

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

Name and Location of Facility: Lawton Adventure Program
Lawton, Oklahoma

Date of Visit: October 7, 2009

Oversight Reviewers: Dana S. Holden and Janice Sharp, Oversight Specialists

Subject: Second Biannual Visit, 2009

Date: December 15, 2009

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit at the Lawton Adventure Program on October 7, 2009. The purpose of the OJSO visit was to assess compliance with established responsibilities and facility policy and procedures. The Office of Juvenile Affairs (OJA) contracted with Southwestern Oklahoma State University for the operation of the program, which serves OJA-custody males. The program was licensed for sixteen residents by the division of Oklahoma Child Care Services (OCCS) of the Oklahoma Department of Human Services (DHS) as a residential child care facility. On the day of the OJSO visit, the census was fourteen.

Persons Interviewed

- Entry interview and an exit conference with the program administrator
- Four residents

Documents Reviewed

- Four resident files
- OKDHS OCCS Residential Child Care Facility Inspection report dated May 13, 2009
- Office of the Oklahoma State Fire Marshal report dated January 17, 2009
- Oklahoma State Department of Health Food Inspection report dated June 30, 2009

Findings

Interviews

The OJSO interviewed four residents. The interview questions pertained to the residents' perceptions of safety, program services, resident rights, discipline practices, and other residential program issues. The OJSO noted:

- All four residents stated that they felt safe at the facility; two of the four residents interviewed attributed their reasons for feeling safe to staff supervision.
- When asked if there was anything that could be done to make the facility better overall, two of the four residents responded that more activities for the residents would make the program better; one of those two residents also stated that more privileges for the residents would improve the program.
- When asked about the food, all four residents reported that they received enough to eat and that additional helpings of food were allowed. One resident stated that the food tasted “good”, another resident stated that there was limited variety in the food served, another resident stated that the types of food served were usually not to his liking, and the other resident stated that sandwiches were served too often.
- Three of the four residents reported that loss of privileges was the worst punishment they had received for violating a rule at the facility; the other resident reported that a drop in level within the facility’s level system was the worst punishment he had received for violating a rule.
- All four residents stated that residents were taken to a local medical clinic if they became ill.
- Two of the four residents reported that they were unaware of any residents having been injured at the facility; one of the two residents who said they were aware of injuries to residents stated that the injuries were not serious, only scrapes, and the other resident stated that a resident had been injured while playing football.
- All four residents reported that recreation occurred regularly. Examples of the recreation available were football, basketball, swimming, fishing, rock climbing, propelling, canoeing, camping, volleyball, and tennis.
- All four residents were able to explain the facility’s grievance procedures; three of the four residents had filed grievances and reported knowing the outcomes of their grievances.
- All four residents reported having participated in community activities. Examples of the community service provided were lawn work and picking up trash in the community.
- All four residents stated that there was a staff person with whom they felt comfortable talking regarding a concern or a problem.
- All four residents reported that they had not been cursed at by staff; all four residents also reported that they had not witnessed other residents being cursed at by staff.

No concerns were noted from the resident interviews.

The OJSO did not interview staff as the staff members had been interviewed recently by the OKDHS OCCS. The OCCS had not noted any concerns regarding the staff.

File Reviews

The OJSO reviewed four resident files. The files were well-organized, and the materials were easy to locate. The OJSO noted:

- Three of the four files did not document medical examinations for the residents.
- One of the four files did not document a ninety-day review of the resident's service plan.

No other concerns were noted from the resident files reviewed.

The OJSO did not review any personnel files. The OKDHS OCCS recently had reviewed the personnel files. The OCCS had noted that one staff member's file did not contain documentation verifying tuberculin testing and orientation training and that another staff member's file did not contain documentation verifying orientation training and behavioral intervention techniques training. All deficiencies had been corrected prior to the OJSO's visit. No other areas of concern were noted.

The OJSO reviewed the most recent inspection reports by the OKDHS OCCS, the fire marshal's office, and the health department. The OCCS report had cited the facility for two personnel files not containing all required documentation and the housing unit needing minor repairs. On the day of the OJSO visit, documentation indicated that the violations had been corrected. The fire marshal's report had not cited any deficiencies. The health department report had cited minor deficiencies that had been corrected prior to the OJSO's visit.

Violations

1. Three of the four resident files reviewed did not document medical examinations for the residents. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-154, Social services, (a), Admission, (5), states, "Residents receive a medical examination by a health professional within 60 days prior to admission or within 30 days following admission. . . ."
2. One of the four resident files reviewed did not document a ninety-day review of the resident's service plan. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-154, Social services, (b), Service planning, (2), Service plan review, (A), states, "The service plan is reviewed within 90 days after it has been developed and at least every six months thereafter."

DSH:JS

