

FACILITY EVALUATION REPORT

FACILITY NAME:	MINGUS MOUNTAIN ACADEMY	FACILITY NUMBER:	602300052
ADMINISTRATOR:	CHRIS BANKEN	FACILITY TYPE:	731
ADDRESS:	H/C 76 89A N JCT FSR 151	TELEPHONE:	(602) 335-2000
CITY:	PRESCOTT VALLEY	STATE:	AZ
CAPACITY:	80	ZIP CODE:	86314
TYPE OF VISIT:	Case Management Initial Certification	CENSUS:	ANNOUNCED
DATE:	06/03/2008	TIME BEGAN:	08:30 AM
MET WITH:	Chris Banken	TIME COMPLETED:	02:40 PM

NARRATIVE

PURPOSE OF VISIT

As mandated by California law, this initial on-site visit was performed by the undersigned analyst to assess and determine if Mingus Mountain Academy (MMA) is eligible to be certified by the California Department of Social Services (CDSS) through:

1. being in substantial compliance with California's Title 22 licensing regulations which apply to children's group homes; as well as
2. being licensed and in good standing with the licensing laws of the State of Arizona where the facility is located.

REQUEST FOR CERTIFICATION / APPLICATION HISTORY:

In a letter dated May 12, 2008, a placement representative of Shasta County Probation Department requested the Out-of-State Certification Unit (OSCU) of CDSS to certify MMA as is required by California law in order that they may place a ward of their juvenile court at the facility for residential care and treatment. Subsequently, a May 14, 2008 letter from MMA Deputy Director Nadine Ramirez, reflected that the facility would accept the Shasta County youth as well as apply for CDSS certification and comply with California's children's group home's licensing standards. After receiving MMA's application for certification, this site visit was arranged and performed.

FACILITY INFORMATION:

Mingus Mountain Academy, founded in 1985, is a residential treatment program for female youth located on 120 mountainous acres in a rural area of Prescott Valley, Arizona. Five residential dormitories located throughout facility grounds can house a maximum licensed capacity of 80 adolescent females. Dormitory

SUPERVISOR'S NAME: Mei Yuk Kung**TELEPHONE:** (916) 327-8763**LICENSING EVALUATOR NAME:** Carol Lancaster**TELEPHONE:** (916) 823-1692**LICENSING EVALUATOR SIGNATURE:****DATE:** 06/06/2008

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

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 06/25/2008

7/7/08

This report must be available at Child Care and Group Home facilities for public review for 3 years.

FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** MINGUS MOUNTAIN ACADEMY**FACILITY NUMBER:** 602300052**VISIT DATE:** 06/03/2008**NARRATIVE****1 FACILITY INFORMATION: (continued)**

2
3 names and their current operating capacities are as follows: Cottonwood (18); Juniper (18); Pinon (18); N.
4 Founders (12); S. Founders (12). Other building structures and amenities on grounds include: a
5 school/educational center, a medical/clinical complex, an administrative center, a spiritual growth center
6 (chapel); a large commercial kitchen/food service operation with an adjacent dining area; and numerous
7 other areas and space allowing for both indoor and outdoor physical fitness and intramural activities.
8 Additionally, the facility has on-grounds equine facilities (i.e., stables, barns, corrals, and numerous riding
9 corrals/areas.) With these amenities and resources, students are offered the unique opportunity to participate
10 in an equestrian program wherein quarter horses are bred, foaled, trained, maintained and ridden -- much of
11 which with hands-on student care and riding instruction and experience from beginner through advanced.
12

13 PROGRAM DESCRIPTION AND SERVICES:

14
15 Mingus Mountain Academy offers a 6-12 month, highly structured and staff secure gender specific residential
16 treatment program for female youth, age 12-18, with individualized needs. The program offered is designed
17 for female youth who present as school students with poor motivational skills, but great potential; full scale IQ
18 of 70 or above; higher academic potential than achievement; disruptive and defiant behaviors; problems with
19 anger management and aggression; special needs due to emotional stressors and challenges; clinically and
20 emotionally identified as needing special education programs; moderate eating disorders - obesity, anorexia,
21 bulimia; substance abuse, high risk behaviors and sexually promiscuous behavior, self-abusive behavior;
22 negative peer groups, family problems, running away; denial and justification of negative behavior.
23

24 Mingus utilizes a normative culture model designed to reduce the frequency, duration and intensity of
25 negative behaviors and to increase the strength of positive, alternative behaviors. The major treatment goal is
26 to assist the client in internalizing change that will persist throughout her life. Self-discipline ideas are
27 introduced through normative culture applications wherein clients share ownership in their programs by
28 creating positive behavior norms that are meaningful, attainable, and allow them to hold themselves and their
29 peers accountable. Clients progress from orientation with campus activities only to off-campus activities,
30 unsupervised visits, including home visits, and finally, to transitional living in one of two therapeutic community
31 group homes (also operated by Mingus Mountain) through increased trust.
32

SUPERVISOR'S NAME: Mei Yuk Kung**TELEPHONE:** (916) 327-8763**LICENSING EVALUATOR NAME:** Carol Lancaster**TELEPHONE:** (916) 223-4692**LICENSING EVALUATOR SIGNATURE:****DATE:** 06/06/2008

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FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** MINGUS MOUNTAIN ACADEMY**FACILITY NUMBER:** 602300052**VISIT DATE:** 06/03/2008**NARRATIVE**LICENSURE AND ACCREDITATIONS:

Mingus Mountain Academy is licensed by and in good standing with the Arizona Department of Health Services Office of Behavioral Health Licensing. Based on the number of licensing visits and reports issued during calendar year 2007 to the present, as well as through phone communication with a representative of Arizona DHS, it is evident that the facility is monitored closely and cited for deficiencies where and when appropriate. Through a review of licensing reports issued during the aforementioned period, the undersigned analyst is confident however that the facility cooperatively works with Arizona licensing and promptly corrects and makes necessary adjustments and improvements in order to provide safe residential care in a positive and effective treatment milieu.

Additionally, MMA is also surveyed by the Joint Commission - - the last survey conducted being September 15, 2007, at which time the facility was found to meet the requirements for the Behavioral Health Care Accreditation Program.

FIRE INSPECTION / WATER ANALYSIS:

An inspection report dated August 15, 2007 issued by a representative of the Arizona State Fire Marshall indicates that no violations were observed based on an inspection at that time.

With respect to the facility's water supply, a sample most recently drawn from the main well and analyzed by the Bradshaw Mountain Environmental Laboratory on April 2, 2008 reflects that the water is within safe and acceptable drinking standards.

SCOPE OF INITIAL CERTIFICATION REVIEW:

- Review of application material and program statement with special emphasis on:
 1. staff/personnel background clearances, records and procedures for same.
 2. emergency intervention and staff training procedures and practices.
 3. client personal rights and grievance procedure
- Verification of licensure status and history with AZ licensing officials and other regulatory/oversight agencies.

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- Entrance interview and facility and program discussion/meeting with: Chris Banken, Administrator/Executive Director; Nadine Ramirez, Clinical/Deputy Director; Bo Fleming, Quality Assurance Manager; Reggie St. Romain, Group Living Director; Kendall Paine, Vice-President of Marketing (Sequel Youth Services.)
- Physical tour and inspection of facility grounds, residential living quarters and structures (facilitated by and in the accompaniment of two advanced-level clients.)
- Three client interviews.
- Introductions to and interviews with numerous line staff.
- Exit interview.

FINDINGS, AREAS OF CONCERN AND/OR THOSE REQUIRING CORRECTION:

Based on the application submitted as well as this analyst's observations, evaluation and analysis of the facility and program, Mingus Mountain Academy appears suitable for certification by the CDSS at this time.

CERTIFICATION DECISION:

Certify.

SUPERVISOR'S NAME: Mei Yuk Kung**TELEPHONE:** (916) 327-8763**LICENSING EVALUATOR NAME:** Carol Lancaster**TELEPHONE:** (916) 838-4692**LICENSING EVALUATOR SIGNATURE:****DATE:** 06/06/2008

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