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CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
OUT-OF-STATE CERTIFICATION REVIEW  
OF  
CHILED A INSTITUTE, INC.  
LA CROSSE, WISCONSIN

**BACKGROUND**

Facility Information

Chileda Institute, Inc. is located in the community of LaCrosse, Wisconsin. The facility has a licensed capacity of 44 and accepts male and female youth. The facility had a census of 40 at the time of the certification visit. The facility has approximately 10 house directors, 11 staff supervisors and 90 classroom/program assistants.

A California youth, placed by Riverside Social Services, has resided at Chileda Institute, Inc. since March 6, 2000.

Support Agencies

The Department of Health and Family Services, Division of Children and Family Services (DHFS/DCFS) licenses Chileda Institute, Inc. Chileda Institute, Inc. is licensed to provide care for developmentally disabled and emotionally and mentally disturbed children. DCFS is responsible for investigating general licensing complaints. The County Department of Human Services investigates allegations of abuse, neglect and death.

The State Fire Marshal's Office completed a fire safety inspection November 12, 1998.

Placing Agencies

Riverside Social Services placed the child at Chileda Institute, Inc. due to the county's inability to find a facility in California that would accept this child because of his assaultive behavior.

Pre-certification

A Riverside County Placement worker conducted a pre-certification visit to Chileda Institute, Inc. March 6, 2000. Chileda Institute, Inc. is pursuing certification to provide services to California children. A California child was

discharged from the program October 26, 1999, after approximately 20 months in the program. The child's mother gained legal guardianship.

### CHILED A INSTITUTE INC. PROGRAM STATEMENT

The following summarizes Chileda Institute, Inc.'s Program Statement.

#### Children Served

The program serves children with developmental disabilities, mental retardation with concomitant behavioral problems, and female children between the ages of 12 and 18.

Chileda Institute, Inc. also serves children with eating disorders or pregnancy-related issues.

#### Program Description

Chileda Institute, Inc. provides a comprehensive evaluation and training. The program provides individualized training, emancipation/independence training, case management, and community integration services. The program is more than 18 months old.

The facility conducts an intake study, develops needs and services plans and discharge plans. The facility also provides family counseling.

The staff ratio is typically one staff to two children. The ratio is 1:4 between the hours of 10:00 p.m. – 7:00 a.m. One to one staff coverage is provided when needed. The facility has awake night staff.

### OUT-OF-STATE CERTIFICATION REVIEW FINDINGS

The Out-of-State Certification Team (OSCT) members conducted a certification review July 10 through 13, 2000. Due to the fact that there was only one (1) California social service's child in placement for this certification review, only one child was interviewed. The child's file was reviewed as well as the file of a former California child. A total of ten (10) staff files were reviewed followed by nine (9) staff interviews. Staff interviews included the Vice President, Director of Health Services (a Licensed Practical Nurse), Administrative Assistant to the Director of Health Services, shift supervisors and the classroom and program assistants. An inspection of the entire facility was conducted which included the three living areas, classrooms, the gymnasium, recreation room, the kitchen which is used for training purposes only, the time-out and seclusionary rooms,

medical office and vocational services which is located at another site. Children were observed on the living unit, in the recreation area and at the vocational site.

## **PROGRAM OVERVIEW**

The facility is located in La Crosse, Wisconsin and has been in existence for twenty-seven years. It is located next door to a medical hospital in the downtown area of the city. La Crosse has a population of approximately 50,000. Chileda serves hard to place children who have multiple disabilities. Most of the children have failed in numerous placements prior to being accepted for placement at Chileda. The children residing at Chileda are generally experiencing behavioral problems that make it impossible for them to function in a traditional school classroom. A typical child at Chileda might have visual, hearing, and developmental disabilities and possibly seizure disorder, behavioral problems and autism as well. It was reported that the facility specializes in the treatment of pervasive developmental disorder (autism) but it is emphasized that most of the children generally demonstrate combinations of other disabilities as well. The average length of stay is three years and the average age of the children at Chileda is 14.5 years.

Chileda does not accept children who are fire setters, adjudicated minors, and children who have primary drug or alcohol issues or mental health issues. The facility also has age restrictions. It was reported that the facility requests numerous evaluations, reports and other documentation in order to evaluate if a potential placement is an appropriate match for Chileda. Evaluations that must be submitted include the medical, occupational therapy, speech and language, parent and family, Individual Education Plan (IEP), physical therapy, history of previous placements and psychiatric. Most of the referrals come from county social workers in Wisconsin, Illinois and Minnesota. There have also been the two placements from California. One California child is currently in placement and one California child completed treatment last year and was discharged from Chileda.

The enrollment committee makes the final decision on whether a child will be accepted for placement. The individual departments represented on the committee include direct care supervisors, vocational services, the educational coordinator, social worker, department of health services, department of behavioral services, and the vice president of Chileda. It was reported that the staff members in the enrollment committee demonstrate a wealth of education and experience such as licensed practical nurses and individuals with master's degrees in special education or vocational rehabilitation. It was reported that the facility does not accept a child until required documentation has been submitted that complies with the Interstate Compact on the Placement of Children (ICPC). A professional staff member at the facility is specifically assigned to work with the ICPC among other duties.

The direct care staff at Chileda must be at least eighteen years of age, have a high school diploma and they must complete eighty hours of training and mentoring prior to

working independently with the children. Forty hours of in-service are required of the Chileda staff on a yearly basis. The training topics include but are not limited to: blood borne pathogens, medication issues, human rights, outcomes, physical management (CPI), confidentiality, emergency procedures, documentation, vocation, quality control, recreation, CPR, first aid, leisure skills and introduction to autism. Some of the written verification of staff training could not be located in the staff files. Criminal background and child abuse checks are conducted on newly hired employees. Fingerprints are not a part of the process. Thirty, sixty, ninety-day and six-month staff evaluations are completed on all new employees and yearly thereafter. The staff to child ratio is 1:2 during day and evening hours and 3 to 4 staff members per house during the night. All night staff members are awake staff. Occupational therapists and teachers are not counted in the ratio.

There are three living units on the same site in La Crosse. The living units are connected with the other general areas of the building such as the gym, medical office, and recreation room. All areas of the building can be accessed without having to go outdoors. Chileda has a medical office that is staffed by professional nursing staff twenty-four hours per day. A medical center, St. Francis Hospital, is located next door to the facility and there is an emergency room there. The children receive some medical treatment at the hospital and some in the medical clinics associated with the hospital. Pediatric physicians and psychiatrists come to the facility to see the children. It was reported that it is difficult to locate dentists that are willing to accept Medicaid and children with medical problems. The facility ensures that dental care is completed when indicated regardless of whether the care will be covered by medical insurance.

The program at Chileda is reported to be based on the IEP process. The individual education plan is what directs the care and treatment. An IEP convenes 30 days after a child is admitted and Chileda staff, the child's county social worker and parents are invited to attend the IEP meeting. All additional assessments are completed within the first thirty days. The facility also completes additional plans as well such as the habilitation plan and the behavioral plan on every child. Behavioral logs are completed on all children, the results are totaled, placed in a graph form and are then used to generate the plans on every child. The goal at Chileda is for each child to gain skills, behaviors and education that will assist the child to become as independent as possible. There is a strong emphasis on teaching each child to become a good advocate for him/herself. The program provides training and the practicing of independent living skills. A full service kitchen is utilized for cooking classes and Chileda operates an off-site vocational program for the older children to learn job skills that will enable them to be better prepared for an increased level of independence after discharge.

Children receive counseling if they have the cognitive ability to benefit from it. Occupational therapy, art and music instruction, physical therapy, speech therapy, community training, and functional skills training are important portions of the program. All of the direct care staff members are required to know the target behavior and interventions for the children in their care. The entire treatment plan on each child is

fully reviewed on a quarterly basis. Parents, social workers and school district personnel are invited to these reviews and all receive a written copy in the mail. Most of the staff members that were interviewed could not explain the general treatment modalities and overall philosophy of the facility. Most of the staff though reported that it is program that is supportive of staff and children and that it helps most children that are accepted at Chileda.

The children all attend school at Chileda. The classroom activities are geared to each child's issues and capabilities. The school utilizes the TEACCH method that was reported by direct care staff members and teachers to be a successful form of care, education and habilitation. The schedules for each day are listed with the TEACCH approach. For example, some children may have a drinking cup attached to the schedule with Velcro to identify lunchtime or snack time. Other children may have the word 'lunch' as well as a picture while others may have only the printed word. All meals are prepared at St. Francis Hospital and brought to Chileda in hot trays. Snack items are maintained in school classrooms and living units.

Three quiet rooms are utilized at the facility. Two of these rooms have a locking mechanism that cannot be engaged unless a staff member has a hand on the push button outside of the room. Staff are required to provide constant visual contact of the child while in the quiet room. The behavioral plan must include use of the quiet room in order for the room to be utilized with a particular child. A quiet room may be used on a one-time basis in an emergency with administrative notification. Restraints are used at the facility but the staff and administration reported that they are used only in cases of severe self-injurious behavior or danger to others.

#### Issues Involving Emergency Intervention

California licensing standards require all group homes to submit an Emergency Intervention Plan (EIP). The plan is to be included in the group home program statement. The facility must develop and maintain a written runaway plan that describes how the facility will respond to runaway children.

The Emergency Intervention Staff Training Plan is to be included as a component of the emergency intervention plan.

1. The facility's EIP was not complete. The following elements were not included in the plan:
  - verification that the EIP was designed and approved, in conjunction with the facility, by an individual with the qualifications of a behavior management consultant
  - name and qualification of the instructor who provides the training for emergency intervention
  - a brief description of the training staff receive in crisis management training (CPI)

- the training plan for new and existing personnel
- the titles of facility personnel who are responsible for approving/observing a restraint that exceeds 15 minutes
- the procedure that is in place if more than one child requires the use of emergency intervention at the same time
- the provision/procedure for ensuring adequate supervision when all staff are needed for the emergency intervention
- the criteria for assessing when the facility does not have adequate resources to meet the specific needs of a specific child
- the title of facility personnel who check the breathing of a child during a physical restraint
- the procedures for determining when a medical exam is needed following a physical restraint
- the procedures for an internal biannual review of the use of the EIP
- the procedure staff follow when they observe a child "vacating" from an area or the facility

#### Issues Involving Emergency Training and Personnel Records

California licensing standards require that the facility shall maintain documentation of the completion by each child care staff person of the training in the principles and practices of child care, behavior management techniques, crisis management, the facility's plan of operation, the facility's emergency and safety procedures and community services and resources that may be used by the children. Documentation of emergency intervention training must include dates, hours, and description of the training completed; name and training certificate of the instructor who provided the training; certification from the instructor that the staff member has successfully completed the competency test.

2. The Director of Human Resources advised the OSCT members that documentation of staff training was not current because of difficulties he had experienced with the computer software program. An incomplete computer printout was provided to team members reflecting training that was provided in 1996 and 1999. The subject matter of the training provided was not clear to the OSCT members based on the training titles.
3. Employee files did not contain certificates to verify they had successfully completed CPI training.

#### Issues Involving the Removal and/or Discharge Procedures

California licensing standards require that the facility shall develop, maintain and implement written policies and procedures governing a child's removal and/or discharge from the facility; that the child and his/her authorized representative

shall receive a copy of such policies and procedures and that a signed copy of such policies shall be maintained in the child's record.

4. The facility does not have a removal and discharge policy that is signed by the child and his/her authorized representative and maintained in the child's records.

#### Issues Involving Children's Records

California licensing standards require that a copy of the facility's policies and procedures regarding discipline, complaints, and a record of child's personal property must be retained in the child's file.

5. The facility has a policy on the Use of Intrusive Procedures to Decrease Behaviors and a Behavior Intervention Plan for each child. This policy is not signed, however, by the child and his/her authorized representative and maintained in the child's file.
6. The facility has a "Client Grievance" form and a formal written grievance policy and procedure. This policy and procedure is not signed, however, by the child and his/her authorized representative and maintained in the child's file.
7. There was no record of the child's personal property and valuables in the child's record.

#### Issues Involving the Needs and Services Plan

California licensing standards require that the plan shall identify the child's needs in the following areas: ability to manage his/her own money, including the maximum amount of money the child shall be permitted to have in his/her possession at any one time.

8. The Behavior Intervention Plan did not provide a plan for the child's ability to manage his/her own money and the amount of money the child shall be permitted to have in his possession at any given time.

#### Issues Involving Health Related Services

California licensing standards require that staff responsible for providing direct care and supervision shall receive training in first aid from persons qualified by agencies including but not limited to the American Red Cross.

9. Staff files did not contain copies of first aid certificates that provide the date of training and expiration date of the certificate. A computer printout

was provided with the names of the staff who had received first aid training. The last documented date of first aid training for many staff was 1996.

### Issues Involving Personnel Requirements

California licensing standards require that all personnel shall be in good health, and shall be physically, mentally, and occupationally capable of performing assigned tasks verified by a health screening, including a test for tuberculosis, performed by or under the supervision of a physician not more than one year prior to or seven days after employment or licensure.

10. There were no health screenings on file for two staff. It was explained to the OSCT members that it was due to the length of staff's employment with the agency that they did not have a health screening on file. Newly hired staff are required to have a health screening and TB test.

### OTHER ISSUES

- A. Chileda Institute, Inc. personnel who were interviewed were well versed in the "human rights' violation" training provided by the facility. They knew they had to complete and submit a "Resident Rights" form when a child's rights are violated. Many of the staff interviewed, however, were not familiar with the term "mandated reporter" and did not know to what outside agency they would report suspected physical or sexual abuse.

The Vice-President advised OSCT members that he would provide the OSCU with a copy of Wisconsin's mandated reporting requirements.

- B. The application Chileda Institute, Inc. submitted did not contain a thorough narrative of the overall description of their program (i.e., the various types of services, education and behavior modification program).

### CERTIFICATION DECISION

Chileda Institute, Inc. will be offered an opportunity to provide a Plan of Correction. The certification decision will be made following review of the submitted Plan of Correction.