

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
OUT-OF-STATE CERTIFICATION REVIEW
OF
EXCELSIOR YOUTH CENTERS, INC.
AURORA, COLORADO

BACKGROUND

Facility Information

Excelsior Youth Centers, Inc. has a main facility site located in Aurora, Colorado. The capacity is 151 girls. A smaller facility with a capacity of 25 is located in Englewood, Colorado, approximately twenty-five minutes from Aurora. The girls at Englewood reside at the site and participate in meals and activities there on the weekend. They are transported during the weekdays to the main site where they eat in the cafeteria, participate in school, vocational programs, athletics and other activities. Plans are currently underway to build a new cottage at the Aurora site to house the twenty-five girls from the Englewood facility.

The Aurora and Englewood facilities have a total capacity of 176 girls. There are sixty-four California girls in placement, thirty-two of which are social services and probation placements.

Support Agencies

Excelsior Youth Centers, Inc. is licensed by the Colorado Department of Human Services (CDHS), Licensing Division of Child Care, in Denver, Colorado. They are also approved by the Colorado Division of Mental Health as a Designated Mental Health Facility. CDHS does not investigate complaints involving abuse nor do they take anonymous complaints. The complainant must provide a name and telephone number. Additionally, CDHS may not visit facilities annually, but every other year. The annual visits are announced.

The Arapahoe County Department of Social Services investigates all allegations of abuse, neglect or supervision that impacts the safety of children in institutional care. A trained child protective services worker is assigned to investigate the above types of complaints made against Excelsior Youth Centers, Inc.

The County Department of Social Services also screens incident reports from the facility regarding injuries resulting from restraints. They will conduct a follow-up investigation of an injury if deemed necessary.

The City of Englewood, Department of Safety Services, Fire Division provided the fire clearance.

California Placing Agencies

The twelve (12) probation departments, eight (8) mental health departments and four (4) social services departments that place with Excelsior Youth Centers, Inc. are Alameda, Los Angeles, Marin, Orange, Placer, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, Santa Clara, Santa Cruz, Sonoma and Ventura.

EXCELSIOR YOUTH CENTER'S PROGRAM STATEMENT

The following summarizes the Excelsior Youth Centers, Inc. Program Statement.

Children Served

The program statement indicates that Excelsior Youth Centers, Inc. serves girls between the ages of 12 and 18. Their license states that "under other conditions" they can accept children between the ages of 18 and 21.

Excelsior Youth Centers, Inc. accepts psychiatrically and behaviorally disturbed adolescent girls with "depression, withdrawal, chronic runaway, substance abuse, delinquency and pre-delinquency, self-abuse, assaultive and aggressive behavior, prostitution, sexual promiscuity, inability to function within the family and in the public school classroom, etc." Administrative staff indicated the facility would also accept arsonists, sexual perpetrators and attachment disorders.

The Admissions Director who is responsible for the intake assessments clarified the criteria for rejecting a placement. The Admissions Director makes a subjective determination to accept girls who have assaultive or self-destructive behaviors. The director considers where the assaultive and aggressive behaviors took place prior to referral to Excelsior Youth Centers, Inc. She stated she considers, in particular, a girl's most recent behaviors. A girl with an IQ under 70 will not be accepted unless she has high verbal skills. A girl who is pregnant at the time of intake or actively psychotic will not be accepted. Personal interviews are conducted with the girl and her family when possible to determine her history and appropriateness of placement.

Program Description

"Excelsior Youth Centers, Inc. offers therapeutic residential and day treatment for adolescent females with emotional and behavioral disturbances. The treatment and rehabilitation services focus on individual growth and change with the goal of becoming a functioning member of the community." The program emphasizes four primary program components: formal therapy, recreation, daily living skills and education. There are individualized goals designed to meet the girl's emotional and behavioral needs. The average length of stay is 15 months.

"Excelsior Youth Centers, Inc. prides itself on an accelerated referral process." Referral decisions are made within 24 hours of receiving the referral packet. Information obtained in the referral packet includes social and family history, current psychological evaluation, treatment history, medical concerns and level of intellectual functioning.

Excelsior Youth Centers, Inc. uses individual psychotherapy, group therapy and family therapy as its primary treatment modalities. Therapy is done within the framework of "reality therapy," which stresses personal responsibility for one's own actions and management of behavior. A girl's progress through the program is based on her recognition of the treatment issues and responsibility to herself and others.

The Phase Program enables each resident to recognize her own progress, personal growth and development. Each phase has specific objectives and opportunities which measure the girls' accomplishments and achievements. In addition to the Phase Program's Objectives and Opportunities, girls will earn privileges based on a campus-wide level system. The general milieu structure and Phase Program provides girls ample opportunity and support to achieve treatment goals.

There are four treatment and living programs which provide services based on a girl's level of functioning, maladaptive behaviors, psychodynamics and history.

The Treatment and Learning Center (TLC) is an intensive treatment unit used to control and alleviate antisocial, maladaptive and destructive behaviors.

The Cottage Living Units provide the girls with a setting in which they participate in a positive, therapeutic and healthy daily living environment.

On campus and community based Transitional Living Units provide the girls the opportunity to become self-reliant through utilization of community programs and support systems. The focus of the transitional living program is to teach and practice daily living skills necessary for reintegration into the community.

Girls who reside in less restrictive settings in the community receive day treatment services in the form of therapeutic and educational services on-campus.

OUT-OF-STATE CERTIFICATION REVIEW FINDINGS

The Out-of-State Certification Team (OSCT) conducted a certification review June 7-11, 1999. A sample of eighteen (18) staff and ten (10) children's files were reviewed, followed by eighteen (18) interviews with staff and ten (10) interviews with girls. Staff interviews included the admissions director, nurse, treatment coordinator, crisis intervention counselor, cottage coordinator, school vice-principal, and group living counselors. Physical plant inspections were conducted at both locations. Members of the OSCT observed children in the Intervention Unit, the Treatment and Learning Center, in the school setting, and ate lunch in the cafeteria. Two team members observed girls at the Englewood facility engage in a group meeting prior to morning departure for the main facility. The following reflects the review findings.

Program Overview

As stated in Excelsior Youth Centers, Inc. Program Statement, the facility accepts adolescent girls between the ages of 12-18 with a broad range of emotional and behavioral problems in their backgrounds. Excelsior Youth Centers, Inc. would not deny admission to any child referred based on any specific behavior. The intake process will allow most girls to be admitted regardless of their history. The review of children's files as well as the interviews with staff and children revealed that Excelsior Youth Centers, Inc. currently has girls with each characteristic identified in their program statement. Excelsior Youth Centers, Inc. is a program with girls who have a wide spectrum of issues commingling in the same cottage and/or environment.

The physical plant consists of eight Cottage Living Units with capacities ranging from 14-24, the TLC which has 12 very small cell-like bedrooms (which double as seclusion or time out rooms), and the Intervention Unit (IU) which has six very small cell-like rooms used as seclusion or time out rooms. Children may stay in the TLC from three months to a year which is problematic as the bedrooms are too small to accommodate a bed and shelving space for personal belongings, and the beds consist of a 3-4 inch thick pad placed on a concrete block. The facility in Englewood is one large facility with a capacity of 25.

The program statement indicates a staffing pattern of 1:4 throughout the day. The OSCT found that the TLC and IU had lower staff to child ratios, however, some cottages located at the main facility have 20-24 girls placed in each cottage with three staff throughout the day. This indicates there are limited staff monitoring behavior and providing supervision to a mixed population of girls exhibiting varying degrees of behavior problems. Some girls reported that staff do not have the time to listen to them or give them one-on-one

attention. The program statement states "it is the responsibility of staff members to recognize productive behavior and provide verbal reinforcement whenever possible...As a resident learns to demonstrate productive behaviors and decisions, she will acquire more privileges." This indicates that the staff to child ratio directly impacts the girl's individual progress specifically when the girl's status depends on staff's ability to monitor behavior.

The comprehensive treatment approach emphasizes four primary program components: formal therapies, education, recreation and daily living skills. Individualized goals are designed to meet the resident's emotional and behavioral needs. The formulation of individual treatment plans and implementation of the same are the responsibility of the treatment coordinator, assistant treatment coordinator, at least five full time group living counselors, and one part-time recreation counselor. Children's file reviews and interviews with children indicated that the girls have individual treatment plans. However, the implementation of these treatment plans on a daily basis is not clearly documented in the girl's individual log. Some girls reported that they did not have input in developing their individual goals. They acknowledged meeting with their therapist after the goals were developed.

The program is based on the framework of Reality Therapy Principles which stress individual responsibility for one's own actions and management of behavior. Excelsior Youth Centers, Inc. Phase Program as well as their formal therapies, which include: individual, group and family therapy, are based on this Reality Therapy. The girls and staff report that "writing assignments" are given as a consequence for problem behavior. According to some girls, these writing assignments must prove to staff that the girl has resolved and/or taken responsibility for the issue being addressed. The girls felt they were not able to express their real feelings or voice their opinion in these writing assignments as the assignments were unacceptable unless they complied with staff's subjective expectations.

Excelsior Youth Centers, Inc. program statement states that the use of time out is for the purpose of removing the resident from the potential sources of reinforcement for problem behaviors and/or to provide a mild consequence for the problem behavior. Furthermore, problem behavior is stated as dangerous or disruptive behavior, potentially dangerous or disruptive behavior, or provocative violation of Excelsior Youth Centers, Inc.'s rules. Per the girls' interviews, staff's solution/therapy to an acting out child (who was not a threat to herself or anyone else) was time out in the IU, or writing assignments while in time out in the IU, or writing assignments while in time out in the living quarters. However, staff stated the IU was used only when a girl was a danger to herself or others.

According to the program statement it is projected that during their stay girls will have experienced a thorough course of individual psychotherapy focused at their personal and family issues. They will participate in between two and four therapy groups each of which is focused on a pathology common to the individuals assigned to that particular group, and involvement in family therapy, whenever appropriate, aimed at resolution of issues creating dysfunction.

The following information was gathered from nine interviews conducted during the certification visit regarding the "formal therapies:"

- eight girls stated they receive individual therapy on a weekly basis
- six girls stated they receive group therapy; three out of the six state the group therapy is inconsistent and the topics do not relate to their issues.
- three girls stated they receive family therapy via phone. Another four girls have a reunification plan, but no family therapy. In these cases the girls only have a weekly

10-minute phone contact with their family. These girls have been in placement at least 11 months.

It appears that the individual therapy is the only "formal therapy" that is consistent in the program. The group therapy is inconsistent. Family therapy appears to be appropriate for the four girls mentioned above yet it is not being offered. Excelsior Youth Centers, Inc. states clearly that the "formal therapies" are part of their program. However, per the children's interviews, group and family therapy are not being practiced consistently in their program. It is important to note that the program statement further states "the resident's ability to function within the family...are also criteria considered prior to discharge."

A fully approved year-round Junior/Senior High School is located on the main campus. The school program is accredited by the North Central Association and Colorado Department of Education.

In addition to its academic program, Excelsior Youth Centers, Inc. provides vocational training in cosmetology, food services, and office procedures. These vocational programs are located on campus. Individual educational testing as well as psychological testing, remedial classes, tutoring and educational and vocational counseling are also offered. Extracurricular activities such as inter-school basketball, volleyball, school newspaper, bicycle maintenance and social events are also offered. The school has membership in the Colorado High School Activities Association and participates in sporting events with public school leagues.

A Medical Doctor and a Pediatric Nurse Practitioner spend approximately 12 hours a week at the facility. They conduct physicals and gynecological exams within seven days of a girl's admission to the facility. If a girl refuses the gynecological exam, she is required to sign a statement of refusal. There are three Registered Nurses (RN), one Licensed Vocational Nurse (LVN), and one Medical Assistant (MA) on staff. Nursing staff are available at the facility from 6:30 a.m. to 10:00 p.m. and one RN is on-call after 10:00 p.m. Children receive dental, vision, and hearing exams upon admission.

There are two psychiatrists on staff and children on medications see a psychiatrist once a month. There are twenty-five therapists on staff.

Issues Involving Personal Rights and Emergency Intervention

California licensing standards require that each child shall have personal rights which include, but are not limited to, the following: to be accorded dignity in his/her personal relationships; to be accorded safe, healthful and comfortable accommodations, furnishings, and equipment to meet his/her needs; to wear his/her own clothes; to have access to individual storage space for his/her private use; to be free from unusual punishment, intimidation, coercion, threat, mental abuse, or other actions of a punitive nature; to have access to telephones in order to make and receive confidential calls.

California licensing standards require that emergency intervention techniques including manual restraint and use of protective separation may be justified if used to prevent a child exhibiting assaultive behavior from injuring or endangering himself, herself, or others. Manual restraints must never be used to prevent a child from leaving the facility. Protective separation rooms may not be used for another purpose, e.g., bedroom, bathroom, storage. Facility personnel must maintain visual contact with a child in protective separation rooms at all times.

1. The twelve rooms in the Treatment and Living Center (TLC) are used for both temporary and long-term living (up to a year). The bed consists of a foam pad,

approximately three to four inches thick, placed on a concrete block, which is built out from the wall and is approximately two feet high. This pad is not thick enough to provide a comfortable cushion from the concrete beneath the pad. There is a closet outside each room to store the girl's clothing and personal items. The closet doors remain locked at all times. The girls are required to ask permission to gain access to their personal belongings. The rooms are too small to accommodate a bed and space for personal belongings.

2. Girls from other cottages, who have been removed from the daily facility routine, may occupy a room in the TLC during the day. Some girls who reside in the TLC are able to participate in the regular milieu during the day, thus leaving their room vacant for use by other girls.
3. Girls are required to remove their shoes while in the TLC and IU. Staff indicated this was to prevent girls from throwing their shoes or using shoelaces for suicide attempts. It was also learned from interviews that girls who AWOL or attempt to AWOL have their shoes removed. Withholding shoes to prevent runaways is viewed by both California and Federal authorities as a detention practice to which foster children shall not be subjected.
4. Paper gowns are used in the IU for girls who are suicidal or who have gone AWOL. Girls are instructed to remove all undergarments when wearing gowns. Male staff are employed in the IU and are responsible for restraining girls in the IU. The use of these gowns violates a girl's right to be accorded dignity.
5. A girl was required to sleep in the quiet room in one of the cottages until a bed became available in the cottage. Staff confirmed that this could occur although the Admissions Director denied admitting a girl unless a bed is available.
6. Some staff inappropriately confront the girls. This includes calling the girls, "you little shits," and being "rough" when escorting or restraining a girl. Some girls reported being "dragged or carried" during a physical escort.
7. Staff monitor girls' telephone calls. One girl was not permitted to speak Spanish to her grandmother who is Spanish speaking only. There was nothing documented in the girls' Needs and Services Plans prohibiting them from making confidential calls.
8. As stated in the Agency's policy under Outline of Client Rights, "girls have the right to freedom of thought, conscience, religion and reasonable privacy; and to have their opinions heard and be included, whenever possible, when decisions are being made affecting their life and treatment." Interviews did not provide consistent information that girls are involved in the process of developing their treatment plans and can identify their treatment goals.
9. Writing assignments are frequently used as a consequence. When girls express feelings in their writings that are perceived to be "negative or rude" by staff, they are consequenced with continued isolation in the IU until the completed writing assignment meets staff's satisfaction.
10. An electronic monitoring/intercom system is used at the Englewood site which operates from the staff office. The girls do not have the ability to turn the system off in their rooms which is in violation of their right to privacy and dignity.
11. The IU, which is used for temporary isolation of girls, consists of six rooms with a window in each door. There was inconsistent information provided regarding the

use of the IU. The Parent Handbook states "a therapeutic, time limited, physical intervention may be used in clinically justified situations should the girl present a clear danger to herself or others, but only after less restrictive alternatives have been attempted." It is not clear from the IU logbook and interviews with staff and children that less restrictive methods of discipline had been implemented prior to isolating a girl. It is also not clear that the girl presented a clear danger to herself or others prior to being placed in the IU. Girls were placed in the IU, as documented in the IU log, for "getting excessive zeroes in cottage;" "possible run talk;" "being disruptive in class;" "shaving head;" "self-abusive behavior;" and "escalating in TLC."

Girls are also required to remain in IU until they have satisfactorily completed a writing assignment that was given as a consequence.

12. Staff sometimes cover the window on the door to the seclusion rooms in the IU to prevent visual stimulation for the girl, thus not having direct visual contact with her at all times. Staff routinely check on the girls in the seclusion rooms at 15-minute intervals.

As related in an incident report, a girl tied shoelaces around her neck while in IU. Five-minute monitoring times were being conducted during that time. After the shoelaces were removed the child was continued on a five-minute monitoring schedule rather than maintaining visual contact with the child at all times.

13. Staff stated that if a girl attempts to AWOL, local law enforcement is notified. All available staff are also summoned to help search for the missing girl. Some staff and girls reported that a staff would physically return a girl to the facility after an AWOL attempt.

Issues Involving Providing Care and Supervision

California licensing standards require that care and supervision be provided as necessary to meet the client's needs.

14. As related in an incident report, a girl ingested hair spray. It was reported that staff do not always ensure that the girls return personal hygiene products such as hair spray and razor blades to staff after their use. This can constitute a serious problem when working with children who are self-abusive and suicidal.
15. The facility uses a "back up" plan when there are not sufficient staff in a cottage to manage the care and/or supervision of the girls and when a girl attempts to AWOL. When implementing this "back up" plan, staff are called from IU, TLC or other cottages to provide assistance, thus leaving another area short-staffed.

Issues Involving Plan of Operation

California licensing standards require the facility to maintain on file a current, written definitive plan of operation. The facility shall operate in accordance with the terms specified in the plan of operation.

16. The staffing ratio in the program statement is inconsistent with the actual staffing ratio on the living units. The program statement indicates a staffing pattern of 1:4 during the hours between 9:00 a.m. to 10:00 p.m.

17. Therapy sessions, group, and family, were not provided in accordance with the program statement.

Issues Involving Children's Records

California licensing standards require that a copy of the child's original needs and services plan be retained in the child's file; verification, signed by the child and his/her authorized representative(s), that they were offered the opportunity to participate in the plan development; and verification that the authorized representative(s) have approved the plan are also required.

18. Although the treatment plans were in the file, signed by the client and sent to the authorized representative, there was no written verification that these plans had been approved by the client's authorized representative.

Issues Involving Personnel Requirements

California licensing standards require 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. Additionally, California licensing standards require all personnel, including the licensee, administrator, staff, and volunteers, be in good health, and be physically, mentally, and occupationally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a test for tuberculosis performed by or under the supervision of a physician not more than 1 year prior to or 7 days after employment or licensure.

19. Some staff had no health screening or TB clearance on file.
20. Some staff did not have current first aid certificates on file.

Issue Involving Personnel Duties

California licensing standards require child care staff perform certain duties including the notation of the child's progress; identification of the possible need for professional services; and communication of such findings to professional staff.

21. Staff are not documenting daily progress notes to reflect the implementation of a girl's treatment plan/goals on a daily basis.

Issues Involving Bonding

California licensing standards require all facilities, other than governmental entities, who are entrusted to care for and control client's cash resources, have on file with the licensing agency a bond issued by a surety company to the State of California as principal.

22. No bond (in the state of Colorado) is provided for client money. Staff names are included on girls' savings accounts.

Issues Involving Buildings and Grounds

California licensing standards require that no more than two children shall sleep in a bedroom.

23. Three to four girls occupied some bedrooms.

Issues Involving Fixtures, Furniture, Equipment, and Supplies

California licensing standards require that each child be provided an individual bed maintained in good repair, equipped with good springs and a clean mattress. California licensing standards prohibit the use of bunk beds.

24. Bunk beds were provided in some of the bedrooms.

CERTIFICATION DECISION

Excelsior Youth Centers, 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.