Oregon Department of Human Services

Licensed Child Caring Agency Unannounced Site Visit Report

Licensee: Homestead Youth & Family Services, Inc.
Executive Director: Elisa Doebler-Irvine
Board Chairperson: Joan Howard
Date of Unannounced: 10.26.2022
Licensing Coordinator: Jorge Pelinski & Todd Cooley
Other Regulatory or Accrediting Agencies: Oregon Youth Authority (OYA)

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

Previous Findings	Repeat Findings Further Action Needed	Comments
Executive Director or Program Director 413-215-0021 (3)(g) Approval from BCU The agency shall submit the current background check once received.	**Yes☐ No✓**	Program provided current BCU approved background checks as required. No further action needed.
Supplemental Information Provided by CCA Documents as indicated on form titled "Required Financial Documents and Information" The agency shall submit the Tax Compliance Certificate once received.	**Yes☐ No✓**	Program submitted Tax Compliance Certificate. No further action needed.

Supplemental Information Provided by CCA All required policies and procedures as identified in the “Umbrella Rules” 1)The agency shall update the following policies and procedures pursuant to each OAR: • Grievance Procedures in OAR 413-215-0046(2) • Mandatory Abuse Reporting in OAR 413-215-0056(2) • The child in care’s right to privacy and uncensored communication, specifically regarding phone calls. 2)The agency shall submit a written policy regarding personnel that meets the requirements of OAR 413-215-0061.	**Yes☐ No✓**	Program submitted policies meeting all requirements. No further action needed.
Supplemental Information Provided by CCA All required policies and procedures as identified in “Residential Care” The agency shall update the policy and procedure for Medications pursuant to OAR 413-215-0551.	**Yes☐ No✓**	Program submitted policy and procedure for medications. No further action needed.
Supplemental Information Provided by CCA SB710 Requirements: Policy and Procedures; notifications to guardian and children in care. OAR 413-215-0077(8)(e), (11)(e) and OAR 413-215-0078(1) The agency shall review their policy and procedure, including notifications required to clients and guardians, and update to specifically including how to access the quarterly reports.	**Yes☐ No✓**	Program updated SB 710 requirements. No further action needed.

The agency shall ensure clients and guardians receive the notification at intake and twice yearly thereafter, and document having provided it. The corrective action response shall include the agencies plan detailing how ongoing compliance will occur.		
Physical Plant 413-215-0511(2)(a) &(c) Buildings are smoke free, clean and in good repair The bathroom stall partition had a hole towards the bottom near the floor. Options for repair were discussed. The agency shall submit photos of the repaired area.	**Yes☐ No✓**	The bathroom stall partition was repaired, and the program provided pictures of the repair. Program has plans to repaint bathroom.
Safety 413-215-0541 (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 Documented drills prior to January 2022 were unable to be located due to employee changes and inability to locate documents. Monthly drills between January – July 2022 were completed and properly documented. • The agency shall ensure monthly drills occur, are appropriately documented and safely stored.	**Yes☐ No✓**	Discussed with Executive Director to note all staff participating in fire drills. Only one months of drills to review. Executive Director stated that October fire drill is set for October 26th. No further action needed.

Medication 413-215-0551 (8) Medications are disposed in accordance with state and federal law (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 (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 Items (8), (9) and (10) are unmet due to various factors disclosed by the program. •The agency shall ensure the policy and procedures are updated pursuant to OAR 413-215-0551. •The agency shall ensure staff who administer medications are trained in the updated policy and procedures. •The agency shall ensure the written record of the disposal of medications contains all required elements (items a-e). •The agency shall ensure the written record of the administration of medication contains all required elements (items a-i). •The agency shall ensure staff are completing the documentation for all required elements	**Yes☐ No✓**	The agency has updated the policy and procedures pursuant to OAR 413-215-0551. The agency has updated medication MAR to meet requirements. No further action needed.

on the written disposal record and medication administration record.		
Minimum Staffing Requirements 413-215-0561 (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: Ages 6 and older: 1:7 Overnight (staff awake) 1:10 Licensing coordinators and program management discussed overnight awake staffing ratios, including meeting their contracted OYA staff requirements. •Awake overnight staffing exception on file.	**Yes☐ No✓**	Awake overnight staffing exception on file. No further action required at this time.
Children's Records (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) The medical history section was lacking. The agency shall ensure a more complete medical history is obtained and appropriately documented in each youth file.	**Yes☐ No✓**	Program has an updated process for obtaining medical history. Medical history is obtained upon intake. No further action needed.
Children's Records 2)(e) Documentation of age-appropriate instruction – pregnancy prevention, nutrition, prevention of HIV & AIDS, and prevention and treatment of sexually transmitted disease	**Yes☐ No✓**	The program has created a curriculum for appropriate instruction – pregnancy prevention, nutrition, prevention of HIV & AIDS, and prevention and treatment of sexually transmitted disease, and the information is being incorporated into weekly groups with the youth. No further action needed.

(2)(e) is unmet. The agency shall ensure age-appropriate instruction is provided and appropriately documented in each youth file.		
Consents 413-215-0576(1) (e) Allow access as defined in 413-215-0091 & 0101 (e) The agency shall update language to meet the requirements.	**Yes☐ No✓**	Program updated language to meet requirements. No further action needed.
Information about Children in Care 413-215-0581(1) Summary sheet contains the following: (a)The name, gender, date of birth, religious preference, and previous address Religious preference was not consistently documented on the summary sheet. The agency shall ensure an entry is noted for religious preference.	**Yes☐ No✓**	Program updated summary sheets to meet requirements. No further action needed.
Case Management 413-215-0581(3) (b)-(d) discharge planning and instructions The agency shall ensure discharge planning and instructions are individualized for each child i**n care and documented accordingly.**	**Yes☐ No✓**	The agency is ensuring discharge planning and instructions are individualized for each child in care and documented accordingly. No further action needed.

New Findings from Site Visit	Comments
Physical Plant 413-215-0511(2)(a) &(c) Buildings are smoke free, clean and in good repair Sometime after the bathroom partition was repaired (see above), the material used to patch the partition was removed by youth in care.	The program shall repair the hole in a way that is less susceptible to being re-damaged.

Interview Summary
Two youth from the program were interviewed at the unannounced site inspection. The following information was obtained from the youth interviews: • Both youths stated things were going well at the program. • When asked what the youth appreciated most about the program the youth stated: “P.E. Community Service, Homestead Staff, movies, swimming, bowling, and basketball. • Both youths confirmed they receive enough food to eat, and snacks are provided. • One youth stated he has family contact and can request more phone calls as requested. The other youth stated he has phone contact with his family 4 times a week. • Both youths stated they had someone at the program they could talk to if they felt uncomfortable or needed anything. • Both youths stated they feel safe at Homestead. • Both youths feel they have received the necessary skills from the Homestead Program for when they return to the community.

Observations
Staff and youth were observed at the programs during the inspection. The youth that were at the programs appeared to be at ease and comfortable in their environment. All areas of the programs where youth had access were observed to be well kept, clean and in good repair with minimal repair needs (see repair needs above in the report). The kitchens were observed to have plenty of food for the youth in the program. Medication was observed to be in locked medication carts behind locked rooms which was inaccessible to the youth. Homestead recently updated their phone policy to include four family phone calls per week for all youth. The Executive Director of Homestead sent an official letter notifying CCLP of their Foster Program closing on 10.25.2022. The Foster Program closed due to a persistent lack of foster parent applicants, despite the program’s ongoing recruitment efforts.

Corrective Actions and Timeframes:

Please submit the following to verify compliance.

Within 45 days of receipt of this report **Agency Name** must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any

and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents can be emailed directly to **Licensing Coordinator email address**.

Licensing Coordinator's Signature: Jorge Pelinski Date: 11.8.2022

Manager Review: _____ Date: 11-8-2022