

Instructions: As required by Oregon Senate Bill 710, adopted during in the 2021 regular session, quarterly reports must be completed and submitted to the Children's Care Licensing Program (CCLP) regarding restraints and involuntary seclusions of children in care. Reports must also be posted on the Child Caring Agency's website, if applicable, and must be provided to any member of the public upon request.

Submit reports to cclp.licensing@dhsoha.state.or.us.

Agency Name	Youth Unlimited Inc
Site or Program Name	NA
Reporting time frame (indicate which	Q1 Jan, Feb, Mar
quarter in months and year).	
Total number of incidents involving	0
restraint.	
Total number of incidents involving	0
involuntary seclusion.	
The total number of incidents involving	0
restraint and seclusion that resulted in	
reportable injuries.	
Total number of involuntary seclusions	0
in a locked room.	
Total number of rooms available for	0
use for involuntary seclusion.	
Description of the dimensions and	0
design of the seclusion rooms.	
Total number of children in care placed	0
in restraint.	
Total number of children in care placed	0
in involuntary seclusion:	
Total number of children in care who	0
were placed in restraint or involuntary	
seclusion more than three times during	
the reporting period.	



A description of the steps the program	0
has taken to decrease the use of	
restraint and involuntary seclusion.	
Number of incidents in which an	0
individual who placed a child in care in	
a restraint or involuntary seclusion was	
not certified or trained in the use of	
the type of restraint or involuntary	
seclusion used, including individuals	
whose certification or training was	
expired at the time of the restraint or	
seclusion.	

Demographic characteristics of the children in care who the program placed in a restraint or involuntary seclusion, including race, ethnicity, gender, disability status, migrant status, English proficiency and status as economically disadvantaged, unless the demographic information would reveal personally identifiable information about an individual child in care. Indicate the number of children who experienced restraint or seclusion who match each of the criteria listed below:

Race/Ethnicity:	Total Number of Children
American Indian or Alaska Native	NA
Asian	
Black or African American	
Hispanic (any race)	
Native Hawaiian	
Other Pacific Islander	
White	
Other	
Unable to determine	

Gender:	Total Number of Children
Male	NA
Female	
Transgender	
Non-binary	



Disability Status:	Total Number of Children
Disabled	NA
Non Disabled	

Non-Disabled

Migrant Status:	Total Number of Children
Migrant	NA
Non-Migrant	

English Proficiency:	Total Number of Children
English is primary language	NA
English is not primary language	

Economic Status:	Total Number of Children
Economically Disadvantaged	NA
Not Economically Disadvantaged	