

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

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**Name and Location of Facility:** Southern Oklahoma Resource Center  
Pauls Valley, Oklahoma

**Date of Visit:** October 24, 2006

**OJSO Reviewer:** Tina Pendergraft, Oversight Specialist

**Focus of Visit:** Second Biannual Visit for 2006

**Date:** January 9, 2007

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**General Information**

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit on October 24, 2006, to the Southern Oklahoma Resource Center (SORC), located in Pauls Valley, Oklahoma. The SORC is a residential and habilitative facility, also classified as an intermediate care facility for persons with mental retardation. The majority of the persons who live at SORC have severe or profound mental retardation as well as other disabling conditions. The primary mission of SORC is to provide services that enhance the development of each individual and to provide opportunities that promote personal growth and independence. The purpose of the OJSO visit was to assess compliance with established responsibilities and facility policy and procedures. The facility was licensed by the Oklahoma State Department of Health for 225 residents. On the day of the OJSO visit, there was one resident under the age of eighteen residing at the facility.

Persons Interviewed

- Entry interview and exit conference with the Assistant Director for Residential Services
- One staff member
- One resident under the age of eighteen

Documents Reviewed

- Two staff files
- File on the resident under the age of eighteen
- DHS Office of Client Advocacy quarterly incident report

- Most current inspection report by the Center for Medicare and Medicaid Services of the Department of Health and Human Services
- Life Safety Code fire inspection report of July 27, 2006
- State licensure inspection report of July 28, 2006

### Area Toured

- Free-standing residential cottage where the resident under the age of eighteen resided

### **Overview**

### Interviews

The OJSO interviewed the minor resident. On the day of the OJSO visit, he appeared to be engaged in the program and demonstrated contentment. He interacted well with staff. No concerns were noted.

One staff member was interviewed. The interview questions pertained to the staff member's perception of program services, the rights of minor residents, discipline policies, and other residential program issues. No concerns were identified.

### File Reviews

The OJSO reviewed the file on the minor resident. No concerns were noted from the resident file reviewed.

Two staff files were reviewed. The files did not document that the two staff members had completed required annual training. No other concerns were identified from the staff files reviewed.

### Observational Tour

The OJSO conducted a tour of the residential cottage where the minor resident resided. The OJSO noted that a garbage can with a lid was needed in the kitchen. No other concerns were identified.

### **Summary**

On the day of the OJSO visit, the facility was clean and well-maintained. The interactions observed between staff and the minor resident were appropriate. The OJSO was advised that the minor resident participated in water activities in the pool on-campus. Upon request, the OJSO was subsequently facsimiled verification of life guard certification for the person responsible for the minor resident during the water activities.

In the exit conference, the OJSO was given an explanation of the minor resident's placement at the facility. In addition, the OJSO was provided with verification of written approval by the DHS Developmental Disabilities Services Division for placement of the minor child in the facility.

## **Findings**

1. The kitchen did not contain a garbage can with a lid. Oklahoma State Department of Health policy OAC 310:675, Nursing and Specialized Facilities, 7, Administration, 15.1, Housekeeping laundry, and general storage, (a), Housekeeping, (8), (B), states, "There shall be a sufficient number of impervious containers with tight fitting lids that are clean and in good repair."
2. The two staff files reviewed did not document that the staff members had completed required annual training regarding the residents' adjustments to institutional life. Oklahoma State Department of Health policy OAC 310:675, Nursing and Specialized Facilities, 13, Staff requirements, 5, Nursing service, (i), Inservice, (2), states, "The facility shall provide all direct care staff with two hours of inservice training specific to their job assignment per month. This training shall include, at least . . . resident rights and resident adjustment to institutional life annually. "

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