January 11, 2006

Mark Mizner-Welch
Swan Valley Youth Academy
58746 HWY 83 South
Swan Lake, MT 59911

RE: Licensing Investigation Deficiency Report

Dear Mr. Mizner-Welch:

Thank you for the cooperation and assistance you and your staff extended to the Quality Assurance licensing personnel in the completion of the resent licensing investigation and survey of the Swan Valley Youth Academy. As we have discussed, additional deficiencies may be cited based on the results of investigations being conducted by other agencies.

Enclosed please find the "Statement of Licensing Deficiencies" developed from this investigation and survey. In order to maintain confidentiality for both residents and staff I have included a Youth/staff identifier list. Each youth and staff are assigned a number and referenced in the deficiency report by the number assigned to them on the list. Do not share the identifier list with other individuals.

Please respond with your plan of correction in writing no later than January 26, 2006. Your plan of correction may be completed on the right hand side of the deficiency form or you may use an attachment. Make your responses to the deficiencies as specific as possible by providing detail as to how you will accomplish the correction and please include the effective date when the correction will be completed.

Failure to provide an acceptable plan of correction may result in an adverse license action in accordance with:

ARM 37.97.115 YOUTH CARE FACILITY: LICENSE REVOCATION AND DENIAL (1) The department, after written notice to the applicant or licensee, may deny, suspend, restrict, revoke or reduce to a provisional status a license upon finding that:

(a) the YCF is not in compliance with fire safety standards; or

(b) the YCF is not in substantial compliance with any other licensing requirements established by this rule; or

(c) the YCF has made any misrepresentations to the department, either negligent or

intentional, regarding any aspect of its operations or facility; or

(d) the YCF has failed to use the foster care payments for the support of the foster child; or

(e) the YCF or its staff have been named as the perpetrator in a substantiated report of abuse or neglect; or

(f) the YCF failed to report an incident of abuse or neglect to the department or its local affiliate as required by 41-3-201, MCA.

(g) the YCF, its staff or anyone living in a YCF household may pose any risk or threat to the safety or welfare of any youth placed in the YCF.

As required in Administrative Rule of Montana, 37.97.115 the Department is hereby giving you written notice that the Swan Valley Youth Academy license may be denied, suspended, restricted, revoked or reduced to a provisional status.

If you have any questions or concerns, please do not hesitate to contact me at 406-563-3448.

Sincerely,

Residential Care Program Manager
Julie Fink

c. Roy Kemp, QAD, Acting Administrator, Bureau Chief
Joe Newman, CEO, Cornerstone Inc.

STATEMENT OF LICENSING DEFICIENCIES AND PLAN OF CORRECTION

Name of Facility: Swan Valley Youth Academy
Date/s of Investigation/Survey: November 7- December 30, 2005

Phone: 406-754-7540
Address: 58746 Hwy 83 S, Swan Lake, MT

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37.97.201 CHILD CARE AGENCY: ADMISSIONS AND DISCHARGES (1)A child care agency shall admit only those children for whom it has an operational program and who meet its admissions policies. **THE INTENT OF THE RULE WAS NOT MET.** As evidenced by Quality Assurance Division (QAD) licensing personnel review of youth records on 12/8/05 and 12/9/05, discussion with the Interim Director on 12/9/05 and review of the following SVYA Policies: **SVYA ADMISSION POLICY: OP2.1 III** (a) **admission criteria:** (2) Youth must have sufficient intelligence to participate in his rehabilitation plan (minimum I.Q. 71) (3) Health considerations: (b) We are equipped to handle youth with minimum disabilities. Youth who present with moderate to severe disabilities, either emotionally or physically, will not be accepted. Youth must be able to participate in physical training and cognitive behavioral treatment as part of the treatment plan. (4) Youth must have a minimum of 6 months remaining on his term of commitment, (5) Youth must be an adjudicated delinquent. Youth in need of care or youth in need of intervention will not be accepted. A copy of the order of adjudication in addition to the commitment order is required. (6) SVYA will not accept actively psychotic, suicidal, or or homicidal youth. Youth may not have major affective disorder such as schizophrenia or bi-polar disorder requiring acute psychiatric care. SVYA will not accept youth who are adjudicated as sexual offenders. **SVYA ADMISSION PROCESS** **OP2.2 I Policy**: Referral and admissions are provided for all adjudicated delinquents accepted into the facility. Abused, neglected and dependent juveniles in need of intervention are not held in this facility **FINDINGS:** **Youth # 1:** youth record indicates this youth is a private placement and is not adjudicated. No documentation was located indicating this youth has had a psychological or other evaluations to determine IQ,		

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mental health status, etc. ,to determine appropriateness of placement other than personal accounts provided by a parent. There was no documentation of involvement/collaboration from another agency such as probation or other services to determine the appropriateness of placement of this youth.

Swan Valley Youth Academy allowed a youth to stay at the facility that had run away from home. This youth was not admitted into the program however, was allowed to eat with the residents and participate in a few activities. This youth was not adjudicated. The youth was under the age of 18 and was not supervised at all times. The youth's sleeping quarters was in the administrative office.

37.97.201 CHILD CARE AGENCY: ADMISSIONS AND DISCHARGES (2) Each child care agency must have written admissions policies which include the following licensing requirements:

(b) The admission person or committee shall review all information and resources and determine the appropriateness of placement, including age and developmental needs of children accepted into the program.

THE INTENT OF THE RULE WAS NOT MET.
As evidenced by QAD licensing personnel review of youth records on 12/8/05 and 12/9/05, discussion with the Interim Director on 12/9/05 and review of the following SVYA policies:

SVYA Admission Review Committee Policy OP2.1 II states that the committee is comprised of seven members of whom two are community members and one alternative for absent members.

SVYA Admission Review Committee Policy OP2.1III (b) ...committee members are sent the application within 48 hours and sign the application for approval or denial. The committee must reach 100% consensus.

FINDINGS:

Youth records reviewed indicate only one or two signatures out of seven were present on the application

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packet.

37.97.201 CHILD CARE AGENCY: ADMISSIONS AND DISCHARGES (2) (c) The child care agency's policy shall provide for and encourage a pre-placement process with the child and family and may allow exceptions for emergency placements and geographical distances. The referring parties should be encouraged to assist in these arrangements.

THE INTENT OF THE RULE WAS NOT MET.
As evidenced by the Quality Assurance licensing personnel review of facility's policy and procedure manual.

FINDINGS:

SVYA admissions policy does not provide for nor encourage a pre-placement process. The interim director did not indicate that the facility had a pre-placement process in place.

37.97.206 PERSONNEL
(6) The child care agency shall employ, train and supervise an adequate number of staff necessary to ensure proper care, treatment and safety of the residents.

(7) No staff member, aide, volunteer or other person having direct contact with the children in the facility shall conduct themselves in a manner which poses any potential threat to the health, safety and well-being of the children in care.

(8) Any staff member whose behavior or health status endangers the residents shall not be allowed at the child care agency

THE INTENT OF THIS RULE WAS NOT MET
As evidenced by QAD licensing personnel interviews with youth, current staff and former staff during the on-site investigation from November 7 through 10, 2005 on-site survey December 7 through 9,2005 on-going telephone interviews and on-going file review.

FINDINGS:

1) Intake process was particularly harmful to youth,

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and many have been made to vomit due to excessive exercise and drinking large amounts of water.

2) Youth and staff report improper restraints during the intake process. Staff and youth report that staff # 24 pushed a youth into the ground while doing push-ups.

3) Staff #22 used improper language, yelled and screamed at youth and degraded youth and his family during intake process.

4) Several youth reported getting nicks and cuts on their head during the "haircut" portion of the intake process.

5) Staff # 20 reported to Licensure Program Manager on November 7, 2005 he observed the majority of intakes and the above incidents were allowed to continue to occur.

6) Staff # 20 stated the programs philosophy is to "break the kid down to build them up." According to information gathered from staff interviews, this philosophy was taught to and followed by current staff. This philosophy is particularly harmful to any child's well being.

7) As reported by youth and staff, staff #22 and staff #20 made a practice of getting in the "youth's face" in order to see if he would "go off." When youth would react staff would take the youth "to the ground" in a restraint. This placed youth at risk of being physically and emotionally harmed.

37.97.130<u>YOUTH CARE FACILITY: REPORTS</u>(2)
The YCF (except youth foster homes) shall report any of the following changes to the department prior to the effective date of the change:
(a) a change of administrator;

<u>THE INTENT OF THIS RULE WAS NOT MET</u>
As evidenced by QAD licensing personnel's interview with staff # 20 and licensure file review.

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FINDINGS:

Agency was not notified of staff #20's return to facility as the Administrator in July 2005 upon departure of previous Administrator.

37.97.130 YOUTH CARE FACILITY: REPORTS
(4) As required by 41-3-201, MCA, the provider or staff member shall report within 24 hours any incidents of known or suspected child abuse or neglect to the local county welfare office or the state child abuse hot line 1 (800) 332-6100.
***
(c) Each child care agency shall report any suspected or alleged incident of child abuse or neglect to the department and cooperate fully in the investigation of any incident.
(5) Any serious incident involving a child shall be reported within the next working day to the person or agency which placed the child and to the licensing worker.
(a) A "serious incident" means suicide attempts, excessive physical force by staff, sexual assault by residents or staff, injury to a child which requires hospitalization, or the death of a child.

THE INTENT OF THESE RULES WERE NOT MET as evidenced by QAD licensing personnel's review of records and youth and staff interviews

FINDINGS:

1) Staff reported concerns regarding child abuse and neglect to staff #20. Staff did not report concerns directly to the child abuse hot line as required. Staff # 20 did not follow up on reporting concerns to the child abuse hotline. Approximately seven child abuse and neglect incidents were not reported to the hot line.

2) Facility did not report Youth # 14 first suicide attempt on Date 9/10/2004.

37.97.233 CHILD CARE AGENCY: MANAGEMENT (1) The child care agency shall present its program management policies to the department at application. The policies shall include at

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least the following: (g) children's grievance procedure;

THE INTENT OF THIS RULE WAS NOT MET
As evidenced by the QAD licensing personnel interviews with youth, during the on-site survey December 7 through December 9, 2005 2005.

FINDINGS:

One youth stated that he did file a grievance as a result of events occurring at the intake process. Youth indicated that his grievance was accepted and action followed, but felt there was retribution from staff #22 (involved in event) afterward.

37.97.250 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, STAFFING (8) Treatment practitioner: (a) Treatment practitioner(s) must be on staff of the agency and have at least a master's degree in psychology, social work, or other counseling field or a bachelor's degree and 2 years of experience in family, individual and group work, and shall receive, as needed, consultation on specific cases by a licensed psychologist or psychiatrist.

(b) The practitioner(s) may be involved chiefly in treatment planning; case consultation; family, individual and group therapy; and the development of individual treatment plans for children in the treatment program

THE INTENT OF THIS RULE WAS NOT MET.
As evidenced by QAD licensing personnel review of personnel files on 12/8/05 and subsequent interviews with interim director and human resource officer:

FINDINGS:

At the time of survey, the person assigned this position was unclear. The Interim Director indicated that staff #19 was filling this position vs. the case manager (social service staff) position. Review of this staff's personnel files, in comparison to the facility's own position description, indicated he did not have the required degree or experience needed for the treatment practitioner position. On December 30, 2005, the Interim Director clarified that this position has been

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vacant since the departure of several staff in June, July and August of 2005.

37.97.206 CHILD CARE AGENCY: PERSONNEL
(1) Each child care agency must have a written personnel policy covering the following items: job qualifications, job descriptions, supervisory structure, salary schedules, fringe benefits, insurance, hours of work, and performance evaluations.

THE INTENT OF THIS RULE WAS NOT MET as evidenced by QAD licensing personnel review of personnel files and policy and procedures during onsite visit of December 7 through 9, 2005 and subsequent conversations with interim director.

FINDINGS

At the time of survey, a job description was reviewed regarding staff #19 who was described as a case-manager. His credentials did not match the job description provided. Further clarification from interim director indicated that the job description provided at time of survey was not an official job description for this position. A copy of the official job description was not available and could not be produced at time of survey. An official job description was retrieved by the interim director for "social service staff" from corporate and was faxed to this specialist's office on 12/30/05.

37.97.250 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, STAFFING
(1)In addition to the child care agency staff referred to in ARM 37.97.206(7) through (12), a residential treatment center must have on staff or under contract a licensed psychiatrist or licensed psychologist, an education program coordinator, teachers, a program administrator, a registered nurse, recreation staff and qualified treatment practitioners.

THE INTENT OF THE RULE WAS NOT MET.
As evidenced by QAD licensing personnel review of personnel records on 12/8/05 and subsequent discussions with Human Resource Officer and Interim Director.

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FINDINGS:

SVYA does not have on staff or under contract a licensed psychiatrist or licensed psychologist. SVYA currently does not have on staff or under contract qualified treatment practitioners.

37.97.250 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, STAFFING
(2) Child care staff qualifications/ratio: (a) Child care staff of a residential treatment center must have a bachelor's level degree or three (3) years of experience in group child care or any equivalent combination of education and experience

THE INTENT OF THIS RULE WAS NOT MET.
As evidenced by QAD licensing personnel review of personnel files and interviews with interim director and human resource officer during site visit on December 7 through 9, 2005 and subsequent discussions.

FINDINGS

Resumes and applications for all current direct care staff were collected via fax on December 20, 2005. Seven of 12 (staff #'s 4,5,6,7,9,10,11) direct care staff do not have a degree or the necessary experience for the position.

SVYA Current direct care staff job descriptions (Sergeant/Staff Sergeant and Sergeant First Class revised April 12, 2004) state that military service is counted toward experience. This criteria, however does not qualify for experience in group child care as required by the above cited rule.

37.97.250 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, STAFFING (6) PSYCHOLOGIST
(a)the services of a psychologist shall be used to provide a diagnosis and to contribute to treatment plans for each child.
(b) The psychologist(s) shall provide, consult and supervise:
(i) administering of psychometric tests on individual basis and interpreting the findings;
(ii) direct treatment of selected children in individual

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and /or group sessions;
(iii) involvement by residents in psychotherapy, behavior management, counseling and other therapy;
(iv)participation in ongoing and aftercare planning, as requested by the program administrator, and in periodically evaluating the progress of each child in treatment;
(v)consultation to individual staff members who are responsible for direct treatment of children in formulating and modifying treatment plans;
(iv) in service training for staff to help staff understand symptomatic behavior and to enable them to deal with it in the way that is best for the child.

THE INTENT OF THE RULE WAS NOT MET
As evidenced by QAD licensing personnel review of youth records, personnel records and subsequent interviews with Interim Director.

FINDINGS:

Staff #23 is stated to be the contracted psychologist for SVYA. There is no documentation of a current or previous contract and his current license on file at SVYA expired 12/30/04. There is no evidence in reviewing the youth files that this position has been involved in case planning, individual or group treatment of youth, consultation of youth treatment or overseeing the signoff of treatment by the treatment practitioner and staff that provide individual and group therapy. Interim Director and Human Resource Officer also stated that this position did not provided in-service training to staff during 2005.

37.97.225 CHILD CARE AGENCY: TIME OUT (1)
Any child care agency which uses time-out procedures shall have an written policy governing the use of time out.
(2) This policy shall include procedures for involving the use of time out and shall outline other less restrictive responses to be used prior to use of time-out.

And

37.97.102 DEFINITIONS (1)(m) "Time-out" means the placement of a child for a period of less than 30 minutes in an unlocked room.

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THE INTENT OF THIS RULE WAS NOT MET.
As evidenced by QAD personnel review of staff documentation regarding the intake process, time-out/seclusion records, youth and staff interviews and review of the following SVYA time-out policies:

SVYA POLICY OP9.4
Time Out: A specific treatment intervention of short time duration (generally 3-5 minutes, and usually not more than fifty-nine minutes) initiated by staff or requested by Cadet, wherein a cadet is temporarily removed from the group activity for the expressed purpose of utilizing appropriate treatment responses to re-direct his behaviors or maintain or re-gain proper self-control over his behaviors. Staff will continually counsel a Cadet during a Time Out intervention to use proper treatment responses to the situation.

Time Out Room: A specifically designed room within the facility wherein a Cadet may be placed while implementing a treatment Time Out. This designated room shall have its door open the entire time the Cadet is utilizing the Time Out intervention. Additionally, this room shall be of sufficient size and furnishing to meet all applicable Montana State Standards for seclusion rooms. Staff shall be required to maintain physical presence with a Cadet who is directed to a Time Out Room.

(III) Procedures (B) Staff-initiated Time Out:
Whenever it is apparent to staff that a Cadet is loosing his ability to maintain proper self-control, the staff will verbally direct the Cadet to "take a time out", and will direct the Cadet to appropriate Time Out area or Time Out Room. Staff will continually monitor the Cadet during this intervention and will appropriately counsel the Cadet to utilize the proper treatment responses to maintain or re-gain behavioral self-control. At such point the Cadet is able to express appropriate control over his behaviors, he will be allowed to return to the group or activity from which he was removed.
(C) Time Out will only be utilized as an appropriate treatment intervention and never as punishment. Additionally, staff will allow the Cadet to immediately rejoin the group or activity upon completion of the Time Out Intervention.

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FINDINGS:

1) Residents were placed in the "time-out/seclusion" room prior to beginning the intake process. Documentation reveals the length of time in this room would range from 20 minutes to 5.25 hours. Only documentation during this time was from staff # 17. Licensing personnel are unable to determine whether this was used as time-out or seclusion. This process violates the time limits for time-out. The following are examples of the length of time in time-out room prior to the intake process:
   a. Youth # 12 arrived at facility at 11:50 A.M. and placed in time-out room; 2:00 P.M. youth had brief interview with staff # 17; 3:30 P.M. haircut given; 3:45 P.M. intake started.
   b. Youth # 13 arrived at facility at 9:30 A.M. and placed in time-out room; 11:00 A.M. brief interview with staff # 17; 1:40 P.M. intake started.
   c. Youth # 3 arrived at facility at 1:15 P.M. and placed in time-out room; 1:40 P.M. brief interview with staff # 17; 2:30 P.M. urine sample obtained; 5:30 P.M. haircut given and intake started.
   d. Youth # 2 arrived at facility at 11:30 A.M. and placed in time-out room; 12:40 P.M. brief interview with staff # 17; 12:50 P.M. urine sample taken; 2:10 P.M. intake started; 2:40 P.M. taken back to time-out room; 5:30 P.M. intake resumed.
   e. Youth # 8 arrived at facility at 2:20 P.M. on July 30, 2004 and placed in time-out room; 2:40 P.M. haircut and intake began; 6:15 P.M. youth placed in time-out room due to refusal to comply with intake process. Youth remained in time-out/seclusion until 2:45 P.M. on August 4, 2004.

2) Youth # 9 was placed in time-out for two days due to a major rule violation on August 9, 2004.

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3) Youth # 14 was placed in time-out on November 1, 2004 from 9:05 A.M. until 10:31 A.M.

4) Youth # 14 was placed in time-out on August 25, 2004 from 12:35 P.M. and facilities last documentation at 4:03 P.M.

5) Youth # 14 was placed in time-out on August 27, 2004 at 4:45 P.M. and facilities last documentation was August 29, 2004 at 6:55A.M.

6) Youth # 14 was placed in time-out on October 31, 2004 at 9:35 P.M. and removed on November 1, 2004 at 6:50 A.M.

7) Staff does not continually monitor the resident during the time-out or appropriately counsel the resident to utilize the proper treatment responses to maintain or re-gain behavioral self-control.

37.97.257 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, SECLUSION

(2) Seclusion may be used as a means of intervention only when the child is in danger of harming himself, others, or property.

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(9) A child may not be placed in seclusion unless:

(a) lesser restrictive alternatives have been attempted by staff and have failed to control the child;

(b) the child is a danger of harming himself, others, or property.

(10) Placement in seclusion may not exceed 1 hour unless specifically authorized by a psychiatrist. In no event may placement in seclusion exceed 24 hours. A child who requires seclusion in excess of 24 hours shall be transferred to an acute psychiatric care facility.

(11) A staff member with no other immediate duties shall continuously monitor the child placed in seclusion by visual or auditory means and shall remain within 20 feet of the room. If continuous monitoring is by auditory means, the staff member shall visually check the child at least every 10 minutes.

(12) Upon the placement of a child in seclusion, the following minimum items shall be recorded, updated and maintained, if applicable:

(a) a written report which states the child's name, date, time of placement, staff member initiating the

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placement, qualified treatment practitioner authorizing placement and narrative describing the following: the precipitating event, child's behavior before placement, and actions taken by staff of a less restrictive nature in an attempt to control, calm or contain the child;

(b) written notation of visual checks at least every 10 minutes and notation of behavior and time occurring;

(c) notation regarding opportunity to use toilet facilities once per hour;

(d) notations regarding when the child had opportunity to exercise;

(e) notation as to medications administered, time given and staff administering;

(f) notation of all staff contact including a description of the resolution of the placement incident which results in the termination of seclusion.

THE INTENT OF THIS RULE WAS NOT MET.
As evidenced by QAD licensing personnel review of staff documentation of intake process, time-out/seclusion records, youth and staff interviews and the following SVYA policies on use of confinement.

FINDINGS:

1) Seclusion/time-out records are vague, inconsistent and unclear. The Licensing personnel are unable to determine whether time-out or seclusion was utilized in many cases.

2) Seclusion requirements were not met in the above cited time-out deficiencies 1 through 6.

3) Seclusion was used when residents were not a danger to themselves, others or property.

4) SVYA does not document what lesser restrictive alternatives have been attempted prior to placing the resident into seclusion.

5) Placements in seclusion exceeded one hour

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without specific authorization by a psychiatrist.

6) Residents were placed in seclusion in excess of 24 hours. (Examples: Youth #s 8, 9 and 14)

7) A staff member with no other immediate duties was not assigned to continuously monitor residents in seclusion.

8) Staff did not properly maintain a record of the above cited deficiency (12) (a-f).

37.97.226 CHILD CARE AGENCY: PASSIVE PHYSICAL RESTRAINT (2) Passive physical restraint of a child may be used to end a disturbance by the child that immediately threatens physical injury to the child, other persons, or property

THE INTENT OF THIS RULE WAS NOT MET as evidenced by QAD licensing personnel review of resident's files, interviews with residents and staff.

FINDINGS;

1) SVYA staff are trained using CPI restraint techniques. Staff and residents report CPI is not generally followed and staff most often "take residents down" as a first response to escalation.

2) Restraints are documented as using CPI techniques however, verbal reports state CPI was not used.

3) Staff #20 has required staff to change reports to state CPI techniques were used.

4) Physical restraint is often used when a staff member initiates a disturbance with a resident.

5) Physical restraints are used when residents are not a danger to themselves, others or property.

37.97.258 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, MECHANICAL RESTRAINT (4) A child care agency which uses mechanical restraint shall assign a staff member with no other immediate responsibilities to continuously monitor

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any child placed in restraint.

(a) The staff member must remain in continuous auditory and visual contact with the child.

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(5) T mechanical restraint or a person designated by that administrator must authorize each use of mechanical restraint he administrator of the child care agency which uses int. Each authorization shall be for one-half hour only. No child shall be kept in mechanical restraint for more than two (2) hours in any 12-hour period.

(a) Any child who needs to be mechanically restrained for more than two (2) hours in any 12-hour period shall be transferred to an acute care psychiatric facility.

(6) Mechanical restraint shall not be used as punishment.

THE INTENT OF THESE RULES WERE NOT MET As evidenced by Quality Assurance licensing personnel review of resident files and interviews with former and current staff.

FINDINGS:

1) Youth #14 was placed in soft mechanical restraints on 9/10/04. Restraints were placed on youth at approximately 7:20 P.M. Staff # 20 ordered youth to remain in restraints until the following morning. Documentation does not state what time the soft restraints were removed on 9//11/04.

2) Staff # 20 did not provide authorization to continue the restraints every one half hour.

3) The youth remained in mechanical restraints exceeding the two hour limit.

4) The youth was not transferred two hours in mechanical restraints.

5) Mechanical restraints were used to transport residents to and from medical appointments in the community.

6) Mechanical restraints were used to prevent residents from running away from the facility.

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37.97.506YOUTH GROUP HOME: PHYSICAL CARE (7) Discipline: Each youth group home shall have a written policy for the discipline of children in care. Copies shall be made available to all provider staff, referring parties, parents, and the children. This policy shall include the philosophy of discipline, methods of discipline permitted, and the purpose of discipline as it relates to the ongoing learning and development process.

(a) Discipline must not be physically or emotionally damaging.
(b) There must be no cruel, harsh, or unusual punishment.
(c) Verbal abuse of a child is prohibited.
(d) No child of any age can be shaken or hit.
(e) No disciplinary practices of any sort shall be employed which are humiliating or degrading to the child or which undermine the child's self-respect.***

(h) an incident report shall be completed by any child care staff involved in an infraction of the discipline requirements. The incident report shall be placed in the child's file.
(i) An investigation of the incident shall be conducted by the provider's board of directors, supervisors or placing agency. A complete report of the investigation shall be placed in the provider's records and shall be available for inspection by the licensing agent and referring party.

THE INTENT OF THESE RULES WERE NOT MET: as evidenced by QAD licensing personnel's interviews with resident's and staff and review of resident files.

FINDINGS:

1) Residents were physically disciplined during the intake process if they did not comply with staff orders. Residents were physically improperly restrained, hair cuts caused cuts/nicks on head, staff called residents names and made negative comments

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regarding residents family. Several residents were extremely fearful during the intake process and up to several weeks after the intake.

2) Residents were made to exercise to the point of vomiting. Staff #20 pulled resident # 15's pants down in front of the classroom. Resident # 9 was placed in time-out for two days due to a major rule violation. Resident # 14 was placed in mechanical restraints due to a suicide attempt.

3) Staff has verbally abused residents by calling them names and making negative comments about the resident's family.

4) As described above, disciplinary actions were at times physical and emotionally damaging, cruel, unusual or harsh, humiliating and/or degrading.

5) Incident reports were not written regarding several violations of the disciplinary requirements and an investigation was not completed

37.97.257 CHILD CARE AGENCY: RESIDENTIAL TREATMENT CENTER, SECLUSION
(8) When a seclusion room is used, the following physical requirements shall apply:
***
(i) there shall be an approved ventilation system

THE INTENT OF THIS RULE WAS NOT MET
As evidenced by QAD licensing personnel's observations during the onsite physical inspection on December 7 –9' 2005.

FINDINGS:

Ventilation system in both seclusion rooms were not operational. Rooms were stuffy and warm.

37.97.270 CHILD CARE AGENCY: ADDITIONAL REQUIREMENTS (as follows)

37.97.508 YOUTH GROUP HOME; ENVIROMENTAL REQUIREMENTS (5)
Bathrooms shall be cleaned thoroughly with a germicidal cleaner at least weekly and more often if

STATEMENT OF LICENSING DEFICIENCIES AND PLAN OF CORRECTION

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needed. **THE INTENT OF THIS RULE WAS NOT MET:** As evidenced by this licensing specialist's onsite physical inspection of the facility 12/7/05, and subsequent physical re-inspection of area with maintenance staff on 12/9/05. **FINDINGS:** Mildew and mold was observed on the ceiling area in the bathroom stalls (commode). Shower wall (divider) corner by base indicates that grout and sealant is crumbling and splitting.		

1

Signature: _____

Title: _____ Date: _____

Please return to: Julie Fink, Residential Care Program Manager
DPHHS/Community Residential Licensing Program
307 E. Park, Rm 305, Anaconda MT 59711