

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

Name and Location of Facility: Children's Recovery Center of Oklahoma
Norman, Oklahoma

Dates of Visit: December 10 and 11, 2008

Oversight Reviewers: Ellen Harwell and Anthony Kibble
Oversight Specialists

Focus of Visit: Second Biannual Visit, 2008

Date: April 9, 2009

Introduction

The Office of Juvenile System Oversight (OJSO) began an announced visit on December 10, 2008, at the Children's Recovery Center of Oklahoma (CRCO), located in Norman. The purpose of the visit was to assess compliance with established responsibilities. The Children's Recovery Center was licensed as a Residential Child Care Facility by the division of Oklahoma Child Care Services (OCCS) of the Oklahoma Department of Human Services (OKDHS) to provide services for fifty-five residents. The facility recently had been created by a merger of two former facilities: the Norman Adolescent Center and the Oklahoma Youth Center. The new facility, operated by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), contracted with the OKDHS for acute and residential care. The facility was unable to locate a contract that had been executed between the facility and the Office of Juvenile Affairs (OJA).

Interviews Conducted

- Four employees
- Eight residents
- Exit conference with facility administrative staff members

Documents Reviewed

- Census for facility
- OKDHS OCCS license issued November 1, 2008, for a maximum of fifty-five residents
- OKDHS OCCS Residential Child Care Facility Inspection report dated September 3, 2008

- Grievances for the last quarter prior to the name change (grievances filed by residents of the Oklahoma Youth Center and by residents of the Norman Adolescent Center)
- Office of the Oklahoma State Fire Marshal report dated September 23, 2008
- Oklahoma State Department of Health Food Inspection report dated October 10, 2008
- Placement agreements in effect and name change addenda executed between the OKDHS and the facility
- Four resident files
- Four personnel files

Findings

Resident Interviews

The OJSO interviewed eight residents. Four of the youth interviewed were in the custody of the OKDHS. Three were in the custody of the Office of Juvenile Affairs (OJA). One youth reported being in parental custody. The interview questions pertained to the residents' perceptions regarding safety, program services, resident rights, discipline practices, and other residential program issues. All residents reported something they liked about direct care staff members. Residents described staff members as being fun, nice, and caring. All stated there was nothing they disliked about the staff members. Five residents reported being familiar with the grievance process, two stated they were not, and one did not answer. None of the residents reported being forced to take medications. Six of the seven residents denied any physical or sexual abuse by peers or staff members. One resident described a restraint in which, allegedly, a staff member had pulled the resident's hair.

Staff Interviews

Four staff members were interviewed. One staff member reported prior experience in working with children in a professional capacity. Two staff members reported their experiences in dealing with this type of population had been through personal experience. Two staff members requested additional training in communicating with the children. Three of the four staff members reported that time-outs were the most common form of discipline they used. The fourth staff member reported restricting the youth's activities. When staff members were asked to rate their morale as low, medium, or high, three of the four staff described morale as medium. One staff member reported morale was medium-high.

Personnel File Review

Four personnel files were reviewed. No concerns were noted.

Resident File Review

Four resident files were reviewed which included one parental custody resident file, two OKDHS custody resident files, and one OJA custody resident file. The OJSO noted:

File One - Parental Custody Resident File

- The eye screening documented the youth's vision was 20/13. The section of the form that documented if a referral was needed was left blank. During the exit conference, the OJSO informed facility administrators the youth needed an eye appointment.
- The date, time, and age were left blank on the Physical Examination form.

File Two - OKDHS Custody Resident File

- The Family and Guardian Rights/Child and Adolescent Rights form was not signed by the youth.
- The youth did not sign the grievance notice.
- The Educational Assessment documented it was unknown if the youth was on an Individualized Education Plan (IEP).

File Three – OKDHS Custody Resident File

- The Master Treatment Plan documented, "No trauma has been disclosed; in DHS custody."
- The Privacy Practices Receipt Notice was not in the file and could not be located by the facility.
- The "Oklahoma Youth Center Medication Reconciliation" form was not signed indicating the consent of the guardian to continue with current prescribed medications. Consents could not be located for medications prescribed after admission.

File Four – OJA Custody Resident File

- The Family and Guardian Rights/Child and Adolescent Rights form was not signed by the youth.
- The youth did not sign the grievance notice.
- The "Health and Drug History" form was blank. A staff member had written that the form was "not completed by OJA worker." The mother visited the facility on December 10, 2008.
- The "Child History" form was blank.
- The "Oklahoma Youth Center Medication Reconciliation" form was not signed, indicating the consent of the guardian to continue with current prescribed medications.
- The OJSO could not locate legal documents that showed the youth was in the custody of the OJA.
- The Juvenile Justice Specialist for the OJA Juvenile Services Unit signed two blank consent forms, "Multi-party Consent for Release of Confidential or Protected Information" and "Consent for Release of Confidential Information."
- The master treatment plan was not signed by the parent or guardian or the youth. The education portion of the plan was blank.

Areas of Concern

1. The Office of Juvenile Affairs Juvenile Services Unit worker signed two blank consent forms authorizing the release of confidential health information.
2. The facility was unable to locate a contractual agreement or memorandum of understanding that had been executed between the facility and the Office of Juvenile Affairs that set out the expectations for the care received by or discharge procedures for residents of the facility who are in the custody of the OJA. Although the OJA questions whether a contract is required for placing youth at facilities operated by other state agencies, OJA policy 377:10-7-15, Purpose, states:

The purpose of this Subchapter is to describe contract-based residential care (CBRC) programs. A CBRC facility is a group home, defined by 10 O.S., § 7301-1.3 or a community residential center, operated by a private, licensed Child Placing Agency or Residential Child Care Facility. The CBRC program shall contract with OJA to provide a specifically defined course of care and treatment for juveniles in OJA custody. The contract facility shall comply with the DHS published "Requirements for Residential Child Care Facilities".

The OJSO has been informed that the OJA will consider executing a memorandum of understanding.

Violations

1. The medical exam of a youth indicated the youth required vision correction. An eye appointment and/or referral was not documented. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-154.3, Health and medical services, (c), Medical care, in part, states, "Each resident receives proper medical and dental care."
2. The date and time were left blank on the physical examination form of one youth. The file of a second youth contained two blank forms, Health and Drug History and Child History. OKDHS Policy, 317:30-5-95.37, Medical, psychiatric and social evaluations for inpatient services for children, (1), (A) through (C), states, "These evaluations are considered critical documents to the integrity of care and treatment and must be completed as follows: . . . History and physical evaluation must be completed within 48 hours of admission by a licensed independent practitioner (M.D., D.O., A.P.N., or P.A.) . . . Psychiatric evaluation must be completed within 60 hours of admission by a M.D. or D.O. . . . Psychosocial evaluation must be completed within 72 hours of an acute admission and within seven days of admission to a PRTF by a licensed independent practitioner (M.D., D.O., A.P.N., or P.A.) or a mental health professional as defined in OAC 317:30-5-240(c)."
3. The Family and Guardian Rights/Child and Adolescent Rights form was not signed by two residents. A grievance notice was not signed by two residents. The Privacy Practices Receipt of Notice could not be located in one file. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-154, Social

services, (a), Admission, (7), states, “The facility documents, by the resident’s and parent’s 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.”

4. The Education Assessment for one youth documented that it was unknown if the youth was on an Individualized Education Plan. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-154.1, Program, (c), Education, (2), states, “The facility ensures that school-age residents receive the educational instruction to which they are entitled under provisions of federal and state education laws and regulations.”
5. The “Oklahoma Youth Center Medication Reconciliation” form had not been signed on behalf of two youth to indicate the consent of the guardian to continue with current prescribed medications. Consents could not be located for medications prescribed after admission for one youth. The OKDHS Agreement for Residential Psychiatric Care for involving children and youth in the legal custody of OKDHS, Part II, Residents Rights, (I), in part, states, “Medications such as stimulants, tranquilizers or psychotropics may be administered only as a part of a program of medically approved therapy, must be included in the resident’s individual treatment plan and must be listed in the Contractor’s formulary. Prior to the implementation of the order of such medication, the resident’s [Child Welfare] county of jurisdiction worker and the resident must be informed of the benefits and hazards of the medication.”