 3 2 |

"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; Resource Family Home (RFH) Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans (NSPs); 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 6 of 11 applicable areas of CCD's Contract Compliance Review: RFH; Permanency and Transition Services; Education and Independent Living Plan Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; and Personnel Files.

For the purpose of this review, six DCFS placed children were selected for the sample. The CCD reviewed the files of the six selected children and virtually interviewed five children to assess the level of care and services they received; one child (4 years old) was too young to be interviewed and was virtually observed to be clean and well-groomed. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

The CCD reviewed four RFH files and three staff files for compliance with Title 22 Regulations and County contract requirements. The CCD also conducted telephonic interviews with staff and Resource Family Parents. To assess the quality of care and supervision provided to the placed children, the CCD also conducted virtual site visits at the Contractor's location and RFHs.

The CCD noted findings in the areas of:

Priority 1

- Facility and Environment (1 Finding)
 - One RFH did not have a functioning carbon monoxide detector installed in the sleeping area.

Priority 2

- General Contract Requirements (1 Finding)
 - One child's Special Incident Reports were not properly documented in their NSP.

- Facility and Environment (2 Findings)
 - One RFH did not ensure the yard and outdoor activity space were free from safety hazards.
 - One RFH did not ensure the common areas were in good repair.
- Engagement and Teamwork (6 Findings)
 - The FFA did not document efforts to collaborate and participate in the Child and Family Team (CFT) meetings or did not obtain copies of the CFT meeting notes for six children.
- NSPs (6 Findings)
 - NSPs for six children were not developed timely; were not comprehensive and accurate; did not include concurrent case plan goals; and were not signed on time by the children, when age or developmentally appropriate, the approved Resource Foster Parents, or the FFA staff.
- Personal Needs/Survival and Economic Well-being (3 Findings)
 - Three children reported not having life-books.

Priority 3

- General Contract Requirements (2)
 - The FFA did not have written declarations from two part-time social workers indicating their caseloads do not exceed 15 children.

On May 27, 2025, 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
DLF:ra

Attachments

c: Fesia Davenport, Chief Executive Officer
Oscar Valdez, Auditor-Controller
Guillermo Viera Rosa, Chief Probation Officer
Public Information Office
Audit Committee
Sukhwinder K. Singh, Chief Executive Officer, West Covina FFA dba Sunrise
Horizon
Bernice Karnsrithong, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division
Celeste M. Fitchett, MSW, Bureau Chief, Fiscal and Performance Audits, CDSS



LOS ANGELES COUNTY
SUNRISE HORIZON (FFA)



Corrective Action Plan

2025

GENERAL CONTRACT REQUIREMENTS

4. The FFA ensured part-time social workers have written declarations indicating their caseloads do not exceed fifteen (15) children. [SOW, Part B, Section 8.7]

Facility

Site 1679

Site 1681

1. Explain the Cause.

The FFA's policy for social worker caseloads was consistent with the ILS standards of not exceeding 18 children. However, per SOW, caseloads should not exceed 15 total children.

2. Corrective Action Taken.

Effective 6/26/25, the FFA has updated their caseload policy for agency social workers to be consistent with the requirements set forth in the DCFS FFA Contract.

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

FFA Quality Assurance will ensure that all current agency social workers have signed the updated caseload declaration(See attachment #1). Effective immediately all new agency social workers will sign the updated policy at the time of hire(see Attachment#1)

1. Special Incident Reports are properly documented.

1a. In the Needs and Services Plans (NSPs) [SOW, Part B, Section 10.4 and SOW Exhibit A-5, Special Incident Reporting Guide] SOW, Part B, Section 10.4 and SOW Exhibit A-5, Special Incident Reporting Guide

Facility

Site 1679

1. Explain the Cause.

The FFA failed to submit two SIRs in a timely manner due to a lack of training from the agency to the resource parents as well as the agency social worker.

2. Corrective Action Taken.

The FFA Administrator retrained resource parents and agency social workers on SIR reporting protocol as well as the importance of reporting all incidents in a timely manner. Resource parents were retrained on 6/9/25 and social workers on 6/11/25(See Attachment#2). Effective 6/26/25 all caregivers will immediately contact their assigned agency social worker to report any special incidents. The agency social workers will complete and save the SIR the same day the incident is reported to them. The assigned supervisor will review and submit the SIR within 24 hours of the time of the incident.

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

FFA Quality Assurance department will ensure compliance by reviewing all submitted SIRs to ensure that they have been submitted in a timely manner.

FACILITY AND ENVIRONMENT

14. Exterior and grounds of the RFH were safe and well maintained

14d. Yard and outdoor activity space are free from safety hazards ILS 88487.2 (a) (1); Title 22 89387 (h) ILS 88487.2 (a) (1); Title 22 89387 (h)

Facility

Site 1681

1. Explain the Cause.

The agency social worker and caregiver did not ensure that the yard was free of any potential hazards to the youth placed in the resource home due to a lack of training from the agency.

2. Corrective Action Taken.

The caregiver ensured that the dryer hose was properly connected to an exhaust vent and the hose was made inaccessible to the youth placed in the home. Agency social workers and caregivers were retrained by agency Administrator on the importance of ensuring that all potentially hazardous items are properly secured in the home and exterior. Resource parents were retrained on 6/9/25 and social workers on 6/11/25(See Attachment#2). Agency social workers will ensure that any potentially hazardous items are properly secured during quarterly home inspections and will document this on the home inspection's check off list(See Attachment#3).

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

FFA Quality Assurance department plan to maintain compliance includes the QA department monitoring that home inspections are conducted at least on a quarterly basis and are documented in the foster parent file. Home inspections will be tracked on a tracking log for caregiver files(Attachment#4).

15. Common areas were safe and well-maintained

15f. A functioning smoke detector & carbon monoxide detector is installed in the hallways of all sleeping areas or an indoor sprinkler system is used Title 22 80020; Title 19 754, Title 19, c. 5, Art. 4Title 22 80020; Title 19 754, Title 19, c. 5, Art. 4

Facility

Site 1681

15p. The common areas appear to be clean, safe, sanitary and in good repair

Facility

Site 1680

1. Explain the Cause.

The agency social worker and caregiver did not ensure that the stove in the home identified above was fully functioning due to a lack of training from the agency. The caregiver identified above did not have a smoke/carbon monoxide detector in the appropriate area due to a lack of training from the agency for the social worker and caregiver.

2. Corrective Action Taken.

A carbon/smoke detector was immediately installed in the hallway of the bedroom area in the home identified above. In addition, the burner on the stove that was not functioning in the home identified above was repaired. Caregivers and agency social workers were retrained by agency Administrator on the importance of keeping common areas safe and well maintained(See Attachment#2). Agency Social workers will ensure that all kitchen appliances are in working order and that all carbon/smoke detectors are properly installed and functioning during quarterly home inspections and will document this on the home inspections check off list(See Attachment#5).

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

FFA Quality Assurance department plan to maintain compliance includes the agency QA department monitoring that home inspections are conducted at least on a quarterly basis. Copies are maintained in the foster parent file. Home inspections will be tracked on a tracking log for caregiver files(Attachment#4).

ENGAGEMENT AND TEAMWORK

21. The FFA documented efforts to collaborate and participate in the child's CFT meetings OR the FFA obtained copies of the CFT meeting notes SOW, Part C, Sections 14.0

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

1. Explain the Cause.

The FFA did not document efforts to collaborate and participate in the child's CFT meetings and did not obtain copies of the CFT meeting notes. This was due to a lack of training by the agency on how to properly document CFT Meetings as well as how to properly request copies of the meeting notes.

2. Corrective Action Taken.

On 6/25/25, the agency assigned liaison with Out of Home Care, Quality Assurance Section, provided training to agency staff on Teaming, Engagement, and properly documenting CFT Meetings(See Attachment #6). The FFA will invite CSWs to participate in a CFT meeting within three weeks of placement and then prior to each updated NSP. If the CSW does not respond to the invitation after three attempts, the FFA will still hold the meeting and will document the meeting in the NSP as well as in the youth's case file. If the CFT meeting is not hosted by the FFA, immediately following the meeting, the FFA will request the CFT meeting notes from the meeting facilitator.

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

FFA Quality Assurance department plan to maintain compliance includes, the QA staff documenting on tracking logs that the FFA has documented inviting the CSW to participate in a CFT meeting prior to the development of all NSPs, and as needed to address case concerns. The FFA will ensure that CFT meeting notes for CFTs hosted by the agency will be properly maintained in the youth's case file. The QA department will also ensure that the FFA is also requesting all CFT meeting notes for any CFT meetings not hosted by the FFA immediately following the meeting. These items will be tracked on client tracking logs(Attachment #7).

NEEDS AND SERVICES PLANS

23. The NSPs were completed accurately and on time [ILS, §§88268.2(c) & 88278.1(a); Master Contract, Exhibit A, SOW, Part C, §§15.0 & 16.8.]

23a. Developed timely

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

23b. Are comprehensive and accurate

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

23c. Included Case Plans and Concurrent Case Plan

Facility

Site 1679

Site 1680

Site 1680

Site 1681

23d. Signed by children when age or developmentally appropriate

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

23e. Signed by RFPs (and parents if applicable)

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

23f. Signed by FFA staff

Facility

Site 1679

Site 1680

Site 1680

Site 1680

Site 1680

Site 1681

1. Explain the Cause.

The FFA did not ensure that the children's NSPs were submitted and signed in a timely manner by the child, caregiver, agency social worker and social worker supervisor. The FFA did not ensure that the NSPs were accurate and comprehensive and did not properly document the appropriate concurrent case plan goals. These issues were due to a lack of training from the agency to the agency social worker.

2. Corrective Action Taken.

On 6/25/25, the agency assigned liaison with Out of Home Care, Quality Assurance Section, provided training to agency staff on completing NSPs accurately, comprehensively, and in a timely manner(See Attachment #6). Effective 6/26/25 agency social workers will submit NSPs to their supervisor and then to the Quality Assurance Department for review two weeks prior to the due date so that the supervisor and Quality Assurance Department can review the reports to ensure that they will be accurate, comprehensive and submitted in a timely manner.

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

FFA Quality Assurance department will ensure that children's NSPs are submitted in a timely manner by tracking the due dates of all NSPs based on the due dates generated in the PMIS system for each report. The due date will be documented on a client tracking log(See Attachment#7).

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

63. The FFA ensures that children are encouraged and supported by the RFPs in keeping a life-book (SOW, Part C, Section 17.12) and [Master Contract, Exhibit A, SOW, Part C, §17.12]

Facility

Site 1680

Site 1680

Site 1680

1. Explain the Cause.

The agency social worker and caregiver in the identified homes above did not have Life Books that were being properly maintained at the time of the review. This was due to a lack of training from the agency on the importance of Life Books for our youth.

2. Corrective Action Taken.

The agency will ensure at the time of placement that all youth are provided with a Life Book as well as given instructions on what the Life Book is and its importance. This will be documented in the youth's file (See Attachment #8). The FFA Administrator provided training to all agency social workers and resource parents on the importance of Life Books as well as the role that they serve for our children. Resource parents were retrained on 6/9/25 and social workers on 6/11/25(See Attachment#2). Agency Social Workers will follow up with caregivers at the time of all quarterly home inspections to make sure that youth and caregivers are maintaining the Life Book (Attachment #9).

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

Quality Assurance department will assist with ensuring compliance by providing all children at the time of intake with a Life Book. Children and caregivers will sign a form acknowledging that they received a Life Book at the time of placement. This form will be kept in the youth's file(See Attachment#8).