



Licensed Child Caring Agency Site Visit Report Residential Care

Licensee: Parrott Creek Child and Family Services

Executive Director: Simon Fulford

Board Chairperson: Glen Wachter

Date of site visit: 09/12/2022

Licensing Coordinator: Aubrey Kelley and Jeff Minden

Other Regulatory or Accrediting Agencies: Oregon Youth Authority (OYA), Oregon Department of Human Services (ODHS) Child Welfare

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): Parrott Creek Child and Family Services has partnered with both the Oregon Youth Authority (OYA) and the Oregon Department of Human Services (ODHS) to provide respective child caring facilities for youth in the custody of the Oregon Youth Authority or ODHS Child Welfare.

The OYA residential facility provides residential treatment for up to 20 adjudicated male youth between the ages of 13 and 18 years old from throughout the state of Oregon. New Era House is an intensive residential program for male identified youth ages 13-18 who are in the custody of Oregon's Child Welfare and who have sexually harming or sexually reactive behaviors. These youth have also struggled to maintain placement in traditional foster care or other residential settings.

Program type and services: The program describes New Era as a mindfulness-based program. All staff working in the program are conversant in Dialectical Behavioral Therapy (DBT) and facilitate treatment groups in mindfulness, emotional regulation, and new skill acquisition for the youth. New Era uses Collaborative and Proactive Solutions as a behavioral intervention to help youth identify lagging skills and create their own solutions to internal and external problems. In addition, youth work with a certified sex offender therapist to determine the treatment needed to move forward living a life free from sexual harm. Family therapy is offered to keep youth connected with their loved ones and increase the likelihood of success if the youth is returning home at the end of treatment. New Era's services include intensive individual, family and group counseling, cognitive-behavioral interventions and skill building, educational and recreational activities. The program provides youth with rehabilitative services to develop age-appropriate emotional and behavioral competencies in a structured environment,

The residential program provides family, individual and group counseling that is facilitated by licensed therapists. The program follows a D.B.T. (Dialectical Behavior Therapy) model. This model is modified to meet the treatment needs of the youth in the program. Youth are also involved in several skill-building groups as well as individual skill building with youth workers. Drug and alcohol counseling is provided on-site for youth who are assessed as requiring services.

Education for both facilities is provided for the youth on-site by the Clackamas Education Services District.

Capacity and Age Range: The residential program serves youth, ages 13-18, and has a capacity of 20. New Era serves males ages 13-18 with a capacity of 4.

Funding sources: Oregon Youth Authority (OYA), Oregon Department of Human Services (ODHS) Child Welfare

Contracts and sources for referrals: The program has contracts with OYA and Oregon Department of Human Services (ODHS) Child Welfare.

Average length of stay: The Average length of stay is 8-12 months

Average daily population served: The Ranch (OYA): 14, New Era (ODHS): 3

Number of children served annually: 50-75 between both programs

Use of seclusion or restraint: Parrott Creek was previously using Right Response restraint training, however, following the new rules adopted to implement Senate Bill 710, the program has suspended the use of restraints while working to get staff trained on Crisis Prevention Institute (CPI) restraint methods.

Interviews, Observations: A walkthrough of spaces and common areas used by clients was conducted. Overall, the spaces were clean and appeared in good repair. Residential Program Manager Leah Lamb conducted the tour and pointed out that they have been dealing with graffiti issues, and the program will spot paint over the graffiti, and maintenance will routinely color match the walls. At the time of the visit there were 13 youth in The Ranch Program and none at New Era. As a part of the review process, 2 youth and 1 staff were interviewed. Both youth interviewed reported feeling safe in the program and liking the food, although one reported the food can sometimes be boring. Both reported receiving adequate food. Both youth reported being able to make phone calls home 3 times a week and being able to participate in home visits. One of the interviewed youth reported being at several programs previous and liking Parrott Creek better. Parrott Creek was the first program for the other youth. Both youth reported having staff they felt they could reach out to if they needed to and identified favorite staff. Both youth reported having a few months left, and neither was clear on the transition plan for their exit from the program at this point. When asked, one youth wished the program had a pool and the other could not think of anything he would want to change.

Program Strengths: Program uses a relationship approach combined with Collaborative Problem Solving as their main behavior interventions. This allows youth and staff to create safe and supportive relationships so that they can work together to process behaviors and build skills.

Program Challenges: Ove the past 2 years Parrott Creek has been impacted by Covid-19 and has struggled to hire and retain staff members throughout it.

Changes that have occurred in the last 2 years: Parrott Creek has had large staffing turnover during the last two years and has had to temporarily change policies and adapt to working with our clients during a pandemic. This temporarily changed the way they were able to incorporate families and home visits into the youth's treatment.

Lawsuits: None reported by the program

Grievances and complaints filed in the last two years: None reported by the program.

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

Within 45 days of receipt of this report (insert name of agency) 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 Aubrey.J.Kelly@dhsosha.state.or.us or sent by regular mail to the following address:

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

Recommendations: Current youth intake files include an authorization for Parrott Creek to provide for all medical care for youth. Recommended changing language to say routine and emergency medical care to better align with 413-215-0576.

Exceptions: In 2021 Parrott Creek requested a total of 3 Licensing rule exceptions; a request to admit a youth outside the agency's licensed age range, fixed windows at the OYA facility and a room share exception for a 17 year old to share a room with two 18 year olds. A new exception regarding the fixed windows at the OYA facility will need to be submitted for the next licensing period (2022 – 2024).

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				
(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		A completed fire marshal inspection had not yet been completed at the time of the review. The program shall ensure a fire marshal inspection is completed.	
Documents as indicated on form titled "Required Financial Documents and Information"	x				
All required policies and procedures as identified in the "Umbrella Rules"		x		Written policies for compliance with Interstate Compact on the Placement of Children (ICPC) and compliance with the Indian Child Welfare Act (ICWA) were not submitted. The program shall ensure these policies are submitted to CCLP.	
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				
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			An exception request was granted for the 2020-2022 licensing period for the windows to be secure in The Ranch facility. CORRECTIVE ACTION: Submit new exception request for licensing period 2022-2024 for windows to continue to remain fixed.	
(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				
(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	x				

variety of foods and are adjusted for seasonal changes.					
(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 and fire drills were not conducted on a monthly basis, and nearly a year's worth of drills was not logged. The program has been consistent in conducting them for the last few months.	
(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		CORRECTIVE ACTION: Ensure drills are being conducted on a monthly basis and documented accurately.	
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				
(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			
(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			

New employee trainings are being completed, and all topics are being covered. However, documentation in 4 out of 5 files reviewed did not indicate the trainings were being completed within 30 days of hire.

(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				CORRECTIVE ACTION: Ensure that all employees are receiving the New Employee Orientation trainings within 30 days of hire and trainings are documented as occurring in that time frame.	
(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		New employee trainings are being completed, and all topics are being covered. However, documentation in 4 out of 5 files reviewed did not indicate the trainings were being completed within 30 days of hire.	
(1)(b) Restraint and seclusion (if applicable)			x	CORRECTIVE ACTION: Ensure that all employees are receiving the New Employee Orientation trainings within 30 days of hire and are documented as occurring in that time frame. The program is not currently training staff for restraints or utilizing restraints in the program.	
Ongoing Training	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
413-215-0536(2)(b) Employees who handle food served to children have a valid food handler's card	x				
413-215-0541(5)(a) Employees transporting children have: current driver's license, insurance, trained in emergency procedures and behavior management, and training for 15+ passenger vans if applicable)	x				
413-215-0556(2)(a) Environmental emergencies	x				
413-215-0556(2)(b) Universal Precautions	x				
413-215-0556(2)(c) Discipline and Behavior Management	x				
413-215-0556(3) Staff providing direct care must maintain current CPR/First Aid certification	x				

413-215-0556(4) Designated staff authorized to apply reasonable and prudent parent standard are trained in application of the standard	x				
413-215-0061(5) Mandatory reporting (annually) that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report (c) legal responsibility to report is personal to the employee	x				

Children's Records	Yes	No	N/A	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			Only 1 of the 5 files reviewed included a consent for the reasonable and prudent parent standard. CORRECTIVE ACTION: Ensure that all required consents are in each resident's file moving forward.	
(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				
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		The Summary Sheet did not contain information regarding religious preference.	
(b) Name and location of previous and current school	x			CORRECTIVE ACTION: The program will ensure that summary sheet documentation includes religious preference.	
(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			One of the files reviewed indicated the Assessment was completed on day 52. CORRECTIVE ACTION: The program will ensure that all Assessments are completed within the 45 day timeline.	
(d) Assessment is completed within 45 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				
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				

Licensing Coordinator's Signature: Jeff Minden Date: 10-12-2022

Manager Review: HL Galt Date: 10-12-2022