

1 MICHAEL RAY DAVIS,
2 called as a witness by the State, being
3 first duly sworn by the Court, was
4 examined and testified as follows:

5 DIRECT EXAMINATION

6 BY MS. TIMMINS:

7 Q. Would you please state your name.

8 A. Michael Ray Davis.

9 Q. Mr. Davis, where do you live?

10 A. I live in New London, Iowa.

11 Q. Are you from the area?

12 A. Yes.

13 Q. Where do you work?

14 A. I work at Great River Medical
15 Center Outpatient Mental Health Clinic in
16 Burlington, Iowa.

17 Q. How long have you been there?

18 A. It's been eighteen months last
19 March.

20 Q. Could you tell us a little bit
21 about your educational history?

22 A. Sure. My master's degree is in
23 clinical social work. I got that from the
24 University of Utah Graduate School of
25 Social Work. I have a bachelor's degree

1 in social work from Brigham Young
2 University, and an associate's degree in
3 social work from what used to be called
4 Ricks College in Rexburg, Idaho.

5 Q. And tell us about your employment
6 history?

7 A. Well, most recently I worked--I've
8 been working at Great River Medical Center
9 as a therapist. Prior to that, I worked
10 at Midwest Academy up until basically the
11 day that the authorities showed up there.
12 I began I want to say July 1st of 2013, I
13 believe, is when I started there.

14 Prior to that I worked for--let me
15 see if I can get the name right here.
16 It's a long one--Mental Health Network
17 Government Services which provided
18 contract services to military soldiers and
19 their families at military bases
20 throughout the United States. I worked at
21 that for about a year.

22 Prior to that, from 2009 to 2012, I
23 worked in Iraq for the Department of
24 Defense as a contract therapist in Iraq
25 and with rotations in Germany and a few

1 other places.

2 Q. Do you have a military history?

3 A. Yes.

4 Q. What was your service?

5 A. I was in the United States Army.

6 Q. I would like to talk about your
7 employment at Midwest Academy. You said
8 you started there on July 1, 2013?

9 A. As near as I recollect, yes.

10 Q. Let's talk about the facility
11 first. It's a big place; right?

12 A. Yes, large facility.

13 Q. Do you know about how many students
14 it could accommodate?

15 A. My best guess would be over 300 if
16 we needed to.

17 Q. When you worked there, was there an
18 average number of students at any one
19 time?

20 A. This is a guess, but I'd say around
21 90 to 100 maybe.

22 Q. We've heard testimony about there's
23 a boys' side and a girls' side; is that
24 right?

25 A. That's correct.

1 Q. All right. Give us a picture of
2 just basically how the facility is set up?

3 A. Well, first of all the boys' side
4 and the girls' side are mirror images of
5 each other. As you come into the
6 facility, there's a long hallway. The
7 hallway splits and goes two directions.

8 There's a wing on the right side
9 that has the young ladies there, and just
10 to the right of that as you come down that
11 hallway, just to the right of the hallway
12 there's a cafeteria that only the girls
13 use.

14 And there's a facility that's a
15 mirror image of that to the left that the
16 boys are housed in.

17 Q. We've heard talk, too, about a gym
18 and a seminar room. How are those
19 connected to this? What you just
20 described, the boys' and girls' side, is
21 that the main building?

22 A. That's the living quarters, yes.
23 And then to the back of that, kind of over
24 on the boys' side, there's a large
25 gymnasium, which was used for both the

1 boys and the girls. And then outside of
2 that in the back of the facility, there's
3 a large what they call the seminar area
4 where they conducted various kinds of
5 training seminars and so forth for the
6 children.

7 Q. Is the gym and seminar building
8 connected, or do you have to walk outside
9 to get to the other?

10 A. There's a causeway, a closed
11 hallway, that goes from the gym to the
12 seminar area. So it's enclosed but it's
13 not heated. It's just a weather--like a
14 walkway that's out of the weather.

15 Q. So the seminar building is a
16 completely separate building from the gym?

17 A. Yes.

18 Q. And is the gym a completely
19 separate building from the sleeping
20 quarters, the front area, or is it
21 connected?

22 A. They're connected by hallways, but
23 essentially they are very much apart from
24 each other.

25 Q. This was a private school?

1 A. Yes.

2 Q. Parents paid for their children to
3 come there?

4 A. Sorry?

5 Q. Parents paid for their children to
6 come there?

7 A. That's my understanding, although I
8 had nothing to do with the financing, of
9 course.

10 Q. I assume at a place like this that
11 there are many things going on at one
12 time; is that right?

13 A. Oh, yeah, all day long.

14 Q. It was a very busy place?

15 A. Very, very busy.

16 Q. So you maybe had 90 to 100
17 students. How many staff worked there?

18 A. Oh, my. I'm guessing, but 20 or 30
19 maybe on any shift.

20 Q. And it was a 24-7 staffing?

21 A. Yes.

22 Q. All right. What were you hired as?

23 A. I was originally hired to do
24 therapy.

25 Q. And who were you interviewed by?

1 A. I was interviewed by Ben Trane. I
2 think Colton was there. Shasta Heidbreder
3 was there.

4 Q. Who is Colton?

5 A. Colton is Ben Trane's brother.

6 Q. Did he work there too?

7 A. Yes.

8 Q. You said you were hired as a
9 counselor. Did that change quickly?

10 A. Very rapidly.

11 Q. Tell us about that?

12 A. Well, about two, three days after I
13 started working there, Colton called me
14 into his office and as near as I can
15 recollect said something to the effect
16 that, oh, by the way, you are clinical
17 director now.

18 Q. Were you expecting that?

19 A. No.

20 Q. As clinical director, then, you
21 have this new job. What are you supposed
22 to do with it?

23 A. That was not really articulated to
24 me. You know, I had ideas about that as a
25 therapist.

1 Q. Did you supervise anybody?

2 A. Eventually, I supervised the
3 clinical aspects of people that did
4 therapy, other therapists. Indirectly, I
5 had some sway with some of the staff on
6 the floor, not a great deal of that
7 because that was really handled by the
8 program people.

9 Q. So really the people that you
10 supervised were just the counselors?

11 A. Primarily the therapists, yes.

12 Q. Therapists?

13 A. Yes.

14 Q. The people who were licensed to do
15 that type of work?

16 A. Yes.

17 Q. When you first started, how many
18 counselors were there?

19 A. When I first started there was one
20 social worker working there part time and
21 a lady--and I don't remember what degree
22 she had though--she was doing counseling
23 in the evenings, I believe. I didn't have
24 a lot to do with them, but they came in in
25 the evenings and did some part-time

1 individual counseling.

2 Q. So when you were hired, you were
3 full time?

4 A. Yes.

5 Q. But you were at the time the only
6 full time?

7 A. Yes.

8 Q. Did that change over time?

9 A. Yes. In fact, I was hired because
10 Jim Posz, the other social worker,
11 therapist was retiring. I believe that
12 was the rationale anyway.

13 Q. So over time your staff grew.
14 There was more therapists; right?

15 A. Yes.

16 Q. At the time that Midwest Academy
17 closed, how many licensed counselors were
18 there or therapists?

19 A. There was three of us that were
20 actually licensed. Yeah, there were
21 three.

22 Q. And who was that?

23 A. That was Jane Riter. She was a
24 licensed mental health counselor. And
25 there was Raymond Forrester who just

1 graduated from graduate school and was
2 under practicum supervision there with me
3 as a master's level social worker. He was
4 licensed as a master's level social
5 worker, which of course then permitted him
6 to do therapy under my supervision.

7 Q. Was there someone named Gary--

8 A. Oh, yeah. Gary Lachapelle was
9 there. I'm probably not pronouncing his
10 name correctly. My understanding from
11 Gary is what he told me, is that his
12 license was out of Illinois, and it was a
13 combined chemical dependency dual
14 diagnosis kind of a license.

15 Q. But not licensed in Iowa?

16 A. Not to my knowledge. And I never
17 saw his license either. I just--that's
18 what he told me.

19 Q. All right. So these people were
20 part of your clinical director program?

21 A. I'm sorry?

22 Q. Or these people were part of this
23 group, this clinical group?

24 A. At that point, at the end there,
25 yes.

1 Q. Where were your offices at?

2 A. They were located on the second
3 floor above the administrative area on a
4 wing they called the U. It was just a U-
5 shaped hallway with a bunch of offices,
6 and that's where most of us were at.

7 Q. What were your duties as clinical
8 director?

9 A. That's really hard to describe.
10 What I took them to be was to help make
11 sure the academy ran in a clinically sound
12 way, although I didn't have much
13 authority. I was mostly in an advisory,
14 consulting capacity. I had no real
15 authority to change anything or do
16 anything as far as making any changes.

17 Q. Well, who did you answer to?

18 A. It depended on what time in my time
19 there. At one point, I was answering to
20 Shasta Heidbreder, Ben, Colton. There
21 were times when people on the floor,
22 program--senior program people had a lot
23 of sway. And then later as things
24 developed, Devon Dade and Raymond
25 Forrester were appointed co-directors of

1 the facility, and I reported to them.

2 Q. Where did Ben Trane fit into the
3 hierarchy of things?

4 A. Well, Ben Trane had, you know,
5 total overview and control of the school.
6 Anything that happened there had to be
7 approved by him, either indirectly or
8 directly. And if he didn't want it to
9 happen, it didn't happen. It was his
10 school. He owned it.

11 Q. So he was the ultimate authority?

12 A. Yes.

13 Q. Let's talk about when you first
14 started. What was the environment like
15 there?

16 A. For me, you mean?

17 Q. Yes. You first start at this
18 facility. Did you have an impression,
19 generally, of the work environment and the
20 environment of the school?

21 A. The environment of the school was,
22 frankly, rather hostile to me and cool. I
23 immediately got the impression that most
24 of the people working there had some
25 pretty negative impressions of therapy and

1 mental health in general. I had a
2 difficult time in the beginning getting
3 information I needed to do my job.

4 Q. Why is that?

5 A. What?

6 Q. Why is that?

7 A. I think it was the culture in the
8 school. It was a compartmentalization.
9 It was kind of, you get to know what you
10 need to know, and nothing more. And I
11 don't know, it was almost like a form of
12 management or control, I suppose.

13 Q. So a lot of times the left hand
14 wouldn't know what the right hand was
15 doing?

16 A. All the time the left hand didn't
17 know what the right hand was doing.

18 Q. That made it difficult for you to
19 do your job?

20 A. Yes.

21 Q. Who made all these policy decisions
22 to have this compartmentalization and to
23 not have this communication?

24 A. It was there when I got there. I
25 can make assumptions about that, but I

1 don't know how it came to be. It just was
2 there when I got there.

3 Q. Were there written policies and
4 manuals at Midwest Academy?

5 A. There were written manuals and
6 policies for people like family reps.
7 There was quite a bit of paperwork and
8 documentation. Most of that had to do
9 with the program aspects of the school
10 rather than the mental aspects, and so I
11 really didn't get involved with them but,
12 yeah, there was a lot of written material.

13 Q. And when you're talking about the
14 program aspect--so the written policies
15 regarding student rules and staff rules
16 and all of those types of things, who
17 wrote those?

18 A. Again, they were there when I got
19 there. I know that Ben and others had
20 revised different parts of those from time
21 to time. Who wrote them I really couldn't
22 tell you.

23 Q. What were the required
24 qualifications for staff to work there?

25 A. I'm not sure there were any

1 specific qualifications.

2 Q. Did any staff have to have specific
3 training on working with children?

4 A. Therapists did, yes.

5 Q. Besides therapists?

6 A. Not to my knowledge.

7 Q. Was there any training on working
8 with troubled children required?

9 A. It would be-- I would say, you
10 know, the on-the-job training, the
11 training by older staff, and by that I
12 don't mean necessarily in age, but older
13 in terms of how long they had been at the
14 facility. There were people there that
15 had been there eight and ten years, and
16 they were the ones that would train the
17 new people coming on.

18 Q. Was there any mandatory child abuse
19 training that was given to employees?

20 A. Not to my knowledge.

21 Q. We've already heard a lot of
22 testimony about the families and the
23 levels and the rules and the infractions
24 and consequences and all of those things.
25 So I won't spend too much time with you on

1 that, but you would agree that it was a
2 very strict environment?

3 A. Yes.

4 Q. You would agree that kids weren't
5 allowed to talk to other kids unless they
6 were certain levels and things like that?

7 A. That is correct.

8 Q. There wasn't mirrors?

9 A. There were mirrors, buy they
10 weren't available to the students on the
11 dorms.

12 Q. A lot of things were privileges,
13 like food and going outside and those
14 types of things?

15 A. Condiments were privileges, in
16 terms of food, that is. You know, certain
17 kinds of things like ketchup and, you
18 know, special things like that or
19 desserts. Those were privileges. As far
20 as the standard, basic diet, no, they were
21 fed.

22 Q. Of course. But you can--when you
23 leveled up, then you could get better
24 things?

25 A. Oh, absolutely, yes.

1 Q. Things from the salad bar?

2 A. Yes. You would get more salad
3 dressing choices, you would get more
4 choices on desserts, that sort of thing.

5 Q. And the same thing in OSS. The
6 food was different in OSS as an incentive
7 to improve your behavior?

8 A. Correct.

9 Q. There was different levels of
10 policing by students that, you know, the
11 students could give consequences or
12 recommend consequences for other students?

13 A. At very, very senior levels, yes,
14 the students could recommend consequences.

15 Q. There were rovers in the OSS rooms,
16 students--

17 A. That's correct.

18 Q. --that assisted in working the OSS
19 rooms?

20 A. Uh-huh (in the affirmative).

21 Q. Is that a yes?

22 A. I'm sorry. Yes.

23 Q. You're fine. He just has to take
24 that down. There were things, though,
25 that kids could go out on trips with staff

1 to go shopping or do something like that?

2 A. Yes.

3 Q. But usually that was a privilege
4 just for upper levels?

5 A. They had to be at certain levels to
6 be able to leave the grounds, and that had
7 to be approved by their family reps as
8 well.

9 Q. In regards to the counseling, to
10 your knowledge was the Defendant a
11 licensed counselor?

12 A. Not to my knowledge.

13 Q. Would the--and when I say
14 Defendant, I mean Mr. Trane, Ben Trane.

15 A. Yes.

16 Q. Would the Defendant make comments
17 to you about his abilities at being a
18 counselor?

19 A. He never made any comments about--
20 directly to me about being a counselor.
21 He made comments about--I would say
22 something about a mental health issue, and
23 he would indicate that he thought that was
24 mostly just behavior. That sort of thing.
25 But he never directly told me that he had

1 a degree in counseling or whatever. I
2 heard rumors to that effect, but those
3 were just rumors.

4 Q. Sure. Were there times, though,
5 when you would make recommendations or
6 have certain ideas about certain kids
7 regarding mental health and the Defendant
8 would override you--

9 A. Yes.

10 Q. --on some things you wanted to do?

11 A. Yes.

12 Q. So when it came to the mental
13 health of the kids, you didn't have any
14 final say on that?

15 A. I had no final say at all.

16 Q. Did the Defendant ever say anything
17 to you about how he knew more about
18 therapy than any other licensed counselor?

19 A. Not to me.

20 Q. What's that?

21 A. He did not say that to me.

22 Q. When you worked there, were you
23 aware that the Defendant was doing any
24 type of counseling with the kids?

25 A. Absolutely not.

1 Q. You did some counseling with the
2 children. You were clinical director, but
3 you also worked directly with the kids?

4 A. Oh, all day long I was working with
5 the kids in some form or another, you
6 know, in some sort of therapeutic
7 interaction with them.

8 Q. Now, when the kids had a counseling
9 session there was usually another kid in
10 the room; correct?

11 A. With those of us with a license,
12 that varied. Most of the time, yes. But
13 we certainly could see kids without
14 somebody else in the room.

15 When anyone else other than one of
16 my licensed counselors saw them, then my
17 understanding, as far as my knowledge is
18 concerned, they always had at least two
19 students and one staff, or if not, there
20 would be two staff and one student. There
21 was never just one student and one staff
22 with anyone except the licensed
23 counselors.

24 Q. But when you did counseling
25 sessions, you would have--sometimes there

1 would be another student in the room?

2 A. Often. I'd say probably better
3 than 50 percent of the time.

4 Q. That was normal?

5 A. That was normal, yeah. That was
6 actually a policy of the school, which is
7 one of the things I wasn't completely in
8 agreement with, but that was a school
9 policy.

10 Q. And what were your concerns about
11 giving a counseling session to a child
12 when there's another child sitting in the
13 room?

14 A. Well, if I were going to be
15 counseling that child about something, you
16 know, such as some sexual abuse they had
17 suffered or some serious issue, obviously
18 it was not a good thing to have another
19 student sitting there listening. And of
20 course that's not best practice in therapy
21 to have someone else in a session.

22 So when we only had one student--or
23 I'm sorry--when we had two students in
24 there, I was mostly doing, you know, skill
25 kind of counseling, working with issues of

1 how to deal with anger and frustration and
2 just the day-to-day functioning of the
3 student. But if it was something that was
4 very serious and very personal, then they
5 needed to have privacy.

6 Q. And you as a counselor were one of
7 the few people that could do that?

8 A. Yes.

9 Q. Now, there was a psychiatrist off
10 site that sometimes kids would get taken
11 to; is that right?

12 A. Yes.

13 Q. And that was just to get medicine
14 prescribed?

15 A. Yes. I believe that he primarily
16 prescribed anti-psychotropic medications
17 for the students that needed that.

18 Q. That also was done through a tele-
19 med system?

20 A. Tele-conference, yes.

21 Q. Okay.

22 A. On a computer, face to face on a
23 computer.

24 Q. So a lot of times kids would go
25 into a room, they would talk to the doctor

1 through the--I guess I would call it more
2 like a Skype or something like that?

3 A. Yes, essentially a secure Skype
4 kind of program.

5 Q. And you're aware in those
6 situations that there was usually another
7 student in the room as well with the
8 nurse?

9 A. And there was also a nurse there,
10 not just the tele-health practitioner on
11 the other end. There was also one of our
12 staff nurses in there.

13 Q. Plus another student?

14 A. Yes, usually.

15 Q. The OSS rooms, what was the thought
16 and policy behind those?

17 A. I'm not sure what your question is.
18 What are you asking?

19 Q. Why did you have them?

20 A. Why did we have them? They were
21 used for a couple of different reasons.
22 One of those was to get a child separated
23 if they were acting out, you know,
24 fighting or being violent, you know,
25 acting out in some way where they needed

1 to be separated from the rest of the
2 students, then they would be put in there
3 to calm down.

4 It was also used as a consequence
5 to get them to comply with rules as to
6 their behavior. So it was used for both
7 of those purposes.

8 Q. All right. So one reason is if the
9 kid is out of control and might be harming
10 themselves or others?

11 A. Yes.

12 Q. To keep them contained for a while?

13 A. Yes.

14 Q. The other reason was for
15 consequences?

16 A. Yes. It was a form of consequence
17 for severe behavior.

18 Q. Being placed in the Out-of-School
19 Suspension room, that could occur just
20 from an accumulation of infractions;
21 correct?

22 A. It could. That was overseen by the
23 family rep usually. They had the final
24 say on that.

25 Q. So the family rep would decide if a

1 child had gotten too many infractions in
2 this day, week, whatever it is, then they
3 could place them in the OSS room?

4 A. Yes.

5 Q. And the minimum time someone could
6 be in there was what?

7 A. Well, in the beginning I believe
8 the minimum was twenty-four hours. In the
9 end, we had some variability. We could
10 make some determination and often did get
11 them out of there much sooner than that.

12 Q. Because there was a point in time
13 when you worked there that there was a bit
14 of a switch as to how OSS worked; correct?

15 A. There was a constant shift in
16 evolution in the process in OSS the whole
17 time I was there.

18 Q. Because when you came in and
19 started working, did you approve of how it
20 was being done?

21 A. Not entirely, no.

22 Q. What was the policy behind sitting
23 in structure?

24 A. To get them to comply. Sitting on
25 the floor in a particular position is

1 uncomfortable. And the idea is, if I sit
2 there long enough and get tired of it
3 enough, then maybe I'll go do what I need
4 to do and go back and do homework and
5 school work and join the program.

6 Q. And what was the policy behind the
7 speakers with the motivational tapes?

8 A. Well, the motivational tapes were
9 actually--I actually enjoyed them. They
10 were, you know, different kinds of
11 speakers that are--a lot of them, as you
12 say, motivational speakers that speak to
13 large groups of students and children
14 outside of the academy. And of course
15 that has been recorded, and we use those
16 to try and motivate them to do what they
17 needed to do.

18 Q. Why did the lights have to be on
19 all the time?

20 A. Because we needed to be able to
21 monitor the students so they didn't hurt
22 themselves, someone else, or tear up the
23 property which they frequently did.

24 Q. And the policy behind special meals
25 in OSS?

1 A. The policy behind that I believe
2 also was a form of consequence.

3 Q. You would agree that a lot of the
4 OSS room structure was punitive in nature?

5 A. If what you're asking me is it
6 designed to be a form of punishment, I
7 suppose you could call it punishment. I
8 prefer to use the word consequence. It's
9 a consequence for behavior, yes.

10 Q. Would you consider those
11 therapeutic?

12 A. I believe that sometimes it is
13 necessary to be strict with children in
14 order to get them to comply, and I believe
15 that in some cases that can be
16 therapeutic, not always.

17 Q. Now, you said before that the
18 Defendant made the decisions--made the
19 final decisions at the school; correct?

20 A. Much of the time, yes.

21 Q. Did he ever explain to you why he
22 felt this strict structure was appropriate
23 for children?

24 A. Yes. I believe that--and this is,
25 you know, two and a half years of

1 conversation, I believe that Ben is a
2 strict behaviorist, and he believes that
3 children need to be taught consequences.

4 Often the children that came there
5 were not--they didn't have consequences.
6 That's why they ended up there. And so
7 the idea was to teach them that there are
8 rules, and we can make choices, but we
9 also have to consider the consequences.
10 And I think that Ben believed deeply that
11 that was the very best method of teaching
12 children to be obedient to rules and to
13 society.

14 Q. Now, you agree that some children
15 in OSS were there for extended periods of
16 time?

17 A. Yes.

18 Q. Some were there for days?

19 A. Yes.

20 Q. Some were there for weeks?

21 A. As near as I remember, yes. I
22 don't have the dates and times, but long
23 periods of time, days on end, yes.

24 Q. Some were there for months?

25 A. I don't believe that I know of

1 anyone who was in there continuously for
2 several months. They were in there a lot,
3 most of the time perhaps. But as far as
4 being there for, say, five months without
5 ever coming out, no. They got out and
6 they'd go back in; get out and go back in.

7 Q. And sometimes that would happen on
8 the same day?

9 A. Oh, yeah, sure.

10 Q. They'd get out and go back in?

11 A. Yes. They would do things and get
12 back in there. And sometimes, towards the
13 end after we took the doors off, the kids
14 would--they'd actually just get up and
15 walk down there.

16 Q. Let's talk about that. When you
17 first started, the OSS was under that very
18 strict structure; correct?

19 A. Yes.

20 Q. And when you started, did you
21 suggest that some changes be made?

22 A. Over time I did. I was being very
23 cautious when I first got there, very
24 conservative, because my position was
25 somewhat precarious. So I felt like I

1 could do more good being there than not.
2 So I was very careful and cautious about
3 what I said.

4 Q. You were concerned if you said too
5 much, you would lose your job?

6 A. In fact, at one point in time,
7 Shasta Heidbreder told me that if I did
8 certain things that I would be fired so,
9 yes, I had feared that, but not from Ben.
10 It was from the other staff.

11 Q. And that was also a bit of the
12 culture and environment there; correct?

13 A. I'm sorry.

14 Q. That was also a bit of the culture
15 and work environment there, that you had
16 to be careful about what you say?

17 A. In the beginning it was that way,
18 but it changed. It was getting much
19 better by the time this all happened.

20 Q. And I assume that with your
21 training and experience that you
22 recognized that the use of those rooms
23 wasn't always conducive to the best mental
24 health of these kids; right?

25 A. That is correct.

1 Q. So how did the Defendant respond to
2 your suggestions?

3 A. It depended. There were so many
4 times that we talked about various things,
5 and he would indicate that he was going to
6 look into it. And usually he would either
7 do something about it or nothing would
8 happen.

9 Q. And really nothing changed so such
10 in the OSS rooms until March of 2015; is
11 that correct?

12 A. I'm reluctant to be pinned down on
13 dates, because I don't remember the dates,
14 but it was about the time when DHS became
15 involved more and more.

16 Q. Okay.

17 A. That's when major changes occurred.

18 Q. There was a point in time when DHS
19 came into the school; is that right?

20 A. Yes. They had been in there
21 several times.

22 Q. At one time they took out several
23 kids; is that right?

24 A. Yes.

25 Q. Bxxxxxx [REDACTED] and Dxxx [REDACTED]?

1 A. There were several. I don't
2 remember all of the kids but, yes.

3 Q. Following that, you started to see
4 some changes in the OSS; correct?

5 A. Yes.

6 Q. You said something earlier about--
7 that you took some of the doors off; is
8 that right?

9 A. My understanding was that DHS
10 required that the doors be removed, or
11 that they be not locked, or whatever, and
12 then the kids started breaking the doors
13 and tearing door knobs off and throwing
14 them at us, and so I believe the deal was
15 that we would just take the doors off so
16 they wouldn't be there. So it was an
17 evolution because of what DHS was saying.

18 Q. But there was a point in time that
19 the locks were put back on the doors;
20 correct?

21 A. There may have been. I'm not
22 really sure about that. I wasn't really
23 involved a whole lot with the programming.

24 Q. But you went down to the OSS to
25 visit--

1 A. I did.

2 Q. --kids; correct?

3 A. I did. Several times a day, yes.

4 Q. So you knew at some point there
5 was--

6 A. Yeah. There were doors put back on
7 because we had kids that were becoming
8 violent. And the idea, I think, was that,
9 you know-- Well, at one point the reason
10 that occurred in my mind was because some
11 of the students that were in OSS attacked
12 the rovers, assaulted them, and I think
13 the idea was we needed a way to contain
14 them so that they could not do that. And
15 that's why the doors--or a door was put
16 back on.

17 Q. You would visit the students when
18 they were in OSS?

19 A. Yes. That was one of the primary
20 things I did during the day was in and out
21 of there all day long.

22 Q. The Defendant would visit the kids
23 there?

24 A. Yes.

25 Q. In fact, the Defendant was active

1 in all parts of the school?

2 A. Yes, he was.

3 Q. Was there ever a point where you
4 would say to the Defendant that it's time
5 that--that this kid needs to get out of
6 this room--

7 A. Yes.

8 Q. --that they've been there too long?

9 A. Yes.

10 Q. What would happen?

11 A. Well, a few months into my time
12 there we began to do that more and more.
13 For example, I believe it was Bxxxxxx [REDACTED].
14 He wasn't eating like he should, so I took
15 him out myself. I checked with Ben first,
16 but I took him out. We went out in the
17 courtyard, and I think I got him something
18 from McDonalds and something else that he
19 liked and, you know, tried to get him to
20 eat and, you know, get him some fresh air
21 and so forth. And so we did things like
22 that quite frequently with the kids in
23 there.

24 Q. But Bxxxxxx went right back into
25 OSS?

1 A. Yeah. He didn't want to leave. He
2 just didn't want to get out of there.

3 Q. He didn't want to leave?

4 A. No.

5 Q. Why do you say that?

6 A. Well, because he told me he didn't
7 want to come out of there. He didn't want
8 to go to school.

9 Q. You said nobody had mandatory child
10 abuse training there?

11 A. Not to my knowledge. Well, I did
12 and the other therapists did, of course,
13 but--

14 Q. Sure, if you had it before you came
15 there--

16 A. Yeah.

17 Q. --then you had it; right?

18 A. Yes.

19 Q. Did you suggest to the Defendant
20 that the staff should have mandatory child
21 abuse training?

22 A. I suggested that to Colton.

23 Q. Are you saying you never said that
24 to the Defendant?

25 A. Not in those words. We had

1 discussions about child abuse training,
2 Ben and I. And I indicated to him that I
3 believed they needed to be trained in that
4 way.

5 Q. And his response was what?

6 A. Well, his response was resistance
7 as was Colton's that--he was uncomfortable
8 that just rank and file staff would be
9 allowed to make--would be allowed to file
10 those kinds of things. And so the gist of
11 it was that he didn't think that was a
12 good idea.

13 Q. In fact, he made a statement
14 similar to, if they're going to make
15 reports that we don't want them to?

16 A. The gist of it was to that
17 direction, yes. Again, it was months ago
18 so I don't remember the exact conversation
19 but that was what I took from it.

20 Q. And you remember the conversation
21 that you had with DCI and FBI agents;
22 correct?

23 A. Some of it.

24 Q. You've been given the transcript to
25 read that?

1 A. I have.

2 Q. Did you ever have concerns about
3 placement of certain students at MWA?

4 A. Do you mean coming in, people
5 coming into the facility?

6 Q. People coming in, people that were
7 there?

8 A. Okay. Yes, I did. Towards the--
9 three-fourths of the way through the time
10 I was there, we got to a point where I
11 understood that I had latitude to make a
12 determination about students and whether
13 or not they were suitable for the
14 facility.

15 I actually determined on a couple
16 of different cases that they were not
17 suitable for the facility and told the
18 recruiter, the lady that did that work for
19 us, that I didn't think they were suitable
20 for that. And I don't remember exactly
21 who it was, it was between Ben and Colton,
22 but I was basically told that that
23 decision would be made by them from then
24 on; that I was no longer allowed to say
25 no. I did that a couple of times and was

1 told not to do that anymore.

2 Q. And in fact, in previous interviews
3 with agents, you said that Ben told you
4 that you couldn't say no?

5 A. Yes. Well, not that I couldn't say
6 no, but that I didn't get to have--I'm not
7 the one that would make that call.

8 Q. You had the authority taken away
9 from you; correct?

10 A. Essentially, yes.

11 Q. Because they didn't like it--Ben
12 didn't like it that you had turned away
13 some students that you didn't feel were
14 appropriate for the facility; correct?

15 A. I don't think Ben liked the idea of
16 turning students away at all. Exactly
17 what his motive was, I don't know, except
18 that he didn't want me to do that.

19 Q. Did the Defendant ever say things
20 to you about that you just needed to lock
21 down tight on the kids?

22 A. Comments of that sort were made
23 quite frequently by various different
24 people in the facility that were in
25 programming.

1 Q. I'm asking you about the Defendant.

2 A. I don't remember specifically Ben
3 ever saying that. He could have. I just
4 don't remember that.

5 Q. Do you remember telling DCI and FBI
6 agents that he said that to you?

7 A. No. I don't remember that. I may
8 have. If it's in the transcript, I must
9 have said it.

10 Q. Would it refresh your memory to
11 read the transcript?

12 A. Yes.

13 MS. TIMMINS: Judge, maybe this
14 would be a good time to break and--

15 THE COURT: Well, why don't we keep
16 going and see if we can get him done.

17 MS. TIMMINS: I'm sorry?

18 THE COURT: Why don't we keep going
19 and see if we can get him done.

20 Q. (By Ms. Timmins) Did the Defendant,
21 and I'm just talking about Ben
22 specifically, Ben Trane, did he ever make
23 comments to you about the kids faking
24 their mental health?

25 A. The comments that he made--I

1 remember one particular comment. I was
2 talking about one of the students that I
3 believed had a mental disorder, and he
4 said, well, I think that's just behavior.

5 And he would make comments about--I
6 would say something about, well, I think
7 that's depression or that student may have
8 pervasive developmental disorder, and he
9 would say, well, it's behavior, meaning
10 there needs to be a consequence and it
11 will go away. That's what I understood
12 from it

13 MS. TIMMINS: May I approach, Your
14 Honor.

15 THE COURT: You may.

16 Q. (By Ms. Timmins) I'm going to ask
17 you to look at page 73 from your recorded
18 interview. You can start on this page if
19 you want to see the beginning of it.

20 (The Defendant looked at the
21 document.)

22 A. That's essentially what--

23 Q. So let me ask you this question
24 again then. Did you have conversations
25 with Ben Trane where he made comments

1 about you need to lock down tight on the
2 kids?

3 A. He would make comments about
4 locking down tight on the kids during our
5 conversations, yes.

6 Q. He would make comments that they're
7 not really psychotic, they're just faking
8 it.

9 A. I want to be very careful here. I
10 don't remember him saying the words
11 "faking it," but that's what I understood;
12 that he believed that it would just be
13 contrived and it was just behavior that
14 they were doing on purpose to get out of
15 things; it's not because of their mental
16 illness. That's what I understood him to
17 mean.

18 Q. When you had the authority to
19 decide about admissions taken away from
20 you, what did the Defendant say to you
21 about who gets to decide who comes and
22 goes there?

23 A. I don't believe he really said. I
24 presumed from that that he and Colton
25 would be making those decisions. I don't

1 remember him saying specifically.

2 Q. Did you ever advise him that Dxxx
3 [REDACTED] or Axxxxx [REDACTED], and Bxxxxxx [REDACTED]
4 should not be there?

5 A. I did with Bxxxxxx [REDACTED] for sure. I
6 may have with Axxxxx [REDACTED]. I don't
7 remember for sure.

8 Q. When did you start advising him
9 that Axxxxx [REDACTED] should not be there?

10 A. Well, it was fairly--

11 Q. I'm sorry. Bxxxxxx [REDACTED].

12 A. Bxxxxxx. Okay. With Bxxxxxx [REDACTED],
13 it was fairly early in his time there,
14 within probably a week or two if I were to
15 guess, because he really just was not
16 intellectually capable of functioning in
17 that school the way he needed to.

18 Q. So Bxxxxxx gets there and you knew
19 real quick that he shouldn't be there?

20 A. That was my opinion from a clinical
21 point of view, yes.

22 Q. Did the Defendant do anything about
23 it?

24 A. I think later on-- I don't remember
25 where we sent him or exactly what

1 happened, but he left the school. I don't
2 remember where to but--

3 Q. That was about seven months later.

4 A. Okay.

5 Q. So I'm saying when Bxxxxxxx first
6 got there and you knew right away that he
7 shouldn't be there and you told the
8 Defendant that, did anything happen?

9 A. No. No. In fact, I think I--
10 that's when I wrote an e-mail to him about
11 Bxxxxxxx, I believe.

12 Q. And you did write an e-mail about
13 February; is that right?

14 A. Yes. The reason I did that,
15 frankly, was--that's a professional cover-
16 my-bases. I wanted him to be--I wanted it
17 in writing that I had advised getting him
18 out of there, and so I sent him that e-
19 mail.

20 MS. TIMMINS: May I approach, Your
21 Honor.

22 THE COURT: You may.

23 Q. (By Ms. Timmins) All right. I'm
24 handing you what has been marked as
25 State's Exhibit 47. It is an e-mail dated

1 Friday, February 6, 2015. Is this an e-
2 mail that you sent out to numerous people
3 including the Defendant, Ben Trane?

4 A. Yes, ma'am.

5 Q. And was that e-mail in response to
6 concerns that you had in the fact that
7 Bxxxxxx [REDACTED] should not be at the school?

8 A. That is correct.

9 MS. TIMMINS: At this time I'd ask
10 to enter State's Exhibit 47.

11 (State's Exhibit No.
12 47 was offered in
13 evidence.)

14 THE COURT: Ms. Schaefer, any
15 objection to State's 47?

16 MS. SCHAEFER: No objection.

17 THE COURT: State's 47 is admitted.

18 (State's Exhibit No.
19 47 was received in
20 evidence.)

21 Q. (By Ms. Timmins) Now, you wrote
22 this e-mail in response to something from
23 the nurse; correct?

24 A. I don't remember exactly. I'd have
25 to read it again.

1 (The Defendant looked at the
2 exhibit.)

3 A. Yes. I'd been in constant contact
4 with Nurse Ivy. She and I had concerns
5 about Bxxxxxx.

6 Q. Because he was in the OSS room all
7 the time; right?

8 A. Do you mean is that why I had
9 concerns? I had concerns because he
10 didn't need to be in that facility.

11 Q. Correct. But Nurse Ivy was
12 contacting you all the time because he was
13 in OSS?

14 A. She was concerned about him being
15 in OSS. She was concerned about him not
16 eating enough. And then of course that
17 behavior suggested there at the bottom of
18 the e-mail.

19 Q. And on this particular time, Nurse
20 Ivy said that Bxxxxxx had defecated all
21 over his room; he's banging his head on
22 the walls--

23 A. Yes.

24 Q. --and wanting to know what to do;
25 correct?

1 A. Yes.

2 Q. And so what was your response to
3 this group e-mail?

4 A. Do you want me to read it or--

5 Q. Yeah. Go ahead and just read it.

6 A. "Ben, without going into clinical
7 detail, I believe this young man is beyond
8 our ability to help him. In brief, this
9 is because I suspect organic brain issues
10 and possible cognitive deficits that are
11 beyond our scope. I understand that Dr.
12 St. Hill has requested neuropsychological
13 testing. I think that at a minimum this
14 is essential given the fact that he has
15 incidents where he hits his head on the
16 walls and doors. I am concerned that he
17 needs a different environment. In the
18 interim, I think we need to require him to
19 wear a medically protective head device to
20 prevent him hitting his head. Can you let
21 me know your thoughts?" And then it's
22 signed by myself, and at the bottom
23 there's-- Do you want me to read that as
24 well?

25 Q. No. That's fine. Okay. So this

1 was February of 2015; correct?

2 A. Yes.

3 Q. But it was soon after Bxxxxxxx
4 arrived that you continue to say this kid
5 does not belong here?

6 A. Yes.

7 Q. Okay. Was this kind of like you
8 were getting to the last straw, this e-
9 mail?

10 A. That was-- Yes. That was my
11 saying, this was my written professional
12 opinion.

13 Q. And it was after DHS pulled out
14 Bxxxxxxx and Dxxx [REDACTED] that you finally
15 were able to make some changes that you
16 wanted to the OSS rooms; correct?

17 A. Yes.

18 Q. And the Defendant allowed you to do
19 that?

20 A. To some extent, yes.

21 Q. What do you mean to some extent?

22 A. There was limits to what I could do
23 and not do. I was not given full
24 authority as clinical director. I would
25 have to run anything I did by him or by

1 Devon or someone before I did it.

2 Q. And actually it's where shortly
3 after DHS came in that the Defendant
4 stepped down as the director of MWA and
5 appointed Devon Dade; is that right?

6 A. Devon and Raymond Forrester, yes.

7 Q. So Devon Dade and Raymond Forrester
8 were now going to be co-directors?

9 A. That was my understanding, correct.

10 Q. What qualified Devon Dade for that
11 job?

12 A. Probably the years of experience
13 that he had there at the facility.

14 Q. Was Devon Dade a friend of the
15 Defendant's?

16 A. I'm sure he was friends with him.
17 He'd been working there ten years, so I
18 assume so.

19 Q. Raymond Forrester, he was friends
20 with the Defendant?

21 A. Raymond Forrester and Ben, I think,
22 met some summers before that when Raymond
23 came there between college years to work
24 at the facility. So again, yes, I believe
25 they were friends.

1 Q. So even though the Defendant
2 removed himself from the title of
3 director, everybody is still answering to
4 him; correct?

5 A. Yes.

6 Q. Were you aware that the Defendant
7 was conducting sexual surveys?

8 A. No, ma'am.

9 Q. Did you ever receive any of the
10 statistical information that was
11 supposedly--

12 A. I knew nothing about any
13 statistical information.

14 Q. You never heard of them?

15 A. Did not hear about it until the
16 investigation started and I talked to--I
17 was interviewed by FBI and DCI.

18 Q. What about body image therapy? Did
19 you participate with that?

20 A. No, ma'am.

21 Q. Did you know it was even going on?

22 A. No. And I would have had extreme
23 exception to it had I known that.

24 Q. Were you ever consulted by the
25 Defendant about, is this appropriate to

1 do?

2 A. No.

3 Q. Would you yourself have done it?

4 A. No.

5 Q. Actually, you talked to the
6 Defendant after the school had been shut
7 down. You talked to him about this body
8 image therapy; is that right?

9 A. I asked him if it was going on.

10 Q. Did you ask him specifically about
11 doing the body image therapy?

12 A. No.

13 Q. Did you ask him specifically about
14 doing the sexual surveys?

15 A. Yes.

16 Q. What did he say about that?

17 A. He told me those were being done
18 during a particular part of the seminars
19 and that it was an anonymous survey that
20 was being collected; that the data was
21 being put in a database; and then the
22 surveys were being destroyed; that there
23 was no information being kept about who
24 the survey--who filled them out. They
25 were--I was being told they were

1 essentially anonymous, blind surveys.

2 Q. All right. So he admitted to doing
3 them--or to handing them out and gathering
4 the information?

5 A. Essentially, yes. We talked about
6 that.

7 Q. But he told you it was for
8 statistical purposes?

9 A. He told me that the information was
10 being gathered. It was being put in a
11 database on a computer, and then the
12 surveys themselves were being destroyed.

13 Q. You knew Kxxxxxxx [REDACTED]?

14 A. Yes, ma'am.

15 Q. When she first came to the school,
16 her family rep was Callie Peterson;
17 correct?

18 A. That's correct. Well, now, I
19 think-- I'm not sure about that. I think
20 it may have been somebody else to begin
21 with, but shortly after she got there it
22 became her.

23 Q. At some point the Defendant made
24 the decision to become Kxxxxxxx [REDACTED]'s
25 family rep; is that right?

1 A. Apparently, yes.

2 Q. Did you advise that Kxxxxxxx would
3 be better suited with a female family rep?

4 A. I advised everyone at the facility
5 that she should be with female reps only.

6 Q. Was he also a family rep for Mxxxx

7 [REDACTED]

8 A. I believe he was, but I'm not
9 positive.

10 Q. Did you also advise that she would
11 be better suited with someone--or to have
12 a female family rep?

13 A. I don't remember specifically
14 saying that about Mxxxx, but I may have.
15 I don't know.

16 Q. And there were female family reps;
17 correct?

18 A. Sure.

19 Q. There was several that could have
20 been assigned to Kxxxxxxx?

21 A. Uh-huh (in the affirmative).

22 Q. Is that yes?

23 A. That is yes, correct.

24 Q. The Defendant only had a few
25 students on his caseload when he was a

1 family rep; correct?

2 A. I don't know how many he had. I
3 know there were several. I'd say five or
4 less. I don't know.

5 Q. Do you know that? You say five but
6 do you--

7 A. What I'm saying is that's an
8 estimate, a guess. It is only a guess.

9 Q. So you don't know?

10 A. I don't know.

11 Q. And the Defendant chose which kids
12 he would take?

13 A. Yes.

14 Q. And you agree that the family rep
15 has a lot of control over the students?

16 A. Absolute control, yes.

17 Q. Absolute control?

18 A. Yes. The family reps--nothing
19 happened unless they approved of it.

20 Q. Were there times where you would
21 see the Defendant with Kxxxxxx?

22 A. I'm sorry?

23 Q. Were there times that you would see
24 the Defendant with Kxxxxxx?

25 A. I saw him with her on several

1 different occasions.

2 Q. Where?

3 A. One time I saw him, and there was
4 another student with them, but they were
5 in the--out in the parking lot moving from
6 his residence in a company vehicle around
7 to the back, I assume to do work as he
8 often did with them, with the kids. I saw
9 him there.

10 I saw her at one point in the yard
11 at his residence with him and Layani and
12 all of his children, and she was over
13 there at that time. And I would see him
14 occasionally in the hallways talking with
15 her or walking with her.

16 Q. And that's not so much out of the
17 ordinary in the sense that the Defendant
18 did take kids--

19 A. Absolutely.

20 Q. --to do service projects and off
21 campus and things like that?

22 A. Yes, yes.

23 Q. There was a point in time where you
24 learned that Kxxxxxx had alleged that the
25 Defendant--that there was something going

1 on between her and the Defendant; correct?

2 A. That is correct.

3 Q. How did you find out?

4 A. Jane Riter, my assistant clinical
5 director, and her family--no, it wasn't
6 her family rep. She was actually doing
7 some therapy work with Kxx--came to me
8 with a letter that--and I don't remember
9 where she got it--but it was written--Kxx
10 had written it, and it alleged abuses by
11 Mr. Trane. And she wanted to know--wanted
12 to let me know about it, and then of
13 course what we should do about it. And
14 then, of course, what we do about that is
15 report it.

16 Q. When did you talk to Cheyenne
17 Jerred?

18 A. Oh, man. It was right in that
19 period of time, around the same time that
20 we got that letter.

21 Q. And why were you talking to
22 Cheyenne Jerred?

23 A. She had been doing--she was night
24 staff, which essentially was a night
25 watchman kind of a position, and she had

1 gotten herself involved with what I would
2 consider to be inappropriate counseling
3 activity with these students. And she was
4 called in so that we could look into that.

5 And mainly I was there assisting
6 Devon Dade. He was the director, of
7 course. And she was questioned about
8 those activities.

9 Q. Now, you said that she was involved
10 with counseling "these students." In
11 fact, it was particular to Kxxxxxx
12 [REDACTED]; correct?

13 A. She certainly was--well, to have
14 any person that's not qualified doing in-
15 depth counseling work at night when the
16 kids were supposed to be sleeping is not
17 appropriate, and that was my concern as a
18 clinical person.

19 Q. And was it so much in-depth
20 counseling work, or was she just talking
21 to Kxxxxxx?

22 A. I don't know what she was doing.
23 But what she was supposed to be doing was
24 allowing the girls to sleep, and she was
25 instead spending time with them and

1 talking with them at night.

2 Q. Because staff was not supposed to
3 talk to the kids; right?

4 A. Not at night. They were supposed
5 to be in bed. It was lights out, and they
6 were supposed to be in bed sleeping.

7 Q. And even during the day, they
8 weren't supposed to have personal
9 conversations with them?

10 A. Not extended conversations, no.

11 Q. All right. So it was determined
12 that this came out because Cheyenne Jerred
13 had talked to Kxxxxxxx, and Cheyenne told
14 upper management; correct?

15 A. I'm sorry?

16 Q. Cheyenne went with the information
17 to upper management; correct?

18 A. I'm not sure how the letter got to
19 Jane to be honest with you. It could have
20 been Cheyenne that brought it. I don't
21 know.

22 Q. And now we're at the point that
23 you're in this meeting with Cheyenne
24 Jerred; correct?

25 A. Yes.

1 Q. So what discussion is had with
2 Cheyenne?

3 A. The discussion was about what she
4 was doing, what her duties were, and what
5 she was and wasn't to do.

6 Q. And during that conversation with
7 Cheyenne, did she inform you, the people
8 in the room, that she had already called
9 DHS?

10 A. It was during that meeting she
11 informed us. I'm not sure exactly when,
12 but yes, she told us pretty much as soon
13 as she came in that she had called DHS.

14 Q. And at a later point in time,
15 Cheyenne Jerred was--a couple days later
16 Cheyenne Jerred was fired; correct?

17 A. That is correct.

18 Q. During your time working there,
19 were you made aware that the Defendant was
20 taking the girls to Victoria's Secret?

21 A. There was a point where I heard
22 that kind of secondhand, yes.

23 Q. And you did what with that
24 information?

25 A. I asked Ben about it. I asked him

1 what, you know--I don't remember the exact
2 conversation. I was a bit incredulous
3 about it. I didn't think that was a good
4 idea.

5 Q. So you went to the Defendant, you
6 told him you heard he was taking girls to
7 Victoria's Secret, told him that wasn't a
8 good idea; correct?

9 A. To that effect, yes.

10 Q. And what was his response to that?

11 A. I don't know there really was a
12 verbal response per se. It was just--
13 there was no real verbal response back.
14 It was just some facial expressions, I
15 guess.

16 Q. Did he tell you it was no big deal,
17 that he could do what he wanted?

18 A. That's the impression I got, that
19 he thought it was not a big deal. Out of
20 the totality of our conversation, I felt
21 that he believed that it was not a big
22 deal, yes.

23 Q. And you, in fact, told him it
24 should stop; right?

25 A. I don't remember if I told him

1 that, but I probably did. I certainly
2 would have if I'd have thought about it,
3 yes. I don't think anybody--any man
4 should be taking teenagers to Victoria's
5 Secret, period.

6 Q. Do you remember when this
7 conversation took place?

8 A. Not really. It was in the
9 facility. I think we were in the upper
10 area outside the U area in the hallway.

11 Q. Well, I mean what time of the year?
12 Did it take place in spring, fall? Do you
13 remember?

14 A. Oh, my goodness. I have no idea.

15 Q. How about in relation to when the
16 school shut down? The school shut down in
17 January or February of 2016.

18 A. It was earlier on, several months
19 before that, I think.

20 Q. Okay.

21 A. It was right about the time when it
22 happened, within a short period of time of
23 when he took them to Victoria's Secret.
24 It was within a short period of time to
25 that.

1 Q. I didn't understand that.

2 A. Okay. I confronted that not long
3 after I found out that that had happened,
4 which my understanding was that it had
5 happened just some few days before that.
6 So it was within a short period of time of
7 when the event occurred that the
8 confrontation occurred.

9 Q. Okay. So is it your understanding
10 he only did it once?

11 A. At that time I only understood
12 there was one incident, yes.

13 Q. And that was based on what he told
14 you or just what you assumed?

15 A. That's just what I-- I don't know.
16 I just assumed that, I guess.

17 Q. But the bottom line is it was two
18 or three months at least before the school
19 shut down that you had that conversation
20 with him?

21 A. I think it must have been, yes.

22 MS. TIMMINS: I think that's all I
23 have.

24 MS. SCHAEFER: Your Honor, I think
25 I can get it done.

1 THE COURT: Well, do you want to go
2 a few more minutes?

3 (Several jurors nodded in the
4 affirmative.)

5 THE COURT: Well, nobody is yelling
6 so I'll take that as a yes.

7 Go ahead, Ms. Schaefer.

8 CROSS-EXAMINATION

9 BY MS. SCHAEFER:

10 Q. Good afternoon.

11 A. Hi.

12 Q. I just wanted to confirm that when
13 you got to the facility, you would have
14 been the only full-time therapist;
15 correct?

16 A. Yes.

17 Q. My understanding was that there was
18 somebody who had been doing it part time,
19 but they were retiring?

20 A. Yes. I think it was like in thirty
21 days Jim Posz was retiring. And my
22 understanding was he worked a couple of
23 evenings or something and saw four or five
24 students in the evening.

25 Q. And that was July of 2013?

1 A. I believe so.

2 Q. And so already Midwest Academy was
3 going from a part-time evening therapist
4 to someone who would be working full time
5 during the day?

6 A. I believe that's accurate, yes.

7 Q. And then throughout the course of
8 your employment--and you stayed there
9 until the end; correct?

10 A. I did.

11 Q. Other therapists began to be hired?

12 A. Yes. Now, many of them were
13 students coming in on practicums. And
14 then, of course, when they would finish up
15 their schooling, often they would roll
16 right in, and that's a normal thing with
17 my profession by the way. It's very
18 normal to hire graduate students. Get
19 them through their practicum, and when
20 they graduate they often will come back to
21 the facility or place where they worked
22 their practicum. And then that's how we
23 acquired these students--or these
24 therapists, excuse me.

25 Q. Now, you indicated with Ms. Timmins

1 that at the time they closed it was you,
2 Jane Riter, Raymond Forrester, and Gary
3 Lachapelle?

4 A. And Callie who was also a licensed
5 drug and alcohol counselor. Oh, and I
6 believe Shasta also had her license for
7 drug and alcohol counseling as well by
8 that point.

9 Q. Was there also an Aaron Parks?

10 A. Oh, Aaron Parks was there a little
11 bit--he resigned a little bit before that
12 but, yes, he was there for some time. He
13 was an MSW student from BYU.

14 Q. So he was one of those who was
15 doing his clinical and--

16 A. Well, he had been hired. He was a
17 hired staff member at that point, yes.

18 Q. So even though there were only the
19 four of you at the end, during that couple
20 of years that you were there it grew?


21 A. It did. And we were growing it.
22 That was--that is something that was the
23 intent. And I think Ben concurred with
24 that, to get more licensed people in
25 there.

1 Q. And it was an evolution?

2 A. Yeah.

3 Q. Wasn't it the intent of Mr. Trane
4 and the other administrative staff as well
5 as yourself, weren't you intending on
6 opening up a new unit?

7 A. Yes, ma'am.

8 Q. And it was going to be geared
9 toward those students, maybe like Bxxxxxx
10 , who had issues beyond what the program
11 of MWA could handle?

12 A. Well, I don't believe that facility
13 would ever be appropriate for people like
14 Bxxxxxx. But for most of the students,
15 they would need to go through that
16 program, the new one that we were putting
17 together, where there would be very
18 intensive therapy, very intensive groups
19 and so forth.

20 And frankly, I was quite excited
21 about it. It was going to be a really
22 neat thing. I mean, we would have a
23 medical director and all of these things.
24 And then that program would feed the
25 school. All students would go through

1 there, and then move over to the MWA
2 facility.

3 Q. And you were going to run that;
4 right?

5 A. I was going to run that under the
6 direction of Dr. St.--

7 Q. Hill?

8 A. --Hill, yes. Dr. St. Hill was
9 going to be the director.

10 Q. And was Dr. St. Hill the
11 psychiatrist that worked with MWA through
12 the Telehealth?

13 A. Not through the Telehealth. He
14 worked directly with us. Kids would be
15 taken to Quincy to see him. He was not a
16 Telehealth doctor. He was a face-to-face
17 doctor, and he had been working with us
18 since I got there.

19 Q. And so over that two and a half
20 years you were there, the therapeutic part
21 of the school was just continuing to
22 evolve and grow?

23 A. Reluctantly, yes. There was
24 resistance, but it was moving in the
25 correct direction.

1 Q. And you indicated that Mr. Trane
2 clearly came from a very strict
3 behaviorist philosophy?

4 A. Yes.

5 Q. What does that mean exactly?

6 A. That means, essentially, that all
7 of us are required to have consequences
8 for things that we do. So if the
9 consequence is consistent, if it's direct
10 and fair, then we're generally going to do
11 the right thing if there is a consequence.

12 And the problem with many of these
13 students that we had, they were conduct
14 disordered, behaviorally-disordered kids,
15 and they hadn't been taught to obey rules.
16 They had been taught just the opposite.

17 So the idea was to get them to
18 understand that I get to choose my
19 behavior, but I don't get to choose my
20 consequence. And none of us get to do
21 that.

22 Q. And does the theory of the Midwest
23 Academy program, is that what it was
24 designed to do, to help those kids who
25 didn't understand that bad behavior equals

1 bad consequence?

2 A. Yes. And good behavior equals good
3 consequences. And that is correct, that
4 was the philosophy that they designed the
5 program around, to my understanding of it.

6 Q. And that good behavior equals good
7 consequence is the whole philosophy of the
8 level system; correct?

9 A. Yes, correct.

10 Q. If you behave, you get your points,
11 you do what you need to do, you'll
12 continue to go up on the scale and get
13 more privileges as you go?

14 A. And get out of there and go home.

15 Q. Was a lot of the time between you
16 and Ben-- You said he met with resistance?

17 A. I'm sorry?

18 Q. When you said you met--Ben met with
19 some resistance to some of your ideas, do
20 you feel that that was that strict
21 behaviorist coming out in him?

22 A. Yes, yes. It was Ben's deep belief
23 that the behavioral approach is best.
24 That's a difference of opinion.

25 Q. And for the two and a half years

1 that the two of you worked together, you
2 continued to attempt to evolve that theory
3 in him?

4 A. I did except I am also a
5 behaviorist. I believe that behavior and
6 consequence are very important. I use
7 that today in my therapy sessions with
8 adults, children, everyone.

9 Q. Whereas you recognize sometimes
10 mental health and the need for
11 psychotherapy might not be consistent with
12 behavioral therapy?

13 A. With people who have serious mental
14 illnesses who are not really capable of
15 the cognitive ability to understand
16 consequence and behavior and how those are
17 related, then we'd have to use a different
18 approach.

19 Q. Is that what you did with Bxxxxxx
20 [REDACTED]?

21 A. Bxxxxxx [REDACTED] would be a perfect
22 example of that. Bxxxxxx was not
23 intellectually capable of understanding,
24 at a level he needed to, to really make
25 use of consequence. He sometimes would

1 get-- He didn't understand cause and
2 effect. If one of us touches a hot stove,
3 we pull our hand back, ouch, that hurts.
4 He might touch it four or five times and,
5 ouch, ouch, ouch, ouch, and still not get
6 it. Don't touch the stove. So he wasn't
7 able to do that in a way that most people
8 could.

9 Q. And with Bxxxxxxx did you as a
10 clinical staff, as well as with the
11 Defendant, did you try various things to
12 try to get Bxxxxxxx to understand some of
13 those things?

14 A. We tried everything we could think
15 of, yes, ma'am.

16 Q. And were you aware that as early--
17 it's my understanding he came in November
18 of 2014?

19 A. He may have. I don't remember.

20 Q. Excuse me, September? If his
21 testimony was, I showed up around Labor
22 Day, does that sound about right to you?

23 A. Could be. I just honestly don't
24 remember to be honest.

25 Q. Were you aware of that within a

1 couple of months of Bxxxxxx being there
2 that Ben was having discussions with his
3 mom that maybe this wasn't the best place
4 for him?

5 A. No. And sadly that's one of those
6 points about compartmentalization I was
7 talking about. Had I known that, that
8 would probably have--that would be
9 different. I didn't get that information.

10 Q. And that was just kind of the way
11 the system--

12 A. It was the way it was set up. I
13 don't know who set it up that way. That
14 school had been there ten years before--I
15 think before Ben got there. I don't know.
16 But it's been there a long time. That
17 system was in place long before I got
18 there.

19 Q. In your February e-mail to Ben
20 about Bxxxxxx, at that point in time were
21 you seeking to get him some sort of
22 hospitalization?

23 A. He needed to be out of there. He
24 needed to be somewhere else, even if it
25 had to be home. Either get him to a

1 different facility that's appropriate or
2 send him home, one or the other.

3 Q. To get him into a different
4 facility, didn't it require someone, a
5 licensed therapist, to say he needs
6 something beyond what we have?

7 A. Well, if you remember in that e-
8 mail I was talking about the testing.
9 That testing would have substantiated that
10 he needs to be somewhere else. I needed
11 Dr. St. Hill to corroborate with me that
12 this young man needs to be somewhere else.
13 They don't always just take somebody like
14 me--like my word for it.

15 Q. But at least from February, and
16 apparently earlier on, even Ben was
17 recognizing that Bxxxxxxx probably wasn't
18 in the best place?

19 A. If he was making those kinds of
20 conversations, certainly, yes, he was
21 beginning to recognize it.

22 Q. When did the discussions about this
23 new unit start up?

24 A. Oh, three, four, five months before
25 everybody showed up at the facility.

1 Q. What do you mean "everybody showed
2 up at the facility"?

3 A. I'm talking about the FBI, DCI, and
4 the warrant was served.

5 Q. So maybe--

6 A. Several months before that.

7 Q. So maybe late summer, early fall?

8 A. Something like that. I think they
9 were working on the license long before
10 that point, January 28th, or whenever it
11 was.

12 Q. So you were making some headway
13 with Ben on, we need to make sure that we
14 have the right students in this program by
15 having this other unit first?

16 A. Yes. And one of the things that
17 was going to happen, that difference was
18 my name was going to be on that license.
19 Therefore, I was going to be responsible
20 as the clinical director there. And it
21 was going to happen the right way.

22 Now, I hadn't really gotten firm
23 with it yet, but that's what was going to
24 happen. And I think we were, like, three
25 days away from the license, is what I

1 understood, when this all happened.

2 Q. Okay. Now, prior to that, had you
3 tried to do some things within the academy
4 to maybe deal with some of the--and I
5 don't really want to call them problem
6 students--but the ones that were having
7 more difficulty?

8 A. I'm sorry. Would you say that
9 again, please?

10 Q. Were you trying some new things
11 within--before the new unit got off the
12 ground, were you trying some new things
13 within the academy to help deal with some
14 of these more struggling students?

15 A. On an ongoing basis, both I and
16 Jane Riter were doing all kinds of
17 different things, consulting with each
18 other, thinking, trying to think out of
19 the box. Yes, we were doing lots of
20 different things, not much of which made
21 much difference.

22 Q. Did one of those include the Pride
23 Family?

24 A. The what?

25 Q. The Pride Family.

1 A. I believe it did, yeah.

2 Q. And who was the family rep for
3 that?

4 A. For the Pride Family?

5 Q. Yes.

6 A. There wouldn't be just one rep.
7 There would be several reps for that many
8 kids. I don't think just one family rep
9 was the family rep. And I don't remember
10 who it was to be honest with you.

11 Q. But this was a family that was
12 geared toward, again, that small group--

13 A. They were the struggling students,
14 the lower level struggling students that
15 were really having a difficult time. We
16 put together the Pride Family, family
17 being group, if you will, classroom of
18 just those students. In that regard, I
19 did have some say about the staff, and I
20 got to handpick staff for that group and
21 tried very hard to get ones--staff
22 members, family reps, house parents, that
23 sort of thing, that were maybe above
24 average in capability of working with
25 difficult students. And that's the ones

1 that worked in there with those kids.

2 Q. With regard to the mandatory child
3 abuse training, did all of the
4 professional staff have that training,
5 like teachers and--

6 A. I have no idea. I didn't have
7 anything to say about that really.

8 Q. When you met with Ms. Jerred--

9 A. With who?

10 Q. Cheyenne Jerred?

11 A. Oh, okay.

12 Q. Was there one or two meetings?

13 A. There were two.

14 Q. Was the first meeting specifically
15 about her going outside of her job
16 requirements or job description and having
17 these conversations?

18 A. For my part in it, it was her
19 counseling students. That's the reason I
20 was there. As clinical director, I was
21 concerned about her counseling students at
22 night.

23 Q. And what was the concern about
24 night staff or dorm parents having these
25 extended personal conversations with

1 students?

2 A. Well, first of all they didn't even
3 come on until, like, 8:30, 9:00 at night.
4 The kids were already getting showers and
5 hygiene done, and they were getting their
6 pajamas on and they were getting ready for
7 bed and getting in bed. So they were
8 supposed to be sleeping.

9 They got up early in the morning.
10 They get up at 6:30, 7 o'clock in the
11 morning and started their school day. So
12 this night staff's job was to be there and
13 supervise the dorms while the students
14 slept. That's it. That was their job.

15 Q. But what particular concern was
16 there from your perspective as a counselor
17 that these people would be having
18 conversations with these kids?

19 A. Because the students aren't
20 sleeping, because they're not in bed where
21 they're supposed to be getting rest so
22 that they can do their school work the
23 next day. That was one concern.

24 The other one, of course, is a
25 clinical concern that they're not

1 qualified to be doing therapy with these
2 students or really discussing anything of
3 a serious nature. Anything like that
4 should have been brought to the family
5 rep's attention and had them deal with it
6 or refer it to me or Jane or one of the
7 counselors.

8 Q. Was your concern in that about
9 doing something contradictory to what you
10 may be doing in counseling?

11 A. Well, certainly that would be of
12 concern. In fact, that's something among
13 therapists that we're very careful about,
14 not being at cross purposes with another
15 therapist for the very same reason.

16 Q. So the first meeting was just a
17 discussion with her about, don't do this?

18 A. Yes.

19 Q. And what did she say?

20 A. She said she was going to do it if
21 she thought she needed to. She basically
22 told me that she intended to continue
23 doing it.

24 Q. And what did you regard that as?

25 A. Insubordination.

1 Q. Who else was in that meeting?

2 A. Devon Dade.

3 Q. And at this point in time, he was
4 the program director?

5 A. Yes.

6 Q. Was it just the two of you?

7 A. Me and him and, of course,
8 Cheyenne.

9 Q. And how long was it after that that
10 you had the second meeting?

11 A. It was a couple of days, I think.
12 It was very shortly thereafter, maybe even
13 the next day. I don't know.

14 Q. And is that when she was
15 terminated?

16 A. What's that?

17 Q. Is that when she was terminated?

18 A. Yes. She was given a termination
19 letter at that point.

20 Q. At which of those two meetings did
21 she advise you about the DHS report?

22 A. It was the first meeting.

23 Q. Had you already made your report?

24 A. I did not make a report. I was
25 with Jane Riter when she made the report.

1 But Jane is the one that officially made
2 that report.

3 Q. And that would have been before the
4 first meeting?

5 A. Yes, I believe it was. I think so.

6 Q. Or contemporaneous with that first
7 meeting?

8 A. Right around that time, yeah. I
9 don't remember for sure.

10 Q. What was your understanding of the
11 reason that Cheyenne was terminated?

12 A. I don't remember to be honest with
13 you. I don't remember exactly what the
14 reason was. I think part of it was that
15 she was refusing to follow staff
16 direction.

17 Q. Insubordination?

18 A. Yes.

19 Q. Who actually terminated her?

20 A. Devon did.

21 Q. You worked with Ben Trane for quite
22 some time; correct?

23 A. Yes.

24 Q. Prior to interviews with law
25 enforcement and being told of all sorts of

1 things, did you ever doubt his commitment
2 to Midwest Academy?

3 A. No, and I don't doubt it now.

4 Q. Did you doubt his commitment to
5 insuring success of the students at
6 Midwest Academy?

7 A. No. There's no doubt in my mind.

8 Q. While you may have had
9 philosophical differences about what was
10 best for those students, do you think he
11 always acted with their best interests in
12 mind?

13 A. I think he acted in a manner that
14 he thought was having their best interests
15 in mind.

16 Q. Even if you thought he was wrong?

17 A. Yes. That's the part I needed in
18 there. Even when I didn't agree with him,
19 he was doing what he believed was right,
20 always.

21 MS. SCHAEFER: I don't have any
22 other questions.

23 THE COURT: Ms. Timmins?

24 (Continued on the next page.)

25

1 REDIRECT EXAMINATION

2 BY MS. TIMMINS:

3 Q. The Pride Family, a decision was
4 made to put the difficult boys all in one
5 group; correct?

6 A. Yes.

7 Q. An age range of about, what, 12 to
8 17?

9 A. In that range, yes.

10 Q. One of the boys in there had been
11 convicted as a sex offender?

12 A. Maybe, probably.

13 Q. You were aware of that?

14 A. Do you mean was I aware of that
15 when we put him in there?

16 Q. Yes.

17 A. No.

18 Q. Were you made aware of that at a
19 later point?

20 A. Probably.

21 Q. Whose decision was it to make the
22 Pride Family?23 A. Well, of course that all rested
24 with Ben. Any of that sort of thing had
25 to go through him.

1 MS. TIMMINS: That's all I have.
2 Thank you.

3 THE COURT: Ms. Schaefer?

4 RECROSS-EXAMINATION

5 BY MS. SCHAEFER:

6 Q. Whose idea was the Pride Family?

7 A. It was mine. That was my idea.

8 Q. And the implementation involved
9 both the clinical side and the programming
10 side?

11 A. It did but really the
12 implementation, the actual implementation
13 of it was really programmatic. It was by
14 the program people mostly.

15 Q. And that's something that you
16 didn't really have anything to do with?

17 A. No.

18 Q. That would have been--at that point
19 Devon--

20 A. That would be the house parents,
21 the shift leaders, the family reps.
22 They're the ones that ran the program. I
23 was advisory to them.

24 Q. And they would have all worked
25 under Devon Dade, who was the program

1 director at that time?

2 A. Worked under myself as clinical
3 director for the clinical part, and under
4 Devon Dade for the program, yes.

5 MS. SCHAEFER: I don't have any
6 other questions.

7 THE COURT: Ms. Timmins?

8 MS. TIMMINS: No questions.

9 THE COURT: Sir, you may step down.
10 Thank you.

11 Ladies and gentlemen, that will
12 conclude today's trial day. Please return
13 to the jury room on--again, we are going
14 to go on Monday. Return at 9:00 a.m. Be
15 there that day.

16 Please remember the admonitions I
17 previously gave you. And just a couple
18 other things. I'm just going to tell you
19 something you already probably know.
20 There has been some coverage of this
21 matter. People, if they know you're on
22 the jury or an alternate, they're going to
23 try and bait you; they're going to try and
24 find out this; they're going to try and
25 find out that; they might try and sway

1 you. You've got to ignore them, okay?
2 They can do it with the best of
3 intentions, but just be cognizant of that.
4 That happens. And I think you already
5 know that.

6 Again, stay off any type of social
7 media, internet searches, anything like
8 that. Just stay away from that. That's
9 very important also.

10 Other than that, just enjoy your
11 weekend, and I thank you again very much
12 for your patience here today in its
13 entirety.

14 (A recess was taken at 5:03 p.m. on
15 December 15, 2017, to reconvene on
16 December 18, 2017, at 9:00 a.m.)

17 (Continued in Volume V.)

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