County of Los Angeles



DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 30, 2025

To: Supervisor Kathryn Barger, Chair

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From: Brandon T. Nichols

Director

FIRST PLACE FOR YOUTH
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 First Place for Youth Transitional Housing Placement Program for Non-Minor Dependents (THPP-NMD) (the Contractor) in October 2024. The Contractor has one licensed site located in the Second 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



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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 4 of 8 applicable areas of the CCD's Contract Compliance Review: Folder/Case File; Education and Employment; Medical and Dental; and Program Exit/Aftercare Follow Up and Tracking.

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 five discharged NMD files were reviewed to assess the Contractor's compliance with permanency efforts. The CCD reviewed five staff files for compliance with Title 22 Regulations and County contract requirements.

The CCD noted findings in the areas of:

Priority 1

- Licensure and Certificate of Compliance (2 Findings)
 - Special Incident Reports were not completed timely and were not cross-reported to the appropriate parties in the i-Track System.

Priority 2

- Personnel/Staffing/Training (2 Findings)
 - Personnel did not receive all required one-hour training.
 - Personnel did not receive the required 20 hours annual training.
- Contractor/Agency Reports (5 Findings)
 - Contractor did not complete and maintain all reports in files as required for five NMDs.
- Training (2 Findings)
 - Two NMDs did not receive the required 240 minutes Life Skills training monthly.

On December 18, 2024, DCFS' CCD Children Services Administrator team and Supportive Housing Division THPP-NMD County Program Manager 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.

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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:cm

Attachments

Fesia Davenport, Chief Executive Officer
 Oscar Valdez, Auditor-Controller
 Guillermo Viera Rosa, Chief Probation Officer
 Public Information Office
 Audit Committee
 Thomas Lee, Chief Executive Officer, First Place for Youth THPP-NMD
 Kellee Coleman, Assistant Program Administrator Southern Region (LA)
 Bernice Karnsrithong, Regional Manager, CCLD
 Monique Marshall-Turner, Regional Manager, CCLD
 Celeste M. Fitchett, MSW, Bureau Chief, Fiscal & Performance Audits CDSS



FIRSTPLACEFORYOUTH.ORG

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Corrective Action Plan

Chinelo Maduike
Children's Services Administrator I
Department of Children and Family Services
Contract Compliance Division
510 South Vermont Avenue, 14th flr.
Los Angeles, CA 90020

January 16, 2025

First Place for Youth is submitting this corrective action plan to address the findings cited in the THPP-NMD Contract Compliance Review Exit Summary dated December 18, 2024.

Finding

Section A:

Youth #2's 3 out of 6 SIRs were submitted late; Youth #4's SIR was also submitted late.

Root Cause:

The delays in submitting SIRs were due to insufficient tracking and follow-up mechanisms by First Place for Youth.

Corrective Action:

By 2/16/2025, The Regional Director at First Place for Youth will be responsible for enhancing the systems utilized to track and monitor SIR reports. This includes improving the digital tracking system to ensure the accuracy of SIR submissions and adherence to deadlines. The Clinical Program Managers will oversee the timely submission of SIRs and conduct training sessions for staff on timely SIR submissions by 02/16/25.

QA Plan:

- Regional Director and Clinical/County Program Managers will conduct monthly audits of SIR submissions to ensure compliance.
- The Regional Director and Clinical/County Program Managers will review the tracking system's effectiveness quarterly.
- The Regional Director and Clinical/County Program Managers will conduct Regular feedback sessions with staff to address any challenges in SIR submissions.

Finding

Section B:

All 5 sampled staff are missing mandatory minimum of 1-hour trainings.

Root Cause:

First Place did not adequately ensure that training sessions were properly documented and completed. Additionally, the number of hours staff spent on in-service trainings was not accurately recorded.

Corrective Action:

The Regional Director and Clinical/County Program Managers will develop a comprehensive training calendar for mandatory trainings, ensure all staff are enrolled in required trainings, and track their progress. Additionally, by 02/16/25, The Regional Director and Clinical/County Program Managers will provide reminders and follow-ups for upcoming training sessions.

QA Plan:

- The Regional Director and Clinical/County Program Managers will collaborate with the Human Resources and Practice Development Departments to conduct bi-monthly reviews of training completion.
- Additionally, the Regional Director and the Practice Development Director will review the training schedules and content annually.
- Clinical and County Program Managers will gather feedback from staff regarding the effectiveness of the training.
- Clinical Program Managers will communicate this new procedure to their staff, outlining the necessary documentation to address this finding.
- The Regional Director will work with the First Place for Youth Practice and Development
 Department to ensure that staff receive certificates, training materials, and documentation of
 the hours completed. This will help ensure staff properly document their 20-hour and 1-hour
 mandatory training and certifications.

Finding

Section C:

Youth #1, #2, #3, #4, and #5 had various issues with NSP reports, including missing signatures and late submissions.

Root Cause:

First Place for Youth exhibited inconsistent documentation practices and lacked standardized reporting templates.

Corrective Action:

The Regional Director and Clinical/County Program Managers will use the standardized NSP report templates provided by the state LIC625 Appraisal form, including all required fields and signatures. They will also train staff on proper documentation and timely submissions and implement a review process to ensure all reports are complete before submission by 02/16/25.

QA Plan:

- Monthly Audits: The Regional Director and the Clinical/County Program Managers will conduct
 monthly audits of NSP reports to ensure they are complete and accurate, verify that all required
 signatures are present, and ensure that reports are submitted on time.
- Quarterly Training Refreshers: The Clinical/County Program Managers and Intake Department
 will provide quarterly training refreshers on documentation standards and best practices to
 ensure staff are aware of any changes or updates to reporting requirements.
- Regular Meetings: The Regional Director, Clinical/County Program Managers, and Intake
 Department will hold regular meetings to discuss and resolve any documentation issues and
 provide support and guidance to staff as needed.

Finding

Section E:

Youth did not consistently receive 240 minutes of Life Skills training monthly.

Root Cause:

First Place for Youth failed to adequately schedule and track Life Skills training sessions, resulting in NMDs not receiving all required monthly training minutes.

Corrective Action:

On 1/7/ 2025, First Place for Youth Clinical/County Program Managers developed a system that closely monitors and tracks each youth's monthly training receipt of 240 minutes, as outlined in the Statement

of Work. Additionally, Youth Advocates will ensure that proper authorized documentation from CSW/DPO is secured if an NMD qualifies for reduced training minutes, ensuring they receive at least 120 minutes each month.

QA Plan:

- Monthly Monitoring: The Clinical/County Program Managers will review training logs monthly to verify that each youth has received the required 240 minutes of training. Youth Advocates will submit monthly reports detailing the training minutes completed by each youth.
- Documentation Verification: The Clinical/County Program Managers will ensure that all training sessions are documented with the training's date, duration, and content. Additionally, they will verify that authorized documentation from CSW/DPO is secured for any NMDs qualifying for reduced training minutes.
- Quarterly Audits: The Clinical/County Program Managers will conduct quarterly audits of training records to ensure compliance with the 240-minute requirement. Additionally, they will review the documentation for any NMDs with reduced training minutes to ensure they meet the required standards.

Respectfully, DocuSigned by:

Lawfont Walker, MPA; MA

Regional Director of Programs, SoCal