

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

Name and Location of Facility: J. D. McCarty Center
Norman, Oklahoma

Dates of Visit: November 28 and 29, 2006

Oversight Reviewer: Jenifer K. Cooks, Oversight Specialist

Focus of Visit: Second Visit for 2006

Date: February 15, 2007

General Information

The Office of Juvenile System Oversight (OJSO) began an unannounced visit on November 28, 2006, at the J. D. McCarty Center and returned on November 29, 2006, to complete the oversight. The purpose of the visit was to assess compliance with established responsibilities, facility policy and procedures, and rehabilitation licensing standards for specialized hospitals under the authority of the Oklahoma State Board of Health. The facility was licensed by the Oklahoma State Department of Health for forty-eight beds. On the first day of the OJSO visit, the census was thirty-four.

Interviews Conducted

- Entry interview with the facility Director and the Director of Rehabilitation Services
- Five residents
- Five direct care staff
- Exit interview with the Director of Rehabilitation Services

Documentation Reviewed

- Oklahoma State Department of Health license issued to the facility as a Specialized Hospital: Rehabilitation (valid from February 1, 2006, through January 31, 2007)
- Oklahoma State Department of Health inspection report, dated August 25 and November 12, 2006
- DHS Office of Client Advocacy investigative report
- Individualized weekly schedules for nine residents
- Office of the Oklahoma State Fire Marshal inspection report, dated July 7, 2006
- Files on five residents
- Six personnel files

- Agreement for educational services between the Norman Public School District and the facility, dated May 15, 2006

Areas Toured

- Four resident rooms on each of the six hospital units
- Self-contained kitchen on each of the six hospital units
- Orientation room
- Rehabilitation areas

Overview

Interviews

The OJSO interviewed five residents. The other residents available for interview were not able to participate in a traditional verbal questionnaire. No concerns were noted from the resident interviews.

Five direct care staff members were interviewed. No concerns were noted from the staff interviews.

File Reviews

The OJSO reviewed the files on five residents. The OJSO noted that several therapy progress notes and physician orders in the files were unsigned by the authored therapist or physician. No other concerns were identified from the resident files reviewed.

Six personnel files were reviewed. One file did not contain a current job performance evaluation for the employee. No other concerns were identified from the staff files reviewed.

Observational Tour

The OJSO conducted a tour of the six hospital units. The OJSO noted:

- Room 2119: The electrical outlets in the bathroom did not have protective coverings and the examination table and the floor area in the treatment room were being used to store items temporarily.
- Room 5005: An unsupervised resident in the room had access to a pair of adult-sized scissors. The scissors were lying on the floor by the table. Pieces of paper and coloring supplies nearby indicated the resident had colored the paper and then used the scissors to cut the paper. No other concerns were identified from the observational tour.

Exit Conference

The OJSO discussed with the Director of Rehabilitation Services the concerns regarding the unsigned therapy progress notes and the physician orders. The rehabilitation director explained that the notes were dictated from the therapists, and at the next staffing, the progress notes and physician orders were signed. The OJSO addressed the incident regarding the unsupervised resident with the pair of scissors. The director stated that she will take corrective action regarding staff and procedures. The director also agreed to a performance evaluation for the employee identified in the review of personnel files.

Summary

On the second day of the visit, the OJSO attended the weekly client staffing with treatment team members and observed the staffing of clients' cases. The interactions observed between the residents and the staff members were appropriate. The staff demonstrated a commitment and willingness to provide appropriate care to the residents.

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