



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

July 9, 2015

NORTHWEST PASSAGE CHILD AND ADOLESCENT CENTER – 602300075
203 UNITED WAY DRIVE
FREDERIC, WI 54837

SUBJECT : Re-Certification by the California Department of Social Services (CDSS)

CAPACITY : Up To 35 male and female, Ages 6 - 17

Pursuant to California Family Code, Section 7911 et al., this is official notification that certification for Northwest Passage Child and Adolescent Center located at 203 United Way Drive, Frederic, Wisconsin is continued through April 2016.

Certification will be re-reviewed annually or more often should non-compliance with California Title 22 licensing standards as they apply to California group homes become questionable or at issue. Additionally, serious incidents must be reported to the CDSS Out-of-State Placement Policy Unit for each child in care regardless of whether he 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

While certified, 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) 651-5380; or Certification Analyst Ron Leslie at (916) 654-0956

Sincerely,

Original signature on file

MARISA SANCHEZ, MANAGER I
Children’s Residential Program
Community Care Licensing

C: Monica Jackson, Manager and Deputy Compact Administrator, Out-of-State Placement and Policy Unit

STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
FACILITY EVALUATION REPORT

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 744 P STREET, MS 8-3-54
SACRAMENTO, CA 95814

FACILITY NAME:	NORTHWEST PASSAGE CHILD & ADOLESCENT CENTER	FACILITY NUMBER:	602300075
ADMINISTRATOR:	ELLEN RACE	FACILITY TYPE:	731
ADDRESS:	203 UNITED WAY DRIVE	TELEPHONE:	(715) 327-4402
CITY:	FREDERIC	STATE:	WI
CAPACITY:	35	ZIP CODE:	54837
TYPE OF VISIT:	Case Management	CENSUS:	33
MET WITH:	Amanda Lundquist, Program Coordinator	UNANNOUNCED DATE:	06/17/2015
		TIME BEGAN:	10:20 AM
		TIME COMPLETED:	03:03 PM

NARRATIVE

1
2 PURPOSE OF VISIT:
3
4 Annual on-site re-certification visit pursuant to California Family Code Section 7911 et al.
5
6 CERTIFICATION HISTORY
7
8 Northwest Passage was originally certified by the California Department of Social Services, Community Care
9 Licensing Division (CDSS-CCLD) as an out-of-state group home provider March 1, 2013.
10
11 CALIFORNIA PLACING AGENCIES:
12
13 At the time of this re-certification visit, no California foster youth were in placement. The California foster
14 child placed in 2013 in conjunction with the facility's initial certification successfully completed the program
15 and was discharged back to lower level group home care in California. The facility has expressed ongoing
16 interest and willingness to accept other CA foster youth.
17
18 At the time of visit, the facility census was 33 -- all children in placement being from Wisconsin, Minnesota,
19 Georgia, and New Jersey.
20
21 FACILITY AND PROGRAM INFORMATION; POPULATION SERVED:
22
23 Northwest Passage Ltd., was established as a 501(c)(3) non-profit organization in 1979. Northwest operates
24 three licensed facilities in the state of Wisconsin -- Northwest Passage III, located at 203 United Way Drive,
25 Frederic, Wisconsin, is the subject of this report. (The other two facilities are not CDSS certified.)

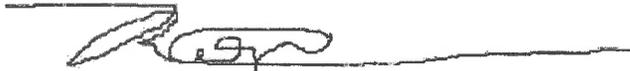
SUPERVISOR'S NAME: Marisa Lopez

TELEPHONE: (916) 651-0631

LICENSING EVALUATOR NAME: Ronald Leslie

TELEPHONE: 916-654-0956

LICENSING EVALUATOR SIGNATURE:



DATE: 07/09/2015

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

FACILITY REPRESENTATIVE SIGNATURE



DATE: 07/09/2015

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 8-3-54
SACRAMENTO, CA 95814

FACILITY NAME: NORTHWEST PASSAGE CHILD &
ADOLESCENT CENTER

FACILITY NUMBER: 602300075

VISIT DATE: 06/17/2015

NARRATIVE

1 FACILITY AND PROGRAM INFORMATION; POPULATION SERVED: (Continued)
2
3
4 The Frederic, Wisconsin facility has a 35 bed capacity. At the time of visit, the facility had 33 beds in use.
5 Two different programs are operated within the building/physical plant:
6
7 • A 19 bed co-ed child and adolescent clinical assessment center (clients ranging in age from 6-17).
8 • A 16-bed intensive residential treatment program for adolescent females ages 12-17.
9
10 The programs operate separately and independently from one another and the clients do not co-mingle.
11
12 Youth placed at the facility attend an on-grounds school.
13
14 WISCONSIN LICENSING INFORMATION:
15
16 The facility is licensed as a Residential Care Center by:
17
18 Wisconsin Department of Children and Families
19 Child Welfare Licensing Section
20 201 East Washington Ave, E200
21 Madison, WI 53703
22
23 (608) 267-7932
24
25 Current license was issued on April 24, 2015 and is valid for two years. The next continuation date will be
26 March 1, 2017.
27
28 Contact with the Wisconsin licensing evaluator reflected positively on the facility - - the facility was reported to
29 be in good standing with no outstanding enforcement's or licensing actions.
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SUPERVISOR'S NAME: Marisa Lopez

TELEPHONE: (916) 651-0631

LICENSING EVALUATOR NAME: Ronald Leslie

TELEPHONE: 916-654-0956

LICENSING EVALUATOR SIGNATURE:



DATE: 07/09/2015

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FACILITY REPRESENTATIVE SIGNATURE:



DATE: 07/09/2015

FACILITY EVALUATION REPORT (Cont)FACILITY NAME: NORTHWEST PASSAGE CHILD &
ADOLESCENT CENTER

FACILITY NUMBER: 602300075

VISIT DATE: 06/17/2015

NARRATIVE1 FACILITY AND PROGRAM INFORMATION: POPULATION SERVED: (Continued)

2
3 Northwest Passage is certified through AdvancED Accreditation Commission. Certification is valid until June
4 30, 2020.

6 FIRE INSPECTION:

7
8 The facility's last inspection was conducted January 15, 2015 by the Wisconsin Department of Safety and
9 Professional Services. No violations were found at that time. Fire clearance is valid for one year.

11 FOOD SERVICE INSPECTION:

12
13 The facility has a commercial type kitchen that was last underwent an inspection by the Wisconsin
14 Department of Health on December 23, 2014 with no major deficiencies cited.

16 CRISIS DE-ESCALATION, PREVENTION AND INTERVENTION

17
18 Staff are trained in verbal and physical (non-violent) crisis intervention through the Crisis Consultant Group,
19 LLC, Virginia. The facility has a Seclusion (Protective Separation) Room.

21 SCOPE OF REVIEW:

- 22
23
24
 - Entrance interview; program discussion and exit interview conducted with Admissions Director Carrie Lillehaug.
 - Collection and review of updated/current facility and program related material.
 - Contact with Wisconsin licensing authorities.
 - Collection and review of the facility's most recent fire and health department inspection reports.
 - Facility tour conducted.
 - Examination of furniture, bedding, equipment and supplies, kitchen, menus, food supply, storage space, medical office, transportation vehicles, recreation space and school/educational related space and amenities.

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SUPERVISOR'S NAME: Marisa Lopez

TELEPHONE: (916) 651-0831

LICENSING EVALUATOR NAME: Ronald Leslie

TELEPHONE: 916-654-0956

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DATE: 07/09/2015

FACILITY EVALUATION REPORT (Cont)

CCLD Regional Office, 744 P STREET, MS 8-3-64
SACRAMENTO, CA 95814

FACILITY NAME: NORTHWEST PASSAGE CHILD &
ADOLESCENT CENTER

FACILITY NUMBER: 602300075

VISIT DATE: 06/17/2015

NARRATIVE

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FINDINGS AND NOTES

Facility uses QuickMar, an electronic program used to monitor, maintain and distribute medication. QuickMar is accessed by password given only to select medical personnel. Trained staff are issued an official certificate. Charts and reports can be derived to ensure compliance. QuickMar was initiated July 2014.

Facility impressed with utilization of break-away hooks, locked closets and fire plans in every client room.

Facility was provided a copy of the New Foster Care Rights poster from the Ombudsman office. Additional copies will be mailed via the CA State Ombudsman office.

The facility presented well - - appearing clean, safe, sanitary and in good repair. No deficiencies observed.

Re-certification approved.

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TELEPHONE: (916) 651-0631

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