



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

Licensee: Jackson Street Shelter

Date of site visit: July 14, 2021

Executive Director: Ann Craig

Licensing Coordinator: Holly Ivey, and Jennifer Clark

Program Director: Kendra Phillips-Neal

Other Regulatory or Accrediting Agencies: Federal Grant Reviews, and ODHS 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): The Jackson Street Youth Shelter Incorporated (JSYSI) provides short term and transition housing options for Benton and Linn County youth who have left home or are at risk of becoming homeless or running away. There are two sites one in Corvallis, and one in Albany, Oregon. They are the only 24-hour shelters for unaccompanied youth between Salem and Eugene. The agency meets residents' basic needs such as safe overnight shelter, nutritious meals, showers, and clothing. They also provide case management and referrals to other community agencies. The mission of JSYSI is to promote safety, stability, and well-being for youth. They work to prevent homelessness by showing a path to long-term success through building positive relationships and skills for self-sufficiency. Their goal is to assist Oregon children, adolescents, young adults and families to develop a positive attitude toward themselves and others, to build self-esteem, accountability, and an appropriate degree of independence. JSYSI provides shelter services and addresses the issues of health, education, juvenile justice, life skills, and job-readiness, so as to reduce homelessness, runaway behavior, substance abuse, delinquency, family dysfunction, child abuse, delayed education, and unemployment.

Program type and services: Homeless Run-Away Shelter

Capacity and Age Range: Corvallis site: 12 youth ages 10-17, Albany site: 12 youth ages 10 –17.

Albany House: At the time of the Licensing Review the agency was renovating the Albany House. On the application for renewal, the agency requested an increase in capacity to 16 beds. The Licensing Coordinator was unable to conduct a walk through of this property at the time of the review, as it was under construction. Upon completion of the construction the agency may request an increase to the capacity, and DHS Licensing will conduct a walk through to ensure the property meets the requirements to increase.

Funding sources: Federal Grants, SOP Grant, BCP Grant, DHS Child Welfare Umbrella Non-BRS Shelter Contract, and fund raising.

Contracts and sources for referrals: Referrals from families/guardians, Juvenile Departments, schools, Local Health Departments, and the DHS Residential Resource Consultants.

Average length of stay: 36 nights

Average daily population served: 5-8 youth.

Number of children served annually: 175 youth typically, however during Covid 67 youth were served.

Interviews, Observations: At the review the following were interviewed/observed: Kendra Sue Phillips-Neal, Program Director, and three youth were interviewed, staff and youth were observed.

The following information was gained in the private interviews with the youth.

- When asked, what did the youth appreciate most about the program? “Definitely staff, having someone to talk to. I feel cared for, they listen to me when I talk. It’s like having a second home for me.”
- When asked if there was anything they would change about the program, one youth said they want to stay in contact with friends after discharge. Another youth said they wouldn’t change anything and that the shelter is like a second home. A youth commented that they would like to have just one productive hour (time set aside for independent reading, homework, journaling, etc.) instead of two hours.

All youth stated they received enough food to eat, and snacks were provided. The youth all stated they received hygiene products from the program. It was stated by all the youth that they can talk to people on their approved contact list. All youth stated they felt safe in the program. One youth stated he had one situation, where he did not feel safe with another client. He stated that staff took care of it and the client was made to leave the program. He stated he did not want to share details of the situation.

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

- “Leadership from Shelter Manager to executive Director are extremely passionate and committed.
- The agency is celebrating 20 years in September, we have commitment to our community and youth we serve.
- Adaptable and forward thinking, COVID proved to be a hard year, but we were able to get through it without shutting any piece of our program down or having a single positive COVID case.
- Reunification program/process has proven to increase our safe exit outcomes (pre-COVID.)
- Activities program, able to offer unique opportunities in all domains (education, fun physical health, mental health, etc.)
- Case management structure and training.
- The agency won, 100 Best Non-Profits To Work For In Oregon (medium category) for 2019 and 2020.”

Program Challenges: The following changes were stated at the time of the review by agency leadership:

- “Staff retention, supporting staff working through their own mental health in a way that still maintains the structure of the program and needs of the youth.
- Organizational change/capacity issues, we grew fast and are now catching up with much needed additional positions and pulling apart descriptions and duties.
- Maintaining physical appearance of the sites, all sites "took a beating" over the past year of COVID and are not to our normal standards this has been hard for us to work through.”

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

- “Albany House closed late June 2021, to complete a renovation, this will take about 6 months and increase our youth serving capacity to 16.
- Capacity building, we have added 1 new case management position, had complete turn over and growth in our finance department (1 FTE to 3 PTE), and added an HR/Training Manager. We are in the process of interviewing for an Operations Director. All but 6 direct shelter employees have been hired with the COVID Pandemic (March 2020 to present).”

Lawsuits: N/A

Grievances and complaints filed in the last two years: N/A

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

Within 45 days of receipt of this report Jackson Street 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 Ivey at Holly.r.ivey@dhsosha.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

Changes in License: N/A, see above regarding capacity changes.

Summary of Review					
Program and Services 413-215-0011(2)	Yes	No	N/A	Corrective Actions/Comments	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/Comments	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/Comments	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	Corrective Actions/Comments	Corrective Action Completed
(3) Agency uses appropriate and positive methods of behavior management and nationally recognized non-violent crisis intervention Utilizes Collaborative Problem Solving.	X				
(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				

Contractors (if applicable) 413-215-0061(6)	Yes	No	N/A	Corrective Actions/Comments	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		
Supplemental Information Provided by CCA	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
Documents as indicated on the form titled "Renewal Licensing Required Documents"		X		Supplemental Information Provided by CCA Documents as indicated on the form titled "Renewal Licensing Required Documents" <ul style="list-style-type: none"> 413-215-0081 The agency must submit to the Licensing Coordinator, verification of adequate fire, auto and liability insurance: \$1 million each occurrence, \$3 million aggregate. 	
Documents as indicated on form titled "Required Financial Documents and Information"	X				
All required policies and procedures as identified in the "Umbrella Rules"		X		Supplemental Information Provided by CCA All required policies and procedures as identified in the "Umbrella Rules" <ul style="list-style-type: none"> Some of the policies submitted did not have all the required information per Licensing Rule requirements. See details on last page of licensing report. 	
All required policies and procedures as identified in "Agency Type Specific Rules"		X		Supplemental Information Provided by CCA All required policies and procedures as identified in "Agency Type Specific Rules" <ul style="list-style-type: none"> Some of the policies submitted did not have all the required information include per Licensing Rule requirements. See details on last page of licensing report. 	
Staffing Requirements 413-215-0721	Yes	No	N/A	Corrective Actions/Comments	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/Comments	Corrective Action Completed
(1) & (2) Has and follows policies for grouping children that meets requirements (age, developmental level, maturity, behavior, medical...)		X		413-215-0756 Grouping (1) A child-caring agency must have and follow written policies regarding the grouping of children in care. (2) Except as provided in section (3) of this rule, an agency must place children in care in groups based on the following factors: (a) Age. (b) Developmental level. (c) Physical maturity. (d) Social maturity. (e) Behavioral functioning. (f) Cognitive level. (g) Medical concerns. (h) Individual needs. <ul style="list-style-type: none"> The above stated requirements must be added to the agencies policies. 	
(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/Comments	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/Comments	Corrective Action Completed
413-215-0046(3)(a) Foster Rights Posted (if children in DHS custody)	X				
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	Comments	Corrective Action Completed
(A) Vehicle is registered			X		

(B) Vehicle is insured			X	(N/A-The program does not have an agency vehicle to transport youth.)	
(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. The following required repair: <ul style="list-style-type: none"> Some walls were requiring touch up paint in small areas throughout the house, including around door frames. Small amounts of pinkish brown discoloration found above the showers. Some black discoloration was found on the caulking around the outside and inside of the showers. A screen in an upstairs window was bent and popped partially out needing to be fixed. 	
(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/Comments	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/Comments	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/Comments	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/Comments	Corrective Action Completed
Staff Name/Position	X			<p>Personnel Files 413-215-0061(1)(b) & (3)(b) reference checks complete and documented (1)(a) & (3)(c) Background check was completed and documented.</p> <p><i>Reference Checks:</i></p> <ul style="list-style-type: none"> Some personnel files were missing verification of reference checks being completed. <p><i>Background Checks:</i></p> <ul style="list-style-type: none"> In reviewing the personnel files, some of the background check dates indicated there was delay in initiating them from date of hire. Background checks must be initiated prior to, or at date of hire. Two background checks were run on Oregon's previous background check system, and did not have documentation of the final determination in the personnel file. 	
(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/Comments	Corrective Action Completed
(a) Agency policies and procedures		X		<p>New Employee Orientation (30 days) 413-215-0061(4) (a) Agency policies and procedures(b) Ethical and professional guidelines(c) Organizational lines of authority(d) Attributes of population served(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(f) Privacy laws(g) Emergency procedures</p> <ul style="list-style-type: none"> The personnel files were missing verification of the above stated orientation trainings which are required to occur within 30 days of hire. 	
(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/Comments	Corrective Action Completed
Staff (at least one for each shift) has been trained in non-violent crisis intervention		X		Staffing Requirements 413-215-0721 Staff (at least one for each shift) has been trained in non-violent crisis intervention	

				<ul style="list-style-type: none"> The personnel files were missing verification of the above stated requirements. 	
Initial Training (Must be completed before staff is alone with youth) 413-215-0726 (1)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
(a) Completion of agency's orientation		X		Staffing Requirements 413-215-0721 Initial Training (Must be completed before staff is alone with youth) 413-215-0726 (1) (a) Completion of agency's orientation(b) Understanding of supervision structure(c) Understanding of behavior management policies(d) Understanding of presenting issues of the youth served(e) Safety procedures(e) Safety procedures(f) Sanitation procedures(f) Sanitation procedures(g) First aid kit contents and use(h) Report writing(i) CPR and First Aid(j) Crisis intervention training <ul style="list-style-type: none"> The personnel files were missing verification of staff having received the above stated trainings. 	
(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/Comments	Corrective Action Completed
413-215-0726(2)(a) Confidentiality		X		Staffing Requirements 413-215-0721 Ongoing Training (Staff & Volunteers) 413-215-0726(2)(a) Confidentiality413-215-0726(2)(b) Universal precautions413-215-0726(2)(c) Discipline and behavior management413-215-0726(3) Training in CPR/First Aid sufficient to retain current certification413-215-0726(4) Staff working with food must possess a food handler's card413-215-0061(5) Mandatory reporting that includes: 413-215-0761(3)(b) Employees transporting children meet the driver requirements (current driver's license, and training for 15+ passenger vans if applicable) <ul style="list-style-type: none"> Verification of the above required annual trainings was not consistently found in the personnel files. CPR First Aid cards were not consistently found in files. Some files lacked copies of staff's driver's license, and signatures verifying staff were able to drive youth in their personal vehicles. 	
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			

Comments:					
Child Records 413-215-0741(2)	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
Name of Child	X			Child Records 413-215-0741(2) (h) Documentation of child's illness and injuries and follow up by program <ul style="list-style-type: none"> The youth files did not have this documentation. 	
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	Comments	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			The program must add, "Assessment" to the title of the <i>Intake Interview and Service Plan</i> document. Since the form does have the required assessment information, it is not a violation.	
Service Planning 413-215-0741(2)(g) &	Yes	No	N/A	Corrective Actions/Comments	Corrective Action Completed
413-215-0736(2)(a) Includes family, staff & other interested parties		X		Service Planning 413-215-0741(2)(g) & 413-215-0736(2)(a) Includes family, staff & other interested parties <ul style="list-style-type: none"> The youth files did not have verification of the above parties' participation in planning or, in lieu of participation, documentation of attempts to involve the identified parties. 	
(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				

413-215-0736 (6) Discharge summary (summary, results of evaluations, condition of child, compliance with program, recommendations, and discharge destination)	X			<i>Recommendation:</i> to add Discharge Summary title to the Exit Note.	
Records and Documentation 413-215-0071	Yes	No	N/A	Corrective Actions/Comments	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:

413-215-0091 Licensing Umbrella Rules: Responsibilities of Licensees (Amended 1/1/19) A licensee is responsible to do all of the following: (11) Notify the Department in the following circumstances: (b) Within one business day if a **critical event** occurs. As used in this section, "critical event" means a significant event occurring in the operation of a child-caring agency that is considered likely to cause complaints, generate concerns, or come to the attention of the media, law enforcement agencies, first responders, Child Protective Services, or other regulatory agencies. Compliance with this notification requirement does not satisfy mandatory child abuse reporting requirements under ORS 419B.005 to 419B.045.

- **Two critical incidences were found, that were not reported to Licensing. The agency must report all critical events to Licensing per the above stated timeline. It was unclear from documentation if the agency reported a critical event where a child was given the wrong dosage of melatonin into the Child Abuse Hotline, as it was not on the incident report.**

Kendra Phillips- Neal, Program Director, reported the incident to the Child Abuse Hotline the day the incident occurred. The agency must add to their Incident Report when the hotline is called.

- **The above stated requirement regarding Critical Events must be added to the agencies incident reporting policy.**

Corrective Action: Required Policy Revisions:

413-215-0036 Licensing Umbrella Rules: Conflict of Interest (Amended 12/01/19)

A child-caring agency must have a conflict-of-interest policy that prohibits preferential treatment of board members, employees, volunteers, and contributors. The policy must outline safeguards when the child-caring agency allows dual relationships, such as employees serving as proctor foster parents, including the requirement that all material facts of the conflicted transaction and the direct or indirect interest of the board member, employee, volunteer, or contributor are disclosed or known to the board approving the conflicted transaction. If circumstances do not permit board approval of the conflicted transaction, a non-profit child-caring agency may obtain the approval of the Attorney General or the Department prior to entering into the transaction

- **The above language stating preferential treatment of board members, employees, volunteers, and contributors must be added to the Conflict-of-interest policy. Jackson Street Shelter Policy must contain the required language stated above in the agencies conflict of Interest Policy.**

413-215-0046 Licensing Umbrella Rules: Children and Families Rights Policy and Grievance Procedures (Amended 1/1/19)

(1) Rights of children in care and families served by the child-caring agency. A child-caring agency must guarantee the rights of children in care and the families the child-caring agency serves. A child-caring agency must enact and adhere to a policy ensuring those rights. A written copy must be distributed to all children in care and families served by the child-caring agency, and afford the following rights: (a) Except as provided in paragraph (B) of this subsection, the child in care's right to uncensored communication with legal guardians, caseworkers, legal representatives, and other persons approved for communication by the legal guardian or as provided in a court order. (A) This right cannot be waived, including voluntarily. Restriction on communication between a child in care and his or her legal guardian may not be a condition of participation in the program. (B) A child-caring agency may place reasonable limits on communication, but only as provided in the child-caring agency's policy. Reasonable limits include, but are not limited to, having set time periods during the day for visitation and phone calls and imposing moderate limits on the duration of calls or visits. However, a limitation is not considered reasonable if it prevents the ability to meaningfully communicate, such as not allowing contact with a child in care's attorney during regular business hours. (b) The child in care's right to privacy. (c) The child in care's right to participate in service planning or educational program planning. (d) The child in care's right to fair and equitable treatment. LICENSING UMBRELLA RULES 413-215-0001 to 413-215-0136 19 (e) The child in care's right to file a grievance (as provided in section (2) of this rule) if the child in care or family feels that they are treated unfairly or if they are not in agreement with the services provided. (f) The child in care's right to have adequate and personally exclusive clothing. (g) The child in care's right to personal belongings. (h) The child in care's right to an appropriate education. (i) The child in care's right to participate in recreation and leisure activities. (j) The child in care's right to have timely access to physical and behavioral health care services. **(2) Grievance Procedures.** (a) A child-caring agency must enact and adhere to written procedures for the children in care and families the child-caring agency serves to submit a grievance. For an academic boarding school, this subsection only applies to grievances about health or safety issues. The child-caring agency must provide the procedures to each child in care and family. The procedures must include all of the following:

(C) A procedure to follow, in the event the grievance is filed against the executive director, that ensures that the executive director does not make the final decision on the grievance. (D) The name, address, and phone number of: (i) A Department licensing coordinator; and (ii) Any other governmental entities with oversight responsibilities. (b) Grievances and complaints filed with the child-caring agency and all information obtained in their resolution must be maintained for a minimum of two years and provided to the Department upon request.

- **Licensing did not receive a Child and Families Rights Policy. The agency must submit a Child and Families Rights Policy that includes all the required language stated above.**
- **The Grievance Procedure submitted was missing the above required language. The grievance form given to youth must have the above stated requirements. It was unclear if families of the youth would utilize the same grievance form as the youth.**

413-215-0056 Licensing Umbrella Rules: Policies and Procedures (Amended 1/1/19) (2) In addition to other policies and procedures required by these rules, the policies and procedures in section (1) of this rule must include: (a) A written policy on **mandatory child abuse reporting**, consistent with ORS 418.257, 418.258, 419B.005, 419B.010, and 419B.015...

- **The Mandatory Child Abuse Policy submitted in the Employee Handbook was missing the procedure for making an abuse report. The handbook must be updated to include this information.**
- **The Staff Procedure Manual must be updated to match the same information in the Employee Handbook as Procedure Manual has outdated information, i.e does not have the Statewide Child Abuse Hotline phone number. The staff procedure manual states, “Case workers will never be alone when dealing with issues of abuse and/ or neglect. The caseworker will call the Shelter Manager or Program Director in their absence or the weekend on-call person.” This must be changed that staff must immediately report suspected child abuse to the Child Abuse Hotline. The policy must require contacting management prior to immediately reporting suspected abuse. Other elements were found missing in the procedure manual: to include 419B.010 (5) Duty of officials to report child abuse; penalty (found in the employees manual, must match). 419B.005 to include 1(a) “Abuse” means: (A)-(J)**

413-215-0061 Licensing Umbrella Rules: Personnel (4) Staff orientation. A child-caring agency must provide training to each newly hired employee within 30 days of employment on all of the following subjects: (a) Child-caring agency policies and procedures. (b) Ethical and professional guidelines. (d) Attributes of population served. (e) Child-abuse reporting laws and requirements including the definitions of abuse that apply specifically to a child in care. (f) Privacy laws. (g) Emergency procedures.

- **The agency’s policies were missing the above required trainings to be completed within 30 days of hire. The agency’s procedure stated within 90 days of hire, the orientation training would be completed.**

413-215-0726 Staff Development and Training (Technical Amended 01/14/20) A child-caring agency must follow all of the following requirements: (1) Initial training. Before being alone with a child in care or being temporarily the only staff in charge of one or more children in care, a staff member must receive the following training or acquire the following knowledge or understanding, as verified by the executive director or the

executive director's designee: (a) Successful completion of the agency's orientation. (b) Effective understanding of the supervision structure at the shelters of the agency, including the appropriate staff to contact when questions or problems arise. (c) Effective understanding and knowledge of and compliance with the behavior management policies of the agency. (d) Recognition and management of the presenting issues of the children in care served, including mental health, behavioral, and substance abuse issues. (e) Instruction in safety procedures and safe use of equipment. (f) Sanitation procedures. (g) First aid kit contents and use. (h) Report writing, including documentation of medication dispensing and critical incident reports. (i) Certification to provide cardiopulmonary resuscitation (CPR) and first aid. (j) Completion of training in crisis intervention.

(2) Ongoing training. A child-caring agency must provide ongoing training for all paid and volunteer staff to increase knowledge, skills, and abilities in each of the following subject areas: (a) Confidentiality requirements. (b) Universal precautions (infection control guidelines designed to protect workers from exposure to diseases spread by blood and certain body fluids) and hygiene. (c) Discipline and behavior management.

- **The agency's policies didn't require the above listed initial trainings and annual on-going trainings.**

413-215-0066 Privacy (Amended 06/29/18) (2) Except as provided in section (4) of this rule, a child-caring agency may not disclose any identifying information of a child in care, including a picture, without first obtaining the written consent from the child's parents or legal guardians. (3) A child-caring agency must ensure the privacy of all information that identifies a child in care or family the child-caring agency serves. A child-caring agency may not disclose such information without proper written consent or as otherwise allowed by law. (4) A person making a report of abuse as required in ORS 418.258 and 419B.010 may include references to otherwise confidential information for the sole purpose of making the report.

- **The Privacy Policy submitted was missing the above required language.**

413-215-0076 Licensing Umbrella Rules: Discipline, Behavior Management, and Suicide Prevention (Excluding Adoption Agencies) (1) A child-caring agency, except a child-caring agency licensed only to provide adoption services under OAR 413-215-0401 to 413-215-0481, must adopt and adhere to written policies and procedures on discipline, behavior management, and suicide prevention that meet all of the requirements of this rule. (b) The discipline and behavior management policies and procedures must prohibit the following: (I) Denying a parent, guardian, or sibling the right to visit or communicate with a child in care solely as a disciplinary measure against the child in care. (J) Aversive conditions, which includes, but is not limited to, any technique designed to or likely to cause a child physical pain, the application of startling stimuli, and the release of noxious stimuli or toxic sprays, mists, or substances in proximity to the child in care.

(3) **Behavior Management.** (a) The behavior management policy of the child-caring agency must identify appropriate and positive methods of behavior management based on a child's needs, developmental level, and behavior. (b) The policies must include a description of the model, program, or techniques used and its use of each of the following: (D) Use of seclusion, if applicable.

(c) **Time out.** (C) Rooms used for "time out" must not be capable of locking. (D) "Time out" episodes must be documented in the child in care's record. (4) **Suicide Prevention.** The policy must include the following: (e) Procedures for determining implementation of additional supervision precautions and for determining removal of additional supervision precautions; (g) Documentation requirements for suicide ideation, self-harm, and special observation precautions to ensure immediate communication to all staff.

- **The Behavior Management Policy was missing the above stated prohibitions.**

- The policy did not include provisions requiring identification of the methods of behavior management based on child's needs, development level and behavior and must be added. See above.
- The policy did not state if the program utilizes seclusion or not.
- The policy must include the above language and requirements for time outs or indicate that the program doesn't utilize time-out as an intervention.
- The suicide Prevention policy was missing the required language above.

413-215-0079 Licensing Umbrella Rules: Safety (Adopted 1/1/19) To ensure the safety of children in care and employees, a child-caring agency must have and adhere to written policies and procedures that comply with the safety requirements in this rule. (2) Searches. If a child-caring agency carries out searches on children in care or visitors, the child-caring agency must have written policies and procedures that, at a minimum, comply with all of the following: (a) A prohibition on strip searches. (b) A prohibition on body cavity searches. (c) Requirement that searches will be conducted in the least intrusive manner possible for the type of search being conducted.


- The above required information was not stated in the searches policy submitted.

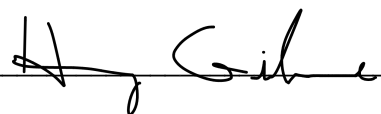
413-215-0721 Staffing Requirements (Technical Amended 01/14/20) (2) During each shift, there must be at least one staff member who has been trained in a nonviolent crisis intervention strategy. A volunteer or intern may be used to meet this requirement only if the volunteer or intern has met the training requirements for staff in OAR 413-215-0726. (3) A child-caring agency must have a ratio of staff to children in care that is sufficient to ensure that children in care receive adequate supervision and services.

- The above requirement must be added to the agency's handbook and procedure manual.

413-215-0751 Health and Hygiene (Technical Amended 01/15/20) (1) A child-caring agency must have and follow policies that ensure the prompt and accurate assessment and care of injuries, illness, and physical complaints of children in care. (2) A child-caring agency must provide children in care with access to a bathroom and a shower.

- The above requirements must be added to the agency's policies (employee handbook).

Licensing Coordinator's Signature:  Date: 9-13-2021

Manager Review:  Date: 9-13-2021