



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
Community Care Licensing Division – Statewide Children’s Residential Program  
744 P Street, MS 8-3-54 Sacramento, CA 95814



EDMUND G. BROWN JR.  
GOVERNOR

April 25, 2012

Ms. Jennifer Sievert, Executive Director  
Forest Ridge Youth services  
4502 230<sup>th</sup> Street  
Wallingford, Iowa 51365

Capacity: 17  
Population Served: Female age 13-21

Dear Ms. Sievert:

SUBJECT: RECERTIFICATION BY THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES (CDSS)

Pursuant to California Family Code, Section 7911 et al., this is official notification that the Certification for Forest Ridge located at 2043 395<sup>th</sup> Street, Estherville, Iowa is continued through April 2013.

California licensing standards require that all serious incidents continue to be reported to CDSS Out-of-State Placement Policy Unit for each child in care regardless of whether he or she is a California placement. Incident reporting shall include the following:

- a. Deaths
- b. Suicide attempts
- c. Suspected physical, sexual, or psychological abuse
- d. Epidemic outbreaks and catastrophes
- e. Injuries and illnesses that require hospitalization or medical treatment (beyond first-aid)
- f. Use of restraint (whether or not they result in an injury to a child)
- g. Any unusual incident or absence that threatens the physical or emotional health or safety of a child

In addition, children over the age 18 may not be eligible for continued funding under California Title 4-E unless the program is licensed by their state, and Certified by the State of California for care of Non-Minor Dependents (NMD). Certification will continue to be reviewed annually. We will be following our Department policy which authorizes us to inspect facilities with or without an appointment as necessary.

If you have any questions or would like to discuss this report further, please contact me at (916) 838-5875.

Sincerely,

OLANIYAN AKYEEM  
Out-of State Program Analyst

C: Rosalind Hyde, Deputy Compact Administrator, ICPC/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>	FOREST RIDGE YOUTH SERVICES: ESTHERVILLE	<b>FACILITY NUMBER:</b>	602300064
<b>ADMINISTRATOR:</b>	SHERRY WILLIAMS	<b>FACILITY TYPE:</b>	731
<b>ADDRESS:</b>	2043 395TH AVENUE	<b>TELEPHONE:</b>	(712) 867-4724
<b>CITY:</b>	ESTHERVILLE	<b>STATE:</b> IA	<b>ZIP CODE:</b> 51334
<b>CAPACITY:</b>	43	<b>CENSUS:</b>	<b>DATE:</b> 04/12/2012
<b>TYPE OF VISIT:</b>	Case Management	UNANNOUNCED	<b>TIME BEGAN:</b> 10:30 AM
<b>MET WITH:</b>	Jen Sievert, Executive Director	<b>TIME COMPLETED:</b>	04:00 PM

**NARRATIVE**

1 PURPOSE OF VISIT:

2

3 As mandated by California law, this annual review was performed by the undersigned analyst for the purpose  
4 of re-certification by the California Department of Social Services (CDSS) to verify the facility continues to:  
5 · have adequate and appropriate resources to provide safe, suitable 24-hour residential care, supervision  
6 and treatment services to youth/clients in care.7 · remain in substantial compliance with California licensing standards and regulations as well as remaining  
8 licensed and in good standing with the licensing authorities of the state of geographical location - - in this  
9 case, the state of Iowa.

10

11 CALIFORNIA PLACEMENTS AND PLACING AGENCIES:

12

13 At the time of visit, the total census for California youth at the Estherville facility was zero (0). Overall, Forest  
14 Ridge Youth Services (FRYS) is currently contracted with three (3) California county Social Services and  
15 Probation agencies ranging from northern, central and southern California. These counties are as follows:  
16 Sacramento and San Bernardino and Kern counties. FRYs has 10 CA youth currently in placement at the  
17 Wallingford facility site

18

19 FACILITY, PHYSICAL PLANT AND PROGRAM REVIEW AND CHANGES:

20

21 An inspection of the campus grounds and residential living units was conducted at the time of this review. All  
22 common areas including living units and individual rooms were exceptionally clean and in order. All furniture  
23 and equipment appeared to be functional and in good repair. No issue of concern.

24 (See LIC 809 C continued)

25

**SUPERVISOR'S NAME:** Mei Yuk Kung**TELEPHONE:** (916)654-0118**LICENSING EVALUATOR NAME:** Olaniyan Akyeem**TELEPHONE:** (916) 838-5875**LICENSING EVALUATOR SIGNATURE:****DATE:** 04/12/2012

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

**FACILITY REPRESENTATIVE SIGNATURE:**

Original signature on file

**DATE:** 04/12/2012

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

STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY  
**FACILITY EVALUATION REPORT (Cont)**

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
CCLD Regional Office, 744 P STREET, MS 19-50  
SACRAMENTO, CA 95814

**FACILITY NAME:** FOREST RIDGE YOUTH SERVICES:  
ESTHERVILLE

**FACILITY NUMBER:** 602300064

**VISIT DATE:** 04/12/2012

**NARRATIVE**

1 FRYs has not had any significant program changes since last year. However, in September of 2011, FRYs  
2 made a formal request to Iowa Department of Human Services to combine two separate programs to better  
3 serve and meet the needs of the community. The former living unit know as Cedar Hall, has since been  
4 renamed as, " Shelter /Parks". The building will serve as both Community Residential Care and a Community  
5 Shelter. The shelter program will remain separated from the residential program by dividing floors, and  
6 alarmed secured doors. FRYs was granted a certificate of license, effective 10/13/2011-10/1/2012.  
7  
8 Other: FRYs is currently seeking certification of a third program, Ellinwood which will also be located in the  
9 Estherville area. Certification is currently pending as of 4/23/2012. An application to serve Non-Minor  
10 Dependents NMD is also pending at this time.  
11  
12 FIRE CLEARANCE:  
13  
14 The most recent fire clearances were conducted on 7/20/2011 by the Iowa State Fire Marshall. All  
15 components related to the physical structures and equipment was inspected resulting in minor rule infractions.  
16 A follow-up corrective action plan provided by FRYs indicated that all violations have been corrected. No  
17 other violations were found.  
18  
19 LOCAL STATE LICENSING / COMPLAINTS ISSUES:  
20  
21 The Iowa Department of Human Services conducted an annual review of FRYs on 10/3/2011. The inspection  
22 revealed no areas of deficiencies.  
23  
24 Complaints: No substantiated complaints at this certified location in the last year. However, agency has  
25 received one substantiated complaint a the Wallingford, Crystal Cottage. (Refer to FRYs Wallingford  
26 Certification 4/12/2012)  
27  
28 (See LIC 809 C continued)  
29  
30  
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:** 04/12/2012

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

**FACILITY REPRESENTATIVE SIGNATURE:**

Original signature on file

**DATE:** 04/12/2012

**FACILITY EVALUATION REPORT (Cont)**CCLD Regional Office, 744 P STREET, MS 19-50  
SACRAMENTO, CA 95814FACILITY NAME: FOREST RIDGE YOUTH SERVICES:  
ESTHERVILLE

FACILITY NUMBER: 602300064

VISIT DATE: 04/12/2012

**NARRATIVE**CLIENT(S) TREATMENT SERVICES AND PERSONAL RIGHTS REVIEW:

1  
2  
3 No CA youth assigned to the Estherville programs at the time of this certification. However, CA students  
4 interviewed at the school, reported they have been informed of their personal rights. Students reported that  
5 they attend school and participate in small group's sessions three times per week. Students also are  
6 assigned a remedial counselor and receive individual counseling at least once per week. Additional  
7 counseling is also available on a case by case basis if requested.  
8

9 Student interviews and client file reviews confirmed that student's were given the proper medical/dental  
10 treatment and follow-up services both annually and on an as needed basis. No issues of concern in medical  
11 services. Overall, students were very positive about their placement at FRYs program.  
12

SCOPE OF CERTIFICATION REVIEW:

- 13  
14  
15 • Entrance interview with Jen Sievert, Executive Director, Shawn Connelly, Assistant Director  
16 • Collection of updated and current licensing documents, organizational and program information material,  
17 i.e., fire clearance, emergency intervention, programming, intake and discharge procedures,  
18 • Review and discussion of administrative changes, oversight and visit plan.  
19 • Sample of client, staff files reviewed.  
20  
21 •

OUT-OF-STATE CERTIFICATION FINDINGS, VIOLATIONS AND PLAN OF CORRECTION:

22  
23 No deficiencies noted.  
24  
25

26 CERTIFICATION DECISION: Recommend Re-certification  
27  
28  
29  
30  
31  
32

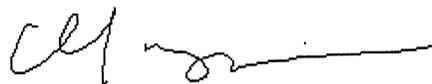
SUPERVISOR'S NAME: Mei Yuk Kung

TELEPHONE: (916)654-0118

LICENSING EVALUATOR NAME: Olaniyan Akyeem

TELEPHONE: (916) 838-5875

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