

**OKLAHOMA COMMISSION ON CHILDREN AND YOUTH
OFFICE OF JUVENILE SYSTEM OVERSIGHT**

MEMORANDUM

To: Carla Aniol, Director
Ft. Sill/Apache Emergency Youth Shelter

From: Dana S. Holden, Oversight Specialist
Office of Juvenile System Oversight

Subject: Announced Visit

Date: August 31, 2005

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an announced visit to the Ft. Sill/Apache Emergency Youth Shelter in Apache, Oklahoma, on June 2, 2005, and returned on June 9, 2005, to conclude the visit. The facility was licensed by the Division of Child Care of the Department of Human Services (DHS) for fifteen residents. On the day of the OJSO visit, the census was five.

Interviews Conducted

- An entry interview and an exit conference with the facility's Director
- Two direct care staff members
- Three residents

Documents Reviewed

- Two personnel files
- Files on three residents
- Most recent inspection reports by the Office of the Oklahoma State Fire Marshal and the Oklahoma State Department of Health
- Inspection report, dated November 30, 2004, by the DHS Division of Child Care

Areas Toured

- Entire facility

Overview

Staff Interviews

The staff members interviewed were familiar with policy and procedures and expressed appropriate acknowledge regarding allowable forms of discipline. The staff appeared to work well together as a team. The OJSO did not note any concerns from the staff interviews.

Resident Interviews

Each resident interviewed:

- described appropriate forms of discipline for rule violations;
- expressed positive feelings toward staff;
- stated that the food was good and second helpings were allowed;
- described an appropriate amount of recreation time and activities; and
- expressed appropriate knowledge of the grievance procedures.

Two residents stated that a staff member who worked the 12 midnight to 8 a.m. shift slept while on duty. The OJSO noted that this staff member had previously received corrective action for a prior incident of sleeping while on duty.

Review of Personnel Files

The OJSO noted the following in the two staff files reviewed:

- Neither file had documented training for the staff members from January 2005 to June 2005.
- One file did not contain a criminal record background check requested through the Oklahoma State Bureau of Investigation.
- One file did not have a copy of the staff member's current driver's license or insurance verification.
- One file did not contain verification of references for the staff member.
- One file did not contain a current job performance evaluation for the staff member.

Review of Resident Files

The OJSO noted the following in the files reviewed on three residents:

- Two files did not contain education histories from the residents' previous schools.
- The service plans in two files were not signed by the residents' custodians.
- One file did not contain an immunization record for the resident.
- There was no documentation in two files that the residents or their custodians had received copies of the rules or behavior management policies and the Resident Handbook.

- The service plan in one file did not have goals listed or a discharge plan, and the service plan in another file did not have a discharge plan.

Facility Inspection

The OJSO noted minor cosmetic deficiencies on the first day of the visit, June 2; however, when the OJSO returned to the facility on June 9 to conclude the visit, the deficiencies had been corrected. There were no other issues noted from the observational tour.

Summary

The shelter was described by the residents as having a homelike atmosphere that they found comforting. The Director advised the OJSO that funding had been secured for a new shelter to be built and construction should be completed by May 2006. The OJSO appreciated the cooperation of the Director and staff during the visit to the shelter.

Exit Conference

In the exit conference, the OJSO expressed the following concerns with the facility Director:

1. Two residents reported that a staff member on the 12 midnight to 8:00 a.m. shift slept while on duty. The DHS Division of Child Care's licensing standards, Section 167, (d), states, "A staff member is awake and accessible at all times."
2. The personnel files reviewed did not document any training hours for either employee from January 2005 to June 2005. The DHS Division of Child Care's licensing standards, Section 153.1, (m), (3), (A), states, "Full-time child care staff obtain a minimum of 24 clock hours per calendar year of staff development courses. Hours are prorated at two hours per month for staff who have not been employed for a full year."

Findings

The following violations of DHS Division of Child Care licensing standards were identified:

1. One personnel file reviewed did not contain a criminal record background check. The DHS Division of Child Care's licensing standards, Section 153.1, (h), (1), (B), states, ". . . Title 10 of the Oklahoma Statutes requires that every child care facility arrange, prior to employment, for a criminal history investigation for each applicant . . . including all caregivers, substitutes, support staff, and any other person employed by the facility or program."
2. One personnel file reviewed did not have a current copy of the employee's driver's license in the file. The DHS Division of Child Care's licensing standards,

Section 154.5, (d), (1), states, “The facility maintains on file the name of each driver who transports residents and a copy of a valid driver’s license for that person.”

3. One personnel file reviewed did not contain verification of references for the staff member. The DHS Division of Child Care’s licensing standards, Section 153.1, (g), (1), states, “The facility obtains a minimum of three references for all staff prior to employment.”
4. One personnel file reviewed did not contain a current job performance evaluation for the staff member. The DHS Division of Child Care’s licensing standards, Section 153.1, (o), (2), (E), states, “The personnel record includes annual performance evaluations and any reports and notes relating to the individual’s employment with the facility.”
5. The files reviewed on two residents did not contain education histories from the residents’ previous schools. The DHS Division of Child Care’s licensing standards, Section 154, (e), (1), (F), states that the resident’s record includes “educational information.”
6. The service plans reviewed in the files on two residents were not signed by the residents’ custodians. The DHS Division of Child Care’s licensing standards, Section 154, (b), (1), (A), states, “The facility involves the resident and parents or custodian in the development of the service plan. If the parents or custodian do not participate in the development of the service plan, the reason for non-participation is documented in the service plan.” Paragraph B, (vi), at the same cite, states, “The service plan identifies and includes the names and signatures, with the date, of those participating in developing the service plan.”
7. The file reviewed on one resident did not contain an immunization record for the resident. The DHS Division of Child Care’s licensing standards, Section 154.3, (d), states, “Each resident is immunized against communicable diseases in accordance with the rules and regulations of the State Department of Health.”
8. In the files reviewed on two residents, there was no documentation that the residents or their custodians had received copies of the rules or behavior management policies and the Resident Handbook. The DHS Division of Child Care’s licensing standards, Section 154, (a), (7), states, “The facility documents, by the resident’s and parents’ or custodian’s signatures, that the resident and parents or custodian have been provided written copies of the facility’s policies, which includes, but is not limited to, resident’s rights, grievance procedures, behavior management policies”
9. The service plan reviewed in the file on one resident did not have goals listed or a discharge plan, and the service plan in the file on another resident did not have a discharge plan. The DHS Division of Child Care’s licensing standards, Section 154, (b), (1), (B), (iv), states, “The service plan identifies and includes goals and anticipated plans for discharge.”

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