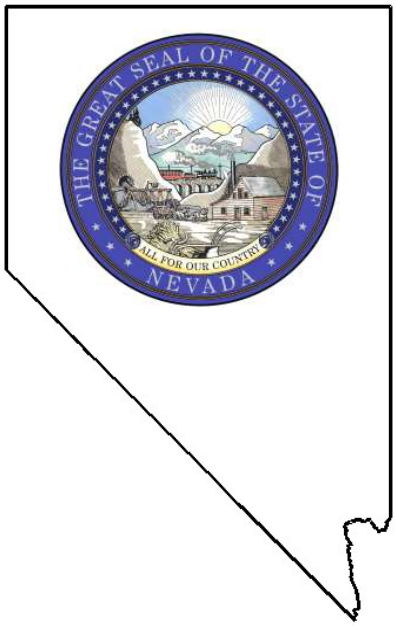
LA26-05

STATE OF NEVADA

Governmental and Private Facilities for Children – Inspections

December 2024



Legislative Auditor
Carson City, Nevada

Report Highlights

Highlights of Legislative Auditor report on the Governmental and Private Facilities for Children – Inspections issued on January 16, 2025.

Legislative Auditor Report # LA26-05.

Background

Nevada Revised Statutes (NRS) 218G.570 through 218G.595 authorize the Legislative Auditor to conduct audits of governmental facilities for children and inspections, reviews, and surveys of governmental and private facilities for children.

As of June 30, 2024, we had identified 102 governmental and private facilities that met the requirements of NRS 218G. In addition, 59 Nevada children were placed in 15 different out-of-state facilities across 6 different states as of June 30, 2024.

NRS 218G requires facilities to forward to the Legislative Auditor copies of any complaint filed by a child under their custody or by any other person on behalf of such a child concerning the health, safety, welfare, and civil and other rights of the child. During the fiscal year ended June 30, 2024, we received 2,039 complaints from 45 facilities in Nevada. Fifty-seven Nevada facilities reported that no complaints were filed during this time.

Purpose

Inspections were conducted pursuant to the provisions of NRS 218G.570 through 218G.595. This report includes the results of our inspections of 36 children's facilities. As inspections are not audits, these activities were not conducted in accordance with generally accepted government auditing standards.

The purpose of our inspections was to determine if the facilities adequately protected the health, safety, and welfare of the children in the facilities, and whether the facilities respected the civil and other rights of the children in their care.

Inspections included discussions with management, a review of personnel and child files, and observations. Child and employee interviews occurred as applicable. Discussions with facility management included the following topics: medication administration, treatment plan process, abuse and neglect reporting, complaint process, employee background checks and training, Prison Rape Elimination Act, and related policies and procedures as applicable. In addition, we judgmentally selected files to review which included: personnel files for evidence of employee background checks and required training; and child files for evidence of children's acknowledgment of their right to file a complaint, medication administered, and treatment plans as applicable.

Governmental and Private Facilities for Children – Inspections

December 2024

Summary

In 29 of 36 children's facilities inspected, we did not note significant issues that caused us to question the health, safety, welfare, or protection of the rights of the children. However, at seven facilities we identified multiple issues that caused us to question whether the facilities adequately protected the children in their care. Based on our observations, we contacted the facilities' licensing agencies to communicate our concerns.

Ignite Teen Treatment, LLC

We noted health, safety, welfare, and civil and other rights issues at the Lone Mesa and Romo facilities managed by Ignite Teen Treatment, LLC. Issues by type included:

- Health: incomplete, inaccurate, and missing medication records; and missing documentation of medical assistance after noting a child's injury.
- Safety: broken windows and glass shards; boarded-up windows preventing emergency egress; restraints resulting in injuries; items posed self-harm risks; unsecured tools, chemicals, and laundry supplies; missing documentation of mandatory reporting; and missing background check records.
- Welfare: uncontrolled children's behaviors; hidden nicotine vapes; nine children using one bathroom; untreated pools; an unsecured pool and hot tub; a child climbing on the roof; damage to rooms; and unsecured second-story windows and balcony.
- Civil and other rights: weak recordkeeping; missing denial of rights reporting documentation; the complaint process was not posted and management was unable to determine if any complaints were filed; incomplete personnel records; and policies and procedures were weak. (page 5)

Clark County Family Services Advanced Foster Care Homes

We noted health, safety, and civil and other rights issues at four Clark County Family Services advanced foster care homes. Issues by type included:

- Health: untimely treatment plans and unsecured records.
- Safety: unsecured ammunition; fire escape routes were not posted; missing fire drills; unsecured medications, alcohol, knives, chemicals, and laundry supplies; and inadequate and missing first-aid kits.
- Civil and other rights: child rights were not posted; incomplete personnel records; and policies and procedures were weak. (page 12)

Aurora Center for Healing

We noted health, safety, and civil and other rights issues at Aurora Center for Healing. Issues by type included:

- Health: incomplete, inaccurate, and missing medication records; incorrectly administered medications; and unavailable medications.
- Safety: lack of increased supervision after suicidal ideation; glass shards; items posed self-harm risks; and fire escape routes were not posted.
- Civil and other rights: the complaint process was not posted and management discovered complaints missing resolutions filed 18 months prior; incomplete personnel records; and policies and procedures were weak. (page 15)

Other General Concerns

During our inspections, we noted concerns at 18 facilities related to fire safety, 11 facilities related to denial of rights reporting, 7 facilities related to mandatory reporting requirements, and 6 facilities related to fingerprint submission documentation. The frequency of these concerns suggests more attention is needed to improve the care of children in select areas. (page 17)

Areas for Legislative Consideration

This report contains one new and two prior report recommendations the Legislature may want to consider related to enacting legislation. The new recommendation addresses the need for clarification of the complaint reporting process. The prior report recommendations aim to require health facilities to complete certain employee training, and initial and ongoing child abuse and neglect screening for employees. These recommendations would help certain facilities improve the health, safety, welfare, and protection of the rights of the children in their care. (page 21)

For more information about this or other Legislative Auditor reports go to: http://www.leg.state.nv.us/audit (775) 684-6815.

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This report contains the observations and conclusions from our inspections of governmental and private facilities for children in the State of Nevada as authorized by Nevada Revised Statutes 218G.570 through 218G.595. The purpose of these inspections is to determine if the facilities adequately protect the health, safety, and welfare of the children in the facilities, and whether the facilities respect the civil and other rights of the children in their care. This report contains recommendations the Legislature may want to consider to enhance certain processes that impact the well-being and care of children in the custody of the State.

We wish to express our appreciation to the management and staff of the facilities for their assistance during inspections. We also appreciate the cooperation of the licensing agencies at the State and in Clark and Washoe Counties during our process. We are available to discuss the report with any legislative committees, individual legislators, or other state and local officials.

Respectfully submitted,

Daniel L. Crossman, CPA
Legislative Auditor

December 20, 2024
Carson City, Nevada

STATE OF NEVADA
GOVERNMENTAL AND PRIVATE FACILITIES
FOR CHILDREN – INSPECTIONS
DECEMBER 2024

Table of Contents

BACKGROUND

Nevada Revised Statutes (NRS) authorize the Legislative Auditor to conduct audits of governmental facilities for children and inspections, reviews, and surveys of governmental and private facilities for children. Governmental facilities include any facility owned or operated by a governmental entity that has physical custody of children pursuant to the order of a court. Private facilities include any facility owned or operated by a person that has physical custody of children pursuant to the order of a court.

This report includes the results of our work as required by NRS 218G.570 through 218G.595. This report includes the results of inspections of 36 children's facilities. We have performed 313 inspections, reviews, and surveys of children's facilities since the implementation of Assembly Bill 629 of the 74th Session (2007), which authorized the Legislative Auditor to conduct this work.

Number and Types of Facilities

For the fiscal year ended June 30, 2024, we identified a total of 102 facilities that met the requirements of NRS 218G.

Most of these 102 facilities have licensing agencies which monitor the facilities. Monitoring activities may include document and policy reviews, on-site observations, or investigations. In many cases, if monitoring issues are identified, the licensing agencies may communicate or follow up with the facilities to ensure compliance with policies, regulations, or statutes.

Exhibit 1 on the following page lists the number of facilities monitored by each licensing agency.

Licensing Agencies Monitoring Nevada Children's Facilities Exhibit 1
Fiscal Year Ended June 30, 2024

Licensing Agency	Number of Facilities Monitored[1]
Aging and Disability Services Division	3
Bureau of Health Care Quality and Compliance	23
Child Care Licensing	1
Clark County Family Services	48
Division of Child and Family Services	6
Washoe County Human Services Agency	5
None[1]	16
Total	**102**

Source: Auditor prepared from information provided by facilities.

[1] Facilities that do not have a licensing agency include all 13 correction and detention facilities and 3 other facilities. Other Facilities are Help of Southern Nevada - Shannon West Homeless Youth Center, Humboldt County Juvenile Services Transitional Living Center, and Rite of Passage Pivot Point.

Exhibit 2 lists the types of facilities located within Nevada and the total capacity of each facility type for the fiscal year ended June 30, 2024.

Summary of Nevada Children's Facilities Exhibit 2
Fiscal Year Ended June 30, 2024

		Population		Staffing Levels
Facility Type	Number of Facilities	Maximum Capacity	Population	Direct Care Staff
Child Care Institutions	1	90	77	134
Correction and Detention Facilities	13	809	499	539
Facilities for Intermediate Care	2	24	10	59
Facilities for the Treatment of Abuse of Alcohol or Drugs	1	13	0	19
Foster Care Agencies	15	657	456	548
Foster Homes That Provide Specialized Care	44	177	124	125
Other Facilities	3	24	12	66
Psychiatric Hospitals	8	343	187	645
Psychiatric Residential Treatment Facilities	8	265	147	317
Skilled Nursing Facilities	4	119	93	306
Supported Living Arrangements	3	10	7	30
Totals - Facilities Statewide	**102**	**2,531**	**1,612**	**2,788**

Source: Auditor prepared from information provided by facilities.

Note: Appendix C on page 29 contains additional facility details.

In addition to children in facilities within the State of Nevada, an additional 59 children were located in out-of-state facilities as of June 30, 2024. Of the 59 children, 51 (86%) were placed during fiscal year 2024, and the other 8 (14%) were placed in prior years. Nevada children were placed in 15 different facilities across 6 different states.

In general, a child may be placed in an out-of-state facility if they have been denied placements in Nevada or if the State does not offer adequate services to meet their needs. Each placement of a child is unique with different criteria directing each placement including dual or specific diagnoses; highly sexualized or aggressive behaviors; and extreme medical, cognitive, or emotional needs that require specialized care for which in-state services are not available. Children are placed in out-of-state facilities by a district court or the State's Division of Child and Family Services.

Exhibit 3 lists the number of children and the entity that placed them in out-of-state facilities during the past 3 fiscal years.

New Placements of Nevada Children in Out-of-State Facilities During Fiscal Years 2022, 2023, and 2024 **Exhibit 3**

Placing Entity	2022	2023	2024
1st Judicial District Court (Carson City and Storey Counties)	1	2	1
2nd Judicial District Court (Washoe County)	8	4	0
3rd Judicial District Court (Lyon County)	1	1	0
4th Judicial District Court (Elko County)	1	3	0
5th Judicial District Court (Esmeralda and Nye Counties)	2	3	0
6th Judicial District Court (Humboldt County)	0	0	0
7th Judicial District Court (Eureka, Lincoln, and White Pine Counties)	1	1	0
8th Judicial District Court (Clark County)	10	9	2
9th Judicial District Court (Douglas County)	0	2	0
10th Judicial District Court (Churchill County)	1	0	0
11th Judicial District Court (Lander, Mineral, and Pershing Counties)	0	0	0
State of Nevada Division of Child and Family Services[(1)]	32	33	48
Totals	**57**	**58**	**51**

Source: Auditor prepared from information provided by the district courts and the State of Nevada.
(1) State of Nevada Division of Child and Family Services' placements include child welfare and juvenile justice children.
Note: Columns of exhibit reflect children newly placed in out-of-state facilities during each fiscal year.

Exhibit 4 shows the total number of children in out-of-state facilities as of June 30, 2024.

Total Number of Nevada Children in Out-of-State Facilities **Exhibit 4**

Placing Entity	As of June 30, 2024
1st Judicial District Court (Carson City and Storey Counties)	1
2nd Judicial District Court (Washoe County)	0
3rd Judicial District Court (Lyon County)	0
4th Judicial District Court (Elko County)	1
5th Judicial District Court (Esmeralda and Nye Counties)	0
6th Judicial District Court (Humboldt County)	0
7th Judicial District Court (Eureka, Lincoln, and White Pine Counties)	0
8th Judicial District Court (Clark County)	3
9th Judicial District Court (Douglas County)	0
10th Judicial District Court (Churchill County)	0
11th Judicial District Court (Lander, Mineral, and Pershing Counties)	0
State of Nevada Division of Child and Family Services[(1)]	54
Total	**59**

Source: Auditor prepared from information provided by the district courts and the State of Nevada.

(1) State of Nevada Division of Child and Family Services' placements include child welfare and juvenile justice children.

Note: Exhibit reflects children placed in out-of-state facilities over the course of multiple years through June 30, 2024.

SCOPE AND PURPOSE

Inspections were conducted pursuant to the provisions of NRS 218G.570 through 218G.595.

The purpose of our inspections was to determine if the facilities adequately protected the health, safety, and welfare of the children in the facilities and whether the facilities respected the civil and other rights of the children in their care. Our work was conducted from January 2024 through December 2024.

INSPECTIONS OF FACILITIES

In 29 of 36 facilities inspected, we did not note significant issues that caused us to question the health, safety, welfare, or protection of the rights of the children. However, at seven facilities, we identified multiple issues that caused us to question whether management and/or the licensing agency adequately protected the children in the facilities' care. These facilities included two Ignite Teen Treatment, LLC facilities (Lone Mesa and Romo), Aurora Center for Healing, and four Clark County Family Services Advanced Foster Care Homes. Based on our

observations, we contacted the licensing agencies for all seven facilities and discussed our concerns. Information regarding our inspections and significant issues noted at the seven facilities are detailed below. Appendix B on page 28 of this report includes all facilities inspected, the facility types, and the dates of our work.

Ignite Teen Treatment, LLC

Facility Type:	Psychiatric Residential Treatment Facility
Licensed By:	Bureau of Health Care Quality and Compliance
Location:	Las Vegas

The Bureau of Health Care Quality and Compliance licenses and monitors psychiatric residential treatment facilities. Monitoring can include annual licensing renewals, periodic on-site surveys, or complaint investigations. If facilities are not in compliance with policies, regulations, or statutes, the Bureau of Health Care Quality and Compliance will issue statements of deficiencies and review the related plans of corrections. Depending on the severity of the issues found, they may also issue bans on admissions, issue monetary sanctions, or revoke the facilities' licenses.

We inspected the Lone Mesa and Romo facilities managed by Ignite Teen Treatment, LLC in September 2024. These were our first visits to the facilities. While the facilities are licensed separately, they share the same management company and policies. We identified many of the same issues at both facilities.

During our inspections of the Lone Mesa and Romo facilities managed by Ignite Teen Treatment, LLC, we determined the care and living conditions did not meet certain minimum standards established in NRS 432B, 433, 449, and 449A; and outlined in NAC 449, which prompted us to question whether the facilities adequately protected the children in their care. The Bureau of Health Care Quality and Compliance completed nine complaint investigations of these facilities in 2024 prior to our inspections, also noting several issues.

Some of the significant issues we observed and noted at the facilities included:

Health

- Medication records were incomplete, inaccurate, and required documentation was missing including: Person Legally Responsible (PLR) consent documents for psychotropic medication, physician's orders, and medication administration records. Medications were frequently administered outside of their prescribed timeframes. Management was generally unaware of the statutorily required PLR consent needed prior to administering psychotropic medication.

- A child was injured as a result of a restraint and documents in the child's file indicated the child may have been in need of medical assistance. However, documentation was missing to support the child obtained medical assistance. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

Safety

- At one facility, broken windows with glass shards were observed, and glass shards were found on a child's bed. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- At one facility, windows were boarded up preventing emergency egress. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- Management initially denied employees implemented restraints in the facilities, citing third-party individuals hired as security to implement restraints. All three children interviewed confirmed employees implemented restraints. All three employees interviewed described implemented restraints. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- All three children interviewed reported a child being hospitalized as a result of an employee physically harming the child during a

restraint incident. An employee interviewed had concerns for the same restraint incident. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- At one facility, exposed electrical wiring and sprinkler lines, hanging wires and cords, and unsecured sharp items and tools, which could be used for self-harm, were observed. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- Chemicals, laundry supplies, and other objects that could be used for self-harm were unsecured.

- At one facility, the kitchen was in the process of being remodeled, and debris and hazards were observed which were in areas accessible to children.

- Two of four child files reviewed did not contain evidence that abuse disclosures were reported to the appropriate authorities. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- Two of four child files reviewed were missing documentation that children were reassessed for safety after expressing suicidal ideation. One of the two child files contained evidence a child expressed suicidal ideation in a separate incident, but was not reassessed for safety until the following day.

- Three of six employee files reviewed did not contain evidence of background check clearance after the employees were fingerprinted. Another employee file reviewed did not contain evidence the employee was fingerprinted within 10 days of hire. The Bureau of Health Care Quality and Compliance substantiated similar issues in complaint investigations.

Welfare

- In general, employees were unable to control the behaviors of the children during the inspection at one facility, resulting in three children running away, a child climbing on the roof, a child

breaking a window, and a child breaking the door to a secure storage room with laundry supplies. Two of three employees interviewed expressed a desire for more experienced employees, better training, or additional structure for the children.

- A child described that employees do not intervene when children fight. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- At one facility, three nicotine vapes were located in a child's belongings. One of three children who ran away during our inspection brought back a nicotine vape and hid it in the front yard.

- At one facility, a bathroom was closed for repair, and nine children were using one bathroom. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- At both facilities, the pools needed maintenance and contained untreated water. At one facility, the pool and a hot tub were unsecured due to a broken gate. Two of three children interviewed reported accessing the pool through the broken gate. A child reported some children access this area without permission. An employee reported that due to a broken gate, children were frequently redirected from accessing the pool area. The Bureau of Health Care Quality and Compliance substantiated similar issues in complaint investigations.

- At one facility, two of three children interviewed reported that a child likes to climb on the roof which is accessible through the broken gate. Upon review of the child's file, the child has a history of suicidal ideation. An employee confirmed children access the roof, disclosing a prior event of a child threatening to jump off the roof. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation noting employees were aware children were using the hot tub to access the roof.

- At one facility, there was graffiti on walls and furniture, holes in walls, and bedrooms were missing doors due to children

damaging them. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- At one facility, a second-story balcony and windows in children's rooms were unsecured. Management reported alarms installed on the balcony and windows do not always work and a non-functioning alarm was observed. An incident report documented a child attempted to climb out the second-story balcony and was prevented from climbing out onto the balcony by other children.

Civil and Other Rights

- Recordkeeping practices at the facilities were weak. Management failed to provide all documents we requested in accordance with NRS 218G.585 despite multiple requests and notification to management that they were in non-compliance with statutes. Some of these documents should have been readily available to management such as medication administration records, incident reports, and complaints. In addition, management incorrectly reported child census and employee roster information to us.

- Management did not forward incidents of restraints as Denial of Rights to the Commission on Behavioral Health. Management was unaware of the statutory requirement to do so.

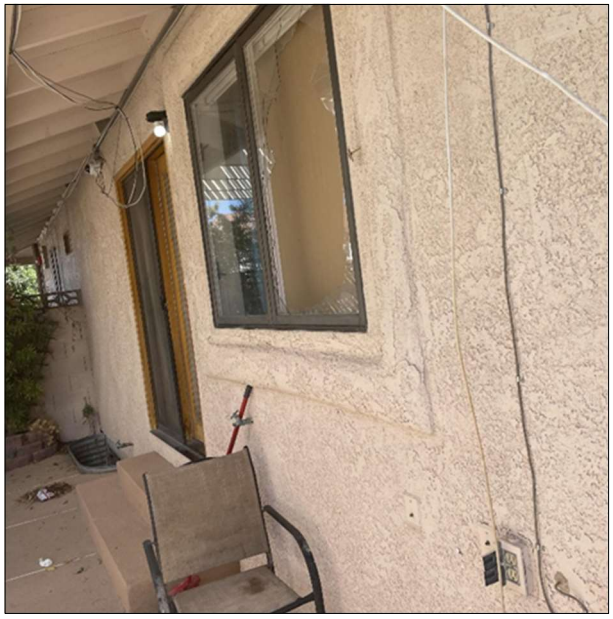
- Management was unable to locate blank complaint forms for children to use. A child described not being aware of the complaint process. Another child reported being denied a complaint form when asking to write one. All three children interviewed reported not receiving responses to complaints. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- Training records were missing and incomplete for all six employee files reviewed. The Bureau of Health Care Quality and Compliance substantiated similar issues in complaint investigations.

- Policies and procedures were missing, weak, or not consistent with management's understanding. Additionally, policies were not consistent with implementation of important practices. For example, the facilities have a seclusion and restraint policy and employees implement restraints, despite management initially denying use of seclusion and restraints. Management was generally unaware if policies addressed procedures.

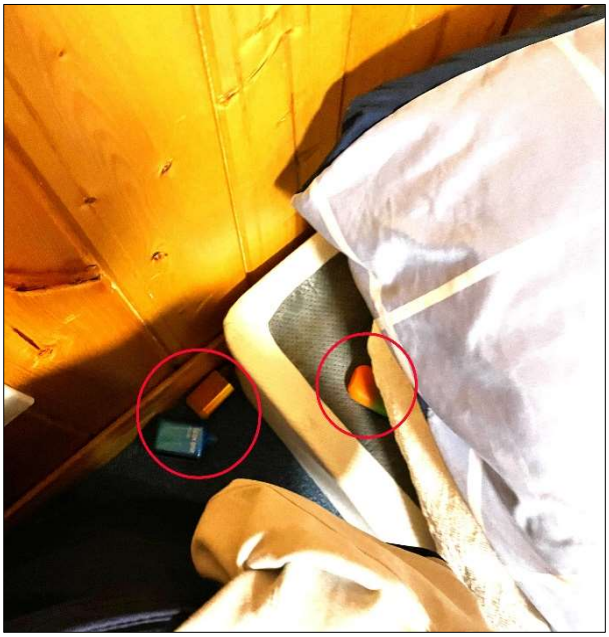
The following pictures are examples of the living conditions at the facilities:

Pool with untreated water accessible to children due to a broken gate.

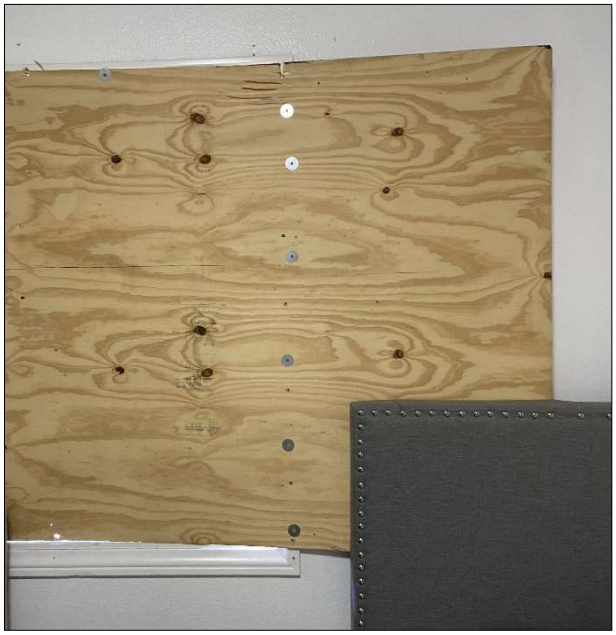


A shattered window and glass shards accessible to children due to a broken gate. Cords are hanging, posing self-harm risks.

Items that could be used for self-harm accessible to children due to construction.



Nicotine vapes found in a child's bed.



Boarded up windows preventing egress in an emergency.

Post-Inspection Information

Following our visit to the facilities in September 2024, we contacted the Bureau of Health Care Quality and Compliance and discussed our concerns.

- The Bureau of Health Care Quality and Compliance completed a complaint investigation at Ignite Teen Treatment, LLC Romo 2 days after our inspections, and identified several deficiencies.

- The Bureau of Health Care Quality and Compliance issued a ban on admissions for the Ignite Teen Treatment, LLC Romo facility on September 26, 2024, due to a deficiency documented during their investigation. The facility submitted a plan of correction to the Bureau of Health Care Quality and Compliance, and the ban on admissions was lifted October 10, 2024.

- As of November 2024, the Bureau of Health Care Quality and Compliance has issued approximately $94,000 in monetary sanctions on Ignite Teen Treatment, LLC for identified deficiencies at the facilities.

Additionally, facility management indicated there were staffing changes in key positions since our inspection.

Clark County Family Services Advanced Foster Care Homes

Facility Type:	Foster Home That Provides Specialized Care
Licensed By:	Clark County Family Services
Location:	Las Vegas

The Advanced Foster Care Program is operated by Clark County Family Services to create and maintain foster homes that provide specialized care for children with severe emotional disturbances. The program is intended to improve emotional, behavioral, and permanency outcomes for children in State custody.

As of June 30, 2024, Clark County Family Services licensed and monitored 38 advanced foster care homes. Monitoring can include in-home coaching, annual safety assessments, biennial licensing renewal inspections, or investigations. If homes are not in compliance with policies, regulations, or statutes, Clark County Family Services may communicate concerns verbally, implement written corrective action

plans, or revoke the homes' licenses. These actions may vary depending on the severity of the issues found.

We inspected Homes 30, 32, 34, and 40 in March 2024. This was our first time visiting Clark County Family Services advanced foster care homes. During our inspections of the four homes, we determined the care and living conditions did not meet certain minimum standards established in NRS 424, 432, and 432B; and outlined in NAC 424, which prompted us to question whether the licensing agency ensured the homes adequately protected the children in their care.

Some of the significant issues we observed and noted at the homes included:

Health

- Two of four child files reviewed contained untimely updated treatment plans.

- In all four homes, foster parents were generally unaware of statutorily required medication administration practices including PLR consent needed prior to administering psychotropic medication. While no homes had children prescribed psychotropic medication, foster parents should be trained and knowledgeable of required medication administration practices as children may be prescribed psychotropic medication at any time.

- In two of four homes, confidential child records were unsecured.

Safety

- In one home, the foster parent was unable to locate two firearms to verify they were secured. Additionally, ammunition was unsecured.

- In two of four homes, medications were unsecured. In one home, alcohol, knives, chemicals, and laundry supplies were unsecured.

- In three of four homes, fire escape routes were not posted. In two of four homes, documentation of monthly fire drills was missing. In one home, a fire extinguisher was expired.

- In three of four homes, first-aid kit supplies were missing or inadequate.

Civil and Other Rights

- In three of four homes, foster parents reported educating children regarding the complaint process despite being generally unaware of the full complaint process. In all four homes, child rights were not posted and there was no evidence children were made aware of their right to file a complaint. In all four homes, the complaint process was not posted. In one home, a complaint box was inaccessible.

- Training records were missing and incomplete for all four foster parent files reviewed.

- Policies and procedures were missing, weak, or not consistent with the licensing agency or foster parents' understanding. Additionally, policies were not consistent with implementation of important practices. For example, there were no policies for treatment plans or restraints. Furthermore, foster parents were generally unaware of Clark County Family Services' existing policies and procedures.

The following picture is an example of the living conditions at one of the homes:

Unsecured alcohol accessible to children in a home.

Post-Inspection Information

Following the inspections of the homes in March 2024, we contacted Clark County Family Services and discussed our concerns. Clark County Family Services reported they visited all four homes and addressed immediate safety concerns. Clark County Family Services reported they are developing policies and procedures for treatment plans and are developing a training program to ensure foster parents receive statutorily required trainings, which includes restraint training.

Aurora Center for Healing

Facility Type:	Psychiatric Residential Treatment Facility
Licensed By:	Bureau of Health Care Quality and Compliance
Location:	Hawthorne

The Bureau of Health Care Quality and Compliance licenses and monitors psychiatric residential treatment facilities. Monitoring can include annual licensing renewals, periodic on-site surveys, or complaint investigations. If facilities are not in compliance with policies, regulations, or statutes, the Bureau of Health Care Quality and Compliance will issue statements of deficiencies and review the related plans of corrections. Depending on the severity of the issues found, they may also issue bans on admissions, issue monetary sanctions, or revoke the facilities' licenses.

We inspected Aurora Center for Healing in May 2024. This was our second visit to the facility in the last 5 years. During our inspection of the facility, we determined the care and living conditions did not meet certain minimum standards established in NRS 432B, 433, 449, and 449A; and outlined in NAC 449, which prompted us to question whether the facility adequately protected the children in its care. The Bureau of Health Care Quality and Compliance completed four complaint investigations between our prior inspection in 2023 and our visit in May 2024, also noting several issues.

Some of the significant issues we observed and noted at the facility included:

Health

- Medication counts reflected missing medication. Medication records were incomplete, inaccurate, and required documentation was missing including: PLR consent documents

for psychotropic medication, physician's orders, and medication administration records. We noted the same concerns in our 2023 inspection. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- A child was administered a medication not prescribed to them and also administered a wrong dose of a medication by an employee. In addition, another instance of incorrect medication administration came to our attention when we reviewed an employee file. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- One of three child files contained evidence medications were not available at the facility for several days despite being prescribed to the child. Only some missed doses listed explanations, such as the medications being out of stock or pending refill, while other missed doses had no explanations. The Bureau of Health Care Quality and Compliance noted similar concerns in a complaint investigation.

Safety

- In one of three child files reviewed, it was documented the child expressed suicidal ideation and the file did not contain evidence of increased supervision. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- Glass shards and other sharp objects that could be used for self-harm were observed. Children have used sharp objects for self-harm, and facility policy indicates sharp objects are prohibited. The Bureau of Health Care Quality and Compliance substantiated similar issues in a complaint investigation.

- In three of four dorm rooms, fire escape routes were not posted.

Civil and Other Rights

- All three child files reviewed did not contain evidence children were made aware of their right to file a complaint. We noted the same concerns in our 2023 inspection. Over 150 complaints

were discovered by facility management in a former employee's file cabinet. Some complaints were missing resolutions and were filed over 18 months prior to their discovery.

- Training records were missing and incomplete for two of three employee files reviewed. We noted the same concerns in our 2023 inspection.

- Policies and procedures were weak or not consistent with management's understanding. Additionally, policies were not consistent with implementation of important practices. For example, the background check policy allows for employees to have criminal convictions of certain crimes prohibited by statutes.

Post-Inspection Information

Following our visit to the facility in May 2024, we contacted the Bureau of Health Care Quality and Compliance and discussed our concerns. The Bureau of Health Care Quality and Compliance completed a complaint investigation in June 2024, and identified several deficiencies. A plan of correction was submitted to the Bureau of Health Care Quality and Compliance by the facility. Facility management reported they addressed immediate safety concerns and revised certain policies and procedures after our inspection.

OTHER GENERAL CONCERNS

During inspections at some facilities that otherwise did not cause us to question whether the facilities adequately protected the health, safety, welfare, and civil and other rights of the children in their care, we identified trends with certain concerns we noted.

Some of the general concerns observed and noted at the facilities included:

Fire Safety

Based on inspections at some facilities, fire safety was not always ensured. At 18 of 36 (50%) facilities inspected, we noted concerns with fire safety. For example, at some facilities fire extinguishers were not inspected annually and fire drills were not conducted in accordance with statutorily defined timeframes. Fire escape routes were not posted in some facilities. Fire ladders were missing from some foster homes with multiple stories. During our inspections, a foster home was missing a

fire alarm, and another foster home had a fire alarm signaling a dead battery. NRS 449.0307 and NAC 424.135 require the applicable facilities to ensure children's safety in accordance with standards accepted by the State Fire Marshall. NRS and NAC 424 list other specific requirements based on facility type.

Denial of Rights Reporting

Based on inspections at some health facilities, denial of rights reporting requirements were not always followed. At 11 of 36 (31%) facilities inspected, we noted concerns with denial of rights reporting. Seclusion and restraint incidents are considered denial of rights and must be reported to the Division of Public and Behavioral Health's Commission on Behavioral Health in accordance with NRS 433.534. For example, health facilities reported they do not forward seclusion and restraint incidents to the Commission on Behavioral Health or were unaware of such requirements. Child files reviewed at some health facilities did not contain evidence that seclusion and restraint incidents were reported to the Commission on Behavioral Health as denial of rights incidents. Management at some health facilities reported they were behind in sending seclusion and restraint incidents to the Commission on Behavioral Health. The Bureau of Health Care Quality and Compliance requires the completion and submission of seclusion and restraint forms as soon as possible after the occurrence of such an event.

Mandatory Reporting Requirements

Based on inspections at some facilities, mandatory reporting requirements were not always followed. At 7 of 36 (19%) facilities inspected, we noted concerns with mandatory reporting requirements. For example, multiple child files reviewed did not contain evidence that abuse and neglect disclosures were reported to the appropriate authorities. While facilities have policies and procedures for mandatory reporting requirements, they were not always being followed. For example, we found that on some occasions, where the assessment of the child identified instances of abuse and neglect, the facility did not document the instances had been reported to the appropriate authorities or verified as already reported. NRS 432B.220 requires employees of children's facilities to make a report to a child welfare agency as soon as reasonably practicable, but not later than 24 hours after the person knows or has reasonable cause to believe the child has been abused or neglected.

Fingerprint Submission Documentation

Based on inspections at some health facilities, documentation of fingerprint submission was sometimes missing. At 6 of 36 (17%) facilities inspected, we noted concerns with fingerprint submission documentation. NRS 449.123 requires fingerprints of health facility employees to be submitted within 10 days of hire to the Central Repository for Nevada Records of Criminal History. While most facilities maintained documentation of background clearance for employees, employee files reviewed at several health facilities were missing documentation of the fingerprint submission date. Of these employee files, some background clearances were not received within 10 days of hire to verify if fingerprint submission documentation was submitted within statutory requirements. Therefore, we were unable to verify employees completed fingerprint submissions within 10 days of hire at some health facilities.

COMPLAINTS

NRS 218G.585 requires facilities to forward to the Legislative Auditor copies of any complaint filed by a child under their care or by any other person on behalf of such a child concerning the health, safety, welfare, and civil and other rights of the child. We received and reviewed 2,039 complaints from 45 facilities in Nevada during the fiscal year ended June 30, 2024. Of the 2,039 complaints received, 1,525 (75%) were received from children placed in correction and detention facilities and 418 (21%) were from psychiatric hospitals and psychiatric residential treatment facilities.

In general, the population of children at these facilities include children with high behavioral and mental health needs. Correction and detention facilities, psychiatric hospitals, and psychiatric residential treatment facilities make up 29 of the 102 (28%) private and governmental facilities for children. We expect to review more complaints from these types of facilities due to their populations and the number of facilities.

We follow up with facilities when complaint information appears egregious with respect to a child's health, safety, welfare, and civil and other rights, if information received is incomplete, and to ensure complaint information is submitted to our office on a regular basis, as required by statutes. In addition, we review complaint resolutions to ensure facility management resolved the issues identified. Complaint

information is used as part of our risk assessment process for selecting facilities to inspect, review, and survey.

Fifty-seven facilities reported receiving zero complaints filed by children or on behalf of children for the fiscal year.

Exhibit 5 shows the facilities that reported receiving zero complaints, based on the type of facility.

Summary of Facilities Reporting Zero Complaints **Exhibit 5**
Fiscal Year Ended June 30, 2024

Facility Type	Number of Facilities Reporting Zero Complaints	Number of Facilities	Percentage
Child Care Institutions	0	1	0%
Correction and Detention Facilities	1	13	8%
Facilities for Intermediate Care	1	2	50%
Facilities for the Treatment of Abuse of Alcohol or Drugs	1	1	100%
Foster Care Agencies	9	15	60%
Foster Homes That Provide Specialized Care	33	44	75%
Other Facilities	1	3	33%
Psychiatric Hospitals	1	8	13%
Psychiatric Residential Treatment Facilities	3	8	38%
Skilled Nursing Facilities	4	4	100%
Supported Living Arrangements	3	3	100%
Totals	**57**	**102**	

Source: Auditor prepared from information provided by facilities.

Some of the reasons facilities report no complaints were filed include: the type of facility, the ages and development of the children, and the children's length of stay.

Based on inspections and discussions with management at some facilities, the complaint process is not well understood by management nor clearly communicated to the children. For example, some facilities resolve verbal complaints informally instead of documenting the issue as a formal complaint, resulting in a lack of documentation. During fiscal year 2024, one facility discovered over 150 complaints in a former employee's filing cabinet, and two facilities were unable to determine if any complaints were filed during the fiscal year. The complaint process is essential to ensure a child's health, safety, welfare, and civil and other rights are adequately protected; and complaint reporting is statutorily required for governmental and private facilities who have physical custody of children pursuant to the order of a court.

NRS 218G.585 does not specifically define the complaint reporting process and only requires the facilities to forward complaints to the Legislative Auditor. Collection, documentation, review, and resolution of complaints vary at each facility. In addition, facilities have different interpretations of what constitutes health, safety, welfare, and civil and other rights of a child. In July 2023, we communicated our expectations for complaint reporting to the facilities, including the need for reporting both complaints and their resolutions. We also informed facilities that abuse and neglect allegations made against a facility or its employees while a child is placed at a facility are considered complaints, as they pertain to the child's health, safety, welfare, and civil and other rights.

We also received and reviewed complaint information from Nevada children placed in out-of-state facilities. We follow up with out-of-state facilities when necessary, including complaint information that appears egregious with respect to a child's health, safety, welfare, and civil and other rights.

AREAS FOR LEGISLATIVE CONSIDERATION

Complaint Requirements Not Specifically Defined

NRS 218G.585 does not specifically define the complaint reporting process and only requires the facilities to forward complaints to the Legislative Auditor. Collection, documentation, review, and resolution of complaints vary at each facility. Facilities have different interpretations of what constitutes health, safety, welfare, and civil and other rights of a child. The complaint process is essential to ensure a child's health, safety, welfare, and civil and other rights are adequately protected; and complaint reporting is statutorily required for governmental and private facilities who have physical custody of children pursuant to the order of a court.

Recommendation

The Legislature may want to consider enacting legislation to further define the complaint reporting requirements for children's facilities that have physical custody of children pursuant to the order of a court.

The following recommendations were issued in a previous report but are being repeated here for the benefit of the reader:

Some Licensed Health Facilities' Employees Not Required to Have Certain Training Specific to Children

Statutes do not require most health facilities licensed by the Bureau of Health Care Quality and Compliance to ensure all employees who have direct contact with children are trained in certain areas specific to children's safety and welfare. In contrast, training requirements are defined in statutes for employees who have direct contact with children at child care institutions, correction and detention facilities, foster homes that provide specialized care, and state-operated psychiatric hospitals and psychiatric residential treatment facilities. In our *Governmental and Private Facilities for Children – Inspections, January 2024* report (LA24-13), we noted these training requirements were not listed in NRS or NAC.

Recommendation

The Legislature may want to consider enacting legislation to require all facilities the Bureau of Health Care Quality and Compliance licenses, which have physical custody of children pursuant to the order of a court, to train employees who have direct contact with children on the specific topics statutorily required for other children's facilities. These facilities include facilities for intermediate care, facilities for the treatment of abuse of alcohol or drugs, private psychiatric hospitals, private psychiatric residential treatment facilities, and skilled nursing facilities.

Certain Licensed Health Facilities Not Required to Screen Employees for Child Abuse and Neglect

Statutes do not require health facilities licensed by the Bureau of Health Care Quality and Compliance to screen employees having direct contact with children for substantiations of child abuse or neglect. However, statutes over health facilities prohibit employment of an individual who has a substantiated report of abuse or neglect made against them, but do not require a screening to make this assessment. Specifically, these facilities are not required to submit employees' names to the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child (Central Registry) prior to an employee's hire. The submission of a name to the Central Registry and a check of the results of this submission is called a child abuse and neglect screening (CANS).

In contrast, federal regulations and statutes governing child care institutions, correction and detention facilities, and foster homes that provide specialized care require a CANS check prior to an employee's hire or foster parent's licensure. In our *Governmental and Private Facilities for Children – Inspections January 2024* report (LA24-13), we noted these screening requirements were not listed in NRS or NAC.

In addition, only statutes governing child care institutions require periodic CANS checks of employees. This periodic screening process would help identify instances of substantiations of abuse or neglect during an employee's tenure, which would otherwise go unnoticed by facilities.

Recommendation

The Legislature may want to consider enacting legislation to require all facilities the Bureau of Health Care Quality and Compliance licenses, which have physical custody of children pursuant to the order of a court, to screen employees who have direct contact with children for substantiations of child abuse or neglect before hire. These facilities include facilities for intermediate care, facilities for the treatment of abuse of alcohol or drugs, psychiatric hospitals, psychiatric residential treatment facilities, and skilled nursing facilities.

Additionally, the Legislature may want to consider enacting legislation to require all children's facilities that have physical custody of children pursuant to the order of a court to screen employees periodically for substantiations of child abuse or neglect.

APPENDIX A

GLOSSARY

Aging and Disability Services Division	An agency within the Nevada Department of Health and Human Services that represents children with disabilities or special health care needs. The agency provides oversight of Supported Living Arrangements.
Bureau of Health Care Quality and Compliance	An agency within the Nevada Division of Public and Behavioral Health that licenses and regulates certain health facilities in Nevada, including facilities for intermediate care, facilities for the treatment of abuse of alcohol or drugs, psychiatric hospitals, psychiatric residential treatment facilities, and skilled nursing facilities.
Child Abuse and Neglect Screening (CANS)	A review of the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child, which is a database for the collection of information on child abuse and neglect.
Children	Persons under the age of 18, including infants and adolescents.
Child Care Institution	Provides care and shelter during the day and night and provides developmental guidance to 16 or more children who do not routinely return to the homes of their parents or guardians.
Child Care Licensing	An agency that ensures the health, safety, and well-being of children in licensed child care institutions by monitoring facility compliance with state laws and regulations, offering training, and providing education. The agency was previously within the Division of Public and Behavioral Health, but as of July 1, 2024, is within the Division of Welfare and Supportive Services.
Child Welfare Agency	In a county whose population is less than 100,000, the local office of the State's Division of Child and Family Services or, in a county whose population is 100,000 or more, the agency of the county which provides or arranges for necessary child welfare services.

Civil and Other Rights — This relates to a child's civil rights, as well as their rights as a human being. It includes protection from discrimination and harassment; the right to adequate food, shelter, clothing, and hygiene products; and the right to file a complaint.

Clark County Family Services — Child welfare agency which provides child welfare services in Clark County.

Commission on Behavioral Health — A legislatively created body within the Division of Public and Behavioral Health designed to provide policy guidance and oversight of Nevada's public system of integrated care and treatment of children with mental health, substance abuse, and developmental disabilities.

Complaint / Grievance — A documented circumstance concerning the health, safety, welfare, and civil and other rights of a child. The complaint is filed by any child or other person on behalf of a child who is under the care of a governmental or private facility for children.

Consent — Authorization for the administration of psychotropic medication given by the person legally responsible for the psychiatric care of a child. Consent must include specific items as listed in NRS 432B.4687, such as the name of the child; the name of the person legally responsible; the name, purpose, and expected time frame for improvement for each medication; the dosage, times, and number of units at each administration of the medication; the duration of the course of treatment; and a description of the risks, side effects, interactions, and complications of the medication.

Correction Facility — A secure facility for children that have been adjudicated delinquent for an offense. Placement is generally long-term and a broad array of services are provided to promote successful transition of children back to their communities.

Denial of Rights — The denial of rights of a child to protect the child's health and safety or to protect the health and safety of others, or both. Any denial of rights by any health facility must be reported to the Commission on Behavioral Health as soon as possible after the occurrence of such an event. Denial of rights includes seclusion and restraint incidents.

Detention Facility	A secure facility that has temporary custody of children who are subject to the jurisdiction of a court and require a restricted environment for their own or the community's protection while pending legal action. Services are provided to support the child's physical, emotional, and social development.
Division of Child and Family Services	A child welfare agency within the Nevada Department of Health and Human Services which provides child welfare services to all rural counties in Nevada. Additionally, the Division of Child and Family Services monitors the performance of Clark County Family Services and Washoe County Human Services Agency through data collection, evaluation of services, and may require corrective action if these child welfare agencies are not in substantial compliance with any State policies, regulations, or statutes related to child welfare services.
Facility for the Treatment of Abuse of Alcohol or Drugs	Any public or private establishment which provides residential treatment, including mental and physical restoration, of children with alcohol or other substance use disorders.
Facility for Intermediate Care	A facility that provides 24-hour personal and medical supervision for children who do not have an illness, disease, injury, or other condition that would require the degree of care and treatment from a hospital or skilled nursing facility.
Foster Care Agency	A business entity that recruits and enters into contracts with foster homes to assist child welfare agencies and juvenile courts in the placement of children in foster homes. Foster care agencies may operate multiple family foster homes, including foster homes that provide specialized care and group foster homes. Foster care agencies train foster parents and develop policies and procedures for the homes. Foster parents are responsible for providing safe, nurturing, and supportive environments where children can continue daily activities that promote normalcy.
Foster Home That Provides Specialized Care	Provides full-time care and services for one to six children who require special care for physical, mental, or emotional issues.

Health	Anything related to a child's physical health, including medical care and medication administration.
Person Legally Responsible (PLR)	A person legally responsible for the psychiatric care of a child, which could be the child's parent(s), legal guardian, or other individual appointed by a court.
Psychiatric Hospital	A hospital for the diagnosis, care, and treatment of mental health which provides 24-hour care to children. Includes acute psychiatric (short-term) and non-acute psychiatric programs.
Psychiatric Residential Treatment Facility (PRTF)	A facility, other than a hospital, that provides a range of psychiatric services to treat residents under the age of 21 years on an inpatient basis under the direction of a physician.
Psychotropic Medication	A prescribed medication used to alter a child's thought process, mood, or behavior.
Safety	Anything related to the physical safety of a child. This includes physical security, environment, and adequate staffing.
Skilled Nursing Facility	A facility which provides continuous skilled nursing and related care prescribed by a physician to children who are not in an acute episode of illness and whose primary needs are the availability of continuous care.
Supported Living Arrangement	A home with 24-hour residential supports for children who are in need of maximum support services. This service is provided through agencies that are contracted with the regional centers.
Washoe County Human Services Agency	Child welfare agency which provides child welfare services in Washoe County.
Welfare	Anything related to the general or emotional well-being of a child. This includes education, punishment, treatment of children, and environment issues that are not classified as safety issues.

APPENDIX B

INSPECTIONS OF NEVADA CHILDREN'S FACILITIES – 2024

Facility Name	Facility Type	Date of Work
Austin's House	Foster Home That Provides Specialized Care	January 31, 2024
Eagle Valley Children's Home	Facility for Intermediate Care	February 8, 2024
Murphy Bernardini Juvenile Justice Center	Detention Facility	February 13, 2024
Rite of Passage Nevada Qualifying Houses	Foster Care Agency	February 29, 2024
Spring Mountain Treatment Center	Psychiatric Hospital	March 11, 2024
Home 34[2]	Foster Home That Provides Specialized Care	March 12, 2024
Home 30[2]	Foster Home That Provides Specialized Care	March 12, 2024
New Vista Ranch	Foster Care Agency	March 13, 2024
New Vista - Supported Living Arrangement	Supported Living Arrangement	March 13, 2024
Desert Winds Hospital - Acute	Psychiatric Hospital	March 14, 2024
Desert Winds Hospital - PRTF	Psychiatric Residential Treatment Facility	March 14, 2024
Rite of Passage Pivot Point	Other Facility	March 15, 2024
Bamboo Sunrise, LLC	Foster Care Agency	March 18, 2024
Bamboo Sunrise, LLC - PRTF	Psychiatric Residential Treatment Facility	March 18, 2024
NeuroRestorative	Skilled Nursing Facility	March 19, 2024
NeuroRestorative4kids - Buffalo	Skilled Nursing Facility	March 19, 2024
Home 32[2]	Foster Home That Provides Specialized Care	March 20, 2024
Home 40[2]	Foster Home That Provides Specialized Care	March 20, 2024
Dungarvin Nevada, LLC	Supported Living Arrangement	March 21, 2024
Aurora Center for Healing[1]	Psychiatric Residential Treatment Facility	May 21, 2024
3 Angels Care, LLC	Foster Care Agency	May 29, 2024
Mt. Olive Care, LLC	Foster Care Agency	May 30, 2024
Koinonia Family Services	Foster Care Agency	June 12, 2024
P6 Family Services, LLC	Foster Care Agency	July 2, 2024
NeuroRestorative - Reno	Skilled Nursing Facility	July 9, 2024
Leighton Hall	Detention Facility	July 17, 2024
Humboldt County Juvenile Services Transitional Living Center	Other Facility	July 17, 2024
Willow Springs Center[1]	Psychiatric Hospital	August 13, 2024
Reno Behavioral Healthcare Hospital, LLC - Acute[1]	Psychiatric Hospital	September 5, 2024
Reno Behavioral Healthcare Hospital, LLC - PRTF[1]	Psychiatric Residential Treatment Facility	September 5, 2024
Ignite Teen Treatment, LLC Lone Mesa	Psychiatric Residential Treatment Facility	September 16, 2024
Ignite Teen Treatment, LLC Romo	Psychiatric Residential Treatment Facility	September 16, 2024
Spring Mountain Youth Camp	Correction Facility	September 17, 2024
REM Nevada	Supported Living Arrangement	September 18, 2024
Silver State Pediatric Behavioral Services, LLC[1]	Facility for Intermediate Care	September 18, 2024
Seven Hills Hospital, LLC[1]	Psychiatric Hospital	September 19, 2024

Source: Auditor prepared from inspections completed.

[1] We conducted an inspection of these facilities in 2023 as well. See LA24-13, page 32.

[2] For anonymity purposes we use numerical designations to identify specific homes. The numerical designations are updated each year as new homes are added or no longer operating as foster homes that provide specialized care. Due to this, the numerical designations may not match from year to year.

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024

Child Care Institution	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Child Haven	Las Vegas	Child Care Licensing	90	77	134
Totals - 1 Child Care Institution			**90**	**77**	**134**

Correction and Detention Facilities	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Caliente Youth Center	Caliente	None	140	56	51
China Spring Youth Camp	Gardnerville	None	59	22	31
Clark County Juvenile Detention Center	Las Vegas	None	192	183	182
Douglas County Juvenile Detention Center	Stateline	None	16	3	114
Jan Evans Juvenile Justice Center	Reno	None	108	27	46
Leighton Hall	Winnemucca	None	6	0	18
Murphy Bernardini Juvenile Justice Center	Carson City	None	18	12	18
Nevada Youth Training Center	Elko	None	64	42	46
Northeastern Nevada Juvenile Detention Center	Elko	None	24	11	11
Spring Mountain Youth Camp	Las Vegas	None	100	80	48
Summit View Youth Center	Las Vegas	None	48	45	38
Teurman Hall	Fallon	None	16	6	15
Western Nevada Regional Youth Center	Silver Springs	None	18	12	21
Totals - 13 Correction and Detention Facilities			**809**	**499**	**539**

Facilities for Intermediate Care	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Eagle Valley Children's Home	Carson City	Bureau of Health Care Quality and Compliance	18	4	32
Silver State Pediatric Behavioral Services, LLC	Las Vegas	Bureau of Health Care Quality and Compliance	6	6	27
Totals - 2 Facilities for Intermediate Care			**24**	**10**	**59**

Facility for the Treatment of Abuse of Alcohol or Drugs	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Vitality Unlimited - ACTIONS	Elko	Bureau of Health Care Quality and Compliance	13	0	19
Totals - 1 Facility for the Treatment of Abuse of Alcohol or Drugs			**13**	**0**	**19**

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024 (continued)

Foster Care Agencies	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
180 Community Wellness Centers, LLC	North Las Vegas	Clark County Family Services	14	13	12
3 Angels Care, LLC	Reno	Washoe County Human Services Agency	18	17	15
A Greater Hope	Henderson	Clark County Family Services	0	0	3
Apple Grove Foster Care Agency	Las Vegas	Clark County Family Services	37	33	22
Bamboo Sunrise, LLC	Henderson	Clark County Family Services	84	66	90
Eagle Quest	Las Vegas	Clark County Family Services	209	168	183
Koinonia Family Services	Reno	Washoe County Human Services Agency	20	17	24
Mt. Olive Care, LLC	Reno	Washoe County Human Services Agency	10	5	3
New Vista Ranch	Las Vegas	Clark County Family Services	4	2	22
Olive Crest	Las Vegas	Clark County Family Services	23	19	46
P6 Family Services, LLC	Sun Valley	Washoe County Human Services Agency	12	11	5
Rite of Passage Nevada Qualifying Houses	Minden	Division of Child and Family Services	12	2	8
Shining Star Community Services	Las Vegas	Clark County Family Services	3	3	6
Specialized Alternatives for Family and Youth of Nevada, Inc	Las Vegas	Clark County Family Services	136	86	84
St. Jude Ranch for Children	Boulder City	Clark County Family Services	75	14	25
Totals - 15 Foster Care Agencies			**657**	**456**	**548**

Foster Homes That Provide Specialized Care[2]	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Austin's House	Carson City	Division of Child and Family Services	10	8	10
Home 1	Las Vegas	Clark County Family Services	5	3	2
Home 2	North Las Vegas	Clark County Family Services	4	4	2
Home 3	Pahrump	Division of Child and Family Services	2	1	2
Home 7	Henderson	Clark County Family Services	1	1	2
Home 9	Las Vegas	Clark County Family Services	4	3	2
Home 10	Las Vegas	Clark County Family Services	2	0	1
Home 12	North Las Vegas	Clark County Family Services	4	3	1
Home 14	North Las Vegas	Clark County Family Services	4	3	2
Home 15	North Las Vegas	Clark County Family Services	1	0	1
Home 16	Henderson	Clark County Family Services	5	5	2
Home 17	North Las Vegas	Clark County Family Services	3	1	2
Home 18	North Las Vegas	Clark County Family Services	2	0	1

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024 (continued)

Foster Homes That Provide Specialized Care[2] (continued)	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Home 19	Las Vegas	Clark County Family Services	5	1	2
Home 20	Henderson	Clark County Family Services	3	3	1
Home 21	Las Vegas	Clark County Family Services	2	1	1
Home 22	Henderson	Clark County Family Services	3	2	2
Home 23	Las Vegas	Clark County Family Services	4	4	1
Home 25	Las Vegas	Clark County Family Services	2	1	2
Home 26	Las Vegas	Clark County Family Services	3	0	2
Home 27	Logandale	Clark County Family Services	1	1	2
Home 28	Las Vegas	Clark County Family Services	6	4	2
Home 29	Las Vegas	Clark County Family Services	2	1	2
Home 30	Las Vegas	Clark County Family Services	6	6	2
Home 31	Fallon	Division of Child and Family Services	1	0	1
Home 32	Las Vegas	Clark County Family Services	3	3	1
Home 33	Las Vegas	Clark County Family Services	5	5	2
Home 34	North Las Vegas	Clark County Family Services	3	3	1
Home 35	Henderson	Clark County Family Services	1	1	2
Home 37	Pahrump	Division of Child and Family Services	6	3	1
Home 39	North Las Vegas	Clark County Family Services	3	2	2
Home 40	Las Vegas	Clark County Family Services	3	3	2
Home 42	Las Vegas	Clark County Family Services	2	2	2
Home 43	North Las Vegas	Clark County Family Services	4	3	1
Home 44	Las Vegas	Clark County Family Services	5	3	1
Home 45	Pahrump	Division of Child and Family Services	4	3	2
Home 47	North Las Vegas	Clark County Family Services	4	4	1
Home 49	Henderson	Clark County Family Services	4	2	2
Home 50	Las Vegas	Clark County Family Services	3	3	2
Home 51	Las Vegas	Clark County Family Services	1	3	2
Home 52	Las Vegas	Clark County Family Services	2	1	1
Home 53	Las Vegas	Clark County Family Services	3	0	1
Home 54	Henderson	Clark County Family Services	6	6	2
Kid's Kottages	Reno	Washoe County Human Services Agency	30	18	47
Totals - 44 Foster Homes That Provide Specialized Care			**177**	**124**	**125**

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024 (continued)

Other Facilities[1]	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
HELP of Southern Nevada - Shannon West Homeless Youth Center	Las Vegas	None	6	3	34
Humboldt County Juvenile Services Transitional Living Center	Winnemucca	None	6	2	18
Rite of Passage Pivot Point	Las Vegas	None	12	7	14
Totals - 3 Other Facilities			**24**	**12**	**66**

Psychiatric Hospitals	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Desert Parkway Behavioral Healthcare Hospital, LLC	Las Vegas	Bureau of Health Care Quality and Compliance	21	16	81
Desert Willow Treatment Center	Las Vegas	Bureau of Health Care Quality and Compliance	44	33	117
Desert Winds Hospital - Acute	Las Vegas	Bureau of Health Care Quality and Compliance	38	10	44
Reno Behavioral Healthcare Hospital, LLC - Acute	Reno	Bureau of Health Care Quality and Compliance	42	23	72
Seven Hills Hospital, LLC	Henderson	Bureau of Health Care Quality and Compliance	36	21	48
Southern Hills Hospital and Medical Center	Las Vegas	Bureau of Health Care Quality and Compliance	20	6	17
Spring Mountain Treatment Center	Las Vegas	Bureau of Health Care Quality and Compliance	26	13	161
Willow Springs Center	Reno	Bureau of Health Care Quality and Compliance	116	65	105
Totals - 8 Psychiatric Hospitals			**343**	**187**	**645**

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024 (continued)

Psychiatric Residential Treatment Facilities (PRTF)	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Aurora Center for Healing	Hawthorne	Bureau of Health Care Quality and Compliance	60	27	72
Bamboo Sunrise, LLC - PRTF	Las Vegas	Bureau of Health Care Quality and Compliance	12	4	11
Ignite Teen Treatment, LLC Lone Mesa	Las Vegas	Bureau of Health Care Quality and Compliance	10	10	19
Ignite Teen Treatment, LLC Romo	Las Vegas	Bureau of Health Care Quality and Compliance	10	9	13
PRTF North	Sparks	Bureau of Health Care Quality and Compliance	16	8	23
Reno Behavioral Healthcare Hospital, LLC - PRTF	Reno	Bureau of Health Care Quality and Compliance	21	21	22
Rite of Passage - Sierra Sage Treatment Center	Yerington	Bureau of Health Care Quality and Compliance	48	29	59
SunArch Academy	Las Vegas	Bureau of Health Care Quality and Compliance	88	39	98
Totals - 8 Psychiatric Residential Treatment Facilities (PRTF)			**265**	**147**	**317**

Skilled Nursing Facilities	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
NeuroRestorative	Las Vegas	Bureau of Health Care Quality and Compliance	35	34	88
NeuroRestorative - Reno	Reno	Bureau of Health Care Quality and Compliance	24	12	61
NeuroRestorative4kids - Buffalo	Las Vegas	Bureau of Health Care Quality and Compliance	24	23	72
Silver State Pediatric Skilled Nursing Facility	Las Vegas	Bureau of Health Care Quality and Compliance	36	24	85
Totals - 4 Skilled Nursing Facilities			**119**	**93**	**306**

Supported Living Arrangements	Background		Population		Staffing Levels[3]
	Location	Licensing Agency	Maximum Capacity	Population	Direct Care Staff
Dungarvin Nevada, LLC	Las Vegas	Aging and Disability Services Division	2	2	3
New Vista - Supported Living Arrangements	Las Vegas	Aging and Disability Services Division	4	2	19
REM Nevada	Las Vegas	Aging and Disability Services Division	4	3	8
Totals - 3 Supported Living Arrangements			**10**	**7**	**30**
Totals - 102 Facilities Statewide			**2,531**	**1,612**	**2,788**

APPENDIX C

NEVADA CHILDREN'S FACILITIES INFORMATION
FISCAL YEAR ENDED JUNE 30, 2024 (continued)

Facilities That Closed During Fiscal Year 2024 or No Longer Meet the Definition of a Facility Subject to Legislative Auditor Inspection in NRS 218G.535

Facility[2]	Location	Type of Facility
Call to Compassion	Reno	Foster Care Agency
Desert Winds Hospital - PRTF	Las Vegas	Psychiatric Residential Treatment Facility
Home 4	Henderson	Foster Home That Provides Specialized Care
Home 5	Las Vegas	Foster Home That Provides Specialized Care
Home 6	North Las Vegas	Foster Home That Provides Specialized Care
Home 8	Pahrump	Foster Home That Provides Specialized Care
Home 11	Las Vegas	Foster Home That Provides Specialized Care
Home 13	Pahrump	Foster Home That Provides Specialized Care
Home 24	Pahrump	Foster Home That Provides Specialized Care
Home 36	Las Vegas	Foster Home That Provides Specialized Care
Home 38	Henderson	Foster Home That Provides Specialized Care
Home 41	Las Vegas	Foster Home That Provides Specialized Care
Home 46	Ely	Foster Home That Provides Specialized Care
Home 48	Spring Creek	Foster Home That Provides Specialized Care
JC Family Services	Reno	Foster Care Agency
Nevada Homes for Youth	Las Vegas	Facility for the Treatment of Abuse of Alcohol or Drugs
PRTF Oasis	Las Vegas	Psychiatric Residential Treatment Facility
R House Community Treatment Home	Reno	Foster Home That Provides Specialized Care

Source: Auditor prepared from information provided by facilities.

[1] Other facility types provide a full range of therapeutic, educational, recreational, and support services. Residents are provided with opportunities to be progressively more involved in the community.

[2] For anonymity purposes we use numerical designations to identify specific homes. The numerical designations are updated each year as new homes are added or no longer operating as foster homes that provide specialized care. Due to this, the numerical designations may not match from year to year.

[3] Direct care staff includes both full-time and part-time staff.

APPENDIX D

METHODOLOGY

To identify facilities pursuant to the requirements of Nevada Revised Statutes (NRS) we reviewed children's placement information submitted monthly by certain state and local governments. We also reviewed stories in the news media regarding children's facilities and monitored national news regarding trends in children's facilities. Next, we contacted each facility identified to confirm it met the definitions included in NRS 218G.500 through 218G.535. For each facility confirmed, we obtained copies of complaints filed by a child or other persons on behalf of a child while in the care of a facility since July 1, 2023.

To establish criteria, we reviewed applicable state laws and state and federal regulations. We selected criteria that included issues related to the health, safety, welfare, and civil and other rights of children, as well as their treatment. Health criteria included items related to a child's physical health, such as medical care and medication administration. Safety criteria related to the physical safety of a child, such as the environment and staffing. Welfare criteria related to the general or emotional well-being of a child, such as education, punishment, treatment of children, and environment issues that are not classified as safety issues. Civil and other rights included rights as human beings. Treatment criteria related to the mental health of a child, not necessarily how children were treated on a daily basis. This includes access to counseling, treatment plans, and progress through the program.

We received, reviewed, and tracked complaints filed by each facility to determine whether each facility submitted complaints monthly pursuant to NRS 218G.580. The nature and extent of each complaint received and facility management's consistency with statutory reporting requirements are considered in our assessment of risk and selection of facilities to inspect, review, and survey.

Next, we selected a judgmental sample to perform inspections of children's facilities. Our selection was partially based on our assessment of risk, the last time we visited, the size, and the type of facility.

As inspections are not audits, they were not conducted in accordance with generally accepted government auditing standards, as outlined in *Government Auditing Standards* issued by the Comptroller General of the United States.

Inspections included discussions with management, a review of personnel and child files, and observations. Child and employee interviews occurred as applicable. Discussions with facility management included the following topics: medication administration, treatment plans, reporting of abuse or neglect, the complaint process, background checks and training, Prison Rape Elimination Act, and related policies and procedures as applicable. In addition, we judgmentally selected files to review which included: personnel files for evidence of background checks and required training; and child files for evidence of children's

acknowledgment of their right to file a complaint, medication administered, and treatment plans as applicable.

As part of the onsite visit, we physically observed all areas accessible to children. We also observed areas for secure storage of records, medications, tools, and chemicals. As part of our observations, we ensured proper provision of food, clothing, supplies, and recreation activities for children. Other observations included ensuring important information, such as child rights and fire escape routes, were posted and visible to children.

We analyzed policies and procedures specific to the areas discussed with management, which included ensuring policies were consistent with management's understanding, statutes, and best practices. For example, we analyzed medication administration policies and procedures to ensure they addressed: documenting medication administered, including medication refused by children; maintaining physician's orders and consent to administer psychotropic medication; and processes for identifying, addressing, and minimizing errors. Our analysis also included ensuring policies and procedures addressed: verifying and documenting medication at intake and discharge; reordering prescribed medication; securing medication; and verifying and documenting medication for destruction.

Our work was conducted from January 2024 through December 2024 pursuant to the provisions of NRS 218G.570 through 218G.595.

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