

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

Name and Location of Facility: New Lifehouse Teen Challenge
Disney, Oklahoma

Date of Visit: October 4, 2006

Oversight Reviewer: Jenifer K. Cooks, Oversight Specialist

Focus of Visit: Announced Visit, 2006

Date: February 22, 2007

General Information

The Office of Juvenile System Oversight (OJSO) conducted an announced visit on October 4, 2006, to the New Lifehouse Teen Challenge, located in Disney, Oklahoma. The focus of the visit was to assess 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-seven residents. The facility is a residential program that accepts adolescent females. Referrals are received from private homes, churches, other programs, or juvenile authorities. On the day of the OJSO visit, the census was twelve.

Interviews Conducted

- Entry interview and an exit conference with the assistant director
- Two residents
- One direct care staff member

Materials Reviewed

- DHS Division of Child Care inspection report, dated September 14, 2006, and the facility response
- Most current inspection report by the Oklahoma State Department of Health
- Office of the Oklahoma State Fire Marshal inspection report, dated September 27, 2006
- Current DHS license
- International Christian Accrediting Association provisional accreditation certification, dated July 11, 2005
- Copies of resident grievances from June through September 2006
- Pest control invoices from June through September 2006

- Facility menu planner for the week of September 30 through October 6, 2006
- Two personnel files
- Files on two residents

Areas Toured

- Resident rooms
- School room
- Kitchen and dining area
- Main building: Administrative offices, dormitory, and kitchen
- Partially completed multi-purpose building: Gymnasium, classrooms, kitchen, dining area, and restrooms

Overview

Interviews

The OJSO interviewed two residents. The interview questions pertained to the residents' perceptions of safety, program services, the rights of residents, discipline practices, and other residential program issues. No issues of concern were noted.

The OJSO interviewed one direct care staff member. The interview questions pertained to the staff member's perceptions of program services, the rights of residents, discipline policies, and other residential program issues. No issues of concern were noted.

File Reviews

The OJSO reviewed the files on two residents. The OJSO noted:

- The individualized service plan in one file was not dated.
- Both individualized service plans did not document the signatures of parents or guardians as participating in the development of the service plans, nor the reasons for non-participation.
- One individualized service plan review did not document the signatures of the parents or guardian as participating in the review, nor the reasons for non-participation.

Two personnel files were reviewed. One file reviewed did not contain documentation of tuberculin testing and required first aid training for the employee.

Observational Tour

The OJSO conducted a tour of the facility. Noted concerns were:

- The expiration dates were outdated on cartons of food in the refrigerator located in the kitchen.

- Dead insects were observed on the floors throughout the facility.
- The front bathroom of the multi-purpose building needed cleaning.
- A bottle of cleaning agent was observed on the open shelf in the utility room (Room 2).

Summary

On the day of the OJSO visit, the facility was in compliance with established responsibilities, with the exceptions noted. The interactions observed between the residents and staff members were appropriate. The staff demonstrated a desire and willingness to provide proper care to the residents, and the residents made positive comments about the staff and the program.

Findings

1. One staff file did not contain documentation of tuberculin testing for the employee. Department of Human Services licensing standards, Section 153.1, Personnel, (g), Employment requirements, (2), Tuberculin test, in part, states, "Upon employment, each employee has a documented mantoux (PPD) tuberculin skin test with a booster, if needed, within the previous 12 months, unless the employee shows medical verification of a previous positive skin test."
2. One staff file did not contain documentation that the employee had completed required first aid training. Department of Human Services licensing standards, Section 153.1, Personnel, (m), Staff training, (3), Training for child care staff, (E), in part, states, "Within 90 days of employment, all child care staff complete training in first aid and cardiopulmonary resuscitation (CPR), including infant and child, if appropriate. Child care staff maintain current training in CPR and first aid thereafter."
3. One individualized service plan was undated. Department of Human Services licensing standards, Section 154, Social services, (b), Service planning, (1) Comprehensive service plan, states, "A written service plan is developed and documented for each resident within 30 days of admission."
4. Signatures of parents or guardians were not documented on individualized service plans to indicate participation in the development of the service plans, nor were the reasons for non-participation documented. Department of Human Services licensing standards, Section 154, Social services, (b), Service planning, (1), Comprehensive service plan, (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."
5. The signatures of the parents or guardian were not documented on one individualized service plan review to indicate participation in the review, nor were the reasons for non-participation documented. Department of Human Services licensing standards, Section 154, Social services, (b), Service planning, (2), Service plan

review, (B), states, "The facility involves the resident and parents or custodian in the service plan review. If the parents or custodian do not participate in the service plan review, the reason for non-participation is documented in the service plan." At the same cite, paragraph (b), (2), (C), (v), states, "The service plan review includes the names, and signatures, with the date, of those participating in the review."

6. The expiration dates on cartons of food in a refrigerator were expired. Department of Human Services licensing standards, Section 164, Food service and sanitation requirements, (2), Food supplies, (A), Food sources, states, "Food is from sources approved or considered satisfactory by the health authority and is in sound condition, free from spoilage, contamination, filth, adulteration, misbranding, and safe for human consumption."
7. Dead insects were observed on the floors of the facility. Department of Human Services licensing standards, Section 163, Health regulations: Buildings, utilities, and grounds, (2), Premises, (A), states, "The premises are free of harborage for insects, rodents, and other vermin." In addition, Section 157, Physical facility and equipment, (j), Sanitation and safety, states, "All habitable and non-habitable areas are maintained in a clean and sanitary condition, free of litter and hazards."
8. A container of cleaning agent was left out on a shelf. Department of Human Services licensing standards, Section 157, Physical facility and equipment, (j), Sanitation and safety, (1), states, "Harmful substances and objects that are not essential to facility operation are not kept on the premises. Other poisonous, flammable, or harmful materials are kept under lock when not under the supervision of an authorized adult."

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