



County of Los Angeles

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 19, 2025

To: Supervisor Kathryn Barger, Chair
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Supervisor Janice Hahn

From: Brandon T. Nichols
Director

DAISY'S HOUSE TRANSITIONAL HOUSING PLACEMENT PROGRAM FOR NON-MINOR DEPENDENTS 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 Daisy's House Transitional Housing Placement Program for Non-Minor Dependents (THPP-NMD) (the Contractor) in April 2025. The Contractor has one licensed site located in the Fifth Supervisorial District. The site provides services to the County of Los Angeles DCFS and Probation NMDs between the ages of 18-21 and their children.

Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 2
PRIORITY 2 5
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: Licensure and Certificate of Compliance; Personnel/Staffing/Training; Contractor/Agency Reports; Record Folder/Case File; Training; Education and Employment; Medical and Dental; and Program Exit/Aftercare Follow Up and Tracking.

The Contractor was in full compliance with 3 of 8 applicable areas of the CCD's Contract Compliance Review: Licensure and Certificate of Compliance; Personnel/Staffing/Training; and Education and Employment.

For the purpose of this review, five DCFS NMDs were selected for the sample. The CCD reviewed the records and files of the five selected NMDs to assess the level of care and services they received. An additional four discharged NMD files were reviewed to assess the Contractor's compliance with permanency efforts. The CCD reviewed three staff files for compliance with Title 22 Regulations and County contract requirements.

The CCD noted findings in the areas of:

Priority 1

- Record Folder/Case File (1 Finding)
 - All required daily/weekly/monthly visits were not completed for three NMDs. The Children's Social Worker's (CSW) approval was not obtained prior to reducing the number of required contact visits.
- THPP-NMD Participant Training File (1 Finding)
 - Contractor did not provide NMDs with the required Life Skills training.

Priority 2

- Contractor/Agency Reports (1 Finding)
 - Contractor did not submit reports timely.
- Record Folder/Case File (1 Finding)
 - Contractor did not have one NMD's Six-month Certification on file.
- Medical and Dental (2 Findings)
 - Contractor did not ensure one youth had a current medical exam on file. Contractor did not provide documentation that NMDs were encouraged to receive an annual medical exam.
 - Contractor did not ensure one youth had a current dental exam on file. Contractor did not provide documentation that NMDs were encouraged to receive an annual dental exam.
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- Program Exit/Aftercare Follow-Up and Tracking (1 Finding)
 - Contractor did not complete all 90-day follow-up services/attempts.

Priority 3

- Record Folder/Case File (2 Findings)
 - Contractor did not have the CSWs and Case Manager sign the NMDs' Needs and Service Plans.
 - Contractor did not ensure the 2-Way Authorization Form was signed prior to the youth being placed.

On May 21, 2025, the Children Services Administrator team from DCFS' CCD and the Supportive Housing Division held an exit conference with the Contractor's representative.

The Contractor's representative agreed with the review findings and recommendations, and was 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 deficiencies 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:JF:CMM
RW:DF:yw

Attachments

- c: Fesia Davenport, Chief Executive Officer
Oscar Valdez, Auditor-Controller
Guillermo Viera Rosa, Chief Probation Officer
Public Information Office
Audit Committee
David Egans, Chief Executive Officer, Daisy's House
Kellee Coleman, Assistant Program Administrator LA Region, CCLD
Bernice Karnsrithong, Regional Manager, CCLD
Monique Marshall-Turner, Regional Manager, CCLD
Celeste M. Fitchett, MSW, CDSS, Fiscal & Performance Audits



Daisy's House Transitional House Placement Program

Monday, June 23, 2025

[REDACTED]
Children Services Administrator I
Department of Children and Family Services
Contract Compliance Division
510 S. Vermont St
Los Angeles, CA 90020

Re: Daisy's House Corrective Action Plan

Daisy's House Transitional Housing Placement Program for Non-Minor Dependents is submitting the corrective action plan to address the deficiencies cited on the Daisy's House THPP-NMD Contract Compliance Review Exit Summary dated 5/21/25.

C) CONTRACTOR/AGENCY REPORTS

Finding

1. Contractor completed and maintained all reports in files as required.

- Explain the Cause: Insufficient compliance with timely report submission to DCFS is due to inconsistent use of scheduled email features and agency protocols.
- Corrective Action Taken: By July 22, 2025, Daisy's House Administrators will provide training at the monthly staff meeting. The Administrator will review the LA County SOW and agency expectations with staff.
- Explain what the Quality Assurance (QA) Plan is to maintain Compliance: Daisy's House will ensure quality control by adding greater oversight by the Co Administrator for submissions including being cc'd on email submissions to LA County DCFS and placing agencies.

D) THPP-NMD PARTICIPANT RECORD FOLDER/CASE FILE

Finding

1. All Plans/Assessments are completed and maintained in THPP-NMD Participants Folders/case files as required?

- Explain the Cause: Incomplete or missing documents from the NMD files are due to inconsistent communication with the placing agency representative for signatures and lack of ongoing file monitoring.

- **Corrective Action Taken:** By July 22, 2025, Daisy's House will add the 2 Way Authorization Form to intake documents for NMD signature prior to placement move in. The Social Work Supervisor will be responsible for emailing the form to the CSW for signature and placing it in the NMD digital file. On July 22, 2025, the Administrator will introduce the new protocol with the Social Work Supervisor for ongoing digital file monitoring; including quarterly, biannual, and ongoing files such as Needs and Services Plans and SOC 161's during our monthly staff meeting.
- **Explain what the Quality Assurance (QA) Plan is to maintain Compliance:** Daisy's House's Social Work Supervisor will include the 2 Way Authorization Form for signature of the placing agency when the SOC 152 form is requested as a protocol. Monthly review of NMD files for completeness and signatures by the Social Work Supervisor will be added to Daisy's House protocols. The Social Work Supervisor will provide monitoring and updates of any missing files to the Administrators as necessary, so files that are updated regularly, such as the Needs and Services Plans and SOC 161's can be requested or completed.

3. All required daily/weekly/monthly case management contacts/visits with the THPP-NMD Participants are documented in case files?

- **Explain the Cause:** Non compliance with weekly face to face contact meetings is due to the Agency's lack documentation of NMD cancellations and no shows.
- **Corrective Action Taken:** By July 22, 2025, Daisy's House Social Work Supervisor will provide review training to all Case Managers regarding documentation of daily, weekly, or monthly meetings, whether they are held or rescheduled.
- **Explain what the Quality Assurance (QA) Plan is to maintain Compliance:** Daisy's House Co Administrator will meet with the Social Work Supervisor monthly to discuss Case Manager compliance and execution of Daisy's House protocols as it relates to documentation.

E) THPP-NMD PARTICIPANT TRAINING

Finding

1. THPP-NMDs received 240 minutes of Life Skills training monthly?

- **Explain the Cause:** Non compliance with weekly Life Skills meetings is due to inconsistent NMD sign in during training. Case Managers are signing in, however NMDs need to sign in and out to verify that they have received the training.
- **Corrective Action Taken:** By July 22, 2025, Daisy's House Case Managers will be trained on NMD sign in process by the Social Work Supervisor. NMDs are to scan a QR code at the onset of the Life Skills meeting to sign in and should also scan the QR code to sign out once the meeting is complete to sign out. This process will document the amount of minutes being met.
- **Explain what the Quality Assurance (QA) Plan is to maintain Compliance:** The Social Work Supervisor will review weekly Life Skills logs and discuss completeness with Case Managers during their weekly check in meetings.

G) MEDICAL AND DENTAL

Finding

1. Annual *medical* exams are conducted on time or the Contractor encouraged THPP-NMD Participants to have annual medical exams?

- Explain the Cause: Lack of compliance for medical exams not being evident in the Life Skills training for NMDs are due to recent placements of NMDs in the program from the sample list. NMDs had not had the Life Skills training that discusses medical treatment needs on the Life Skills calendar.
- Corrective Action Taken: By July 22, 2025, Daisy's House will update the Life Skills calendar to include medical appointment training so that it is covered quarterly. Daisy's House will also include medical exam scheduling and expectations in the Orientation slides to review with NMDs before intake.
- Explain what the Quality Assurance (QA) Plan is to maintain Compliance: Daisy's House's Co Administrator will update the Orientation slide deck to include medical exams and expectations by July 22, 2025. Co Administrator will also provide training to the Social Work Supervisor on updates to the Life Skills calendar and Orientation slide deck.

2. Annual *dental* exams are conducted on time or the Contractor encouraged THPP-NMD Participants to have annual medical exams?

- Explain the Cause: Lack of compliance for dental exam training not being evident in the Life Skills training for NMDs are due to recent placements of NMDs in the program from the sample list. NMDs had not had the Life Skills training that discusses dental treatment needs on the Life Skills calendar.
- Corrective Action Taken: By July 22, 2025, Daisy's House will update the Life Skills calendar to include dental appointment training so that it is covered quarterly. Daisy's House will also include dental exam scheduling training and expectations in the Orientation slides to review with NMDs before intake.
- Explain what the Quality Assurance (QA) Plan is to maintain Compliance: Daisy's House's Co Administrator will update the Orientation slide deck to include dental exam training and expectations by July 22, 2025. Co Administrator will also provide training to the Social Work Supervisor on updates to the Life Skills calendar and Orientation slide deck.

H) PROGRAM EXIT/AFTERCARE FOLLOW-UP AND TRACKING

Finding

6. Contractor provided 90-day follow-up services/attempts timely?

- Explain the Cause: Inconsistent compliance for exit assessments and aftercare follow up is due to lack of oversight.
- Corrective Action Taken: By July 22, 2025, the Daisy's House Co Administrator will review with the Social Work Supervisor the different forms of communication appropriate for making contact with NMDs for aftercare services. The discussion will also include the amount of attempts and documentation of the attempts to share with Case Managers.
- Explain what the Quality Assurance (QA) Plan is to maintain Compliance: Daisy's House Co Administrator will review all aftercare forms prior to submission to LA County DCFS and the placing agency representative and will be cc'd on all emails with aftercare form attached.

I, [REDACTED], certify that all of the information above is complete and accurate. Please contact me at [REDACTED] with any questions that you may have.

[REDACTED]

[REDACTED]

[REDACTED]

Daisy's House Administrator