Licensed Child Caring Agency Site Visit Report
Residential Care

Licensee: Marion County GAP Program
Executive Director: Troy Gregg
Program Director: Jose Miranda

Date of site visit: May 12, 2022
Licensing Coordinator: Holly Ivey

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

Program Description(s): Marion County Juvenile Department Guaranteed Attendance Program (GAP) is a voluntary shelter program for court involved youth ages 12-17. Youth are referred if they need additional structure as they transition out of detention or if they are at risk for being placed in detention. Youth generally attend school or are involved in work programs during the daytime hours and return at night. The program serves both male and female with specific Behavioral Rehabilitation Services (BRS) programing. The average length of stay is approximately 90 days.

Program type and services: Residential Services

Capacity and Age Range: 25, male and female ages 12-17

Funding sources: BRS Contracts, General Funds, and Diversion Funds

Contracts and sources for referrals: Contracts with the Oregon Youth Authority; referrals are made through the Marion County Probation Officers.

Average length of stay: 90 days

Average daily population served: 10-15 youth

Number of children served annually: 60-70 youth

Use of seclusion or restraint: Seclusion N/A, NCI Trained in case of emergency for restraints.

Interviews, Observations:
Interviews: During the review Jose Miranda, Program Director, and Cynthia Navarro, Case Manager, were informally interviewed, as they assisted with the walk through of the facility. At the time of the review the youth where at school and not available to be interviewed. Three youth were privately interviewed on the phone on May 17, 2022, by Holly Ivey, Licensing Coordinator. When asked what they appreciated most about the GAP Program the youth reported:" The staff are teaching me skills, the activities and outings are pretty fun, hanging out with people in the program, playing basketball, and football, everyone is respectful, staff help us out if we need anything." All youth reported getting enough food at the program and daily snacks. All youth reported having daily private phone contact with their approved contacts. The youth reported the following recreational activities: "Playing basketball, and soccer, going to the clubhouse (an area in the program that has a video gaming system, fuse ball and other games), going on outings, going to parks as a group." Two of the three youth reported hygiene products were provided by the program if they needed them. One youth stated, "Hygiene products had to be earned." (The DHS Licensing Coordinator spoke with Jose Miranda, Program Director, after the youth interview, he stated, "Hygiene products are available if youth have a need for them, and it is not a requirement to earn them." He stated, "This would be something he would speak to staff about being clearer with youth about.") When the youth were asked what they would change about the program, they reported: "Everyone can have more outings, different varieties of food we mostly get the same stuff, to have better food even though the food is good, more choices." All youth reported feeling respected by staff and safe at the program.

Observations: A walk through tour was conducted of the program in all areas where youth are allowed access. The program was well kept and observed to be clean and in good repair. Youth have a daily chore assigned to assist with the cleaning of the program. A contracted agency in the Marion County Detention Facility is responsible for all meals, which are prepared in the detention facilities kitchen. Meals are brought from detention to the GAP Program. The DHS Licensing Coordinator did not observe the detention's kitchen. The GAP Program has a kitchen that staff uses to make snacks and teach life skills with the youth. The kitchen at the GAP Program was clean and in good repair. The DHS Licensing Coordinator observed food in the refrigerator, and snacks in the cupboards for the youth. The DHS Licensing Coordinator observed two vans that staff use to transport youth in the program. There were no deficiencies observed with the vehicles.

Program Strengths:
The following strengths were identified by the Program Director at the time of the review:

- DBT based skills groups to help youth identify ways to make lasting change in their lives.
- A tenured staff that is skilled in building rapport with youth
- Program offers many outings to youth
- Supported by partnering Juvenile Department programs such as: Education Services; Probation Services; and Mental Health counseling.

Program Challenges:
The following strengths were identified by the Program Director at the time of the review:

- Creating successful aftercare once youth is discharged from the program.

- Adapting to the increasing needs of the youth (Mental Health issues, drug and alcohol dependency; and trauma informed care) to best serve them while running a structured program.
- Covid-19 related issues and protocols.
- Decreased relief staff pool.

Changes that have occurred in the last 2 years:
The following changes were identified by the Program Director at the time of the review:

- Covid-19 pandemic related issues and protocol.
- Revising how youth and families orient to the program.
- Looking for more activities to fill out the daily schedule.

Lawsuits: N/A

Grievances and complaints filed in the last two years: N/A

Corrective Actions and Timeframes: Please submit the following to verify compliance.
Within 45 days of receipt of this report Marion County GAP Program, 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 Holly Ivey, Licensing Coordinator. Her email address is: Holly.r.ivey@state.or.us

Exceptions: Two exceptions were requested and approved during the Licensing Renewal Process.

1. OAR 413-215-0566(1)(b) a residential care agency must obtain written approval from the parent or legal guardian and the licensing coordinator before two children in care may share a room when one of the children in care is 18 years of age or older.
   - Information provided to Licensing: Prior to entering the program, all youth and families were informed about the possibility of their child sleeping in the same dorm with a non-minor child. They all consented with written approval.
     DHS Licensing approved the exception until June 30, 2024.

2. OAR 413-215-0516 (3)(e) Have a minimum of 60 square feet per bed. (i)(A) There must be at least three feet between beds.
   - Information provided to Licensing: The program has a dorm setting with bunk beds set up for optimal viewing of staff. The youth have more than enough living space outside of the dorm to move around the program freely during waking hours.
     DHS Licensing approved the exception until June 30, 2024.

Changes in License: No changes

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**				
(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**				
Documents as indicated on form titled "Required Financial Documents and Information"	**X**				
All required policies and procedures as identified in the "Umbrella Rules"		**X**		**Supplemental Information Provided by CCA** All required policies and procedures as identified in the "Umbrella Rules" • *Required policy revisions are stated in detail at the end of the report.	
All required policies and procedures as identified in "Agency Type Specific Rules"		**X**		**Supplemental Information Provided by CCA** All required policies and procedures as identified in "Agency Type Specific Rules" • *Required policy revisions are stated in detail at the end of the report.	
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**			**Room and Space Requirements Bedrooms** 413-215-0516(3) (d) Ceiling at least 90 inches(i) Beds are 3 feet apart and maintained to ensure safety • An exception was granted by DHS Licensing, regarding the above stated rule and will be in effect until June 30, 2024. See above in the exception section for more detail. There is nothing further that needs to be sent to Licensing regarding the findings.	
(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**			(The Licensing Coordinator viewed the GAP Program's kitchen, which is not where meals are prepared for the youth.	

(b) Walls, floors are easily cleanable	X			Meals are prepared in the detention building's kitchen and brought to the GAP Program.)	
(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			Food is cooked and brought over to the program from Marion County's Detention Facility. The DHS Licensing Coordinator did not inspect the kitchen of the detention facility.	

(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**				
(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**				
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**			**Medication** 413-215-0551 (9) Written record of the disposal of medications is maintained and includes: (d) method • At the time of the review, nursing staff were utilizing an old disposal form that did not have the above required information.	
(4)&(5) Herbal supplements and remedies, medical treatments, special diets, physical therapy, physical aides or limitations have a	**X**				

written order signed by a physician or qualified medical professional.				• On 6.7.2022, Jose Miranda, Program Director, sent an email to Holly Ivey, Licensing Coordinator, stating that he added a footer to the disposal log to ensure that staff utilize the most recent disposal form, and he disposed of the old form. Jose Miranda sent a disposal log to the Licensing Coordinator that will be utilized that meets all the required Licensing Rules. There is nothing further that needs to be sent to Licensing regarding this finding. DHS Licensing will monitor ongoing compliance at the 2022, Unannounced Site Inspection.	
(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 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 *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				
(3)(g) Date of Hire	X				
(3)(a) record of education, training and previous employment	X				
(1)(b) & (3)(b) reference checks completed and documented	X				
(1)(a) & (3)(c) Background check completed and documented	X				
(3)(d) Annual performance evaluations	X				
(3)(f) Record of personnel actions			X		
(3)(g) Termination date, reason for termination			X		
(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	X				
New Employee Orientation – Umbrella Requirements (30 days) 413-215-0061(4)	**Yes**	**No**	**N/A**	**Corrective Actions/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				
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				
(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			**Ongoing Training** 413-215-0556(4) Designated staff authorized to apply reasonable and prudent parent standard are trained in application of the standard. • Verification of the above required training was missing in some of the personnel files reviewed. • On June 8, 2022, Jose Miranda, Program Manager, sent an email to Holly Ivey, Licensing Coordinator, confirming that staff had received the required Prudent Parent Training. (One relief staff will be trained later as she is taking several months off.) There is nothing further that needs to be sent to Licensing regarding this finding. DHS will monitor ongoing compliance at the 2022, Unannounced Site Inspection.	
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**				
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**				
(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**			**Consents** 413-215-0576(1) (c) Use restraint or seclusion Must specify the reasons for the intervention and how staff are trained and supervised • The consents being utilized were missing the above required information. • On May 25, 2022, Jose Miranda, Program Manager, sent Holly Ivey, Licensing Coordinator, a revised	
(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			GAP Voluntary Placement Agreement. The Placement Agreement included a consent that was modified to include all the above required information. The consent meets the Licensing Rule requirement. There is nothing further that needs to be sent to Licensing regarding this finding. DHS will monitor ongoing compliance at the 2022, Unannounced Site Inspection.	
(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			***Authorizations 413-215-0576(3)*** **(c) Visitation resources are pre-approved** • Authorizations reviewed lacked verification of approval by the guardians for visitation resources. • On May 19, Jose Miranda, Program Manager sent Holly Ivey, Licensing Coordinator, a revised GAP Screening Form that had a line for guardian approval of visitor contacts. This meets the Licensing Rule requirements. There is nothing further that needs to be sent to Licensing regarding this finding. DHS will monitor ongoing compliance at the 2022, Unannounced Site Inspection.	
(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**				
(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**		***Financial Records 413-215-0581(4) Records contain… source, purpose*** • The financial records forms being utilized did not have the above required information.	

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 Placement upon discharge	**X**				
Comments:					

*Supplemental information provided by the CCA as stated above (page 5). Required Policy Revisions:

413-215-0036 Licensing Umbrella Rules: Conflict of Interest *(Amended 12/01/19)* 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.

- The above required information was missing in the policies submitted.

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) 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. (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 **(The policy was missing "adequate clothing")** 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.

- The above required information was missing from the polices submitted.

(2) Grievance Procedures. (a) A child-caring agency must enact and adhere to written procedures for the children in care and families the child-caring agency serves to submit a grievance. The child-caring agency must provide the procedures to each child in care and family. The procedures must include all of the following: (A) A process likely to result in a fair and expeditious resolution of a grievance. (B) A prohibition of reprisal or retaliation against any individual who files a grievance. (C) 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. (D) The name, address, and phone number of: (i) A Department licensing coordinator; and (ii) Any other governmental entities with oversight responsibilities. (b) Grievances and complaints filed with the child-caring agency and all information obtained in their resolution must be maintained for a minimum of two years and provided to the Department upon request. (3) A child-caring agency serving children in care who are also in the care or custody of the Department must: (a) Post and adhere to the Oregon Foster Children's Bill of Rights in accordance with the requirements of OAR 413-010-0180 and comply with ORS 418.200 to 418.202; and (b) Have and adhere to a process for children in care in Department care or custody to make complaints consistent with ORS 418.201(1). (c) Comply with the Oregon Foster Children's Sibling Bill of Rights in accordance with the requirements of OAR 413-010-0180 and comply with ORS 418.607

- The above required information was missing from the polices submitted.

413-215-0056 Licensing Umbrella Rules: Policies and Procedures *(Amended 1/1/19)* (2) In addition to other policies and procedures required by these rules, the policies and procedures in section (1) of this rule must include: (a) A written policy on mandatory child abuse reporting, consistent with ORS 418.257, 418.258, 419B.005, 419B.010, and 419B.015 that includes requirements that child-caring agency employees, staff, contractors, agents, and proctor foster parents do all of the following: (A) Immediately report suspected child abuse directly to the Department via the child abuse reporting hotline. (C) Receive child-caring agency-provided training on the definitions of child abuse in ORS 418.257 and 419B.005 that apply in child-caring agencies.

- The above required information must be added to the Mandatory Reporting of Child Abuse Policy.

- Additional edits to the policy needed:
  - The Mandatory Reporting of Child Abuse policy on page 2 under **Policy** states," In particular, Oregon statute requires employees of certain public agencies to report situations where employees *have reasonable cause* to believe abuse has occurred. Reasonable cause could allow an employee to make the determination of what is "reasonable or not." The verbiage in the sentence should be replaced with "suspect abuse has occurred."
  - On Page 2 it is recommended that the Oregon Child Abuse State Hotline phone number should be added 1-855-503-7233. On page 5 B.2 states, "The reporter will make an oral report to the local law enforcement agency or to DHS -CPS within the county where the reporter is located." The Oregon Child Abuse State Hotline phone number should be added 1-855-503-7233 to the policy. Currently, child abuse is reported to Child Welfare through the 24-hour state hotline.

- Page 4 Number 3. States, “Failure to report suspected incidents of abuse, neglect or sexual assault may result in disciplinary action and or legal consequences.” It is recommended to change the verbiage, “Mandatory Reporters failure to report child abuse could result in a class A Violation.”

413-215-0066 Privacy *(Amended 06/29/18)* (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.

- The Confidential Client Information Policy 1 E, stated the following “Client information was not confidential and may be released. 1. The date and time and place of any juvenile court proceeding in which the juvenile is involved. 2. The juveniles address and names and address of juvenile’s parent or guardian. 3. The name of the investigating and arresting agency. 4. The offense for which the juvenile was taken into custody. F. Any information released to the media may only be released with the approval of the Director or Deputy Director.”
    - The privacy policy must be changed to be in compliance with the above stated Licensing Rule.

413-215-0076 Licensing Umbrella Rules: Discipline, Behavior Management & Training, and Suicide Prevention (Excluding Adoption Agencies) *(Amended 02/01/2022)*
(1) (b) The discipline and behavior management policies and procedures must prohibit the following: (B) Committing an act designed to…. degrade a child in care or undermine the self-respect of a child in care. (H) Using any other kind of harsh punishment. (I) Denying a …. sibling the right to visit or communicate with a child in care solely as a disciplinary measure against 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….self-esteem. (3) Behavior Management. (d) Training. (A) Only child-caring agency staff 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. (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 management techniques. The child-caring agency must take appropriate action indicated by the review.

- The above required information was missing from the polices submitted.

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(4) Suicide Prevention. The policy must include the following: (b) Warning signs of suicide; (d) Training requirements for staff, including suicide prevention training and suicide risk assessment tool training; (h) A process for tracking suicide behavioral patterns.

- The above required information was missing from the polices submitted.

413-215-0077 Licensing Umbrella Rules: Restraints and Involuntary Seclusion *(Adopted 02/01/2022)* (1) A child-caring agency may only place child in care in a restraint or involuntary seclusion if the child in care’s behavior poses a reasonable risk of imminent serious bodily injury to the child in care or others and less restrictive interventions would not effectively reduce the risk. (2) A child-caring agency may not place a child in care in a restraint or involuntary seclusion as a form of discipline, punishment, or retaliation or for the convenience of staff, contractors or volunteers of the child-caring agency. (3) If the child-caring agency utilizes restraints or involuntary seclusion as part of its practices, its use of restraints and involuntary seclusion must be in compliance with all applicable federal and state laws, regulations and rules. (4) A child in care placed in a restraint or involuntary seclusion must be continuously monitored by staff of the child-caring agency for the duration of the restraint or involuntary seclusion. (5) Any restraint or involuntary seclusion used on a child in care must be performed in a manner that is safe, proportionate and appropriate, taking into consideration the child in care’s chronological and developmental age, size, gender identity, physical, medical and psychiatric condition and personal history, including any history of physical or sexual abuse. `(6) If any restraint or involuntary seclusion lasts for more than 10 minutes, the child-caring must provide adequate access to the bathroom and water at least every thirty minutes to the child in care.

(7) For any restraint or involuntary seclusion lasting more than 10 minutes a supervisor, trained in the non-violent crisis intervention system used by the child-caring agency must provide written authorization for the continuation of the restraint or involuntary seclusion every five minutes. (a) If the supervisor is not on-site at the time the restraint is used, the supervisor may provide the written authorization electronically. (b) The written authorization must document why the restraint or involuntary seclusion continues to be the least restrictive intervention to reduce the risk of imminent serious bodily injury in the given circumstances. (8) Restraint. (a) The following types of restraint of a child in care are prohibited: (C) Prone restraint. (D) Supine restraint, (E) Any restraint that includes the nonincidental use of a solid object, including the ground, a wall or the floor, to impede a child in care's movement, except: (i) This type of restraint may be used if the restraint is necessary to gain control of a weapon or; (F) Any restraint that places or creates a risk of placing pressure on a child in care's neck or throat. (G) Any restraint that places or creates a risk of placing, pressure on a child in care's mouth, except: (i)This type of restraint may be used if the restraint is necessary for the purpose of extracting a body part from a bite. (H) Any restraint that impedes, or creates a risk of impeding, a child in care's breathing. (I) Any restraint that involves the intentional placement of hands, feet, elbows, knees or any object on a child in care's neck, throat, genitals or other intimate parts. (J) Any restraint that causes pressure to be placed or creates a risk of causing pressure to be placed, on a child in care's stomach, chest, joints, throat or back by a knee, foot or elbow. (K) Any other restraint which the primary purpose is to inflict pain. (b) Permissible use of restraint. A restraint may be used on a child in care in the following situations: (A) Holding a child in care's hand or arm to escort the child in care safely and without the use of force from one area to another; (B) Assisting the child in care to complete a task if the child in care does not resist the physical contact; or (C) Using a physical intervention if: (i) The intervention is necessary to break up a physical fight or to effectively protect a person from an assault, serious bodily injury or sexual contact; (ii) The intervention uses the least amount of physical force and contact possible: and (iii) The intervention is not a prohibited restraint identified in OAR 413-215-0077(8)(a) (c) Only child-caring agency staff and proctor foster parents who have been trained in a nationally recognized nonviolent crisis-intervention system may use restraint and only when necessary as a last resort to prevent a child in care from inflicting harm to self or others. The restraint must be conducted within the parameters of the nationally recognized system in which the staff or proctor foster parent is trained. (d) Any use of restraint by a staff member of the child-caring agency, if the member is not trained in a nationally recognized nonviolent crisis intervention system, must also be reported to a Department licensing coordinator within one business day of occurrence. (10) Records (a) A program shall maintain a record of each incident in which a reportable injury arises from the use of a restraint or involuntary seclusion. The record must include any audio or video recording immediately preceding, during and following the incident. (b) If a program places a child in care in a restraint, except as described in OAR 413-215-0077(8)(b)(A) or 413-215-0077(8)(b)(B) or involuntary seclusion, the program shall provide the child in care's case manager, attorney, court appointed special advocate and parent or guardian with: (A) Verbal or electronic notice that the restraint or involuntary seclusion was used as soon as practicable following the incident but not later than the end of the next business day; and (B) Written notice in compliance with OAR 413-215-0077(10)(c) that the restraint or involuntary seclusion was used as soon as practicable following the incident but not later than the end of the next business day. (c) The written notice must include:(A) A description of the restraint or involuntary seclusion, the date of the restraint or involuntary seclusion, the times when the restraint or involuntary seclusion began and ended and the location of the restraint or involuntary seclusion; (B) A description of the child in care's activity that necessitated the use of restraint or involuntary seclusion; (C) The efforts the program used to de-escalate the situation and the alternatives to restraint or involuntary seclusion the program attempted before placing the child in care in the restraint or involuntary seclusion; (D) The names of each of individual who placed the child in care in the restraint or involuntary seclusion or who monitored or approved the placement of the child in care in the restraint or involuntary seclusion; (i) For each individual identified whether the individual was trained, as required by the Department of Human Services by rule, in the use of the type of restraint or involuntary seclusion used, the date of the individual's most recent training and a description of the types of restraint the individual is trained to use, if any. (ii) If an individual identified was not trained in the type of restraint or involuntary seclusion used, or if the individual's training was not current, a description of the individual's training deficiency and the reason an individual without the proper training was involved in the restraint or involuntary seclusion. (d) If an incident requires notice under 413-215-0077(b), not later than two business days following the date of the restraint or involuntary seclusion, the program shall hold a debriefing meeting with each individual who was involved in the incident and with any other appropriate program staff, shall take written notes of the debriefing meeting and shall provide copies of the written notes to the child in care's case manager, attorney, court appointed special advocate and parents or guardians. (e) If a program places a child in care in a restraint or involuntary seclusion and the child in care suffers a reportable injury arising from the restraint or involuntary seclusion, the program shall immediately provide the department and the child in care's attorney, court appointed special advocate and parents or guardians with written notification of the incident and access to and, upon request, copies of all records related to the restraint or involuntary seclusion, including any photographs and audio or video

recordings.(f) If serious bodily injury or the death of staff occurs in connection to the use of the restraint or involuntary seclusion, the program shall provide the department with written notification of the incident not later than 24 hours following the incident. (11) Reporting Requirements (a) A child caring agency must submit a report to the Department on a quarterly basis that includes at a minimum: (A) The total number of incidents involving restraint. (B) The total number of incidents involving involuntary seclusion. (C) The total number of involuntary seclusions in a locked room. (D) The total number of rooms available for use by the program for involuntary seclusion and a description of the dimensions and design of the rooms. (E) The total number of children in care placed in restraint. (F) The total number of children in care placed in involuntary seclusion. (G) The total number of incidents under paragraph (A) or (B) of this subsection that resulted in reportable injuries. (H) The number of children in care who were placed in restraint or involuntary seclusion more than three times during the preceding three-month period and a description of the steps the program has taken to decrease the use of restraint and involuntary seclusion. (I) The number of incidents in which an individual who placed a child in care in a restraint or involuntary seclusion was not trained, as required by the department by rule, in the use of the type of restraint or involuntary seclusion used. (J) The demographic characteristics of the children in care who the program placed in a restraint or involuntary seclusion, including race, ethnicity, gender, disability status, migrant status, English proficiency and status as economically disadvantaged, unless the demographic information would reveal personally identifiable information about an individual child in care. (b) If a child caring agency provides services in more than one location, the reports required under subsection 413-215-0077(11)(a) must separate the data for each location that serves five or more children in care. (c) If a child caring agency provides services to four or fewer children in care at a location, the location specific data must include a notation indicating the aggregate number of children in care served by the child caring agency across all of its locations and the reporting requirements continue to apply to any of the child care agency's other locations serving five or more children in care. (d) Each child caring agency that submits a report under this section shall make its quarterly report available to the public upon request at the Child Caring Agency's main office and on the child caring agency's website if applicable. (e) Each child caring agency shall provide notice regarding how to access the quarterly reports to the parents or guardians of children in care in the program. The child caring agency shall provide the notice upon the child in care's admission and at least two times each year thereafter.

- The above required information was missing from the polices submitted.

413-215-0546 Health Services *(Technical Amended 01/13/20)* (5) A *residential care agency* must have written procedures for accessing routine and urgent medical care for children in care, including obtaining necessary consents.

- The Administration of Medication and Medical Care policy was missing how the agency would obtain necessary consents.

413-215-0551 Medication *(Technical Amended 01/13/20)* A *residential care agency* must meet all of the following requirements: (1) Policy and procedures. The *residential care agency* must have policies and procedures that cover all prescription and non-prescription medications that address all of the following: (c) How the *staff* of the *residential care agency* who administer *medication* will be trained. (f) How unused *medication* will be disposed of.
(g) The process that ensures that each child in care's prescription and non-prescription medications are reviewed, unless the medications are all provided through a single pharmacy. As used in this rule, "non-prescription medication" means any *medication* that does not require a written prescription for purchase or dispensing and includes the use of any herbal remedies or supplements.

- The above required information was missing from the polices submitted.

413-215-0541 Residential Care Agencies: Safety *(Amended 1/1/19)* A residential care agency must meet all of the following requirements related to safety: (2) Emergency plan. (a) The residential care agency must have, for each facility it operates, a written emergency plan that includes: (A) Instructions for evacuation of children in care and employees in the event of fire, explosion, accident, or other emergency.
(B) Instructions for response in the event of a natural disaster, external safety threat, or other emergency.

- The above required information was missing from the polices submitted.

413-215-0576 Consents, Disclosures, and Authorizations *(Amended 02/01/2022)* (a) To provide routine and emergency medical care. However, if the parent or legal guardian relies on prayer or spiritual means for healing in accordance with the creed or tenets of a well-recognized religion or denomination, the *residential care agency* is not required to use medical, psychological or rehabilitative procedures, unless the *child in care* is old enough to consent to these procedures and does so. The *residential care agency* must have policies and procedures for this practice, which are reviewed and approved by the child in care's parent or legal guardian.

- The above required information was missing from the polices submitted.

Licensing Coordinator's Signature: _____ Date: 6/28/2022

Manager Review: _____ Date: 6/21/2022