



Licensed Child Caring Agency Site Visit Report Residential Care

Licensee: A Village for One – Anisa's Place

Executive Director: Cassie Trahan

Date of site visit: March 15, 2021

Licensing Coordinator: Aubrey Kelly

Other Regulatory or Accrediting Agencies: Child welfare

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): A Village for One – Anisa's Place is a residential program serving clients who are identified as Commercially Sexually Exploited Children (CSEC). The program uses a phase system. The program places a great emphasis on providing a nurturing, safe and trauma-informed milieu that allows for healing and growth.

Program type and services: individual mental health counseling, drug and alcohol counseling, group mental health counseling, family counseling, education services, social and community activities, access to medical, dental, and vision care, skills training and job search/career development.

Capacity and age-range: Ages 12-17; capacity of 7.

Funding sources: Child welfare contracts

Contracts and sources for referrals: Child welfare

Average daily population served: 3

Use of seclusion or restraint: Restraint – Mandt.System, Seclusion – n/a.

Interviews, Observations:

Client #1: She's been at the program since September 4, 2020. She hates it here, the other kids are loud and annoying. Staff step in when that happens. Staff are supportive, Cassie is her favorite staff. The food is gross but can be good. She's making Rotel dip tonight, staff makes most of the meals but the clients help make dinner. She's been at several other programs. She feels safe at the program sometimes, she does not feel safe when staff get too close to her. She has been in restraints since being at the program. She has run several times from the program. School is good, she likes learning.

Client #2: She feels safe at the program, admission was almost 3 weeks ago. She's been at several other programs. She hasn't run since she's been here. Her favorite staff are Arielle, Cassie and Taylor, they are cool and easy to approach. There are no staff she doesn't like. The food is good, she's helping cook dinner tonight. She likes school, she is appreciative she gets to do school at her pace. She has not been any restraints. A change she would like to make is doing equine therapy every week, as opposed to every other week as they do now. She currently identifies as a vampire wolf demon and appreciates the program respects that.

Staff #1: She has been employed at the program since it opened. She likes working here. Her supervisor is approachable and she feels like she can call or text her supervisor at any time. During orientation, staff received training on Trust-Based Relational Intervention (TBIR), trauma informed care, The Mandt behavior intervention system, de-escalation techniques, CSEC. They regularly go over Mandt, trauma informed care and crisis intervention.

Program Strengths: Diversity of activities, such as equine therapy every other week. The program works hard at keeping clients in the program for as long as they need it. The program has managed several crises since opening, to include a worldwide pandemic, wildfires, an ice storm and a flood in the program. The program does a lot of activities with the clients. Many of the staff are highly educated.

Program Challenges: Staffing has been a challenge as well as maintaining clients in the program who often runaway.

Changes that have occurred in the last 2 years: n/a

Lawsuits: None

Grievances and complaints filed in the last two years: None

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

Within 45 days of receipt of this report A Village for One – Anisa's Place 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 (Licensing Coordinator and email address) or sent by regular mail to the following address:

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

Recommendations: None

Exceptions: None

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				
(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			X		

ventilation and is not capable of locking) and documents use in child's record when applicable					
(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			Two bedrooms were very messy and had items all over the floor. The program shall ensure all rooms are clean. This is a repeat finding from December 2020.	
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					
(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;		X		<i>The program completed one evacuation drill since opening in September 2020. The program shall ensure evacuation drills are completed on a monthly basis.</i>	

(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					
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 (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	X				

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				

Personnel Files 413-215-0061	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Staff Name/Position	X				
(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		<i>Staff personnel files did not contain a current job description. The program shall ensure there is a current job description in each staff's personnel file.</i>	
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					
(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, positive behavior management, and	X				

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 (ii) Contractor fees			X		

(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					
---	--	--	--	--	--

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				
(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			Client files did not contain all the required consents signed by the legal guardian. The program shall ensure all required	
(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		<i>consents are signed by the legal guardian and placed in each client's file.</i>	
(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		<i>Client files did not contain all the required disclosures signed by the legal guardian. The program shall ensure all required disclosures are signed by the legal guardian and placed in each client's file.</i>	
(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			<i>Client files did not contain all the required authorizations signed by the legal guardian. The program shall ensure all required authorizations are signed by the legal guardian and placed in each client's file.</i>	
(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	X				

the document that provides for his or her authority over the <i>child in care</i> . (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		

Licensing Coordinator's Signature: Aubrey Kelly Date: 03-22-2021

Manager Review: H. Gilmer Date: 03-22-2021