

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

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

Date of Visit: September 30, 2008

Oversight Reviewer: Tina Pendergraft, Oversight Specialist IV

Focus of Visit: Second Unannounced Visit for 2008

Date: October 28, 2008

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit to the Pauline E. Mayer Group Home on September 30, 2008. The purpose of the visit was to assess compliance with established responsibilities and facility policy and procedures. The group home is licensed and operated by the Oklahoma Department of Human Services (OKDHS) and has capacity for twelve residents. On the day of the OJSO visit, the census was three adolescent residents and three children.

Interviews Conducted

- Entry interview and an exit conference with the Group Home Supervisor
- One direct care staff
- One adolescent resident

Documents Reviewed

- Three resident files
- Three temporary employee personnel files
- OKDHS division of Oklahoma Child Care Services (OCCS) Inspection report dated May 29, 2008
- Oklahoma State Department of Health Food Inspection report dated December 11, 2006
- Office of the Oklahoma State Fire Marshal report dated May 20, 2008
- OKDHS Office of Client Advocacy (OCA) monthly reports of incident referrals for January 1, 2007, through April 16, 2008
- Medication Administration Log for September 2008

Areas Toured

- Three resident rooms
- Three bathrooms
- Kitchen and dining area
- Laundry room
- Study
- Two living areas
- Playroom

Findings

Interviews

The OJSO interviewed one adolescent resident and one direct care staff member. No issues were noted during the interviews.

File Reviews

The OJSO reviewed three resident files. The OJSO noted:

- The individualized service plan maintained in one file was not signed and dated by the resident or the custodian to indicate participation in the implementation of the resident's service plan, nor was the reason for non-participation documented, nor was the reason for non-participation documented.
- Documentation to indicate the resident and custodian had been provided written copies of the facility policies was not signed by the resident and custodian in one file.
- Documentation in one file did not indicate the resident was advised of the facility rules and regulations at admission.
- Documentation in one file indicated the resident did not receive a medical examination 60 days prior to admission or within 30 days following admission.
- Documentation in one file did not record the name of the facility staff member who conducted the admission process.
- The service plan in one file did not document the goals and plans for the resident upon discharge from the facility.

The OJSO reviewed three temporary employee personnel files. The OJSO noted:

- One file did not contain a current job performance evaluation.

No other areas of concern were identified from the staff file review.

Observational Tour

A tour of the entire facility was conducted. The OJSO noted:

- For September 23, 2008, the Medical Administration Log documented that a resident's prescribed medications were monitored only one time, instead of two; the medications were being monitored to check the resident's glucose level.
- Documentation indicated the fire extinguishers had not been inspected since July 2007.

Areas of Concern

1. One of the three personnel files reviewed did not contain a job performance evaluation for the temporary employee. When brought to the attention of the direct care supervisor, she immediately completed an evaluation for the temporary employee and stated that she would meet with the employee to discuss the evaluation and obtain her signature on the employee's next work day.
2. One of the three resident files reviewed did not contain documentation to indicate the resident had been informed of facility rules and regulations at admission. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154, Social services, (a), Admission, (6), states, "Upon admission, the facility advises the resident of all rules and regulations of the facility."

Violations

1. One of the three resident files reviewed contained an individualized service plan that was not signed and dated by the custodian and resident to indicate participation in the implementation of the resident's service plan. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154, Social services, (b), Service planning, (1) Comprehensive service plan, (A) and (B), (vi), in part, 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. The service plan identifies and includes the names and signatures, with the date, of those participating in developing the service plan."
2. One of the three resident files reviewed did not contain documentation signed by the resident and custodian to indicate both had received written copies of the facility policies. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154, Social services, (a), Admission, (7), states, "The facility documents, by the resident's and parents' 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."
3. One of the three resident files reviewed contained documentation that indicated the resident had not received a medical examination within the required timeframe. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154, Social services, (a), Admission, (5), in part, states, "Residents receive a medical examination by a health professional within 60 days prior to admission or within 30 days following admission."

4. One of the three resident files reviewed contained a service plan that did not document the goals and plans for the resident upon discharge from the facility. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154, Social services, (b), Service planning, (1), Comprehensive service plan, (B), in part, states, "The service plan identifies and includes (iv) goals and anticipated plans for discharge."
5. The Medication Administration Log documented that on September 23, 2008, a resident's prescribed medications were monitored only one time, instead of two times. The resident's medications were being monitored to check the resident's glucose level. The group home supervisor advised that the resident had been uncooperative regarding the monitoring process. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-154.3, Health and medical services, (e), Medication, (2), in part, states, "When any medication is administered to a resident, a precise record is kept that includes: (B) the name of the medication; the dosage; (C) the dosage, date and time given, and signature of the person who administered it; and (D) reason the medication is given."
6. The fire extinguishers were last inspected in July 2007. OKDHS Licensing Standards for Residential Child Care Facilities, OAC 340:110-165, Construction and fire safety, (5), Fire protection equipment, (B), Fire extinguishers, (i), states, "All fire extinguishers are inspected, serviced, and tagged annually by a trained individual."

Summary

The OJSO discussed its findings with the group home supervisor in the exit conference.

The OJSO reviewed the most recent inspection reports by the OKDHS OCCS, the health department, and the fire marshal's office. The inspection by the health department continues to appear to be past due. Subsequent to the OJSO's first biannual visit at the facility in April 2008, the OJSO verified with the health department that an inspection was completed on December 21, 2007. The OJSO requested a copy of the inspection report from the health department but has yet to receive the report.

On the day of the OJSO visit, the adolescent residents and their children were receiving proper care and the social environment at the facility was pleasant. The staff encountered during the OJSO visit demonstrated their willingness to improve the facility. One resident told the OJSO that the group home was a good place to stay and that she would not change anything about the facility.

TP:js

