



Licensed Child Caring Agency Site Visit Report Day Treatment

Licensee: Polk Adolescent Day Treatment Center (PADTC)

Executive Director: Dan Strasser

Board Chairperson: Sarah McMaster

Date of site visit: 12/10/2021

Licensing Coordinator: Mary Torres

Other Regulatory or Accrediting Agencies: Oregon Health Authority (OHA), Oregon Department of Education (ODE)

Program Compliance: The program is or will be compliant with OAR 413-215-0001 to 413-215-0131, Licensing Umbrella Rules, and OAR 413-215-0801 to 413-215-0856, Licensing Day Treatment Agencies. Personnel records were reviewed and compliance with required background checks was documented for employees in all programs.

Program Description: As summarized by the program's previous review report, Polk Adolescent Day Treatment Center (PADTC) is a private nonprofit organization that provides intensive mental health services for adolescents ages 11-17 years old. The program serves youth within 5 local counties (Linn/Benton/Marion/Yamhill/Polk) who are experiencing severe psychosocial and emotional distress while supporting them in a small educational setting. PADTC prides itself as a safe environment where students can receive mental health treatment and remain living at home within their community of origin. Once students are ready and have developed successful social and coping skills, they are transitioned to their home schools. The program also offers a strong family component where family therapy and parental support is provided.

Capacity and Age Range: 20 youth, ages 11-17 years

Funding sources: Medicaid through Oregon Health Plan (OHP), local Coordinated Care Organization (CCO), grants, including a grant from the Oregon Department of Education's Long Term Care and Treatment (LTCT) education grant program, dispersed through the Dallas School District, that assists with teachers, teacher aides, payroll and ongoing curriculum.

Contracts and sources for referrals: Local school districts (Linn/Benton/Marion/Yamhill/Polk)

Average length of stay: 9 months with students returning consecutive years.

Average daily population served: 17 youth. During the pandemic the lowest daily population was 14 youth

Number of children served annually: 35 youth

Interviews, Observations: The Program's Executive Director, Dan Strasser, was interviewed and lead the tour of the campus. A veteran therapist was also interviewed and assisted with the audit of students' electronic files. The following information was gathered throughout the course of the review. The program uses the on-line computer application Indeed to announce open staff positions. Due to COVID, number of children served by the program continue to be lower than normal. An ideal census for the program is 18 youth. The program was recently informed of a new Licensing requirement for programs to use one of the three restraint systems approved by ODHS for use by child-caring agencies. The program is making preparations for their trainer to be trained in the Crisis Prevention Institute (CPI) system. The program has been using ProAct for the last 12 years. Over this last quarter, the program's restraint numbers have been extremely low. The Executive Director contributes this to staff reading youth's non verbal cues and intervening before the situation escalates and results in a restraint. Ongoing, annual training for staff occurs in August before students begin the school year. The program has set a goal to have all staff files be electronically stored before the next Licensing review. Despite the spike in COVID outbreaks throughout the state, the program has been able to stay open. The program uses an ultra violet light and air filters to combat COVID.

Interviewed one youth. The youth reports feeling safe in program, sharing that staff are properly trained, offering youth "a break" before things escalate. This youth understands their treatment goals and reports that the counselor and classroom teacher help measure the youth's progress in meeting those goals. Strengths of the program include understanding staff and parental involvement. The single change this youth would make about the program is transportation. The youth is transported by bus to a local school, and PADTC picks up the youth there. This sequence in transportation leaves the youth late to school every day by 20-30 mins.

Program Strengths: As reported by the Executive Director, the program's strengths are attributed to the staff's longevity and parental involvement. Other strengths include the program's structured therapy, the "token economy" used as an incentive for youth to do well, allowing them to purchase items with tokens on site, a good rapport with the local Sheriff's Office and their strong reputation with the CCOs and local school districts where the program's client centered services are well known and appreciated. Staff also strive to create a successful transition for youth stepping down into mainstream school and create opportunities for youth to thrive.

Program Challenges: Steady and consistent funding can be difficult at times. The program does not receive a Medicaid payment for students if they do not attend school for whatever reason. Given the size of the facility, services and the number of youth served are limited. The program has future plans to expand their size to accommodate more classrooms and youth, thus expanding their services and service area. Other challenges for the program include the ability to motivate well seasoned staff in completing their annual trainings and walking away with new information on subjects that they are well versed in. Having a veteran staff can create a stagnant atmosphere where change can be difficult to implement. The program also reports a poor relationship with the Polk County Mental Health Administrator that commonly refers youth to another program, leaving PADTC feeling overlooked and unfavored. Lastly, keeping up with OARs changes has been challenging for the program.

Changes that have occurred in the last 2 years: The program recently updated their computers and obtained a 3D printer through an educational grant.

Lawsuits: None as reported by the program.

Grievances and complaints filed in the last two years: None as reported by the program.

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

Within 45 days of receipt of this report **Polk Adolescent Day Treatment Center (PADTC)** 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 @ mary.torres@dhsosha.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: None this licensing period.

Changes in License: N/A

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 – Board Responsibilities 413-215-0021	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1)(a) Minimum of 5 board members	X			This year's annual budget approved by the board was not submitted prior to this review. Corrective Action; Submit proof of the Board's approved budget	
(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			Board Meeting Notes for the past licensing period (2019-2021) were not submitted prior to this review.	
(2)(l) Meeting minutes		X			

				Corrective Action: Submit board meeting notes for the last licensing period	
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			Executive Director has an approved CCH from 2019	
(3)(g) Approval from BCU		X		Corrective Action: Submit an updated CCH for the Executive Director and forward verification of approval by the BCU to Licensing	
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		The program did not submit a copy of its Suicide Prevention Plan Corrective Action: Please submit a copy of the program's Suicide Prevention Plan for review	
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			X		

(vi) Any liability of the agency for acts of the contractor, rights of indemnity and limitations on liability					
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		The following documents were missing from the required renewal list: • Suitability Questionnaire • Program Description as required by 413-215-0081 (h) A written program description, including admission requirements, population served, gender and ages served, types of programs and services offered, the cost to clients (if any), the geographical area to be served, and the projected staffing pattern. The program description must identify all exclusions that would make a child in care ineligible to be served by the child-caring agency • Copy of the Executive Director's Resume • Board Meeting Notes for the last licensing period Corrective Action: Submit the above documents to Licensing.	
Documents as indicated on form titled "Required Financial Documents and Information"				The following documents were missing from the required financial checklist: • An approved budget by the board • A completed form titled "Required Financial Documents and Information" Corrective Action: Submit the above documents to Licensing	
All required policies and procedures as identified in the "Umbrella Rules"				The following policies were not submitted prior to this review: • A Conflict of Interest policy as required by 413-215-0036 Licensing Umbrella Rules: Conflict of Interest. A child-caring agency must have a conflict of interest policy that prohibits preferential treatment of board members, employees, volunteers, and contributors. The policy must outline safeguards when the child-caring agency allows dual relationships, such as employees serving as proctor foster parents, including the requirement that all material facts of the conflicted transaction and the direct or indirect interest of the board member, employee, volunteer, or contributor are disclosed or known to the board approving the conflicted transaction. If circumstances do not permit board approval of the conflicted	

				transaction, a non-profit child-caring agency may obtain the approval of the Attorney General or the Department prior to entering into the transaction. • Suicide Prevention Policy as required by 413-215-0076 Licensing Umbrella Rules: Discipline, Behavior Management & Training, and Suicide Prevention (Excluding Adoption Agencies) (4) Suicide Prevention. The policy must include the following: (a) How the child-caring agency will respond in the event a child in care exhibits self-injurious, self-harm, or suicidal behavior; (b) Warning signs of suicide; (c) Emergency protocol and contacts; (d) Training requirements for staff, including suicide prevention training and suicide risk assessment tool training; (e) Procedures for determining implementation of additional supervision precautions and for determining removal of additional supervision precautions; (f) Suicide risk assessment procedures on the day of intake; (g) Documentation requirements for suicide ideation, self-harm, and special observation precautions to ensure immediate communication to all staff; (h) A process for tracking suicide behavioral patterns; and (i) A "post-intervention" plan with identified resources • Discipline and Behavior Management Policies as required by 413-215-0076 Licensing Umbrella Rules: Discipline, Behavior Management & Training, and Suicide Prevention (Excluding Adoption Agencies) (b) The discipline and behavior management policies and procedures must prohibit the following: (A) Spanking, hitting, or striking with an instrument (B) Committing an act designed to humiliate, ridicule, or degrade a child in care or undermine the self-respect of a child in care. (C) Punishing a child in care in the presence of a group or punishment of a group for the behavior of one child in care. (D) Depriving a child in care of food, clothing, shelter, bedding, rest, sleep, toilet access, or parental contact. (E) Assigning extremely strenuous exercise or work or requiring a child in care to spend prolonged time in	
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				one position likely to produce unreasonable discomfort. (F) Using restraint or involuntary seclusion as discipline. (G) Permitting or directing a child in care to punish another child in care (H) Using any other kind of harsh punishment. (I) 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. (J) 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. (2) Discipline Policy. A child-caring agency must incorporate into the program's care-giving practices positive nonpunitive discipline and ways of helping a child in care build positive personal relationships, self-control, and self-esteem. (3) Behavior Management. (a) The behavior management policy of the child-caring agency must identify appropriate and positive methods of behavior management based on a child's needs, developmental level, and behavior. (b) The policies must include a description of the model, program, or techniques used and its use of each of the following: (A) Nonviolent crisis intervention. For purposes of this rule, "nonviolent crisis intervention" means a nationally recognized, holistic system for defusing escalating behavior and safely managing physically aggressive behavior. The agency's choice of a "nonviolent crisis-intervention system" must be conveyed to and approved by the Department. (B) Use of time out, if applicable. (C) Use of restraints, if applicable. (i) Chemical restraint, meaning the administration of medication for the management of uncontrolled behavior, is prohibited. Chemical restraint is different from the use of medication for treatment of symptoms of severe emotional disturbances or disorders. (ii) Mechanical restraint, meaning the use of any physical device to involuntarily restrain the	
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				movement of a child in care as a means of controlling his or her physical activities, is prohibited. (D) Use of involuntary seclusion, if applicable. (c) Time out. (A) For the purpose of this rule, "time out" means restricting a child in care to a designated area for a period of time to give the child in care an opportunity to regain self-control. (B) "Time out" must include frequent contact with staff. (C) Rooms used for "time out" must have adequate space, temperature, light, and ventilation, and must not be capable of locking. (D) "Time out" episodes must be documented in the child in care's record. (d) Training. (A) Only child-caring agency staff and proctor foster parents who have been trained in a nationally recognized nonviolent crisis-intervention system consistent with OAR 413-215-0077 may use restraint or involuntary seclusion and only when necessary as a last resort to prevent a child in care from inflicting harm to self or others. (B) Any use of restraint or involuntary seclusion must be conducted within the parameters of the nationally recognized system in which the child-caring agency staff or proctor foster parent is trained and must meet the requirements and provisions described in OAR 413-215-0077. (C) Any child-caring agency staff or proctor foster parent utilizing restraint or involuntary seclusion must be trained on the type of restraint or involuntary seclusion used, and the restraint or involuntary seclusion must be within the parameters of the nationally recognized system in which the staff or proctor foster parent is trained and must be consistent with OAR 413-215-0077. (e) Review. The policies of the child-caring agency must require that whenever a restraint is used on a child in care more than two times in seven days, there is a review by the executive director, the director's designee, or a management team to determine the suitability of the program for the child in care, whether modifications to the child in care's plan are warranted, and whether staff need additional training in alternative therapeutic behavior	
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				management techniques. The child-caring agency must take appropriate action indicated by the review. Corrective Action: Submit missing policies to Licensing for review The following policies required modification and/or updates: Individual Rights policy requires that the following rights be added to the existing policy as required by 413-215-0046 Licensing Umbrella Rules: Children and Families Rights Policy and Grievance Procedures (Amended 1/1/19) (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. (b) The child in care's right to privacy. (c) The child in care's right to participate in service planning or educational program planning.	
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				(d) The child in care's right to fair and equitable treatment. (e) 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. (f) The child in care's right to have adequate and personally exclusive clothing. (g) The child in care's right to personal belongings. (h) The child in care's right to an appropriate education. (i) The child in care's right to participate in recreation and leisure activities. (j) The child in care's right to have timely access to physical and behavioral health care services. • Grievance Policy needs to be updated with current Board Chair's name and contact information • Confidentiality Policy requires the following information 413-215-0066 Privacy (Amended 06/29/18) (1) A child-caring agency must have and adhere to a written policy that addresses protection of the privacy of children and families the child-caring agency serves or has served. (2) Except as provided in section (4) of this rule, a child-caring agency may not disclose any identifying information of a child in care, including a picture, without first obtaining the written consent from the child's parents or legal guardians. (3) A child-caring agency must ensure the privacy of all information that identifies a child in care or family the child-caring agency serves. A child-caring agency may not disclose such information without proper written consent or as otherwise allowed by law. (4) A person making a report of abuse as required in ORS 418.258 and 419B.010 may include references to otherwise confidential information for the sole purpose of making the report. Corrective Action: Modify or update the above policies and resubmit to Licensing for review	
All required policies and procedures as identified in "Agency Type Specific Rules"				The following Agency Specific Policies were not submitted prior to the review: • Medication Policy	

				Written Policy that includes the following as required by 413-215-0851 Requirement to Have Policies and Procedures (Technical Amended 01/15/20) A day treatment agency must have a written policy that includes the following: (1) Hours of operation. (2) Service area. (3) Family expectations and participation requirements. (4) Type of behavioral and affective characteristics of the children in care. (5) Psychiatric, therapeutic, or counseling services offered	
Educational Services 413-215-0856	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
School is accredited				Current teacher to youth ratio is 2:17. In addition there are 3 instructional assistants Therapist to youth ratio is 5:17	
Accrediting body _ Department of Education/Dallas School District_____					
(2) 1:15 ratio for qualified teacher/children	X				
(4) Secondary schools – verification provided that meets academic standards to obtain admission to higher education and receive high school diploma or GED	X				
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			Time out room has missing ceiling tile Corrective Action: Replace missing tile.	
413-215-0051(1) Sufficient safe space, equipment, and office equipment.	X				
413-215-0816(8)(e) Adequate in size and arrangement for programs offered	X				
413-215-0091(12) License is posted in common area at each facility	X				
413-215-0001(5)(d) & 0816(9)(a)&(b) Adequate furnishings and personal items; storage for personal items	X				
413-215-0816(2) Buildings are smoke free, clean and in good repair		X			
413-215-0816(3) Rooms are free of harmful drafts, odors, and excessive noise	X				
413-215-0816(4) Rooms are adequate in size and arrangement	X				

413-215-0816(5) System provides a continuous supply of hot and cold water	X				
413-215-0816(7) Building is well ventilated and room temperature is within a normal comfort range	X				
Bathrooms 413-215-0816(8)(a)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(A) 1:15 ratio for toilets	X				
(B) 1:2 ratio for sinks to toilets. Hand-washing sink not used for food prep	X				
(C) Hot and cold running water, soap, and approved hand drying options	X				
(D) Individual privacy	X				
(E) Permanently wired fixtures	X				
(F) Window covering			X		
(G) Mirror, permanently affixed	X				
(H) Adequate ventilation	X				
Room and Space Requirements 413-215-0816	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(8)(A)(B) Laundry is separate from food storage, kitchen and dining			X		
(8)(c) 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				
(8)(g) Recreational 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				
(8)(f) Time out rooms have adequate space, heat, light and ventilation and is not capable of locking	X				
Food Service area 413-215-0816(8)(d)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(A) Areas used for storage, food preparation, and dish washing are separate from child-caring areas	X				
(B) Walls, floors are easily cleanable	X				
(C) Equipment and utensils are easily cleanable, durable, nontoxic, and kept clean	X				
(D) Equipment is easy to clean beneath, between and behind	X				

Food Services 413-215-0831	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			Breakfast and lunch are prepared off site and delivered daily by the Dallas School District. No food preparation occurs on site.	
(b) Menus are prepared in advance in accordance with USDA guidelines, provide a variety of foods and are adjusted for seasonal changes.	X				
(b) Menus are maintained for at least 6 months	X				
(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				
(2)(e) Children are supervised when in the food-preparation area	X				
Safety 413-215-0836	Yes	No	N/A	Corrective Actions/Comments	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 years and contains; (A) identity 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 413-215-0836(5)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(b) Vehicle has insurance policy, is smoke free, safe operating condition, and has first aid kit and fire extinguisher 2-A:10-BC		X		2015 Ford Van is missing current registration card	

				Corrective Action: Locate current registration card and place in vehicle	
Medication 413-215-0846	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(2)&(5)(e) Medications have a prescription and are stored in the original container with prescription label	X			The program rarely dispenses medication to youth during school hours. If medication is dispensed during school hours, the youth's assigned counselor keeps the medication locked and inaccessible to others. Medication is dispensed by the counselor and a handwritten Medication Administration Record (MAR) is completed and then electronically uploaded into the youth's electronic file. Any unused/discontinued medication is immediately returned to the parent/guardian.	
(5) Medications are kept in locked storage	X				
(6) Medications are disposed in accordance with state and federal law	X				
(7) Written record of the disposal of medications is maintained (description, name, reason, method, staff & witness signature)			X		
(8) Written record of the administration of medication includes: (a) name (b) description (c) dates & 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				
Staff Qualifications and Minimum Staffing Requirements 413-215-0811	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1) Teachers are licensed in accordance with Teachers Standards and Practices Commission	X				
(2) A qualified clinical supervisor directs the clinical program and supervises clinical staff	X				
(3) Mental health service delivery staff meet the qualifications in OAR 309-022-0125	X				
(4) Sufficient QMHP and other staff to meet the severity and acuity of children served. Does not exceed 1:12 QMHP	X			Therapist to student ratio is 5:17	
Current Ratios 5:17					

413-215-0001(5)(f) Ensures safety and adequate supervision	X				
413-215-0001(5)(c) Engages in and applies appropriate behavior management techniques	X				

Personnel Files 413-215-0061	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
Name	X			Performance evaluations are conducted within the first year of employment at their first year mark and then every Feb after that.	
Position	X				
(3)(g) Date of Hire	X				
(3)(a) record of education, training and previous employment	X				
(1)(b) & (3)(b) reference checks complete and documented	X				
(1)(a) & (3)(c) Background check was 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/Comments	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				
Ongoing Training	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
413-215-0831(2)(b) Employees who handle food served to children have a valid food handler's card			X	There was no indication in the files reviewed that annual training regarding mandatory reporting was completed for 2021. Corrective Action: Ensure that annual, ongoing training is occurring and that completion of training is documented in each employee file moving forward.	
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			
413-215-0836(5)(a) Employees transporting children meet the driver requirements (current driver's license, insurance, trained in emergency procedures & behavior management, and training for 15+ passenger vans if applicable)	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		
Comments/Corrective Actions:					

Children's Records	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
Name of Child	X				
Date of admission	X				
Medication 413-215-0846	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(3) Medical treatments, special diets, physical therapy, physical aides or limitations have a written order signed by a physician or qualified medical professional.			X		
(4) Self-administration is approved in writing by Physician, recommended by agency, and monitored by staff or guardian. (9) <i>If applicable</i> , there is documentation of the continuing evaluation of the ability of the child to self-administer medication			X		
(8) Medication record	X				
Records and Documentation 413-215-0071	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1) Stored safely and are available for inspection by Dept.	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:					

Licensing Coordinator's Signature:  Date: 12/29/2021

Manager Review:  Date: 12-29-2021