

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

Name and Location of Facility: Northern Oklahoma Youth Services
Emergency Youth Shelter
Ponca City, Oklahoma

Date of Visit: August 5, 2008

Oversight Person: Dana S. Holden, Oversight Specialist

Focus of Visit: Oversight Visit, 2008

Date: October 7, 2008

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an announced visit on August 5, 2008, at the Northern Oklahoma Youth Services emergency shelter in Ponca City, Oklahoma. The purpose of the oversight visit was to assess compliance with Oklahoma Department of Human Services (OKDHS) licensing standards for children's shelters and facility policy and procedures. The shelter was licensed for 12 residents by the OKDHS division of Oklahoma Child Care Services (OCCS). The Office of Juvenile Affairs (OJA) contracted with Northern Oklahoma Youth Services for emergency shelter care. Northern Oklahoma Youth Services is a member of the Oklahoma Association of Youth Services. At the time of the OJSO visit, the census was four.

Persons Interviewed

- Entry interview with the Executive Director
- Exit conference with the Director of Services
- Two child care workers on-duty
- Three residents

Documents Reviewed

- Two personnel files
- Files on three residents
- Office of the Oklahoma State Fire Marshal report dated February 11, 2008
- Oklahoma State Department of Health Food Inspection report dated June 3, 2008
- OKDHS OCCS report dated June 3, 2008

Findings

Interviews

The OJSO interviewed three residents. The OJSO noted:

- Two residents reported that a staff member called a resident “pathetic” when the resident became upset regarding a personal problem. Reportedly, the statement was made to another staff member, the resident in question, and in the presence of other residents.

No other concerns were identified from the resident interviews.

Two direct care staff members were interviewed. The OJSO noted:

- One staff member could not adequately describe the resident grievance process.
- One staff member described the procedures for administering medication as handing the resident the bottle of medicine, allowing the resident to get his/her medicine, and documenting the amount of medication that was taken by the resident.

No other concerns were identified from the staff interviews.

File Reviews

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

- One file did not contain documentation of immunizations for the resident.
- The service plans contained in the three files did not document the parents or custodians’ signatures to indicate participation in the development of the plans, nor was there documentation to indicate the reasons for non-participation by the parents or custodians in the development of the plans.
- The objectives and goals listed in the services plans reviewed did not address the individualized needs of the residents.

No other areas of concern were identified from the resident files review.

The personnel files and training records of two staff members were reviewed. The OJSO noted:

- Documentation indicated neither employee had maintained current training in first aid.
- The training hours for 2007 documented in the two files reviewed indicated one employee had completed seven hours of training and the other employee had completed five hours.

Violations

1. A staff member reportedly referred to a resident as “pathetic”. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-154.2 Behavior management, (b) Prohibitions, (2), states, “Facility policy prohibits harsh, humiliating, cruel, abusive or degrading language.”
2. One of the two staff members interviewed could not adequately explain the resident grievance process. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-153.1 Personnel, (I) Orientation, (2), (B), states, “Orientation includes, but is not limited to, grievance process.”
3. One of the two staff members interviewed described improper procedures for administering medication to residents. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-154.3 Health and medical services, (e) Medication, (3), states, “Prescription medications are administered by the designated staff member only as part of a prescribed therapeutic treatment.”
4. One of the three resident files reviewed did not contain documentation of the resident’s immunizations. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-154.3 Health and medical services, (d) Immunizations, states, “Each resident is immunized against communicable diseases in accordance with the rules and regulations of the Oklahoma State Department of Health.”
5. The objectives and goals listed on the service plans reviewed were standardized and the same objectives and goals were used for each resident, without regard for the residents’ individualized needs. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-154 Social services, (b) Service planning, (1) Comprehensive service plan, (B), in part, states:

The service plan identifies and includes:

- (i) the resident’s needs, such as counseling, education, physical health, medical care, or recreation, in addition to basic needs for food, shelter, clothing, routine care and supervision;
 - (ii) strategies for meeting the resident’s needs, including instructions to staff. Individual health needs must be addressed in the facility’s medical plan;
 - (iii) the estimated length of stay;
 - (iv) goals and anticipated plans for discharge;
 - (v) the facility’s plan to involve the resident’s [sic] parents or custodian, including visitation guidelines; and
 - (vi) the names and signatures, with date, of those participating in developing the service plan.
6. The service plans reviewed did not document parent/guardian signatures to indicate participation in the development of the service plans, nor were the reasons for non-participation documented. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-154 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.”

7. Documentation indicated that the two direct care staff whose files were reviewed had not completed the required number of training hours for 2007. One staff had completed seven hours of training, and one staff had completed five hours. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-153.1 Personnel, (m) Staff training, (3) Training for child care staff, (A), in part, states, “Full-time child care staff obtain a minimum of 24 clock hours per calendar year of staff development courses.”
8. Documentation indicated that the two direct care staff whose files were reviewed had not maintained current training in first aid. The OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-3-153.1 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.”

Summary

The issues regarding standardized service plans and non-participation by the parents/guardians in the development of the service plans had been addressed in the previous OJSO report. In the facility response dated April 12, 2007, to the OJSO findings from the previous visit, the Director of Services stated that the parents/guardians were not always available to participate in the development of the service plans. The OKDHS licensing standards require the facility either to include the parents/guardians or document the reasons for non-participation. For custody children who enter the shelter, a form could be facsimiled to the workers to request their input in the development of service plans. For the non-custody residents, the reasons for non-participation by parents/guardians in the development of service plans should be documented.

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