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Acting Director

**County of Los Angeles  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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July 31, 2017

To: Supervisor Mark Ridley-Thomas, Chairman  
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Supervisor Kathryn Barger

From: *for Cynthia McCoy Miller*  
Brandon T. Nichols  
Acting Director

**VISTA DEL MAR CHILD AND FAMILY SERVICES COMMUNITY TREATMENT FACILITY CONTRACT COMPLIANCE REVIEW**

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Vista del Mar Child and Family Services Community Treatment Facility (the CTF) in November 2016. The CTF has one licensed site located in the Second Supervisorial District. The site provides services to the County of Los Angeles DCFS placed children, Probation foster youth, and Non-Minor Dependents (NMDs). According to the CTF's Program Statement, its stated purpose is "to provide comprehensive, family-centered social, educational, and behavioral health services which encourage children, adolescents and their families to lead self-reliant, stable, and productive lives."

At the time of the review, the CTF served 17 DCFS placed children and four Probation foster youth. The CTF is licensed to serve a total capacity of 24 male and female youth, ages 12 through 17 and NMDs. The placed children's average length of placement was six months and their average age was 15.

**SUMMARY**

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the CTF; having been provided with good care and appropriate services; being comfortable in their placement environment; and being treated with respect.

The CTF was in full compliance with 7 of 10 applicable areas of CAD's Contract Compliance Review: Facility and Environment; Maintenance of Required Documentation and Service Delivery; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Records.

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CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to Community Care Licensing Division (CCLD) citations; Education and Workforce Readiness, related to a child not attending school as required; and Discharged Children, related to children not being discharged in accordance with the Needs and Services Plan (NSP) permanency plan.

### **REVIEW OF REPORT**

On December 20, 2016, Tony Curry, DCFS CAD, and Mani Adenow, DCFS Out-of-Home Care Management Division (OHCMD), held an exit conference with the CTF representatives: Amy Jaffe, Senior Vice President of Operations; Renee Capeloto, Unit Director; Ana Solares, Residential Admissions and Clinical Case Coordinator; Maricela Morales, Quality Assurance Manager; Michael Nakaji, Supervisor; and Lisa Cumming, Supervisor. The CTF representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the CTF's compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

The CTF provided the attached approved CAP addressing the recommendations noted in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager at (213) 351-5530.

BTN:KR  
LTI:tc

#### **Attachments**

c: Sachi A. Hamai, Chief Executive Officer  
John Naimo, Auditor-Controller  
Terri L. McDonald, Chief Probation Officer  
Sheila Mitchell, Assistant Chief Deputy Probation Officer, Juvenile Services  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Nancy Tallerino, Chief Executive Officer, Vista Del Mar Child and Family Services  
Lenora Scott, Regional Manager, Community Care Licensing Division

**VISTA DEL MAR CHILD AND FAMILY SERVICES COMMUNITY TREATMENT  
FACILITY CONTRACT COMPLIANCE REVIEW SUMMARY**

**License Number: 197803679**

	<b>Contract Compliance Review</b>	<b>Findings: November 2016</b>
<b>I</b>	<p><b><u>Licensure/Contract Requirements</u></b> (8 Elements)</p> <ol style="list-style-type: none"> <li>1. The CTF was free of any substantiated Community Care Licensing Division (CCLD) citations on child abuse/safety and/or physical deficiencies since the last review.</li> <li>2. Vehicles used to transport children are maintained in good repair.</li> <li>3. Disaster drills are conducted at least every six months and documented.</li> <li>4. The runaway policy is documented and properly maintained.</li> <li>5. Detailed sign-in/out logs are maintained.</li> <li>6. Weekly allowance logs are accurately maintained.</li> <li>7. Monthly clothing allowance logs are accurately maintained.</li> <li>8. Special Incident Reports (SIRs) documented in the Needs and Services Plans (NSPs) and case files and are properly reported via the ITrack system.</li> </ol>	<ol style="list-style-type: none"> <li>1. Improvement Needed</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Full Compliance</li> </ol>
<b>II</b>	<p><b><u>Facility and Environment</u></b> (5 Elements)</p> <ol style="list-style-type: none"> <li>1. The exterior and the grounds of the CTF are well maintained.</li> <li>2. Common quarters are well maintained.</li> <li>3. Children's bedrooms are well maintained.</li> <li>4. The CTF maintains appropriate recreational equipment and educational resources (e.g. computer) in good repair and makes them readily available to children.</li> <li>5. The CTF maintains adequate nutritious perishable and non-perishable food.</li> </ol>	<p align="center"><b>Full Compliance (All)</b></p>

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<p><b>III</b></p>	<p><b><u>Maintenance of Required Documentation and Service Delivery</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. The Initial NSP was completed accurately and on time.</li> <li>2. The Updated NSPs were completed accurately and on time.</li> <li>3. The CTF provided children with counseling and other services (based on current NSPs).</li> </ol>	<p>Full Compliance (All)</p>
<p><b>IV</b></p>	<p><b><u>Education and Workforce Readiness</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are enrolled in school within three school days.</li> <li>2. The CTF ensured the children attend school as required.</li> <li>3. The CTF ensures the children's report cards or progress reports, and if applicable, current copies of Individualized Education Programs (IEPs) are maintained in their files.</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Full Compliance</li> </ol>
<p><b>V</b></p>	<p><b><u>Health and Medical Needs</u></b> (4 Elements)</p> <ol style="list-style-type: none"> <li>1. Initial medical exams are conducted timely.</li> <li>2. Initial dental exams are conducted timely.</li> <li>3. Required follow-up medical examinations are conducted timely.</li> <li>4. Required follow-up dental examinations are conducted timely.</li> </ol>	<p>Full Compliance (All)</p>
<p><b>VI</b></p>	<p><b><u>Psychotropic Medication</u></b> (2 Elements)</p> <ol style="list-style-type: none"> <li>1. Current Court-Approved Authorizations are on file. (Including accurate dosage)</li> <li>2. Psychiatric Evaluation/Review (561c) is current.</li> </ol>	<p>Full Compliance (All)</p>
<p><b>VII</b></p>	<p><b><u>Personal Rights and Social/Emotional Well-Being</u></b> (18 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are informed of the CTF's rules and consequences.</li> <li>2. Children report the consequences for not following the rules are fair.</li> <li>3. Children are informed of the Foster Youth Bill of Rights.</li> <li>4. Children participate in the development of their NSPs.</li> </ol>	<p>Full Compliance (All)</p>

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	<ol style="list-style-type: none"> <li>5. Children are supervised by staff.</li> <li>6. Children are treated with respect.</li> <li>7. Children feel safe in the CTF.</li> <li>8. Children have an adult they can talk with privately.</li> <li>9. Children are allowed to have private telephone calls and to send and receive unopened mail.</li> <li>10. Children have privacy during the visits with family or close friends.</li> <li>11. Children are offered the opportunity to participate in a mentorship program.</li> <li>12. Children are allowed to attend or not attend religious services of their choice.</li> <li>13. Children are given the opportunity to participate in planning recreational activities with the staff.</li> <li>14. Children are given the opportunity to participate in recreational activities at the CTF.</li> <li>15. Children are given the opportunity to participate in extracurricular or community activities.</li> <li>16. Children's chores are reasonable.</li> <li>17. Children are informed about their rights to medical and dental treatment (right to refuse).</li> <li>18. Children are informed about their right to refuse psychotropic medication.</li> </ol>	
<p><b>VIII</b></p>	<p><b><u>Personal Needs/Survival and Economic Well-Being</u></b>          (16 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are provided with medical care when needed.</li> <li>2. Children are provided with dental care when needed.</li> <li>3. Children are provided with transportation.</li> <li>4. Children are encouraged and supported by staff in keeping a Life Book.</li> <li>5. Children are assisted by adults in completing schoolwork when help is needed.</li> <li>6. Children are provided with youth development or daily living skills services.</li> <li>7. Children are provided with their own personal hygiene items.</li> <li>8. Children get enough food to eat.</li> <li>9. Children with special diet needs are provided with accommodations by the staff.</li> <li>10. Children receive at least the basic weekly allowance.</li> <li>11. Children are free to spend their allowance, as long as they are appropriate purchases.</li> </ol>	<p>Full Compliance (All)</p>

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	<ol style="list-style-type: none"> <li>12. Children receive at least the basic clothing allowance.</li> <li>13. Children are able to choose the clothes they buy, as long as they are appropriate.</li> <li>14. Children have enough clothes to wear.</li> <li>15. Children are supervised while in the pool area.</li> <li>16. Children report the home is free of unsecured dangerous items.</li> </ol>	
IX	<p><b><u>Discharged Children</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. The CTF placed the child in accordance with their Program Statement and population criteria.</li> <li>2. The CTF discharged the child in accordance with the NSP permanency plan, or to a lower level of care.</li> <li>3. The CTF attempted to stabilize the child's placement prior to requesting a removal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Full Compliance</li> </ol>
X	<p><b><u>Personnel Records</u></b> (14 Elements)</p> <ol style="list-style-type: none"> <li>1. Staff signed a criminal record statement (LIC 508) prior to or on hire date.</li> <li>2. Staff received criminal clearance from CCLD prior to hire date.</li> <li>3. Staff received medical clearance within one year prior to hire date or within seven days after hire date.</li> <li>4. Staff received tuberculosis (TB) clearance within one year prior to hire date or within seven days after hire date.</li> <li>5. Staff met educational and/or experience requirements in accordance with the agency's Program Statement and Title 22 Regulations.</li> <li>6. Staff signed the agency's policies, including confidentiality agreement and mandated reporter acknowledgment.</li> <li>7. Staff had current California Driver's License (CDL) on file.</li> <li>8. Staff had current Cardiopulmonary Resuscitation (CPR) certification on file.</li> <li>9. Staff had current First Aid certification on file.</li> <li>10. Staff received initial emergency intervention training [e.g. Professional Assault Crisis Training (Pro-ACT)].</li> </ol>	<p>Full Compliance (All)</p>

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	<ul style="list-style-type: none"><li>11. Staff received initial 24-hours of training (eight hours prior to supervision of children and 16 hours within 90 days of hire).</li><li>12. Staff has current emergency intervention training on file (e.g. Pro-ACT).</li><li>13. Staff received 20 hours of on-going training.</li><li>14. If site has a pool or other body of water, there is at least one staff with current water safety certification on file.</li></ul>	
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**VISTA DEL MAR CHILD AND FAMILY SERVICES COMMUNITY TREATMENT  
FACILITY  
CONTRACT COMPLIANCE REVIEW  
FISCAL YEAR 2016-2017**

**SCOPE OF REVIEW**

The following report is based on a “point in time” review. This compliance report addresses findings noted during the November 2016 review. The purpose of this review was to assess the CTF’s compliance with its County contract. The review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, five DCFS placed children and two Probation foster youth were selected for the sample. CAD interviewed each child and reviewed their files to assess the level of care and services they received. During the site visits, the children were observed to be comfortable and well cared for in the CTF and the staff were observed to be responsive to the children’s needs. Additionally, three discharged children’s files were reviewed to assess the CTF’s compliance with permanency efforts. At the time of the review, seven placed children were prescribed psychotropic medication. These children’s files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and required documentation of psychiatric monitoring.

CAD reviewed five staff files for compliance with Title 22 Regulations and County contract requirements. Site visits were conducted to assess the quality of care and supervision provided to the placed children.

**CONTRACTUAL COMPLIANCE**

CAD found the following three areas out of compliance:

**Licensure/Contract Requirements**

- CCLD citations.



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CCLD cited the CTF on April 13, 2016, for a unit psychiatrist being out of the office and not signing a restraint order within 24 hours, and for facility staff members having expired Pro-Act training certificates on file. CCLD requested a Plan of Correction (POC) from the CTF to retrain staff in Pro-Act training; and to submit a written plan of how the CTF will ensure that physician orders are completed/signed within a timely manner. CCLD cleared the POC on April 15, 2016. No investigation was completed by DCFS Emergency Response (ER) or Out-of-Home Care Investigation Section (OHCIS).

CCLD cited the CTF twice on May 27, 2016, for Personal Rights violations, due to a staff member lifting a chair that a resident was sitting in. The resident hit the staff and the staff hit the resident back and the staff escorted the child with his hand placed around the resident's neck. The staff member was terminated. Nonetheless, CCLD requested a POC for facility direct care staff to be retrained on resident's personal rights; a written report explaining how the CTF will ensure staff are not harming the residents; and a written report discussing how the CTF will ensure staff are following policies and procedures. CCLD cleared the POC on June 26, 2016. No investigation was completed by DCFS ER or OHCIS.

CCLD cited the CTF on July 18, 2016, for failure to supervise, when a physical altercation took place between two residents, and no CTF staff were present due to a staff meeting being held in an adjacent module. A POC was requested for the CTF to submit a written plan of how it will ensure the residents receive adequate supervision during staff meetings. CCLD cleared the POC on August 10, 2016. No investigation was completed by DCFS ER or OHCIS.

CCLD cited the CTF on August 15, 2016, during a complaint investigation, when a resident became assaultive and spat on a staff member. The staff blocked the resident's hits and placed his hands on her shoulders to move her back. The resident fell and the staff fell on her while he was holding her arms up to restrain her on a bed. Due to the staff conducting an inappropriate restraint, a POC was requested to have verification that the CTF staff were re-trained in Pro-Act; and that restraint policy and protocols will be reviewed with all direct care staff. CCLD cleared the POC on September 8, 2016. No investigation was completed by DCFS ER or OHCIS.

CCLD cited the CTF on October 7, 2016, for a Building and Grounds violation, due to having termites in the lead staff office and on the school classroom wall paneling; and for dead termites falling from two of the ceiling lights in the classroom. According to staff, both the lead staff office and the school were sprayed for termites, but became a concern again later. CCLD requested a POC from the CTF for verification of cleaning/removal of dead termites from lights and wall panel. CCLD cleared the POC on October 14, 2016. No investigation was completed by DCFS ER or OHCIS.

**Recommendation:**

The CTF's management shall ensure that:

1. The CTF is in full compliance with Title 22 Regulations and free of CCLD citations.

**Education and Workforce Readiness**

- A child did not attend school as required.

One child's academic performance deteriorated and the child's school attendance decreased significantly while at the CTF. The child's CTF main campus school attendance record revealed over 150 absences/tardies. The child's recent report card on the file indicated failing/incomplete grades for 5 of 5 main campus classes while earning zero credits. In January 2017, CTF staff followed up with the child and the Deputy Probation Officer and formulated an educational plan to successfully address the issue.

**Recommendation:**

The CFT's management shall ensure that:

2. Children attend school as required.

**Discharged Children**

- Children not discharged in accordance with the NSP permanency plan.

Two children were discharged due to Absent Without Official Leave (AWOL) status. One child AWOL'd from the CTF unit, while another child did not make progress toward meeting NSP goals and AWOL'd during an off-site dental appointment.

At the exit conference, the Program Director stated that going forward the treatment team will consistently assess each youth's progress towards meeting their NSP goals and address the issues by requesting a team meeting to identify the most suitable interventions.

**Recommendation:**

The CFT's management shall ensure that:

3. Children are discharged in accordance with the NSP permanency plan.

**PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S CTF CONTRACT COMPLIANCE  
REVIEW**

CAD's last compliance report dated August 16, 2016 (review conducted in September 2015), identified 4 recommendations.

**Results:**

Based on the results of the current review, the CTF fully implemented 3 of 4 recommendations for which the CTF was to ensure that:

- Adequate perishable and non-perishable food is maintained.
- Staff treat children with respect and dignity.
- Children are provided with adequate personal care items.

Based on the results of the current review, the CTF did not implement 1 of 4 recommendations for which the CTF was to ensure that:

- The CTF is in full compliance with Title 22 Regulations and free of CCLD citations.

**Recommendation:**

The CTF's management shall ensure that:

4. The outstanding recommendation from the prior report noted in this report as recommendation number 1 is fully implemented.

At the exit conference, the CTF representatives expressed their desire to remain in compliance with Title 22 Regulations and contract requirements. The CTF will consult with the OHCMD for additional support and technical assistance, and CAD will assess contract compliance during the next review.

Philip M. Stein  
Chair, Board of Directors

Nancy Tallerino, LCSW  
Acting Chief Executive Officer



**VISTA DEL MAR**  
CHILD & FAMILY SERVICES

April 5, 2017

Tony Curry  
Children's Services Administrator I  
County of Los Angeles  
Dept. of Children & Family Services  
Contract Compliance Section  
3530 Wilshire Blvd., 4<sup>th</sup> Floor,  
Los Angeles, CA 90010

RE: Exit interview dated 12/20/2016  
CORRECTIVE ACTION PLAN, Community Treatment Facility  
(revised 04/05/2017)

Dear Mr. Curry:

I am providing the Contracts Administration Division with a Corrective Action Plan (CAP) as requested, regarding the findings revealed during the monitoring of our Community Treatment Facility by DCFS' Contract Compliance Department.

FINAL MONITORING REVIEW FIELD EXIT SUMMARY 12/20/2016

I. Licensure/Contract Requirements

9. Related to Community Care Licensing Division Citations

CAP:

Explain the Cause of Non-Compliance/deficiency:

The following deficiencies were substantiated and corrections were made via Corrective Action Plans-

- 04/13/2016-Unit psychiatrist was out of the office and was not able to physically sign restraint order within 24 hours. He was called and did give verbal order.
- 05/27/2016-A staff member did not support a resident's personal rights by engaging in a power struggle (he was terminated).

- 07/18/2016-Residents needed increased supervision during unit meeting. There needed to be another staff present for support and supervision.
- 08/15/2016-ProAct restraint was not properly implemented due to specific staff's lack of understanding.
- 10/21/2016-Termite remains were found in classroom. Termites had been exterminated and maintenance had thought that they had removed all of the remains.

Plan for Correction:

*Please see attached Letters of Deficiency Citations Cleared for each incident noted below.*

Incident dated:

- 04/13/2016-In instances where unit psychiatrist is unable to sign order within 24 hours, our medical director will instead be contacted for the restraint order and will be the one to sign off on the order, within the 24 hour time period. This was discussed with medical director and with unit psychiatrist. They were made aware of the plan as was the unit staff via a unit meeting.
- 05/27/2016-Staff involved in incident was terminated on 05/25/2016 (before CCL became involved). Trainings occurred with all staff to review personal rights policy and protocols. Clinicians also continued to meet with youth/NMD's to review their rights and provide support.
- 07/18/2016-Increased staff were assigned to cover the wings during meetings.
- 08/15/2016-Staff who was involved in the restraint received additional training. Restraint policy and protocol was reviewed with all direct care staff.
- 10/07/2016- Dead termites were removed from ceiling lights and wall panel in Earth class room. Maintenance Department monitored the classroom daily since the day the dead termites were removed and found no other sign of termites in the classroom. They will continue to monitor the facility daily.

IV. Education and Workforce Readiness

28. Related to child not attending school as required

CAP

Explain the Cause of Non-Compliance/deficiency:

Resident does not like attending school in the locked unit. He has a long standing history of poor school performance and attendance. Despite ongoing support and incentives,

resident continued to refuse to attend school in the locked unit. At the same time, he was attending 2 classes at the NPS on the main campus, outside of the locked unit and was earned an A in one class and a C in the other.

**Plan for Correction:**

Resident has stated that he wants to attend all of his classes at Vista Del Mar's "big" school, outside of the CTF unit. Unit Director and Senior Vice President have spoken with Vice President of Education who has authorized him to attend Vista Del Mar's main school, beginning at the start of the new semester on 01/17/2017. Resident states that he will attend school regularly if given this opportunity. His D.P.O. supports this plan as well.

**IX. Discharged Children**

**56. Related to children not being discharged in accordance with the NSP Permanency Plan**

**CAP:**

**Explain the Cause of Non-Compliance/deficiency:**

Two residents ran away from the facility. One ran from a required dental appointment and the other ran away from the front of the CTF unit. Both residents had a longstanding history of runaway behaviors.

This resident (A) had longstanding history of running away. Despite support, supervision and counseling, she continued to engage in runaway behavior.

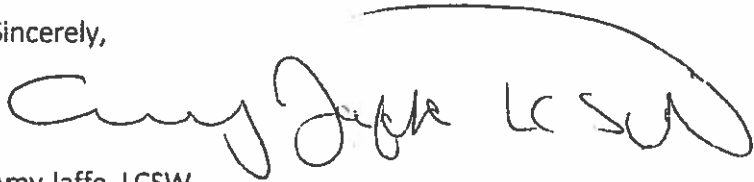
**Plan for Correction:**

Treatment team continues to postpone off site appointments whenever possible (and medically permissible) for youth who present as a safety risk. In the case of resident [REDACTED], unit had postponed [REDACTED] dental follow up for a bit but treatment was deemed necessary and could not be put off any longer. Whenever possible, youth who present as AWOL risk, have meetings and receive counseling on the locked side of the unit, rather than in the front portion where the door does not lock (as per fire code regulations).

This resident identified was transferred to another facility that also has a PHF unit. [REDACTED] was not responding to treatment interventions despite having reasonable and achievable e goals identified. Treatment team to continue to assess each youth to identify how they are doing with meeting NSP goals and when struggling, will request a team meeting for further strategizing and identification of optimal interventions (i.e. CFT meeting).

Please let me know if additional information is needed.

Sincerely,

A handwritten signature in black ink that reads "Amy Jaffe LCSW". The signature is fluid and cursive, with a large loop at the end of the "W".

Amy Jaffe, LCSW  
Senior Vice President of Intensive Intervention Programs

Cc: Manyahlal Adenow, DCFS Quality Assurance/OHCMD  
Nancy Tallerino, LCSW, CEO  
Renee Capeloto, CTF Unit Director  
Maricela Morales, Quality Assurance and EHRS Manager  
Steven Smithwick, Contract Compliance Manager, Vista Del Mar