

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

Name and Location of Facility: Tenkiller Adventure Program
Park Hill, Oklahoma

Date of Visit: September 25, 2008

Oversight Reviewer: Cliff Aldridge, Oversight Specialist IV

Focus of Visit: Second Biannual Visit, 2008

Date: March 23, 2009

Introduction

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit at the Tenkiller Adventure Program (TAP) on September 25, 2008. The purpose of the visit was to assess compliance with established responsibilities and facility policy and procedures. The Office of Juvenile Affairs (OJA) contracted with the Southwestern Oklahoma State University for the operation of the program to serve OJA-custody males. The TAP is licensed for eighteen residents by the division of Oklahoma Child Care Services (OCCS) of the Oklahoma Department of Human Services (OKDHS). The census was sixteen on the day of the visit.

Interviews Conducted

- Entry conference with the clinical service provider and the administrative assistant
- Five residents
- Two residential juvenile specialists (RJS)
- Exit conference with the administrative assistant

Documents Reviewed

- Two resident case records
- Two RJS staff files and training records
- TAP Daily Placement Census
- OKDHS OCCS inspection report dated July 17, 2008
- Office of the Oklahoma State Fire Marshal report dated May 12, 2008
- Oklahoma State Department of Health Food Inspection report dated June 4, 2008

Areas Toured

- Residential quarters
- Dining room
- Main building's indoor recreational area
- The OJSO ate lunch and visited informally with the residents

Findings

Resident Interviews

Five residents were interviewed relative to their participation in program services, quality of life, and interactions with the staff. All five interviewees reported regular participation in educational, recreational, and basic residential services. All five interviewees reported benefitting from counseling services from the clinical staff.

A majority of the residents made favorable comments about the staff or about some of the staff. Some thought the staff members were too strict. Two interviewees reported mild cussing or demeaning remarks by one or more staff members but provided insufficient details for follow up. One of these two interviewees said that a staff member who cussed at the residents no longer worked at the facility. No consistent themes of concern were identified from the resident interviews.

Staff Interviews

Two RJS staff members on-duty during the visit were interviewed. Both demonstrated familiarity with facility policies and reported beneficial program services for the residents. One interviewee indicated not being currently certified in first aid or cardiopulmonary (CPR) resuscitation.

Observational Tour

The indoor recreational area in the main building was clean and well-maintained. The dining room was also clean, except for an accumulation of burned food spills in the bottom of the hot food table. Some issues were identified in the dormitory: Floor tiles in the north bathroom were in poor condition. Stains were observed in the toilet bowls. Stains were noted on one of the fluorescent light covers in the north bedroom. The shower walls were damaged at the base in the south bathroom. A chair in the south bedroom was in poor condition and needed to be repaired or replaced. The fabric of an upholstered couch in the south dayroom was torn and the cushions were flattened.

Resident File Review

Two resident case records were reviewed. The OJSO noted concerns with the treatment plan reviews. In one of the files reviewed, the notations of progress were minimal. In the other file, progress was noted only as “complete” or “incomplete”.

Personnel File Review

Two RJS staff files were reviewed. One file was complete for all of the items reviewed on the day of the visit. The file of one employee was past due for first aid and CPR training that was required within ninety days of employment. Otherwise, the files were complete and the materials were well organized.

Inspection Reports Review

The health department’s inspection report noted that food was not sufficiently cooled in one refrigerator; a repair was subsequently made to the refrigerator. The report also indicated the need for clean (chlorine) test strips in the kitchen and the presence of food debris buildup on the underside of a mixer. The fire marshal’s report indicated that the facility met the applicable codes.

The OCCS inspection report noted two toilet leaks and a light out in one of the bedrooms. The correction plan indicated the repairs would be made by August 1, 2008. The items had been corrected prior to the OJSO visit. The report noted that tuberculin testing was not documented for one employee. The testing had been completed and was documented prior to the OJSO visit. According to the OCCS report, first aid and CPR training was not documented for one of the employees whose file was reviewed. The OJSO did not review this file but noted similar findings for other employees during a staff member interview and a personnel file review, as cited below.

Area of Concern

1. The OJSO had concerns with the evaluation of progress in the treatment plan reviews. As noted above, the progress statement was minimal in one file reviewed and limited to “complete” or “incomplete” in the other file reviewed. Technically, the standard might have been met, but the lack of meaningful documented discussion of progress with the client was likely of little benefit in assisting the resident in an understanding of his growth in his treatment goals.

Violations

1. The bottom of the hot food table in the dining room contained an accumulation of burned food spills. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-164, Food service and sanitation requirements, (10), (F), states, “Non-food contact surfaces of all equipment, including tables, counters, and

shelves, are cleaned as often as necessary to keep them free of accumulations of dust, dirt, food particles, and other debris.”

2. The floor tiles in one restroom were in poor condition, and the shower walls at the base were deteriorating in the other restroom. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-157, Physical facility and equipment, (j), Sanitation and safety, (7), states, “Floors, walls, ceilings, doors, and windows are maintained in good condition.”
3. A chair in one bedroom and a couch in a dayroom were in poor condition. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-157, Physical facility and equipment, (k), Furnishings and decor, (3), states, “Broken, defective, or recalled furnishings and equipment are repaired or replaced.”
4. One staff member interviewed reported not being currently certified in first aid or CPR, and one staff file reviewed did not document current training in first aid or CPR for another employee. OKDHS Licensing Requirements for Residential Child Care Facilities, OAC 340:110-3-153.1, Personnel, (m), Staff training, (3), Training for child care staff, (E), 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

It is noteworthy that all of the residents interviewed reported benefitting from the counseling they received. The OJSO appreciated the helpfulness of the facility’s administration and staff in arranging the interviews, hosting the observational tour, and providing the necessary materials for review.

CAA:js

