



Licensed Child Caring Agency Site Visit Re-licensing Report Homeless/Runaway/Transitional Living Shelters

Licensee: Youth Empowerment Shelter

Date of site visit: October 16, 2020

Executive Director: Fred Blakely

Licensing Coordinator: Holly Ivey

Program Director: Fred Blakely

Other Regulatory or Accrediting Agencies: DHS Treatment Services

Program Compliance: The program was found to be compliant or will be compliant with OAR 413-215-0001 to 413-215-0131, Licensing Umbrella Rules, and OAR 413-215-0701 to 413-215-0766, Licensing Homeless, Runaway, and Transitional Living Shelters Rules. Personnel records were reviewed and compliance with required background checks was documented for employees in all programs.

Program Description(s): Youth Empowerment Shelter is a homeless and runaway shelter in The Dalles, Oregon for children 10-17 years old. The shelter became licensed and began operating in 2016. Youth Empowerment strives to provide physical and emotional safety for teens in crisis. The program offers mediation services for families.

Program type and services: Shelter Services

Capacity (gender and ages): 10 children, ages 10-17.

Funding sources: DHS Treatment Services, Wasco County Juvenile Department, Sherman County.

Contracts and sources for referrals: DHS Treatment Services, Non-BRS Contracts.

Average length of stay: 45 days.

Average daily population served: 3-4 children daily.

Number of children served annually: The program averages 20 children per year.

Interviews, Observations: Staff and three children were observed at the program during the review. The youth that were observed at the program that day appeared to be at ease and comfortable in the environment. Overall, the facility was observed to be clean and in good repair. Fred Blakely, Executive Director, and one youth in the program were interviewed. The youth stated the following about the program: She really loved being there, it was nice and home like. Staff helped her stay on track and would take her to all her appointments. She stated she could talk to staff

anytime. She spoke about being provided enough food to eat, and always having snacks available. She stated hygiene products were provided if youth needed them. She stated there was nothing she would change about the program.

Program Strengths: The following strengths were identified by leadership at the time of the review:

- The program utilizes Positive Youth Development and Collaborative Problem Solving to assist children by building positive relationships with both adults and peers, while developing their unique potentials.
- The staff undergo continuous training and have a genuine care and concern for the wellbeing and development of the residents.
- The staff work closely with community partners to make sure that all residents have access to the diverse services they may need to be physically, mentally, emotionally, and financially equipped to transition into a more permanent and healthier situation.

Program Challenges: The following challenges were identified by leadership at the time of the review:

- Many of the residents have suffered traumas and feelings of rejection. The teen years are difficult transition years in the best of circumstances, but with the added stress of broken families, abuse, or homelessness, there is a greater demand for mentors and healthy role models willing to invest their time and energy to show the teens that they are worth it. The program works hard to bring some normalcy to the youths' lives, creating a homey atmosphere, and offering activities when possible. However, the population changes frequently, which can undermine a sense of stability. The Program leadership reported, it would be ideal to be connected to a day youth center that interacts with other youth who have more stable situations, and that could be a point of contact with youth after they leave the YES House.

Changes that have occurred in the last 2 years: The following changes were identified by leadership at the time of the review:

- There have been significant changes in staff and board members in 2020. Leadership reports to be smoothing out the transition, as the founders Gary and Linda Casady retired in the summer of 2020. The former Chairman of the Board, Fred Kirkman, also stepped down in 2020. Fred Blakely is the Executive Director as of August 2020. Lisa Fuller-Trosper is the new bookkeeper, and Ted Pitt is the Chairman of the Board. There has been significant turn over in staff in 2020.
- The agency is currently working with a non-profit business advisor, George Meyer, to reassess and strategically plan for the future of Y.E.S. House.
- There have been changes in operations due to Covid19.
 - Although the program is licensed for 10 children, the leadership has elected to keep one resident per bedroom, which lowers the capacity to 5 children. The program has created a quarantine area in the basement which has its own bathroom, and has been used for new intakes until testing can be done.

Lawsuits: N/A

Grievances and complaints filed in the last two years: There were none reported to Licensing at the time of the review.

Corrective Actions and Timeframes: Please submit the following to verify compliance.

Within 45 days of receipt of this report Youth Empowerment Shelter must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents can be emailed directly to Holly.r.ivey@state.or.us or sent by regular mail to the following address:

Department of Human Services, Children’s Care Licensing Program
 Attn: Holly Ivey, DHS Licensing Coordinator
 201 High St SE, Suite 500
 Salem, OR 97301

Recommendations: N/A

Exceptions: N/A

Changes in License: N/A

Summary of Review					
Program and Services 413-215-0011(2)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Program and services are in scope of license	X				
Governance of the Agency 413-215-0021	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1)(a) Minimum of 5 board members 413-215-0711 (1) Composed of a cross-section of the community, parents, employees, children in care.	X				
(2)(f) Formally evaluate the exec. Director’s performance annually	X				
(2)(g) Approves annual budget	X				
(2)(h) Obtain and review an annual independent financial review or audit of financial records.			X		
(2)(k) Written quality improvement program	X				
(2)(l) Meeting minutes	X				

Executive Director or Program Director 413-215-0021	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(3)(a) knowledge of requirements for providing care and treatment appropriate to programs	X				
(3)(g) Approval from BCU	X				
Discipline, Behavior Management, and Suicide Prevention 413-215-0076	Yes	No	N/A	Comments	Corrective Action Completed
(3) Agency uses appropriate and positive methods of behavior management and nationally recognized non-violent crisis intervention	X			<i>Comment:</i> The program staff are trained in the Crisis Prevention Institute (CPI) behavior intervention system, and uses Collaborative Problem Solving (CPS) and Positive Youth Development	
(3)(b)(C) Agency does not use chemical and mechanical restraint (excluding medically necessary devices/prescriptions)			X		
(3)(c) Agency uses appropriate time-out rooms (adequate space, heat, light and ventilation and is not capable of locking) and documents use in child's record when applicable			X		
(3)(e) Agency uses seclusion appropriately/consistent with policy			X		
(4) Agency has adequate plan in place to respond to suicidal behavior/warning signs	X				
Staffing Requirements 413-215-0721	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) Has and follows a written plan for minimum staffing	X				
(2) One staff for each shift is trained in non-violent crisis intervention	X				
(3) Staffing ratio is sufficient for adequate supervision Days: Evenings: Sleeping:	X				
Grouping 413-215-0756	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) & (2) Has and follows policies for grouping children that meets requirements (age, developmental level, maturity, behavior, medical...)	X				
(4) Care was taken to assess and minimize risk for children placed with emancipated children or adults	X				

Service Planning- Establish & maintain links with community agencies that provide: 413-215-0736	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(5)(a) Alternative living arrangements	X				
(5)(b) Medical services	X				
(5)(c) Mental health services	X				
(5)(d) Educational services	X				
(5)(e) Independent living services	X				
(5)(f) Other assistance required	X				
Physical Plant	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0046(3)(a) Foster Rights Posted (if children in DHS custody)		X		Physical Plant 413-215-0046 (3)(a) Foster Rights Posted (if children in DHS custody) <ul style="list-style-type: none"> The Foster Youth Rights were not observed to be posted at the program the day of the inspection. 	
413-215-0051(1) Sufficient safe space, equipment, and office equipment	X				
413-215-0091(12) License is posted in common area at each facility	X				
413-215-0001(5)(d) Adequate furnishings and personal items	X				
413-215-0746(2) Medication is kept in locked storage and inaccessible to children in care	X				
Safety - Transporting Children in Care 413-215-0761(3)(a)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(A) Vehicle is registered	X				
(B) Vehicle is insured	X				
(C) Maintained in safe condition	X				
(D) Equipped with first aid kit	X				
(E) Fire extinguisher - secured	X				
Safety - Building Requirements 413-215-0761(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(b)(A) Smoke free	X			Safety - Building Requirements 413-215-0761(6) b)(B) Clean and in good repair. <ul style="list-style-type: none"> Boys bathroom sinks and shower needed to be cleaned. 	
(b)(B) Clean and in good repair		X			
(b)(C)(i) continuous supply of hot and cold water	X				
(b)(D) room temps are w/in normal range, ventilated and free from odors	X				
Safety - Bathrooms 413-215-0761(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(c)(A)(i) 1:8 ratio for toilet and sink	X				
(c)(A)(ii) If self-closing metered faucet –15 sec.	X				
(c)(A)(iv) 1:10 ratio for bathtub or shower	X				
(c)(A)(v) individual privacy	X				
(c)(A)(vi) window covering	X				
(c)(A)(vii) permanently wired light fixtures	X				

(c)(A)(viii) mirror affixed at eye level	X				
(c)(A)(vi) adequate ventilation	X				
Client Rights 413-215-0716	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(2) Nutritional needs are met as appropriate for each child in care	X				
Medication Storage and Dispensing 413-215-0746	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(2) Medication is locked and inaccessible to children	X				
(3) Medication is self-administered after children have requested their medication at prescribed times	X				
(4) Written record of administration of medication includes (name, description, date and time dispensed, dosage, staff who dispensed)	X				
(5) Written record of disposal by 2 staff and includes when and how the medication was disposed	X				

Personnel Files 413-215-0061	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Staff Name/Position	X				
(3)(g) Date of Hire	X				
(3)(a) record of education, training and previous employment	X				
(1)(b) & (3)(b) reference checks complete and documented	X				
(1)(a) & (3)(c) Background check was completed and documented	X				
(3)(d) Annual performance evaluations	X				
(3)(f) Record of personnel actions	X				
(3)(g) Termination date, reason for termination	X				

(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	X				
New Employee Orientation (30 days) 413-215-0061(4)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Agency policies and procedures	X				
(b) Ethical and professional guidelines	X				
(c) Organizational lines of authority	X				
(d) Attributes of population served	X				
(e) & (5)(a) to (c) Mandatory reporting that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report (c) legal responsibility to report is personal to the employee	X				
(f) Privacy laws	X				
(g) Emergency procedures	X				
Staffing Requirements 413-215-0721	Yes	No	N/A	Corrective Actions	Corrective Action Completed
Staff (at least one for each shift) has been trained in non-violent crisis intervention	X				
Initial Training (Must be completed before staff is alone with youth) 413-215-0726 (1)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Completion of agency's orientation	X			Initial Training (Must be completed before staff is alone with youth) 413-215-0726 (1) (f) Sanitation procedures, REPEAT FINDING SINCE 2018 (i) CPR and First Aid. REPEAT FINDING SINCE 2016 <ul style="list-style-type: none"> Documentation of this training was not found consistently in the files reviewed. 	
(b) Understanding of supervision structure	X				
(c) Understanding of behavior management policies	X				
(d) Understanding of presenting issues of the youth served	X				
(e) Safety procedures	X				
(f) Sanitation procedures		X			
(g) First aid kit contents and use	X				
(h) Report writing	X				
(i) CPR and First Aid		X			
(j) Crisis intervention training	X				
Ongoing Training (Staff & Volunteers)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0726(2)(a) Confidentiality	X				


413-215-0726(2)(b) Universal precautions	X				
413-215-0726(2)(c) Discipline and behavior management	X				
413-215-0726(3) Training in CPR/First Aid sufficient to retain current certification	X				
413-215-0726(4) Staff working with food must possess a food handler's card	X				
413-215-0061(5) Mandatory reporting that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report (c) legal responsibility to report is personal to the employee	X				
413-215-0761(3)(b) Employees transporting children meet the driver requirements (current driver's license, and training for 15+ passenger vans if applicable)	X				
Contractors (if applicable) 413-215-0061(6)	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(a) Agency ensures the contractor meets the requirements of this rule and Chapter 413 division 215		X			
(b)(B) Contract includes the following: (i) Services provided (ii) Contractor fees (iii) Disclosure of information from contractor to agency (iv) Lines of authority (v) Adherence to rules, including background check (vi) Any liability of the agency for acts of the contractor, rights of indemnity and limitations on liability		X			
Comments:					

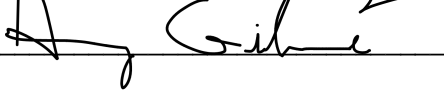
Child Records 413-215-0741(2)	Yes	No	N/A	Corrective Action	Corrective Action Completed
Name of Child	X				
Date of Admission	X				
(a) Sufficient information about the child's family or legal guardian to enable staff to contact them at any time	X				
(b) & 413-215-0731(2) Custody status	X				
(c) authorization for medical treatment	X				
(d) Consent to treat the child with interventions in use at the program	X				
(e) Signed acknowledgment that child is responsible for requesting medication at prescribed times			X		
(h) Documentation of child's illness and injuries and follow up by program	X				
Assessment 413-215-0741(2)(f) &	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0731 Assessment (2)(a)-(c) Includes family history, health history, mental health history (including diagnoses and current prescriptions). (3) Statement as to whether child meets eligibility requirements to be admitted to program.		X		<p>Assessment 413-215-0741(2)(f) &413-215-0731 Assessment (2)(a)-(c) Includes family history, mental health history (including diagnoses and current prescriptions). (3) Statement as to whether child meets eligibility requirements to be admitted to program.</p> <ul style="list-style-type: none"> The Assessment must clearly state it is an assessment, as the document being used was not titled assessment. The document being utilized as an assessment was missing the above stated requirements. 	
Service Planning 413-215-0741(2)(g) &	Yes	No	N/A	Corrective Actions	Corrective Action Completed
413-215-0736(2)(a) Includes family, staff & other interested parties		X		<p>Service Planning 413-215-0741(2)(g) &413-215-0736(2)(a) Includes family, staff & other interested parties.</p> <ul style="list-style-type: none"> Documentation of the above requirement was not found consistently in the files reviewed. <p>Service Planning 413-215-0741(2)(g) (2)(b) Monthly review</p>	
(2)(b) Monthly review		X			
(2)(c) Addresses physical and medical needs, behavior management issues, mental health treatment, education, and special needs		X			
413-215-0736 (3) Reasonable effort to involve family within 72 hours when possible		X			

413-215-0746 (4) Medication logs	X			<ul style="list-style-type: none"> Documentation of the above requirement was not found consistently in the files reviewed. <p>Service Planning 413-215-0741(2)(g) (2)(c) Addresses....., mental health treatment, education, and special needs.</p> <ul style="list-style-type: none"> The service plans were missing the above required information. <p>Service Planning 413-215-0741(2)(g) 413-215-0736 (3) Reasonable effort to involve family within 72 hours when possible.</p> <ul style="list-style-type: none"> The intake form had a place to document efforts to involve the family within 72 many were left blank not providing verification this occurred. 	
413-215-0736 (6) Discharge summary (summary, results of evaluations, condition of child, compliance with program, recommendations and discharge destination)	X				
Records and Documentation 413-215-0071	Yes	No	N/A	Corrective Actions	Corrective Action Completed
(1) Stored safely and are available for inspection by Dept.	X				
(2) Permanent, legible, dated, and signed	X				
(3)&(4) Uniform in organization, readily identifiable and accessible, current, and complete, containing all required info. No eraser tape or white out.	X				
(7) Permanent registry for each child includes: Name Gender Birth date Names, addresses of parents or guardians Dates of admission Placement upon discharge	X				
Comments:					

Corrective Action: Required Documents Not Submitted by the Agency

- An application
- Certificate of Occupancy
- 2019, 2020 Budgets approved by the Board of Directors
- Current Balance Sheet or other current financial statement that shows Youth Empowerment Shelter's assets and liabilities
- The Policies listed on the Homeless/Runaway/Transitional Youth Shelters required policies list (attached)

Licensing Coordinator's Signature:  Date: 11-17-2020

Manager Review:  Date: 11-10-2020