



WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P STREET, MS 8-3-54
SACRAMENTO, CA 95814



EDMUND G. BROWN JR.
GOVERNOR

April 07, 2014

HERITAGE YOUTH SERVICES: TAMPVIEW RTC- 602300069
P.O. BOX 117
SPANISH FORK, UT 84660

ATTN: C. Lynn Loftin, Executive Director

SUBJECT: **RE-CERTIFICATION BY THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES (CDSS)**
Group Home Capacity: 12
Population Served: Male youth ages 12-17

Pursuant to California Family Code, Section 7911 et al., this is official notification that CDSS certification for Timpview Residential Treatment Center, located at 200 North Anderson Lane, Lindon, Utah 84042, is continued through April 2015.

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 health or safety of a child

Certification will continue to be reviewed annually. We will continue to follow our Department policy which authorizes us to inspect facilities with or without an appointment as necessary.

If you have any questions please contact me at (916) 654-0118, or Carol Lancaster, Out-of-State Certification Analyst, at (916) 838-5751.

Sincerely,

FERNANDO SANDOVAL
Staff Services Manager II
Children's Residential Program

**STATE OF CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
FACILITY EVALUATION REPORT**

CCLD Regional Office, 744 P STREET, MS 8-3-54
SACRAMENTO, CA 95814

FACILITY NAME:	HERITAGE YOUTH SERVICES: TAMPVIEW RTC	FACILITY NUMBER:	602300069
ADMINISTRATOR:	LYNN LOFTIN	FACILITY TYPE:	731
ADDRESS:	200 NORTH ANDERSON LANE	TELEPHONE:	(801) 785-1761
CITY:	LINDON	STATE:	UT
CAPACITY:	12	ZIP CODE:	84042
TYPE OF VISIT:	Case Management (Re-Cert.)	CENSUS:	12
MET WITH:	Lynn Loftin, Executive Director; Odell Erickson, Quality Assurance	ANNOUNCED DATE:	03/13/2014
		TIME BEGAN:	09:38 AM
		TIME COMPLETED:	04:54 PM

NARRATIVE

1 PURPOSE OF VISIT:
 2
 3
 4 Annual on-site re-certification visit pursuant to California Family Code Section 7911 et al.
 5
 6 CERTIFICATION HISTORY
 7
 8 Timpview Residential Treatment Center (RTC) has been certified by the California Department of Social
 9 Services, Community Care Licensing Division (CDSS-CCLD) as an out-of-state group home provider since
 10 September 3, 2011.
 11
 12 CALIFORNIA PLACING AGENCIES:
 13
 14 The facility is certified for 12 beds. At the time of visit, client census was 12. There are not currently any
 15 California foster youth in placement.
 16
 17 POPULATION SERVED; FACILITY AND PROGRAM INFORMATION:
 18
 19 Population served is low cognitive functioning male youth age 12-17 who struggle with inappropriate and
 20 illegal sexual behavioral problems.
 21
 22 The physical plant is a single family home dwelling located in somewhat of a rural area (city of Lindon, Utah,) approximately 45 miles south of Salt Lake City.
 23
 24
 25 The program offered is a sexual accountability program.

SUPERVISOR'S NAME: Mei Yuk Kung *Fernando Santousi*

TELEPHONE: (916) ~~927-8763~~ 651-5380

LICENSING EVALUATOR NAME: Carol Lancaster

TELEPHONE: (916) 838-5751

LICENSING EVALUATOR SIGNATURE:

DATE: 04/03/2014

Carol Lancaster

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 04/03/2014

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 8-3-54
SACRAMENTO, CA 95814

FACILITY NAME: HERITAGE YOUTH SERVICES: TIMPVIEW
RTC

FACILITY NUMBER: 602300069

VISIT DATE: 03/13/2014

NARRATIVE

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EDUCATIONAL PROGRAM SERVICES:

Educational programming that provides individualized academics through Park City Independent School designed to meet the individual needs of each student is on site at the group home. School accreditation is under the Northwest Association of Accredited Schools. Current accreditation is good through June 30, 2014.

UTAH LICENSING INFORMATION:

The facility is licensed to provide residential treatment for 12 male youth clients ages 12-17 years old by the Utah Department of Human Services, Office of Licensing (License #20605.) The current license is good for the period May 1, 2013 to April 30, 2014.

Through contact with the facility's assigned licensing evaluator, it was learned that the facility's annual visit was just recently completed; there were no major violations; the facility is in good standing with Utah Licensing and they have been complaint free over the last year.

FIRE CLEARANCE:

The facility last underwent and passed a fire inspection on February 20, 2014. The inspection was performed by an inspector with the City of Lindon.

OTHER OVERSIGHT AGENCIES:

The facility's meal service is under the authority of the Utah County Health Department. The current permit to operate a food service establishment is good through December 31, 2014.

The facility has a private well on the property. A certificate of analysis from Chemtech-Ford Laboratories of Sandy, Utah dated October 22, 2013 reflects the water to be within safe and acceptable limits.

SUPERVISOR'S NAME: ~~Mei Yuk Kang~~ *Fernando Sandoval*

TELEPHONE: (916) ~~827-8763~~ *651-5380*

LICENSING EVALUATOR NAME: Carol Lancaster

TELEPHONE: (916) 838-5751

LICENSING EVALUATOR SIGNATURE:

DATE: 04/07/2014



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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 04/07/2014

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: HERITAGE YOUTH SERVICES: TIMPVIEW
RTC

FACILITY NUMBER: 602300069

VISIT DATE: 03/13/2014

NARRATIVE

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SCOPE OF RECERTIFICATION REVIEW:

- Entrance interview and facility tour with Lynn Loftin, Executive Director and Odell Erickson, Quality Assurance.
- Collection of relevant and updated organizational and program information material.
- Facility tour -- inside and out, to include (but not limited to) examination of:
 - Food supply, kitchen appliances, cooking and serving amenities; meal menus.
 - Furniture, bedding, household supplies.
 - Safe, locked storage of toxics, sharp knives and medications.
 - Adequate recordkeeping system for medication.
 - First aid kits and supplies being readily available.
- Fire drill log examined.

FINDINGS, VIOLATIONS AND PLAN OF CORRECTION:

The facility was clean, safe, sanitary and in good repair. No deficiencies were observed or are being cited.

Re-certify.

SUPERVISOR'S NAME: ~~Mei Yuk Kung~~ *Fernando Sandour*

TELEPHONE: (916) ~~327-8763~~ *651-5380*

LICENSING EVALUATOR NAME: Carol Lancaster

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