

DEPARTMENT OF SOCIAL SERVICES

Community Care Licensing Division
Statewide Children's Residential Program
Out-of-State Certification Unit
744 P Street, Sacramento, CA 95814 ~ MS 19-50



March 17, 2010

Jeff Huston, SAFE Center Director
Jasper Mountain
89124 Marcola Road
Springfield, OR 97478

Subject: CDSS RECERTIFICATION

Dear Mr. Huston:

Pursuant to California Family Code Section 7911 et al., this is official notification that Jasper Mountain SAFE Center's certification by the California Department of Social Services (CDSS) as an out-of-state group home provider is continued through March 2011.

Certification will continue to be reviewed annually. The Out-of-State Certification Unit will be following the Department's policy, which authorizes us to inspect facilities with or without appointment.

Thank you for your cooperation during my onsite recertification visit this year. If you have any questions, please contact me at (916) 838-5751.

Sincerely,

A handwritten signature in cursive script that reads "Carol Lancaster".

CAROL LANCASTER, Certification Analyst

c: Rosalind Hyde, Manager and Deputy Compact Administrator, CDSS Division of Children and Family Services, Out-of-State Placement and Policy Unit

FACILITY EVALUATION REPORT

FACILITY NAME:	JASPER MOUNTAIN: SAFE CENTER	FACILITY NUMBER:	602300065
ADMINISTRATOR:	JEFF HUSTON	FACILITY TYPE:	731
ADDRESS:	89124 MARCOLA ROAD	TELEPHONE:	(541) 741-7402
CITY:	SPRINGFIELD	STATE:	OR
CAPACITY:	18	ZIP CODE:	97478
TYPE OF VISIT:	Case Management <i>(Re-Cert)</i>	CENSUS:	15
MET WITH:	Jeff Huston, Program Director	DATE:	03/17/2010
		UNANNOUNCED	
		TIME BEGAN:	02:00 PM
		TIME COMPLETED:	05:03 PM

NARRATIVE

1 PURPOSE OF VISIT:
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3 As mandated by California law, this annual visit was performed by the undersigned analyst for the purpose of
4 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
8 remaining licensed and in good standing with the licensing authorities of the state of geographical
9 location -- in this case, the state of Oregon.
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11 CDSS CERTIFICATION HISTORY:
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13 The SAFE Center is a sister facility to the Jasper Mountain facility which has been certified by the CDSS since
14 March 6, 2008.
15
16 FACILITY, PHYSICAL PLANT, PROGRAM AND ORGANIZATIONAL REVIEW AND CHANGES:
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18 Both Jasper Mountain facilities operate as psychiatric residential treatment programs. In addition to serving
19 as an extension of the residential program at Jasper Mountain Center, the SAFE Center, also serves as:
20
21 • a 30-90 day residential evaluation center for children (ages 3-12) who are showing signs of developing
22 serious emotional disturbance and destructive behavior patterns. Instead of being sent to a psychiatric
23 hospital for evaluation, the children live in SAFE's rural, family-like setting while they are receiving
24 assessment services and a plan is established which will better meet their long term needs.
25 • 72-hour crisis care for children needing immediate stabilization.

(NOTE: For a complete description and overview of Jasper Mountain's intensive residential treatment, as well as the type of clients served, reference CDSS' previous reports on both facilities.)

SUPERVISOR'S NAME: Mei Yuk Kung

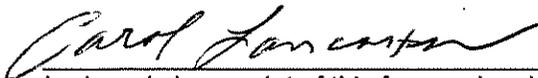
TELEPHONE: (916) 327-8763

LICENSING EVALUATOR NAME: Carol Lancaster

TELEPHONE: (916) 838-5751

LICENSING EVALUATOR SIGNATURE:

DATE: 03/17/2010



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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 03/17/2010

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

FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** JASPER MOUNTAIN: SAFE CENTER**FACILITY NUMBER:** 602300065**VISIT DATE:** 03/17/2010**NARRATIVE**FACILITY, PHYSICAL PLANT, PROGRAM AND ORGANIZATIONAL REVIEW AND CHANGES:

There have been no significant changes to the facility or staffing. Jeff Huston continues to be the director.

OREGON LICENSURE

The SAFE Center is licensed by the Oregon Department of Human Services (DHS), Children, Adults and Families Section. The license, or "Certificate of Approval to Operate a Child Caring Agency" issued encompasses:

- Residential care at the SAFE Center located 89124 Marcola Road, Springfield, Oregon - - capacity 18.
- Residential care at the Jasper Mountain Center located at 37875 Jasper-Lowell Road, Jasper, Oregon - - capacity 20.
- Residential care using foster homes approved by DHS.

The last license issued is dated January 1, 2007 and has an expiration date of December 31, 2009. Prior to a new license being issued, the facility is subject to a biennial review. In a letter dated December 17, 2009, the facility's licensing coordinator extended the license to March 31, 2009 to allow time to complete the biennial review. This analyst was also successful in reaching the Oregon licensing coordinator by telephone on February 1, 2010. In conversation, she reported the facility is in good standing and that she recently just completed the biennial review process during the week of January 25, 2010. As of the writing of this report however, her report was not available.

Oregon DHS did conduct an inspection of the SAFE Center's school, residential quarters, food service and water system on November 23, 2009 based on a request by Jasper Mountain. Only two very minor deficiencies were noted in the kitchen.

FIRE INSPECTIONS:

According to records of the Oregon Office of State Fire Marshall, the SAFE Center has been inspected annually in 2008 and 2009. (Those reports reflect inspection dates of January 23, 2008; and March 31, 2009 respectively.) No deficiencies were noted at the time of either of those inspections. The SAFE Center conducts fire drills monthly. Additionally, every three months, a drill is done during night time/sleeping hours (10:00 p.m. - 6:00 a.m.) The facility completes and maintains a "Fire Evacuation Report Form" on each drill conducted.

SUPERVISOR'S NAME: Mei Yuk Kung**TELEPHONE:** (916) 327-8763**LICENSING EVALUATOR NAME:** Carol Lancaster**TELEPHONE:** (916) 838-5751**LICENSING EVALUATOR SIGNATURE:**

DATE: 03/17/2010

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

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 03/17/2010

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: JASPER MOUNTAIN: SAFE CENTER

FACILITY NUMBER: 602300065

VISIT DATE: 03/17/2010

NARRATIVE

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SCOPE OF CERTIFICATION REVIEW:

- Entrance and exit interview with director Jeff Huston.
- Collection of updated and current organizational and program information material.
- Tour/physical inspection of facility and grounds

CERTIFICATION DECISION:

Re-Certify.

SUPERVISOR'S NAME: Mei Yuk Kung

TELEPHONE: (916) 327-8763

LICENSING EVALUATOR NAME: Carol Lancaster

TELEPHONE: (916) 838-5751

LICENSING EVALUATOR SIGNATURE:

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