



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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May 22, 2026

To: Supervisor Hilda L. Solis, Chair
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 for
From: Brandon T. Nichols
Director

INNER CIRCLE FOSTER FAMILY AGENCY 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 the Inner Circle Foster Family Agency (FFA) in February 2026. This Contractor has one site located in the First Supervisorial District. The site provides services to the County of Los Angeles DCFS placed children, Probation foster youth, and Non-Minor Dependents and children paced by other counties.

Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 1
PRIORITY 2 4
PRIORITY 3 0

"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; 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 CCD's Contract Compliance Review: General Contract Requirements; RFH Requirements; 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.

For the purpose of this review, six DCFS placed children were selected for the sample. The CCD reviewed the files of the six children and interviewed five children to assess the level of care and services they received. One child declined the interview but was observed to be clean and well groomed. An additional five discharged children files were reviewed to assess the Contractor's compliance with permanency efforts.

The CCD reviewed one staff file for compliance with Title 22 Regulations and County contracting requirements. CCD also conducted interviews with staff to assess the quality of care and supervision provided to the placed children and foster youth. DCFS also conducted virtual site visits of the RFHs.

The CCD noted findings in the following areas:

Priority 1

- Facility and Environment (1 Finding)
 - The carbon monoxide detector was inoperable in one RFH.

Priority 2

- Facility and Environment (4 Findings)
 - Maintenance Logs or proof of regular/annual service and maintenance for vehicles used to transport children were missing for three RFHs.
 - Sexual Health and Reproductive Rights, Legal Rights of Teens in Out-of-Home Care, and Foster Care Ombudsman Information notices were missing in one RFH.

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On March 19, 2026, the DCFS' CCD Children Services Administrator teams 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:LM:RT
KR:DF:ar

Attachments

c: Joseph M. Nicchitta, Acting Chief Executive Officer
Oscar Valdez, Auditor-Controller
Guillermo Viera Rosa, Chief Probation Officer
Public Information Office
Audit Committee
Sandro Villa, Chief Executive Officer, Inner Circle Foster Family Agency
Kellee Coleman, Assist Program Administrator, LA Region CCLD
Bernice Karnsrithong, Regional Manager, Community Care Licensing Division
Jacqueline Juarez, Acting CDSS Bureau Chief Fiscal and Performance Audits



LOS ANGELES COUNTY
INNER CIRCLE FOSTER FAMILY AGENCY, INC. (FFA)

Corrective Action Plan

2026

FACILITY AND ENVIRONMENT

13. Vehicles used to transport children were well maintained and in good repair

13c. Maintenance Log or Proof of regular/annual service and maintenance (Title 22 80074(c) & 87074(d))(Title 22 80074(c) & 87074(d))

Facility

Site 1846

Site 1846

Site 1846

Site 1845

Site 1844

Site 1845

13n. Tire Tread(Title 22 80074(c) & 87074(d))

Facility

Site 1845

1. Explain the Cause.

In reference to Item #13, Title 22 80074(c) states, "Motor vehicles used to transport clients shall be maintained in a safe operating condition." Title 22 87074(d) does not specifically require maintaining records of annual vehicle service. Inner Circle has utilized a document titled "Vehicle Inspection" to verify that critical safety items such as windshields, headlights, tires, and other required components were used to fulfill this requirement, which is why no receipts were requested from RPs.

2. Corrective Action Taken.

The vehicle inspection form has been revised (Attachment A). Additionally, Inner Circle will request, on an annual basis, any copies of receipts or documents showing that the vehicle has been serviced and/or parts were purchased for the vehicle. RPs reserve the right to perform repairs themselves and not use a licensed or specific vendor. Acceptable documentation may include, but is not limited to, receipts, records of services such as tire replacements or alignments, oil changes, brake repairs, light bulb replacements, or other vehicle maintenance.

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

Quality Assurance will ensure that all vehicle service documents and/or receipts for vehicles used to transport children are attached to the Inner Circle vehicle inspection form and filed in the RP file.

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. 4 Title 22 80020; Title 19 754, Title 19, c. 5, Art. 4

Facility

Site 1845

1. Explain the Cause.

Regarding Item #15, the RP and SFCSW indicated that the carbon monoxide detector was functioning prior to the review. The RP also provided a video demonstrating that the carbon monoxide detector was operational. It is unclear whether the RP held the test button long enough to properly test the alarm, which may have explained why the detector appeared to not be functioning at the time of the review.

2. Corrective Action Taken.

The FCSW will test the carbon monoxide detector in the Resource Home on a monthly basis and document results on the home inspection form.

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

The completed home inspection form will be submitted to the assigned supervising social worker, who will review it to ensure that the carbon monoxide detector check was performed and documented.

16. RFH's made available in the home all required notices

16c. Sexual Health and Reproductive Rights (SB89 and Title 22 80088 c; Title 22 89387 (L); LS 88487 (a) (5) SB89 and Title 22 80088 c; Title 22 89387 (L); LS 88487 (a) (5)

Facility

Site 1845

16f. Legal Rights of Teens in Out-of-Home Care (11+ years) Title 22 84087 (d); Title 2289387 (p) (s); HS 13762 (a); ILS 88233 (6) (b); ILS 88487.1 (a) Title 22 84087 (d); Title 2289387 (p) (s); HS 13762 (a); ILS 88233 (6) (b); ILS 88487.1 (a)

Facility

Site 1845

16g. Foster Care Ombudsman PUB 379; Title 22 80075 (g); Title 22 89475 (b); ILS 88487.1 (h) PUB 379; Title 22 80075 (g); Title 22 89475 (b); ILS 88487.1 (h)

Facility

Site 1845

1. Explain the Cause.

Regarding Item #16, Inner Circle had previously provided Resource Homes with updated posters containing Sexual Health and Reproductive Rights/Legal Rights of Teens/Ombudsman information. As a result, older regular printouts were removed. It is unclear why the updated poster was not posted in the home at the time of the review.

2. Corrective Action Taken.

Inner Circle provided the required Sexual Health and Reproductive Rights/Legal Rights of Teens/ Ombudsman information poster to the Resource Family. The SFCSW verified that the poster was posted in the home.

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

The assigned FCSWs will verify on a monthly basis that the Sexual Health and Reproductive Rights/Legal Rights of Teens/ Ombudsman information is posted in the Resource Home. This will be documented on the home inspection form and submitted to the assigned supervising social worker for review.