



Licensed Child Caring Agency Site Visit Report Residential Care

Licensee: Washington County Juvenile Department
Shelter Manager: LaRoy LaBonte
Juvenile Services Supervisor: Carol Anderson

Board Chairperson: Kathryn Harrington
Date of site visit: 06/02/22
Licensing Coordinator: Mary Torres

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

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: As written on the program's website, the Washington County Juvenile Shelter (Harkins House) is a short term temporary residential shelter care and evaluation program. The program provides evaluation and individual care for delinquent youth pending alleged violations of the law who volunteer to participate in lieu of detention. The program has capacity for eighteen youth, both boys and girls between the ages of twelve and seventeen years old. Professional staff work 24/7 assisting in the daily care and supervision of each youth while documenting and reporting their observation and recommendations in a final report to the Juvenile Court. The program performs a comprehensive evaluation of each youth assessing the youth's response to a well-defined set of rules and expectations, opportunities for positive recreational, artistic, and cultural activities, school, and individual and family counseling. Both personal responsibility and maintaining respectful behavior are strongly emphasized. The program partners with Hillsboro School District for the operation of an on-site year-round public school. Family counseling services are provided to all youth and their family through Youth Contact.

Program type and services: Harkins House Basic Residential provides youth with individual and group skill building, individual counseling, parent training, recreational activities, and opportunities for community outings.

Capacity and Age Range: 18 youth, ages 12 – 17 years old

Funding, Contracts, and referral sources: Washington County general fund, Oregon Department of Education (ODE), Oregon Health Authority (OHA), Oregon Department of Human Services (ODHS)

Average length of stay: 57 days

Average daily population served: 7 youth

Number of children served annually: 45 youth

Use of seclusion or restraint: The program does not utilize the use of seclusion and/or restraint. Staff are trained in Crisis Prevention Institute (CPI) – Nonviolent Crisis Prevention

Interviews, Observations: The tour of the facility was led by the Juvenile Services Supervisor. Conversations were held with various staff members and three youth were interviewed. Managers identify COVID as a major struggle this last licensing period. This translated to limited employee training, transitional visits for residents and staffing shortages. Despite challenges, the program remains forward thinking, looking at creating a youth advisory council and revising the program's curriculum. There are currently 14 youth in program. The program works closely with a nearby farm where youth are allowed to work and harvest seasonal fruit and vegetables. Youth will also prepare meals for peers with this produce.

All youth report having positive experiences in the program. Youth report feeling safe and are comfortable approaching any staff member with concerns and/or questions. Staff are reportedly well trained and are readily available to youth. Identified strengths of the program include outings, group sessions, the amount of family contact and being able to wear their own clothing. Areas of improvement include being able to double up mattresses as a single mattress does not provide enough support and the length of "down time" youth are expected to take alone in their bedrooms, another youth encouraged staff to provide "more supervision" when youth circle up and talk among themselves. This youth stressed the importance of staff knowing what youth are talking about for safety reasons. Management was advised of this very specific request. It was acknowledged that this particular youth is triggered when there is a sense that their safety could be compromised. Staff understand this particular youth's needs and are prepared to intervene if needed. Youth report daily contact with family members. Given the program's current milieu size, phone calls are limited to ten minutes, allowing all youth to have some family contact daily. When census is low, youth are given more phone time.

Program Strengths: Strengths summarized by the program are as follows: The core of the leadership and residential staff has remained consistent for the last 5 years. Staff that work in the facility have a passion to serve the high-risk youth that come into our facility. All staff are trained in trauma informed care and discussions routinely occur in regard to issues of equity for the youth we serve. We consider our program a hands-off facility – the only times staff have needed to assist in intervening physically has been when the Juvenile Department Custody Services Unit is taking our youth into custody for violating conditions of release/probation. We are continuing to improve at giving youth and families more of a voice in their planning and setting goals. We strive to create as much of a home-like environment as possible where the youth participate in daily chores to help keep the facility clean. While the pandemic has been difficult on all of us, the staff have been resilient. In the summer of 2020, we changed from a BRS Shelter Evaluation Facility to a Basic Residential Facility and now offer additional services to the youth in our care.

Program Challenges: The program reports that the COVID-19 pandemic has been a struggle for staff and youth in our facility. We have limited visitation and home visits in an effort to ensure the safety of youth and staff. We have experienced a large amount of staff turnover starting in

September 2021 and we are still not fully staffed. We have three vacant positions as I fill out this form. For over two years we capped our population at 9 youth to allow for social distancing. We have recently increased that cap to 14 youth and so our staff are adjusting to supervising a larger population of high-risk youth. With restrictions on the size of gatherings over the last two years and the staff transition, it has been difficult to provide and offer training to the entire team on a structured, regular basis.

Changes that have occurred in the last 2 years: The program shares the following changes: Changes reported by the program include our facility from a BRS Shelter Evaluation program to a BRS basic residential program in the summer of 2020. This requires our staff to provide additional services and results in an increased workload. We have also experienced a large turnover during the pandemic and still have three vacant Juvenile Counselor 1 positions. The hiring pools are getting smaller and the experience level in applicants overall has decreased. Despite this we have been able to hire a number of smart, talented team members who have a passion for this work. In addition, we have recently hired a Juvenile Services Supervisor for Harkins House who will assist the Program Manager in guiding and directing the work our staff members do for the youth and families.

Lawsuits: None reported as per the program.

Grievances and complaints filed in the last two years: As reported by the program: We have had grievances filed. The vast majority, if not all, are grievances due to consequences the youth have received and the youth are unhappy. On two occasions I spoke with the parents about their concerns regarding consequences and/or staff actions. All grievances were resolved through conversations and listening to the concerns of youth/parents. On two or three occasions, youth exited the program prior the grievance being addressed due to my lack of availability during those times. We have changed our policy to allow any lead or supervisory staff to respond to grievances. Grievances are put in the youth's files.

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

Within 45 days of receipt of this report **Washington County Juvenile Department** must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents can be emailed directly to **Mary Torres** at mary.torres@odhsoha.oregon.gov or sent by regular mail to the following address:

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

Exceptions: There have been no requested exceptions over the last licensing period.

Changes in License: None

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			A copy of the program's quality improvement plan was not submitted to Licensing for review. CORRECTIVE ACTION: Submit a copy of the program's quality improvement plan to Licensing.	
(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			A new criminal background check is required for the Shelter Manager for the new licensing period. CORRECTIVE ACTION: Request and submit a copy of the Shelter Manager's newly approved background check for this new licensing period.	
(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		- Certification of Occupancy was not submitted - Submitted Environmental Health Inspection was incomplete. CORRECTIVE ACTION: - Submit copy of Certificate of Occupancy. - Resubmit completed inspection form that is signed, dated, and indicates if the inspection was approved or not approved.	
Documents as indicated on form titled "Required Financial Documents and Information"	X				
All required policies and procedures as identified in the "Umbrella Rules"				- Conflict of Interest was not submitted for review. - Youth and Parent Rights requires modification. - Grievance Policy requires modification. - Mandatory Reporting Policy requires modification. CORRECTIVE ACTION: - Submit copy of Conflict-of-Interest Policy - Revise 6.2.1 Youth and Parent Rights to include highlighted information.	

413-215-0046 Licensing Umbrella Rules: Children and Families Rights Policy and Grievance Procedures (Amended 1/1/19)

(a) Except as provided in paragraph (B) of this subsection, the child in care's right to uncensored communication with legal guardians, caseworkers, legal representatives, and other persons approved for communication by the legal guardian or as provided in a court order.

(A) This right cannot be waived, including voluntarily. Restriction on communication between a child in care and his or her legal guardian may not be a condition of participation in the program.

(B) A child-caring agency may place reasonable limits on communication, but only as provided in the child-caring agency's policy. Reasonable limits include, but are not limited to, having set time periods during the day for visitation and phone calls and imposing moderate limits on the duration of calls or visits. However, a limitation is not considered reasonable if it prevents the ability to meaningfully communicate, such as not allowing contact with a child in care's attorney during regular business hours.

(b) The child in care's right to privacy.

(c) The child in care's right to participate in service planning or educational program planning.

(d) The child in care's right to fair and equitable treatment.

(e) The child in care's right to file a grievance (as provided in section (2) of this rule) if the child in care or family feels that they are treated unfairly or if they are not in agreement with the services provided.

(h) The child in care's right to an appropriate education.

(i) The child in care's right to participate in recreation and leisure activities.

(j) The child in care's right to have timely access to physical and behavioral health care services

			- Revise 6.2.4 Grievance Policy to include highlighted information. 413-215-0046 Licensing Umbrella Rules: Children and Families Rights Policy and Grievance Procedures (Amended 1/1/19) 2) Grievance Procedures. (a) The procedures must include all of the following: (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; Mary Torres, 201 High St SE Suite 500 Salem OR 97301 503-798-5300 (ii) Any other governmental entities with oversight responsibilities. - Revise 6.4.3 Mandatory Reporting Policy to include highlighted information. 413-215-0056 Licensing Umbrella Rules: Policies and Procedures (Amended 1/1/19) (B) Receive child-caring agency-provided training on mandatory abuse reporting requirements as part of employee orientation and at least annually thereafter as described in OAR 413-215-0061. (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 Update hotline # to the current Oregon Child Abuse Hotline (ORCAH) as the number listed in the policy is disconnected. ORCAH # 855-503-7233	
All required policies and procedures as identified in "Agency Type Specific Rules"	X			

Physical Plant	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
413-215-0046(3)(a) Foster Rights Posted (if children in DHS custody)	X			Window sills located in the wellness room and in bedroom #281 located in the blue dorm are damaged and/or have etched in words/symbols associated with gang affiliation. CORRECTIVE ACTION: Repair damaged window sills and submit photos of repaired areas Staff report that during the summer, the facility's air conditioner does not effectively cool the facility. CORRECTIVE ACTION: Address concern with facilities to resolve or improve the facility's cooling system.	
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	Corrective Actions/Comments	Corrective Action Completed
(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	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			The bathroom and shower areas do not appear to have a working ventilation system.	
(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	CORRECTIVE ACTION: Follow up with facilities and explore ventilation options for the bathrooms and shower areas.	
Room and Space Requirements Kitchen 413-215-0516(6)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(a) Used exclusively for storage, food preparation, dish washing and activities related to eating	X				
(b) Walls, floors are easily cleanable	X				
(c) Equipment and utensils are easily cleanable, durable, nontoxic, and kept clean	X				
(e) Equipment is easy to clean beneath, between and behind	X				
Room and Space Requirements 413-215-0516	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(2) There is a separate living room or lounge area – 15 SF minimum per child	X				
(5) There is a separate dining room with capacity for ½ of children in care and 15 SF per child in care	X				
(7) Laundry is separate from living areas, kitchen, and dining	X				
(8) Separate storage areas are provided for food, kitchen supplies, utensils, clean linens, soiled linens and clothing, cleaning supplies and equip, poisons, chemicals, outdoor recreational and maintenance equipment	X				
(9) Outdoor activity area is protected from vehicles and other hazards and of a size and availability appropriate to the age and needs of children in care	X				
(11) & 413-215-0076(3)(c)(C)Time out rooms have adequate space, heat, light and ventilation and is not capable of locking			X		
Furnishings and Personal Items 413-215-0521	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1) There is a bed with frame, clean mattress and pillow and personal storage (dresser, closet)	X				

(2) Linens are in good repair. There is a waterproof mattress cover or mattress. Linens are appropriate and towels and washcloths are provided	X				
(3) Bedding is changed weekly or when soiled	X				
(4)&(5) Personal hygiene supplies and appropriate clothing are provided	X				
Food Services 413-215-0536(1)&(2)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1)(a) Meals are arranged daily, consistent with normal mealtimes that occur during the hours of operation	X				
(1)(b) Menus are prepared in advance in accordance with USDA guidelines, provide a variety of foods and are adjusted for seasonal changes.	X				
(1)(b) Menus are kept for at least 6 months	X				
(1)(c) Drinking water is freely available	X				
(2)(a) Food is stored, prepared & served in a sanitary manner	X				
(2)(c) & (d) Food products are obtained from commercial suppliers (exception of fruits & vegetables), unpasteurized juice is prohibited, and only Grade A pasteurized and fortified milk in appropriate container.	X				
Safety 413-215-0541	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(2)(a) Written emergency plan	X			Evacuation drills were not submitted for review CORRECTIVE ACTION: Submit a copy of evacuation drills for 2020 thru May of 2022.	
(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			The program's existing medication logs maintained for each youth does not reflect possible adverse reactions related to the medication being taken. CORRECTIVE ACTION: Develop a process where possible adverse reactions are documented on youths' medication logs.	
(4)&(5) Herbal supplements and remedies, medical treatments, special diets, physical therapy, physical aides, or limitations have a written order signed by a physician or qualified medical professional.	X				
(7)(c) Medications are inaccessible to children	X				
(8) Medications are disposed in accordance with state and federal law	X				
(9) Written record of the disposal of medications is maintained and includes: (a) description and amount (b) name (c) reason (d) method (e) staff & witness signature	X				
(10) Written record of the administration of medication includes: (a) name (b) description (c) dates and times (d) missed doses (e) medication disposed (f) method of administration (g) ID of person administering (h) possible adverse reactions (i) medication taken outside facility		X			
Extracurricular, Enrichment, Cultural & Social Activities 413-215-0554	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(2) Children have ongoing opportunities to participate in at least one age-appropriate or developmentally appropriate activity	X				

Minimum Staffing Requirements 413-215-0561	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(1)&(2) Supervision is adequate for the type of program, location, age and type of children, ability of supervisor to respond, electronic back-up systems. Minimum ratios are maintained: Under 30 months of age: 1:4 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	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		One out of three new hire files did not reflect training in the following areas: - Agency policies and procedures - Ethical and professional guidelines - Organizational lines of Authority - Attributes of Population Served - Privacy Laws CORRECTIVE ACTION: Ensure that new hires are receiving the required training and the completed training is appropriately documented in their respective personnel file.	
(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				

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			One out of two established staff members did not reflect completion of required annual training in the following areas: - Discipline and Behavior Management - CPR/1st Aid - Mandatory Reporting CORRECTIVE ACTION: Ensure that employees are receiving the required annual training and the completed training is appropriately documented in their respective personnel file.	
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		Confirmation regarding the documentation of age-appropriate instruction could not be found after the review of youth files. CORRECTIVE ACTION: Create a process where age-appropriate instruction in the areas listed is documented in the youth's respective files.	
(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		Consent to provide routine and emergency medical care could not be located in the program's intake packet. CORRECTIVE ACTION: Demonstrate that this consent exists within the program's intake process. If one does not exist, create, and implement the required consent. <i>See comment section below regarding intake consent packet.</i>	
(b) Use the discipline and behavior management system	X				
(c) Use restraint or seclusion (if applicable). Must specify the reasons for the intervention and how staff are trained and supervised	X				
(d) Restrict contact with persons outside of the agency	X				
(e) Allow access as defined in 413-215-0091 & 0101	X				
(f) Impose a dress code	X				
(g) Apply the reasonable and prudent parent standard	X				
Disclosures 413-215-0576(2) Parent/guardian has acknowledged in writing:	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(a) Information regarding personal or room searches and protocols for confiscation of contraband	X				
(b) Statement of Rights of Children and Parents/Guardians	X				
(c) Any policies and procedures upon request	X				
Authorizations 413-215-0576(3)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(a) Disclose or exchange information with others	X				
(b) Child specific visitors	X				
(c) Visitation resources are pre-approved	X				

(d) Activity specific authorizations are pre-approved to allow children to participate in potentially hazardous activities, including but not limited to using motorized yard equipment, swimming, and horseback riding.		X		Authorization for pre-approved potentially hazardous activities could not be found in the youth files reviewed. CORRECTIVE ACTION: Create an authorization related to potentially hazardous activities and ensure this authorization is signed at the time of intake by the youth and/or legal guardian.	
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		There is no designated space to capture a youth's religious preference on the youth's summary sheet. CORRECTIVE ACTION: Modify the existing summary/face sheet to include 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	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	Given the short length of stay for most youth, youth are discharged prior to their service plan being reviewed on a quarterly basis.	
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			See comment section below regarding incident reports.	
(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				
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.					
(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: The program was advised to forward all critical events documented in incident reports to Licensing as required by rule effective immediately. See related licensing rule for reference. 413-215-0091 Licensing Umbrella Rules: Responsibilities of Licensees (Amended 1/1/19) A licensee is responsible to do all of the following: (11) Notify the Department in the following circumstances:					

(b) Within one business day if a critical event occurs. As used in this section, "critical event" means a significant event occurring in the operation of a child-caring agency that is considered likely to cause complaints, generate concerns, or come to the attention of the media, law enforcement agencies, first responders, Child Protective Services, or other regulatory agencies. Compliance with this notification requirement does not satisfy mandatory child abuse reporting requirements under ORS 419B.005 to 419B.045.

The program provides a consent intake form in Spanish for their monolingual Spanish speaking youth and families. A review of these Spanish forms indicate that some information is missing and does not match the English consent intake forms provided to English speaking and/or bilingual youth and families.

CORRECTIVE ACTION: Review the translated forms and ensure the document holds that same information that is provided to English.

Licensing Coordinator's Signature:  Date: 7/14/22

Manager Review:  Date: 07/08/2022