



**County of Riverside**  
**Juvenile Justice and Delinquency Prevention Commission (JJJPC)**  
**Inspection – GROUP HOME**  
**2024**

<b>Date</b>	1/6/24
<b>Name of Facility</b>	Community Access Network: Perris YDC
<b>Address</b>	14294 Oakdale Road, Perris, CA 92570
<b>Phone</b>	951.789.0462
<b>Contact Person</b>	Guadalupe Arrelano, CAN Administrator 909.205.5826
<b>JJDPIC Inspectors</b>	Collopy/Parker/Wade
<b>Date of Last JJDPIC Inspection</b>	N/A
<b>CCL Contact Name</b>	
<b>Date of last CCL Inspection</b>	

**Staff Interviewed:**

<b>Name</b>	<b>Title</b>	<b>How long at GH?</b>	<b>Notes</b>
Melinda	Facility Manager	4 years	Former PCO: Humboldt Co.
Janessa Fields	AM Staff	6 mos.	Substitute teacher

**Describe the following:**

<b>Population</b>	6 (2 RivCo youth)
<b>Type of Care / Treatment</b>	STRTP
<b>Currently, what is the biggest challenge you face at the home</b>	Hiring and retention
<b>What is the one thing you are most proud of</b>	Maintaining the facility open during Covid.

**Staffing:**

Total number of staff	6
Ratio of staff to youth	Day Shift: 2:6      PM Shift: 2:6      Night Shift: 1:6
Minimum educational requirement	AA
Rate of retention for staff	Unknown

**Training:**

What is the training regimen for staff	Manual, OJT, Observation
How is the staff trained for behavior issues	Reviewing prior incidents/actions
Does training include Trauma Informed Care (TIC)	Yes
Human Trafficking	Yes

**Records/ Special Issues/ Policies:**

Where are records kept	Locked in office
Special Incident Reports (SIR) in the past year	25-30 per month (AWOL, Missed meds)
How was it handled	Various means

How are AWOLs handled	Loss of priveleges
Describe the Disciplinary Policy	
Cell Phone Policy	May retain cell phones

**Medical Issues:**

<b>How are medical issues and/or emergencies handled</b>	Transport to Urgent Care or hospital ER, as required.
<b>How is medication stored and administered</b>	Locked cabinet in office
<b>Access to:</b>	

**Programs:**

Type of Program	When or How Often	Notes
<b>Mental Health Services</b>	2x weekly	
<b>Religious Services</b>	As requested. Staff transports	
<b>Drug and Alcohol Classes</b>	1X weekly	
<b>Parenting Classes</b>	As required	
<b>Trauma Informed Care</b>	5X weekly	
<b>Human Trafficking</b>	2X weekly	
<b>Recreation and Physical Activities</b>	Daily	
<b>Other Therapy Provided</b>		

**Community Involvement:**

<b>Volunteer Opportunities</b>	None. Still restricted post-Covid.
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**Education:**

<b>Describe how and where youth are educated.</b> (Include transportation, relationship with off-site schools, Title 1 tutors, and homework routine.)	Arlington High School- Riverside- staff transported Raincross Academy- Perris Levy-Pollard- Corona
<b>Who holds educational rights or attends meetings</b>	CASA, IEP, Parents, et al.
<b>Is career planning, job training or college preparation offered</b>	Riverside: Thrive: bigdeting, parenting, life coaching IHBS: In House Behavioral Services

**Posted Documents Required:**

<b>Facility License</b>	All current.
<b>Personal Community Care Licensing (CCL) Rights</b>	All current.
<b>Activity Schedule</b>	All current.
<b>Universal Precautions Procedure</b>	All current.
<b>First Aid Supplies</b>	All current.
<b>Emergency Disaster Plan</b>	All current. Monthly fire and eq drills

**Interior:**

	<b>Kitchen</b>	<b>Notes</b>
<input checked="" type="checkbox"/>	Cleanliness	Good
<input checked="" type="checkbox"/>	Appliances	Clean and in good order
<input checked="" type="checkbox"/>	Menus posted	
<input checked="" type="checkbox"/>	Knives locked	
<input checked="" type="checkbox"/>	Food stored properly	
<input checked="" type="checkbox"/>	Chemicals stored properly	
<input checked="" type="checkbox"/>	Quantity - 1 week supply	1 week-Plus.
<input checked="" type="checkbox"/>	Fresh fruits/ vegetables	
<input checked="" type="checkbox"/>	Special Diet provisions	Accommodated.
<input checked="" type="checkbox"/>	Fire Extinguisher	Multiple placed throughout home.
	<b>Bathrooms</b>	<b>Notes</b>
<input checked="" type="checkbox"/>	Cleanliness	Clean and in good order
<input checked="" type="checkbox"/>	Smell	Acceptable

✓	Mold/ Mildew	None observed
✓	Any safety hazards	None observed
	<b>Bedrooms</b>	<b>Notes</b>
✓	Cleanliness	
✓	Personal space	Adequate
✓	Age appropriate decor	
✓	Fire/Smoke alarms	
✓	Any safety hazards	None observed
	<b>Common Areas</b>	<b>Notes</b>
✓	Cleanliness	
✓	Homelike setting	
✓	Fire/ Smoke alarms	
✓	Any safety hazards	None observed

**Exterior:**

	<b>Overall</b>	<b>Notes</b>
✓	Satisfactory appearance	
✓	Play areas/ clear space	Adequate
✓	Windows	Clean
✓	Any safety hazards	None observed

**Questions for the Youth:**

(Assume quotation marks)

Three (3) youth were interviewed

1	How old are you	17(Samuel), 16 (Jaden)
2	What school do you attend	Levy-Pollard, Home-schooled
3	What do you like about this home	No comments
4	What would you change about this home	More freedom. Faster access to clothing allowance. Better wifi.
5	Do you have bedding, hygiene supplies, drawer and closet space	Yes/Yes.
6	Do you have clothes and shoes that fit	Yes/Yes, But both need refresh
7	Where do you keep your private property	Adequate space.



8	What are the phone call rules	Unrestricted.
9	Do you have visitors	Samuel: No, Jaden: Yes
10	Do you feel supported at this home	Yes
11	How long have you been here	6 months/2 months
12	Have you been in other group homes	Yes/Yes (4)
13	Can you explain the rules, responsibilities and grievance procedure	Yes/Yes
14	How quickly do staff and/or county social workers respond to needs	1-2 days/ 1 week-10 days
15	What do you do on Sundays	Relax/Play video games

Evaluate overall quality of facility:

**IF CORRECTIVE ACTION IS REQUIRED, PLEASE PHOTOGRAPH THE ITEMS TO BE CITED**

**Corrective Action Notification?** Handled on site

**List Items to be included in Corrective Action Notification letter:**

1	Develop better process for shift change debrief.
2	Inspector to research Narcan availability/advise GH.

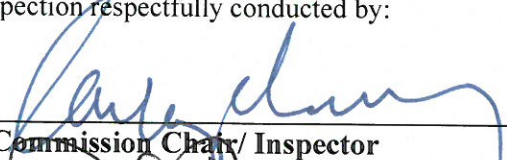
Have you completed the new requirements for accreditation pursuant to AB403?

In process


If not, what is the estimated time of completion?

June 2024

Inspection respectfully conducted by:

  
 Commission Chair/ Inspector

7-12-23  
 Date

  
 Commissioner / Inspector

7-11-24  
 Date

\_\_\_\_\_  
 Commissioner / Inspector

\_\_\_\_\_  
 Date

cc: Presiding Judge of the Juvenile Superior Court  
 Chief Probation Officer  
 Community Care Licensing  
 Director of Group Home

Director of Behavioral Health  
 Chairman of the Board of Supervisors  
 County Executive Officer  
 Office of Education Executive Director