

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

**Private Youth Shelter
Second Quarter 2005**

Name of Facility: J. Roy Dunning Youth Shelter
Date of Visit: June 7, 2005
Reviewer: Dana Holden, Oversight Specialist
Subject: Announced Visit
Date: August 31, 2005

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an announced visit on June 7, 2005, at the J. Roy Dunning Youth Shelter in Lawton, Oklahoma. The purpose of the visit was to monitor compliance with established responsibilities and facility policy and procedures. The facility was licensed by the Division of Child Care of the Department of Human Services (DHS) for twenty-four residents. On the day of the OJSO visit, there were thirteen residents at the facility.

Persons Interviewed

- Director
- Assistant Director
- Two direct care staff members
- Two residents

Documents Reviewed

- Two personnel files
- Files on two residents
- Most recent inspection reports by the Office of the Oklahoma State Fire Marshal, the Oklahoma State Department of Health, and the DHS Division of Child Care

Observational Tour

- Entire facility

Overview

Interviews

The staff members interviewed were familiar with the policy and procedures and expressed appropriate knowledge regarding allowable forms of discipline. The staff appeared to work well together as a team. No concerns were noted during the staff interviews.

The OJSO noted the following from the two resident interviews:

- Both felt safe at the facility.
- The food was good, and they were allowed second helpings.
- Both expressed positive feelings toward the staff.
- They were allowed appropriate recreation time and activities.

No concerns were noted from the resident interviews.

File Reviews

The personnel files reviewed documented that television movies were used as a form of staff training; however, the files did not establish the area of training attempting to be demonstrated by the movies. The training files indicated that the primary source of staff training was received from television movies.

The OJSO noted the following from the resident file reviews:

- Neither file contained an immunization record and school history for the resident.
- There was no documentation that either resident or the resident's custodian had received a Resident Handbook.
- The resident service plans identified the same generalized goals for both residents.
- There was no documentation that either resident or the resident's custodian had participated in the development of the resident's service plan.
- One resident's service plan was not signed by the custodian, and there was no documentation in the file of nonparticipation by the custodian.

The Director stated that the facility had difficulty obtaining all of the information and documentation from the DHS workers that were required for the files. The Director also stated that the facility requested copies of the residents' service plans that were developed by the DHS workers and were rarely provided with copies. In addition, the Director stated that the DHS workers did not visit their clients at the facility on a regular

basis. The Director said that when law enforcement took a child into protective custody, the child was not accompanied to the shelter by a DHS worker.

Observational Tour

The OJSO did not note any concerns from the tour of the facility.

Summary

On the day of the OJSO visit, the program appeared to meet the needs of the residents and the staff appeared to provide a safe and nurturing environment for the residents. The facility Director expressed concerns regarding the lack of communication between the DHS and the shelter. The DHS Assistant Area Director was contacted and advised of the problem. He agreed to work with the DHS County Director and supervisors to alleviate the problem.

Findings

1. Documentation in the personnel files reviewed did not establish the area of training attempting to be demonstrated by the movies that were used to provide staff training. Department Human Services licensing standards, Section 153.1, (m), (3), (D), states, "The content for staff development courses for child care staff pertains to the roles and responsibilities of the position assigned."
2. The resident files reviewed did not contain immunization records. Department of Human Services 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."
3. The resident files reviewed did not contain the residents' education history. Department of Human Services licensing standards, Section 154, (e), (1), (F), states, "The facility maintains a written record for each resident The record includes educational information."
4. Documentation in the resident files reviewed did not provide verification that the residents and their custodians received a Resident Handbook. Department of Human Services 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, trips away from the facility, use of volunteers, and frequency of reports to the parents or custodian."
5. The resident service plans reviewed identified the same general goals and objectives, and were not specific to the individual. Department of Human Services licensing standards, Section 167, (f), states, "A written service plan is developed and documented for each resident within three days of admission," and Section 154, (b), (1), (B), (i), states, "The service plan identifies and includes the resident's needs, such as counseling, education, physical health, or recreation"

6. Documentation in the resident files reviewed did not verify that the resident and the resident's custodian participated in the development of the resident's service plan. Department of Human Services 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. At the same cite, paragraph (b), (1), (B), (vi), states, "The service plan identifies and includes the names and signatures, with the date, of those participating in developing the service plan."

DH:js

