



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

510 S. Vermont Avenue, Los Angeles, California 90020
(213) 351-5602

BRANDON T. NICHOLS
Director

JENNIE FERIA
Chief Deputy Director

LISA E. MANDEL
Acting Chief Deputy Director

Board of Supervisors
HILDA L. SOLIS
First District
HOLLY J. MITCHELL
Second District
LINDSEY P. HORVATH
Third District
JANICE HAHN
Fourth District
KATHRYN BARGER
Fifth District

September 15, 2025

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

From:  for
Brandon T. Nichols
Director

NEW LIFE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contract Compliance Division (CCD) conducted a Contract Compliance Review of New Life, Foster Family Agency (the Contractor) in April 2025. The Contractor has one office located in the Fifth Supervisorial District. The office provides services to the County of Los Angeles DCFS placed children, youth and Non-Minor Dependents (NMDs), and children and NMDs placed by other counties.

Key Outcomes

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

"To Enrich Lives Through Effective and Caring Service"

The CCD conducted a virtual and in-person 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; 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 10 of 11 applicable areas of the CCD's Contract Compliance Review: RFH Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency and Transition 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.

For the purpose of this review, two DCFS placed children were selected for the sample. The CCD reviewed the files of the two selected children and interviewed one child to assess the level of care and services received; one child (age 2) was unable to be interviewed and was observed to be clean and well-groomed. An additional one discharged child file was also reviewed to assess the Contractor's compliance with permanency efforts.

The CCD reviewed two RFH files and three staff files for compliance with Title 22 Regulations and County contracting requirements. The CCD also conducted telephonic and in-person 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 of the Contractor's location and RFHs.

CCD noted findings in the areas of:

Priority 1

- General Contract Requirements (1 Finding)
 - The Special Incident Reports (SIRs) for one child were not properly cross-reported in the iTrack system.

On April 29, 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.

Each Supervisor
September 15, 2025
Page 3

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:LM:RT
AJ:DF:lb

Attachments

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



LOS ANGELES COUNTY
NEW LIFE FOSTER FAMILY AGENCY (FFA)



Corrective Action Plan

2025

GENERAL CONTRACT REQUIREMENTS

1. Special Incident Reports are properly documented.

1b. Properly cross-reported in the I-Track system [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 1674

1. Explain the Cause.

The SIR was not cross reported to OHCMD. The cross reporting to OHCMD was missed due to an error from ASW and Administrator oversight.

2. Corrective Action Taken.

1. Immediate Corrective Actions Taken: • The Administrator conducted a mandatory training session with all social workers on May 12, 2025 regarding proper procedures for submitting and cross-reporting SIRs, including: o Identifying and selecting the correct CSW in iTrack. o Verifying that all appropriate parties (e.g., CSW, OHCMD, and others as applicable) are listed before finalizing the SIR. o Reviewing examples of common errors and how to avoid them. • The Administrator reviewed and corrected all SIRs submitted in the past 30 days to ensure cross-reporting was accurately completed.

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

2. System and Workflow Improvements: • iTrack Verification Procedure Implemented: o Social workers are now required to save and review each SIR before submission to confirm that cross-reporting to the CSW and OHCMD is accurately documented. o A step-by-step guide has been issued to all staff on how to identify the correct DCFS CSW from the system's dropdown menu to prevent errors related to the duplicate listing. • Double-Check Protocol: o Administrator or second-level reviewer (e.g., the supervising social worker) will review each SIR for accuracy and completeness before final submission to ensure all necessary parties are included in the cross-report. o A checklist will be reviewed every time before the SIR is submitted.