

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

Name and Location of Facility: Pauline E. Mayer Shelter
Oklahoma City, Oklahoma

Date of Visit: October 25, 2007

Oversight Reviewer: April Simmons and Tina Pendergraft,
Oversight Specialists

Focus of Visit: Unannounced Routine Visit

Date: December 31, 2007

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit on October 25, 2007, at the Pauline E. Mayer Shelter (PEMS) and the overflow building located at the PEM annex, in Oklahoma City, Oklahoma. The annex building was used as additional space for the placement of residents admitted to the shelter. The purpose of the visit was to assess compliance with established responsibilities and to follow-up on two complaints received regarding a child death and another child that sustained a skull fracture while placed at the PEM annex. The facility was certified by the Department of Human Services (DHS) Division of Child Care for forty-two residents at the shelter and sixteen residents at the annex. On the day of the OJSO visit, the census was thirty-three at the shelter and sixteen at the annex.

Interviews Conducted

- Entry interview and exit conference with the Director
- Ten residents
- Five staff members

Documents Reviewed

- Personnel files and training records for five staff members
- Fifteen resident files
- Office of the State Fire Marshal inspection form, dated September 10, 2007
- Oklahoma State Department of Health Food inspection report, dated April 26, 2007

- DHS Division of Child Care Facility inspection form, dated August 31, 2007
- DHS Office of Client Advocacy's quarterly report
- Tornado and fire drill log from July 2007 to October 2007
- Resident Menu for October 2007
- Recreation schedule for October
- Grievance Log for 2007
- Previous OCCY Oversight Report dated July 3, 2007

Findings

Persons Interviewed

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

- Three residents reported they were unaware of the grievance process.
- Two residents reported the food tasted bad.
- Three residents reported the staff members curse at the residents.

The OJSO interviewed five staff members. The interview questions pertained to the staff members' perceptions of program services, resident rights, discipline policies, and other residential issues. The OJSO noted:

- Two staff members reported when the shelter/annex is over capacity, the staff members work longer hours and days, and as a result the stress level in staff members rises to cause more risk to the children's safety.

Files Reviewed

The OJSO reviewed fifteen resident files for compliance with DHS licensing standards. The OJSO noted:

- Twelve of the resident files were missing documentation of immunization records, or a request for the records.
- One resident file contained a service plan that was unsigned by all participants.
- One resident file contained a service plan that was signed but not dated.
- Four of the resident files contained service plans that were dated after the three-day requirement.
- One resident file was missing signatures on the grievance form.
- One resident file medication chart was blank for October; however, the file contains documentation that the child is on prescribed medications.
- One resident file was missing the required seven-day health screening.

The OJSO reviewed the personnel files and training records of five staff members for compliance with DHS licensing standards. The OJSO noted the following:

- Four files needed a current evaluation completed on the staff member.
- One file did not contain updated training records for 2007.

The OJSO also reviewed OSBI criminal background checks for all employees hired since July 2007, who are still employed at the PEM shelter/annex. The staff members hired prior to June 2007, had already been reviewed on the last visit. All OSBI checks reviewed were in compliance with DHS licensing standards.

Areas of Concern

1. According to statements from interviewed staff members and the PEMS Director, the turnover rate for the shelter and annex staff persons is high. The staff members interviewed during the oversight reported they would like an incentive program, more pay, and benefits for temporary positions as support for the job duties at the shelter and annex.
2. The OJSO reviewed the PEM shelter and annex population reports beginning September 18, 2006 through November 7, 2007. Of the 262 population reports, the PEM shelter was over capacity on 75 reports. The annex was over capacity on 8 days. Between the annex and shelter, the reports show the facility was out of compliance on a total of 79 days.

The current standard procedure for law enforcement is to transport the children placed in protective custody to the PEMS. The PEMS staff members are required to maintain the proper staff to resident ratio and provide appropriate care for the children, regardless of the space and availability of the staff members. The PEMS population can rise over a weekend and children are not removed until the following Monday or later. The PEMS is unable to turn away children when it reaches capacity, which results in placing children, who have just been removed from a high-risk situation into an environment that does not meet minimum standards for space and staff.

3. The boy's restroom and two of the boy's resident rooms had a strong odor of urine.
4. All violations indicated in the OCCY Oversight Report dated July 3, 2007, again are present as violations in this second oversight report for calendar year 2007.

Violations

1. The OJSO reviewed the facility population reports for September 4, 2007, through November 30, 2007, and on all fifty nine population reports reviewed, children were present between the ages of birth and five who had been at PEM for a period longer than twenty-four hours. The DHS policy OAC 340:75-10-9, Admissions and discharges, (b), Shelter capacity and length of stay in the OKDHS operated shelters, in part, states, The child: (1) “five years of age or younger remains in the shelter no more than 24 hours. If the child does not return home during this time, the child is discharged to emergency foster care (EFC), per OAC 340:75-7-262. . . .” See chart attached regarding census information September 2007 through November 2007.
2. The OJSO reviewed the PEM shelter and annex population reports beginning September 4, 2007 through November 30, 2007. Of the fifty-nine population reports reviewed, the PEM was over capacity on twenty reports. The DHS policy OAC 340:75-10-9, Admissions and discharges, (b), Shelter capacity and length of stay in the OKDHS operated shelters, in part, states, “the specified licensed capacity is 42 children at the Pauline E. Mayer shelter [and 16 children at the annex]” See chart attached regarding census information September 2007 through November 2007
3. The OJSO reviewed the PEM shelter and annex population reports for September 4, 2007, through November 30, 2007, and of the fifty nine reports reviewed, on forty-seven days there were children present six years of age or older who had been at the shelter for longer than sixty days. The Department of Human Services policy OAC 340:75-10-9. Admissions and discharges, (b), Shelter capacity and length of stay in OKDHS operated shelters, (2), states “[a] child . . . six years of age or older remains in shelter care no more than 30 days. If an extended stay is required, the child’s length of stay in the shelter does not exceed 60 days” See chart attached regarding census information September 2007 through November 2007.
4. Twelve resident files did not contain documentation of the immunization records or documentation that the immunization records were requested. The Department of Human Services licensing standards, Section 154, Social Services, (e), Resident’s records, (1), states, “The facility maintains a written record for each resident...The record includes: (D) medical records;” Section 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. Six resident files for residents who stayed at least three days did not contain a completed service plan. The Department of Human Services licensing standards, Section 167, Requirements for children’s shelters, (f) Service Plan, states in part, “A written service plan is developed and documented for each resident within three days of admission.”

6. One staff file did not contain documentation of mandatory training for 2007. Department of Human Services licensing standards, Section 153.1 Personnel, (m), Staff training, states, "Staff meet the requirements for training contained in (1) – (4) of this subsection. (3) Training for child care staff. Child care staff receive training. (A) Full-time child care staff obtain a minimum of 24 clock hours per calendar year of staff development courses."
7. One resident file did not contain a signed Notice of Grievance Rights form. The Department of Human Services licensing standards, Section 154. Social Services, (e) Resident's records, (1), (J) states, "signed documentation that the resident and parents or custodian have been provided written copies of the facility's policies on resident's rights, grievance procedures, behavior management policies, trips away from the facility, use of volunteers and frequency of reports to the parent or custodian. . . ."
8. One resident file did not contain a completed health screen within seven days of admission. The Department of Human Services licensing standards, Section 167 Requirements for children's shelters, (e) Admission, (4) in part states, "Each child remaining in a shelter for over seven days receives a health screening by an RN or LPN."
9. Four of the personnel records were missing an updated performance evaluation. The Department of Human Services licensing standards, Section 153.1 Personnel, (g) Employment requirements, (3) Performance evaluation, states, "Each employee has a written job performance evaluation at least annually, which is maintained in the employee's personnel record."

Summary

The two complaints regarding the skull fracture and the child death are being addressed by OKDHS Office of Client Advocacy. The OJSO will consider findings upon completion of the OKDHS processes.