



Licensed Child Caring Agency Unannounced Site Visit Report

Licensee: Milo Adventist Academy

Principal: Randy Thornton

Date of Unannounced: 5/20/2022

Licensing Coordinator: Mary Torres

Other Regulatory or Accrediting Agencies: Adventist Accrediting Association (AAA), Middle States Association of Colleges and Schools Commissions on Elementary and Secondary Schools (MSA-CESS) and National Council for Private School Accreditation

Purpose: Per OAR 413-215-0101 (1) (b) Children's Care Licensing is required to perform at least one unannounced site visit a year where children in care reside.

Previous Findings from 2021 Review dated 10/12/21	Repeat Findings Further Action Needed	Comments
Governance of the Agency 413-215-0021 (2)(f) The principal's evaluation was completed for the 2020 – 2021 licensing period. It is being requested that the evaluator date and sign the performance appraisal and resubmit it to Licensing.	Yes ☐ No ☒	Completed and resubmitted via email on 3/9/22.
Governance of the Agency 413-215-0021 (2)(g) The organization did not submit a budget signed and approved by the board. Corrective Action: Resubmit the school's budget with board approval evidenced by their signatures.	Yes ☐ No ☒	Approved budget by board submitted via email on 12/20/21.

Discipline, Behavior Management, and Suicide Prevention 413-215-0076 (4) Since 2019, the Academy has been working with Licensing to develop a Suicide Prevention Policy. Although the majority of the work has been completed, Licensing is still awaiting a final draft Corrective Action: Revise last revision of the school's Suicide Prevention Policy that includes Licensing's recommendations. The policy must require the completion of an incident report and sending it to Licensing as well as determining if a call to the Child Abuse Hotline is warranted.	Yes ☐ No ☒	Completed and resubmitted via email on 12/2021.
Documents as indicated on the form titled "Renewal Licensing Required Documents" Missing documentation: - Certificates of Occupancy for all the buildings - Copy of completed fire marshal inspection for 2021 - A written program description that meets the Licensing requirements. Corrective Action: Submit the missing documents listed above. If further assistance is needed, please reach out to the Licensing Coordinator in a timely manner.	Yes ☒ No ☐	Certificates of Occupancy and completed Fire Marshal inspections were submitted via email on 12/20/21 and 1/3/22. A written program description has yet to be submitted.
Documents as indicated on form titled "Required Financial Documents and Information" Missing documentation: - Signed tax authorization form 8821 - Completed tax compliance certification from Department of Revenue. Corrective Action: Submit the missing documents listed above to Licensing.	Yes ☒ No ☐	Tax form 8821 was submitted via email on 12/20/21. The program's Tax Compliance Certification form has yet to be submitted.
All required policies and procedures as identified in the "Umbrella Rules" Missing policies and procedures: - Grievance procedure for children and families - Mandatory child abuse reporting policy	Yes ☐ No ☒	These missing policies were submitted via email on 12/20/21 and 3/9/22.

- Discipline policy that meets the Licensing requirements. - A written policy and procedure on documenting, reporting, and saving information about critical events. Corrective Action: Create and submit the above policies. If further assistance/guidance is needed, please reach out the Licensing Coordinator in a timely manner.		
Physical Plant 413-215-0216(2)(a) &(c) Buildings are smoke free, clean and in good repair Various areas throughout the campus require attention and/or repair. Music Building: - Toilets need to be deep cleaned Girls' Dorm: - 2nd floor bathroom – vent needs to be dusted and cleaned - 2nd floor bathroom – missing 2 shower heads As recommended in the school's Health Inspection dated 8/26/2021, provide covers for sanitary disposal receptacles Gym: - Boys' bathroom needs two light covers Boys' Dorm: - Room #241 needs to be cleaned and broken closet door repaired - In the "COVID isolation wing" vanity and broken items need to be removed from the hallway - Bathroom in the "COVID wing" needs to be cleaned - Bathroom in the "quarantine wing" has a dripping shower head and water drip stains need be cleaned Corrective Action: Address and/or repair the above items. Provide pictures once tasks have been completed.	Yes ☐ No ☒	Photos to reflect repairs were submitted on 12/202/21.

Physical Plant 413-215-0216(2)(h) Building is well ventilated and room temperature is within a normal comfort range Youth reports that the girls' dorm bedrooms are not warm enough. The girls' dean confirms having previously learned of the concern and had offered extra blankets. Corrective Action: The Administration will increase the temperature in the buildings.	Yes ☐ No ☒	Temperatures were increased in the dorms.
Furnishings and Personal Items 413-215-0221 (2) Linens are in good repair. There is a waterproof mattress cover or mattress. Linens are appropriate and towels and washcloths are provided Some of the mattress covers in the girls' dorm are fabric and not waterproof. Corrective Action: Replace all fabric mattress covers with waterproof covers.	Yes ☒ No ☐	This is a repeat finding as some mattresses in the girls' dorm still have fabric covers or no waterproof covers.
Safety – Emergency Plan 413-215-0241 (2)(a) Written emergency plan The school's emergency plan was not submitted for review. Corrective Action: Submit a copy of the Academy's emergency plan to Licensing for review.	Yes ☐ No ☒	Emergency plan submitted via email on 12/20/21.
Medication 413-215-0251 (6) Written record of the disposal of medications There is no written disposal policy or record of medications that are disposed of. Corrective Action: Create a policy regarding the appropriate disposal of medication and submit a copy of a disposal log to Licensing for review.	Yes ☐ No ☒	Submitted via email on 12/20/21.

Medication 413-215-0251 7) Written record of the administration of medication includes: (i) medication taken outside facility Medication taken outside of the school when a youth visits home for example is not being recorded. Corrective Action: Add documentation to the current medication administration log regarding medication taken outside of facility to include quantity (leaving and returning) and the dates that the youth and medication were off campus.	Yes ☐ No ☐	Compliance in this area will be verified at the next review.
Personnel Files 413-215-0061 (3)(g) Date of Hire Personnel files did not clearly state the employees hire date. Corrective Action: Implement a process where a newly hired employee's official date of hire is documented.	Yes ☐ No ☒	Ongoing compliance in this area will be verified at the next review. A review of new hire files at the time of this unannounced visit, reflects changes made to ensure the hire date is captured.
Personnel Files 413-215-0061 (1)(b) & (3)(b) reference checks complete and documented There was no evidence that reference checks were completed and documented in 4 out of the 6 personnel files reviewed. REPEAT FINDING from 2019 review. Corrective Action: Implement a process where reference checks are completed and documented moving forward.	Yes ☐ No ☒	Ongoing compliance in this area will be verified at the next review. A review of new hire files at the time of this unannounced visit, reflects changes made to ensure the completion and documentation of reference checks.
Personnel Files 413-215-0061 (3)(d) Annual performance evaluations No annual evaluations were documented over the last licensing period for all files reviewed. REPEAT FINDING from 2019 review.	Yes ☐ No ☐	Compliance in this area will be verified at the next review.

Corrective Action: Implement a system where annual evaluations are completed for all employees from this point forward.		
Personnel Files 413-215-0061 (3)(f) Record of personnel actions Half of the personnel files did not show evidence of recorded personnel actions throughout the employee's employment. Corrective Action: Create a process to document all personnel actions that occur over the course of employment.	Yes ☐ No ☒	Ongoing compliance in this area will be verified at the next review. A review of new hire files at the time of this unannounced visit, reflects changes made to record personnel actions.
New Employee Orientation (30 days) 413-215-0061(4) Documentation and completion of new employee orientation to include agency policies and procedures, ethical and professional guidelines, organizational lines of authority, attributes of population served and emergency procedures could not be verified during the review of personnel files. Licensing has previously assisted the Academy with a personnel employment checklist. This checklist was observed in the personnel files during this review, but is not being fully utilized. REPEAT FINDING from 2019 review. Corrective Action: Implement the existing checklist or develop a new process to verify the completion and documentation of new employee training within 30 days of hire.	Yes ☐ No ☐	Full compliance in this area will be verified at the next review. A review of new hire files at the time of this unannounced visit reflects a good start on ensuring the participation and completion of new employee orientation but could not be completely verified at this time.
Ongoing Training 413-215-0236(2)(b) Employees who handle food served to children have a valid food handler's card An employee whose main role on campus is to handle food during school instruction, did not have a valid food handler's card in the personal file. Other unidentified staff, reportedly perform kitchen duties without a food handler's card.	Yes ☐ No ☐	Compliance in this area will be verified at the next review.

Corrective Action: Ensure that all employees who handle food or could possibly be recruited to assist in the preparation of food in the school's cafeteria possess valid food handler's cards.		
Children's Records Information about children in care 413-215-0276 Files contain the following information: (2) The date of admission Youth files reviewed did not state student's official date of admission. Corrective Action: Develop a system where the student's official date of admission is clearly documented within the youth's intake paperwork and/or student file.	Yes ☐ No ☐	Compliance in this area will be verified at the next review.
Children's Records Information about children in care 413-215-0276 Files contain the following information: (4) Incident Reporting. A written description of any injury, accident, or unusual incident The school has failed to report a critical incident mentioned to Licensing dating back to summer of 2021. The administration had also been asked to create an incident reporting template. This has yet to be completed. REPEAT FINDING from June 2021 Unannounced site visit. Corrective Action: - Report the above-mentioned critical incident in writing to Licensing. - Create and submit an incident reporting template for Licensing's approval	Yes ☐ No ☒	This information was submitted via email on 12/20/21.
Authorizations 413-215-0271 Information about children in care 413-215-0276 Files contain the following information: (5) Any required signed consents and authorizations.	Yes ☐ No ☐	Compliance in this area will be verified at the next review.

Required consent regarding the following is missing from the school's intake paperwork Corrective Action: Add a consent statement advising that the school will make any written policy or procedure available for review by the child, parent or legal guardian upon request.		
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New Findings from Site Visit	Comments
Furnishings and Personal Items 413-215-0221 (2) Linens are in good repair. There is a waterproof mattress cover or mattress. Linens are appropriate and towels and washcloths are provided Some of the mattress covers in the girls' dorm are fabric and not waterproof. REPEAT FINDING from 2021 October Review	Corrective Action: Replace all fabric mattress covers with waterproof covers.
Physical Plant 413-215-0216(2)(a) &(c) Buildings are smoke free, clean and in good repair Boys' Dorm Room No. 322 is still missing its' door. Second floor hallway has multiple areas where the walls have been repaired but have yet to be painted.	Corrective Action: Replace Room #322's door and repaint repaired walls on the 2 nd floor hallway.
Documents as indicated on the form titled "Renewal Licensing Required Documents" Missing documentation: A written program description that meets the Licensing requirements. REPEAT FINDING from 2021 October Review	Corrective Action: Submit the missing document listed to Licensing.

Documents as indicated on form titled “Required Financial Documents and Information” Missing documentation: Completed tax compliance certification from Department of Revenue. REPEAT FINDING from 2021 October Review	Corrective Action: Submit the missing document listed to Licensing.

Interview Summary
Tours of the dorms were conducted by the dorms’ respective Deans. The new girls’ assistant dean was introduced during the tour. This school year, 45 girls were housed on campus. A newly independent contracted mental health counselor recently joined the Academy. She started in January and is a Milo alumni familiar with the campus, educational practices and expectations. The mental health counselor primarily meets with youth over Zoom but is also on campus a few times a month. There was discussion with the girls’ dean and with the school’s principal about implementing a consent form during the intake process regarding on site mental health services for students. The Academy plans to have the mental health counselor assist in the mental and physical health screening process of incoming students The school’s nurse remains on campus and is available to both youth and staff. The school year’s general population was described as being “50/50” with international and domestic youth. The Congo and Ukraine were the two primary countries where youth came from this school year. The Academy is expecting 15 new Ukraine students coming to school next year. These students were referred from a Portland Ukrainian church. The boys’ dorm housed 37 boys this school year. The boys’ dean shared that behavioral issues made this last school year difficult, but no extraordinary issues were noted. Some youth will remain on campus over the summer to work. Four youth were interviewed. All youth report having a positive experience at Milo Academy.. Specific strengths identified by the youth include a family environment, teachers who care, the work, sports and agricultural programs, helpful staff, and the school’s location. Areas where youth would suggest changes include a more flexible dress code, more outings, better funding for the sports program to include formal and experienced coaching. Youth report having adequate and appropriate supervision. It was reported that staff are present at all times and students are required to check in and out when leaving the dorm area. Youth also identified that there is no unsupervised mixing between opposite genders. All youth feel that staff are adequately trained, and youth feel comfortable approaching any staff to report any issues or problems.

Two youth report concerns that the school is not doing enough to bring the different student body population together. They report that students separate themselves based on race and language. Youth would like to see staff encourage, model and create more opportunities for all students to spend time with each other. One youth recommended having regular house meetings as a solution. In addition, two youth report experiencing positive feelings and outcomes with the new mental health counselor on campus. One youth reports having difficulty relating to this person in general but sees the benefit of having mental health services on site. Another youth reports that a fulltime mental health provider physically on campus would be helpful and is needed.

All youth report frequent and daily family contact and list extra activities to include getting ice cream, having recreational time during open gym, swimming at the river in designated areas, a variety of sports, paintball, and off campus activities on the weekends.

Observations

The entire campus was preparing for the end of the school year events as evidenced by the active packing students were conducting and the school's graduation preparation.

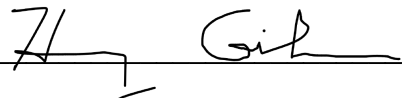
Corrective Actions and Timeframes:

Please submit the following to verify compliance.

Within 45 days of receipt of this report **Agency Name** must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents can be emailed directly to **Licensing Coordinator email address** or sent by regular mail to the following address:

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

Licensing Coordinator's Signature:  Date: 6/10/22

Manager Review:  Date: 6-10-2022