



JOHN A. WAGNER  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

February 28, 2011

Ms. Joan Gabrielson, Executive Director  
Excelsior Youth Center  
15001 East Oxford Ave.  
Aurora, CO 80014

**SUBJECT: ANNUAL CERTIFICATION RENEWAL**

Dear Ms. Gabrielson:

Pursuant to California Family Code, Section 7911 et al., this is official notification that the certification by the California Department of Social Services of Excelsior Youth Center located at: 15001 E. Oxford Ave, Aurora CO is continued through November 2012.

Certification will be reviewed annually. The Out-of-State Certification Unit (OSCU) will be honoring the Department's policy of having inspection authority to make visits with or without appointment.

If you have any questions regarding this matter, please feel free to contact me, Olaniyan Akyeem at (916) 838-5875

Sincerely,

OLANIYAN AKYEEM  
Out-of-State Certification Analyst

c: Rosalind Hyde, Manager and Deputy Compact Administrator, Out-of-State Placement Policy Unit

**FACILITY EVALUATION REPORT**CCLD Regional Office, 744 P STREET, MS 19-50  
SACRAMENTO, CA 95814

<b>FACILITY NAME:</b> EXCELSIOR YOUTH CENTER	<b>FACILITY NUMBER:</b> 602300013
<b>ADMINISTRATOR:</b> JOAN GABRIELSON	<b>FACILITY TYPE:</b> 731
<b>ADDRESS:</b> 15001 EAST OXFORD AVENUE	<b>TELEPHONE:</b> (303) 693-1550
<b>CITY:</b> AURORA	<b>STATE:</b> CO
<b>CAPACITY:</b> 176	<b>ZIP CODE:</b> 80014
<b>TYPE OF VISIT:</b> Case Management	<b>CENSUS:</b> 132
<b>MET WITH:</b> Elaine Atwater, Quality Improvement Director	<b>UNANNOUNCED</b>
	<b>DATE:</b> 02/24/2011
	<b>TIME BEGAN:</b> 10:00 AM
	<b>TIME COMPLETED:</b> 04:00 PM

**NARRATIVE****1** PURPOSE OF VISIT:**2****3****4****5****6****7****8****9****10****11****12****13****14****15****16****17****18****19****20****21****22****23****24****25**

Excelsior Youth Center (EYC) is seeking re-certification as mandated by California law. The purpose of this visit was to verify the facility's compliance with California licensing standards governing children's residential group homes, as well as remaining in compliance with applicable laws, regulations and standards within their own state.

CALIFORNIA PLACEMENTS AND PLACING AGENCIES:

At the time of visit, the total census for California youth was 27. EYC is currently contracted with eight (10) California county Probation and Social Services agencies ranging from northern, central and southern California. These counties are as follows: Fresno, Mendocino, Monterey, Placer, Riverside, Santa Clara, San Luis Obispo, Sonoma, Ventura and Los Angeles counties.

FACILITY, PHYSICAL PLANT AND PROGRAM REVIEW AND CHANGES:

An inspection of the campus grounds and residential living units was conducted at the time of this review. There have not been any major physical plant changes since last year. All furniture and equipment appeared to be adequate, functional and in good repair.

In the area of program changes, Excelsior has closed the Phoenix Transitional Living Unit program and replaced the unit with the newly implemented Conduct Disorder Unit. (See LIC 809 C continued)

**SUPERVISOR'S NAME:** Mei Yuk Kung**TELEPHONE:** (916)654-0118**LICENSING EVALUATOR NAME:** Olaniyan Akyeem**TELEPHONE:** (916) 838-5875**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/24/2011

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/24/2011

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

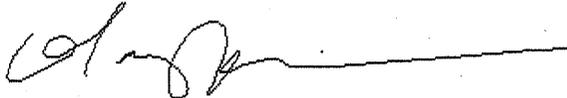
**FACILITY EVALUATION REPORT (Cont)**CCLD Regional Office, 744 P STREET, MS 19-50  
SACRAMENTO, CA 95814**FACILITY NAME:** EXCELSIOR YOUTH CENTER**FACILITY NUMBER:** 602300013**VISIT DATE:** 02/24/2011**NARRATIVE**1 (LIC 809 C continued)  
2

3 The new unit will be a 12-14 bed unit designed to provide specific treatment to adolescent girls  
4 diagnosed with Conduct Disorders. The strength based unit will utilize a Restorative Justice Model  
5 of treatment that will meet the needs of clients between the ages of 15-18 years of age who do not  
6 respond to the general cottage milieu as result of aggressive behaviors/bullying towards others,  
7 exerting negative influence on peers, not easily supervised in school, defiance or other behaviors  
8 that are deemed to place other's safety at risk. The purpose of this unit will be to regulate behaviors  
9 in a school in a self contained classroom setting while addressing their specific treatment needs in a  
10 smaller, more specialized unit. This unit will be short term (2-3 months) with clients moving to  
11 another cottage and regular classroom setting. This unit will function with a Staff to Student ratio of  
12 1:6 (3 staff scheduled during the awake time/ 2 staff during sleep time with a strong emphasis  
13 placed on Wellness and the development of positive peer culture.  
14  
15

16 Excelsior has also implemented a Campus Independent Living Program. Treatment Team  
17 Coordinator (TTC) Heather Hurd who managed the former Phoenix Transitional Living Unit will now  
18 oversee the Independent Living Program. The program will provide a Life Skills component, group  
19 sessions, course related material, independent programs and internet course/training related to  
20 independent living.  
21

22  
23 FIRE CLEARANCE:  
24

25 The most recent fire clearance was conducted on 9/23/10 by the Aurora Fire Department of Colorado. All  
26 components related to the physical structures and equipment was inspected resulting in 14 fire code  
27 violations. All violations were corrected and signed off on the same day.  
28

29 (See LIC continued)  
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31  
32**SUPERVISOR'S NAME:** Mei Yuk Kung**TELEPHONE:** (916)654-0118**LICENSING EVALUATOR NAME:** Olaniyan Akyeem**TELEPHONE:** (916) 838-5875**LICENSING EVALUATOR SIGNATURE:****DATE:** 02/24/2011**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 02/24/2011

**FACILITY EVALUATION REPORT (Cont)**

FACILITY NAME: EXCELSIOR YOUTH CENTER

FACILITY NUMBER: 602300013

VISIT DATE: 02/24/2011

**NARRATIVE**1 (LIC 809 C continued)  
23 LOCAL STATE LICENSING / COMPLAINTS ISSUES:  
45 The Colorado Department of Human Services, Division of Child Care conducted an annual review of EYC on  
6 June 7-21, 2010. The inspection revealed minor rule infractions mostly related to case record keeping. On  
7 August 8, 2010 a Corrective Plan of Action was provided by Excelsior to address all deficiencies.  
89 In the last year, EYC has had 3 substantiated allegations by the State of Colorado and/or at the County level.  
10 The complaints were all related to medical services. They are as follows: 8/10/10 Dentist extracted 2 teeth of  
11 a youth without parental consent. (Note: this finding is currently under appeal); on 11/30/10 youth was  
12 administered medication without a prescription; on 12/27/10 youth administered the wrong medication.  
13 (Note: 1 medication errors were result of a newly Certified Nurse Assistant (CNA) and another nurses that  
14 had been employed two months. Both nurses had previously been trained in the dispensing of medications).  
1516 On 2/24/2011, contact was made with the Colorado licensing representative supervisor who reported that  
17 EYC is currently operating at full licensing status as of this date, there is no administrative and/or legal action  
18 pending against the current license.  
1920 TREATMENT SERVICES (COUNSELING, GROUPS, THERAPY, ETC):  
2122 Students report that weekly groups and individual counseling sessions are occurring on a regular  
23 basis. All students reported that they have an assigned therapist who they meet with 1-2 times per  
24 week, and have a designated counselor on the units. No issues of concern related to treatment  
25 services.  
2627 (See LIC 809 C Continued)  
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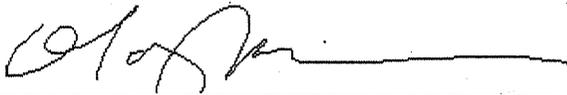
SUPERVISOR'S NAME: Mei Yuk Kung

TELEPHONE: (916)654-0118

LICENSING EVALUATOR NAME: Olaniyan Akyeem

TELEPHONE: (916) 838-5875

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23 SCOPE OF CERTIFICATION REVIEW:  
45 Certification review covered the following areas: programming, intake and discharge procedures,  
6 discipline policy, emergency intervention techniques, medical procedures, facility file review, staff  
7 and client interviews, observation of program and daily activities, criminal record review, personal  
8 rights, food services, staff trainings, emergency disaster plan, fire clearance, and all issues  
9 pertaining to physical plant.  
1011  
12 Other: During the entrance interview, met Excelsior Safety Manager, Larry Martinez for the purpose  
13 of discussing reportable Special Incidents. It is noted that Excelsior has been doing an exceptional  
14 job in their duty to report incidents as per California Licensing Standards. A review session was  
15 conducted to go over several sample incidents that were received, very notable issues but not  
16 necessarily reportable incidents. A general consensus was agreed as to what was required and  
17 what was not. A California IR Guideline Report will be sent to Excelsior in the next week to further  
18 assist them on critical incidents that need to be reported.  
1920  
21 OUT-OF-STATE CERTIFICATION FINDINGS, VIOLATIONS AND PLAN OF CORRECTION:  
2223 None deficiencies noted.  
2425 CERTIFICATION DECISION: Recommend Re-certification  
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31  
32**SUPERVISOR'S NAME:** Mei Yuk Kung**TELEPHONE:** (916)654-0118**LICENSING EVALUATOR NAME:** Olaniyan Akyeem**TELEPHONE:** (916) 838-5875**LICENSING EVALUATOR SIGNATURE:****DATE:** 02/24/2011**I acknowledge receipt of this form and understand my appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 02/24/2011