Oregon Department of Human Services

Licensed Child Caring Agency Site Visit Re-licensing Report
Homeless/Runaway/Transitional Living Shelters

Licensee: New Avenues for Youth, Transitional Housing Program

Executive Director: Sean Suib

Program Director: Kristina Goodman

Board Chairperson: Vanessa Sturgeon

Date of site visit: 8-15-2022

Licensing Coordinator: Irvin Minten, Jeff Minden, Jorge Pelinski

Other Regulatory or Accrediting Agencies: DHS Treatment Services and Homeless Youth Services of Multnomah County

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 413-215-0701 to 413-215-0766, Licensing Homeless, Runaway, and Transitional Living Shelters Rules. Personnel records were reviewed and compliance with required background checks was documented for employees in all programs.

Program Description(s): The program provides transitional housing services for youth and young adults ages 16-24. The community is a mixed population, with 8 of the 24 beds under contract with the DHS Treatment Services Unit to provide services for young adults in the custody of Child Welfare who are transitioning out of the foster care system, and the rest of the beds are for youth admitted through the Homeless Youth Consortium. The program rarely accepts youth into the program who are under the age of 18.

Program type and services: The program offers the following services: transitional housing; case management services; life skills training; a housing navigator who assists in finding safe and affordable housing; 2 Rent Well instructors who educate the young adults on how to be a good tenant and whose program provides landlords with some financial incentives; a full time Parent Support Specialist; GED testing; access to employment and work experience programs; Independent Living Program Services through DHS; access to alcohol and drug and mental health services; and access to services from the New Day Program, which provide services to the young adults who have been sexually exploited. New Avenues also owns a Ben and

Jerry's Ice Cream shop as well as Dfrnt Pigeon, a design/screen print shop in the Portland area. Both businesses allow young adults in the program to gain work experience and skills, earn a paycheck, and build a resume.

Capacity and age-range: 24 children and young adults, ages 16 – 24. The program also has two rooms where young adults and their children can reside.

Funding sources: DHS, Multnomah County, and private fundraising.

Contracts and sources for referrals: The DHS Treatment Services Unit contracts for 8 beds. The remaining 16 beds are funded through the Homeless Youth Consortium.

Average length of stay: The average length of stay is 9 – 12 months. The young adults can remain in the program for up to 2 years, if they are continuing to make progress toward their goals.

Average daily population served: 24. The program has a wait list and is almost always at capacity.

Number of children served annually: Approximately 50 young adults.

Interviews, Observations: During the course of the licensing review at the Transition Housing Program, a full walk through of the program was completed and 4 child files and 3 employee files were randomly selected and reviewed. In addition, randomly selected, in person and individual interviews were completed with four staff and three youth. A great deal of conversation also took place with Kristina Goodman, Transitional Housing Program Manager. An exit interview was also completed with Ms. Goodman.

During the walk through, it was observed that the program was in good repair and sufficiently clean, and the main area was decorated in a way which made the space seem "homey," as there was lots of nicely done artwork created by the clients at the program on display. There were also numerous flags representing countries where the young adults may have been born or previously lived. The main living area also had a nice leather sectional couch, television, and pool table.

All young adults interviewed reported staff were well trained and that they were able to help them effectively. All young adults also stated they felt safe in the program, that they enjoyed living at the program, and they stated they felt staff respected them and treated them well. The young adults also consistently reported positive things about the program and none of the young adults reported they would change or improve anything about the program. The young adults also reported they could prepare and eat as much food as they wanted and that the food and snacks offered by the program were good. All the youth also stated they could contact their caseworkers when they wanted and that they had contact with their caseworkers at least once a month, either in person or by phone. One young adult also expressed having friends that they spend time with away from the program. Another youth expressed that they enjoy biking while another expressed that they enjoy watching Anime and talking with other residents in the program.

In interviews with staff, it was reported that they felt well trained, and all stated they could request a training and receive it within a fairly short period. The staff also stated that their onboarding training was sufficient. One staff reported the onboarding training included a manual of topics and quizzes that had to be completed. All staff also reported they believed the agency did a very good job in keeping youth safe. Staff also consistently reported that the agency provided services which were trauma informed and culturally specific and which met the gender identity, racial identity, and sexual orientation of the youth. The staff also consistently reported that they felt their supervisors and managers listened to them, that they felt valued, and that they could always go to them if they had questions. A couple staff also stated that they learned a great deal from their coworkers and that they felt supported by them. The staff also consistently reported that the culture of the agency was supportive and good. One staff stated the culture of the program is very friendly and easy going and two staff reported the agency culture include a strong feeling of community. One staff reported the work environment was “the best” in which she has worked. A couple of the staff reported they enjoyed getting to know the clients and building relationships with them. One staff reported they very much enjoyed the “cute” babies that lived with their young parents at the shelter. A couple of the staff also indicated they clearly understood the program’s suicide prevention protocol and that their training allowed them to feel comfortable in managing and keeping a suicidal youth safe, if the situation arose. One staff also stated they felt comfortable handling difficult situations due to the training and support they received. One staff indicated that the program does emergency drills and lead staff coordinate them. Another staff indicated that since the program is 24/7, one of the challenges is ensuring that, at the time of shift change, there is adequate communication amongst staff to ensure that the oncoming staff are fully updated about specific behavioral, mental health, medical, and general life issues about the young adults in the program. Another staff reported one challenge of

working at the program is learning of a young adult's trauma history and seeing them struggle – although this same staff also reported the work is challenging but rewarding.

Program Strengths: About four years ago, New Avenues for Youth launched a new equity plan and hired a Diversity and Equity Director, who works closely with the Board of Directors and the executive management team. This investment greatly improved the Agency's capacity to consider race, gender, issues of gender fluidity, culture, and other factors in all aspects of decision making and service implementation. The program also strives to hire a team of staff which reflects the cultural, racial, gender and sexual identity of the youth in the program. The program also offers an excellent service array, which is augmented by their membership in the Homeless Youth Consortium, which allows the program to access all services offered through the consortium. The program also assists the young adults in the program in creating great art projects and expressing themselves artistically. The program also continues to have a Resident Counsel, which has provided a voice and leadership opportunity for the young adults in the program who wish to participate. In addition, over the past few years, and especially over the past year, the program has been able to effectively transition a higher number of young people into safe and affordable transitional housing due to having increased access to a higher number of FUP vouchers, especially for young adults who are involved in the Child Welfare system. In addition, the program reports that they continue to serve an increased number of mono lingual Spanish speaking youth, and they continue to build community partnerships to better serve and support this population. The program also reports of the 12 case managers employed at the program, 9 are Spanish speaking and 10 are black, indigenous or otherwise a person of color, and that the program is implementing a clinical supervision model which is culturally responsive and culturally supportive of the case manager's work. The program also states that after admitting a youth who was legally blind, the program, at a significant financial cost to the program, equipped the program's living areas with brail, so the young adult could effectively navigate the program's living areas. The program also states that they are proud of their efforts to limit the spread of COVID-19 and effectively keep the young adults in the program safe of the disease over the past 2-plus years.

During the review, it was consistently reported and observed by the reviewers that the culture of the agency was supportive and positive to youth and staff. It also was observed that managers and line staff were trauma informed and that issues of race, gender, sexual orientation, and culture were considered and at the forefront in their interactions with the young adults and in the recruitment and hiring of staff.

Program Challenges: The Transitional Housing Program provides services to young adults in a congregate care setting where young adults are frequently coming and going. Some of the young adults in the program also sometimes engage in dangerous behaviors, such as being on the run. This made it challenging for the program to prevent the spread of COVID-19 to youth in

the program. As a result, since the start of the pandemic it has taken a great deal of continued diligence to ensure that young adults and staff are adhering to related safety measures and protocols, as there is a tendency for individuals to believe that it is OK to lighten up on such measures over time. Additionally, over the past two years the program has experienced a fair amount of staff turnover, which has required the continued allotment of time and resources toward staff recruitment and hiring and a continued emphasis on the retention of staff to ensure appropriate staffing levels are maintained.

Changes that have occurred in the last 2 years: NA

Lawsuits: NA

Grievances and complaints filed in the last two years: There have not been any major grievances filed in the past two years. If a written grievance is filed by a youth or a staff person, the youth and staff person will have the opportunity to meet with a manager or director to voice their concerns. If a grievance is filed, it is always the agency's goal to resolve the dispute at the lowest level. Over the past two years, a grievance has not risen to the level where it had to be heard by the Board of Directors or the Executive Director.

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

Within 45 days of receipt of this report New Avenues for Youth 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 Irvin Minten at Irvin.minten@dhsoha.state.or.us or sent by regular mail to the following address:

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

Recommendations: The program is inviting and is attempting to include the young adult's parent/guardian/caseworker in the development of the young adult's assessment and service plans. However, these efforts were difficult to verify during the review. It is recommended that the program include documentation on the program's assessment and service planning documents, as to whether a youth's parent/guardian/caseworker was involved in assessment and case plan development. It should be noted that a young adult's parents are very rarely available to participate in the creation of the assessments and service plans.

Exceptions: N/A.

Changes in License: NA

Summary of Review					
Program and Services 413-215-0011(2)	**Yes**	**No**	**N/A**	**Corrective Actions**	**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**	**Corrective Action Completed**
(1)(a) Minimum of 5 board members 413-215-0711 (1) Composed of a cross-section of the community, parents, employees, children in care.	**X**			• New Avenues for Youth has yet to obtain and review an annual independent financial audit of financial records. New Avenues for Youth must obtain and review an independent financial audit of financial records. (Note, the agency reports the audit is currently being completed and they expect to receive the completed review by November 2022.	
(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**	**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**	**Comments**	**Corrective Action Completed**
(3) Agency uses appropriate and positive methods of behavior management and	**X**				

nationally recognized non-violent crisis intervention					
(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**				
Staffing Requirements 413-215-0721	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(1) Has and follows a written plan for minimum staffing	**X**				
(2) One staff for each shift is trained in non-violent crisis intervention	**X**				
(3) Staffing ratio is sufficient for adequate supervision Days: Evenings: Sleeping:	**X**				
Grouping 413-215-0756	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(1) & (2) Has and follows policies for grouping children that meets requirements (age, developmental level, maturity, behavior, medical...)	**X**				
(4) Care was taken to assess and minimize risk for children placed with emancipated children or adults	**X**				
Service Planning- Establish & maintain links with community agencies that provide: 413-215-0736	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(5)(a) Alternative living arrangements	**X**				
(5)(b) Medical services	**X**				
(5)(c) Mental health services	**X**				
(5)(d) Educational services	**X**				
(5)(e) Independent living services	**X**				
(5)(f) Other assistance required	**X**				
Physical Plant	**Yes**	**No**	**N/A**	**Corrective Actions**	**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) Adequate furnishings and personal items	**X**				
413-215-0746(2) Medication is kept in locked storage and inaccessible to children in care	**X**				
Safety - Transporting Children in Care 413-215-0761(3)(a)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(A) Vehicle is registered			**X**	• Staff utilize their personal cars and do not transport clients in their personal cars.	
(B) Vehicle is insured			**X**		
(C) Maintained in safe condition			**X**		
(D) Equipped with first aid kit			**X**		
(E) Fire extinguisher - secured			**X**		
Safety - Building Requirements 413-215-0761(6)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(b)(A) Smoke free	**X**			• One of the program's client bathrooms was found to be contain a great deal of used self-care items on the bathroom and shower floors and the bathroom was in need of cleaning. The program must ensure that all bathrooms in the program are sufficiently clean. However, it should be noted that Ms. Goodman reported the bathroom was not clean since one of the young adults in the program did not complete their assigned chore to clean the bathroom on that morning. Ms. Goodman stated the bathroom, which is used by about 6 young adults daily, was not cleaned by staff on that morning (and they realized that licensing would be completing a walkthrough of he bathroom and would have concerns about the cleanliness of the bathroom) since they were awaiting the assigned young adult to complete the chore upon their return to the program on that day.	
(b)(B) Clean and in good repair		**X**			
(b)(C)(i) continuous supply of hot and cold water	**X**				
(b)(D) room temps are w/in normal range, ventilated and free from odors	**X**				

Safety - Bathrooms 413-215-0761(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(c)(A)(i) 1:8 ratio for toilet and sink	X				
(c)(A)(ii) If self-closing metered faucet –15 sec.	X				
(c)(A)(iv) 1:10 ratio for bathtub or shower	X				
(c)(A)(v) individual privacy	X				
(c)(A)(vi) window covering	X				
(c)(A)(vii) permanently wired light fixtures	X				
(c)(A)(viii) mirror affixed at eye level	X				
(c)(A)(vi) adequate ventilation	X				
Client Rights 413-215-0716	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(2) Nutritional needs are met as appropriate for each child in care	X				
Medication Storage and Dispensing 413-215-0746	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(2) Medication is locked and inaccessible to children	X			• The program could not locate their medication disposal record. The program must maintain a written record of medication disposal which includes signatures by 2 staff, and which documents the medication which was disposed and when and how the medication was disposed.	
(3) Medication is self-administered after children have requested their medication at prescribed times	X				
(4) Written record of administration of medication includes (name, description, date and time dispensed, dosage, staff who dispensed)	X				
(5) Written record of disposal by 2 staff and includes when and how the medication was disposed		X			

Supplemental Information Provided by CCA	Yes	No	N/A	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		• The program's child abuse reporting policy and procedure needs to be updated to	

				reflect current statute. The program must ensure that their child abuse reporting policy and procedure reflects current statute. • The program's behavior management policy and procedure needs to be updated to reflect current statute and the passage of Senate Bill 710. The program's behavior management policy must reflect current statute.	
All required policies and procedures as identified in "Agency Type Specific Rules"	**X**				

Personnel Files 413-215-0061	**Yes**	**No**	**N/A**	**Corrective Actions**	**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 complete and documented	**X**				
(1)(a) & (3)(c) Background check was completed and documented	**X**				
(3)(d) Annual performance evaluations	**X**				
(3)(f) Record of personnel actions	**X**				
(3)(g) Termination date, reason for termination	**X**				
(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	**X**				
New Employee Orientation (30 days) 413-215-0061(4)	**Yes**	**No**	**N/A**	**Corrective Actions**	**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:	**X**				

(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					
(f) Privacy laws	X				
(g) Emergency procedures	X				
Staffing Requirements 413-215-0721	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
Staff (at least one for each shift) has been trained in non-violent crisis intervention	X				
Initial Training (Must be completed before staff is alone with youth) 413-215-0726 (1)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(a) Completion of agency's orientation	X			• In 1 of the 3 staff files reviewed, the staff did not complete required training on first aid kit contents and use until 3 months after their hire date. Since this training must be completed prior to staff being alone with youth, it was determined that completing the required training 3 months after hire did not meet statute requirements.	
(b) Understanding of supervision structure	X				
(c) Understanding of behavior management policies	X				
(d) Understanding of presenting issues of the youth served	X				
(e) Safety procedures	X				
(f) Sanitation procedures	X				
(g) First aid kit contents and use		X			
(h) Report writing	X				
(i) CPR and First Aid	X				
(j) Crisis intervention training	X				
Ongoing Training (Staff & Volunteers)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
413-215-0726(2)(a) Confidentiality	X				
413-215-0726(2)(b) Universal precautions	X				
413-215-0726(2)(c) Discipline and behavior management	X				
413-215-0726(3) Training in CPR/First Aid sufficient to retain current certification	X				
413-215-0726(4) Staff working with food must possess a food handler's card	X				
413-215-0061(5) Mandatory reporting that includes:	X				

(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					
413-215-0761(3)(b) Employees transporting children meet the driver requirements (current driver's license, and training for 15+ passenger vans if applicable)	**X**				
Contractors (if applicable) 413-215-0061(6)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(a) Agency ensures the contractor meets the requirements of this rule and Chapter 413 division 215			**X**		
(b)(B) Contract includes the following: (i) Services provided (ii) Contractor fees (iii) Disclosure of information from contractor to agency (iv) Lines of authority (v) Adherence to rules, including background check (vi) Any liability of the agency for acts of the contractor, rights of indemnity and limitations on liability			**X**		
Comments:					

Child Records 413-215-0741(2)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
Name of Child	**X**			• In 1 of the 4 child files reviewed, the file did not contain an authorization for medical treatment. The program must ensure that all child files include an authorization for medical treatment. • In 1 of the 4 child files reviewed, the file did not contain a consent to treat the child with	
Date of Admission	**X**				
(a) Sufficient information about the child's family or legal guardian to enable staff to contact them at any time	**X**				
(b) & 413-215-0731(2) Custody status	**X**				
(c) authorization for medical treatment		**X**			

(d) Consent to treat the child with interventions in use at the program		X		interventions in use at the program. The program must ensure that all child files include a consent to treat the child with interventions in use at the program. • In 1 of the 4 child files reviewed, the file did not have a signed acknowledgement that the child is responsible for requesting medication at prescribed times. The program must ensure that all child files include a signed acknowledgement that the child is responsible for requesting medication at prescribed times.	
(e) Signed acknowledgment that child is responsible for requesting medication at prescribed times		X			
(h) Documentation of child's illness and injuries and follow up by program	X				
Assessment 413-215-0731(2)(a-d)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
413-215-0731 Assessment (2)(a)-(c) To determine the appropriateness of each child in care who has applied for services provided by the agency, the agency must make reasonable efforts to gather all the following basic background information upon admission including family history, health history, mental health history (including diagnoses and current prescriptions). (3) Statement as to whether child meets eligibility requirements to be admitted to program.	X				
Service Planning 413-215-0736(2)(a-c), 3(a-e), (4), (5), (6)(a-f)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
413-215-0736(2)(a) Includes family, staff & other interested parties	X			• The program is not developing a service plan which is based on the assessment within 72 hours of a young adult's admission into the program. The program must develop a service plan which is based on the assessment within 72 hours of a young adult's admission into the program.	
(2)(b) Initial Service Plan developed within 72 hours which is based on the assessment and includes a monthly review		X			
(2)(c) Addresses physical and medical needs, behavior management issues, mental health treatment needs, education plans, and special needs	X				
(3)(a)(b) Reasonable effort to contact and involve family within 24 hours, but no later	X				

than 72 hours following admission and make an orientation available to the child's family.				- For 413-215-0736(3)(a) and 3(e) see recommendation noted at top of page 6 of this document. • The program's discharge summaries do not include all required information including a summary, results of evaluation, condition of child, compliance with program, and recommendations. The program's discharge summaries must include all required information including a summary, results of evaluations, condition of child, compliance with program, and recommendations.	
(3)(c) Encourage participation by a parent in the program. If parent is not available to participate in program, agency must encourage participation by those responsible for child's environment prior to admission.	X				
(3)(e) When appropriate, the agency must review individual service plans and the child's progress with the family at least monthly.	X				
(4)(5) Directly or through referral. Agency must make available individual, group, and family therapy and must establish links to community agencies and individuals who can provide required services including services for alternative living arrangements, medical services, mental health services, education services, ILP services and other assistance required by children and their families.	X				
(6) Discharge summary (summary, results of evaluations, condition of child, compliance with program, recommendations, and discharge destination)		X			
413-215-0746 (4) Medication logs	X				
Records and Documentation 413-215-0071	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(1) Stored safely and are available for inspection by Dept.	X				
(2) Permanent, legible, dated, and signed	X				
(3)&(4) Uniform in organization, readily identifiable and accessible, current, and complete, containing all required info. No eraser tape or white out.	X				
(7) Permanent registry for each child includes: Name Gender Birth date Names, addresses of parents or guardians Dates of admission Placement upon discharge	X				

Comments:

Licensing Coordinator's Signature:  Date: 8-25-2022

Manager Review:  Date: 8-22-2022