Licensed Child Caring Agency Site Visit Report
Residential Care

Licensee: Bob Belloni Ranch, Inc
Executive Director: Naomi Ulsted
Board Chairperson: Vicki Solomon

Program Director: Jenny Howland
Date of site visit: 11/16/2021
Licensing Coordinator: Mary Torres

Other Regulatory or Accrediting Agencies: Oregon Youth Authority (OYA), Department of Education (DOE)

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: According to the program's website, Bob Belloni Ranch, Inc. is a private non-profit agency providing residential treatment and community-based services for adolescents who need the skilled, optimistic guidance, training and opportunity of a community-based treatment program since 1971. Bob Belloni operates three programs: Belloni Boys Ranch, the DHS Independent Living Program for Coos and Curry Counties, and BBR Counseling Services (community-based outpatient mental health clinic). All residential programs provide behavioral rehabilitation services geared to the specific needs of the youth referred to that program with the focus on education, counseling, and skill building. As a community-based program, Independent Living prepares foster youth for adulthood.

Program type and services: As summarized by the program, Bob Belloni offers Behavioral Residential Treatment for male youth ages 13 – 18 years old to include community offenders and sex offenders.

Capacity and Age Range: Boys' Ranch - 19 youth, 13 – 18 years old

Funding sources: Oregon Youth Authority (OYA), grants, fundraising, donations. The program recently received a $37,000 grant from the Oregon Health Authority to assist with staff payroll and hiring through the month of December.

Contracts and sources for referrals: Oregon Youth Authority (OYA)

Average length of stay: 29.44 weeks

Average daily population served: 12.58 youth

Number of children served annually: 35 youth

Use of seclusion or restraint: The program does not use seclusion or restraint. Staff are trained in nonviolent crisis intervention and verbal de-escalation through CPI.

Interviews, Observations: Interviews held with the program's newly appointed Executive Director, Naomi Ulsted, the program's Program Director, Jenny Howland and four residents. There are currently 10 youth in program. The Boys' Ranch is licensed for 19 youth. At the beginning of next week, the program will be enrolling 4 new youth. The program continues to have three staff vacancies due to the COVID vaccine mandate. These vacant positions caused the loss of three significant staff to include the program's CPI trainer and two veteran staff who had 50+ years of combined experience. The Executive Director is actively working towards filling these positions while maintaining current staff. The program recently implemented Staff of the Month, is researching the expansion of health and dental insurance for staff in the coming year and is using social media and radio spots to announce current openings and promote the program. In addition, despite budgetary issues, the program has decided to increase their entry level rate of pay, offering new hires $16/hr. As a result of staffing shortages, management staff are working the on the floor alongside direct care staff. A new medical officer is scheduled to start at the beginning of next month.

School remains onsite. A classroom instructor and assistant are provided by Alternative Youth Activities (AYA). The program is looking at implementing a career exploration curriculum for residents. Youth will have the ability to explore a variety of career paths such as culinary arts, emergency management, etc. and gain certificates in those fields of work to build their resume and make them more competitive when seeking employment.

Regarding treatment services, the program is using a computer program called TheraScribe®. This program is an electronic health record system that allows staff to address specific behaviors through behavior specific worksheets.

The four youth interviewed have been in program between 1 to 20 months. While three youth reported feeling safe within program, one resident described the program as being "sketchy" and did not feel "emotionally safe." Staff turnover was reported as having a negative impact on youth and the program in the form of a lack of communication, increased contraband being brought into the program such as vape pens, puff bars and pornography and situations where both staff and youth become easily frustrated. Three youth report issues with the program's food. The three individually reported burnt and raw meat being served by the program's assigned cook. Youth report that when staff cook, the food is better. Strengths identified by youth include staff supporting the residents and their flexibility and being given opportunities to take positive risks such as the ropes course. Three residents shared an incident overheard from other residents involving a staff member who reportedly cursed and postured towards another resident. One resident reported experiencing a verbal insult from staff. This information was brought to the Executive Director's attention and reported to the Child Abuse Hotline. Licensing will be following up with the program regarding the concerns reported and additional licensing issues will be addressed.

Program Strengths: The program reports having a calming and peaceful location, where the city is not easily accessible. Residents, however, have easy access to therapeutic care through Bob Belloni Ranch's BBR Counseling Services Center, and the program benefits from experienced senior leadership. During the interview with Licensing, the program highlighted additional strengths to include staff rapport with youth, existing staff's commitment to the care of youth and the staff's ability to "meet where kids are at."

Licensing recognizes the program weathering through a COVID outbreak and honoring their staff member who died as a result of COVID. In addition, the program made efforts to meet with Licensing and OYA on a weekly basis, allowing both regulatory entities to offer support during the time an interim Executive Director was appointed.

Program Challenges: This licensing period has experienced the following challenges as summarized by the program. These include, recruiting and hiring qualified residential counselors, ongoing COVID related challenges that resulted in staffing shortages, high level of staff turnover in the previous year and low placement referrals resulting in an extremely tight budget.

Changes that have occurred in the last 2 years: The program's newly appointed Executive Director provided the following information: Most notably, we closed our Girls' Program due to low referrals. For several months, we utilized both our residential facilities for the Boys' program. However, we recently moved all of them into one facility to help with staff shortages. There have been three Executive Directors in the past two years. Lack of stability in upper-level administrative leadership, as well as the OTIS related suspension of our long time Program Director, caused challenges in staff and resident culture. The last two months have been significantly more stable, and we plan to see improvement consistently in this area.

Among other pandemic-related challenges, the program was unable to provide off-campus opportunities for residents such as internships, employment, or volunteering experiences. We are now redeveloping those connections, as long as we can do so safely. COVID caused continuous staff challenges due to illness and/or the need to be quarantined. A staff death due to COVID caused significant emotional strain for residents and staff. Moving forward, we look forward to a more stable staff culture, a stronger educational system in our school, a stronger focus on trauma informed care and more prevalent staff training opportunities.

During interview with management staff, it was shared that the program's sex offender treatment provider had provided services on site in the past. This recently changed and now youth are transported to the provider's office. This change saved the program some money as the provider's hours were scaled back under this new arrangement.

Lawsuits: None

Grievances and complaints filed in the last two years: Three residents expressed concern regarding the same staff member, using a "rude" tone when addressing youth and taking points away for "no reason." These concerns were taken to the youth peer council and concerns were addressed in this setting.

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

Within 45 days of receipt of this report **Bob Belloni Ranch, Inc.** 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 Mary Torres at mary.torres@dhsoha.state.or.us or sent by regular mail to the following address:

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

Exceptions: In April of 2021, the program submitted and was granted an exception regarding the use of cameras in the dorm rooms. This remains in practice and the program will need to resubmit the exception for the next licensing period (2021-2023). At the time of the original exception, the program also updated their intake paperwork, disclosing to both resident and guardian that cameras were onsite. Guardians and youth must sign and acknowledge this prior to placement.

Changes in License: The license for this next licensing period will be modified. The Wineva Johnson Center will be removed from the license as that facility has been temporarily closed.

Summary of Review					
Program and Services 413-215-0011(2)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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/Comments**	**Corrective Action Completed**
(1)(a) Minimum of 5 board members	**X**			The newly appointed Executive Director has yet to be formally evaluated. This completed task will be evaluated at the time of the program's next licensing renewal.	
(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/Comments**	**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**	**Corrective Actions/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**				
Contractors (if applicable) 413-215-0061(6)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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 (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			**X**		

Supplemental Information Provided by CCA	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
Documents as indicated on the form titled "Renewal Licensing Required Documents"		X		Organization did not submit the following documents: - Fire Marshal Report - Certificate of Occupancy - Suitability Questionnaire - Program Description **Corrective Action:** Submit required documents to Licensing	
Documents as indicated on form titled "Required Financial Documents and Information"				Organization did not submit a **Tax Compliance Certification** Organization did not submit a completed IRS form 8821 Organization did not submit completed form titled "**Required Financial Documents and Information"** **Corrective Action:** Submit the missing documents to Licensing for review	
All required policies and procedures as identified in the "Umbrella Rules"		X		Two restricted approaches are not listed on the program's current **Behavioral Management Policy** **Corrective Action:** Please add the following statements to the existing policy and implement in the program's practice: Denying a parent, guardian, or sibling the right to visit or communicate with a child in care solely as a disciplinary measure against the child in care. Aversive conditions, which includes, but is not limited to, any technique designed to or likely to cause a child physical pain, the application of startling stimuli and the release of noxious stimuli or toxic sprays, mists, or substances in proximity to the child in care. The following documented rights are missing from the program's existing **Resident and Family Bill of Rights**. - The child in care's right to privacy. - The child in care's right to participate in service planning or educational program planning. - The child in care's right to fair and equitable treatment. - The child in care's right to file a grievance (as provided in section (2) of this rule) if the child in care or family feels that they are treated unfairly or if they are not in agreement with the services provided. - The child in care's right to have adequate and personally exclusive clothing.	

				- The child in care's right to an appropriate education. - The child in care's right to participate in recreation and leisure activities. - The child in care's right to have timely access to physical and behavioral health care services **Corrective Action:** Update the program's existing policy with the missing rights listed above The program's current **Resident and Family Grievance Procedure Policy** is missing the following required components: - A process likely to result in a fair and expeditious resolution of a grievance. - A prohibition of reprisal or retaliation against any individual who files a grievance. - A procedure to follow, in the event the grievance is filed against the executive director, that ensures that the executive director does not make the final decision on the grievance. - The name, address, and phone number of: (i) A Department licensing coordinator; and (ii) Any other governmental entities with oversight responsibilities. In addition, the program has recently adopted a Peer Council grievance procedure that needs to be captured in their Grievance Policy. **Corrective Action:** Add the above missing components to the program's existing Grievance Policy and incorporate the use of the newly established Peer Council	
All required policies and procedures as identified in "Agency Type Specific Rules"					
Physical Plant	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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 Bedrooms 413-215-0516(3)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**Corrective Action Completed**
(a) Adequate furnishings and personal items		**X**		Underside of upper bunk beds have profanity (words, drawings) **Corrective Action:** Remove or paint over profanity and implement a process to monitor profanity within the dorms.	
(b) Separate from rooms used for dining, living, laundry, kitchen, and storage	**X**				
(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/Comments**	**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/Comments**	**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/Comments**	**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/Comments**	**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/Comments**	**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/Comments**	**Corrective Action Completed**
(2)(a) Written emergency plan		**X**		The program's existing emergency plan does not document instructions for response in the event of natural disaster, external safety threat or other emergency **Corrective Action:** Update the program's policy to reflect the above missing component and resubmit the policy to Licensing for review. Evacuations drills were not submitted to Licensing for review **Corrective Action:** Submit the last fire drills for the last two years for Licensing to review.	
(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/Comments**	**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**		Document is missing to confirm current insurance coverage and vehicle registration for the program's 2001 Honda Accord **Corrective Action:** Submit proof of insurance and registration for the program's 2001 Honda Accord	
Medication 413-215-0551	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**Corrective Action Completed**

(3)&(7)(e) Medications have a prescription and are stored in the original container with prescription label	**X**			In reviewing current MARS, reasons for missed medication was not being consistently recorded **Corrective Action:** Ensure that staff responsible for medication administration are re trained in documenting all required information on the MARS	
(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/Comments**	**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/Comments**	**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	**X**				

30 months to > 6 yrs or non-ambulatory: 1:6 Ages 6 and older: 1:7 Overnight (staff awake) 1:10					
(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 *reasonable and prudent parent* standard	**X**				
Separation of Residents 413-215-0566	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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/Comments**	**Corrective Action Completed**
Staff Name/Position	X			Three out of the five personnel files reviewed did not document annual performance evaluations. **Corrective Action:** Solidify a procedure to ensure personnel are evaluated annually and the evaluations are kept in their respective files. Two files did not have a current job description. **Corrective Action:** Ensure current job descriptions are in all personnel files from this point forward.	
(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		Two additional files had job descriptions, however the employees previous work and/or education did not meet the minimum qualifications stated in the job descriptions. **Corrective Action:** Modify the program's minimum qualifications or consider other means such as a trial period or demonstrated level of competency to fulfill role and responsibilities that can be substituted for minimum qualifications.	
New Employee Orientation – Umbrella Requirements (30 days) 413-215-0061(4)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**Corrective Action Completed**
(a) Agency policies and procedures		X		One newly hired employee's file did not have documentation to verify all mandatory orientation training was completed. **Corrective Action:** Provide documentation that this employee has completed all orientation training and ensure that all training is documented in the personnel file from this point forward.	
(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/Comments**	**Corrective Action Completed**
(1)(a) Discipline and behavior management including de-escalation, crisis prevention, positive behavior management, and disciplinary techniques that are non-punitive in nature		X		One newly hired employee's file did not have documentation to verify all mandatory orientation training was completed. **Corrective Action:** Provide documentation that this employee has completed all orientation training and ensure that all training is documented in the personnel files from this point forward.	
(1)(b) Restraint and seclusion (if applicable)		X			
Ongoing Training	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**Corrective Action Completed**
413-215-0536(2)(b) Employees who handle food served to children have a valid food handler's card		X		Two out of the three files reviewed did not have a valid food handler's card	

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	**Corrective Action:** Ensure that staff who handle food served to youth have a valid food handler's card. Two out of the three files reviewed did not document completed training in ***Environmental Emergencies*** Two out of the three files reviewed did not document completed training in ***Universal Precautions*** Three out of the three files reviewed did not document completed training in ***Discipline and Behavioral Management*** One out of the three files reviewed did not document a valid ***CPR/First Aid certification*** Two out of the three files reviewed did not document ***Reasonable and Prudent Parent Standard*** training One out of the three files reviewed did not document completed training in ***Mandatory Reporting*** **Corrective Action:** Ensure a process where all mandatory ongoing training is completed and documented from this point forward.	
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			
Comments:					

Children's Records	Yes	No	N/A	Corrective Actions/Comments	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		Two out of four files reviewed did not reflect medical information obtained within 30 days **Corrective Action:** Ensure that medical information is obtained within the first 30 days of all incoming youth from this point forward. Four out of four files reviewed did not document age appropriate instruction **Corrective Action:** Develop and implement a method where age appropriate instruction is documented in a youth's file within the first 30 days of placement.	
(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/Comments**	**Corrective Action Completed**
(a) Provide routine and emergency medical care	X			Four out of four files reviewed did not have a consent related to allowing access as defined in 413-215-0091 and 413-215-0101 **Corrective Action:** Create consent regarding allowing access by the Department of Human Services	
(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/Comments**	**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/Comments**	**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/Comments**	**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 *child in care*. (C) Other persons significant to child (D) Other professionals to be involved in service planning (if applicable)	X				
Service Planning 413-215-0581(2)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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				

The name and location of youths' previous and current school is not listed in the four youth files reviewed

Corrective Action: Ensure there is space on the summary sheet where previous and current education information can be documented

(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/Comments**	**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/Comments**	**Corrective Action Completed**
Records contain date, amount, source, purpose, signatures		X		Youth files reviewed had no financial documentation **Corrective Action:** Ensure that there is a procedure to capture and document youths' financial records and have that information stored in the youth's file	
Personal Possessions Records 413-215-0581(5)	**Yes**	**No**	**N/A**	**Corrective Actions/Comments**	**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/Comments**	**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	X				

Placement upon discharge					
Comments:					

Licensing Coordinator's Signature: _____ Date: 12/22/2021

Manager Review: _____ Date: 12-22-2021