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September 30, 2025

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
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Supervisor Janice Hahn
Cynthia McCall for
From: Brandon T. Nichols
Director

HUMAN EDVANCEMENT 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 Human Edvancement Transitional Housing Placement Program for Non-Minor Dependents (THPP-NMD) (the Contractor) in December 2024. 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 2
PRIORITY 3 1

"To Enrich Lives Through Effective and Caring Service"

The CCD conducted an in-person and 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 6 of 8 applicable areas of the CCD's Contract Compliance Review: Licensure and Certificate of Compliance; Personnel/Staffing/Training; Contractor Agency Reports; Training; Education and Employment; and Medical and Dental.

For the purpose of this review, four DCFS NMDs were selected for the sample. The CCD reviewed the records and files of the four selected NMDs to assess the level of care and services they received. An additional two discharged NMD files were reviewed to assess the Contractor's compliance with permanency efforts. The CCD reviewed four 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)
 - One NMD's required weekly visits were not completed and documented in the case file.
- Record Folder/Case File (1 Finding)
 - Casey Life Skills Assessments forms were not maintained in the case files for four NMDs.

Priority 2

- Program Exit/Aftercare Follow Up and Tracking (2 Findings)
 - Contractor did not provide 90-day follow-up services timely for two NMDs.
 - Contractor did not provide 6-month follow-up services timely for one NMD.

Priority 3

- Record Folder/Case File (1 Finding)
 - Needs and Services Plans were not signed by the Children's Social Worker/Deputy Probation Officer for four NMDs and the Contractor did not have evidence of written attempts to obtain approval signature for the NMDs.

On May 15, 2025, DCFS' CCD Children Services Administrator team and Supportive Housing Division THPP-NMD County Program Manager 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:CMM
RW:DF:cs

Attachments

c: Fesia Davenport, Chief Executive Officer
Oscar Valdez, Auditor-Controller
Guillermo Viera Rosa, Chief Probation Officer
Public Information Office
Audit Committee
Chanel Coopwood, Executive Director, Human Edvancement
Bernice Karnsrithong, Regional Manager, CCLD
Kellee Coleman, Assistant Program Administrator LA Region, CCLD
Monique Marshall-Turner, Regional Manager, CCLD
Celeste M. Fitchett, MSW, CDSS Bureau Chief Fiscal & Performance Audits



Human Edvancement Transitional House Placement Program

June 18, 2025

Department of Children and Family Services
Contract Compliance Division
510 S. Vermont St
Los Angeles, CA 90020

Re: Human Edvancement Corrective Action Plan

Human Edvancement Transitional Housing Placement Program for Non-Minor Dependents is submitting the corrective action plan to address the deficiencies cited during the Contract Compliance Review Exit Summary dated May 15, 2025

D) THPP-NMD Participant Record Folder/Case File

Finding

D-1

1. NMD #1 – Admitted on 4/19/2024; the initial NSP dated 5/18/2024, was missing the CSW/DPO signature. Additionally, the NSP update dated 10/18/2024, was missing the CSW/DPO signature.
2. The Casey Life Skills Assessment was not in NMD #1's case file.

Explain the Cause:

- The Case Manager failed to obtain signatures from CSW's after completion of the Needs and Services Plan due to not having an effective protocol in place.
- The CLSA not found in the youth's case file was a human error. The Program Administrator pulled the CSLA out to review and forgot to file it back in the youth's case file.

Corrective Action Taken:

- The Program Administrator will conduct one (1)-30 minute training July 16th, 2025 for all Case Managers to introduce a new protocol regarding NSP completion procedures. The training will include timelines and the process for collecting signatures. Case Managers will have access to the shared Google Calendar that has NSP due

dates for all youth. The new protocol will require Case Managers to securely upload the NSP's and email CSW's for signature within 24 hours of completion. Once signed and received, the NSP will be printed and filed into the youth's case file by the Administrative Assistant within 24 hours of receiving the signed NSP. The new protocol will take effect immediately after the training.

- The Program Administrator will file the CSLA's immediately after completing the task it's associated with.

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

- To ensure Case Managers are following the new protocol, the Program Administrator will monitor the Google Calendar and follow up with Case Managers regarding NSPs to ensure they will be completed on time. Additionally, the Program Administrator will be included on all emails sent to CSW's when requesting signatures. If no response from the CSW is given within 48 hours, the Program Administrator will contact the respective CSW to follow-up. If Case Managers fail to follow protocol, disciplinary measures will be enforced.
- The Administrative Assistant will perform weekly audits of all youth case files to ensure CSLA's are secured in the youth case files.

D-2

NMD #2 was admitted on 10/19/24. However, the case file does not document all required weekly contacts and visits with NMD #2.

- Week of 11/10/24: No documented contact
- Week of 11/24/24: One contact on 11/26/24
- Week of 12/1/24: One contact on 12/3/24
- Week of 12/8/24: One contact on 12/9/24
- Week of 12/22/24: One contact on 12/25/24
- Week of 1/19/25: One contact on 1/10/25
- Week of 2/2/25: One contact on 2/3/25
- Week of 2/16/25: One contact on 2/17/25
- Week of 2/23/25: One contact on 2/28/25

Explain the Cause:

- The Program Administrator failed to include all dates of contact from staff into one spreadsheet.

Corrective Action Taken:

- To ensure all contact with youth can be found in one document. The Program Administrator will provide one (1)-30 minute training July 16, 2025 to demonstrate how to include youth contact and content information into the shared Google Spreadsheet. The Program Administrator, the Social Worker Supervisor, Case Managers and Life Skill Coaches will all have access and be required to complete the shared Google Spreadsheet at the end of each week after contact is made with the youth.

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

- To ensure youth are being contacted, the Program Administrator will audit the Google Spreadsheet weekly to ensure it is being completed. If no entries are made, the Program Administrator will follow up with Case Managers, Life Skills Coaches and the Social Worker Supervisor to remind them to complete the Google Spreadsheet.

H) Program Exit/Aftercare Follow Up and Tracking

Finding

1. NMD #1 – was discharged on 9/21/24: The 90-day follow up, due by 12/21/24, was not documented in the case file. The 6-month follow-up, due by 3/21/25, was not documented in the case file.

NMD #2 – was discharged on 10/20/24: The 90-day follow-up, due by 1/20/25, was not documented in the case file.

Explain the Cause:

- At the time of the Contract Compliance review, the Program Administrator had failed to implement an official protocol for documenting follow up care and was not aware of the DCFS After Care form.

Corrective Action Taken:

- The Program Administrator will assign the Social Worker Supervisor the task of developing a process for after care follow-up for Case Managers. The Social Worker Supervisor will train all Case Managers on August 12, 2025 on how to make reasonable attempts via cell phone, text message, and/or email to follow up with terminated youth during the required timelines using the DCFS After Care form. Additionally, the Program Administrator will have the Administrative Assistant update the shared Google Calendar and set reminders for 30, 60, 90, 120 day follow-ups for all terminated youth.

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

- To maintain compliance, the Program Administrator will perform audits based on the calendar reminders to ensure follow-up is being documented and made within the appropriate timeframe.

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.

Respectfully,

[REDACTED]
[REDACTED]
[REDACTED]

Program Administrator