



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

**Licensee:** Boys and Girls Aid Society of Oregon

**Date of site visit:** February 2-4, 2022

**Board Chairperson:** Fergal Donoher

**President & CEO:** Suzan Huntington

**Program Director:** Tonya Miles

**Program Coordinator:** Ryan McCauley

**Licensing Coordinator:** Tom Heidt with Holly Ivey and Irvin Minten

### **Other Regulatory or Accrediting Agencies:**

Oregon Department of Human Services  
US Department of HHS Administration of Children and Families – Federal Youth Services Bureau (FYSB)  
Washington County  
City of Beaverton Community Development  
City of Hillsboro Community Service

### **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 Safe Place for Youth Shelter program is a short term facility in Hillsboro for males and females ages 12 - 20. Safe Place provides shelter to homeless and runaway youth who are primarily from Washington County. They will also serve up to three youth at a time from DHS if they do not meet the BRS criteria. Staff provide the youth with case management, on-site mental health counseling, family mediation, life skill building, educational support, and access to community resources. The facility has a physical capacity of eighteen, but they cap their population at thirteen. The program serves an average of 10-13 youth per day and approximately 100 youth per year with an average length of stay of 30 days.

**Program type and services:**

Runaway and Homeless Youth Shelter

**Capacity (number and ages):**

The program has enough physical space for 18 youth ages 12-20. They usually do not serve more than 13.

**Funding sources:**

Washington County Community Development Block Grants for Shelter and Transitional Living Services  
Federal Youth Services Bureau's Basic Center grant  
Oregon DHS Runaway and Homeless Youth grant  
Oregon DHS umbrella contract for shelter services  
Washington County Juvenile Department  
City of Beaverton Community Development Block Grant  
Washington County Supportive Housing Services  
City of Hillsboro Community Service Grant  
Oregon Emergency Shelter Grant for Coronavirus Prevention  
Washington County Community Action Organization Emergency Food and Shelter Grant  
Washington County Maintenance Grant

**Sources for referrals:**

The program utilizes a coordinated intake via Community Connect. Referrals come from school counselors, Homeless Education Liaisons, Police departments from all cities in Washington County, the juvenile department, word of mouth, homeless teens, and counselors.

**Average length of stay:**

30 day average. DHS youth tend to stay longer.

**Average daily population served:**

They usually serve 10-13 youth per night. They tend to serve more during the school year and less during the summer.

**Number of children served annually:**

Approximately one hundred youth were served last year.

**Interviews, Observations:**

I separately interviewed two youth at the shelter. Neither had anything negative to say about the program. They both said the food was good, they get plenty to eat, snacks are available, and they both specifically mentioned liking the cornbread that is made. One youth said the program was, "Pretty cool. Comfortable." He enjoys talking with the staff, group activities, and the rec room. Both said they enjoyed the frequent activities including going to Wonderland, the gym, movies, and the park. They both are happy to have a safe place to stay and socialize. Both reported being able to talk with their family and support people without restrictions. They stated that staff are responsive if they need to get a haircut or see a dentist or doctor. They both also enjoyed being able to earn \$10 gift cards. They both feel staff are approachable. They meet with their primary weekly to go over what they are working on.

**Program Strengths:**

- Safe Place has remained open for the duration of COVID and has provided quarantine services for youth who have been exposed or tested positive. Their leadership team has done exemplary work with the Washington County Public Health Department and the shelter network in the community to make this possible.
- The program has secured new funding for expanded services including Education Reengagement, Winter Shelter, and Homelessness Prevention.

- Funding has been received from the City of Hillsboro to further repair and renovate the facility including roofing, exterior and interior mold remediation and painting, installation of kitchen stove and ventilation, and flooring updates.
- Former staff often want to remain available as relief staff.

### **Program Challenges:**

- There is very little affordable housing in Washington County, which makes it difficult to exit youth from the program into stable housing.
- It can difficult to quickly access and connect youth to community-based resources that have limited availability.
- With such a short length of stay, it can be a challenge to build trusting relationships with the youth.
- COVID has caused a multitude of challenges around safely providing congregate care while continuing to serve youth at full capacity.
- There has been significant staff turnover at all levels - direct care staff, case managers, and the leadership team.

### **Changes that have occurred in the last 2 years:**

- With the growth, programming has outgrown the Safe Place facility and they have begun leasing office space in the building next door to house their Program Director and Winter Shelter Resource Coordinator.
- The Shelter & Housing Services department has been separated into two programs, with a new Director of Shelter Services and a Director of Housing Services (formerly the director of both). Safe Place now operates independently of Housing Services, but remains closely connected because of funding client crossover between the two programs.

### **Lawsuits:**

Ben Waibel, private business owner located on Washington Street in Hillsboro is claiming the rights to the alley they use to access the Safe Place and two other businesses. The City of Hillsboro never defined easement rights on the alley and will not take a stand on the issue now, stating “this is a private business matter”. Mr. Waibel demanded payment to use the alley or he would block the alley. To settle the issue, Boys & Girls Aid, Youth Contact, Inc. and Shovels & Whiskey, a private business are joint plaintiffs in a lawsuit to gain permanent easement rights granted. The suit is scheduled for court in March 2022. To date, the courts have already awarded the plaintiffs permanent easement rights to half the alley in question. A settlement was offered, but not accepted. Boys and Girls Aid believe they will win in court, but are frustrated with the time and money they have need to spend to fight this issue.

### **Grievances and complaints filed in the last two years:**

On 1-1-21, an employee submitted a complaint to OSHA regarding the COVID protocols being implemented at Safe Place. The complaint was investigated by BGAIID's Facilities Manager as well as OSHA and it was closed when it was determined that the alleged hazards did not exist. The complaint and follow-up documentation was submitted.

A grievance form was submitted to the Program Coordinator by a client on 12-18-21 regarding staff behavior. The Program Coordinator discussed the grievance with the client and sent it to the Program Director for guidance. The Program Director also discussed the incident with the client and staff involved, and the incident was resolved. The grievance was followed by several verbal complaints from this youth about other incidents. The Vice PresidentX of Services was made aware of the client's ongoing frustrations. The youth has since exited the program. The documentation was submitted.

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

#### **413-215-0726 Staff Development and Training**

A child-caring agency must follow all of the following requirements:

(4) Staff working with food must possess a food handler's card.

**Corrective Action 1: Boys and Girls Aid must document in personnel files that staff who work with food at the Safe Place Shelter possess a food handler's card.**

#### **413-215-0736 Homeless, Runaway, and Transitional Living Shelters: Service Planning**

A child-caring agency must follow all of the following requirements, except with respect to a mass shelter:

(2) The child-caring agency must serve each child in care according to a service plan developed within 72 hours of admission that is based on the assessment.

(a) Whenever possible, the service plan must include the child in care and his or her family, staff, and other involved parties.

(b) The program must provide individualized service planning for each child in care that includes at least a monthly review of the service plan and changes as needed.

(c) The service plan must address, at a minimum, the child in care's physical and medical needs, behavior management issues, mental health treatment needs, education plans, and any other special needs.

**Corrective Action 2: Boys and Girls Aid must document that clients at the Safe Place have a service plan with all the required domains that is reviewed monthly and that all interested parties were invited to participate in the child's service plan.**

Within 45 days of receipt of this report, the Boys and Girls Aid Society of Oregon 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 (Licensing Coordinator and email address) or sent by regular mail to the following address:

Tom Heidt, Licensing Coordinator  
Department of Human Services  
Children's Care Licensing Program  
201 High Street SE, Suite 500  
Salem, Oregon 97301  
Phone: 503-480-4825  
E-Mail: [Tom.Heidt@DHSOHA.State.OR.US](mailto:Tom.Heidt@DHSOHA.State.OR.US)

**Recommendations:**

None.

**Exceptions:**

None.

**Changes in License:**

None.

<b>Summary of Review</b>					
<b>Program and Services</b> 413-215-0011(2)	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
Program and services are in scope of license	X				
<b>Governance of the Agency</b> 413-215-0021	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Executive Director or Program Director</b> 413-215-0021	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(3)(a) knowledge of requirements for providing care and treatment appropriate to programs	X				
(3)(g) Approval from BCU	X				
<b>Discipline, Behavior Management, and Suicide Prevention</b> 413-215-0076	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(3) Agency uses appropriate and positive methods of behavior management and nationally recognized non-violent crisis intervention	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				

<b>Contractors</b> (if applicable) 413-215-0061(6)	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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		
<b>Supplemental Information Provided by CCA</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
Documents as indicated on the form titled "Renewal Licensing Required Documents"	X				
Documents as indicated on form titled "Required Financial Documents and Information"	X				
All required policies and procedures as identified in the "Umbrella Rules"	X				
All required policies and procedures as identified in "Agency Type Specific Rules"	X				
<b>Staffing Requirements</b> 413-215-0721	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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: 1:7 Evenings: 1:7 Sleeping: 1:13	X				
<b>Grouping</b> 413-215-0756	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Service Planning-</b> Establish & maintain links with community agencies that provide: 413-215-0736	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Physical Plant</b>	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
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				
<b>Safety - Transporting Children in Care</b> 413-215-0761(3)(a)	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Safety - Building Requirements</b> 413-215-0761(6)	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(b)(A) Smoke free	X				
(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				
<b>Safety - Bathrooms</b> 413-215-0761(6)	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Client Rights</b> 413-215-0716	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(2) Nutritional needs are met as appropriate for each child in care	X				
<b>Medication Storage and Dispensing</b> 413-215-0746	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				

<b>Personnel Files</b> 413-215-0061	Yes	No	N/A	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
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				

<b>New Employee Orientation (30 days)</b> 413-215-0061(4)	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(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				
<b>Staffing Requirements</b> 413-215-0721	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
Staff (at least one for each shift) has been trained in non-violent crisis intervention	X				
<b>Initial Training</b> (Must be completed before staff is alone with youth) 413-215-0726 (1)	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
(a) Completion of agency's orientation	X				
(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				
<b>Ongoing Training (Staff &amp; Volunteers)</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
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			See corrective actions I believe food handler cards are kept on-site, but only one of five files reviewed had documentation of this training.	
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:					

<b>Child Records</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
413-215-0741(2)					
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				
<b>Assessment</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Corrective Actions/Comments</b>	<b>Corrective Action Completed</b>
413-215-0741(2)(f) &					
413-215-0731 Assessment (2)(a)-(c) Includes family history, health history, mental health history (including diagnoses and current prescriptions).	X				

(3) Statement as to whether child meets eligibility requirements to be admitted to program.					
<b>Service Planning</b> 413-215-0741(2)(g) &	<b>Yes</b>	<b>No</b>	<b>N/A</b>		<b>Corrective Action Completed</b>
413-215-0736(2)(a) Includes family, staff & other interested parties		X		See corrective actions There was not documentation in the files of service plans with all the required domains being reviewed monthly by all interested parties.	
(2)(b) Monthly review		X			
(2)(c) Addresses physical and medical needs, behavior management issues, mental health treatment, education, & 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 & discharge destination)	X				
<b>Records and Documentation</b> 413-215-0071	<b>Yes</b>	<b>No</b>	<b>N/A</b>		<b>Corrective Action Completed</b>
(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:					

Licensing Coordinator's Signature: \_\_\_\_\_

*Tom Heidt*

Date: 2/11/2022

Manager Review: \_\_\_\_\_

*H. Gibbe*

Date: 2-25-2022