



Licensed Child Caring Agency Site Visit Report Residential Care

Licensee: Native American Rehabilitation Association of the Northwest, Inc. (NARA)

Executive Director: Jacqueline Mercer

Program Manager: Luci LaDue

Board Chairperson: Jack Cranford

Date of site visit: February 18, 2022

Licensing Coordinator: Robin DuVal

Other Regulatory or Accrediting Agencies: Oregon Health Authority (OHA); Indian Health Service (IHS)

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, type and services: Youth residential treatment center (YRTC) providing 24-hour residential services for youth including Alcohol & Drug, Mental Health, Medical and Dental services on-site. The service approach is collaborative and strengths-based, including individual and group therapy, mental health, medical, and on-site dental services. Services include Dialectical Behavioral Therapy (DBT), Cognitive Behavioral Therapy (CBT), Seeking Safety groups, Trauma informed art, Red Road, telehealth, group and family counseling, peer support, conflict resolution and communication skill building activities, and medication management. An on-line accredited education program provides continuing education. Certified by White Bison to provide culturally appropriate treatment. NARA promotes and provides youth with access to traditional spiritual and cultural activities such as sweat lodge, fire circle, smudging, prayer, and other culturally specific activities. All cultural and spiritual beliefs are honored and allow youth to participate in the spiritual practice of their choice. The treatment model is based on the Medicine Wheel, integrating Health (wellness), Mental Health, Sobriety and Culture. Evidence-based practices and new developments in the treatment field drives their services. Staff include master's level counselors, clinical supervisors, certified alcohol & drug counselors, and certified recovery mentors. The mental health staff include a Doctor of Psychology, licensed clinical social workers, licensed professional counselors, and an additional psychiatrist. Medical staff includes physicians, family nurse practitioners, general nurse practitioners and registered nurses. NARA's goal is to help individuals and families overcome their addictions and move forward to enjoy a substance-free life.

Capacity and Age Range: capacity 24, ages 12-17

Funding sources: IHS, OHA, Oregon Department of Human Services (ODHS), Health Resources and Services Administration (HRSA).

Contracts: Roots and Beats; Forward Stride (equine therapy).

Referral sources: 9 Federally Recognized Tribes of Oregon; Oregon Department of Corrections; Oregon Department of Human Services; Oregon Health Authority; school counselors; other Child Caring Agencies (CCAs); Native organizations.

Average length of stay: 4 months

Average daily population served: 8

Number of children served annually: 46

Use of seclusion or restraint: No

Youth Interviews: Two youth were interviewed over Zoom, individually and privately.

- Youth D. is 17 years old, has been in the program 118 days and is graduating from the program with a discharge plan. Staff are very welcoming and respectful. Reports feeling safe, food is amazing and gets more than enough, has regular phone calls that aren't limited or restricted, no issues receiving medications as ordered, graduated High School while in program, and has regular extracurricular activities. Works with mental health team regularly each week, feels supported and together developed personal goals and is very active in their own treatment plan. Their favorite thing about NARA is the supportive staff and the positive, good energy. Reports NARA does well at being flexible, getting needs met, teaching healthy boundaries and good communication. Stated there was nothing they would change about the program if they could.
- Youth A. is 15 years old and has been in the program approximately 1 ½ months. Reports feeling safe, food is good and provides alternatives, has private phone calls with family and keeps in contact with prior therapist, working online towards credit recovery for school and expresses teacher is really nice and helpful, goes on walks and some outings, and enjoys painting. Works with Mental Health team weekly and is involved in making personal goals. Feels NARA is helping with recovery, living sober and being on a routine with sleep and meal schedule. Reports outings is their favorite thing and least favorite is some of the groups. NARA does well at taking care of Mental Health needs and is careful with triggers and what to watch for. Stated there was nothing they would change about the program if they could.

Staff Interviews: Three staff were interviewed over Zoom, individually and privately.

- Staff J. has worked here almost one year. Described initial and ongoing training, including mandatory abuse reporting, healthy boundaries. Has daily contact with supervisor and feels heard when bringing up concerns or ideas. Staffing has been somewhat challenging due to COVID, but always has enough to cover. Very much a team environment. Described the various extracurricular activities youth have. At intake, staff are expected to read the youths information, safety plan, etc. Youth goals are regularly discussed during staff meetings. States NARA does

well at listening to the needs and wants of each youth to complete the program. Two improvement areas are: tighten up the communication between counselors and RAs; and create or improve a daily structure for the weekends.

- Staff C. has worked here approximately 9 months and shared their background and education. Has weekly contact with their supervisor. Favorite things about NARA are multi-cultural approach to care; family-oriented environment even those who are not native; and feels respected and heard. Staffing ratios are good and everyone steps up to fill in when needed.
- Staff N. has worked here 3 years. Reported the various ongoing trainings and ongoing policy and procedure review in weekly meetings. Supervisor is supportive, open door for communication, very open and provides feedback. Described the recreation and extracurricular activities the youth participate in. NARA does well at ability to engage with youth, have fun, trust, compassionate staff, building connections. The only change would be to move physical locations to out of the city. Staff have stepped up to pick up extra shifts and staff are communicative when feeling burnt out. Reports being proud of this program, and they continue to get stronger every day.

Observations: During the review, the walkthrough consisted of the youth bedrooms, common areas, bathrooms, classroom, recreation room, and medication room. The kitchen and dining room was observed to be clean with adequate food supply in pantry, refrigerators, and freezers. The program was clean and in good repair. The milieus are painted in warm colors, as well as youth bedrooms, and comfortable couches to make the living space more homelike. Staff wore face masks, as mandated statewide due to the COVID-19 pandemic and there was an entry health screening protocol. Staff were welcoming and accommodating.

Program Strengths, directly quoted by the agency:

We have managed to remain open to serve individuals in need during the pandemic. Addressing the pandemic has been challenging, i.e., implementation of greatly increased PPE, social distancing, adding staff to specifically sanitize the facility, and instituting specific visiting protocols for residents. We modified the use of the building to adapt to continuing changes during the pandemic. We utilized targeted funds and reduced census to improve our staff trainings, especially crisis response and advanced clinical interventions. We began providing dental services on site, prior to the beginning of the pandemic. We were able to increase our success rate during this challenging time, as we had 1 out of every 3 clients successfully graduate our program the last 2 years.

Program Challenges, directly quoted by the agency:

As typical of many residential facilities during the COVID-19 pandemic, we have had significant barriers to our services due to complex and changing infection control procedures, and responses to staff and client exposures to and diagnoses of COVID-19 in the past 20 months. It is not an exaggeration to say that COVID-19 has taken up a majority of our efforts, and we are grateful that we have managed to stay open at all during this challenging time, as many of our colleagues' programs have been forced to close temporarily or permanently. Unfortunately, we have much more demand for our services and people are waiting longer times for admission under these conditions.

NARA would have, of course, wanted to continue our services at the same level of census as before the pandemic, but physical space issues to accommodate social distancing within the facility did not allow that to happen. We did redesign our working space accommodations rapidly to maintain a census at the highest possible level. In addition, we rapidly developed admission policies and procedures to quarantine new admissions and plan entry into the milieu, and modified those procedures when vaccines became available. These modifications were developed in close conjunction with our COVID-19 medical response team, who in turn consulted with the state and examined health guidelines published by the CDC. We also developed

criteria for temporary exclusion from the milieu when exposures or illness was detected, with follow up and bridging services for those clients who could rejoin us after they were well.

Changes that have occurred in the last 2 years, directly quoted by the agency:

Program structure had been changed to allow physical and spatial accommodations in response to the pandemic. Quarantine protocols were added in response to the pandemic. Multiple policies were revised, and protocols were created to address issues surrounding the pandemic. Added Telehealth services to allow resident appointments with ancillary service providers. We have implemented a COVID-19/social distancing monitor during this pandemic.

Lawsuits, directly quoted by the agency: None

Grievances and complaints filed in the last two years, directly quoted by the agency: None

Exceptions: None

Changes in License: None

Recommendations:

- Compare the youth financial form to what is required by rule OAR 413-215-0581(4) and make any desired changes.
- Add a footer to forms with the date and ensure staff are utilizing the most updated forms.
- For the next renewal period in 2024, utilize the spreadsheet provided by Licensing to prepare personnel records and ensure all required documentations are available at the time of review.
- Ensure NARA policies are updated when needed to align with changes to ODHS licensing rules for child-caring agencies.

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

Within 45 days of receipt of this report, **NARA** must submit a letter of verification indicating the agency is in compliance with the specific rules cited below and describe 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 are to be emailed directly to Robin DuVal at robin.m.duval@dhsosha.state.or.us.

Summary of Review					
Program and Services 413-215-0011(2)	Yes	No	N/A		
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			Performance evaluations were not conducted for 2020 nor 2021, however one is scheduled to occur at the upcoming Board meeting and the agency shall submit once completed. The agency shall ensure a formal performance evaluation of the Executive Director's is conducted annually.	
(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.					
(2)(k) Written quality improvement program	X				
(2)(l) Meeting minutes	X				
Executive Director or Program Director 413-215-0021	Yes	No	N/A		
(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		
(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)		N/A			
(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		
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Supplemental Information Provided by CCA	Yes	No	Corrective Actions	Corrective Action Completed
Documents as indicated on the form titled "Renewal Licensing Required Documents"	X			
Documents as indicated on form titled "Required Financial Documents and Information"		X	The agency shall submit the Tax Compliance Certificate once received.	
All required policies and procedures as identified in the "Umbrella Rules"		X	The agency shall update the following policies and procedures pursuant to each OAR: • Rights of Children to include all rights in OAR 413-215-0046(1)(a-j) • Grievance Procedures in OAR 413-215-0046(2) • Personnel in OAR 413-215-0061 • Privacy in OAR 413-215-0066 • Discipline, Behavior Management & Training, and Suicide Prevention in OAR 413-215-0076: Documents titled Non-Seclusion and Restraint; Suicide Prevention and Precautions (shows draft); Positive Discipline and Behavior Management.	
All required policies and procedures as identified in "Residential Care Rules"	X			
SB710 Requirements: Policy and Procedures; notifications to guardian and children in care. OAR 413-215-0077(8)(e), (11)(e) and OAR 413-215-0078(1)		X	The agency shall submit the policy and procedures, and notifications required to clients and guardians utilizing the resources provided by this licensor. The agency shall ensure clients and guardians receive the notification at intake and twice yearly thereafter, and document having provided it.	

Physical Plant	Yes	No	N/A		
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)(l) & 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		
(a) Adequate furnishings and personal items	X				
(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		
(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		
(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		
(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		
(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		
(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		
(2)(a) Written emergency plan	X				
(2)(b) Telephone numbers for local police and fire are posted near all telephones	X				
(2)(c) Operative flashlights sufficient in number are readily available to staff	X				
(3)(a) Evacuation drill occurs monthly under varying conditions, is retained 2 yrs and contains; (A) identify of person conducting drill (B) date & time (C) notification method (D) staff participating (E) # of children & staff evacuated (F) special conditions simulated (G) problems encountered (H) time to complete	X				
Safety – Transportation 413-215-0541	Yes	No	N/A		

(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		
(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		
(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		

(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		
(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			The agency shall ensure background checks are completed upon hire and at position changes; and retain documentation in the employee personnel file.	
(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		The agency shall ensure annual performance evaluations are conducted and documented in the employee personnel file.	
(3)(d) Annual performance evaluations		X			
(3)(f) Record of personnel actions	X				

(3)(g) Termination date, reason for termination			X		
(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	X				
New Employee Orientation – Umbrella Requirements (30 days) 413-215-0061(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Agency policies and procedures	X			The agency shall ensure mandatory abuse reporting training occurs within 30 days of hire.	
(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		
(1)(a) Discipline and behavior management including de-escalation, crisis prevention, positive behavior management, and disciplinary techniques that are non-punitive in nature	X				
(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				
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			

Children's Records	Yes	No	N/A		
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/Comments	Corrective Action Completed
(a) Provide routine and emergency medical care	X				

(b) Use the discipline and behavior management system	X			The agency shall add the consent to allow access on the "consent and acknowledgement" form already in use and utilize the updated form in new admission materials going forward.	
(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		
(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		
(a) Disclose or exchange information with others	X				
(b) Child specific visitors	X				
(c) Visitation resources are pre-approved	X				
(d) Activity specific authorizations are pre-approved to allow children to participate in potentially hazardous activities, including but not limited to using motorized yard equipment, swimming, and horseback riding.	X				
Information about Children in Care 413-215-0581(1) Summary sheet contains the following:	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) The name, gender, date of birth, religious preference, and previous address		X		Religious preference was not consistently documented on the summary sheet. The agency shall ensure an entry is noted for religious preference.	
(b) Name and location of previous and current school	X				
(c) Date of admission	X				

(d) Legal custody	X				
(e) The name, address, and telephone number of: (A) The child in care's parents. (B) The child in care's legal guardian, if different than the parents, and a copy of the document that provides for his or her authority over the <i>child in care</i> . (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		
(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		Incident Reports are completed and stored electronically in a shared drive, although not organized by youth nor retained in each youth file. The agency shall ensure completed incident reports are retained in each youth record.	

Financial Records 413-215-0581(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Records contain date, amount, source, purpose, signatures		X		Youth signatures are inconsistently captured on the form. The agency shall ensure the form is completed for each transaction and signatures obtained per entry.	
Personal Possessions Records 413-215-0581(5)	Yes	No	N/A		
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			Personnel and youth records are incomplete missing items noted above.	
(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: Robin DuVal Date: 3/7/2022

Manager Review: H. G. Gibe Date: 03-07-2022