

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

MEMORANDUM

To: Lensen Hearn, Program Administrator
Lawton Adventure Program

From: Cliff A. Aldridge, Oversight Specialist
Office of Juvenile System Oversight

Reviewer: Cliff Aldridge

Subject: 2005 Unannounced Visit

Date: August 30, 2005

General Information

The Office of Juvenile System Oversight (OJSO) conducted a routine, unannounced visit to the Lawton Adventure Program on March 22, 2005. Cliff Aldridge conducted the oversight visit. The Office of Juvenile Affairs (OJA) contracts with the Southwestern Oklahoma State University for the operation of the program, which serves OJA-custody males. The program was licensed by the Division of Child Care of the Department of Human Services (DHS) for twelve residents.

Persons Interviewed

- Entry conference with the Program Administrator
- Three of the nine residents in the facility on the day of the visit
- Two direct care staff members
- Exit conference with the Program Administrator

Documentation Reviewed

- Case records on two residents
- Personnel files of two direct care staff members
- DHS Division of Child Care inspection report of January 24, 2005
- Office of the Oklahoma State Fire Marshal inspection report of January 11, 2005
- Oklahoma State Department of Health inspection report of November 28, 2004

Areas Toured

- Residential, dining, and food preparation areas of the facility

Overview

Interviews

Three of the nine residents were selected for interviews. The interview questions pertained to quality of life, participation in recreation, and access to program services. All three reported participation in educational and program services. Each was able to describe the components of their treatment plans. All reported participating in a variety of recreational activities on the weekends; however, all three of them complained about having to stay inside too much or of only being allowed to go outside a few times a week. There were few favorable responses about the direct care staff from the interviews. Two residents cited favoritism by some staff to other residents when asked what they disliked most about the staff.

Two direct care staff members on-duty during the visit were interviewed relative to their supervision and discipline practices for the residents, program services, and staff training. No issues of concern were identified from the interviews.

Documentation Reviews

The two personnel files were complete for all of the items reviewed during the visit. The file on one resident did not contain the signature of the custodian to document participation in the service plan review of the resident. The other file failed to document the participation in the development of or the review of the service plan. Both files were complete for all of the other items reviewed.

The Oklahoma State Department of Health's inspection report of October 28, 2004, noted that the facility needed a long-stem metal thermometer in the kitchen. The item was corrected. The DHS Division of Child Care's inspection report of January 24, 2005, noted two minor items corrected during the visit and two minor repairs to be completed within thirty days. The DHS had reviewed all eighteen personnel files. The files were complete for all items reviewed except for two staff members whose first aid certifications were not current. Both staff members were scheduled for re-certification training during the DHS visit.

Facility Tour

The OJSO reviewer toured the administrative offices and both residential areas of the facility. The reviewer took sixteen digital photographs of the interior and exterior of the residential parts of the facility during the tour and observed a staff meeting for a period of time. The staff discussion appeared to address individual needs and approaches to deal with the residents.

The residential facility was located in a primarily business corridor in central Lawton, approximately two blocks from a small office complex that housed the school and the administration. A business office was located next door to the facility, and the OJSO

reviewer was told that the residents were kept inside after school until after five o'clock in the afternoon. The location of the facility in an urban area created challenges to the operation of an adventure program during the week.

On the day of the OJSO's visit, the facility appeared clean. The main residential area was formerly a family dwelling. It is an aging structure presenting challenges to proper maintenance and to an aesthetic quality of life for the residents. The two-story house, with bedrooms upstairs and downstairs, presented concerns for proper supervision of the residents. In addition, some of the residents slept in a separate building behind the main house, requiring one of the two staff members on duty to remain with them. In summary, the configuration of the physical plant and its urban location was not conducive to outdoor adventure programming.

Conclusion

According to the staff and the residents, the program services are in place. The residents had few favorable comments to make regarding their placement; however, their behavior seemed to be appropriate and each of the residents interviewed readily described their treatment goals. The location, configuration, and condition of the physical plant are not conducive to adventure-based programming; however, it seems that the administration and staff work hard to overcome the circumstances.

Finding

1. Two service plan reviews and one service plan did not document the participation of the custodians in the process or document the reason for their non-participation. Department of Human Services licensing policy OAC 340:110-3-154, (b), (1), (A) and (B), and (2), (B) and (C), states that the facility involves the resident and parents or custodian in the development of the service plan and the reviews, and if the parents or custodian do not participate in the development of the service plan or the reviews, the reason for non-participation is documented in the service plan. The same cite also states that the service plan and the reviews include the names and signatures, with the date, of those participating in developing the service plan and those participating in the reviews.

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