



Licensed Child Caring Agency Site Visit Report Residential Care

Licensee: Madrona Recovery
Executive Director: Charley Downing
Board Chairperson: Michael Knapp

Date of site visit: 2-10-21
Licensing Coordinator: Todd Cooley

Other Regulatory or Accrediting Agencies: OHA, ODHS Treatment Services

Program Compliance: The program was found to be compliant or will be compliant with OAR 413-215-0001 to 413-215-0131, Licensing Umbrella Rules, and OAR 413-215-0501 to 413-215-0586, Licensing Residential Care Agencies Rules. Personnel records were reviewed and compliance with required background checks was documented for employees in all programs.

Program Description(s): Madrona Recovery's residential program focus on community, accountability, and relationships. The residential program has an inter-disciplinary clinically grounded team, who work closely with Qualified Mental Health Associates and Certified Recovery Mentors who provide a therapeutic milieu where youth are challenged to develop skills to prevent relapse and provided education to best equip them to support their own mental health and recovery needs.

Program type and services: Residential and BRS

Capacity (gender and ages): 26 – ages 13-17

Funding sources: Kaiser, MHN, BCBS, 1st Choice, PacSource, Optum, Providence, Good Sam, Healthnet

Contracts and sources for referrals: Emergency Departments, community providers, website, alumni

Average length of stay: Residential – 21 days; BRS – 45 days

Average daily population served: 13

Number of children served annually: 155

Use of seclusion or restraint: No seclusion. Use therapeutic holds by staff trained in CPI

Interviews, Observations: During the review the Founder/CEO John Thornton, Exec. Dir. Charley Downing and COO/CFO Micah Brathwaite were on hand for entrance interviews, exit interviews and available for any questions throughout the day. Three residents were also interviewed during this review.

The residents had been in the program 1-2 weeks and one of them had been a resident prior for approximately a month. There were some common themes among the residents during the interviews. All stated they felt safe in the program and did not have any concerns around safety. They felt most staff really cared and all had staff they were comfortable talking with if they had any concerns. All felt the food was good and portions were plentiful with snacks available if they got hungry between meals.

There were mixed opinions on recreation. While all felt there was plenty of free time, some stated outside activities were limited due to basketballs being flat and not having access to the goats unless you were in crisis. There did not seem to be clear messaging around interacting with the program's goats as some residents felt you could interact with them whenever, but this particular resident chose not to, and others felt only those residents in crisis had the opportunity to feed or pet the goats. It was suggested items like sidewalk chalk might make outdoor rec more enjoyable for some who don't like to participate in things like basketball. Weather was also a factor and the residents said they choose not to go outside just because it is really cold.

Another common theme was overall chaos and lack of structure. The residents stated with the current milieu there are a lot of loud and strong personalities who enjoying engaging in drama for the sake of drama. This occurs during the day as well as at night sometimes making it difficult to sleep or find a quiet space. Residents felt staff did not do a good job of calming things down a lot of times when it would get loud which made it feel chaotic. This gave some residents the impression as well that some of their peers were "rewarded" for acting up because there were really no consequences for their actions. They got this impression because staff had to dedicate much of their time to those residents who were acting out and that would take time away from those participating and sometimes cause them to miss out on things they were supposed to do because staff were not available. As far as structure, there is a set schedule but one of the residents interviewed said the schedule was rarely kept to due to peers acting out and not being able to transition. This resident gave the impression they came from a very structured household as they thought in addition to a more rigid schedule the residents should also have a lot more chores and responsibilities during their stay.

All interviewed residents agreed the groups (therapy) were really good. They felt the topics were on point and they were learning something in every group. The groups were all found to be helpful towards reaching their goals. They did state they could get sidetracked by peers being obnoxious and talking a lot but were still able to focus and take away something positive.

John and Charley also provided the tour of the facility which was found to be clean and in good repair. The bedrooms appeared well kept and the common areas and bathrooms were all very clean. Lunch was being prepared in the kitchen at the time of the tour and there were no concerns over food prep or storage that were immediately apparent. The outdoor recreation area is now about twice the size it originally was as Madrona Recovery has recently acquired the adjacent building for their outpatient program and have been able to fence the area in between. This is a

marked improvement in the outdoor recreation area providing more space for basketball, additions of some raised garden beds and a new space for the programs two goats.

One observation of note during the tour, and discussed at the exit interview with management, was an observed interaction with a group of three residents and one staff. While moving through the hallway there were three female residents with high energy in close proximity to a male staff. The three residents seemed to be feeding off each other's energy and the staff appeared to not be setting boundaries and possibly a bit flustered at the situation. Another staff was observed down the hall just watching the interaction and not making an attempt to intervene or calm the situation. Our group moved on past the commotion in the hall, but the scene made an impact on licensing and other regulators. It was brought to managements attention that staff might benefit from some additional training and support around boundaries. This observation was in line with what was heard during the resident interviews about high energy and "chaos". For context it is also understood the behavior, energy level and tone of a milieu is always in flux as residents come and go, and the group in care at the time of the review was particularly challenging.

Program Strengths, as identified by the program: Resilience. We are in our 3rd year. Staff retention has improved more recently. Groups. The quality of the content is high, client engagement has increased, according to our surveys, clients find our groups/group leaders relevant and valuable to their treatment experiences. Therapeutic alliance is strong. By design, we have low caseloads, highly qualified professionals and a (relatively) small population of clients. These are ingredients that produce positive outcomes.

Program Challenges, as identified by the program: The population of clients we serve is very challenging. Generally speaking, we are up for this challenge; we sign up for it. However, turnover is high when staff express they do not feel safe. We have had several assaults on the unit that have resulted in valuable staff leaving. This puts additional stress on staff who remain. Assaultive clients who remain in our program due to limits of available community options has been cited as a main reason for staff expressing this safety concern.

Covid-19. We've had two cases. This makes staff, parents, everyone anxious. We've lost good staff and have had to press pause on admissions, which puts a stress on the agency's finances.

Attempting a much-needed outpatient program has proven challenging to begin and grow during this time. Medical Leadership was highly problematic. That concern has been resolved.

Changes that have occurred in the last 2 years, as described by the program: Contracting with DHS to provide BRS services to a larger number of teenagers in the CW system. Medical Director changed within the last two years. We are well served by Dr. Joel Suckow since this change occurred.

We received our Intensive Outpatient Services and Support (IOSS) license and began serving families in an outpatient capacity in December of 2020.

Lawsuits: No lawsuits to date

Grievances and complaints filed in the last two years: No significant grievances. Documentation provided and on file.

Corrective Actions and Timeframes: Please submit the following to verify compliance.

Within 45 days of receipt of this report Madrona Recovery must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents can be emailed directly to Todd Cooley, todd.cooley@dhsosha.state.or.us , or sent by regular mail to the following address:

Department of Human Services, Children's Care Licensing Program
Attn: Todd Cooley
201 High St SE, Suite 500
Salem, OR 97301

Exceptions: Exception on file for no window egress in bedrooms. Exception on file for the annual financial review or audit.

Changes in License: None

Summary of Review					
Program and Services 413-215-0011(2)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Program and services are in scope of license	X				
Governance of the Agency 413-215-0021	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1)(a) Minimum of 5 board members	X			Exception on file for audit	
(2)(f) Formally evaluate the exec. Director's performance annually	X				
(2)(g) Approves annual budget	X				
(2)(h) Obtain and review an annual independent financial review or audit of financial records.		X			
(2)(k) Written quality improvement program	X				
(2)(l) Meeting minutes	X				
Executive Director or Program Director 413-215-0021	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(3)(a) knowledge of requirements for providing care and treatment appropriate to programs	X				
(3)(g) Approval from BCU	X				
Discipline, Behavior Management, and Suicide Prevention 413-215-0076	Yes	No	N/A	Comments	Corrective Action Completed

(3) Agency uses appropriate and positive methods of behavior management and nationally recognized non-violent crisis intervention	X				
(3)(b)(C) Agency does not use chemical and mechanical restraint (excluding medically necessary devices/prescriptions)	X				
(3)(c) Agency uses appropriate time-out rooms (adequate space, heat, light and ventilation and is not capable of locking) and documents use in child's record when applicable			X		
(3)(e) Agency uses seclusion appropriately/consistent with policy			X		
(4) Agency has adequate plan in place to respond to suicidal behavior/warning signs	X				
Physical Plant	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0046(3)(a) Foster Rights Posted (if children in DHS custody)	X				
413-215-0051(1) Sufficient safe space, equipment, and office equipment	X				
413-215-0091(12) License is posted in common area at each facility	X				
413-215-0001(5)(d), 0516(4(a)(I) & 0521(1) Adequate furnishings and personal items	X				
413-215-0511(2)(a) &(c) Buildings are smoke free, clean and in good repair	X				
413-215-0511(2)(d) Rooms are free of harmful drafts, odors, and excessive noise	X				
413-215-0511(2)(e) Rooms are adequate in size and arrangement	X				
413-215-0511(2)(f) System provides a continuous supply of hot and cold water to taps located throughout the facility	X				
413-215-0511(2)(h) Building is well ventilated and room temperature is within a normal comfort range	X				
413-215-0516(1) All parts of the facility ensure the safety of children	X				
Room and Space Requirements	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Bedrooms 413-215-0516(3)					
(a) Adequate furnishings and personal items	X				

(b) Separate from rooms used for dining, living, laundry, kitchen, and storage	X			Exception on file for window egress.	
(c) Outside room with window allowing egress from building		X			
(d) Ceiling at least 90 inches	X				
(e) Minimum 60 SF per bed	X				
(f) No more than 25 if dorm style	X				
(g) Permanently wired fixtures	X				
(h) Window covering	X				
(i) Beds are 3 feet apart and maintained to ensure safety	X				
Room and Space Requirements Bathrooms 413-215-0516(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a)(A)&(B) 1:8 ratio for toilets and sinks	X				
(a)(D) Hot and cold running water, soap, and approved hand drying options	X				
(a)(E) 1:10 ratio for shower or bathtub	X				
(a)(E) Individual privacy	X				
(a)(F) Window covering			X		
(a)(G) Permanently wired fixtures	X				
(a)(H) Adequate ventilation	X				
(b)&(c) Wooden racks on floors are prohibited and impervious shower mats are disinfected & dried daily			X		
Room and Space Requirements Kitchen 413-215-0516(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Used exclusively for storage, food preparation, dish washing and activities related to eating	X				
(b) Walls, floors are easily cleanable	X				
(c) Equipment and utensils are easily cleanable, durable, nontoxic, and kept clean	X				
(e) Equipment is easy to clean beneath, between and behind	X				
Room and Space Requirements 413-215-0516	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(2) There is a separate living room or lounge area – 15 SF minimum per child	X				
(5) There is a separate dining room with capacity for ½ of children in care and 15 SF per child in care	X				
(7) Laundry is separate from living areas, kitchen and dining	X				

(8) Separate storage areas are provided for food, kitchen supplies, utensils, clean linens, soiled linens and clothing, cleaning supplies and equip, poisons, chemicals, outdoor recreational and maintenance equipment	X				
(9) Outdoor activity area is protected from vehicles and other hazards and of a size and availability appropriate to the age and needs of children in care	X				
(11) & 413-215-0076(3)(c)(C)Time out rooms have adequate space, heat, light and ventilation and is not capable of locking			X		
Furnishings and Personal Items 413-215-0521	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) There is a bed with frame, clean mattress and pillow and personal storage (dresser, closet)	X				
(2) Linens are in good repair. There is a waterproof mattress cover or mattress. Linens are appropriate and towels and washcloths are provided	X				
(3) Bedding is changed weekly or when soiled	X				
(4)&(5) Personal hygiene supplies and appropriate clothing are provided	X				
Food Services 413-215-0536(1)&(2)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1)(a) Meals are arranged daily, consistent with normal mealtimes that occur during the hours of operation	X				
(1)(b) Menus are prepared in advance in accordance with USDA guidelines, provide a variety of foods and are adjusted for seasonal changes.	X				
(1)(b) Menus are kept for at least 6 months	X				
(1)(c) Drinking water is freely available	X				
(2)(a) Food is stored, prepared & served in a sanitary manner	X				
(2)(c) & (d) Food products are obtained from commercial suppliers (exception of fruits & vegetables), unpasteurized juice is prohibited, and only Grade A pasteurized and fortified milk in appropriate container.	X				
Safety 413-215-0541	Yes	No	N/A	Corrective Actions	Corrective Action Completed

(2)(a) Written emergency plan	X				
(2)(b) Telephone numbers for local police and fire are posted near all telephones	X				
(2)(c) Operative flashlights sufficient in number are readily available to staff	X				
(3)(a) Evacuation drill occurs monthly under varying conditions, is retained 2 yrs and contains; (A) identify of person conducting drill (B) date & time (C) notification method (D) staff participating (E) # of children & staff evacuated (F) special conditions simulated (G) problems encountered (H) time to complete	X				
Safety – Transportation 413-215-0541	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(5)(b) Vehicle has insurance policy, is smoke free, safe operating condition, and has first aid kit and fire extinguisher 2-A:10-BC			X		
Medication 413-215-0551	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(3)&(7)(e) Medications have a prescription and are stored in the original container with prescription label	X				
(4)&(5) Herbal supplements and remedies, medical treatments, special diets, physical therapy, physical aides or limitations have a written order signed by a physician or qualified medical professional.	X				
(7)(c) Medications are inaccessible to children	X				
(8) Medications are disposed in accordance with state and federal law	X				
(9) Written record of the disposal of medications is maintained and includes: (a) description and amount (b) name (c) reason (d) method (e) staff & witness signature	X				
(10) Written record of the administration of medication includes: (a) name	X				

(b) description (c) dates and times (d) missed doses (e) medication disposed (f) method of administration (g) ID of person administering (h) possible adverse reactions (i) medication taken outside facility					
Extracurricular, Enrichment, Cultural & Social Activities 413-215-0554	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(2) Children have ongoing opportunities to participate in at least one age-appropriate or developmentally appropriate activity	X				
Minimum Staffing Requirements 413-215-0561	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1)&(2) Supervision is adequate for the type of program, location, age and type of children, ability of supervisor to respond, electronic back-up systems. Minimum ratios are maintained: Under 30 months of age: 1:4 30 months to > 6 yrs or non-ambulatory: 1:6 Ages 6 and older: 1:7 Overnight (staff awake) 1:10	X				
(4)(a) When one staff on duty, there is additional staff immediately available with max response time of 30 minutes			X		
(5) There is at least one on-site employee authorized to apply the <i>reasonable and prudent parent</i> standard	X				
Separation of Residents 413-215-0566	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) Children are in separate bedrooms than adults, unless parent and child, or there is written approval from guardian/parent and licensing coordinator	X				
(2) There is adequate supervision of children if both males and females are served by the program	X				

Supplemental Information Provided by CCA	Yes	No	N/A	Comments	Corrective Action Completed
Documents as indicated on the form titled "Renewal Licensing Required Documents"	X				
Documents as indicated on form titled "Required Financial Documents and Information"	X				
All required policies and procedures as identified in the "Umbrella Rules"		X		See Comments	
All required policies and procedures as identified in "Agency Type Specific Rules"	X				

Comments:

Madrona Recovery provided all required policies and procedures. During the interview process it was discovered their practice was not in alignment with their policy on rights of children and families. Residents disclosed having a 72-hour restriction on phone calls/contact with their guardians upon being admitted to the program. Management confirmed this practice and stated both residents and guardians were made aware prior to entry into the program. Licensing informed Madrona Recovery this practice is in violation of rule and their own policy and requested the practice be stopped immediately. Licensing is working with Madrona Recovery to ensure practices match policy.

OAR 413-215-0081- Application for License, Renewal, or to Add a Program: (B) Written policies regarding the rights of children and families the *child caring agency* would serve upon being licensed that meets the requirements of **OAR 413-215-0046**.

413-215-0046

Licensing Umbrella Rules: Children and Families Rights Policy and Grievance Procedures

(1) Rights of children in care and families served by the child-caring agency. A child-caring agency must guarantee the rights of children in care and the families the child-caring agency serves. A child-caring agency must enact and adhere to a policy ensuring those rights. A written copy must be distributed to all children in care and families served by the child-caring agency, and afford the following rights:

(a) Except as provided in paragraph (B) of this subsection, the child in care's right to uncensored communication with legal guardians, caseworkers, legal representatives, and other persons approved for communication by the legal guardian or as provided in a court order.

(A) This right cannot be waived, including voluntarily. Restriction on communication between a child in care and his or her legal guardian may not be a condition of participation in the program.

(B) A child-caring agency may place reasonable limits on communication, but only as provided in the child-caring agency's policy. Reasonable limits include, but are not limited to, having set time periods during the day for visitation and phone calls and imposing moderate limits on the duration of calls or visits. However, a limitation is not considered reasonable if it prevents the ability to meaningfully communicate, such as not allowing contact with a child in care's attorney during regular business hours.

Personnel Files 413-215-0061	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Staff Name/Position	X			One of the files reviewed included staff who had received a promotion and a new background check had not been conducted per rule.	
(3)(g) Date of Hire	X				
(3)(a) record of education, training and previous employment	X				
(1)(b) & (3)(b) reference checks completed and documented	X				
(1)(a) & (3)(c) Background check completed and documented		X			
(3)(d) Annual performance evaluations	X				
(3)(f) Record of personnel actions	X				
(3)(g) Termination date, reason for termination	X				
(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	X				
New Employee Orientation – Umbrella Requirements (30 days) 413-215-0061(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Agency policies and procedures	X				
(b) Ethical and professional guidelines	X				
(c) Organizational lines of authority	X				
(d) Attributes of population served	X				
(e) & (5)(a) to (c) Mandatory reporting that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report (c) legal responsibility to report is personal to the employee	X				
(f) Privacy laws	X				
(g) Emergency procedures	X				
New Employee Orientation – Residential (30 days) 413-215-0556	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1)(a) Discipline and behavior management including de-escalation, crisis prevention,	X				

positive behavior management, and disciplinary techniques that are non-punitive in nature					
(1)(b) Restraint and seclusion (if applicable)	X				
Ongoing Training	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0536(2)(b) Employees who handle food served to children have a valid food handler's card	X				
413-215-0541(5)(a) Employees transporting children have: current driver's license, insurance, trained in emergency procedures and behavior management, and training for 15+ passenger vans if applicable)	X				
413-215-0556(2)(a) Environmental emergencies	X				
413-215-0556(2)(b) Universal Precautions	X				
413-215-0556(2)(c) Discipline and Behavior Management	X				
413-215-0556(3) Staff providing direct care must maintain current CPR/First Aid certification	X				
413-215-0556(4) Designated staff authorized to apply reasonable and prudent parent standard are trained in application of the standard	X				
413-215-0061(5) Mandatory reporting (annually) that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report (c) legal responsibility to report is personal to the employee	X				
Contractors (if applicable) 413-215-0061(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Agency ensures the contractor meets the requirements of this rule and Chapter 413 division 215			X		
(b)(B) Contract includes the following: (i) Services provided			X		

(ii) Contractor fees (iii) Disclosure of information from contractor to agency (iv) Lines of authority (v) Adherence to rules, including background check (vi) Any liability of the agency for acts of the contractor, rights of indemnity and limitations on liability					
Comments:					

Children's Records	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Health Services 413-215-0546					
(2) Medical history obtained within 30 days (significant findings, current immunizations, history of surgical procedures-health issues-injuries, allergies, dental, vision, hearing, behavioral health, and physician orders)	X			There was no documentation of age appropriate instruction. Madrona Recovery plans to add this to the nursing assessment at intake so any concerns around diet, pregnancy prevention, STDs, etc. can be discussed with the nursing staff.	
(2)(e) Documentation of age appropriate instruction – pregnancy prevention, nutrition, prevention of HIV & AIDS, and prevention and treatment of sexually transmitted disease		X			
(4)(a) to (f) Medical exams (3 in first year of life, 2,4,6,9,14)			X		
Consents 413-215-0576(1)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Provide routine and emergency medical care	X				
(b) Use the discipline and behavior management system	X				
(c) Use restraint or seclusion (if applicable). Must specify the reasons for the intervention and how staff are trained and supervised	X				
(d) Restrict contact with persons outside of the agency	X				

(e) Allow access as defined in 413-215-0091 & 0101	X				
(f) Impose a dress code	X				
(g) Apply the reasonable and prudent parent standard	X				
Disclosures 413-215-0576(2) Parent/guardian has acknowledged in writing:	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Information regarding personal or room searches and protocols for confiscation of contraband	X				
(b) Statement of Rights of Children and Parents/Guardians	X				
(c) Any policies and procedures upon request	X				
Authorizations 413-215-0576(3)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Disclose or exchange information with others	X				
(b) Child specific visitors	X				
(c) Visitation resources are pre-approved	X				
(d) Activity specific authorizations are pre-approved to allow children to participate in potentially hazardous activities, including but not limited to using motorized yard equipment, swimming, and horseback riding.			X		
Information about Children in Care 413-215-0581(1) Summary sheet contains the following:	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) The name, gender, date of birth, religious preference, and previous address	X				
(b) Name and location of previous and current school	X				
(c) Date of admission	X				
(d) Legal custody	X				
(e) The name, address, and telephone number of: (A) The child in care's parents. (B) The child in care's legal guardian, if different than the parents, and a copy of the document that provides for his or her authority over the <i>child in care</i> .	X				

(C) Other persons significant to child (D) Other professionals to be involved in service planning (if applicable)					
Service Planning 413-215-0581(2)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(b) Intake document is completed the date child accepted into care (emergency placement 48 hours)	X				
(d) Assessment is completed within 30 days and contains relevant historical info., current behavioral observations, identified need for services, and how agency will provide services	X				
(e) (A)&(B) Service plan within 60 days (parent, guardian and child actively involved). Describes how child's issues will be addressed, anticipated outcomes and reviewed by child and guardian/parent.			X		
(e)(C)&(D) Service plan is reviewed quarterly and revised when information indicates other services should be provided			X		
Case Management 413-215-0581(3)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Services are documented, progress toward achieving goals is tracked	X				
(b)-(d) discharge planning and instructions	X				
(f) Incident Reports	X				
Financial Records 413-215-0581(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Records contain date, amount, source, purpose, signatures			X		
Personal Possessions Records 413-215-0581(5)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Individual written inventory of all personal possessions is maintained and updated as needed	X				
Records and Documentation 413-215-0071	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) Stored safely	X				
(2) Permanent, legible, dated, and signed	X				

(3)&(4) Uniform in organization, readily identifiable and accessible, current, and complete, containing all required info. No eraser tape or white out.	X				
(7) Permanent registry for each child includes: Name Gender Birth date Names, addresses of parents or guardians Dates of admission Placement upon discharge	X				
Comments: Consents were originally vague around use of the discipline and behavior management and essentially only stated they would use the discipline and behavior management system. Program Director Downing expanded this section to identify the system being used, the Crisis Prevention Institute (CPI) system, which will enable clients and guardians to find additional information if they choose. Residents at Madrona Recovery do not participate in off-site recreational activities, and the activities on site are not high-risk, so a disclosure and consent for these types of activities isn't required and isn't part of the intake process. Due to the nature of the program and length of average stays, none of the files reviewed belonged to residents who had been in the program long enough to require a 60-day service plan or quarterly review of the service plan.					

Licensing Coordinator's Signature:  Date: 3-1-2021

Manager Review:  Date: 02-26-2021