

Jun 04, 2025

Young Women's Empowerment Center  
66 N 180 W  
Ephraim UT 84627

Dear Provider,

This is your **Inspection Report** from the Office of Licensing. This document explains what rules were found out of compliance in your facility, the correction date, and any sanctions when applicable.

Any rule listed in this document must be corrected by the correction date and maintained if already corrected. A licensor may conduct a follow-up inspection to verify compliance and maintenance of any rule listed here.

Be sure to maintain compliance with the rules to avoid further sanctions and, more importantly, to protect the health and safety of those you serve.

If you have any questions about this report, feel free to contact me. If you disagree with any part of this report, you may submit a request for a review within 15 calendar days of the date of this letter through your portal located on our website at [dlbc.utah.gov](https://dlbc.utah.gov).

Pursuant to DHHS Administrative Hearing Procedures set out in Administrative Rule R497-100-6, you may request an administrative hearing if you disagree with the agency action taken in this notice and there is a disputed issue or fact. You must submit your request to the Department through your provider portal at [dlbc.utah.gov](https://dlbc.utah.gov) under "Request for Administrative Hearing" **within 15 calendar days of the date of this report**. Any administrative proceeding shall be conducted informally in accordance with Utah Code § 63G-4-203 and Utah Administrative Code Rule R497.

I encourage you to give us feedback through this [feedback form](#).

Sincerely,

**Rob Jones**, Licensor  
Office of Licensing  
(385) 303-2955

**State Headquarters:**  
195 North 1950 West, Salt Lake City, Utah 84116

Utah Department of Health and Human Services  
**Office of Licensing**  
**INSPECTION REPORT**

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**Inspection Date:** May 12, 2025

**Facility:** Young Women's  
Empowerment Center,  
(435) 340-1880  
66 N 180 W  
Ephraim, UT 84627

**Inspection Type:** Announced, Annual  
Inspection

**Facility ID#:** F22-93717

**Licensors:** Rob Jones

**Phone#:** (385) 303-2955

This is a **warning** for a rule that was found out of compliance which must be corrected to avoid additional sanctions.

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Rule #: R501-1-12(5)(a)-(d)

(5) The licensee shall ensure that a discharge plan identifies resources available to a client and includes:

- (a) reason for discharge or transfer;
- (b) aftercare plan;
- (c) summary of services provided; and
- (d) progress evaluation.

**Noncompliance description:**

The licensee was out of compliance with R501-1-12(5)(a)-(d) by not having the required components of a discharge plan. During the inspection it was observed that one of the reviewed client files was missing a reason for discharge, an aftercare plan, summary of services provider, and a progress evaluation.

During the onsite renewal inspection this Licensors was conducting a file review of a discharged client's file. The review showed that one of the therapists was completing an updated treatment plan. This plan did not have a reason for discharge and the language used in the treatment plan was in future tense for example, when the client completes the program. The requirements of the aftercare plan were stated as a goal. There was not a summary of services provided and there was not a final progress evaluation that contained why the client was ready for transition. The other therapist discharge plan appeared to be compliant with licensing requirements.

Although this noncompliance was corrected during the inspection, compliance with this rule must be maintained

**Risk:** Low

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This is a **warning** for a rule that was found out of compliance which must be corrected to avoid additional sanctions.

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Rule #: R501-1-16(1)(a)-(u)

(1) The licensee shall ensure that each staff receives pre-serving training on the following topics before being left unsupervised and within 30-days of hire:

- (a) program policies, procedures and safe practices as outlined in Section R501-1-5;
- (b) program emergency preparedness, response, and recovery plan, including at least:

- (i) emergency procedures to instruct staff how to address incident reporting, continuity of care, transport, relocation, and client health and safety during natural disasters, extreme weather events, fire, utility or structural failures, or other unexpected disruptions to the program service; and
- (ii) instructions to staff regarding how to report and respond to significant criminal activity and significant medical emergencies;
- (c) CPR and First Aid;
- (d) client eligibility, emphasizing the behaviors and circumstances the program can safely manage;
- (e) staff involvement and responsibility in the intake, discharge, and unplanned discharge processes;
- (f) client rights;
- (g) supervision and ratios;
- (h) as applicable, medications management, storing, and administration;
- (i) as applicable, food handling as outlined in Subsection R501-1-10(3);
- (j) background checks;
- (k) prevention, signs and symptoms of abuse and neglect, including sexual abuse, and legal reporting requirements;
- (l) provider code of conduct as outlined in Rule 380-80;
- (m) non-discrimination policy in accordance with Section 26B-2-109 that includes a prohibition of abuse, discrimination, and harassment based on sex, gender identity, or sexual orientation;
- (n) staff and client grievance procedures;
- (o) crisis intervention;
- (p) appropriate use of restraint and seclusion;
- (q) de-escalation techniques;
- (r) appropriate searches;
- (s) appropriate and inappropriate behaviors of clients;
- (t) appropriate and inappropriate staff responses to client behaviors; and
- (u) if applicable, staff response to a client leaving a program without permission.

**Noncompliance description:**

The licensee was out of compliance with R501-1-16(1)(b)(i),(k),(m) by not completing the required training prior to the 30 day days of hire. This licensor observed the staff's file had several trainings that were completed within 60 days of hire instead of 30 days.

During the renewal inspection this licensor reviewed Staff Allison W.'s file. It was observed that the staff did not complete all of the required 30 day training. The Licensee's training computer program had the training listed as to be completed within 60 days of hire. This error was corrected prior to the end of the inspection

Although this noncompliance was corrected during the inspection, compliance with this rule must be maintained

**Risk:** Low

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This is a **warning** for a rule that was found out of compliance which must be corrected to avoid additional sanctions.

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(5) The licensee shall maintain and make the following available to the department upon request:

- (a) proof of financial viability of the program as verified by a financial professional;
- (b) general liability insurance;
- (c) professional liability insurance;
- (d) vehicle insurance;
- (e) fire insurance; and
- (f) additional insurance as required to cover each program activity.

**Noncompliance description:**

The Licensee was out of compliance with R501-1-6(5)(d) by not having proof of insurance for the vehicle that is used to transport clients. During the inspection it was observed that the vehicle did not have a proof of insurance in the vehicle.

During the onsite renewal inspection the licensor was verifying proof of insurance as required in licensing rules. While this licensor was inspecting the van that is used to transport clients the licensee was not able to find the proof of insurance. Once inside they were not able to print another copy for the vehicle.

This rule must be in compliance by Jun 12, 2025 and compliance maintained to avoid possible or additional sanctions, including Civil Money Penalties.

**Risk:** Low

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