

Restraint and Involuntary Seclusion Report

Instructions: As required by Oregon Senate Bill 710, adopted during in the 2021 regular session, quarterly reports must be completed and submitted to the Children's Care Licensing Program (CCLP) regarding restraints and involuntary seclusions of children in care. Reports must also be posted on the Child Caring Agency's website, if applicable, and must be provided to any member of the public upon request.

Submit reports to cclp.licensing@dhsos.state.or.us.

Agency Name	Trillium Family Services
Site or Program Name	Parry Center for Children- West 1 PRTS/SA
Reporting time frame (indicate which quarter in months and year).	October 2022-December 2022
Total number of children served by CCA during reporting time frame	27
Total number of incidents involving restraint.	2
Total number of incidents involving involuntary seclusion.	n/a
The total number of incidents involving restraint that resulted in reportable injuries.	0
The total number of incidents involving involuntary seclusion that resulted in reportable injuries.	n/a
Total number of involuntary seclusions in a locked room.	n/a
Total number of rooms available for use for involuntary seclusion.	n/a
Description of the dimensions and design of the seclusion rooms.	n/a
Total number of children in care placed in restraint.	2
Total number of children in care placed in involuntary seclusion:	n/a

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Total number of children in care who were placed in a restraint than three times during the reporting period.	0
Total number of children in care who were placed in involuntary seclusion more than three times during the reporting period.	n/a
A description of the steps the program has taken to decrease the use of restraint and involuntary seclusion.	• Increased the number of NCI refreshers and informal trainings, focused on verbal de-escalation, use of least restrictive intervention, recognizing problems before they start and skill practice • Utilize existing meeting structures (Campus Clinical Review, Rounds, weekly Team meetings, Behavioral Intervention Committee) with the clinical team and direct care staff to discuss individual clients in an effort to identify patterns and develop individualized plans • Utilized a wide variety of proactive interventions, tailored to the individual client based on their needs, including but not limited to: Increasing individualized staffing support, changing levels of care, psychiatrist review of medication, therapeutic rapport building, behavioral incentive planning, sensory integration • Address triggers in the environment – school, peer interactions, facility/structure based, evening transitions – and work with clients to build skills to manage them in the future

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	• Involved family members, community teams, and natural supports to address patterns of escalation and build more support for the individual • Psychoeducation around trauma for clients and staff to support a trauma informed approach • Providing specific training and support for staff in working with youth with sexually aggressive behaviors and disrobing, to maintain client's safety and dignity • Collaborated with individual clients regarding self-seclusion plans, when clinically indicated and client-driven, to reduce aggression and restraints, and provide the client an opportunity to self-sooth in a safe and non-stimulating environment until they regained control of their behavior
Number of incidents in which an individual who placed a child in care in a restraint or involuntary seclusion was not certified or trained in the use of the type of restraint or involuntary seclusion used, including individuals whose certification or training was expired at the time of the restraint or seclusion.	0

Demographic Characteristics of the children in care who the program placed in a restraint or involuntary seclusion, including race, ethnicity, gender, disability status, migrant status, English proficiency and status as economically disadvantaged, unless the demographic information would reveal personally identifiable information about an individual child in care. Indicate the number

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of children who experienced restraint or seclusion who match each of the criteria listed below:

Race/Ethnicity:	Total Number of Children
American Indian or Alaska Native	
Asian	
Black or African American	
Hispanic (any race)	1
Native Hawaiian	
Other Pacific Islander	
White	1
Other	
Unable to determine	

Gender:	Total Number of Children
Male	1
Female	1
Transgender	
Non-binary	
Agender/No Gender	
Questioning	
Refused to Answer	

Disability Status:	Total Number of Children
Disabled	
Non-Disabled	2

Migrant Status:	Total Number of Children
Migrant	
Non-Migrant	2

English Proficiency:	Total Number of Children
English is primary language	2
English is not primary language	

Economic Status:	Total Number of Children
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Economically Disadvantaged	1
Not Economically Disadvantaged	1