

CEDU - CDSS Records (Batch 13)

 slideshare.net/slideshow/cedu-cdss-records-batch-13/238831510

Oct 11, 2020•

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In 2017, I put in a California Public Records Act request to the Community Care Licensing Division of the California Department of Social Services seeking records about CEDU, a SoCal residential facility operating from the 1960s until 2005. My request was all-encompassing and going as far back as possible. CDSS released a total of 128 pages covering twelve years, 1993-2005. In 2019, I produced an investigative podcast about CEDU for NBCUniversal. The podcast team, hosted by the CBC's Josh Bloch, put in a very similar Public Records Act request as the one from 2017. This time, CDSS released 873 pages about CEDU. Apart from hundreds of additional pages, there were countless dissimilarities and omissions between the documents. CDSS acknowledged drastic differences, but would not provide a sufficient explanation for major discrepancies in reports I received in 2017 and the document dump sent to NBCUniversal in 2019. The files uploaded here are from our podcast team's 2019 Public Records Act request. I'm not sure who digitized them.



1 800 218 5122

King George School

2684 KING GEORGE FARM ROAD
SUTTON, VERMONT
05867

- [About King George School](#)
- [Academics](#)
- [Student Life](#)
- [Visual & Performing Arts](#)
- [Emotional Growth](#)
- [Alumni](#)
- [Admissions Information](#)

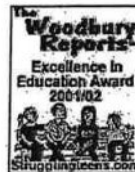


*A Bridge
to
Opportunity*

The King George School, in rural Vermont, is an innovative year-round coeducational boarding school for bright, articulate, and creative students in grades 9 through 12. The school promotes the development of students' academic, emotional, and artistic selves.

Read about **Summer Adventures 2002** – from tall ships, to Shakespeare, to trekking in Laos or Costa Rica, these are remarkable learning experiences to inspire, uplift, and engage.

information@kinggeorgeschool.com
2684 King George Farm Road
Sutton, Vermont 05867



CEDU EMOTIONAL GROWTH SCHOOLS AND PROGRAMS

Rebuilding Lives with Troubled Teens Since 1967

Home - Campuses - Philosophy - History - Admissions - Resources



Emotional Growth Schools and Programs

Click on a photo to open that school's or program's website.

Rocky Mountain Academy



Adventure.
Leadership.
Transformation.

RMA redirects leadership skills into positive and productive channels. We provide a life changing opportunity for youth with innate academic, social, and leadership skills whose chances are limited by behavioral or emotional struggles. The high school rebuilds integrity, purpose, and drive through an adventure-based college preparatory program rich in counseling, relationships, values, outdoor education, and personal introspection.

Rocky Mountain Academy students are 14 to 17 years old, typically more extroverted, social students acting out their emotional and behavioral issues.

At a Glance

- emotional growth boarding high school
- strong outdoor and wilderness program
- project-based, college preparatory education

Boulder Creek Academy



Accepting
Differences;
Discovering
Possibilities.

BCA builds confidence and maturity in a solid educational foundation. Students struggling with learning, behavioral, or emotional challenges learn self-esteem and successful coping mechanisms. Through individualized learning plans, integrated clinical support, adventure education, practical work on the school's farm, and an exemplary care-management approach, each student grows to her or his unique ability.

Boulder Creek Academy students are 14 to 17 years old, typically have learning and emotional diagnoses, are more introverted, and have unique individual needs.

At a glance:

- therapeutic boarding high school
- experiential learning including farm and travel
- special education

CEDU High School

<http://www.cedu.com/programs/cedu-high-school>



Portraits of Success.

CHS strengthens confidence and develops potential for bright underachievers. Students build mastery through a rich curriculum of academics, performing and visual arts, outdoor education, recovery, and the original emotional growth curriculum. Students exhibiting behavioral and emotional difficulties build a successful future by learning to express themselves emotionally, artistically, and intellectually.

CEDU High School students generally are 14 to 17 years old, typically "not working to potential" and have moderate emotional, learning, and behavioral issues.

At a glance:

- the original emotional growth boarding high school
- college preparatory academics
- arts infusion

Northwest Academy



Nurturing Self-Discovery.

Northwest Academy's 17 year-old students build vital emotional and life skills as they complete high school and transition to college and work. Through an individualized, accelerated curriculum in a structured and nurturing environment, a determined student can complete up to ten academic credits while engaging in the one-year emotional growth curriculum. The program teaches adult work ethic and practical life skills. Individual and group therapy is incorporated into our multi-disciplinary approach.

Northwest Academy's students are 17 years old. They typically have moderate behavioral and emotional needs and will respond well to a combination of care and structure.

At a glance:

- age appropriate emotional growth program
- option for accelerated academic curriculum
- chemical dependency education

CEDU Middle School



Celebrating 10 Years

CMS is a safe environment where destructive patterns are replaced with healthy relationships, exploration, and connection. Students learn to embrace learning, successfully control behavior, and express emotions in a healthy way. Students exhibiting emotional or behavioral problems respond to the playful and compelling arts-infused high school preparatory curriculum.

CEDU Middle School students are 12 to 14 years old and typically struggling with school because of emotional, behavioral, or learning challenges.

At a glance:

of Success.

- emotional growth boarding middle school
- experiential learning and special education
- age-appropriate integrated curriculum

ASCENT Adventure



Life Changing
Intervention.

ASCENT is an intervention to break the cycle of destructive behavior. This "outdoor behavioral health" or "therapeutic adventure" program uses a clinically-supervised outdoor education experience to create a new opportunity for teens and families.

ASCENT students are 14 to 17 years old, are typically acting out with defiance, depression, or other signs of emotional or behavioral challenges.

At a glance:

- therapeutic wilderness program
- care management, clinical, and nursing services
- transition support

Milestones



Transitional Support
for Lifelong Success.

Milestones is a 6 to 18-month transitional living program focusing on independent living skills for young adults. Mentors provide a combination of life-skills training, academic support for starting college, and work opportunities -- all in a supervised independent living situation. Milestones helps students learn independence and gain trust in their own abilities.

Milestones are over 18 and seeking additional support to meet their life goals.

At a glance:

- work and college support
- apartment living
- life-management curriculum

CEDU Schools are:

- Fully accredited, safe, and time-tested
- Integrated emotional growth, academic, outdoor/wilderness, and clinical programs
- Care-management systems supporting family/professional communication
- Recovery programs and drug/alcohol education
- Family support groups and workshops

- Admissions Directors at each school available 24 hours a day
- Qualified students accepted at any time during the year



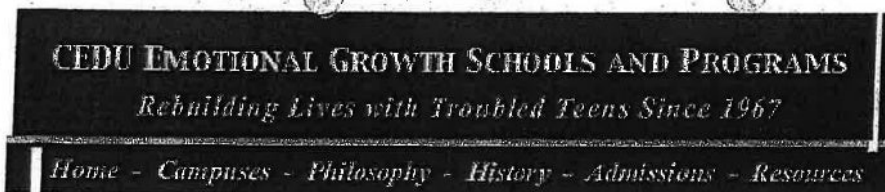
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Programs: [ASCENT](#) | [Milestones](#)

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Every hour of every day,
we are here to support you
and your family.

CEDU can help.

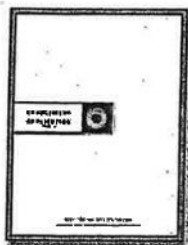
Admissions

While all CEDU schools share the same educational philosophy, each school has its own unique personality, curriculum, and environment. [Click here](#) to view a comparison of the schools and programs.

CEDU admissions counselors are available 24 hours a day, seven days a week, to answer your questions and help you determine which school is right for your child.

To speak with an admissions counselor about a CEDU school, please call (800) 858-1933 or click on [Contact Us](#) and an admissions counselor will get in touch with you directly.

To download an application for enrollment, click on the Download Application link below.



[Download Application](#)

You will need the free Adobe Acrobat Reader software to view this document.
Click the button below to download if you need it.



For More Admissions Information

<http://www.cedu.com/admissions/index.html>

4/17/02

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[Professional Resources and Educational Consultants](#)

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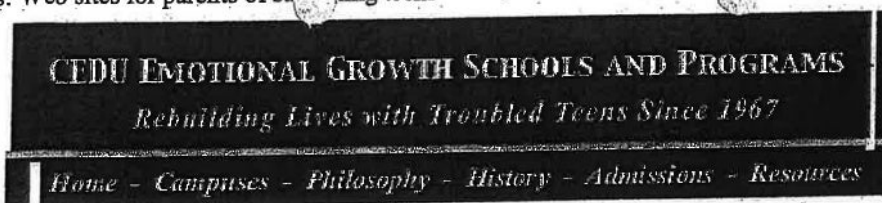
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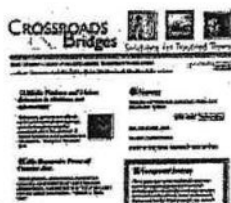
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Resources for Families with Struggling Teens

Click on a photo to open that resource's web site. *Sites listed here are not under the control of CEDU and are provided as a courtesy, not an endorsement.*

Crossroads and Bridges



Crossroads and Bridges: Solutions for Troubled Teens is a magazine that helps parents understand their teenagers. The site includes articles on behavioral issues, communicating with teens, and how to get help.

<http://www.crossroadsandbridges.com/>

The Brown Schools' Resource Page



An extensive collection of web links from The Brown Schools -- the nation's premier provider of therapeutic education.

Resources include associations, information sites, and articles.

<http://www.brownschools.com/resource.html>

Schwab Learning



An extensive resource on learning differences and education. Resources include information about a variety of diagnoses and ways to support your child.

<http://www.SchwabLearning.org/>

Woodbury Reports

StrugglingTeens.com provides articles from the Woodbury Reports on long-term emotional growth boarding schools.

<http://www.cedu.com/resources/index.html>

4/17/02



<http://www.strugglingteens.com/>

IECA



The website of the Independent Educational Consultants Association. Resources include links to individual Educational Consultants.

<http://www.educationalconsulting.org/>



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Are you ready to fully engage
your commitment, depth, heart,
mind, and strength?

Live your work at CEDU.

CEDU is the country's preeminent provider of college preparatory education, emotional growth programs, and clinical services to children and adolescents with learning disabilities, emotional difficulties, and/or behavioral problems.

Employment at a CEDU School or Program:

If you are looking for a company with opportunity, integrity, and excitement, an organization that offers challenging career growth as well as the training and support you need to succeed, look no further! Careers in academics, counseling, finance, sales, and marketing are just some of the outstanding opportunities available to you.

Click on a link below to view current opportunities at CEDU.

[Positions in California](#)

[Positions in Idaho](#)

[Positions in other Brown Schools programs](#)

You might also like to [download an application](#), and read about [benefits](#).

Thank you for your interest in CEDU and our employment opportunities. If you have any questions, please direct them to recruiting@cedu.com.

<http://www.cedu.com/employment/index.shtml>

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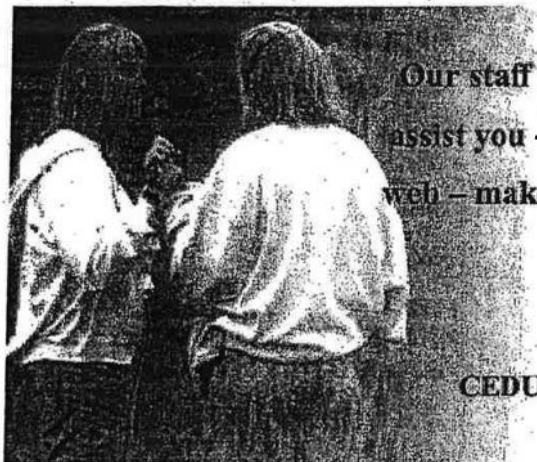
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**Our staff is standing by to
assist you – phone, email, or
web – make the contact now.**

CEDU is responsive.

Each CEDU boarding school and program is staffed by professional admissions counselors who will assist you in finding a placement for your teen. If CEDU is right for you, we will help you enroll -- if it is not, we will help you learn about other options. Our commitment is to support families whose teens are troubled by emotional, behavioral, or learning challenges, and we will deliver.

Contact CEDU

Phone: (800) 858-1933

Mail: CEDU Schools and
Programs
Route 1, Box 511
Bonners Ferry, Idaho
83805

Online Contact Form:

*** Who would you
like to contact?**

General Information ☐

***Please tell us how
you found
CEDU.COM:**

If "Other" please
specify:

***Your Name:**

Mailing Address:

Address cont.:

City:

***State:**

Zip Code:	
Country:	USA
*Phone:	
*Your email:	
Best time to contact you:	
Child's first/last name:	
Child's date of birth:	
Your relationship to your child:	
Please specify any medication your child is currently taking:	
What are the events or behaviors that led you to contact us?	
Your questions and comments:	
Submit Form	
(Note: Items marked with an asterisk above are required fields.)	



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CEDU MOUNTAIN SCHOOLS

May 28, 2004

California Department of Social Services
Community Care Licensing Division
Pacific Inland
3737 Main Street, Suite 600
Riverside, Ca 92501
Attn: Ms. Frankie Shelton, Licensing Supervisor; Ms. Elvia Baris, Licensing Analyst
Re: CEDU Mountain Schools, Facility Number: 366402761

Dear Ms. Shelton and Ms. Baris:

Please find the accompanying response and supporting documentation to the Community Care Licensing's Complaint Investigation Report and Facility Evaluation Report of CEDU School.

Thank you for granting CEDU School the time extension of the POC date to answer with this information.

Please contact me regarding all finding in this matter.

Respectfully,

George P. Condas, Ph.D.,
Administrator CEDU School
VP Operations CEDU Education

Cc: David Wohlgemuth, Esq.,
Attorney at Law

3500 SEYMOUR ROAD . P.O. BOX 1176 . RUNNING SPRINGS . CA 92382 . PHONE 909.867.2722 FAX 909.867.7084
CEDU Family of Services: CEDU High School . Rocky Mountain Academy . CEDU Middle School
Ascent . Boulder Creek Academy . Northwest Academy . CEDU Educational Services

May 28, 2004

California Department of Social Services
Community Care Licensing Division

Re: CEDU School
Facility Number 366402761

**RESPONSE TO COMPLAINT INVESTIGATION REPORT
VISIT DATE 05/03/2004**

In reference to Complaint Control Number 19805 received by Community Care Licensing on January 5, 2004 and investigation started on January 13, 2004 and completed on May 2, 2004, the following is a response to the two deficiencies set forth in May 2, 2004 report.

APPEAL RIGHTS

CEDU School Appeals the following citation:

1. Type B 05/19/2004
Section cited 84172(e) Personal Rights
APPEAL

Section 84172(e) is not applicable with regards to CEDU School. This section relates to "community treatment facilities". CEDU School is not a community Treatment facility as defined in the aforementioned regulation. The Handbook regarding Regulation 84172 states in part that a treatment facility relates to "Each person involuntarily detained for evaluation or treatment...." CEDU School students are not involuntarily detained and CEDU School is not and has never been licensed for or operated as a community treatment facility.

In view of the foregoing, it is requested that the complaint investigation be amended to exclude the deficiency regarding section 84172(e).

In reference to the second deficiency cited in the Complaint Investigation Report:

2. Type B 05/17/2004
Section cited 80087(d)
Building and Grounds

Correction: CEDU School will provide an area of the facility to be utilized as an infirmary containing beds for students that are ill and need to be isolated from the population until the student is well enough to return to the dorm facilities. (please note: Attached is a copy of a memo from Dr. R. Keith Simpson to Dr. George Condas of CEDU School. Dr. Simpson states that there was not a flu epidemic during November 2003.)

**RESPONSE TO FACILITY EVALUATION REPORT
VISIT DATE 05/03/2004**

APPEAL RIGHTS

CEDU School Appeals the following citations:

1. Type B 05/17/04
Section cited 80075 (a)
Health Related Service
APPEAL

Facility evaluation report stated "One night staff to 30 clients. Night staff is not allowed to give medications to clients. When clients are ill, they need to wait for nurse to come on duty."

CEDU School's staff to student ratio is better than 1:30 and staff is, and always has been, allowed to dispense medication to our students. CEDU Mtn. Schools also does not have "clients" on campus, as we are a Therapeutic Boarding School addressing the needs of our "students". All medical care is documented and proper inquiries are made either to staff nursing or to an urgent care facility depending on severity.

2. Type B 05/17/04
Section cited 80075 (b)(7)
Health related Services
APPEAL

Facility evaluation report stated, "There are no written doctor orders for nonprescription medications and no labels on the nonprescription orders."

CEDU School has a flow chart with "Standing Orders" which was provided by our attending medical doctor for utilization by CEDU personnel.

3. Type B 05/17/2004
Section cited 80061 (b)
Reporting requirements
APPEAL

Facility evaluation report stated "Facility had an outbreak of flu sometime in November 2003 and did not submit an incident report to licensing".

Attached is a copy of a memo from Dr. R. Keith Simpson to Dr. George Condas of CEDU School. Dr. Simpson states that there was not a flu epidemic during November 2003.

Facility staff has been trained regarding the reporting requirements pursuant to Section 80061(b). Incident reports have been and will be consistent with the reporting requirements. However, the cited deficiency is incorrect based on the facts and the report from the facility's attending Doctor.

4. Type B 05/17/2004
Section cited 80026(h)
APPEAL

Facility evaluation report stated "No client's files contain safeguards for Cash Resources."

Cash resources of the student's consist only of an allowance provided by the facility. Detailed and accurate records are maintained by the facility for the cash resources for each student. The records are maintained in the financial office of the facility. These procedures and information had been previously provided to licensing. Copies of the student cash resources will also be placed in the student's file as well as maintained in the financial office.

5. Type B 05/17/2004
Section cited 84077(2)

APPEAL

Facility evaluation report stated "Minors receive no allowance."

All minors at CEDU School receive an allowance. The allowance is provided by the parents/guardians of the students. The business office maintains the record of the allowance and an accounting of the funds for each student. Student funds are all maintained in a separate checking account.

At the time of the evaluation visit, the evaluators never requested information from the facility regarding student allowances or safeguards for cash resources. If the matter had been brought to the attention of the facility representative prior to the execution of the deficiency report, the facility could have substantiated their procedures. The facility was never afforded the opportunity to explain and substantiate their proper procedures relating to these deficiencies. Further, the plan of correction appears to be incomplete.

6. Type B 05/17/04
Section cited 80075(n)(7)

APPEAL

Facility evaluation report stated that specified files "do not contain Current Centrally Stored Medication records."

All student files have a cover page, which contains relevant information including CURRENT MEDICATIONS. Cover pages are continuously updated during the student's enrollment. (Please refer to enclosed documents).

The following Deficiencies have been corrected by CEDU School. Please find the supporting documentation, which accompanies this response.

1. Type B 05/17/04
Section cited 84070 (b)(5)

Deficiency: Immunization Record missing in files # 5 & 10.

Correction: Copies of documentation have been placed in student files and are provided for CCL review.

2. Type B 05/17/04
Section cited 80069(c)(1)

Deficiency: T.B. Test result not in files # 1,5,10

Correction: Copies of documentation have been placed in student files and are provided for CCL review.

3. Type B 05/17/04
Section cited 80068(a)

Deficiency: Admission Agreement not signed by Authorized Rep file # 8.

Correction: Signed Admission Agreement has been placed in student's file and a copy provided for CCL review.

4. Type B 05/17/04
Section cited 84068 (a)(d)

Deficiency: Needs and Service Plan not signed by either Authorized Rep or student for files # 3,6,7 & 10.

Correction: Signed Needs and Service Plans have been placed in student files and copies provided for CCL review.

Respectfully submitted,



George P. Condas, Ph.D.
Administrator CEDU School
VP Operations CEDU Education

Cc: David Wohlgemuth, Esq.
Attorney at Law

R. KEITH SIMPSON, DO, DPH

31900 Hilltop Blvd.
P.O. Box 3200
Running Springs, CA 92382
(909) 867-2280 FAX (909) 867-2260
mountaindocs@hotmail.com

May 5, 2004

TO: George Condas, Ph.D.

FROM: R. Keith Simpson, DO, DPH

RE: Licensing Concerns

This information is a response to your questions of 5/4/04 regarding the health status of students at CEDU Running Springs in November 2003. The State Licensing representative expressed concern over not reporting an 'epidemic of flu' that month.

I reviewed Accuweather's daily weather data for Running Springs for November 2003. The average temperature was 38.5F and we had subnormal precipitation. Wind at this time was episodically blustery, from all quadrants.

My office reviewed our office charts and note only two students were diagnosed with influenza and prescribed antivirals during that time.

There was, in fact, a marked increase of vasomotor rhinosinusitis and allergic rhinosinusitis beginning shortly after the Old Fire and the Grand Prix fire. This was evident throughout my practice. In many incidences this progressed to acute purulent rhinosinusitis.

This pathology involved roughly the same percentage of individuals in a given population all over the mountain area.

There was no epidemic of influence or other serious reportable disease at CEDU in 2003 04, as yet, in 2004.

I believe staff and the populace referred to 'epidemic' in the sense there were so many cases of sinusitis occurring across our mountain.

If there are any other questions or concerns, please give my cell phone (909-415-4626) to any concerned county or state representative.

COMPLAINT INVESTIGATION REPORT

This is an official report of an unannounced visit/investigation of a complaint received in our office on
05/03/2001 and conducted by Evaluator Gretchen Guillen

PUBLIC**COMPLAINT CONTROL NUMBER:**

FACILITY NAME:	CEDU SCHOOL-MAIN CAMPUS	FACILITY NUMBER:	366402761
ADMINISTRATOR:	DOYLE, PATRICIA	FACILITY TYPE:	730
ADDRESS:	3500 SEYMOUR ROAD	TELEPHONE:	9098672722
CITY:	RUNNING SPRINGS	STATE: CA	ZIP CODE: 92382 0
CAPACITY:	174	CENSUS: 174	DATE: 08/23/2001
		UNANNOUNCED	TIME VISIT BEGAN: 11:00 AM
MET WITH:	Dr. Jim Powell		TIME COMPLETED: 12:00 PM

ALLEGATION(S):

1 SEXUAL ABUSE- Client reported that he was sexually assaulted by a kitchen worker by the name of Ceasar
2 Virula about 3 1/2 months ago. He said this person grabbed his butt and genitals and smiled at him.
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INVESTIGATION FINDINGS:

1 The purpose of this Complaint Investigation Report is to finalize the above referenced complaint, initiated on
2 05/10/01. Investigator M. Jackson conducted an unannounced complaint investigation visit on 05/10/01,
3 through client and staff interviews, the investigative findings for the allegation of sexual abuse is substantiated.
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Substantiated**Estimated Days of Completion:****SUPERVISOR'S NAME:** Jeanine Batres**TELEPHONE:** 909782-4946**LICENSING EVALUATOR NAME:** Gretchen Guillen**TELEPHONE:** 909 782-4157**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 08/23/2001

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED *****DATE:** 08/23/2001

This report must be available at the facility for public review (3 years).

FACILITY EVALUATION REPORT

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DOYLE, PATRICIA
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174
TYPE OF VISIT: Annual
MET WITH: Bill Shea

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 03/07/2002
STATE: CA
CENSUS: UNANNOUNCED
TIME BEGAN:
TIME COMPLETED:

NARRATIVE

1 An unannounced site visit was made to the facility, on this date, by LPA Guillen for the purpose of
2 conducting the annual facility visit. The inspection consisted of facility grounds inside and out. Due to time
3 constraints LPA Guillen will return at a later date to complete annual review of staff, client records,
4 medications records and conduct staff & client interviews.
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10 No deficiencies were cited per Title 22, Division 6, Chapter 1 & 5.
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SUPERVISOR'S NAME: Frankie Shelton

TELEPHONE: 909782-4207

LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 782-4157

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 03/07/2002

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 03/07/2002

This report must be available at the facility for public review (3 years).

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/08/2002	Yes

1 Message left by Dr. James Powell for LPA Guillen on 05-08-02 @ 08:37 am
2 Hi Gretchen Dr.Powell, I hope your doing well
3 Hey I know you have to come up here unannounced and I; I certainly don't want to interfere with that, but I have
4 something to do tomorrow afternoon. I just wanna make sure, I really would like to be here when you come up
5 and Bill, Bill won't be here , So I really want to be here. So, what I'm asking is could we have an unannounced
6 other than tomorrow afternoon. Would, would you do me a favor and call me and just leave me a message if
7 that's o.k. @ 909-867-2722. I kinda of been putting this off for a couple of weeks, thinking you were going to
8 come up. But tomorrow I have something to do and again if I don't hear from you, I'll put it off again. But I would
9 like to take care of something, just something I gotta take care of down the hill. Thanks very much. Hope your
10 doing well. You can just leave me a voice mail at extension 114 to if you just wanna ask for that.

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LICENSING EVALUATOR NAME: Gretchen Guillen
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4157
DATE: 05/09/2002

CONTACT SHEET

This form is intended to document contacts concerning the facility identified below. Such contacts may include notification of corrections by the facility. Limit the information to public information. File on the top right side of the facility folder. Enter t/c (telephone call) or o/v (other visit) in the first column. Enter the contact date in the second column. Under Summary of Contacts enter relevant information including action taken and follow up. Enter initial and last name after each entry.

FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761

Contact Type	Date	Summary of Contacts
t/c	04/17/2002	1 LPA Guillen left message for Detective Stark to return call regarding CEDU investigation. 2 3
t/c	04/17/2002	1 Detective Stark returned call to LPA Guillen informing LPA that the case was turned 2 over to Deputy Merith and would not be in till 3:00p.m that day. 3
t/c	04/17/2002	1 LPA left message for Deputy Merith @ 909-336-0600 to return call regarding the 2 investigation of CEDU Main Campus. 3 As of today 04-23-02 Deputy Merith has not returned LPA call.
t/c	04/18/2002	1 [REDACTED] parent of a student at CEDU left message to return call [REDACTED] 2 3
t/c	04/19/2002	1 LPA returned [REDACTED] call. [REDACTED] informed LPA that her son had no physical or 2 sexual contact with client in question. Her son did not like the client, he thought he was 3 an idiot. [REDACTED] states she is very happy with her sons progress at CEDU. She has a good relationship with CEDU and had spoken to Tony Becker. [REDACTED] informed LPA that Deputy Merith was no longer on the working the case it has been turned over to Detective Wyatt.(909) 336-0600
t/c	04/23/2002	1 LPA returned call to [REDACTED]. PA requested [REDACTED] to leave 2 best time for contact and or alternate number to be reached at. LPA has not been to 3 make contact with [REDACTED] only messages have been left between LPA and [REDACTED]
t/c	04/23/2002	1 LPA Guillen left Message for Detective Wyatt to return call regarding CEDU 2 investigation @909-782-4157. Message left regarding were the detective is at in the 3 investigation, has client interviews started and if LPA can start Licensing Investigation or to back off.
t/c	04/23/2002	1 LPA Guillen left message again for Detective Wyatt 909-3360600 regarding CEDU 2 investigation leaving LPA Guillen's cell phone number [REDACTED] 3
t/c		1 LPA 2 3 1 2 3 1 2 3 1 2 3

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/09/2002	No

1 There have been multiple complaints made against the facility and a multitude of citations issued against the
2 facility for failing to comply with Title 22 Regulation.

3
4
5 The facility has been cited for the following deficiencies:

6
7
8 March 7, 2002 Annual visit physical plant only

9
10
11 September 24, 2001 Complaint Investigation # 195673:

12 [REDACTED]
13 [REDACTED]
14 [REDACTED]
15 Code 19 other - GH did not report to CCL an SIR correctly regarding two minors AWOLING from the facility and
16 were still missing when they knew they were in custody of the police.-Substantiated

17 September 24, 2001-Facility cited for Reporting requirements regarding SIR

18
19 September 24, 2001 Complaint Investigation #195699

20 [REDACTED]
21 [REDACTED]
22 August 23, 2001 RIS Complaint Investigation #195229 -Investigator M.Jackson

23 Code 2 Sexual Abuse- Staff Ceasar Virlua sexually assaulted minor. Substantiated

24 Code 3 Personal Rights- Staff Ceasar Virlua verbally harassing minor on an on going basis.Substantiated

25 August 23, 2001 facility cited for Personal Rights and Staff was removed from and excluded from facility.

26
27
28 October 17, 2000 RIS Complaint Investigation #194117 - Investigator Shelly Roth

29 Code 3 -Minor sexually assaulted by escort staff Matthew Royale Lee while being "Safehoused"-Substantiated

30 October 17, 2001 Facility cited for Personal Rights, Staff no longer employed at CEDU and excluded from the
31 facility:

32
33 November 30, 2000 Annual visit

34 Facility deficiencies consisted mainly of Staff & Client records and several Building & Grounds deficiencies
35

LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 782-4157

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 05/09/2002

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/09/2002	No

- 1 September 26,2000 Complaint Investigation #194020
- 2 Code 19 Employees are using badges with State of California Seal to transport children-Inconclusive
- 3 June 8,2000 Complaint Investigation #194020
- 4 Code 4/10 -Unlicensed Care & Neglect/ Lack of Supervision -Facility is allowing staff to take children to staff's
- 5 home or to hotels for care and supervision. **Substantiated**
- 6 June 8,2000 Facility cited for Operation without a license-Facility is providing care and supervision at a "safe
- 7 house not licensed by the licensing agency.
- 8 Facility cited for Plan of Operation - Facility providing an escort service and "safe housing" as part of their
- 9 operation.
- 10 Facility cited for Criminal Record Clearance
- 11 Facility was issued Civil Penalties of \$600.00
- 12
- 13 November 15,1999 Case Management Visit -Lack of Reporting to CCL, SIR follow-up
- 14 Incidents (Reportable) occurring since January. Most recently, 11-02-99, 2 boys had to be rescued after running
- 15 away.
- 16 Facility cited for Reporting Requirements
- 17
- 18 February 17,1999 Pre-Licensing visit for capacity increase from 88 to 142
- 19
- 20 March 20,1998 Annual visit
- 21 No Type A deficiencies as of 02-07-97.
- 22
- 23 February 7,1997 Plan of Correction visit
- 24
- 25 December 9,1996 Annual visit
- 26 Facility consisted mainly of Staff & Client records and several Building & Grounds deficiencies
- 27 February 7,1997 Plan of Correction visit
- 28
- 29 December 9,1996 Annual visit
- 30 Facility consisted mainly of Staff & Client records and several Building & Grounds deficiencies
- 31
- 32 May 20,1996 Pre- Licensing visit for capacity increase of 6 to 12.
- 33
- 34 January 26, 1996 Pre-Licensing visit.
- 35

LICENSING EVALUATOR NAME: Gretchen Guillen
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4157
DATE: 05/09/2002

DETAIL SUPPORTIVE INFORMATION

Inland Empire Office, 3737 Main St. Ste 600
Riverside, Ca, CA 92501

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/13/2002	No

1 Interview with [REDACTED]
2 [REDACTED]
3 [REDACTED] states that she and [REDACTED] checked out to go on a walk to the art barn the night before [REDACTED]
4 [REDACTED] moved out of the facility. She states that she informed staff (Travis) that she was going on the walk and
5 "checked out" with him. Both she and [REDACTED] went on the walk unsupervised between approximately 6:30pm and
6 7pm. The two of them walked to the dumpster next to the art barn. The art barn was closed. [REDACTED] states that
7 she stopped and [REDACTED] put his arm around her waist. [REDACTED] was standing behind her. He then moved his hand
8 down the front of her body toward her private area over her clothes. [REDACTED] states that she didn't know what was
9 happening. She pulled his hand away and started walking toward the house. [REDACTED] states that she stopped
10 walking because she was confused and [REDACTED] again tried to move his hand down her pants. This time he went under
11 [REDACTED] clothes. [REDACTED] states that [REDACTED] "tried to finger me with my pants on and off." [REDACTED] states that she was
12 "somewhat intimidated by him, but not really". [REDACTED] states that she did not tell anyone of this incident. [REDACTED]
13 states that [REDACTED] came to her and told her that she [REDACTED] had gotten a message from [REDACTED] telling her that
14 he still loves her [REDACTED] and that he was going to call CEDU and tell staff that he had broken the sex
15 agreement with [REDACTED]. [REDACTED] believes that [REDACTED] called Tony Becker about two weeks after he left the facility
16 and revealed that he and [REDACTED] had broken the sex agreement. [REDACTED] states that one night staff Diane came to
17 her and told her that she needed to write a dirt list. A dirt list is a list of all the CEDU rules a person has broken.
18 [REDACTED] wrote on her dirt list that she had broken the sex agreement. [REDACTED] states that she gave the dirt list to
19 staff Stephanie and Stephanie told her to be more specific and detail the event. [REDACTED] states that a few days
20 after she wrote the dirt list, staff Bobby sat her down and talked to her about the incident. She states that he
21 asked her if something happened between her and [REDACTED] and she told him. [REDACTED] states that Bobby got upset
22 with her. [REDACTED] states that at CEDU, when a person breaks the sex agreement, staff want the person to talk
23 about it in RAP. CEDU policy is that everyone is to know everything about each other--no one is to keep secrets.
24 [REDACTED] states that staff Bobby encouraged her to talk about the situation in RAP and would say to her in the RAP
25 session " [REDACTED] has something to talk about". [REDACTED] states that she didn't want to talk about it, but eventually
26 she decided to speak about it. [REDACTED] states that Bobby yelled at her in RAP after she shared, but she states that
27 he "yelled out of care".
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LICENSING EVALUATOR NAME: Lisa Enea

TELEPHONE: (909) 782-6643

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 05/15/2002

COMPLAINT INVESTIGATION REPORTInland Empire Office, 3737 Main St Ste 600
Riverside, Ca, CA 92501

This is an official report of an unannounced visit/investigation of a complaint received in our office on
04/12/2002 and conducted by Evaluator Gretchen Guillen

PUBLIC**COMPLAINT CONTROL NUMBER: 196077**

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DOYLE, PATRICIA
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174

STATE: CA
CENSUS:
UNANNOUNCED

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 07/01/2002
TIME VISIT BEGAN:
TIME COMPLETED:

MET WITH:**ALLEGATION(S):**

- 1 Code 10 Neglect/ Lack of Supervision - Employee's of the facility may have known about the incidents, but
2 failed to do nothing about it.
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INVESTIGATION FINDINGS:

- 1 The purpose of this Complaint Investigation Report # 196077 is to finalize the above referenced complaint,
2 initiated on 05/13/02. Community Care Licensing obtained information through facility floor notes confirming
3 that many CEDU employee's had full knowledge of clients #1 & 2 (See Confidential Names List 811) inflicting
4 physical abuse, unwanted advances and sexual assaults to approximately fifteen minors residing at CEDU Main
5 Campus. On February 2,2002 CEDU employee's documented in facility floor notes the physical abuse (a
6 blanket party) that took place in the dorms, and on April 4,2002 floor notes were written regarding client #1
7 demanding that a client pull his pants down so that client #1 could make fun of him. Also, was client #1 was
8 placed on full escort and was not allowed to leave the Challenge room all night, his food was brought to him
9 and staff escorted client #1 to the dorms to get his belongings for the night. On April 5,2002 client #3 (See
10 Confidential Names List 811) disclosed in RAP session that client #1 is forcing minors to expose themselves in
11 the dorms. The following dates of April 10 & 17, 2002 four other minors reported to CEDU employees of the
12 inappropriate sexual conduct taking place in the dorms.
13

Substantiated**Estimated Days of Completion:****SUPERVISOR'S NAME:** Florence Manos**TELEPHONE:** 909 320-2025**LICENSING EVALUATOR NAME:** Gretchen Guillen**TELEPHONE:** 909 320-2058**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 07/01/2002**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:** *** SIGNED *****DATE:** 07/01/2002**This report must be available at the facility for public review (3 years).**

COMPLAINT INVESTIGATION REPORT (Cont)Inland Empire Office, 3737 Main St Ste 600
Riverside, Ca, CA 92501**FACILITY NAME:** CEDU SCHOOL-MAIN CAMPUS
DEFICIENCY INFORMATION FOR THIS PAGE:**FACILITY NUMBER:** 366402761**VISIT DATE:** 07/01/2002

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A 07/02/2002 Section Cited 80072(a)(3) Personal Rights	1 Facility violated the personal rights of the clients by 2 not taking immediate corrective action when made 3 aware of sexual misconduct of clients #1 & #2. 4 5 6 7	1 2 3 4 5 6 7
Type A 07/02/2002 Section Cited 80078(a) Responsibility For Providing Care And Supervision	1 NO DEFICIENCY CITED IN THIS SPACE. 2 3 4 5 6 7	1 2 3 4 5 6 7
Type A	1 NO DEFICIENCY CITED IN THIS SPACE. 2 3 4 5 6 7	1 2 3 4 5 6 7
Type B 07/02/2002 Section Cited 80064(a)(2)(3)Repo rting Requirements	1 Facility failed to report in a timely manner the 2 sexual misconduct involving facility clients #1 & #2. 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

SUPERVISOR'S NAME: Florence Manos**TELEPHONE:** 909 320-2025**LICENSING EVALUATOR NAME:** Gretchen Guillen**TELEPHONE:** 909 320-2058**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 07/01/2002

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED *****DATE:** 07/01/2002**This Notice must be posted for 30 days**

COMPLAINT INVESTIGATION REPORT

This is an official report of an unannounced visit/investigation of a complaint received in our office on
04/12/2002 and conducted by Evaluator Gretchen Guillen

CONFIDENTIAL**COMPLAINT CONTROL NUMBER: 196077**

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DOYLE, PATRICIA
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174

STATE: CA
CENSUS:
UNANNOUNCED

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 07/02/2002
TIME VISIT BEGAN:
TIME COMPLETED:

MET WITH:**ALLEGATION(S):**

- 1 Personal Rights -Facility staff did not immediately take corrective action when made aware of sexual
- 2 misconduct by clients #1 & #2.
- 3
- 4 Reporting Requirements-Facility did not report in a timely manner to CCL the sexual misconduct involving
- 5 clients.
- 6
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INVESTIGATION FINDINGS:

- 1 This report # 196077 finalizes the above referenced complaint initiated on 04/22/02 .
- 2
- 3 Personal Rights-
- 4 Facility staff was aware of incidents/accusations that client #1 displayed unwanted behavior of a sexual nature
- 5 towards other clients. Approximately 12 to 14 clients approached facility staff relaying their concerns of
- 6 unwanted sexual advances against them by client #1. Facility staff did not immediately take these complaints
- 7 seriously and viewed client #1's behavior as "horseplay." The violation of personal rights is substantiated.
- 8 Facility floor notes documented CEDU staff's awareness of client #1's & 2's sexual misconduct towards clients
- 9 residing at CEDU Main Campus. On 4/4/02, floor notes indicated that client #1 demanded that another client
- 10 pull his pants down so client #1 could make fun of him. On 4/5/02, client #3 disclosed in RAP session that
- 11 client #1 was intimidating minors to expose themselves in the dorms. On 4/10/02 & 4/17/02, it was
- 12 documented that four other minors complained to staff about the sexual misconduct taking place in the dorms.
- 13

Substantiated**Estimated Days of Completion:****SUPERVISOR'S NAME:** Florence Manos**TELEPHONE:** 909 320-2025**LICENSING EVALUATOR NAME:** Gretchen Guillen**TELEPHONE:** 909 320-2058**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 07/02/2002**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:** *** SIGNED *****DATE:** 07/02/2002

COMPLAINT INVESTIGATION REPORT (Cont)**FACILITY NAME:** CEDU SCHOOL-MAIN CAMPUS**FACILITY NUMBER:** 366402761**VISIT DATE:** 07/02/2002**NARRATIVE**

1 An office conference has been scheduled for July 22,2002. The presence of the Chief Executive Officer
2 and/or President of CEDU is mandatory. The meeting will address areas of concern regarding: Supervision,
3 Client Rights, and Plan of Operation. If any additional information is needed please contact Community Care
4 Licensing Regional Manager Arthur Carter at (909)782-6642.
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SUPERVISOR'S NAME: Florence Manos**TELEPHONE:** 909 320-2025**LICENSING EVALUATOR NAME:** Gretchen Guillen**TELEPHONE:** 909 320-2058**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 07/02/2002**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:** *** SIGNED *****DATE:** 07/02/2002

DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/02/2002	No

- 1 Complaint # 196077
- 2 Analyst Gretchen Guillen and Sherri Cummings conducted a complaint visit to facility on this day to deliver the
- 3 findings from complaint investigation. Analysts met with Administrator, Dr. James Powell and Business Manager/
- 4 Asst. Administrator Bill Shay to discuss the findings.
- 5 Analyst Guillen reviewed licensing reports (LIC 9099, LIC 9099- D and LIC 421/civil penalty form) with Dr.
- 6 Powell and Mr. Shay, in addition both were given time to thoroughly read entire reports. Analyst Guillen informed
- 7 Dr. Powell that there is a civil penalty that is being assessed and she will amend the LIC 9099-D to reflect the
- 8 civil penalty. Analyst explained to administrator that by signing the licensing reports, it represents that he
- 9 received a copy of the report and it was reviewed with him. It doesn't mean that he agrees with the deficiencies.
- 10 Administrator informed analyst that he would be appealing all deficiencies. Analyst stated that he has that right.
- 11 Questions from Dr. Powell and Mr. Shay:
- 12 - Who is Kay West? Analyst Guillen replied, Screener.
- 13 - What is a noncompliance conference that is mentioned in the report and is scheduled for 7/22/02? Analyst
- 14 Guillen informed administrator that it is a formal meeting that is scheduled by the Regional Manager and will be
- 15 held at the IEO. Analyst informed administrator that he will receive a letter confirming date and also stating the
- 16 issues to be discussed. Analyst explained that the purpose of this meeting was to discuss concerns of
- 17 compliance and concerns from this complaint investigation . Administrator was informed that he can bring board
- 18 member and legal council , but suggested that he notify the Regional Manager of all of who will be attending prior
- 19 to the conference.
- 20 Analyst Cummings reviewed appeal rights with administrator and explained the appeal process/hierarchy in great
- 21 detail. Administrator wanted to contact his legal department prior to signing licensing reports and analyst
- 22 explained to him that he has been designated by the licensee as the administrator , and as the administrator he
- 23 needs to be able to meet with licensing representatives at time of visit and sign the reports. Administrator stated
- 24 that they will be appealing all deficiencies. Analyst reiterated to the administrator the appeal process and the
- 25 time constraints.
- 26 Exit interview was conducted and administrator signed all licensing reports and noted the plan of corrections.
- 27
- 28 Please note: Administrator requested that the licensing information be corrected to reflect him as the
- 29 administrator and not Patricia Doyle. Analyst Guillen requested that Analyst Cummings make this change on LIS
- 30 system on 7/3/02. Change of administrator was completed on 7/3/02 by Analyst Cummings.
- 31
- 32
- 33
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LICENSING EVALUATOR NAME: Sherri Cummings

TELEPHONE: 909 320-2058

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 07/03/2002

DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/15/2002	No

- 1 The following information gather from Special Incident Reports submitted to CCL by CEDU regarding
- 2 [REDACTED] inappropriate sexual behavior with peers:
- 3 [REDACTED]
- 4 [REDACTED] DOA 11-07-01
- 5 On April 17, 2002, [REDACTED] disclosed to staff member, Anthony (Tony) Becker, that on one occasion [REDACTED] was in the
- 6 shower by himself masturbating when [REDACTED] opened the shower door and stared at [REDACTED] then stated that
- 7 on more than one occasion [REDACTED] slapped [REDACTED] with his penis. [REDACTED] also stated that on one occasion [REDACTED]
- 8 grabbed [REDACTED] penis and testicles through [REDACTED] clothing. Additionally, on another occasion, [REDACTED] opened the
- 9 shower door while [REDACTED] was taking a shower and hit [REDACTED] penis.
- 10 Immediate Actions Taken- [REDACTED] has already been removed from the campus,
- 11 (removed 04-06-02 Per Detective Wyatt Twin Peaks Police Department)
- 12 Supervisor, parents, Resource Coordinator, school nurse and clinical services notified. At 3:11pm Kathy West
- 13 from CPS authorities was also notified by Tony Becker.
- 14 Anticipated Results- Will follow up with CPS and the issue will be processed in counseling sessions.
- 15 Report submitted by Tony Becker, CHS School Director on 04-17-02
- 16 Report reviewed/Approved by Dr. James Powell on 04-17-02
- 17 SIR arrived by fax on 04-17, 2002.
- 18
- 19
- 20 On April 19, 2002 [REDACTED] was transferred out of CEDU to London
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LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 320-2058

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 07/15/2002

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/15/2002	No

- 1 The following information gather from Special Incident Reports submitted to CCL by CEDU regarding
- 2 inappropriate sexual behavior with peers:
- 3
- 4 On April 11, 2002 [REDACTED] age 15 disclosed that on several occasions [REDACTED] asked [REDACTED] to show him his
- 5 penis. [REDACTED] also exposed his own penis.
- 6 Staff's name not present on report as to who the child made the disclosure to.
- 7 Incident to be processed in group therapy sessions by [REDACTED] is on a 1:1, assessing for alternative
- 8 placement.
- 9 Report submitted by: Diane Brown CHS Counselor 04-11-02
- 10 Report Reviewed/Approved by: Anthony Becker CHS School Director 04-11-02
- 11
- 12 On April 11, 2002 [REDACTED] age 15 disclosed in raps that [REDACTED] on numerous occasions over the past month
- 13 asked for [REDACTED] to "show me your dick", and would pull out his penis and wave it around.
- 14 Action taken/Follow-up [REDACTED] was taken to raps and is on full escort in challenge
- 15 Report submitted by: Diane Brown CHS Counselor 04-11-02
- 16 Report Reviewed/Approved by: Anthony Becker CHS School Director 04-11-02
- 17 The above incident report differs from the original report submitted to CCL.
- 18
- 19 [REDACTED] DGA 11-07-01
- 20 On April 17, 2002, [REDACTED] disclosed to staff member, Anthony (Tony) Becker, that on one occasion [REDACTED] was in the
- 21 shower by himself masturbating when [REDACTED] opened the shower door and stared at [REDACTED]. [REDACTED] then stated that
- 22 on more than one occasion [REDACTED] slapped [REDACTED] with his penis. [REDACTED] also stated that on one occasion [REDACTED]
- 23 grabbed [REDACTED] penis and testicles through [REDACTED] clothing. Additionally, on another occasion, [REDACTED] opened the
- 24 shower door while [REDACTED] was taking a shower and hit [REDACTED] penis.
- 25 Immediate Actions Taken [REDACTED] has already been removed from the campus,
- 26 (removed 04-06-02 Per Detective Wyatt Twin Peaks Police Department)
- 27 Supervisor, parents, Resource Coordinator, school nurse and clinical services notified. At 3:11pm Kathy West
- 28 from CPS authorities was also notified by Tony Becker.
- 29 Anticipated Results- Will follow up with CPS and the issue will be processed in counseling sessions.
- 30 Report submitted by Tony Becker, CHS School Director on 04-17-02
- 31 Report reviewed/Approved by Dr. James Powell on 04-17-02
- 32 SIR arrived by fax on 04-17, 2002.
- 33
- 34 On April 19, 2002 [REDACTED] was transferred out of CEDU to London
- 35

LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 320-2058

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 07/19/2002

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/19/2002	No

1
2 Therapeutic Health Services Clinician Progress Notes Dated 01-10-02
3 [REDACTED]
4 Provider: Daniel Casella, M.A., MFT.
5 Case conference with parents.
6 Present during phone call to parents.
7 [REDACTED] parents informed of the fact that [REDACTED] was involved himself in sexually related horseplay, i.e., dry
8 humping a fellow student in the dormitory.
9
10 On January 8, 2002, @ 4:47 PM E-Mail from Complainant [REDACTED] to Tony Becker@Cedu.com and
11 Cc: [REDACTED] Subject: [REDACTED] Meds
12 Parents became aware of the many recent on-goings, deeply concerned, appears he is growing more
13 aggressive. We suspect that some of [REDACTED] apparent 'hyper sexuality' might be coming from too much Riatlin
14 I, being a consultant on student sexual harassment, am deeply concerned over [REDACTED] involvement in these
15 recent events. [REDACTED] did tell us last night that he has witnessed these events in the dorms since his arrival
16 (11-09-01) and believed them to be acceptable at CEDU. We let him know under no circumstances is this
17 'student sexual harassment/bullying acceptable by anyone, anywhere at any time. We asked [REDACTED] to discuss
18 these recent events with Dr. Tobin
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LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 320-2058

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 07/19/2002

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/19/2002	No

1 On January 8, 2002, @ 4:47 P ME-Mail from Complainant [REDACTED] to Tony Becker@Cedu.com and
2 [REDACTED] Subject: [REDACTED] Meds
3 Parents became aware of the many recent on-goings, deeply concerned, appears he is growing more
4 aggressive, We suspect that some of [REDACTED] apparent 'hyper sexuality' might be coming from too much Riatlin
5 I, being a consultant on student sexual harassment, am deeply concerned over [REDACTED] involvement in these
6 recent events. [REDACTED] did tell us last night that he has witnessed these events in the dorms since his arrival
7 (11-09-01) and believed them to be acceptable at CEDU. We let him know under no circumstances is this
8 'student sexual harassment/bullying acceptable by anyone, anywhere at any time. We asked [REDACTED] to discuss
9 these recent events with Dr.Tobin
10
11 On January 9, 2002, @ 7:41 PM E-Mail from Complainant [REDACTED] to Tony Becker@Cedu.com
12 Dear Tony,
13 Thank you for the information, it's apparent you have a seasoned understanding of the complex components
14 surrounding these issues and hopefully, [REDACTED] and the others will easily follow the redirection's
15
16 Therapeutic Health Services Clinician Progress Notes Dated 01-10-02
17 Patient: [REDACTED]
18 Provider: Daniel Casella, M.A., MFT.
19 Case conference with parents, [REDACTED]
20 Present during phone call to parents, [REDACTED]
21 [REDACTED] parents informed of the fact that [REDACTED] was involved himself in sexually related horseplay, i.e., dry
22 humping a fellow student in the dormitory.
23
24 On January 10, 2002 @ 10:02 AM E-Mail from Tony Becker@Cedu.com to Complainant [REDACTED]
25 subject: [REDACTED] Med's
26 Good Morning [REDACTED]
27 The sexual acting out in the dorms is being addressed in rap today. In the beginning this behavior is for the most
28 part normal adolescent horse play but without redirection the boys will take it to far. When we get a large influx
29 of male students in a short period of time we often see have to stop the younger school and address behavior
30 such as this. At this point none of the acting out seems to have moved into real sexual activity. It seems to be
31 limited to pantomime. We'll continue to monitor.
32
33
34
35

LICENSING EVALUATOR NAME: Gretchen Guillen
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 320-2058
DATE: 07/19/2002

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/15/2002	No

The following information gather from Special Incident Reports submitted to CCL by CEDU regarding

- 1 Adam Meretsky inappropriate sexual behavior with peers:
- 2
- 3 #1: [REDACTED] DOA 11-09-01 South Boys Dorm. No staff present
- 4 On January 7, 2001 the following information was brought up during RAPS with [REDACTED] talked about
- 5 inappropriate behavior in the dorms involving imitating having sex-boys to boys with clothes on, they called it
- 6 "humping". Also [REDACTED] has been involved with fake "orgies" in which there are a lot 3 or more boys pretending to
- 7 hump each other all at one time.
- 8 Action taken/Follow-up-Full escorts to dorms, confined to house, phase leader notified
- 9 Report prepared by Jaime Steveson 01-07-02
- 10 Program Recommendations by Anthony Becker 01-08-02-consequences and process in raps. Dorm change
- 11 Reviewed/Approved by Dr.Powell 01-08-02
- 12
- 13 #1A- On 01-07-02 The five named boys ([REDACTED])
- 14 [REDACTED] disclosed that on appropriately four occasions, in the
- 15 dorms, at night they had rubbed each other sexually on the outside of their clothing. These acts were done
- 16 consensually. They will be watched closely and receive consequences for their actions.
- 17 Person who observed the incident/injury- Staff Steve Ornelas,
- 18 Persons contacted- Supervisors; parents and clinical services notified
- 19 Actions taken- This issues will be processed in counseling sessions
- 20 Reported by-Steve Ornelas 01-07-02,
- 21 Report Reviewed/Approved by- Dr.Powell 01-08-02
- 22 The above incident report differs from the original report submitted to CCL.
- 23
- 24 Information gathered from facility RAP sessions:
- 25 On January 7, 2002 during RAP sessions the following information was brought to attention and documented
- 26 and E-mail by Michael Sargent to Priscilla Blanchard, Beth Hallmark and to himself,
- 27 [REDACTED] Naked and hugged [REDACTED] and humped
- 28 [REDACTED] and [REDACTED] were, had [REDACTED] in middle, doing front side, and [REDACTED] doing back side, with clothes on,
- 29 three separate times,
- 30 Humping each other with clothes on [REDACTED]
- 31 [REDACTED] with a boner in library, hit [REDACTED] with it.
- 32 [REDACTED] had hard on and humping each other with close on.
- 33 All these students need to be consiquenced, all are on full escort, and probably will be on restrictions,
- 34 This has been going on for a month
- 35 [REDACTED] and [REDACTED] probably have taken it a step farther.

LICENSING EVALUATOR NAME: Gretchen Guillen
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 320-2058
DATE: 07/15/2002

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/19/2002	No

1 On April 5, 2002, [REDACTED] (age 15) discussed in RAP sessions, [REDACTED] is forcing boys to expose
2 themselves in dorms
3 On April 6, 2002, [REDACTED] age 17 was transferred to Lauderdale-by-the-Sea
4 On April 8, 2002, CEDU counseling staff conducted internal investigation regarding [REDACTED] inappropriate
5 sexual conduct.
6 Information gathered from Special Incident Reports submitted to CCL:
7 [REDACTED] age 16 years old, DOB ? DOA 01-21-02
8 It was disclosed on April 10, 2002 that on January 21, 2002, [REDACTED] was taking a shower when [REDACTED]
9 entered the shower and tried to slap [REDACTED] with his penis.
10 No staff's named entered as to who [REDACTED] disclosed the above information to,
11 Supervisor, parents, school nurse and clinical services notified. [REDACTED] has been removed from the campus.
12 Incident to be processed in group therapy sessions
13 Report submitted by, Tony Becker on 04-10-02
14 Report reviewed/ Approved by Dr. James Powell on 04-11-02.
15 [REDACTED] age 17 DOB [REDACTED] DOA 07-27-01
16 [REDACTED] disclosed on April 10, 2002, that on several occasions (dates varies) [REDACTED] had run his hand down
17 between [REDACTED] buttocks.
18 No name listed of staff as to the above information was disclosed to
19 Supervisor, parents, school nurse and clinical services notified. [REDACTED] transitioned to a wilderness program.
20 Incident to be processed in group and individual therapy sessions
21 Report submitted by Tony Becker on 04-10-02
22 Report reviewed/ Approved by Tony Becker on 04-11-02
23 [REDACTED] age 15 [REDACTED] DOA 01-05-02
24 [REDACTED] disclosed on April 10, 2002, that on several occasions (03/02 to 04/02) [REDACTED] grasped his buttocks and
25 penis through his pants.
26 No name listed of staff as to the above information was disclosed to
27 Supervisor, parents, school nurse and clinical services notified. [REDACTED] has been removed from campus
28 Incident to be processed in group therapy sessions
29 Report submitted by Tony Becker on 04-10-02
30 Report reviewed/ Approved by Tony Becker on 04-11-02
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LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 320-2058

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 07/19/2002

FACILITY EVALUATION REPORT

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DOYLE, PATRICIA
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174
TYPE OF VISIT:
MET WITH:

STATE: CA
CENSUS:
UNANNOUNCED

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 05/31/2002
TIME BEGAN:
TIME COMPLETED:

NARRATIVE

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SUPERVISOR'S NAME: Frankie Shelton

TELEPHONE: 909782-4207

LICENSING EVALUATOR NAME: Gretchen Guillen

TELEPHONE: 909 782-4157

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 05/31/2002

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 05/31/2002

This report must be available at the facility for public review (3 years).

FACILITY EVALUATION REPORT (Cont)FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
DEFICIENCY INFORMATION FOR THIS PAGE:FACILITY NUMBER: 366402761
VISIT DATE: 05/31/2002

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A	1 Facility failed to provide proper supervision, 2 resulting in the sexual abuse of minors. 3 4 5 6 7	1 2 3 4 5 6 7
Type A	1 Facility violated the rights of minors that were 2 sexually abused at the hands of two minor 3 residents within dorms of the group home 4 cottages. 5 6 7	1 2 3 4 5 6 7
Type A	1 Facility failed to protect the victims that were 2 sexually and physically abused by two minor 3 residents. 4 5 6 7	1 2 3 4 5 6 7
Type A	1 Facility failed to operate according to the plan of 2 operation in reporting any and all 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

SUPERVISOR'S NAME: Frankie Shelton

LICENSING EVALUATOR NAME: Gretchen Guillen

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909782-4207

TELEPHONE: 909 782-4157

DATE: 05/31/2002

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 05/31/2002

This Notice must be posted for 30 days

LIC809 (FAS) - (06/04)

Page: Incorrect data type for operator or @Function: Text expected of

FACILITY EVALUATION REPORT

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DR. JAMES POWELL
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174
TYPE OF VISIT: Case Management
MET WITH: Bill Shea

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 07/18/2002
TIME BEGAN: 11:00 AM
TIME COMPLETED: 04:15 PM

STATE: CA
CENSUS: 115
UNANNOUNCED

NARRATIVE

1 LPAs L.Enea, L.Jeffers and G.Guillen to facility for an unannounced site visit for the purpose of completing
2 annual facility visit started on 03-07-02. The inspection consisted of facility grounds inside and out, staff &
3 client records. Due to time constraints LPA will return at a later to complete annual review.
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SUPERVISOR'S NAME: Florence Manos

LICENSING EVALUATOR NAME: Gretchen Guillen

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 320-2025

TELEPHONE: 909 320-2058

DATE: 07/18/2002

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 07/18/2002

This report must be available at the facility for public review (3 years).

Page: 1 of 1

LIC185 (FAS) - (5/99) - (PUBLIC)

CONTACT SHEET

This form is intended to document contacts concerning the facility identified below. Such contacts may include notification of corrections by the facility. Limit the information to public information. File on the top right side of the facility folder. Enter t/c (telephone call) or o/v (other visit) in the first column. Enter the contact date in the second column. Under Summary of Contacts enter relevant information including action taken and follow up. Enter initial and last name after each entry.

FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761
Contact Type	Date	Summary of Contacts
t/c	09/04/2002	1 Contacted CEDU administration this date to discuss incident reports. Spoke with Bill 2 Shay who indicated that I needed to speak with Dr. Powell about the incident reports 3 Left number with Mr. Shay who stated that he would have Dr. Powell return the phone call. L Enea LPA 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3

Page: of

FACILITY EVALUATION REPORT

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DR. JAMES POWELL
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174
TYPE OF VISIT:
MET WITH:

STATE: CA
CENSUS:
UNANNOUNCED

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 09/24/2002
TIME BEGAN:
TIME COMPLETED:

NARRATIVE

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SUPERVISOR'S NAME: Florence Manos

LICENSING EVALUATOR NAME: Gretchen Guillen

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 320-2025

TELEPHONE: 909 320-2058

DATE: 07/18/2002

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 07/18/2002

This report must be available at the facility for public review (3 years).

FACILITY EVALUATION REPORT

FACILITY NAME:	CEDU SCHOOL-MAIN CAMPUS	FACILITY NUMBER:	366402761
ADMINISTRATOR:	DR. JAMES POWELL	FACILITY TYPE:	730
ADDRESS:	3500 SEYMOUR ROAD	TELEPHONE:	(909) 867-2722
CITY:	RUNNING SPRINGS	ZIP CODE:	92382
CAPACITY:	174	DATE:	09/24/2002
TYPE OF VISIT:	Case Management	CENSUS:	UNANNOUNCED
MET WITH:	Dr.Powell	TIME BEGAN:	11:30 AM
		TIME COMPLETED:	03:15 PM

NARRATIVE

1 LPA's S.Hudak, G.Guillen, and LPS Florence Manos to facility for an unannounced site visit for the purpose of
2 completing annual facility visit, started on 07-18-02. The inspection consisted of facility grounds inside and
3 out, client records. Due to time constraints LPA will return at a later date to complete annual review.
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20 See original dated 09-24-02 for signatures.
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SUPERVISOR'S NAME: Florence Manos

LICENSING EVALUATOR NAME: Gretchen Guillen

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 320-2025

TELEPHONE: 909 320-2058

DATE: 12/13/2002

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 12/13/2002

This report must be available at the facility for public review (3 years).

Page: 1 of 1

FACILITY EVALUATION REPORT

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
ADMINISTRATOR: DR. JAMES POWELL
ADDRESS: 3500 SEYMOUR ROAD
CITY: RUNNING SPRINGS
CAPACITY: 174
TYPE OF VISIT: Case Management
MET WITH: Dr. Powell and Anthony Becker

STATE: CA
CENSUS: 72
UNANNOUNCED

FACILITY NUMBER: 366402761
FACILITY TYPE: 730
TELEPHONE: (909) 867-2722
ZIP CODE: 92382
DATE: 01/09/2003
TIME BEGAN: 10:15 AM
TIME COMPLETED: 01:35 PM

NARRATIVE

1 A CASELOAD MANAGEMENT VISIT WAS CONDUCTED ON THIS DATE. CCL
2 STAFF PRESENT AT THIS VISIT WERE ARTHUR CARTER, R.M, FLORENCE
3 MANOS, LUM, AND LPA's GRETCHEN GUILLEN AND CHRISTINA
4 GUTIERREZ. CEDU STAFF PRESENT WERE DR. POWELL, ADMINISTRATOR
5 AND TONY BECKER, PROGRAM DIRECTOR. THE PURPOSE OF THIS
6 MEETING WAS TO DISCUSS CONCERNS REGARDING AWOLs, LACK OF
7 CARE AND SUPERVISION, PHYSICAL PLANT AND REPORTING
8 REQUIREMENTS. AN OFFICE MEETING WILL BE SCHEDULED WITHIN THE
9 NEXT 30 DAYS TO DETERMINE THE PROPER CORRECTIVE ACTIONS
10 REGARDING THE AREAS OF CONCERN.
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SUPERVISOR'S NAME: Florence Manos,
LICENSING EVALUATOR NAME: Christina Gutierrez
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207;
TELEPHONE: 909 782-4126;
DATE: 01/09/2003

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED ***

DATE: 01/09/2003

This report must be available at the facility for public review (3 years).

DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:

FACILITY NUMBER:

DATE(S) OF CONTACT:

COLLATERAL VISIT?

CEDU SCHOOL-MAIN
CAMPUS

366402761

01/09/2003

No

DURING THE COURSE OF THE FACILITY VISIT THE FOLLOWING INFORMATION WAS PROVIDED BY DR. JIM POWELL.

- 1 AWOLS - When a client awols, Dr. Powell notifies parents and asks if they want to hire a private
- 2 detective. Parents are notified within one hour from the time they have determined that the
- 3 client awol'd. Staff drives around the community to search for the runaways. Dr. Powell stated
- 4 that clients hitchhike out of town or go out of town by back road. Sometimes clients hide and
- 5 come back after an hour. He stated that the chronic runaways are staffed for a better
- 6 placement. The facility therapist is contracted out and is at the facility everyday, even on
- 7 weekends.
- 8
- 9
- 10 He stated that CEDU has Wilderness programs in other states that consist of intensive clinical
- 11 treatment and is physically rigorous and the supervision is 1:1 or 2:1.
- 12
- 13 Dr. Powell and Tony Becker review the applications and agree on admission of clients.
- 14 Thought disorders and extreme violence are not admitted. Clients with ODD, drug abuse and
- 15 problems in school are admitted. The program is no longer than 28 months.
- 16
- 17 Regarding mail: the client brings the letter open with an envelope. If the letter is addressed to
- 18 an authorized person then is it put in envelope, sealed and mailed. The letter is not read.
- 19
- 20 Phone calls: Staff listens on speaker phone only if client does not follow rules.
- 21
- 22
- 23 No clients on probation are accepted.
- 24
- 25 The ratio is 1:10, during activity (wilderness) the ratio is 1:4.
- 26
- 27 Regarding the client that swallowed cleaner, she did it in front of staff and threw it up
- 28 immediately.
- 29
- 30 [REDACTED] called friends in Ventura. She awol'd in the morning. If the dorm was full there
- 31 were 5 girls present. Supervision rounds are now staggered.
- 32
- 33 [REDACTED] went to a higher level of supervision, an all girl program
- 34
- 35

LICENSING EVALUATOR NAME: Christina Jaramillo

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207

DATE: 01/09/2003

DETAIL SUPPORTIVE INFORMATION (Cont)

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FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/09/2003	No

1 The private investigator that is used to locate the awol'd clients has a good network and all the
2 awols have been accounted for.

3
4 REGARDING [REDACTED]
5 The sheriff talke to her and she stated that she thought it was blanket covers that touched her
6 back and front. [REDACTED] asked duty on staff who was in her room. She stated that she was.
7 [REDACTED] then stated that she had a dream. They [REDACTED] stated that staff person Lee touched
8 her. [REDACTED] later recanted the allegation.
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LICENSING EVALUATOR NAME: Christina Jaramillo
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207
DATE: 01/09/2003

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/22/2003	No

1 ON 11/01/02 [REDACTED] CALLED AND LEFT A MESSAGE TO CONTACT HIM REGARDING
2 CEDU SCHOOL. IT TOOK SEVERAL ATTEMPTS FOR US TO CONTACT EACH OTHER. HE
3 STATED THAT HIS DAUGHTER [REDACTED] DIAGNOSED WITH ADHD/BI-POLAR
4 DISORDER WAS AT THE FACILITY FOR 8 DAYS WHEN SHE AND ANOTHER STUDENT NAMED
5 [REDACTED] LEFT THE CAMPUS-09/23/02. WE RECEIVED AN SIR DATED 09/26/03 REPORTING THE
6 [REDACTED] AWOL. [REDACTED] STATES THAT HE WAS NOT NOTIFIED OF HIS DAUGHTER'S
7 DEPARTURE UNTIL MONDAY MORNING. HE STATED THAT CEDU TOLD HIM THAT THEY
8 MADE BED CHECKS EVERY HOUR. HE STATED FURTHER THAT HIS DAUGHTER [REDACTED] WAS
9 A CHRONIC RUN AWAY AND THAT THE SCHOOL HAD SET HER UP WITH A ROOMMATE THAT
10 HAD RUN AWAY BEFORE. HE STATED THAT ON THE DAY THE GIRLS RAN AWAY, ANOTHER
11 STUDENT HAD TRIED TO COMMIT SUICIDE BY SWALLOWING A GLASS OF BLEACH. WHEN
12 THIS HAPPENED ALL OF THE REDIDENTS BECAME ESCALATED AND THAT THE SCHOOL
13 PUT MOST OF THE CLIENTS IN THE MAIN BLDG., LEAVING [REDACTED] AND [REDACTED] IN THEIR
14 COTTAGE WITH NO SUPERVISION. HAVING NO ONE TO SUPERVISE THEM, THE GIRLS
15 DECIDED TO LEAVE THE CAMPUS. [REDACTED] STATED THAT THE SCHOOL DID NOTHING
16 TO FIND THE GIRLS AND THAT HE HAD TO HIRE A PRIVATE DETECTIVE TO LOCATE THE
17 GIRLS. THEY WERE FOUND IN VENTURA A FEW DAYS LATER. [REDACTED] PHONE
18 NUMBER AT WORK IS [REDACTED]
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LICENSING EVALUATOR NAME: Christina Jaramillo
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207
DATE: 01/06/2004

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS
FACILITY NUMBER: 366402761
DATE(S) OF CONTACT: 01/22/2003
COLLATERAL VISIT? No

1 LPA CALLED FORMER CEDU CLIENT [REDACTED] HOME ON THIS DATE. [REDACTED]
2 MOTHER [REDACTED] ANSWERED. SHE STATED THAT [REDACTED] WAS IN A RESIDENTIAL
3 PROGRAM IN MONTANA. SHE STATED THAT [REDACTED] HAD SPOKEN TO HER REGARDING
4 THE AWOL WITH [REDACTED] STATED THAT [REDACTED] TOLD HER THEY
5 KNEW WHEN THE SUPERVISING STAFF WOULD COME TO CHECK ON THEM. THE NIGHT
6 THEY AWOL'D THERE WAS A BED CHECK AT 9:30 PM AND AT 12:30PM STAFF OPENED THE
7 DOOR AND LOOKED IN WITH A FLASHLIGHT BUT DID NOT GO IN ROOM OR DO A SKIN
8 CHECK. THEY AWOL'D AROUND 12:30 AND WERE IN VENTURA BY 3:30a.m.

9 THAT DAY, [REDACTED] WITNESSED ANOTHER CLIENT NAMED [REDACTED] ATTEMPT SUICIDE BY
10 DRINKING DEGREASER. THIS OCCURRED AT THE MAIN HOUSE IN THE ATRIUM. [REDACTED] HAD
11 TO GO TO ATRIUM TO GET STAFF. IT WAS SUNDAY MOVIE NIGHT AND CASTAWAY WAS
12 BEING SHOWN. A GROUP OF CLIENTS BECAME ESCALATED IN THE KITCHEN HALLWAY. A
13 KIND OF RIOT OCCURRED AND CLIENTS WERE RUNNING AWAY. [REDACTED] WAS "IN
14 CHARGE" OF A NEW CLIENT. A NEW STAFF PERSON NAMED [REDACTED] ENTERS [REDACTED]
15 DORM AND STATES THAT IT IS "CRAZY OUT HERE", MEANING WHERE THE ESCALATION OF
16 THE OTHER STUDENTS WAS OCCURRING. SHE TOLD [REDACTED] AND [REDACTED] TO "BE SAFE
17 AND GOOD NIGHT". [REDACTED] WAS DESIGNATED AS A DORM HEAD. THIS MEANT SHE WAS
18 TO WATCH OVER [REDACTED] AND [REDACTED] HAD A "SAFETY ESCORT" (ANOTHER
19 CLIENT). THERE IS A PAY PHONE ON CAMPUS AND [REDACTED] USED IT TO CALL A
20 FRIEND TO PICK THEM UP. [REDACTED] STATED THAT [REDACTED] TOLD HER THERE ARE
21 ALOT OF AWOLS ON SUNDAYS BECAUSE THE STAFF ARE AT THE ATRIUM.

22
23
24 LPA ASKED IF SHE USED THE PRIVATE INVESTIGATOR TO LOCATE [REDACTED]. SHE STATED
25 THAT HE DID LOCATE [REDACTED] HOWEVER, WHEN HE IS HIRED, HE IS EXPECTED TO
26 RELAY INFORMATION TO CEDU NOT TO THE PARENTS THAT PAY FOR HIS SERVICES. SHE
27 STATED THAT CEDU TELLS THE PARENTS THAT BEDCHECKS ARE DONE. SHE STATED
28 THAT HER DAUGHTER [REDACTED] AND ANOTHER CLIENT NAMED [REDACTED] WOULD LEAVE THE
29 DORMS AT NIGHT TO MEET EACH OTHER. STAFF PERSON STEVE ORNELAS TOLD
30 STUDENTS IN GROUP WITH [REDACTED] PRESENT THE [REDACTED] HAD THREATENED TO
31 PRESS CHARGES AGAINST [REDACTED] IF ANYTHING HAPPENED TO [REDACTED] WAS
32 RIDICULED BY THE OTHER CLIENTS.
33 [REDACTED] STATED THAT IN ORDER TO SPEAK TO [REDACTED] THAT HER SOCIAL WORKER
34 AT THE RESIDENTIAL FACILITY IN MONTANA WOULD HAVE TO BE CONTACTED. LPA LEFT A
35 MESSAGE FOR JIM ROGERS AT (406) 754-3133.

LICENSING EVALUATOR NAME: C hristina Jaramillo
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207
DATE: 01/06/2004

DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:

FACILITY NUMBER:

DATE(S) OF CONTACT:

COLLATERAL VISIT?

CEDU SCHOOL-MAIN
CAMPUS

366402761

02/11/2003

No

1 LPA JARAMILLO CONDUCTED A TELEPHONE INTERVIEW WITH [REDACTED] ON THIS
2 DATE. [REDACTED] STATED THAT ON THE DAY THE AWOL WITH [REDACTED] OCCURRED THAT
3 IT WAS APPROXIMATELY 11PM. THEY WERE SLEEPING UPSTAIRS AND EXITED THROUGH
4 THE FRONT DOOR. SHE STATED THAT ON THE NIGHT THEY AWOL'D THERE WERE ABOUT
5 10 "KIDS FLIPPING OUT" IN THE CAFETERIA MAIN ROOM. STAFF DID NOT PERFORM THE
6 ROUTINE SUPERVISION OF CLIENTS ON THAT NIGHT. USUALLY, STAFF WOULD DO ROOM
7 CHECKS AFTER 12 MIDNIGHT EVERY 4 HOURS. THEY SHINE A FLASHLIGHT IN THE
8 BEDROOM BUT DO NOT DO SKIN CHECKS. SHE STATED THAT CEDU STAFF DID NOT KNOW
9 ABOUT THE AWOL UNTIL 3a.m. THE NEXT DAY. SHE STATED THAT SHE AND [REDACTED]
10 HITCHHIKED DOWN THE HILL WITH A TRUCKER. THEY WENT TO THOUSAND OAKS AND
11 THEY WERE EVENTUALLY FOUND THERE. SHE STATED THAT THE DORM HEAD (A CLIENT)
12 PROVIDES SUPERVISION IN THE DORM AND "NARCS OUT OTHER KIDS".
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LICENSING EVALUATOR NAME: Christina Jaramillo

TELEPHONE: 909 782-4207

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 01/06/2004

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	07/18/2003	No

1 DURING THE COURSE OF THE OFFICE CONFERENCE HELD WITH CEDU STAFF, THE
2 FACILITY WAS CITED FOR LACK OF CARE AND SUPERVISION REGARDING THE AWOL OF
3 [REDACTED] AND [REDACTED]
4 [REDACTED]

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LICENSING EVALUATOR NAME: Christina Jaramillo
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909 782-4207
DATE: 01/06/2004

CONTACT SHEET

This form is intended to document contacts concerning the facility identified below. Such contacts may include notification of corrections by the facility. Limit the information to public information. File on the top right side of the facility folder. Enter t/c (telephone call) or o/v (other visit) in the first column. Enter the contact date in the second column. Under Summary of Contacts enter relevant information including action taken and follow up. Enter initial and last name after each entry.

FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761
Contact Type	Date	Summary of Contacts
t/c	10/27/2003	1 LPA Baris received call from Rochelle Collins, advised contact is Brenda Elliot, director of middle school (909)867-4500 reporting that there was no power at the school. The facility was evacuated and relocated to Big Bear Lake at Northwood LPA requested list of clients. LPA was advised there were 96 clients total, 47 from middle school and 49 from high school.
t/c	10/28/2003	1 LPA Baris contacted Brandi Elliot for update on status of clients. Spoke with Brandi Elliot (909)867-4500. Brandi informed LPA that they were getting ready to re-evacuate to Pomona from Northwood Resort. She was not able to provide address where they were moving to, but stated she would call back when they did.
t/c	10/28/2003	1 LPA received voice message from Dr. George Condice, executive director of CEDU, (949)887-7113, he reported the address at Pomona as 1601 W. Mission Blvd. He also stated the kids were all safe and fed.
t/c	10/29/2003	1 LPA Baris contacted Dr Condice to ask what kind of facility was being used for evacuation. Dr. Condice informed LPA that the name was Boyd Furniture. He also stated that it was about 45,000 square feet. The boys and girls are in separate wings. He stated this was much better to supervise than the Red Cross. The Salvation Army is providing them with hot food. They found out about the warehouse from one of the parents from one of the sister schools. Dr. Condice did not know the status of the facility at this time. He stated he would update CCL when he received any information.
t/c	10/31/2003	1 LPA Baris returned to CCL office after office had been closed for two days, 10/29&30/03 due to bad air quality. LPA had voice mail from 10/30/03 AM from Dr. George Condice stating that they had secured a camp in Malibu Canyon called Camp Mount Craft (not sure of spelling), 26801 Dorothy Drive, Calabasas, CA. Dr. Condice described the camp as being an accredited campsite with cabins, hot showers, swimming pool and volleyball courts. They are going back to their normal business day and would probably be there a week. Dr. Condice stated that as of 9:30 am on day of call, CEDU was still standing. Dr. Condice provided LPA with his cell# (949)887-7113 or (909)236-0932, but stated that they may not have phone reception there and if so can call the main number.
t/c	10/31/2003	1 LPA Baris called numbers left by Dr. Condice as well as Tel# for Brandi Elliot received earlier (909)867-4500. Unable to speak to anyone. Not clear when the evacuation took place or spelling of name of camp, how to get in contact, current status.
t/c	10/31/2003	1 LPA Baris received phone message from Dr. George Condice of CEDU stating that the name of new evacuation site is Camp Mount Craggs, 26801 Dorothy Drive, Calabasas, CA 91302, contact Tel# (818)222-5327. Message stated that everyone, staff and clients, are fine but exhausted. All clients have their own beds, hot meals and classes have started. A Halloween party is planned for this evening. Message also stated that LPA will be called again on Monday.
t/c	11/07/2003	1 LPA Baris received forwarded message from LUM Florence Manos at 11:11 am on Friday 11/7/03: message is from David Woldemu, attorney for CEDU school stating he would like to talk regarding plans for another move of clients. Message states he understands CCL is aware that CEDU was evacuated and has already moved two times. "Assuming this being Wednesday, it would probably be 5 days or more before moving back..." Attorney described everything being problematic. Attorney requested call back at (818)888-1661.

STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
COMPLAINT REPORT

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
 COMMUNITY CARE LICENSING DIVISION
 Pacific Inland, 3737 Main Street
 Riverside, CA 92501

This form is intended to document complaints received in the licensing office. Unless the complaint is considered harassment, a licensing visit must be conducted within 10 calendar days after receipt of the complaint.

REPORT		☐ URGENT ☐ PRIORITY ☐ RIS REFERL	
REPORTED BY TELEPHONE	PRIORITY NUMBER:		
COMPLAINANT NAME	DISTRICT OFFICE Pacific Inland	VISIT DUE DATE 01/15/2004	CONTROL NUMBER 198105
ADDRESS	FACILITY INFORMATION		
STREET	TYPE OF FACILITY 730	FACILITY FILE NUMBER 366402761	
CITY	FACILITY NAME CEDU SCHOOL-MAIN CAMPUS		
ZIP CODE	ADDRESS 3500 SEYMOUR ROAD		
TELEPHONE NUMBER (DAY)	CITY RUNNING SPRINGS		
TELEPHONE NUMBER (EVENING)	ZIP CODE 92382		
RELATIONSHIP / INVOLVEMENT WITH FACILITY	TELEPHONE NUMBER (909) 867-2722		
WAS ABUSE REPORT REQUIRED AND FILED?	NO		
DOES COMPLAINANT WISH TO REMAIN ANONYMOUS?	YES		

NATURE OF COMPLAINT (Separate complaint into specific allegations and assign one of the following complaint codes:)

- | | | | | |
|---------------------------------------|-------------------|---------------------------------|---------------------|------------------------|
| 1. Physical Abuse/Corporal Punishment | 5. Fire Clearance | 9. License | 13. Medication | 17. Financial Issues |
| 2. Sexual Abuse | 6. Crimes | 10. Neglect/Lack of Supervision | 14. Financial Abuse | 18. Questionable Death |
| 3. Personal Rights | 7. Physical Plant | 11. Food Service | 15. Level of Care | 19. Other |
| 4. Unlicensed Care | 8. Record Keeping | 12. False Statements | 16. Qualifications | |

COMPLAINT CODE	ALLEGATIONS	RESOLUTION CODE		
		S	I	U
3	1 Clients personal mail is read by facility	☒	☐	☐
	2			
	3			
3	1 Clients do not have an infirmary/isolation room	☒	☐	☐
	2			
	3			
	1	☐	☐	☐
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	2			
	3			
	1	☐	☐	☐
	2			
	3			

RECEIVED BY Elvia Baris	DATE 01/05/2004	TIME 08:13 AM
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STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
Pacific Inland, 3737 Main Street
Riverside, CA 92501

COMPLAINT REPORT (Cont)

Number	VISIT DUE DATE 01/15/2004	CONTROL NUMBER 198105
FACILITY NAME CEDU SCHOOL-MAIN CAMPUS	TYPE OF FACILITY 730	FACILITY FILE NUMBER 366402761

DETAILS OF ALLEGATION(S) / DESCRIPTION OF INCIDENT(S)

1 RP is father to [REDACTED] RP states client has been in placement since 09/03. He also informed LPA
2 that his daughter was not a voluntary placement and has had no prior group home placement. RP stated he had been twice to
3 facility in October and November 2003. He described facility as "lock-down school, no infirmaries, phone calls monitored,
4 letters are all read and passed on to other people." When asked how he knew client's letters were read, he stated, "because
5 they're faxed back to my ex-wife's lawyer who holds them up in court." RP stated that the facility is an NPS (non-public
6 school). He has asked for 5 months to get names of teaches and has not received this information. He has never had a
7 teacher conference and has never spoken to a teacher. The only input he gets regarding her schooling is, "Your daughter is
8 doing okay." RP further stated that daughter only gets 2 1/2 hours of school a day and the facility has no desks. When asked
9 why he had not called before, he stated that he had not been aware that the facility had a license (program) that could be
10 reviewed.
11
12
13
14

PRE-INVESTIGATION CONTACT WITH COMPLAINANT		POST-INVESTIGATION CONTACT WITH COMPLAINANT	
DATE CONTACTED 01/02/2004	PERSON CONTACTED [REDACTED]	DATE CONTACTED 05/04/2004	PERSON CONTACTED [REDACTED]
HOW CONTACTED: TELEPHONE		HOW CONTACTED: TELEPHONE	
1 LPA Baris received telephone complaint from RP. RP was	1 LPA left voice message with RP informing him complaint	2 informed by LPA that I would be doing the investigation.	2 findings.
3	3	4	4
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SUMMARY OF OTHER CONTACTS / REPORTS

1 10 day visit conducted 01/13/04.
2
3 See LIC 185
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FOLLOW-UP COMMENTS

1 Facility is in process of SOF to revoke license.
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LICENSING EVALUATOR'S SIGNATURE	DATE	LICENSING SUPERVISOR'S SIGNATURE	DATE
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DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/28/2004	No

LPA Baris conducted a telephone interview with ex-client in New York [REDACTED]
[REDACTED] at CEDU for 4 1/2 months:

- 1
- 2 How was personal mail for clients handled? "Letters were read by a lady named Beth Hallmark."
- 3 All the letters? "Yes."
- 4 When you received your letters, were they opened? "Yes, the letters were kept in an office and after 4 o'clock a client would pick up the mail."
- 5 Was it always the same client? "Depended who was assigned.: We would then meet in a certain area, boys and girls, and the mail was given to us. Dorm time began at 4:05 PM. It was structured time in the dorm for 1 hour."
- 6 The assigned client would distribute the mail."
- 7 Regarding the out-going mail, [REDACTED] stated: "You could not seal your letters and they were read as well. Of you were sending a fax, they were read as well. Certain mail was denied. If you were not on a certain level, you couldn't get mail from certain people."
- 8 What certain people? "There were four levels: Discovery, Quest, Challenge and New Horizons. For the Discovery level, can only get mail from parents and nobody else, not your grandparents, just your parents."
- 9 For the Quest, cannot talk to grandparents. There was no access to phones. You could only talk to parents one time per week for 15 minutes on speaker phones."
- 10 "If asked to call licensing, would they let you? "No, none of the kids knew they could call social services. Only the social services would come to CEDU is if someone had been molested or something."
- 11 Did the facility go over your personal rights with you? "No, not in the beginning, only when I was about to leave."
- 12 [REDACTED] stated that she was never given a personal rights form and that no one told her she could call licensing."
- 13 She also stated she never signed any documents when she first arrived or when she left."
- 14 Did you ever get ill when you were at CEDU? "After fire evacuations I had the flu. I was throwing up all night basically. A lot of people were, like an epidemic in our school. What happens is you go to the nurse and if she's there, she give you medications, flu stuff."
- 15 [REDACTED] stated this medication is not prescribed."
- 16 Did the nurse give you something? "Yes, for my nausea."
- 17 Do you know what medication she gave you? "She just handed me the pill."
- 18 Did you go see the doctor? Per [REDACTED] the doctor was contacted and prescribed some medication for her, but she was not seen by the doctor."
- 19 When ill, did you stay there in your room? "No, I stayed in the boys dorm. We were isolated in one room."
- 20 Who is we? "The other girls that were sick." Was a staff there? "Yes."
- 21 Which boy's dorm was this in? "Shea." [REDACTED] stated there was no room number. She also stated that at 9 PM, bed time, they had to walk in the snow back to their dorms to sleep. Clients would wake up at 5:30 AM to do chores then at 7 AM walked to the Shea dorms. She stated they were there for 3 days."
- 22 [REDACTED] stated that night staff did not do anything because they are not allowed to give meds. She had thrown up about 10 or 12 times that night."

LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

CONTACT SHEET

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FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761
Contact Type	Date	Summary of Contacts
t/c	01/02/2004	1 LPA Baris received complaint call from [REDACTED] in New York [REDACTED] 2 regarding his daughter [REDACTED] 3
t/c	01/07/2004	1 LPA Baris received a call from [REDACTED] stating he wished to fax a letter with 2 more information. LPA provided fax number. 3 LPA Baris received a fax letter from [REDACTED]
o/v	01/09/2004	1 LPA Baris received fax letter from RP [REDACTED] stating he had advised CEDU y 2 E-mail he would seek assistance from DSS... 3
t/c	01/12/2004	1 LPA Baris received fax letter from RP [REDACTED] stating that on 1/7/04, clients were 2 taken to admin. office of CEDU and demanded to sign various legal forms. 3
o/v	01/13/2004	1 LPA's Lami Dogonyaro and Elvia Baris to facility to initiate 10 day visit on complaint # 2 198105. At time of visit, LPA was informed that client [REDACTED] had left the 3 facility on Friday 01/09/04. Ex-client file was reviewed at time of visit.
t/c	01/14/2004	1 LPA Baris called RP [REDACTED] to inform him I needed to interview 2 his daughter. Requested he call back to provide information on how his daughter can 3 be contacted.
t/c	01/14/2004	1 LPA Baris received a return call from RP [REDACTED] and arrangements were made 2 to have phone interview with client for Wednesday 01/21/04 at 1 PM CA time. 3
o/v	05/03/2004	1 LPA Baris and Lami Dogonyaro to GH for client and staff interviews. Complaint was 2 closed. 3
t/c	05/05/2004	1 LPA Baris left VM on RP's telephone number providing complaint investigation findings. 2 3 1 2 3 1 2 3

Page: 1 of 1

COMPLAINT INVESTIGATION REPORT

This is an official report of an unannounced visit/investigation of a complaint received in our office on
01/05/2004 and conducted by Evaluator Elvia Baris

CONFIDENTIAL**COMPLAINT CONTROL NUMBER: 198105**

FACILITY NAME:	CEDU SCHOOL-MAIN CAMPUS	FACILITY NUMBER:	366402761
ADMINISTRATOR:	DR. JAMES POWELL	FACILITY TYPE:	730
ADDRESS:	3500 SEYMOUR ROAD	TELEPHONE:	(909) 867-2722
CITY:	RUNNING SPRINGS	ZIP CODE:	92382
CAPACITY:	174	STATE: CA	DATE: 01/13/2004
		CENSUS: 105	TIME VISIT BEGAN: 09:30 AM
		UNANNOUNCED	TIME COMPLETED: 04:20 PM
MET WITH:	DR GEORGE CONDAS/BILL SHEA		

ALLEGATION(S):

- 1 CODE #3-PERSONAL RIGHTS
- 2 CODE #3-PERSONAL RIGHTS
- 3
- 4
- 5
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- 9

INVESTIGATION FINDINGS:

- 1 LPA ELVIA BARIS AND LPA LAMI DOGONYARO CONDUCTED A 10-DAY COMPLAINT VISIT TO FACILITY
- 2 TODAY. STAFF AND CLIENTS FILES WERE SELECTED FOR REVIEW AND THE FACILITY WAS TOURED
- 3 INSIDE AND OUTSIDE. INTERVIEW WAS CONDUCTED WITH STAFF AND CLIENTS. BASED ON
- 4 AVAILABLE INFORMATION, MORE TIME IS NEEDED TO CONDUCT AN INVESTIGATION.
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Needs Further Investigation**Estimated Days of Completion: 30****SUPERVISOR'S NAME:** Frankie Shelton**TELEPHONE:** 909-782-4207**LICENSING EVALUATOR NAME:** Elvia Baris**TELEPHONE:** 909)782-3279**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 01/13/2004**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:** *** SIGNED *****DATE:** 01/13/2004

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/13/2004	No

1 INTERVIEW WITH CLIENT:

2
3 17 YR OLD [REDACTED] STATED THAT HE WAS PRESENT DURING THE INCIDENT. BASICALLY HE
4 SAID HE HAD THREATENED [REDACTED] TO GET OUT OF THE WAY BECAUSE HE AND [REDACTED]
5 WERE FIGHTING. THERE WERE NO STAFF PRESENT AT THE TIME. STAFF WAS OUT IN ANOTHER
6 COMPLEX, MAKING HIS ROUND AROUND 11:00 PM.

7
8 REGARDING MAIL, [REDACTED] STATED THAT THEIR MAILS ARE SCANNED, BUT NOT READ BY STAFF.
9 HE ALSO ADDED THAT WHEN CLIENTS FIRST GET HERE, THEY WILL READ THE LETTERS GOING OUT
10 FIRST FOR NOT "SHOPPING", THREATENING OR CUSSING.

11 REGARDING RAPS, HE STATED THE SESSIONS ARE 2 1/2 HOURS TO 3 HOURS TIME AND SOME STAFF
12 DO NOT LET CLIENTS GO TO THE BATHROOM DURING THIS TIME.

13 [REDACTED] STATED THERE IS NO ISOLATION ROOM. ABOUT 2 MONTHS AGO, THERE WAS AN ONGOING
14 ILLNESS WITH STOMACH VIRUS, RUNNING NOSE, ETC. ALL THE BOYS AND THE GIRLS WERE SENT
15 TO THEIR DORMS AND QUARANTINED DUE TO THEIR ILLNESS.
16 FOR STUDYING, ANDREW STATED THAT THERE IS ROOM FOR STUDYING AT THE LODGE. THERE ARE
17 TABLES AND THE AREA IS LIGHTED SO THAT THEY CAN STUDY.

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LICENSING EVALUATOR NAME: Elvia Baris

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909)782-3279

DATE: 01/13/2004

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/13/2004	No

1 Interviews regarding complaint # 198105 and case management visit:
2

3 [REDACTED] 16 years old, at facility 13 months, 10th grade:
4 Regarding SIR date of incident 11/03/03, [REDACTED] broke window. I was with him. He said there was
5 money in there and we were planning to run away with it. [REDACTED] stated the incident happened at night. "We
6 went and found the money, \$15.00. [REDACTED] asked staff to leave (to go to a store), but staff said no." [REDACTED] stated
7 there was one staff present. The window that was broken was an office door where in their sleeping area. There
8 was no staff watching. [REDACTED] stated that staff make rounds at night 1/2 to 1 hour apart.
9 Regarding mail, [REDACTED] stated he has received letters that have been opened. "Policy is you write your letter,
10 put in envelope, but not sealed."
11 [REDACTED] also disclosed that there had been a "quarantine" at the facility dorms after the fires. He stated he was
12 one of the clients that was ill. [REDACTED] stated the quarantine was for about a week. The food was brought to their
13 dorms.
14 Regarding school, [REDACTED] stated they do not get homework, only classwork. Occasionally they have to study for
15 a test. School consists of 2 core classes and 1 study hall M-F. On Tuesday and Thursday, they have an elective
16 1:30 to 3:00 then workout (PE). Monday, Wednesday and Friday they have RAP 1:30 to 4 PM. When asked if
17 clients were allowed to go to the rest-room during RAP session, he also stated they were not allowed. He
18 described RAP session as consisting of about 2-4 staff and 10-15 clients.
19

20 Patricia Blanchard, Manager High School Resource Coordinator Department:
21

22 Patricia stated that Tawny Cobb, administrative assistant, writes the incident reports. Regarding quarantine, she
23 stated the facility had a real bad flu problem and had the clients in a room in the main lodge. The ill clients
24 became so many that they were running out of room in the lodge. a dorm was used and the clients were
25 checked by the nurse and counselors. She had no clue how many clients were involved. Patricia stated that
26 there were 4 rooms in the lodge with separate couches. She stated there are 2-3 couches in every room. She
27 stated the clients would stay there during the day and if they felt better they returned to the dorm or stayed the
28 night. When asked how long this went on, she stated "Came in waves. Don't remember exact time. I think after
29 the evacuation."
30 LPA asked Patricia regarding incident with [REDACTED] due to Patricia's notation on client's file regarding sexual
31 incident of 12/5/03. Patricia stated that [REDACTED] was on full time restriction. She stated that meant that [REDACTED] was out
32 of classes. Teachers five [REDACTED] work assignments such as pots and pans, deep cleaning, etc. with staff
33 supervision. She stated the chores are related to what she needs to work on.
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LICENSING EVALUATOR NAME: Elvia Baris.

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 01/13/2004

CONTACT SHEET

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FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761
Contact Type	Date	Summary of Contacts
t/c	01/09/2004	LPA Baris contacted Dr. George Condace regarding 2 letters found per file review dated 1/6/03 that was sent to them. One letter was a notification of incomplete staff training plan and the other a notification of incomplete emergency intervention plan. LPA advised Dr. Condace that I only located a response to the notification of incomplete staff training dated 9/16/03. Dr. Condace stated he would look into that matter.
o/v	01/13/2004	LPA Baris had not received response from Dr. Condace regarding the facility response to EI plan corrections. During 10 day visit on complaint #198105/case management visit, LPA asked again regarding the status of EI plan. Dr. Condace informed LPA that he had not located any response to the letter from CCL regarding Emergency Intervention Plan corrections. Post issuing citation for plan or operation on 01/13/04 stating per POC that facility was to cease using physical intervention until the EI plan was approved, Dr. Condace stated that he has seen the EI plan and had "torn it apart". He stated he would have it ready to bring in to CCL office by Friday.
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DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	01/13/2004	No

1 INTERVIEW WITH CLIENT:

2
3 17 YR OLD [REDACTED] STATED THAT HE WAS PRESENT DURING THE INCIDENT. BASICALLY HE
4 SAID HE HAD THREATENED [REDACTED] TO GET OUT OF THE WAY BECAUSE HE AND [REDACTED]
5 WERE FIGHTING. THERE WERE NO STAFF PRESENT AT THE TIME. STAFF WAS OUT IN ANOTHER
6 COMPLEX, MAKING HIS ROUND AROUND 11:00 PM.

7
8 REGARDING MAILS, [REDACTED] STATED THAT THEIR MAILS ARE SCANNED, BUT NOT READ BY STAFF.
9 HE ALSO ADDED THAT WHEN CLIENTS FIRST GET HERE, THEY WILL READ THE LETTERS GOING OUT
10 FIRST FOR NOT "SHOPPING", THREATENING OR CUSSING.

11 REGARDING RAPs, HE STATED THE SESSIONS ARE 2 1/2 HOURS TO 3 HOURS TIME AND SOME STAFF
12 DO NOT LET CLIENTS GO TO THE BATHROOM DURING THIS TIME.

13 [REDACTED] STATED THERE IS NO ISOLATION ROOM. ABOUT 2 MONTHS AGO, THERE WAS AN ONGOING
14 ILLNESS WITH STOMACH VIRUS, RUNNING NOSE, ETC. ALL THE BOYS AND THE GIRLS WERE SENT
15 TO THEIR DORMS AND QUARANTINED DUE TO THEIR ILLNESS.

16 FOR STUDYING, [REDACTED] STATED THAT THERE IS ROOM FOR STUDYING AT THE LODGE. THERE ARE
17 TABLES AND THE AREA IS LIGHTED SO THAT THEY CAN STUDY.

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21
22 ATTEMPTED INTERVIEW WITH CLIENT [REDACTED] BUT HE WAS ON SCHEDULE FOR
23 BASKETBALL GAME. INTERVIEW WILL BE HELD AT A LATER TIME.

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LICENSING EVALUATOR NAME: Elvia Baris

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909)782-3279

DATE: 01/13/2004

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	03/10/2004	No

- 1 [REDACTED]
- 2 [REDACTED]
- 3 Length of time 8 months spent Christmas here.
- 4 [REDACTED]
- 5 Activities; We ACW Alternative curriculum Week we get to go to fields Trips , Dances,
- 6 Services.; Like they help up. we have to raps, Propheets, From the book of Propheets.
- 7 In the raps it's the appropriate place to confront people talk about things that bother you. How you got to CEDU
- 8 Not really like it here. I was doing drugs , sex, verbal abuse. To parent.
- 9 Attend school everyday.
- 10 Does not work.
- 11 NO CPI do on her. Seen them kicking things breaking windows Happens allot.
- 12 Staff restrain kids when they refuse to do things. They are not acting out or anything to hurt anyone.
- 13 They do not get
- 14 "Racquet meals" are now called "modified meals" since we left. Deserts are taken away.
- 15 Wanted to know if her friend was coming back. They got rid of her after we left. Her friend was happy that we
- 16 saw what happened to her.
- 17 She was only refusing.
- 18 They do not handle money.
- 19 Has a good relationship with Staff and kids at the group home.
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LICENSING EVALUATOR NAME: Naomi Plair-Lopez
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: (909)320-2103
DATE: 05/03/2004

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	03/10/2004	No

1 LPA Baris client interviews:

- 2
3 [REDACTED] 4 years old, [REDACTED] at facility 1 year and 2 months:
4
5 There were a f other girls and a lot of boys ill, like 6 or 7 boys ill that I can remember.
6 [REDACTED] and [REDACTED] and [REDACTED] Stated she got ill two times. First
7 time [REDACTED] and [REDACTED] staying at Shea Dorm, boy's dorm. Second time stayed at Shea dorm with
8 [REDACTED] There were other boys there staying at the dorm in different rooms. There was one faculty on site in the
9 main room.
10 Stated first time did not see doctor but they got her anti-biotics. Second time had flu, vomiting again did not see
11 the doctor. She stated she was also given medication, but did not think it was prescribed.
12 Stated that she did not think it was snowing at that time, but "very, very windy and everything was ice on the
13 ground." She is at Fleur dorm. Stated it is a long walk from her dorm to Shea dorm. She stated she had to walk
14 thru the high school field, long walk. Left to dorm about 7:15 Am and returned like 8 PM.
15
16 Stated mail cannot be closed to be mailed out and received mail that is open.
17 Stated she understands the GH services and activities. She states she does not receive an allowance yet since
18 she's been in placement. She has not made it to level to have allowance.
19 Regarding school attendance, today she did not attend due to illness, but has 4.0 grade average.
20 Discipline observed include work assignment hours, sweets taken away, if misbehaved before a meal, regular
21 meal not give but given a racquetball meal which consists of a sandwich with a slice of cheese, an apple and a
22 bottle of water, or do push ups, run laps, do crunches or put on a hold.
23 Staff to client relationships get along, so do client to client. Regarding supervision, sometimes one or two staff
24 watching the entire school.
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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 03/10/2004

DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:

FACILITY NUMBER:

DATE(S) OF CONTACT:

COLLATERAL VISIT?

CEDU SCHOOL-MAIN
CAMPUS

366402761

03/10/2004

No

1 Client interviews continued:

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3 [REDACTED] 14 years old, [REDACTED] at facility 1 yr 6 mo:

4

5 Stays at Fluor dorm. In early Dec or late November when ill stayed at Shea dorm (boys dorm) with [REDACTED]
6 [REDACTED] and [REDACTED]. Boys that were ill were there too, about three of them in their The
7 rooms the girls were staying at were unoccupied. "It was pretty cold. There was snow on the ground. It was a
8 long distance to walk to when ill." [REDACTED] stated she did not see a doctor, but did see a nurse. Her temperature
9 was taken and she had her sleep and ate chicken noodle soup every night. She did not recall taking meds.
10 [REDACTED] stated she had been experiencing problems with her stomach and had a fever of 102 degrees for about 3
11 days. She was ill for about a week. She stated she may have gotten some meds for her stomach, but she was
12 not sure.

13 [REDACTED] stated that she understands the group home's services and activities. She stated she gets no allowance.
14 Instead, she stated the clients have a personal account which they can get money out of, but no allowance is
15 given. [REDACTED] did not know the balance of her account.

16 [REDACTED] stated she goes to school on campus and goes every day.

17 Regarding discipline she has observed: restraints, people being put on the ground, staff sitting on clients, last
18 one saw end of January when she was with her mom and staff Mike Scotty sat on a boy. Stated she was not
19 sure if the boy was [REDACTED]. She also reported stated she has seen clients on "raquet meals". She stated
20 that this lunch consists of a cheese sandwich, and apple and water. This lunch is provided in place of the regular
21 meal when a client misbehaves prior to lunch. [REDACTED] also stated that personal mail is not mailed out promptly.
22 She stated she had written a letter to her parents and it took them a month to get it.

23 Regarding staff to client relationships and client to client relationships, [REDACTED] stated they get along well. She also
24 stated she felt the group home met her needs, but did not feel she gets as much accomplished with the
25 academics because of the other client's behavior in class.

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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 03/10/2004

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CEDU SCHOOL-MAIN CAMPUS	366402761	03/10/2004	No

1 Client interviews continued:
2
3 [REDACTED] 14 years old, [REDACTED] at facility almost 11 months, at Flur Dorm, room #1:
4
5 "Late November or early December I was ill and throwing up in one night about 7-8 times. Nurse Dee was
6 called." [REDACTED] stated that no doctor was seen, but the nurse gave her meds. [REDACTED] did not know what meds
7 were given to her. She stated she has a fever of 104.4 degrees for one day then down to 102.3 degrees. During
8 the day she was taken to the Shea dorm with [REDACTED] and [REDACTED] stated
9 there were about 12-14 boys on site. There were no meds available except for Tylenol or Midol when nurse was
10 not on site. The latest the nurse leaves is 8 PM and she was not sure what time the nurse came in.
11 [REDACTED] stated she cannot receive or mail sealed letters. She stated that she had sent a letter 2 months ago to a
12 friend and she received the letter yesterday stating that they had received her letter a week ago (it took facility
13 over a month to get her letter mailed).
14 [REDACTED] also stated that she has not received any allowance. She stated she has not seen any money since she
15 has been on campus. [REDACTED] stated that [REDACTED] has been on "racquet ball meals" over a week. The
16 "racquet ball meal" for breakfast consists of oatmeal, bread and water. For lunch it is a cheese sandwich (bread
17 and cheese only) an apple and water. For dinner, it is the same thing as for lunch. [REDACTED] staying in the girl's
18 dorm. The reason she cannot stay in "the pit" is because it is full at night. "The pit" is the high school house.
19 They sleep on the couches in the pit. Only middle school kids get "racquetball meals". The pit is only used for
20 sleeping and during the day they take the kids to the racquet ball courts. They are isolated. It's our "jail". We
21 call it "the cage". Boys and girls stay there. They have to work and no school.
22 [REDACTED] stated she feels the group home is not providing for her needs because another client, [REDACTED]
23 has been violent to her.
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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 03/10/2004

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/03/2004	No

LPA Baris went to Kitchen and spoke with food service staff Kathy Ayotte and Bob Cluney to inquire if any racket ball lunches are being prepared. Per Kathy, Bob and client who was assisting, no racketball lunches have been prepared since last visit from licensing. Bob Cluney informed LPA that he is the cousin to Dr. George Condas. LPA then proceeded to utility room of dorm where client was kept isolated on visit of 3/10/04 and fed racquet ball lunches. The room was empty. During this time, LPA was approached by staff by name of Rick Alyassi. LPA identified herself and showed picture ID. Rick stated he was counselor for the middle school and no clients from middle school were on discipline today. Subsequently, LPA went to upper area of lodge to check on medications. Spoke to Helen Pandeli, RN who stated she was full time, S-Thurs 12:30-9 PM. She stated other staff was Dolores Martin, LVN, full time, T-Sat 6:30-3 PM, Mary Succero, RN, part-time, works 2 days a week on varied days and Diane (Glenda) Walters, LVN, part time, F-M on varied days. Not enough time to check on meds or interview further due to client waiting to be interviewed.

LPA Baris client interviews:

██████████, 14 years old ██████████, at facility since 08/02, no prior GH placements, @ Shae dorm.

Does not understand GH services and activities. Go to bowling barn, movies, Museum of Tolerance, educational and fun field trips. "No money for allowance unless you are in New Horizons, a level. At that time you can get your own money, but they don't give us money. Regarding fining, states that if client breaks something, the parents are contacted and the parents have to pay for the damages. Regarding school attendance, he stated he was out of school for 2 weeks due to restriction. Stated he was on restriction because he broke the sex agreement, can't hold hands, kiss, etc. Shane stated he had consensual sex with another boy, 14 or 15 years old. Stated the other boy had been in his dorm/room but is now in a different room. Only had sex with boy one time and felt uncomfortable talking about it, other boy's name is ██████████. S on hane stated both reported the incident at the same time. At time of incident, only he and ██████████ were the only ones in the room, usually there are 4 boys. The incident happened at night on 4/12/04. One night staff on duty, Mike Smith. Per ██████████, his door was closed. Clients are allowed to keep doors closed, they automatically close. During restriction spent time at Alpine with a staff doing physical assignments like cleaning, vacuuming dusting, raking, shoveling, etc. No school work during the day only during dorm time. No racket ball lunches after last licensing visit. Discipline observed, has been personally restrained 20 some odd times. States one time could not recall when, last year 2 staff Scott Kretch and Munir Jones put him on the ground for refusing to go where he was directed. ██████████ stated he was not physically abusive to clients or staff at that time. Has not recently observed any restraints in a while. While on restriction, clients are not allowed to have any sweets, no laughing and no singing at any time and also have to sit on a hard chair. Raquet ball lunches are obsolete, but not they are called modified meals. Modified meals consist of not full course, will take some stuff out. Modified meals for not following agreements or dorm jobs. Stated relationshipw between staff and clients is good. Staff has helped him with relationship with his mom and their relationship. Client to client relationships is good. Shane feels program is meeting his needs besides his alcohol issue. No program to address this issue.

LICENSING EVALUATOR NAME: Elvia Baris
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909)782-3279
DATE: 05/03/2004

DETAIL SUPPORTIVE INFORMATION (Cont)

Pacific Inland, 3737 Main Street
Riverside, CA 92501

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FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	05/03/2004	No

1- [REDACTED] DOB: [REDACTED] 17 years old, @ facility 22 months. Stated she understands program and
2 activities. Stated she gets allowance every week. Stated all kids in high school get allowance. Stated Staff
3 Rochelle has allowance records. Allowance is provided once a week. No fining is done to her knowledge.
4 School attendance stated she finished all her classes at the end of March but will not complete the program until
5 June. June 19 is graduation day. Stated she had worked at an advertising company called The Right Angle,
6 but chose to quit her job. She was not comfortable with the people there. She did not get paid at the time, only
7 on internship for 2 months.
8 Discipline observed, writing or work assignments, escort, no restraints seen since last year, nothing else.
9 Relationship between staff and clients, "used to be very strong, but a lot of staff have left." Client to client
10 relationships are very disrespectful to each other, "usually pretty mean to each other." [REDACTED] stated each client
11 has a close knit group they get along well with. She feels this program has met her needs.
12
13 [REDACTED] @ fac 11 months. Understands GH services and activities. Understands
14 allowance. Money is in an account that the parents pay for. Have to be at facility at least a year and on
15 Challenge level to get money, otherwise not allowed to handle money. "Whatever we need, they'll pay for it, but
16 they won't give us the money. At this time [REDACTED] does not get an allowance. Regarding fining, if broke a window
17 states they have been told it would come out of their account. School attendance, "you have to go to school
18 unless you're ill or excused by staff for some other reason." [REDACTED] does not work. Not sure if she is a
19 sophomore or freshman. Discipline observed include restriction that consists of writing assignments and work
20 assignments. Stated that normally all clients get desert only on Saturday and about \$1.50 of candy and a soda
21 on Sundays, but if on restriction, they do not get that. Staff to client relationships, most of the time they get
22 along. Client to client relationships, "most of the time we get along, but sometimes they don't like each other.
23 Stated she feels Gh is providing services to meet her needs.
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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 05/03/2004

CONTACT SHEET

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FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761
Contact Type	Date	Summary of Contacts
t/c	05/04/2004	1 LPA Baris contacted Bill Shea age exception request for client [REDACTED] and 2 scheduled to graduate on August 2005. Advised client cannot stay at facility past age of 3 18. Suggest that plan for graduation be amended so that client can graduate before age 19. Bill Shea stated he would inform Dr. Condas.
t/c	05/14/2004	1 TCF atty Thomas Burton stated he was atty for RP/atty [REDACTED]. Per prior 2 conversation with [REDACTED], LPA was informed that his atty would contact 3 licensing regarding reviewing CEDU file. Atty Thomas Burton requested copies of CEDU file. LPA Baris consulted with LUM Frankie Shelton and received approval to submit copies of CCL pulic reports. Atty Thomas Burton provided address to mail copies to: P.O. Box 17120, Salt Lake City, Utah 84117, Tel# (801)918-1656.
t/c	05/24/2004	1 LPA Baris contacted attorney Thomas Burton (801)918-1656 to inform him that the 2 copies he requested were being mailed this day. 3
	05/26/2004	1 Office memo received dated 5/26/04 originally addressed to Florence Manos from 2 Sergio Ramirez. Note stated that Detective Wyatt (909)336-0600 has contacted Frankie 3 Shelton regarding ongoing investigation into a rape case that went on for 6 months. He has an inspection warrant that will be executed this Tuesday, June 1st at 10 AM. Frankie wanted an LPA to accompany the police.....
	05/27/2004	1 TCT Detective Wyatt (909)336-0600. Person who answered phone stated he is off until 2 Monday. Monday is Memorial Day holiday and LPA will be off. LPA left voice message 3 for Detective Wyatt (909)336-0601 providing private cell# to call and arrange to meet.
t/c	05/31/2004	1 LPA Baris received voice messge from Detective Wyatt stating they would be meeting 2 at Twin Peaks Sheriff's station at 10 AM on Monday, June 1, 2004 and planning to leave 3 to CEDU at 11:00 AM.
t/c	06/01/2004	1 LPA Baris received another fall from detective Wyatt as was leaving the office with LPA 2 Alison Harris. Advised detective Wyatt that we were on our way. 3
o/v	06/01/2004	1 LPA's Elvia Baris and Allison Harris to Twin Peaks's sheriff's station for briefing on 2 warrant and then to CEDU to assist sheriff's department with any licensing information. 3 Per Detective Wyatt, he would provide all the details of the new allegations the next day to CCL.
o/v	06/03/2004	1 LPA Baris met with LUM Frankie Shelton to brief her on the search warrant/new 2 allegations. LPA was not in the office on 6/2/04 due to illness. LPA recommended a 3 conference call with Detective Wyatt for details of the new allegations. LUM Frankie Shelton agreed, but when the call was made, we were informed Detective Wyatt would be out of the office until Monday 6/7/04.
	06/07/2004	1 TCF Detective Wyatt per conference call with LPA Baris and LUM Frankie Shelton, 2 Arrangements were made to meet at PICRO on Wednesday, June 9 AM. 3

CONTACT SHEET (Cont)

This form is intended to document contacts concerning the facility identified below. Such contacts may include notification of corrections by the facility. Limit the information to public information. File on the top right side of the facility folder. Enter t/c (telephone call) or o/v (other visit) in the first column. Enter the contact date in the second column. Under Summary of Contacts enter relevant information including action taken and follow up. Enter initial and last name after each entry.

FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761

Contact Type	Date	Summary of Contacts
t/c	06/09/2004	1 LPA contacted main number at San Bernardino Sheriff's office (909)336-0600. LPA 2 was informed that Detective Wyatt had called in sick. Message was left for Detective 3 Wyatt. LUM Frankie Shelton was informed. LPA was instructed by LUM Frankie Shelton to wait until meeting with Detective Wyatt before writing new LIC 802 on new allegations.
t/c	06/14/2004	1 RTCF Detective Wyatt apologized for not making arranged meeting on 6/9/04. New 2 meeting was scheduled for Wednesday 6/16/04. He stated CEDU had filed a lawsuit 3 against the Sheriff's Department and him. LPA informed LUM Frankie Shelton. When asked, LUM stated she would not need to be present for meeting with Detective Wyatt.
o/v	06/16/2004	1 LPA Baris met with Detective Wyatt. A copy of one police report for incident of 10/02/01 2 was obtained. Det. Wyatt was informed a complaint would be generated. 3
o/v	06/16/2004	1 LPA spoke with LUM Frankie Shelton regarding information received from Detective 2 Wyatt. LPA was instructed to wait until information was briefed with Atty Ramon Perez 3 the next day before writing LIC 802.
o/v	06/17/2004	1 Legal consult done this day with Ramon Perez. No legal consult paper was provided, 2 but per Ramon, okay to add allegations regarding 10/2/01 case and non-reporting of 3 case to LIC 802 he reviewed with other 6 allegations.
	06/17/2004	1 CONT: Ramon stated CEDU SOF needed to be done on new SOF format. Per Lum 2 Frankie Shelton, need to await scheduled SOF training for 6/24/04 and would get 's 3 other LPAs to assist with the CEDU SOF after the SOF training.
o/v	06/17/2004	1 LPA Baris provided LUM Frankie Shelton LIC 802 for CEDU. Control # 198615 was 2 assigned by Caroline Olive and LIC 802 was returned to Frankie. Frankie stated she 3 would refer it to Wendy at BOI.
		1 2 3
		1 2 3
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		1 2 3

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	06/01/2004	No

1 LPA Baris and Alison Harris to CEDU to assist Detective Wyatt of San Bernardino Sheriff Department in serving
2 a search warrant. Arrangements had been made for LPA's to meet at Twin Peaks Sheriff's Station. At time of
3 LPA's arrival, a briefing was being conducted by Detective Wyatt with about 17-18 deputies in preparation for
4 serving the search warrant. LPA's were not aware or expecting a large number of deputies that would be
5 participating in the search warrant. All the deputies and LPA's left at the same time for CEDU. The plan was to
6 have different deputies at different areas of the group home. LPA Baris was at the administrative office and LPA
7 Harris was at another station. At the time of arrival at CEDU, Bill Shea was in charge. Dr. George Condas was
8 not on site. Detective Wyatt spoke with Bill Shea and informed him of the search warrant. All the employees of
9 the office were brought into the front area. Detective Wyatt read Bill Shea the information on the search warrant
10 and informed him that staff were not allowed to use their computers or phones unless monitored by a deputy.
11 Bill Shea got on the phone with their attorneys and other administrators to inform them of the situation. There
12 was no interruption of client classes.
13 When LPA Harris came to the main office, she informed LPA Baris that some clients had come up to her making
14 allegations. She was told that a client had been provided a "racquet ball lunch" a few days earlier. LPA Baris
15 and Harris went to the kitchen area and started interviewing clients and staff. Bill Shea was asked by LPA's to
16 provide a copy of the middle school roster. Bill was speaking to the attorney on the phone and was complaining
17 that now licensing was also asking for things and interviewing clients. While LPA's were awaiting a client to be
18 brought for interviewing, Bill Shea requested to speak with LPA Baris. He stated that he was concerned about
19 how the clients would be affected by having all these deputies on grounds. He stated that the facility needed to
20 wind things down and that he felt licensing interviewing the clients was not helping. He wanted to do a
21 conference call with LPA Baris and their attorney, David. The attorney stated in so many words that government
22 agencies were not being considerate of clients. Bill and the attorney were stating that LPA Baris had not notified
23 at the onset of the visit, the purpose of LPA's visit to CEDU whether it was a complaint or annual visit. I informed
24 Bill Shea that when we (LPA's) first arrived, he was very involved with the detective, but I had managed to inform
25 in at the first opportunity that I would be provide him with a report stating LPA's had been to the facility. I also
26 informed him the report was already prepared. LPA Baris also informed Bill and the attorney that the visit was
27 not necessarily a complaint or annual visit. A case management could be conducted any time whenever it was
28 warranted. LPA also informed Bill and the attorney that it had not been in the plan to interview clients at this
29 time, but it was determined that there was a need. At that time, LPA Harris then came in and informed LPA
30 Baris that the client that had been requested for interview had arrived. Bill then made a comment stating that
31 LPA was still going to interview the client. Attorney then made a comment stating that licensing could do what
32 they wanted to do and he would do what he needed to do. LPA's continued client interview.
33 During the course of the visit, Detective Wyatt stated at the end of serving the search warrant, LPA's could meet
34 with him at the station and he would provide information regarding the allegations. Since the visit took longer
35 than anticipated, he stated he would provide licensing the information the following day per phone.

LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 06/01/2004

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	06/01/2004	No

1 LPA Baris interviews:

2

3 Marcos Burgos, PM shift cook, Sunday thru Thursday:

4

5 Marcos stated there had not been any racquet ball lunches prepared this week. he stated the last time that he
6 knew of they had been prepared was 2-3 weeks ago, "It's been a while". He stated the lunch staff was gone. "I
7 work the main corse, When that is done, my helpers do that. Staff Cathy Ajiot helps on Monday and Thursday.
8 Friday and Saturday supervisor Carol Vera cooks in the morning."

9

10
11 Client [REDACTED] at facility 1 1/2 years:

12

13 [REDACTED] was the client whose name was provided to LPA Harris by another client as being the client that was
14 provided the racquet ball lunch. Her last name was unknown until the copy of the middle school roster was
15 obtained. [REDACTED] stated she would be going home in 15 days to Santa Fe, New Mexico. Have you been on a
16 racquet ball lunch? "Yeah." When was that? "When I first got her about a year ago."
17 [REDACTED] was asked to describe the lunch: "Two pieces of bread, slice of cheese, water and apple." Do they still
18 serve this lunch? "Yeah last time was last night to [REDACTED] and 2 days ago. It happens often. [REDACTED]
19 walked with LPA's and showed where the racquet ball courts were."

20

21
22 Client [REDACTED], 14 years old from Phoenix Arizona.

23 [REDACTED] stated that they get a modified meal now. He stated the modified meal is the normal food, but "only a time
24 bit like I had it last week. For breakfast a bowl of cereal, toast ad apple. Toast instead of bread, cereal instead
25 of oatmeal." He stated that when he first arrived at CEDU, staff Althea pushed him down and dragged him by his
26 feet from the volleyball court to the racquetball court. He stated his face was on the ground in the sand. He then
27 had to sit in his own urine. Staff Munir Jones would not let him go to the rest room so he did it and since he had
28 told him not to (urinate), he made him sit on it (urine). Stated no witnesses. Also stated that when he was on the
29 deck and ex "old maintenance man" [REDACTED] saw staff Munir Jones kick him 3 times. He stated staff kicked him to
30 get client off him because client was poking his shoe. [REDACTED] stated he told a staff, Chizzy, but she didn't believe
31 him. He stated the kids go to the courts every single day. Each time he stated there were no witnesses and no
32 dates given/whole names.

33

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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 06/01/2004

DETAIL SUPPORTIVE INFORMATION

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME:

FACILITY NUMBER:

DATE(S) OF CONTACT:

COLLATERAL VISIT?

CEDU SCHOOL-MAIN
CAMPUS

366402761

06/16/2004

No

1 LPA Baris met with Detective Chuck Wyatt of the San Bernardino Sheriff Dept. for information on new
2 allegations. LUM Frankie Shelton had instructed LPA Baris on 6/3/04 to await until meeting with Detective Wyatt
3 before writing LIC 802 for new allegations. Detective Wyatt brought in documents for current investigation
4 regarding multiple rapes of client [REDACTED] by client [REDACTED] and
5 client [REDACTED], but stated copies could not be made. Detective Wyatt stated this multiple rape
6 case was assigned case# 040500970. He stated he felt this was a good case. He also clarified that [REDACTED] was
7 raped multiple times by [REDACTED] and [REDACTED] separately. [REDACTED] told Detective Wyatt that she
8 notified the staff and nothing was done. Every time it happened, she told the nurse. Avante did not know the
9 name of the nurse because per Wyatt, CEDU encourages first name only or title, such as "nurse". At the time of
10 the rapes, [REDACTED] was 15 years old. [REDACTED] also told Detective Wyatt that the first rape was in mid 9/01 within
11 the first week she was at CEDU. [REDACTED] reported that the first time she was raped by [REDACTED]. Staff told her
12 there was nothing they could do, but refer the matter to the "team leader". [REDACTED] was taken to a Dr. Simpson
13 who is the husband of CEDU staff counselor Cindy Simpson. [REDACTED] reported that after she saw Dr. Simpson,
14 she was given additional medications. When she asked what they were, she was informed they were birth
15 control pills. [REDACTED] stated she had not asked for birth control pills. Detective Wyatt stated he confirmed there is
16 a Dr. Simpson and he will be going to get copy of medical reports for [REDACTED]. [REDACTED] stated the second time she
17 was raped was by [REDACTED] at "stone table", a rock formation on CEDU grounds with a large flat top.
18 [REDACTED] reported that the rapes were a total of 6-10 times. [REDACTED] stated she had a "big sister" assigned to her at
19 CEDU. [REDACTED] who is now living in Texas. [REDACTED] told [REDACTED] about the rapes, but [REDACTED] told her it
20 happened to all the girls. After 8 RAP sessions of mentioning the rapes, [REDACTED] stated she stopped because the
21 other girls were calling her a slut and whore. The other girls stated it was "something that happens here or how
22 they break you in". She is currently in therapy to help her recall the events. [REDACTED] has now moved to Redlands
23 recently and Detective Wyatt can provide her new address. Detective Wyatt stated he had not reported the
24 rapes to CPS because one of the CEDU staff's husband works at CPS.

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LICENSING EVALUATOR NAME: Elvia Baris

TELEPHONE: 909)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 06/16/2004

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	06/16/2004	No

1 Meeting with Detective Wyatt continued:

2
3 LPA reviewed investigation documents that Detective Wyatt brought. Regarding the DOI 3/1/04 involving client
4 being sodomized with a broomstick by client Detective Wyatt stated that the
5 reporting party had been CEDU staff Russ Decker. Decker had interviewed at the lodge (at
6 CEDU) and had denied the sodomy stating that he had patted the victim, on the buttock
7 with the broomstick. On 3/27/04 told Decker that on Saturday 3/27/04 "something was put in my ass."
8 stated he was sore after a couple of hours after the incident and wanted to pretend it didn't happen.
9 Documents describe as 5'2", 110# and suspect as 5'10", 170#. Victim stated
10 he felt and object penetrate inside his rectum while still clothed in his boxers approximately 1" and heard
11 laughing. Victim's roommate did not witness the incident because he was asleep. was
12 arrested on 3/27/04. He went to court and plea bargained, pled guilty to battery. Since these documents could
13 not be copied, Detective Wyatt offered to hand deliver a letter from CCL requesting a copy of documents on
14 case# 050400844. LPA Baris provided a letter addressed to Lt. Roper, Civil Liabilities Division requesting a copy
15 of report #050400844 as instructed by Detective Wyatt. Wyatt stated can refer to the Juvenile DA office for
16 findings: San Bernardino Juvenile Division, 900 Gilbert Street, San Bernardino, CA 92415, DA# 0000194111,
17 Attn: Lance Cantos.

18
19 Detective Wyatt also stated that he conducts 4 and 8 hour training classes on child abuse reporting and
20 recognizing child abuse. He also provides training to group homes. Training on elder abuse is also done.
21
22 LPA Baris briefed LUM Frankie Shelton on the meeting with Detective Chuck Wyatt. LUM Shelton stated to hold
23 off writing the LIC 802 until the next day when Ramon Perez would be in for legal consultation.

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LICENSING EVALUATOR NAME: Elvia Baris
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909/782-3279
DATE: 06/16/2004

COMPLAINT REPORT

This form is intended to document complaints received in the licensing office. Unless the complaint is considered harassment, a licensing visit must be conducted within 10 calendar days after receipt of the complaint.

REPORT		☐ URGENT ☐ PRIORITY ☐ RIS REFERL	
REPORTED	BY LETTER	PRIORITY NUMBER:	
COMPLAINANT NAME	Anonymous	DISTRICT OFFICE	VISIT DUE DATE
ADDRESS	STREET	Orange CCL	11/01/2004
CITY	ZIP CODE	CONTROL NUMBER	198976
TELEPHONE NUMBER (DAY)	TELEPHONE NUMBER (EVENING)	FACILITY INFORMATION	
RELATIONSHIP / INVOLVEMENT WITH FACILITY		TYPE OF FACILITY	FACILITY FILE NUMBER
WAS ABUSE REPORT REQUIRED AND FILED?	NO	730	366402761
DOES COMPLAINANT WISH TO REMAIN ANONYMOUS?	YES	FACILITY NAME	CEDU SCHOOL-MAIN CAMPUS
		ADDRESS	STREET
		3500 SEYMOUR ROAD	
		CITY	ZIP CODE
		RUNNING SPRINGS	92382
		TELEPHONE NUMBER	(909) 867-2722

NATURE OF COMPLAINT (Separate complaint into specific allegations and assign one of the following complaint codes:)

- | | | | | |
|---------------------------------------|-------------------|---------------------------------|---------------------|------------------------|
| 1. Physical Abuse/Corporal Punishment | 5. Fire Clearance | 9. License | 13. Medication | 17. Financial Issues |
| 2. Sexual Abuse | 6. Crimes | 10. Neglect/Lack of Supervision | 14. Financial Abuse | 18. Questionable Death |
| 3. Personal Rights | 7. Physical Plant | 11. Food Service | 15. Level of Care | 19. Other |
| 4. Unlicensed Care | 8. Record Keeping | 12. False Statements | 16. Qualifications | |

COMPLAINT CODE		ALLEGATIONS	RESOLUTION CODE		
			S	I	U
13	1 2 3	On 2 occasions medical staff left medications, (insulin), and needles out unattended, assessable to clients. Dr. Simpson wrote a letter to Dr. Condess, Administrator, regarding this serious safety concern and the incident occurred again	☒	☐	☐
13	1 2 3	Nursing staff have told parents she has been taking controlled medications home with her to destroy.	☐	☒	☐
19	1 2 3	Staffing ratio during the weekend are including the Administrator, who are not supervising clients.	☐	☒	☐
	1 2 3		☐	☐	☐
	1 2 3		☐	☐	☐
	1 2 3		☐	☐	☐
	1 2 3		☐	☐	☐
	1 2 3		☐	☐	☐

RECEIVED BY	DATE	TIME
Mike Valentine	10/22/2004	11:48 AM

All POC Have Been Cleared

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION

CLEARED POC's

Pacific Inland, 3737 Main Street Suite 600
Riverside, Ca, CA 92501

FACILITY NAME: CEDU SCHOOL-MAIN CAMPUS

FACILITY NUMBER: 366402761

VISIT DATE: 11/01/2004

POC Due Date / Section Number	PLAN OF CORRECTIONS(POCs)	Date Cleared / Comments
11/02/2004 80063(a) Accountability	1 2 3 Facility will submit plan of action to ensure that nursing staff is 4 informed of all medication procedures and identify what staff is 5 trained to dispense medication. 6 7	11/04/2004 1 Additional inservice training will be 2 conducted by Nursing staff beginning 3 11/4/04 on med admin & doc. A list of 4 staff that has completed this trning to be kept in nurses' offices.
11/02/2004 Section Cited 80087(h) Buildings and Grounds	1 2 Facility will submit plan of action to ensure that chemicals or 3 other toxic substances are inaccessible to clients. Present 4 giving clients cleaning chemicals and rotating through the area 5 is not acceptable. 6 7	11/04/2004 1 Cleaning materials are utilized during 2 scheduled and supervised chores. 3 4
11/02/2004 Section Cited 80078(a) Responsibility for Providing Care and Supervision	1 2 3 Facility will submit plan of action to ensure that clients are 4 provided supervision to meet their needs by due date. 5 6 7	11/04/2004 1 Staff have been instructed to increase 2 the separation space of students when 3 sleeping in the lodge. 4
11/02/2004 Section Cited 80078(a) Responsibility for Providing Care and Supervision	1 2 3 4 " " " 5 6 7	11/04/2004 1 Staff have been instructed to increase 2 the separation space of students when 3 sleeping in the lodge. 4

COMPLAINT REPORT

This form is intended to document complaints received in the licensing office. Unless the complaint is considered harassment, a licensing visit must be conducted within 10 calendar days after receipt of the complaint.

REPORT		☐ URGENT ☐ PRIORITY ☐ RIS REFERL	
REPORTED BY LETTER		PRIORITY NUMBER:	
COMPLAINANT NAME		DISTRICT OFFICE	VISIT DUE DATE
ADDRESS	STREET	Pacific Inland;	02/25/2005
CITY	ZIP CODE	Pacific Inland	CONTROL NUMBER
TELEPHONE NUMBER (DAY)	TELEPHONE NUMBER (EVENING)	19-CR-200502151	
RELATIONSHIP / INVOLVEMENT WITH FACILITY		65713	
WAS ABUSE REPORT REQUIRED AND FILED?		FACILITY INFORMATION	
DOES COMPLAINANT WISH TO REMAIN ANONYMOUS?		TYPE OF FACILITY	FACILITY FILE NUMBER
		730	366402761
		FACILITY NAME	
		CEDU SCHOOL-MAIN CAMPUS	
		ADDRESS	STREET
		3500 SEYMOUR ROAD	
		CITY	ZIP CODE
		RUNNING SPRINGS	92382
		TELEPHONE NUMBER	
		(909) 867-2722	

NATURE OF COMPLAINT (Separate complaint into specific allegations and assign one of the following complaint codes:)

- | | | | | |
|---------------------------------------|-------------------|---------------------------------|---------------------|------------------------|
| 1. Physical Abuse/Corporal Punishment | 5. Fire Clearance | 9. License | 13. Medication | 17. Financial Issues |
| 2. Sexual Abuse | 6. Crimes | 10. Neglect/Lack of Supervision | 14. Financial Abuse | 18. Questionable Death |
| 3. Personal Rights | 7. Physical Plant | 11. Food Service | 15. Level of Care | 19. Other |
| 4. Unlicensed Care | 8. Record Keeping | 12. False Statements | 16. Qualifications | |

COMPLAINT CODE	ALLEGATIONS	RESOLUTION CODE		
		S	I	U
3	1 Clients are admitted/accepted to the group home without first being allowed to visit facility 2 3	☒	☐	☐
3	1 Clients are allowed limited phone calls or sometimes no phone calls 2 3	☒	☐	☐
3	1 Clients are not allowed visitors and during visits at the facility, the visits are disrupted by staff 2 3	☒	☐	☐
16	1 Staff are not qualified in accordance with the regulations or program statement 2 3	☒	☐	☐
7	1 [REDACTED] 2 3	☐	☐	☒
7	1 Clients are accepted to the facility without appropriate evaluation screening. 2 There are no needs and services plan or individual plans for new clients. 3	☒	☐	☐
3	1 The licensee routinely discharges/evicts clients without providing 30 day written notice to parents and/or representative. Clients are discharged as a form of retaliation. 2 3	☒	☐	☐
13	1 On 11/20 and 11/21/04, medications were not passed and/or given to clients 2 3	☒	☐	☐

RECEIVED BY	DATE	TIME
Elvia Baris	02/15/2005	04:57 PM

CONTACT SHEET

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FACILITY NAME		FACILITY NUMBER
CEDU SCHOOL-MAIN CAMPUS		366402761

Contact Type	Date	Summary of Contacts
o/v	02/17/2005	1 LPA Baris and Leticia Legleiu to facility for 10 day complaint vist, complaint # 165713, 2 and case management visit. Complaint investigation was completed at time of visit. 3
t/c	02/18/2005	1 LPA Baris contacted RP [REDACTED] and provided complaint 2 investigation findings. [REDACTED] requested copy of report. Advised him that I would 3 have to check with my supervisor (Frankie has report), and would be contacting him. Frankie approved for documents to be submitted to RP.
t/c	02/22/2005	1 LPA Baris received call from RP [REDACTED] regarding request for complaint 2 investigation findings. Obtained report from Frankie and faxed public reports to RP at 3 [REDACTED] was requested. Both Frankie and Sergio were notified that copy of documents were sent.
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DETAIL SUPPORTIVE INFORMATION

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CONFIDENTIAL

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	02/17/2005	No

1 Client interviews per LPA Baris:

- 2
3 [REDACTED] 13 years old, at CEDU for 6 months:
4 [REDACTED] stated he had not been to CEDU prior to enrollment.
5 Regarding phone calls, stated he could not call his grandmother or his only sister. Also cannot call friends until
6 3rd level. During phone calls, staff is present and taking notes. Some calls may be on speaker phone.
7 Regarding visits, stated he arrived in August and had visit with parents in Sept, but did not have visit from his
8 only sister until December. Staff did not interrupt visits.
9 [REDACTED] does not take meds and is not aware of any days meds were not passed.

- 10
11 [REDACTED] 14 year old, at CEDU for about 1 year:
12 [REDACTED] also stated he did not have opportunity to visit campus prior to enrollment.
13 [REDACTED] also has only one sister and was not allowed to have any contact with anyone other than parents from
14 about 2, 5 or 7 months. Presently he's on 2nd level and not allowed to talk to friends, but can talk to relatives.
15 Also stated calls are not private. Staff sometimes have calls on speaker phone or take notes regarding
16 conversation. [REDACTED] stated he could not talk to his only sister for about 3 months.
17 Stated when first arrived at CEDU about 1 1/2 month or two he could not get visits. For 4 months he was not
18 able to see his only sister. He's now on second level, Quest and can get visits at campus. Staff are usually not
19 present and do not disrupt visits.
20 [REDACTED] does not take meds, but stated a lot of times kids don't get meds because the nurse forgets. He stated
21 there may have been a day when kids did not get meds.

- 22
23 [REDACTED] 13 years old at CEDU since 1/26/05:
24 Client originally from San Diego, but came to CEDU from San Marcos Texas. Stated he had been at San Marcos
25 Treatment Center, a lock down facility, for evaluation from 12/27/04 to 1/27/05. He was
26 transported by escorts from there to CEDU on 1/27/05. He had not been to CEDU before.
27 Client stated he gets a call 1 time per week for 15 minutes. He is on Discovery Phase, first phase. He has 2
28 sisters, but can only talk to his parents. He estimated it would be probably one more month before he can talk to
29 his sisters or anybody else. Stated if he is having a hard time, the call is on the speaker. Staff is always present
30 during calls. Staff dials for him.
31 Parents can visit him in about 5 more weeks. He cannot get to see his sisters until he reaches the next level.
32 [REDACTED] takes meds, 3 for mood disorder. [REDACTED] stated he has missed his dose three times since he has been her
33 because the nurse did not come. One time he had to get double dose for this. Three other times he had missed
34 his dose completely. He has not experienced a whole day without meds.
35 [REDACTED] reported no black-outs experienced since his stay at CEDU.

LICENSING EVALUATOR NAME: Elvia Baris, Elvia Baris

TELEPHONE: 909)782-3279;
(951)782-3279

LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

DATE: 02/18/2005

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	02/17/2005	No

- 1 Client interviews by LPA Baris continued:
- 2 [REDACTED] 13 years old, at CEDU 5 months:
- 3 [REDACTED] is originally from Moreno Valley, CA. [REDACTED] stated her adoptive parents brought her to CEDU after
- 4 she had ran away from home. She stated she was physically and verbally abusive to her parents. She had
- 5 never been to CEDU before her enrollment.
- 6 Christina only and one 20 year old brother. She cannot call her brother, relatives or friends since she has been
- 7 at CEDU. She can only talk to her parents. Calls are not private, staff is listening.
- 8 [REDACTED] stated her parents came to visit her in December. The visits are private and staff does not disrupt
- 9 visits. Presently she cannot receive any visits other than her parents. She did not know until when this would
- 10 change.
- 11 [REDACTED] does not take meds.
- 12 She stated that there have been 2 blackouts since she came. One was one day long and the other was 1/2 day,
- 13 but they had a generator and stated darkness was not a problem.
- 14
- 15 Client interviews by LPA Leticia Legleir:
- 16 [REDACTED] 16 years old at CEDU 8 months:
- 17 [REDACTED] stated he did not visit CEDU prior to enrollment. He knew he was going to CEDU like the night or 2 before.
- 18 He did not like the facility. Stated he was allowed phone calls the first week. He can call once a week to his
- 19 mom and dad, sister and grandma. They record 3 things I talk about.
- 20 Stated the first visit was with mom and dad only, no siblings. After 6 months he could get visits from siblings.
- 21 Visits can now be off campus around the area. The first couple were on campus and only one home visit every 5
- 22 weeks.
- 23 Regarding visits, he stated you can be with staff or away from them. There are no disruptions.
- 24 [REDACTED] stated he took meds for ADHD and depression. He stated that after Thanksgiving, his meds were not given
- 25 for 1 or 2 days because of the snow. The nurses are the only ones that have the keys and they are the only
- 26 ones that have access. Staff also has access.
- 27 Regarding black-outs, he stated there has been a lot of blackouts, like a half dozen. The last one was 1 or 2
- 28 hours, but the generators are put on.
- 29 [REDACTED] stated that his mail is read before it is sent out.
- 30
- 31
- 32
- 33
- 34
- 35

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DATE: 02/18/2005

DETAIL SUPPORTIVE INFORMATION (Cont)

This form is intended to document information that is relevant to the licensing file but generally not public information, such as collateral visits. This would include back-up information on deficiencies such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

FACILITY NAME:	FACILITY NUMBER:	DATE(S) OF CONTACT:	COLLATERAL VISIT?
CEDU SCHOOL-MAIN CAMPUS	366402761	02/17/2005	No.

- 1 Client interviews by LPA Leticia Legleiu continued:
- 2 [REDACTED] 16 years old, at CEDU 6 1/2 months:
- 3 Stated no prior visits to CEDU prior to enrollment. She was in Ascent Wilderness Program in Idaho before. She
- 4 did not tour the facility prior.
- 5 Regarding calls, she was allowed calls once a week. She can talk to her mom, grandparents and sisters. Stated
- 6 calls are monitored by staff. She is not allowed to call cousins or friends, just write to them. She can see her
- 7 sisters in 4 months.
- 8 She stated she is allowed private visits with her family usually indoors on campus. There are no disruptions
- 9 during visits. After 6 months she is allowed to visit off campus.
- 10 [REDACTED] takes Nexium for acid reflux and Malotin for sleep at night. She stated she went a day without meds
- 11 due to the heavy snow. There were two times when they had blackouts, but they have a back-up generator.
- 12
- 13 [REDACTED] 14 years old, at CEDU since August 2004:
- 14 [REDACTED] stated there was no tour or visit prior to enrollment.
- 15 It was a week before she could call her mom and dad. Stated she can call her relatives now but had to wait 6
- 16 months to call brothers, sisters, cousins and aunts, etc. Stated her brothers and sister can visit her until 6 more
- 17 months.
- 18 [REDACTED] stated that visits are private and without disruptions.
- 19 Client stated she was taking several medications to keep her calm and control her anger. She stated she went
- 20 one day without her meds.
- 21 Per client, there was a blackout when it was snowing for about 2 hours.
- 22 Eric
- 23 [REDACTED] 17 years old, at CEDU 9 months:
- 24 [REDACTED] also reported no prior visit to CEDU prior to enrollment. He came from the Ascend Wilderness Program.
- 25 This was a 6 week program. After that he went home for a week. His parents brought him to CEDU. [REDACTED] stated
- 26 [REDACTED] was not allowed a phone call until a week later with his mom. He called his dad a month later. [REDACTED] stated
- 27 the calls are monitored. Staff listen to calls and write notes. Not able to visit sisters until 2 months. Friends
- 28 cannot visit. Visits are private and no staff interruptions.
- 29 [REDACTED] stated he is taking Luvox for Obsessive Compulsion Disorder. Stated during 12/04 his meds were not given
- 30 to him for two days. The snow was really bad. The nurse has the key to get the meds. No one else had
- 31 access. Stated there are 4 nurses, Claudia, Dee, Mary and Amy. None of them were able to make it.
- 32 [REDACTED] stated there had been two blackouts and one of the water heaters had busted in December in one of the
- 33 complexes.
- 34
- 35

LICENSING EVALUATOR NAME: Elvia Baris, Elvia Baris
LICENSING EVALUATOR SIGNATURE: *** SIGNED ***

TELEPHONE: 909)782-3279;
(951)782-3279
DATE: 02/18/2005

FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** CEDU SCHOOL-MAIN CAMPUS
DEFICIENCY INFORMATION FOR THIS PAGE:**FACILITY NUMBER:** 366402761
VISIT DATE: 03/11/2005

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type B 03/18/2005 Section Cited 80075(n) Health Related Services	1 Refer to LIC 811 for client name on this entry: 2 3 Client #4 prescription for Geodon, 20 mg, fill date 4 2/24/05 was not posted on CSML. 5 6 *****Civil penalties are being assessed 7	1 Facility will submit written plan of action to 2 review/address all medications with centrally 3 posted record by due date. 4 5 6 7
Type B 03/18/2005 Section Cited 84077(a) Personal Services	1 Clients are not receiving an allowance. 2 3 4 5 6 7	1 Facility will submit a written plan of action to 2 provide allowances to clients by due dates. 3 4 5 6 7
Type B 04/11/2005 Section Cited 80069(c) Client Medical Assessment	1 Refer to Client Resident Record Review for this 2 entry: 3 4 Client #2 has no TB test results on file. 5 Client #7 has no ambulatory status or TB test 6 results on file. 7	1 Facility will submit copy of documents to CCL by 2 due date. 3 4 5 6 7
	1 2 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

SUPERVISOR'S NAME: Frankie Shelton**TELEPHONE:** 909-782-4207**LICENSING EVALUATOR NAME:** Elvia Baris**TELEPHONE:** 909)782-3279**LICENSING EVALUATOR SIGNATURE:** *** SIGNED *****DATE:** 03/11/2005

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: *** SIGNED *****DATE:** 03/11/2005

Slideshows for you (20)

Culture

Reed Hastings

125 slides•17.5M views

People Don't Care About Your Brand

Slides That Rock

39 slides•1.6M views

Pitch deck pointers_by_virginia_cha_2017

virginiacha

23 slides•1.4K views

 Culture Culture People Don't Care About
Your Brand

 People Don't Care About
Your Brand

 Pitch deck
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