

06/12/2017

\* Lead Assignment:

Licensor:Jeremiah Smith

Entered By:Cristina PenaIntake

Source:

Provider Incident Report (e.g., incident report)

Other Regulatory Agency (e.g., DCFS, JJS, Law Enforcement)

Public/Other (e.g., complaint, news report)

Reported By:

Lila Mutschelkna

Contact Info:

P 303-866-2998 1 F 303-866-5563

1575 Sherman Street, 2nd Floor, Denver CO 80203

[lila.mutschelknaus@state.co.us](mailto:lila.mutschelknaus@state.co.us) | [colorado.gov/CDHS/CW](http://colorado.gov/CDHS/CW)

Summary of Issue:

The ICPC coordinator in the state of Colorado reports not being able to reach ICPC contact at Provo Canyon Schools and has several children on placement there who do not have complete paperwork for ICPC placement.

Clients Involved:

[REDACTED]

Licenses, Staff, and Witnesses Involved:

Trish Martinez, Jennifer Morgan Smith, Kate VandeKraats, Adam McClain

Licensee Follow-Up

Actions Taken by Licensee:

Technical Assistance provided to ensure appropriate review and completion of paperwork by agency.

Actions Planned by Licensee:

No further action needed at this time

Additional Comments:

The program followed up with the needed agency representative in Colorado shortly after TA was given at site inspection

Office Follow-Up

Investigate Within:

Priority Due Date:

...

Document Admin Staffing:

N/A

Date Priority Met:

...

QA Monitoring

Activity Log:

Add

Date	Time	Type	Who
07/10/2017	06:35	Collateral Contacts	Cristina Pena
07/06/2017	12:26	Collateral Contacts	Cristina Pena

Documents:

Add

Nothing found to display.

Violations:

Add

Violation Date Rule# Resolved Date

07/10/2017

501-2-2 Core Rules. Program Administration.

03/01/2018 delete

Update Status

Findings

\* Critical Incident:

A critical incident occurred related to this Investigation.

Yes No

Sites Affected:

\*All Sites

Conclusion Summary:

The notice was given verbally, and the issue was resolved within 24 hours as reflected in the email exchange on 7/10/17 where the program provided the needed documents to the ICPC worker in the state of Colorado.

Finalized Date: 06/30/2017

VIOLATION Date: 07/10/2017

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Site Licenses Affected:

All Licenses at This Site

ISC - Intermediate Secure Care

Not Licensed - Program Owner

Rule Number:

501-2-2 Core Rules. Program Administration.

Rule Text:

H. The program shall comply with all applicable National Interstate Compact Laws.

Description:

Other State Statutes: Is this a violation of a specific State statute not addressed in the rules?

State Statute Violated:

Resolved Date:

03/01/2018

4051 North University

Violation Date: 07/10/2017

Rule Number: 501-2-2 Core Rules. Program Administration.

Rule Text: H. The program shall comply with applicable National Interstate Compact Laws.

Resolved Date: 03/01/2018

09/15/2017

\* Lead Assignment:

Licensors:Jeremiah Smith

Entered By:Blake TingeyIntake

Source:

\*Provider Incident Report (e.g., incident report)

Other Regulatory Agency (e.g., DCFS, JJS, Law Enforcement)

Public/Other (e.g., complaint, news report)

Date of Incident:

09/11/2017

...

Date Reported:

09/12/2017

...

Notification: The provider reported within one business day.

Reported By:

Ron Tuinei, Tevita Makalo (Supervisor), Trish Martinez (Risk Manager)

Contact Info:

Summary of Issue:

It was reported by one of [REDACTED] roommates that [REDACTED] had forced him to have anal sex. Upon interview with [REDACTED] by this therapist, Kimberly Martin, [REDACTED] denied having had anal sex with his peer but stated that he had talked about oral and anal sex with two of his roommates. CPS has been notified and is currently investigating the report.

[REDACTED] reported on [REDACTED] that he was forced to have anal sex by the alleged peer. At this point in time [REDACTED] therapist Kimberly Martin reported the occurrence to her supervisor who then reported to the Director of Risk and Nursing Director. Upon return to campus [REDACTED] therapist followed up with him to see how he was doing. During this meeting [REDACTED] stated that he was not forced to have anal sex with his peer. [REDACTED] proceeded to state that on [REDACTED] during bedtime the alleged aggressor woke [REDACTED] up and propositioned him to perform oral sex on him. [REDACTED] refused and went to bed and the alleged aggressor left [REDACTED] alone.

[REDACTED] reported to his therapist, Trevor Dahle, that during the evening of [REDACTED] while in his room during bedtime he was forced by a peer to have anal sex. [REDACTED] therapist reported the occurrence to his supervisor who then reported to the Risk Manager and Nursing Director.

Clients Involved:

[REDACTED]

Licensees, Staff, and Witnesses Involved:

Kimberly Martin (therapist)

Trevor Dahle (therapist)

Licensee Follow-Up

Actions Taken by Licensee:

CPS has been notified and is currently investigating the reports. [REDACTED] has been separated from his peers and placed on precautions. Case numbers [REDACTED].

An order was given by medical to take [REDACTED] to the ER to be assessed. Parents were notified prior to the ER visit. Following the ER visit [REDACTED] recanted his allegation towards his peer. His case was called into DCFS and case number is [REDACTED].

[REDACTED] was taken to the ER to be assessed. Safety Plan was put into place to keep [REDACTED] safe and separated from the alleged aggressor. CPS was also notified twice. Once by [REDACTED] mother case [REDACTED]. Once by PCS case [REDACTED]. DCFS and Police came in to interview on 9/12/17 at 2pm. Mother had stated that the doctor did not perform a rape kit on [REDACTED]. Police will be following up with the doctor on why he chose not to.

Actions Planned by Licensee:

Additional Comments:

Priority met by CPS on 9/12/17

Office Follow-Up

Investigate Within:

Priority Due Date:

09/14/2017

...

Document Admin Staffing:

Program manager John Ortiz and Office of Licensing QA staff Blake Tingey reviewed and discussed the circumstances relating to the incident reports submitted to the Office by UHS Provo Canyon School. Based on this review of the incident, it was concluded that QA staff Blake Tingey would take the lead assignment with QA staff Josh Hawks assisting.

Date Priority Met:

09/12/2017

...

QA Monitoring

Activity Log:

Add

Date	Time	Type	Who
01/03/2018	10:30	Site Visit - Scheduled	Blake Tingey
12/06/2017	01:53	Issued Notice of Violation (No Plan or NAA)	Blake Tingey
10/12/2017	11:39	Collateral Contacts	Serena Hubert
10/11/2017	10:35	Collateral Contacts	Serena Hubert
10/02/2017	02:22	Collateral Contacts	Blake Tingey
09/29/2017	12:44	Collateral Contacts	Blake Tingey

09/28/2017 10:00 Site Visit - Unscheduled Blake Tingey  
09/25/2017 10:00 Site Visit - Unscheduled Blake Tingey

Documents:

Add

Date	Name	Comment	
09/25/2017	Provo Canyon Visit Notes		delete
09/19/2017	Incident Reports		delete

Violations:

Add

Violation Date	Rule#	Resolved Date
09/25/2017	501-2-6 Core Rules. Direct Service Management.	
03/01/2018	delete	
09/25/2017	501-2-3 Core Rules. Governance.	
03/01/2018	delete	
09/25/2017	501-2-5 Core Rules. Record Keeping.	
03/01/2018	delete	

Update Status

Findings

\* Critical Incident:

A critical incident occurred related to this Investigation.

\*Yes No

Type of Incident:

Abuse - Physical

\*Abuse - Sexual

Abuse - Other

Neglect

Exploitation

Serious Injury

Any Injury - Staff/Client

Client Death

Runaway / AWOL

Self Harm

Illness Outbreak

Environmental Conditions  
Weapons  
Alcohol / Substances  
Other

Sites Affected:

\*All Sites

Conclusion Summary:

Written notification issued on 12/6/17. Violations included incomplete documentation and intake processes not being followed. Advised Provo Canyon to revise intake process.

Finalized Date: 02/02/2018

VIOLATION DATE:

09/25/2017

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Site Licenses Affected:

All Licenses at This Site

\*ISC - Intermediate Secure Care

Not Licensed - Program Owner

Rule Number:

501-2-6 Core Rules. Direct Service Management.

Rule Text:

B. The program shall have a written admission policy and procedure to include the following:

1. appropriate intake process,

Description:

Intake process needs to be revised. Staff confirmed that there were "red flags missed at intake for [REDACTED]." The intake process for Provo Canyon School needs to be revised.

Other State Statutes: Is this a violation of a specific State statute not addressed in the rules?

State Statute Violated:

Resolved Date:

03/01/2018

. Violation Date:

09/25/2017

...

Site Licenses Affected:

All Licenses at This Site

ISC - Intermediate Secure Care

Not Licensed - Program Owner

Rule Number:

501-2-3 Core Rules. Governance.

Rule Text:

A. The program shall have a governing body which is responsible for and has authority over the policies, training and monitoring of staff and consumer activities for all phases of the program. The governing body's responsibilities shall include the following:

1. to ensure program policy and procedures compliance,

Description:

Documents were incomplete per policy and procedure of Provo Canyon. Q15 check sheets had signatures missing and sections left blank for multiple clients.

Other State Statutes: Is this a violation of a specific State statute not addressed in the rules?

State Statute Violated:

Resolved Date:

03/01/2018

.....

iolation Date:

09/25/2017

...

Site Licenses Affected:

All Licenses at This Site

ISC - Intermediate Secure Care

Not Licensed - Program Owner

Rule Number:

501-2-5 Core Rules. Record Keeping.

Rule Text:

D. Health records of a consumer including the following:

4. other pertinent health records and information.

Description:

Client's ( ) Psychiatric Evaluation by Provo Canyon School contained information about "sexual behavior precautions" with no specifics. Pertinent information was not obtained by Provo Canyon School for client's intake.

Other State Statutes: Is this a violation of a specific State statute not addressed in the rules?

State Statute Violated:

Resolved Date: 3-1-18



4051 North University

Violation Date: 09/25/17

Rule Number: 501-2-6 Core Rules. Direct Service Management

Rule Text: B. The program shall have a written admission policy and procedure to include the following:

1. Appropriate intake process

Description: Intake process needs to be revised. Staff confirmed that there were "red flags missed at intake for [REDACTED]." The intake process for Provo Canyon School needs to be revised.

Resolved Date: 03/01/2018

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Violation Date: 09/25/2017

Rule Number: 501-2-3 Core Rules. Governance.

Rule Text: A. The program shall have a governing body which is responsible for and has authority over the policies, training and monitoring of staff and consumer activities for all phases of the program. The governing body's responsibility shall include the following:

1. To ensure program policy and procedures compliance.

Description: Documents were incomplete per policy and procedure of Provo Canyon. Q15 check sheets had signatures missing and sections left blank for multiple clients.

Resolve Date: 03/01/2018

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Violation Date: 09/25/2017

Rule Number: 501-2-5 Core Rules. Record Keeping.

Rule Text: D. Health records of a consumer including the following:

4. other pertinent health records and information.

Description: Client's [REDACTED] ) Psychiatric Evaluation by Provo Canyon School contained information about "[REDACTED]" with no specifics. Pertinent information was not obtained by Provo Canyon School for client's intake.

Resolved Date: 03/01/2018

1/29/19  
Start Date:  
01/29/2019

...  
\* Lead Assignment:  
Licensor:Lisa D. Carter  
Entered By:Serena HubertIntake  
Source:

\*Provider Incident Report (e.g., incident report)  
Other Regulatory Agency (e.g., DCFS, JJS, Law Enforcement)  
Public/Other (e.g., complaint, news report)  
Date of Incident:  
01/23/2019

...  
Date Reported:  
01/29/2019

...  
Notification: The provider reported within one business day.  
Reported By:  
Heather Hansen  
Contact Info:  
User Email: heather.hansen@sequelyouthservices.com

User Phone: 801-899-4111

Summary of Issue:

██████████ put his hand on ██████████ over his clothes. ██████████ then put his mouth on ██████████ over ██████████ clothing. A couple of days later during a movie ██████████ put his hand on ██████████ over clothing, ██████████ pushed ██████████ hand away.

Clients Involved:

████████████████████

Licensees, Staff, and Witnesses Involved:

██

Licensee Follow-Up

Actions Taken by Licensee:

Investigation initiated, all parties POA have been notified, In-servicing of staff initiated.

Actions Planned by Licensee:

Therapist will continue to work with both parties. Staff will continue with supervision of students at all times.

Additional Comments:

Office Follow-Up

Investigate Within:

Priority Due Date:

02/04/2019

...

Document Admin Staffing:

Licensee seems to have responded to incident appropriately in order to adhere to rule. However, the licensee did not report within the required time frame of one business day; assigning a 10 day priority.

Date Priority Met:

02/04/2019

...

QA Monitoring

Activity Log:

Add

Date	Time	Type	Who
01/24/2019	08:03	Other Licensee Contact	Lisa D. Carter

Documents:

Add

Date	Name	Comment
01/29/2019	IR email	delete

Violations:

Add

Violation Date	Rule#	Resolved Date
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02/04/2019

501-1-10 General Provisions for Licensing. Investigations of Alleged Violations.

02/05/2019 delete

Update Status

Findings

\* Critical Incident:

A critical incident occurred related to this Investigation.

\*Yes No

Type of Incident:

Abuse - Physical

\*Abuse - Sexual

Abuse - Other

Neglect

Exploitation

Serious Injury

Any Injury - Staff/Client

Client Death

Runaway / AWOL

Self Harm

Illness Outbreak

Environmental Conditions

Weapons

Alcohol / Substances

Other

Sites Affected:

\* All Sites

Conclusion Summary:

Program has been offered final tech support regarding 24 hour notice to OL. I had rec'd a text from Shawn Ashworth on 1/24/19 regarding the allegation. He said report would be submitted. Looks like there was a break-down in communication between Shawn and the office staff who was supposed to get report in.

Finalized Date: 02/05/2019

VIOLATION DATE 2/4/19

Site Licenses Affected:

\*All Licenses at This Site

\*RT - Residential Treatment

Rule Number:

501-1-10 General Provisions for Licensing. Investigations of Alleged Violations.

Rule Text:

(2) Licensed Program Complaints and Critical Incidents

(a) The Office shall investigate critical incidents and complaints involving alleged licensing violations regarding a licensed human services program.

(b) Complaints about licensees can come to the Office via any means from any source.

(c) The Office retains discretion to decline investigation of a complaint that is anonymous, unrelated to current conditions of the program, or not an alleged violation of a rule or statute.

(d) Critical incidents shall be reported by the program to the Office by the end of the following business day, to legal guardians of involved clients, and to any other agencies as required by law, including:

(i) Child and Adult Protective Services; or

(ii) Law Enforcement.

(e) Pending investigations or those that result in no rule violation findings in regards to the complaints or critical incidents shall be classified as protected and only released in accordance with Utah Code title 63G chapter 2, Utah Government Access and Management Act.

Description:

Licensee did not report incident within one business day.

Other State Statutes: Is this a violation of a specific State statute not addressed in the rules?

State Statute Violated:

Resolved Date:

02/05/2019

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