



**JUVENILE JUSTICE MONITORING UNIT**  
**OFFICE OF THE ATTORNEY GENERAL**

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**FIRST QUARTER REPORT**

**JANUARY 1 – MARCH 31, 2009**



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

July 6, 2009

The Honorable Thomas V. Miller, Jr., President of the Senate  
Maryland General Assembly  
H107 State House  
Annapolis, MD 21401

The Honorable Michael E. Busch, Speaker of the House  
Maryland General Assembly  
H101 State House  
Annapolis, MD 21401

The Honorable Donald DeVore, Secretary  
Department of Juvenile Services  
One Center Plaza, 120 West Fayette Street  
Baltimore, Maryland 21201

Rosemary King Johnston, Executive Director  
Governor's Office for Children, Office of the Governor  
301 W. Preston Street, Suite 1502  
Baltimore, MD 21201

Members of the State Advisory Board on Juvenile Services  
c/o Department of Juvenile Services  
One Center Plaza, 120 West Fayette Street  
Baltimore, Maryland 21201

Dear Mr. President, Mr. Speaker, Sec. DeVore, Ms. Johnston, and Advisory Board Members:

Enclosed please find the most recent Quarterly Report from the Juvenile Justice Monitoring Unit (JJMU) of the Office of the Attorney General. This report covers the First Quarter of 2009, from January 1 – March 31, 2009 and includes



individual facility reports on each of the residential programs monitored by our office. The Department of Juvenile Services (DJS) Response is also included.

I would be pleased to answer any questions you may have about these reports. I can be reached by email at [mvaldez@oag.state.md.us](mailto:mvaldez@oag.state.md.us) and by phone at 410-576-6953 (o) or 301-257-5399 (c). All reports of the Juvenile Justice Monitoring Unit are also available on our website at [www.oag.state.md.us/jjmu](http://www.oag.state.md.us/jjmu).

I look forward to continuing to work with you to enhance programs and services provided to the youth of Maryland.

Respectfully submitted,

*Marlana Valdez*

Marlana R. Valdez  
Director  
Juvenile Justice Monitoring Unit

Enclosures

Cc: The Honorable Brian Frosh, Maryland State Senate  
The Honorable Joseph Vallario, Maryland House of Delegates  
The Honorable Robert A. Zirkin, Maryland State Senate  
The Honorable C. Anthony Muse, Maryland State Senate  
The Honorable Anthony J. O'Donnell, Maryland House of Delegates  
The Honorable Gerron Levi, Maryland House of Delegates  
Katherine Winfree, Chief Deputy Attorney General, Office of the Attorney  
General

Electronic Copies: State Advisory Board Members  
Mattie Hutton, Governor's Office  
Joan Dudley, Administrative Office of the Courts  
Sheri Meisel, DJS  
Reginald Garnett, DJS  
Karl Pothier, DJS  
Wendy Estano, DJS



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*Director*

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JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**ALFRED D. NOYES CHILDRENS CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** Alfred D. Noyes Children's Center  
9925 Blackwell Road  
Rockville, MD 20850  
Administrator: John Dowdy, Superintendent

**Date(s) of Visit:** January 9, 13  
February 6 (Team visit with Moira Lee and Tim Snyder)  
February 25 (Team visit with Nick Moroney),  
March 10, 2009

**Reported by:** Philip J. Merson  
Senior Monitor

**Persons Interviewed:** Facility Administrators, Supervisors, Staff and Youth  
Montgomery County Child Protective Services Investigators

**Date of Report:** April 2009

## INTRODUCTION

The Alfred D. Noyes Children's Center (Noyes) is a State owned and operated detention facility located in Montgomery County. Noyes is currently comprised of two units for males and two units for females. According to Department of Juvenile Services' (DJS) StateStat information, Noyes can accommodate up to 57 youth.

## SUMMARY OF CRITICAL FINDINGS

- A youth with a recent history of assault with a deadly weapon escaped and DJS did not notify either the youth's victim (per DJS's documented requirement) or the surrounding community (per DJS procedures).
- Youth have been sleeping in boats due to overcrowding at the facility.
- Insufficient staff coverage and locking multiple youth in dorm rooms resulted in a serious youth on youth assault.
- Staff persons used mechanical restraints much more this Quarter than in the past.
- Youth continue to be denied outdoor recreation as required by DJS standards.
- Staff utilize improper restraint techniques on youth and seldom video record restraints per DJS policy.
- Written schedules reflect sufficient programming activities; however, due to program cancellations and staff call-outs, youth report there are not enough consistent programming activities.

## FINDINGS

### 1. Population

#### a. Overpopulation

Noyes was only officially over capacity 2 days during the quarter, but one of the boys' units was closed to accommodate girls for much of the quarter while Waxter was remodeled. This led to multiple youth sharing dorm rooms and youth sleeping in "boats."<sup>1</sup>

On February 22, at 11:15 PM, four boys were sleeping in a dorm room; 10 boys were locked down in six rooms (four rooms were double-bunked) and two boys were sleeping in boats on the unit floor. Several youth beat another youth in the dorm while one staff was on duty. (See Safety and Security below)

On February 25, a girl advised a JJMU monitor that 14 girls were presently on her unit. She said, "Two slept out in boats for about three nights and two were sent to another unit to sleep." Several youth were sleeping in "boats" on February 26.

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<sup>1</sup> A "boat" is a fiberglass container into which a mattress is inserted.



Facility Capacity	High Population	Low Population	Average Daily Population	Number of Days Over Capacity
57	59	42	48	2

### Applicable Standard

**Maryland Department of Juvenile Services Detention Standards 5.1.5 and 5.1.5.4.**  
*The population of each juvenile detention facility shall generally be limited to the budgeted operating capacity. However, the facility shall not be considered crowded as long as the department can safely and humanely maintain... proper ... bedding at a sufficient level to accommodate the number of youth in the facility.*

#### b. Detention and Pending Placement

On February 24, there were 34 boys and 24 girls at the facility. Nine youth had been on detention for more than 30 days and two of those nine had been there longer than 60 days. Three youth had been on Pending Placement for more than 60 days. According to ASSIST, as of March 24, the Pending Placement Population has decreased to 0 youth who have been there more than 60 days.

March 24, 2009	Number of Youth in Status 60+ Days	Number of Youth in Status 90+ Days
Detention	5	2
Pending Placement	0	0

#### c. Population Breakdown

	Jan 1 – Mar 24, 2008	Jan 1 - Mar 24, 2009
<b>Total # of Youth Detained</b>	265 (212 male)	251 (143 male)
<b>African American</b>	189 (164 male)	168 (92 male)
<b>Latino</b>	46 (42 male)	38 (33 male)
<b>White</b>	44 (20 male)	36 (13 male)
<b>Native American</b>	1 (male)	2 (All female)
<b>Asian</b>	8	1



	(All male)	(female)
<b>Hawaiian</b>	0	1 (female)
<b>Unknown</b>	2 (All male)	5 (All male)

**d. Inaccuracies in Population Count through ASSIST**

On March 5, the ASSIST database showed 18 females at the facility - 17 in the Delta Unit and one in the Omega Unit. A supervisor was contacted to verify the ASSIST count and advised there were eight girls on Omega, eleven girls on Delta, and Montgomery County Police had recently removed one girl. He could not explain why ASSIST provided an inaccurate count. On March 24, ASSIST still indicated the facility had only one female assigned to the Omega Unit.

**Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.19.1.** *Reports submitted by employees shall be clear, concise, factual and accurate.*

**e. Inappropriate Placements**

Some youth are inappropriately detained at Noyes, either because they have serious mental health issues that a detention center is not equipped to deal with or because behavioral problems endanger the safety of other youth.

On January 14, a youth began screaming about “devils”, threatening, kicking and spitting on staff, so he was restrained and handcuffed.<sup>2</sup> The youth had been involved in a previous altercation on January 4 when he grabbed a staff person’s radio, became aggressive and staff was injured trying to restrain the youth.<sup>3</sup> The youth has a history of abandonment, suicidal behavior and a recommendation for psychotherapy. Records also indicate the youth had been adjudicated for 1<sup>st</sup> Degree Assault in 2007 and he built and exploded a bomb in June of 2008. A Problem Oriented Screening Instrument for Teenagers (POSIT) completed in July of 2007, indicated the youth was “high risk” for mental health issues. The youth remained in detention at Noyes until February 17.

Noyes detained a 14-year-old female youth from January 19 until February 19. The youth has been in and out of detention, shelter care and committed programs since she was 11 years old with a history of running away and truancy. Staff used mechanical restraints on her three times<sup>4</sup> and she was involved in several violent incidents during her detention at Noyes. After an entire month of violence and exposing the youth, other youth and staff to physical harm, DJS released her on community detention.

<sup>2</sup> DJS Incident Report 70192

<sup>3</sup> DJS Incident Report Number 69955

<sup>4</sup> DJS Incident Reports 70538, 70722 and 70815

## Applicable Standard

**Maryland Code, Human Services, Department of Juvenile Services Title 9-226 and 9-234.** *The Department may establish and operate the facilities that are necessary to properly diagnose, care for, train, educate, and rehabilitate children who need these services... Legislative intent. The General Assembly intends that: (1) all children whose care is the responsibility of the State shall have similar protection for their health, their safety, and the quality of their care....*

## 2. Staffing

### a. General

Staff advised there are still problems with call-outs and forced overtime. DJS is not assigning enough staff to watch and protect youth during the night.

Staffing on the overnight shift must be increased. (See discussion of incident below in Safety and Security Section.)

## Applicable Standards

**Maryland Department of Juvenile Services Detention Standards 5.1.5.3** *Staffing arrangements shall aim to provide a safe, humane, and caring environment. Youth to staff ratios developed by the Department shall ensure adequate supervision of youth.... Staff to youth ratios shall not be generalized, but rather based on facility design and age, activity and program level and other related factors.*

**5.1.5.5** *Staffing levels shall ensure the proper supervision and safety of the residents.*

### b. Staff Misconduct/Failure to Intervene

One example of staffing misconduct, not cited elsewhere in this report, occurred on February 10. Two staff persons disrespected a youth by locking him down in the bathroom and either omitted or made improper log entries.<sup>5</sup> DJS/OIG completed a thorough investigation and sustained several violations against the two staff persons.

Another example of staff failing to intervene, not cited elsewhere in this report, occurred on March 2, 2009.<sup>6</sup> There were 13 youth on the unit and several youth started arguing. Only one staff of three became proactive to try to prevent the ensuing altercation. The Incident Report states that while one staff was physically intervening another staff "turned away from the TV" and told the youths to stop arguing while another staff was "advising all other youths to calm down." A subsequent fight ensued

<sup>5</sup> DJS Incident Report Number 70984

<sup>6</sup> DJS Incident Report Number 71478 and Grievance Number 7692



with three youths assaulting each other, which resulted in physical restraints, mechanical restraints and seclusion. Two other staff were called in to help quell the disturbance (DJS did not label this incident a group disturbance). A youth submitted a grievance corroborating the inaction of the other staff stating only one staff attempted to break up the fight with “little support from the other staff” that were “witnessed eating and drinking snacks and did not decide to intervene for about 30 seconds.”

**Applicable Standard**

**Department of Juvenile Services Standards of Conduct 2.2.3.** *An employee acting in his or her official capacity may not use any coarse, profane, or insolent language, or take action towards... delinquent youth, offenders [or] clients that is abusive or otherwise considered offensive*

**3. Safety and Security**

**a. Aggregate Incidents (DJS Database Information unless noted otherwise)**

<b>Incident Categories</b>	<b>1<sup>st</sup> Qtr (2008)</b>	<b>1st Qtr (2009)</b>
Average Daily Population for Quarter (DJS)	48	48
1. Youth on Youth Assault	49	33
2. Youth on Youth Assault with Injury	41	25
3. Alleged Youth on Staff Assault	7	17
4. Alleged Youth on Staff Assault with Injury	5	7
5. Group Disturbances (with bodily harm or injury)	0	1
6. Group Disturbances (without bodily harm or property destruction)	0	1
7. Restraints	58	57
8. Restraints with Injury	40	35
9. Seclusions	16 (logbook) <sup>7</sup> 13 (database)	49 (logbook) <sup>8</sup> 28 (database)
10. Allegations of Child Abuse	3 <sup>9</sup>	4 <sup>10</sup>
• Physical		
• Sexual	0	0

<sup>7</sup> The numbers in the seclusion logbook are different from the numbers in the DJS Incident Report Database because some incident reports do not capture the multiple seclusions of youth in one incident.

<sup>8</sup> Ibid

<sup>9</sup> This number does not reflect allegations from other sources, such as CPS

<sup>10</sup> Ibid

11. Allegations of Child Neglect	0	0
12. Escapes/AWOL's	0	1 <sup>11</sup>
13. Suicide Attempts, Ideation, Gestures, Behavior	5	2
14. Alleged Inappropriate Staff Conduct/Comments	1	0

**b. Youth on Staff Assaults, Youth on Youth Assaults and Restraints**

The most significant areas of change were the Youth on Youth Assaults, Youth on Staff Assaults, Restraints with Injury and use of Seclusion. The average monthly population remained the same but there was a 33% decrease in youth on youth assaults, a 41% increase in youth on staff assaults, and a 13% decrease of restraints with injury comparing the first quarter of 2008 with this quarter. Seclusions tripled from 16 to 49.

**c. Beating of a Youth in a Dorm**

On February 22, at 11:15 PM, four youth were sleeping in a dorm room, 10 youth were locked down in their rooms, and two youth were sleeping in boats on the unit floor<sup>12</sup>. The facility had assigned one staff person to monitor the 16 youth. Staff walked into the dorm to check on the youth and noticed one youth was lying on his bed and bleeding. The youth had lacerations inside his mouth and on his lip. He also had a swollen nose. Staff took him to the medical unit but the medical personnel had left for the day. The nurse examined and treated the youth in the morning.

When asked about the incident, the Facility Administrator said that the staff to youth ratio (1:16) was within departmental guidelines.

Subsequently, a source advised that the youth had received a concussion and possible broken nose in the incident. The facility reportedly completed an x-ray 10 days after the incident (according to the DJS Medical Director) but there was no indication of a fracture.

DJS captured the incident as a "youth on youth assault" and DJS/OIG initially conducted no further investigation into the incident. However, DJS and CPS are currently investigating the incident.

**Applicable Standards**

**Maryland Department of Juvenile Services Detention Standards 5.1.5.3 Safety**  
*Youth shall be protected from violent, emotionally disturbed, contagious or ill youth.*

<sup>11</sup> Not Reported in DJS Incident Report Database

<sup>12</sup> DJS Incident Report Number 71256



**5.1.5.5 Staffing** *Staffing levels shall ensure the proper supervision and safety of the residents.*

**d. Escape**

A Rockville, Maryland youth with a recent history of violence escaped from the facility on February 16 and DJS did not return the youth into custody until March 2.<sup>13</sup> The Department of Juvenile Services (DJS) failed to notify the youth's recent assault victim (also from Rockville), the surrounding community and this Office of the escape. DJS has also failed to acknowledge the incident as an escape from DJS custody.

DJS did not notify this Office of the escape. This Office discovered the incident (labeled only as "Other") on February 18, while reviewing the DJS Incident Report database.

Noyes is a secure detention facility and the youth who escaped from the facility has several past adjudications for juvenile delinquency including Robbery with a Dangerous Weapon (knife), Assault and Drug Possession. There are also several "Alerts" posted for the youth in the Department of Juvenile Services' ASSIST database, including several Failures to Appear and an AWOL. The ASSIST database also indicated the Western Maryland Youth Centers had turned down the escapee youth twice (July and October of 2008) for admission to due to his history of violence. A private program (Abraxas of Ohio) was releasing the youth back to DJS custody due to his violent behavior and after a brief stay at their facility when the escape occurred.

The DJS ASSIST database provides an "Alerts" area in the youth's data file and for obvious safety precautions; as of December 22, 2008, an "active alert" required notification of last year's robbery victim if the adjudicated youth escaped from custody. The alert stated, "victim notification required" for the victim of the robbery and provided victim information, address and contact phone numbers. Neither DJS nor the police had notified the robbery victim's mother about the escape.

When asked about his failure to report the escape, the Facility Administrator said that the Assistant Secretary of Residential Services for DJS advised them not to report the incident as an "escape" and not to initiate the Community Notification System because the escape occurred from the Abraxas van and not from the Noyes facility. Abraxas, on the other hand, maintained that responsibility for the escape lay with the Noyes facility.

DJS has installed wiring but not the video cameras. These cameras are essential to help record/deter physical altercations and prevent escapes.

**Applicable Standards**

<sup>13</sup> DJS Incident Report Number 71087



**Maryland Department of Juvenile Services Standards of Conduct 2.12. Prevention of Escapes and Disorders** *An employee shall take all reasonable means to prevent escapes or disorders.*

**Maryland Department of Juvenile Services Standards of Conduct 2.13.2 Breach of Security** *An employee may not take any action or fail to take any action when the action or failure to act causes a breach of security or a potential breach of security by jeopardizing the safety or security of any employee, delinquent youth, offender, client, visitor or member of the public.*

**Maryland Department of Juvenile Services Perimeter Security Policy, RF-09-07 4.C.4** *Employees assigned to the vehicle entrance post of an open campus facility shall adhere to the following protocol for each category of vehicles entering open campus facilities: ...Once inside the external sally port gate, staff shall close the gate and ask the driver to turn off the vehicle engine, remove the key from the ignition, open all compartments, bags and brief cases and exit the vehicle with the ignition key and passengers other than youth in DJS care and custody who are being transported.*

e. **Restraints**

i. **Improper Restraint**

A videotaped restraint of a youth this Quarter showed that staff continue to lack skills to appropriately restrain youth when necessary.<sup>14</sup> The videotape shows staff inappropriately placing their hands on the (female) youth several times and backing the youth up against a wall, which prevented a proper physical intervention. Four female staff awkwardly grappled with the girl as she resisted their attempts to restrain her. They pulled at her clothes and grabbed at her hair and throat. They finally pulled her down to the floor and began struggling with handcuffing and shackling the youth. The youth suffered some abrasions to her chest, ankles and wrists.

The description of the restraint in the incident report was very inaccurate and an administrative review of the report revealed no concern with the restraint technique applied by staff. The facility administrator conducted a debriefing of the incident with all staff involved and reportedly provided them retraining in crisis intervention.

**Applicable Standards**

**Department of Juvenile Services Use of Crisis Prevention Management (CPM) Techniques Policy Number: RF-02-07 (Residential Facilities)** *Crisis Prevention Management techniques may be utilized only to: protect or prevent a youth from imminent injury to self and others or to prevent overt attempts at escape.*

<sup>14</sup> DJS Incident Numbers 70538 and 70722

**RF-02-07 4.a.2(vi)** *An employee authorized to use physical restraints on a youth shall: (c) Use only authorized CPM techniques. (d) Act without causing the youth pain or suffering*

ii. **Failure to Videotape Restraints**

Although the above restraint was video recorded, most are not. A survey of restraint incidents January 1 through March 9 found that 35% of restraint incidents involved males and 65% involved females. Only 10% of the restraints were videotaped.

**Applicable Standard**

**Maryland Department of Juvenile Services Video Taping of Incidents Policy Number: RF-05-07 (Residential Facilities) 1. POLICY** *The Department of Juvenile Services (DJS) employees shall video tape room extractions, escorts to seclusion, use of restraints or other critical incidents that relate to the safety and security of a residential facility. Incidents shall be videotaped unless videotaping of the incident compromises the safety and/or security of youth and/or employees.*

iii. **Failure to Complete Proper Reviews of Restraints**

The Behavioral Health section of Restraint Debriefing Forms are not being regularly reviewed and signed by a behavioral health staff person.

The Facility Administrator advised that DJS policy allows him discretion to designate someone to complete the Behavioral Health section of the review, but, according to DJS policy, only the health professional should document that section of the report.

**Applicable Standard**

**Maryland Department of Juvenile Services Use of Crisis Prevention Management (CPM) Techniques Policy NUMBER: RF-02-07 4.d. Debriefing.** *The youth will meet with a Behavioral Health Professional. (iii) The youth debriefing will be documented on the Debriefing Form.*

f. **Behavior Management Plan (BMP)**

The BMP at Noyes is a level-based system involving the receiving and taking of points. Many youth have complained that staff persons do not always apply the BMP fairly. The facility administration returned points to several youth after they submitted grievances to the DJS Child Advocate.<sup>15</sup>

<sup>15</sup> DJS Grievance Numbers 7529, 7690, 7691 and 7668,



### **Applicable Standard**

**Maryland Department of Juvenile Services Behavior Management Program for DJS Detention Facilities Policy Number: RF-10-07.4.a, PROCEDURES (1)** ...Every attempt will be made to maintain consistency across facilities while at the same time allowing for creativity and modifications appropriate to individual facilities to positively motivate youth.

## **4. Physical Plant and Basic Services**

### **a. Fire Safety**

The Montgomery County Office of the Fire Marshal (FM) completed an inspection of the facility on March 19, 2009. The FM noted several violations<sup>16</sup>, including the need to:

- Provide documentation of yearly inspection/service of fire alarm and sprinkler system
- Provide fire department access box and proper keys
- Add fire alarm pull stations to boiler room and second portable
- Mount spare sprinkler head box on the wall
- Mark location of "A/S Control valve" and entrance to the "FACP" on front "A/P"
- Mark doors to "FACP" and "A/S Control Valves."

### **Applicable Standard**

**Maryland Department of Juvenile Services Detention Standards 5.2.1** All detention facilities shall conform to state fire safety requirements.

### **b. Physical Plant**

The exterior is generally free of debris and environmental hazards except for concerns regarding the fenced in recreation area. The staff and youth reportedly complain about the bird feces, and one of the reasons given for the lack of outdoor recreation is the bird feces. Youth advised a monitor that they would be willing to clean the feces up if staff would allow them outside.

### **Applicable Standard**

**Maryland Department of Juvenile Services Housekeeping and Sanitation Inspection Policy Number: RF-07-05.1, POLICY** Environmental health programs related to housekeeping will be regularly monitored to assure a high standard of sanitation and to identify excellence as well as areas of deficiency.

<sup>16</sup> Violation Code: 18.2, Article NFPA 1, Page 113



## 5. Education

Unlike most other DJS detention facilities in Maryland, MSDE does not provide education at the facility. DJS provides education to youth detained at the facility. The facility utilizes trailers adjacent to the main facility but inside the fenced in area.

On February 6, a monitor observed a class. Seventeen youth crowded into one classroom trailer. Youth were using an excessive amount of profanity and several youth were not paying attention to the teacher.

## 6. Rehabilitative and Recreational Programming

### a. Therapeutic Program

Case managers, Addiction Counselors and the Social Worker provide groups on a weekly basis. The counselors schedule each unit for three clinical groups per week plus a substance abuse education group. Reportedly, the groups vary in their quality and their participation by youth. One part-time psychologist and one part-time psychiatrist provide psychological counseling.

### b. Recreational Programming

Throughout the Quarter, provision of required outdoor education and structured programming were problematic. The January schedule showed multiple programs that did not occur. The DJS Child Advocate acknowledged similar concerns about the lack of programming.

Youth who were interviewed confirmed that very little structured programming is provided.

Youth also expressed concern about the lack of outside recreation. One interviewee said he went outside to play football only one time since October 22, 2008. Another youth said he had been at the facility for "quite a while" (since November 7, 2008) and had never been outside. One girl interviewee said, "We went outside and played football two weeks ago. She said they only get fresh air when they walk from the main facility to the school trailers – which are only about 100 feet away. Youth filed several grievances during the Quarter concerning the lack of outdoor recreation.

### **Applicable Standard**

**Maryland Department of Juvenile Services Policy Number RF-08-07, 4.a (2)**  
*Residential facilities shall provide each youth a minimum of one hour of recreation daily; in the absence of inclement weather, recreation shall be outdoors.*

## 7. Medical and Behavioral Health

No current concerns noted.

## 8. Youth Advocacy, Internal Monitoring and Investigation

### a. Youth Advocacy

The DJS Child Advocate assigned to the facility is very proactive and thorough dealing with the youths' concerns and grievances.

JJMU received 39 grievances for the facility during the quarter, identifying concerns in the following areas:

- Inappropriate/unfair treatment by staff – 7
- Safety – 5
- Concerns about television or cards – 4
- Grooming - 5
- Food/vitamins concerns – 2
- Phone calls concerns – 4
- Medical concerns – 2
- Cleanliness/room temperature – 2
- Loss of level/BMP – 5
- Lack of a clock – 1
- Problems with Community Case Manager and/or Aftercare - 2

The DJS Child Advocate assigned to the facility was successful in obtaining resolutions on behalf of the youth in most cases. He attempted to pursue and resolve all of the above grievances, but reportedly, there have been some problems with facility administration addressing his concerns around programming and recreation.

Safety is the major area of concern:

- One safety concern involved a youth who complained that staff failed to intervene when another youth was throwing food on her.<sup>17</sup> Again, counseling reportedly occurred for staff to intervene and notify supervision when this occurs.
- A Latino youth complained that another youth splashed cleaning solution in his face while he was asleep and staff did nothing about it.<sup>18</sup> Staff reportedly had trouble interpreting this youth's concern due to language barriers and the youth responsible for the act left the facility without repercussions.

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<sup>17</sup> DJS Grievance Report 7484

<sup>18</sup> DJS Grievance Report 7578



## **Applicable Standards**

**Maryland Department of Juvenile Services Standards of Conduct 2.24.1.** *An employee shall be fair, firm and impartial in relationships with youth and other clients.*

**2.24.2.** *Every employee has a responsibility to ensure a safe and humane environment for youth and to respect the individual rights of youth and other clients.*

### **b. Internal Monitoring**

The DJS Office of Quality Assurance and Accountability evaluated the facility from October 20 through October 22, 2008 and completed a comprehensive report on November 12, 2008. Interested persons can review the report at the following link: <http://www.djs.state.md.us/quality-assurance/qir-noyes.pdf>.

### **c. Incident and Child Abuse Reporting and Investigation**

A youth was involved in an altercation with staff on February 23. The youth alleged he was choked and slammed to the ground by staff. The Nurse's Report indicated no injury of the youth.<sup>19</sup> Facility staff submitted an initial incident report labeled only as Alleged Inappropriate Conduct by Staff. However, DJS/OIG changed the report to Alleged Physical Abuse, even though CPS refused to accept it for investigation. This Office has not received the OIG investigation report as of this date.

## **Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.19.1.** *An employee may not make any false oral or written statement or misrepresent any material fact, under any circumstance, with the intent to mislead any person or tribunal. Reports submitted by employees shall be clear, concise, factual and accurate.*

DJS/OIG sustained violations against staff for using improper force, injuring a youth and making a false statement on February 1.<sup>20</sup> The youth and staff were reportedly "horse playing" and their actions escalated into a fight. The youth received abrasions to her arm and a reddened eye. DJS notified CPS of the allegation and they screened it out from investigation.

DJS/OIG sustained violations against staff for using improper force and failing to maintain accurate written logs on February 23, 2009.<sup>21</sup> A youth alleged he was "choked" by staff but the DJS investigation reportedly could not determine if the allegation occurred because there were no other witnesses to the event. The investigation did find that staff acted inappropriately by "pushing" the youth while angry

<sup>19</sup> DJS Incident Report Number 71298

<sup>20</sup> DJS Incident Report Number 70721

<sup>21</sup> DJS Incident Report Number 71298

and failed to make appropriate log entries concerning the event. Again, DJS notified CPS of the allegation and they screened it out from investigation.

### **Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.24.3.** *An employee may not engage in any form of physical, sexual, or verbal abuse of youth. If an employee has reason to believe that any such abuse has occurred, he or she shall immediately report that information to the appropriate authorities and Department officials in conformity with applicable Department policy.*

### **RECOMMENDATIONS**

1. DJS should maintain the ASSIST database consistently and accurately.
2. Youth should not need to sleep in boats due to overpopulation.
3. DJS should notify this Office of any escapes from the facilities we monitor.
4. Staff in charge of controlling the sally port gate must be thoroughly trained and aware of their responsibilities.
5. DJS should properly identify escapes in the Incident Report database.
6. In the event of an escape of a violent youth, DJS should initiate the Community Notification System.
7. In the event of an escape or other investigative action involving a particular youth, someone from DJS should review the "Alert" section in ASSIST to ensure they obtain the necessary information for lookouts and/or other details relevant to the case.
8. The facility must maintain sufficient staff coverage and refrain from locking multiple youth in dorm rooms.
9. Staff persons should refrain from using mechanical restraints unless necessary.
10. Staff must not utilize improper restraint techniques on the youth.
11. When restraints are used, the facility should be recording the restraints, debriefing the restraints and retraining staff per DJS policy.
12. DJS staff should be able to do their jobs professionally and safely. Facility procedures and rotation should allow sufficient time for staffing breaks and staff



must receive/utilize relevant training to protect them from the actions of violent youth.

13. The facility should maintain sufficient programming for youth as scheduled.
14. The facility must allow youth to go outside for recreation when weather permits.
15. The facility must address the bird feces problem with regular cleaning and determine an effective strategy to prevent the interruption of healthy activities for youth

### UNABATED CONDITIONS

1. DJS must identify violent youth quickly and properly. Those youth should not remain in detention/pending placement for long periods and they must receive services to meet their needs.
2. Staff for DJS must treat youth with fairness and respect.
3. All reports must be accurate and comprehensive.
4. Investigations must be comprehensive and accurate.
5. DJS should aggressively pursue the implementation of the proposed Memorandum of Understanding for response to child abuse/neglect incidents.



MARLANA R. VALDEZ  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**ALLEGANY COUNTY GIRLS GROUP HOME**  
**JANUARY - MARCH, 2009**

**Facility:** Allegany County Girls Group Home  
10700 Leslie Lane  
P.O. Box 116  
Cumberland, Maryland 21502  
Administrator: Jennifer Younker LCSW-C

**Date(s) of Visit:** January 22, February 3, March 22, 2009

**Reported by:** Tim Snyder  
Monitor

**Issues Monitored:** Training deficiencies  
Low resident census  
Few appropriate referrals

**Persons Interviewed:** Administrator, Program Manager, Various youth.

**Date of Report:** April 2009



## INTRODUCTION

The Cumberland Maryland YMCA operates the Allegany County Girls Group Home. Ken Barnes is the new CEO of the YMCA. In that capacity, Mr. Barnes oversees the operations of ACGGH. The facility is located in Cumberland, Maryland on property owned by the Department of Juvenile Services. DJS licenses the group home to serve nine female residents ages 13-18 when full.

ACGGH Mission Statement: "It is the mission of the Allegany County Girls Group Home to provide a safe, healthy, home environment for adolescent females to foster respect, purpose, self-esteem, conflict resolution and accessing community resources; assisting in physical, emotional and intellectual growth to ensure a successful transition into the community.

## SUMMARY OF CRITICAL FINDINGS

- ACGGH operations appear to run more smoothly and organization has improved significantly under new leadership.
- Staff members have not completed required training.
- Resident census has remained 2-3 under capacity.
- DJS referrals of appropriate candidates for admission have been few.

## FINDINGS

### **1. Population**

The population has remained under capacity. Referrals have been down for approximately 6 months. Some youth referred are inappropriate for the program. As a result, the program has had to accept on a trial basis some youth who present difficulties and have needs the program cannot meet. The census during this quarter has maintained at 6-7 youth.

On March 22, 2009, the Group Home had a population of 7 youth, 6 White, and 1 African American.

## 2. Staffing

### a. Administration

The YMCA hired Jenifer Younker LCSW-C to assume the duties of ACGGH Administrator. Ms. Younker began her employment on December 1, 2008. Since that time Ms. Younker, with the help of Antoinette Allen, Diane Markwood, and Betsy Swindell has accomplished much in bringing organization and structure to the program.

### b. Staff Training

Training of new staff has been a priority. COMAR now requires a different behavior management and crisis intervention protocol. Staff at ACGGH had received Crisis Prevention Management (CPM) training from the DJS Youth Center trainers, but COMAR no longer approves CPM to be used in private residential facilities. The Director has scheduled herself and the Program Manager to attend COMAR recommended TACT II training at the end of April. They will receive "Train the Trainer" instruction and, in turn, they will train and certify all of the group home staff in TACT II by the first week in May.

This Monitor noted during an unscheduled visit to the facility on March 22, 2009, that the two staff on duty did not have training in behavior management or crisis intervention. Only one of the two staff members had successfully completed training in CPR and First Aid. Ms. Younker responded saying that none of her staff are properly trained in behavioral management as a result of the change in COMAR.

#### **Applicable Standards**

**COMAR 14.31.06.05 F (1)** *Each employee who provides direct care to children shall receive a minimum of 40 hours of initial and annual training...include(ing): (a) Emergency preparedness and general safety practices; (b) Cardiopulmonary resuscitation leading to certification; (c) Annual first-aid training; (d) child abuse and neglect identification and reporting; (e) Suicide risk assessment and prevention; (f) Approved forms of discipline and behavior management techniques including crisis management and the use of isolation and restraints...*

## 3. Safety and Security

### a. Aggregate Incidents

Overall, the residents have appeared to this Monitor to be more secure, settled, and respectful toward one another since the change in leadership.



The lack of behavioral management training presents a potential significant safety, security and liability risk.

Incident Categories	1 <sup>st</sup> Quarter 2009
Alleged Sexual assault youth on youth (DJS custody/supervision)	1
AWOL of youths	2 incidents (4 youth total)
Sick youth requiring emergency/hospital care	2

**b. Behavior Management Plan**

Under the direction of the new Administrator ACGGH has modified the level system. The plan now has 4 color-coded levels. Each level earns the youth more privileges and requires more responsibility. Residents can earn home passes as they progress, and when they attain the highest level, staff complete and begin implementing the discharge plan.

Staff maintain a resident behavioral check sheet for each shift, a youth location form noted at half hour increments, and a daily shift report summary.

**4. Physical Plant and Basic Services**

**a. Fire Safety**

The Fire Marshal inspection of the ACGGH facility was due by April 1, 2009, and has not been completed. A fire alarm/extinguisher inspection was completed by Simplex on 4/16/09.

**b. Physical Plant**

The grounds were virtually free of litter during this Monitor's latest visit. This is a significant improvement from visits performed in 2008 and previously.

ACGGH continues to make upgrades. Most recently, the facility has acquired a much larger dining table that is capable of accommodating all of the residents when at capacity along with three staff members. The interior of the facility appeared to be neat, orderly, and clean when visited by this Monitor in March.

On April 25, the group home hosted a painting day. ACGGH invited YMCA staff and Board members along with the Community Advisory Board members to help paint the entire interior of the facility, help with landscaping, and be treated to a meal.

**c. Basic Services**

Youth and staff are now eating meals together and staff members eat the same foods as the residents as required by COMAR.

**5. Education**

Diane Markwood, Educational Coordinator, maintains contact with the various public schools that the youth attend. Education ranges from regular high school to alternative school.

**6. Rehabilitative and Recreational Programming**

**a. Therapeutic Program**

Youth and staff hold "issues" groups each evening to help residents work through relational concerns within the group home. Additionally, therapeutic staff, and direct care conduct special groups through the week including anger management, life skills, abstinence, and self-esteem development.

Youth report that Community Case Managers make regular phone and face-to-face contact with the youth in their care at ACGGH.

**b. Recreational Programming**

At school, the youth attend gym classes. Additionally, ACGGH staff members take the girls to the YMCA a minimum of 3 times a week for swimming, basketball, and/or aerobics work out.

**c. Parental Involvement**

Youth at ACGGH can earn home visits as they progress in the program. Additionally parents/guardians may visit youth at the facility. ACGGH holds conferences with youth and parents as needed.

**7. Medical and Behavioral Health**

**a. Basic Medical Services**

Medical services are provided by community practitioners. Additionally ACGGH has an on-call nurse.

During this Monitor's visit in March, the medicine cabinet was unlocked and the keys to the individual medical boxes were not secured as required. Ms. Younker



responded to this concern with a note indicating that all staff have been instructed to keep the cabined locked at all times.

**b. Mental Health Services**

ACGH utilizes community-based professionals to provide individualized mental health services for the residents. The Director, a LCSW-C, oversees the treatment programming in the group home and signs off on the Treatment Service plans.

**8. Youth Advocacy, Internal Monitoring and Investigation**

**a. Youth Advocacy**

DJS Youth Advocate Janet Twigg makes regular visits to ACGGH and addresses grievances as they arise.

**b. Internal Monitoring**

Bill Hoyle, DJS Program Evaluator, also visits the facility and makes recommendations for corrections and improvements.

**c. Incident and Child Abuse Reporting and Investigation**

There have been no allegations of child abuse during this reporting period.

**d. Community Advisory Board**

A Community Advisory Board meeting was held on January 22. Ken Barnes, the new CEO of the YMCA, introduced himself to the Advisory Board Members. Ms. Younker introduced new Board Members and led a discussion of various topics of interest and concern.

**RECOMMENDATIONS**

1. On-duty staff must have completed all of the training required in COMAR.
2. The medicine cabinet must remain double locked as required.
3. Considering the lack of residential services for females in Maryland, DJS should fully utilize the credible programming offered at ACGGH by maintaining a full census of appropriate youth at the facility.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**AUNT CC HARBOR HOUSE SHELTER**  
**JANUARY – MARCH, 2009**

**Facility:** Aunt CC Harbor House Shelter  
1031 East Monument Street  
Baltimore, MD 21202  
Administrator: Donald Barrett

**Date(s) of Visits:** January 27, February 11, and March 31, 2009

**Reported by:** Tanya Suggs  
Monitor

**Issues Monitored:**

- Population
- Staff
- Safety/Security
- Physical Plant
- Education
- Programming
- Medical
- Youth Advocate

**Persons Interviewed:** Director, Direct Care Staff, Youth

**Date of Report:** April 2009



## INTRODUCTION

Aunt CC's Harbor House Shelter is operated by North American Family Institute (NAFI) and licensed by Department of Juvenile Services (DJS). Low-risk males between the ages of 11 to 17 are referred by the Department of Social Services and the Department of Juvenile Justice. The average length of stay is 30 days.

Aunt CC's Harbor House is an emergency shelter, an alternative to detention, and a placement for youth who require temporary care. The residents are provided with group and individual clinical services, life skills education, food, clothing, and post release clinical services.

## SUMMARY OF CRITICAL FINDINGS

- The health and environmental inspections are outdated.
- Nutritional issues have not been corrected.
- Medication was not properly administered to a youth.

## FINDINGS

### **1. Population**

There were no population issues this quarter. The length of stay is from one to ninety days, with an average length of stay of thirty days. The population fluctuates due to court adjudications or youth returning home.

### **2. Staffing**

Staff to youth ratio is in compliance. There were no staff changes or vacant positions at the end of the quarter.

### **3. Safety and Security**

#### **a. General**

There were no any major safety/security issues this quarter.

#### **b. Aggregate Incidents**

According to the incident database, there were twelve Incidents during the quarter. The number of AWOLS during the fourth quarter increased from 8 to 9 and the

number of youth on youth assaults increased from 0 to 2. There was one youth on staff assault.

**c. Incident-Related Procedures, Practices, and Reporting**

The Monitor reviewed four youth files to ensure that a Safety Environmental Plan (SEP) had been developed for each youth during the intake process. The form outlines specific strategies and accommodations for the youth in the event of an escalating situation to prevent the use of restraints whenever possible. Two files did not contain a SEP. This finding was corrected during the quarter.

**Applicable Standard**

**COMAR 14.31.06.15.B.1** *The program shall develop a safe environment plan during intake and admission. The safe environment plan shall be reviewed and updated in conjunction with the resident behavioral treatment plan. The program shall partner with the resident, the resident's family where applicable, and the custodial agency to develop a plan to create and maintain a nonviolent and healing environment and to prevent the use of restraint. The safe environment plan shall be easily accessible to program personnel at all times.*

**4. Physical Plant and Basic Services**

**a. Fire Safety**

No findings were noted on the Fire Safety Inspection report. The Monitor did not note any fire safety issues this quarter. The last fire alarm inspection is dated October 2008. There were minor findings noted. The next fire alarm inspection is due October 2009 and the Fire Safety Inspection is due November 2009.

**b. Physical Plant**

The home and furniture are in good condition. The home is a 233-year-old structure that was formerly a church. Renovations were made in May 2005. There is a loft-style sleeping area on the second level, which residents report is comfortable and cozy. Overall, the home is clean, well kept, and tidy.

There were no major maintenance issues this quarter. The home has a new washing machine and the back door was replaced.

**c. Basic Services**

The City of Baltimore Department of Health Bureau of Food Control conducted an environmental/health inspection on March 18, 2009.



Last quarter, the Monitor reported the insufficient amount of food that the youth were served during mealtime. The Monitor interviewed a number of youth throughout the quarter and reviewed menus. The youth informed the Monitor that snacks have been insubstantial, and that they are hungry between meals. The Administrator agreed to provide youth with snacks that are more substantial.

### **Applicable Standards**

**COMAR 14.31.06.07 (A) (4).** *The licensee shall ensure compliance with the local fire and health requirements by submitting annually to the licensing agency, reports of all fire and health inspections conducted by the local jurisdiction.*

**COMAR 14.31.06.10.B.3** *The licensee shall serve each child three meals each day, two of which shall be hot, and offer nutritious between-meal snacks, with not more than 14 hours between dinner and breakfast the following day.*

## **5. Education**

### **a. General Educational Development Program (GED), College Courses**

GED youth should be enrolled in training geared to the acquisition of life skills or employment. Considering the 15-day average length of stay in the shelter, enrollment is not always practical, especially when some of the youth are released the next day after admission. The shelter provides a life skills education program. Based on the Monitor's observations during unannounced visits, youth primarily watch television during leisure time. Youth report that they also work on current events and have group discussions.

Despite the short period of stay at the home, NAFI should offer life skills training or recruit volunteers to present lessons to the youth.

### **b. Vocational Education**

Under COMAR regulations, licensed residential programs are required to place youth in vocational and life skills training programs. The youth are not involved in vocational education.

### **c. Type I School (Youth attend school public or private school outside the facility)**

The Harbor House does not have a certified education program. Most youths who come to the Harbor House are already enrolled in school so enrollment is not necessary. In most cases, if a youth needs to be enrolled, the parent completes this task. In some cases, with communication between the parent and the DJS Caseworker, the Harbor House staff will assist or transport the youth to be enrolled.

The Monitor reviewed four files. Three of the files did not contain the youths' school enrollment records, staff visitation notes or progress notes from the school. The shelter should keep track of the youths' school enrollment, school progress, and meetings discussing youths' individual needs. The staff at the home should be able to accurately and consistently update parents and guardians on the youth's progress.

The program has made significant improvement in this area in the latter part of the quarter.

### **Applicable Standards**

**COMAR 14.31.06.12.D.4** *For a child who legally is not attending school, shall either provide for gainful employment or enroll the child in a training institute geared to the acquisition of suitable employment or necessary life skills.*

**COMAR 14.31.06.12.D.1** *The licensee shall train a child in work readiness according to the child's age and capability.*

**COMAR 14.31.06.12.C** *The licensee shall provide each child with life skills training appropriate to the age and capability of the child.*

**COMAR 14.31.06.12.2(C)** *The placing agency and licensee shall work cooperatively with the local school system to participate as appropriate in the child's educational activities.*

## **6. Rehabilitative and Recreational Programming**

Many of the youth reported that they go across the street to the park most times, but that they would like to engage in a variety of activities on a consistent basis. The youth are not linked to community programs. COMAR regulations require that youth be engaged in community recreational programming.

## **7. Medical**

### **a. Basic Medical Services**

The Monitor reviewed four files of youth who have been in the home 30 days or longer. One file was complete, but the other three lacked required documentation, including vaccination records and documentation of past physical and dental care.

Some of the files contained an "Initial Health Screening" which is not a physical examination as required within 30 days of admission.

### **b. Medical Staff**



The intake nurse is at the home at least once per week and visits the home if a youth needs a minor medical service.

**c. Other Issues**

The medication storage cabinet does not have a lock. All medications should have a lock; controlled substances should have a double lock.

In one incident, this quarter, required medication was not administered to a youth transferred to the shelter from the Baltimore City Juvenile Justice Center. The youth's file and the medication log confirmed that the medication was never administered. The shelter did not contact BCJJC's physician about the youth's medication protocol within the three days required by COMAR.

**Applicable Standards**

**COMAR 14.31.06.13.G.1** *The licensee shall secure for each child a physical examination and a copy thereof within 30 days of admission or earlier if indicated by the child's health status.*

**COMAR 14.31.06.13.E.3** (The licensee shall) *Have each child examined by a dentist at least every 12 months.*

**COMAR 14.31.06.13.1(b)** *The licensee shall store all controlled substances under double lock.*

**COMAR 14.31.06.13.C.2 (a) (b)** *The licensee shall continue any current medications that the child is receiving at the time of admission to the program, and within 3 days of admission, consult with the licensee's medical care provider or the child's physician concerning the continuation of a current medication.*

**8. Youth Advocacy, Internal Monitoring and Investigation**

**a. Youth Advocacy**

A new grievance box was installed, and the Child Advocate was given the key by the home's administrator. The advocate should provide a new lock and key to ensure the security of the box. The advocate should not use locks or keys for the grievance box that were provided by shelter staff.

Throughout the quarter, the Monitor interviewed youth on the grievance process. Many of the youth responded by asking, "What is a grievance?" and said that a grievance process was never discussed at intake. Youth appeared to be unfamiliar with the process.

**b. Youth Concerns**

The Monitor has not received any grievances this quarter. When there are issues in the home, the staff immediately calls for a group session, or they address issues individually with the youth. Youth informed the Monitor that staff successfully handles minor issues in the home.

Youth report that they would like to attend additional outings and engage in a variety of activities.

### RECOMMENDATIONS

1. A Safety Environmental Plan should be completed for each youth during the intake process.
2. The shelter should apply for an annual health and environmental inspection.
3. The home should provide life skills training.
4. The shelter should create a tracking sheet for tracking enrollment and school liaison visits.
5. The shelter should designate school liaison staff to attend education meetings, and collect and file school related documents.
6. Staff should coordinate a variety of activities and enroll the youth in local community recreation centers and programs.
7. The shelter should collect medical status information. Appropriate medical appointments should be scheduled.
8. The nurse should contact the youth's physician within three days of admission to inquire about the continuation of medication.
9. Staff should ensure that the medication storage cabinet that contains controlled substances is under double lock.
10. The medication log should be reviewed daily and medication should be administered to youth as required.
11. The child advocate should supply a new lock and keys for the grievance box.

### UNABATED CONDITION

1. Youth should be provided with a nutritional snack between meals. The shelter should coordinate with DJS' nutritionist.





MARLANA R. VALDEZ  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**BALTIMORE CITY JUVENILE JUSTICE CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** Baltimore City Juvenile Justice Center  
300 North Gay Street  
Baltimore, MD 21202  
Administrator: Johnitha McNair, Superintendent

**Date(s) of Visit:** January 7, 9, 10 (Advisory Board), 22  
February 5, 14 (Advisory Board), 24  
March 10, 11, 14 (Advisory Board),  
18, 20, 25, 28, 2009

**Reported by:** Claudia Wright  
Senior Monitor

**Persons Interviewed:** Administrators, Staff, Vendors, Youth

**Date of Report:** April 2009

## INTRODUCTION

Baltimore City Juvenile Justice Center is a 120-bed detention facility for boys. It is located on the ground floor of the juvenile justice complex that includes courts and youth services in downtown Baltimore City, Maryland. It is operated by the Maryland Department of Juvenile Services.

## SUMMARY OF CRITICAL FINDINGS

- Overcrowding in Unit 23 is a result of using the Unit to house both orientation status youth and vulnerable youth.
- Quality of staff supervision has not improved during the quarter.
- Violence has increased across the board even though population decreased by 15%.
- Group disturbances have increased significantly.
- Injuries resulting from restraint have doubled.
- Metal handcuffs are used extensively to restrain youth.
- Boys Club is available to youth only two hours per week.
- DJS/OIG sustained allegations of improper conduct of employees and recommended disciplinary action in 9 of 10 investigations during the quarter.

## FINDINGS

### 1. Population

#### a. General

<b>Facility Capacity</b>	<b>High Population</b>	<b>Low Population</b>	<b>Average Daily Population</b>	<b>Average Monthly Population</b>	<b>Number of Days Over Capacity</b>
120	126	101	114	January 117 February 112 March 110	10

Two units were closed and renovated to accommodate the Boys Club program. Rated capacity was lowered to 120.

Unit 23 on the D Pod was often overcrowded during the quarter. Unit 23 is designated as the Orientation Unit. Youth are placed in this Unit upon arrival at the facility, and are expected to stay for 3 days, or until initial processing is completed. Youth do not attend school while they live in Unit 23. They are sometimes given worksheets from the school, but they do not receive instruction from teachers. Unit 23 is



also used for housing vulnerable youth, youth on suicide watch and those who have been in fights or have enemies on other units.

On February 24, there were 11 youth on Unit 23, with 6 youth having been there for more than one week and one youth there for more than one month. On March 10, 20 youth were assigned to Unit 23 for the day. Ten had been there for more than 3 days; one had been in the Unit for 62 days and one for 82 days.

On March 20, there were 14 youth on the Unit: 2 had been there 7 days and 2 had been there 8 days. On March 25, there were 13 boys on the Unit, including one who had been assigned to Unit 23 for more than 2 months. On April 3, 13 youth were present in the Unit and 17 listed in the population log as assigned to Unit 23. Two of the youths were on suicide watch. Mixing of orientation and vulnerable populations creates a security risk and contributes to chronic overcrowding in this Unit.

**b. Detention and Pending Placement**

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>	<b>Average Length of Stay</b>
<b>Detention</b>	5 (61, 64, 65, 65, 67)	2 (107, 405)	12.08
<b>Pending Placement</b>	1 (65)	5 (94,142, 147,149,173)	10.33

**c. Population Breakdown by Race/Ethnicity**

	<b>1st Quarter 2008</b>	<b>1st Quarter 2009</b>
<b>Total # of Youth Detained</b>	778	868
<b>White</b>	18	31
<b>African American</b>	749	827
<b>Other</b>	11	10

## Applicable Standard

**Md. Dept. of Juvenile Services Policy and Procedure RF-01-08 Classification of Youth in Detention Facilities** *The Department of Juvenile Services (DJS) shall ensure a safe, secure and stable environment for detention facilities. Each facility shall implement an objective internal classification system to assess youths' potential vulnerability and supervision needs, and shall utilize the results of the classification assessment to guide appropriate housing decisions. The classification assessment shall be implemented for all youth on their admission to the facility and shall provide for reclassification in response to circumstances or special needs that may require modification of housing assignments.*

## 2. Staffing

### a. General

The quality of staff supervision of youth has not improved at BCJJC during the 1<sup>st</sup> quarter. In the Third Monitors' Report submitted by the CRIPA monitors<sup>1</sup> on December 31, 2008, pursuant to the Settlement Agreement between the United States Department of Justice and the DJS, the Monitors state:

*Although the facility assigns the proper number of staff to housing units to meet required staffing ratios, one of the more obvious contributors to the problem of youth violence at BCJJC is the lack of direct care staff skill in supervising youth. (emphasis in original) Incident reports are replete with examples of staff abandoning their posts temporarily (providing an opportunity for youth to fight) or failing to fully account for the youth in their care (allowing them to go into another area undetected) or ignoring obvious signs of tension or frustration among youth that escalate into violence. Improving staff skill in this area is essential to meeting the requirements of this Agreement."<sup>2</sup>*

Lack of staff skill is evident in the reports of the DJS/OIG filed during the 1<sup>st</sup> quarter. Findings of improper conduct were sustained in nine separate incidents involving 17 staff, including six supervisors. The CRIPA Monitor also noted in the report referenced above:

*Of serious concern is the fact that throughout the monitoring period, several incidents were identified in which staff did not accurately and completely recount the events that occurred via the incident reporting process." (emphasis in original).<sup>3</sup>*

<sup>1</sup> CRIPA Monitors evaluate the State's progress on the federal civil rights case involving conditions at the Baltimore City Juvenile Justice Center. If conditions improve sufficiently, the U.S. Department of Justice is scheduled to dismiss the case on June 30 of this year.

<sup>2</sup> Third Monitors' Report, December 31, 2008, at page 11.

<sup>3</sup> Third Monitors' Report, December 31, 2008, at page 14.



The failure of BCJJC staff to file accurate reports was reported by this Office in a Special Report issued November 1, 2008.

### **Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.1.3 Staffing** *Staffing arrangements shall aim to provide a safe, humane, and caring environment.*

**Md. Dept. of Juvenile Services Policy and Procedure MGMT-03-07 Incident Reporting Policy** *The Department of Juvenile Services(DJS) employees ... shall report and manage incidents involving a youth or program in a manner that provides for the public safety and the proper care, health, safety and humane treatment of DJS youth.*

### **3. Safety and Security**

#### **a. Aggregate Incidents**

<b>Incident Categories</b>	<b>1<sup>st</sup> Quarter 2008</b>	<b>1<sup>st</sup> Quarter 2009</b>
1. Youth on Youth Assault	167	183
2. Youth on Staff Assault	30	18
3. Group Disturbances (with bodily harm or property damage)	5	59
4. Group Disturbances (without bodily harm or property damage)	7	18
5. Restraints	256	239
6. Restraints with Injury	51	136
7. Seclusions more than 8 hours	24	7
8. Allegations of Child Abuse (DJS custody)	0	2
9. Escapes	0	0
10. Suicide Attempts, Ideation, Gestures, Behavior	15	17

#### **1. Group Disturbances**

Group disturbances increased at an alarming rate between the 1<sup>st</sup> quarter of 2008 and the first quarter of 2009. On January 3, a shift commander accidentally left the door to the gymnasium unsecured allowing youth from Unit 41 to enter and attack youth from Unit 32.<sup>4</sup> On January 27, Unit 31 attacked Unit 32 in the school. Sixteen youth and one staff were injured in the incident; 42 youth were held in seclusion.<sup>5</sup> On January 28, youths barricaded themselves into the case manager's office on Unit 31 (see Special

<sup>4</sup> DJS/OIG Report #09-70044

<sup>5</sup> DJS/OIG Report #09-70567

Report, November 1 2008 in reference to a similar incident); two staff members subsequently assaulted (striking about the face and head) one of the youths .<sup>6</sup>

On February 21, a group disturbance in unit 30 resulted in injuries to 3 youths.<sup>7</sup> On March 22, 3 youths were injured in a group disturbance on Unit 21; one required treatment at the emergency room.<sup>8</sup> There were 77 group disturbances during the quarter, compared with 26 in the 3<sup>rd</sup> quarter of 2008 and 12 in the 1<sup>st</sup> quarter of 2008.

### c. Restraints

Although the number of documented restraints is down from last year, the number of injuries resulting from restraint has more than doubled. Mechanical restraints (metal handcuffs) are commonly utilized at BCJJC, even though such equipment is prohibited by the Juvenile Detention Alternatives Initiative (JDAI) Standards to which the Department is committed (See JJMU 3<sup>rd</sup> Quarter Report 2008). Staff indicate that handcuffs are used in “virtually every restraint.” Injuries are more likely to result from restraint when metal handcuffs are used.

#### Applicable Standards

**Md. Standards for Juvenile Detention Facilities 5.1.1 Security and Control** *Security in a detention facility shall recognize and balance the legitimate need for security and safety felt by staff and society with the residents’ need for a setting that provides them with safety and a reasonable quality of life.*

**Md. Department of Juvenile Services Policy and Procedure RF-02-07 Use of Crisis Management (CPM) Techniques** *Policy Employees of the Department of Juvenile Services (DJS) ... shall establish and maintain a safe and orderly environment within each facility.*

**Juvenile Detention Alternatives Initiative, Annie E. Casey Foundation, Standards VI.A.2.b** *Except for handcuffs used during transportation or facility emergencies, the only mechanical restraints that staff may use in the facility are soft or “therapeutic” restraints: fleece-lined leather, rubber, or canvas hand and leg restraints, and only with physician or mental health authorization...*

## 4. Physical Plant and Basic Services

### a. Fire Safety

Sprinklers and alarms are maintained quarterly by a contractor. Sprinklers are re-set promptly after false alarms. However, there is cause for concern because when a

<sup>6</sup> DJS/OIG Report #09-70662

<sup>7</sup> DJS/OIG Report #09-71239

<sup>8</sup> DJS/OIG Report #09-72058



sprinkler is set off by a youth, the water must be turned off until the sprinkler can be re-set. While the water is turned off, the Unit is unprotected.

A current Fire Marshal's report is on file in the maintenance department.

**b. Physical Plant**

Two Units on the F Pod are now used to house the Boys Club program. Because these Units are no longer available for housing, the rated capacity of the facility was reduced to 120. The other two Units on the F Pod house a new "VPI" program. The particulars of this program have not been reduced to writing, but were described by the Superintendent to the BCJJC Advisory Board on January 10. Youth who meet the criteria of the Violence Prevention Initiative (a community program designed to assist youth who victimize and who are likely to be victims) will be housed in these Units and provided with intensified programming. During the quarter these Units had relatively low populations, sometimes as few as four youth assigned to the Unit.

Construction was completed during the quarter on two new classrooms for the school. These new classrooms are located in the area previously used for storage. Administrators hope that these new classrooms will alleviate overcrowding in the school area.

**c. Basic Services**

Current health inspections are on file in the Kitchen. Most youth eat at least one meal per day in the dining area, but all other meals are served in the Units. Food service in the living Units creates both health and security concerns. Food is served in Styrofoam containers which pose environmental and fire hazards.

Youth rarely complain about the quality and quantity of food. However, it is still a common practice for youths to use food, and theft of food, for purposes of intimidation and threat to vulnerable and inexperienced youth.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.2.1** *All detention facilities shall conform to State fire safety requirements.*

**Md. Standards for Juvenile Detention Facilities 5.5.6 Health and Safety Regulations** *Food service shall comply with applicable sanitation codes as promulgated by the federal, state and local authorities including but not limited to COMAR 10.15.03*

**5. Education**

No education issues reported at this time.

## 6. Rehabilitative and Recreational Programming

### a. Therapeutic Program

The Boys Club at BCJJC program was fully implemented during the 1<sup>st</sup> quarter. The program takes place in Units 42 and 43 on the F Pod. These two Units were brightly painted and appropriate furniture was installed to accommodate the program.

Every youth at BCJJC attends the program. Youth attend with their assigned Units. Each youth attends the program 1 hour during the week, and one hour on the weekends. Unit 41 also attends the program during one lunch hour per week. Programs take place from 4:30 to 7:15 each afternoon and continuously on Saturday and Sunday. Boys Club also sponsors special activities such as basketball tournaments and chess or checker tournaments.

The hour-long program segments begin with group participation in "Passage to Manhood," a curriculum created by the Boys Club. "Passage to Manhood" includes group readings about famous African Americans, discussion of special topics such as conflict resolution, a number of the day and a word of the day. Youth appear to be engaged in and enjoying the program. The second half of each program is free recreation, which involves use of the Boys Club equipment including a Wii, video games, recording equipment, a library and board games.

The Boys Club at BCJJC has the potential to have a positive effect on detained youth. The staff is dynamic and deeply committed to the program. However, considering that a variety of popular programs were discontinued in favor of Boys Club, it does not appear that the youth or the Department are getting much bang for the buck. Two hours per week of programming is not nearly enough to diminish idle time. Even with 1 hour per day of physical recreation, ART (Aggression Replacement Training) groups led during lunch hour by mental health personnel, and school, many hours remain empty, especially on weekends. Most youth spend most of their time playing cards or watching TV.

### b. Parental Involvement

Youth are allowed two ten-minute phone calls per week to families. Families may visit on Saturdays, Sundays and Wednesdays, and, for level 4 youth, on Fridays.

#### **Applicable Standard**

**Md. Dept. of Juvenile Services Policy and Procedure RF-08-07 Recreational Activities Policy** *The Department of Juvenile Services (DJS) shall provide recreation and leisure activities to youth in DJS residential facilities and programs to promote skill development and prevent idleness. Recreation shall be available to all youth each day. Leisure activities shall be provided to alleviate boredom, provide positive reinforcement and develop skills of cooperation, teamwork and sportsmanship.*



7. Medical and Behavioral Health

a. Basic Medical Services

Medical and dental preventive services and treatment are provided in a timely and competent manner. Records are complete and well maintained. Medical staff refer cases to specialists and to emergency rooms when necessary.

b. Medical Staff

The Medical Department is fully staffed.

c. Mental Health Services

Mental Health services are provided by Hope Health Systems, Inc. They do mental health assessments, lead Aggression Replacement Training (ART) classes and substance abuse groups, and conduct some limited individual therapy. Hope Health Systems provides a large staff of professionals on site at the Justice Center.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 4.3.1 Somatic Health Services**  
*Delivery of health care services shall be in accordance with established Departmental policy and procedures.*

**Md. Standards of Juvenile Detention Facilities 4.3.2 Mental Health Services**  
*The Department shall be responsible for acquiring, either directly or by agreement or contract with a public or private mental health agency, necessary mental health care and services for youth within facilities operated by the Department and its vendors. All mental health services shall be provided in accordance with guidance from the Department of Health and Mental Hygiene.*

8. Youth Advocacy, Internal Monitoring and Investigation

a. Youth Advocacy

DJS Youth Advocates respond in a timely and appropriate manner to grievances filed by BCJJC youth. Eleven grievances were filed during the 1<sup>st</sup> quarter. Residents at BCJJC rarely file grievances because of the self-imposed prohibition against snitching.

b. Internal Monitoring

BCJJC is monitored by CRIPA and the Governor's Office for Crime Control and Prevention (GOCCP) as well as by this office. CRIPA submitted a Third Monitors'

Report on December 31, 2008 and will be filing a Fourth Report on June 30, 2009. GOCCP filed its report in September 2008.

The DJS Office of Quality Assurance and Accountability issued its most recent report on March 20, 2009.<sup>9</sup>

**c. Incident and Child Abuse Reporting and Investigation**

The DJS Officer of Inspector General submitted 10 full investigation reports during the 1<sup>st</sup> quarter based on incidents at the Justice Center. Nine of those reports included sustained allegations of improper conduct by staff and recommended disciplinary action.

There were two allegations of child abuse filed during the 1<sup>st</sup> quarter. DJS/OIG sustained violations of Departmental policy and recommended disciplinary action in both cases. Both cases were ruled out by Baltimore City Child Protective Services.

**Applicable Standard**

**Md. Dept. of Juvenile Services Policy and Procedure MGMT-03-07 Incident Reporting Policy** *The Department of Juvenile Services (DJS) employees ... shall report and manage incidents involving a youth or program in a manner that provides for the public safety and the proper care, health, safety and humane treatment of DJS youth. Additionally, DJS employees ... shall notify law enforcement and the local Department of Social Services (DSS) of incidents as required by law.*

**RECOMMENDATIONS**

1. Unit 23 should house only youth in orientation status. Unit 23 youth should be allowed to go to school or have instruction delivered in the Unit.
2. Skilled and experienced staff from other parts of the state should be re-deployed to the Baltimore City Juvenile Justice Center
3. Population should be reduced to no more than 48 youth to reduce the level of violence in the facility.
4. Metal handcuffs should not be used to restrain youth.
5. Youth should attend the Boys club program more than 2 hours per week.

<sup>9</sup> <http://www.djs.state.md.us/quality-assurance/qir-bcjjc.pdf>



### UNABATED CONDITIONS

1. Levels of violence at BCJJC continue to rise.
2. Therapeutic and recreational program are inadequate to meet the needs of the population.
3. Metal handcuffs are used for restraint.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**CHARLES HICKEY, JR. SCHOOL FOR BOYS**  
**JANUARY - MARCH, 2009**

**Facility:** Charles Hickey, Jr. School for Boys  
2400 Cub Hill Road  
Baltimore, MD 21214  
Superintendent: Wallis Norman  
Asst. Superintendents: Anjelene Branch and Clyde Waters

**Date(s) of Visit:** January 8, 24; February 6, 9; March 12, 13, 25, 2009

**Reported by:** Tanya Suggs  
Monitor

**Issues Monitored:**

- Population
- Safety/Security
- Physical Plant
- Education
- Rehabilitation and Recreation
- Medical
- Youth Advocacy

**Persons Interviewed:** Peabody Teacher and Administrator, Staff, Administrators,  
Youth, Clinical staff, Volunteers

**Date of Report:** April 2009



## INTRODUCTION

The Charles H. Hickey School is a Department of Juvenile Services (DJS) owned and operated detention facility for male youth between the ages of 12 and 18. The facility is located in East Baltimore County. Hickey has three 24-bed cottages dedicated to detention and pending placement.

There is an additional 24-bed orientation cottage. The renovation of the fourth 24-bed cottage, Roosevelt Hall, was completed in August. Roosevelt Hall currently houses Clinton Hall youth. Clinton Hall is under renovation at this time. The current capacity for Charles Hickey Jr. School is 72.

## CRITICAL FINDINGS

- Reported incidents have decreased.
- The facility has not conducted weekly security inspections. There is no weekly Inspection Facility Operating Procedure.
- The 2008 annual fire safety inspection has not been conducted.
- The facility has not completed a mandated asbestos inspection that is required for the Peabody School.
- Youth who have severe mental health needs are inappropriately placed at Hickey.

### 1. Population

#### a. General

<b>Facility Capacity</b>	<b>High Population</b>	<b>Low Population</b>	<b>Average Daily Population</b>	<b>Average Monthly Population</b>	<b>Number of Days Over Capacity</b>
72	86	54	70	January-66 February-76 March-72	39

In January, the facility was over capacity on eight days and its highest population was 81. In February, the facility was over capacity on 17 days and reached a high of 86. In March, the facility was over capacity on 14 days and reached a high of 78.

#### b. Detention and Pending Placement

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>	<b>Average Length of Stay</b>
<b>Detention</b>	10  (60,66,68, 70 [2],72,75, 76,79,and 81 days)	6  (90, 101, 116, 129, 141, and 279 days)	21.38
<b>Pending Placement</b>	8  (60, 63, 64, 67, 71,79, 83, and 85 days)	9  (91, 92, 93,106, 127,140,142,186, and 233 days)	35.94

Ten youth remained in detention at Hickey for over 60 days this quarter. An additional six youths were in detention for over 90 days and one was in detention for 279 days. Nine youth were held in pending placement for more than 90 days. Two youth waited at the facility for nearly 5 months; another for nearly 6 months. One youth was in pending placement for almost 8 months.

The number of youths who have been in detention and pending placement status for more than 60 and 90 days has significantly increased since last quarter. Pending placement youth should be placed within 60 days.

**c. Population Breakdown by Race/Ethnicity**

	<b>3<sup>rd</sup> Quarter, 2008</b>	<b>4<sup>th</sup>Quarter, 2008</b>	<b>1<sup>st</sup> Quarter, 2009</b>
<b>White</b>	88	71	96
<b>African American</b>	183	139	227
<b>Hispanic</b>	5	5	2
<b>Other</b>	3	1	1

**2. Safety and Security**

**a. Aggregate Incidents**



Overall, there has been a downward trend in incidents throughout the last three quarters. Seclusions decreased between the 4<sup>th</sup> Quarter, 2008 and this quarter. There were three incidents of seclusion this quarter compared to 23 last quarter. The Department of Juvenile Services Incident Reporting Database reflects one allegation of

Incident Categories	3 <sup>rd</sup> Quarter 2008	4 <sup>th</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
1. Youth on Youth Assault	67	47	40
2. Youth on Youth Assault with Injury	51	27	26
3. Alleged Youth on Staff Assault	10	8	1
4. Alleged Youth on Staff Assault with Injury	5	3	3
5. Group Disturbances (with bodily harm or injury)	5	0	1
6. Group Disturbances (without bodily harm or property destruction)	2	2	0
7. Restraints	62	58	44
8. Restraints with Injury	41	27	26
9. Seclusions	19	23	3
10. Allegations of Physical Child Abuse	2	3	1
12. Suicide Attempts, Ideation, Gestures, Behavior	8	15	12
13. Alleged Inappropriate Staff Conduct/Comments	5	2	4

child abuse; however, Baltimore County Child Protective Services reported four allegations of abuse. This discrepancy remains unexplained.

**b. Facility Weekly Inspections**

The Department requires weekly inspections of security, environmental, medical and health practices. Each facility should have a Facility Operating Procedure for the weekly inspection. Hickey does not have a weekly inspection Facility Operating Procedure (FOP). The Monitor was informed that the facility would create the FOP by the end of February, but no documentation indicating the completion of the FOP has been submitted to the Monitor at this time.

**c. Security Equipment and Practices**

Video surveillance in the gatehouse and throughout the campus is vital to safety and security at Hickey. The facility is not equipped with video cameras due to lack of funds. Staff must depend on audio communication devices. It is not known when DJS will install video surveillance at the facility.

The facility is unable to review incidents of youth and staff interaction. Although video is required by policy in all incidents, staff do not videotape incidents because there are no operable cameras. Staffs should be able to monitor all areas of the facility at all times.

### **Applicable Standards**

**Maryland Department of Juvenile Services Policy and Procedure RF4-07-4 A (3)**  
*Each facility will develop Facility Operational Procedures (FOP) for the reporting of any maintenance, security or safety concerns.*

**Maryland Department of Juvenile Services Policy and Procedure RF 4-07 (11)**  
*Employees in the Resident Advisor Supervisors Series will conduct safety and sanitation inspections of all living units on a weekly basis. The inspection will address maintenance issues within the living units including pipe chases, bathrooms, showers, and any other rooms within the living unit directly accessible to youth. The inspection will be reviewed by the Facility Administrator or Assistant Facility Administrator and documented using the **Facility Administrators Weekly Inspection form (Appendix 2)**.*

**Maryland Standards for Juvenile Detention Facilities 6.9** *The facility shall be controlled by appropriate means to ensure that the youth remain within the perimeter and to prevent access by the general public without proper authorization. Perimeter surveillance shall be maintained through mechanical surveillance devices (e.g., electronic, pressure, or sound detection system, mobile patrols, or a combination of these systems).*

#### **d. Restraints and Seclusion**

There were only two incidents of seclusion this quarter. Hickey has made significant improvement this quarter with maintaining low numbers of seclusion incidents.

#### **e. Behavior Management Plan**

No Monitoring issues identified this quarter.

### **Applicable Standard**

**Md. Dept. of Juvenile Services Policy and Procedure RF-01-07 (7):** *Seclusion shall not be used as punishment and is limited to youth who have not responded to less restrictive methods of control or for whom less restrictive measures cannot reasonably be tried, and who: (i) Present an imminent physical danger to self or others; or Have escaped or are attempting to escape.*

### **3. Physical Plant and Basic Services**

#### **a. Fire Safety**



A new fire alarm system was installed at Hickey in early August. The State Fire Marshal tested and formally approved the new system on August 29. No problems are noted. The next fire alarm inspection is due by August 29, 2009.

The annual general fire inspection was due in September 2008, but had not been performed as of the writing of this report. The facility's superintendent submitted the 2008 fire alarm inspection approval, signed off by the State's Fire Marshal as the fire inspection report.

The fire alarm inspection cannot be substituted for the annual fire safety inspection; both are required annually. The general fire inspection is comprehensive, covering all potential fire hazards on the campus – not just certifying operation of the fire alarms.

**b. Physical Plant**

Clinton Hall and the east campus gym are currently undergoing renovation. The east campus gym floor will be resealed and new exit lights will be installed. Asbestos was discovered in the east campus gym after the facility conducted an inspection. The old infirmary is under renovation and will be used as a laundry room.

The west campus gym was not tested for asbestos, but the Facility Administrator said a test is unnecessary because maintenance staff conduct a weekly inspection to determine whether the asbestos shows signs of becoming hazardous. So far, maintenance staff inspections have concluded that the asbestos is not hazardous because it does not crumble with hand pressure..

The facility has not submitted a mandated asbestos inspection for the Peabody School. The Peabody school is the only building at this time that is required to submit the inspection report.

Pavement has been added at the entrance to the Peabody trailers. The Peabody school is now compliant with the Americans with Disabilities Act (ADA).

**c. Climate Control**

Youths complain that their rooms are too hot at night. A corrective action is pending.

**d. Basic Services**

A corrective action plan has been submitted for all previous findings. The next annual environmental health inspection is due by June 6, 2009 and the dietary health inspection is due by August 15.

## **Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.5.8.2** *At least three meals, two of which are hot meals, shall be provided at regular meal times during each 24-hour period, with no more than 14 hours between the last evening meal and breakfast...*

**Md. Standards for Juvenile Detention Facilities 5.2** *All detention facilities shall conform to state fire safety requirements. The State Fire Marshal is responsible for inspecting state institutions and insuring appropriate safety procedures.*

**Md. Standards for Juvenile Detention Facilities 5.2.2** *All secure detention facilities shall be inspected annually in order to ensure conformity to all public safety codes.*

## **4. Education**

### **a. Supervision**

.Supervision of youth at the school has still not improved.. Youths walk the halls unsupervised. They should be escorted to their destinations by staff.

### **b. ASSIST**

Five Peabody school staff were trained on the DJS ASSIST database, which includes information on individual youth under DJS supervision. They can now access the educational page and information about each youth's educational background and needs. This will expedite the school intake process and speed up assigning youth to their appropriate placements.

### **c. Vocational Education**

Hickey still does not have a vocational teacher for woodshop class. Youth have requested more vocational options.

## **5. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

No reporting issues identified this quarter.

### **b. Recreational Programming**



Youth are required to receive one hour of daily recreational programming and one hour of leisure time. Youth spend most of their recreational time sitting in the recreation room watching television or playing cards. They also play basketball in the west campus gym. Consistent leisure time activities are not coordinated for the youth.

Many programs, including the chess club, were discontinued due to funding issues. However, every Tuesday there is a reading club called the Freedom Writers.

c. Parental Involvement

No reporting issues identified this quarter.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 4.5.1.2(3)** *The recreational program shall provide a variety of planned, structured large muscle and leisure activity. These activities shall include, but not limited to creative activities (arts and crafts) quiet individual leisure activities (reading and letter writing).*

6. Medical and Behavioral Health

a. Basic Medical Services

A youth suffered severe injuries, including lost teeth and a fractured nose in an inappropriate restraint at The Baltimore City Juvenile Justice Center. The also had a gunshot wound from an earlier unrelated incident that required treatment. He was transferred to Hickey and upon arrival, was placed on Ford Hall rather than the infirmary.

Given the seriousness of his injuries and need for ongoing care, he should have been housed in the infirmary. After discussions between the Monitor's office and DJS, the youth was moved to the infirmary for approximately one week. He is now housed in the general population.

When the youth was first injured, the emergency room physician placed him on a soft diet. The youth is also Muslim and not allowed to eat pork. The Medical Department failed to forward the dietary restrictions to the Food Department, and initially the youth's special diet was not provided. Corrective actions were taken.

b. Medical Staff

No issues identified this quarter.

c. Mental Health Services

Hickey does not have the staff or expertise to provide intensive mental health services to youth with serious mental illness. (See Monitor's Observations below.)

### **Monitor's Observations – Inappropriate Placement**

A youth at Hickey, "EP," has been detained for eight months. He has been in and out of foster homes and public shelters since the age of three and has been involved in the juvenile system for the past 9 years. EP's mother and father were alcohol and substance abuse abusers. His father physically abused him, and sometimes did not allow him to eat or bathe for days.

EP's life has been marked by trauma – he escaped a house fire on his 12<sup>th</sup> birthday and discovered his mother's deceased body a few days after his 13<sup>th</sup> birthday.

EP has been diagnosed with Conduct Disorder, Post Traumatic Stress Disorder, and Bipolar Disorder. He was placed on medication but he refused to take it. According to the DJS ASSIST Database, EP has been charged with 45 juvenile offenses, including 10 assault cases that are pending in adult court.

During his stay at Hickey, EP has assaulted staff on a daily basis and consistently fought other youth. He tries to alert staff when he is becoming angry but he is impulsive and at times attacks without notice – he is often unable to control his anger. He was sent to an out-of-state treatment facility but returned to Maryland because of his behavior.

Positive incentives have not worked to help EP control his behavior. Glass Mental Health, the behavioral health provider at Hickey has placed EP on a behavior agreement plan and included him in-group session, but the clinical services available at Hickey are not intensive enough to meet his needs. The facility has run out of options.

Community Case Managers, facility faculty and staff, therapists, and administrators have no answers to what is going to happen with this youth. Everyone is awaiting the outcome of the adult charges against this youth and assuming that the adult system will inherit the responsibility for EP.

Special needs youth cannot be provided with appropriate, intensive mental health care services within the environment of a general population juvenile detention center. Their placement in these environments leads to deteriorating mental health, increased involvement in facility incidents and additional stress on already overburdened facility staff.

EP is one of many "crossover" youth in the juvenile system – he has been involved with multiple state systems throughout his life, and he has graduated from abused child to mentally ill youth to juvenile delinquent and now likely to adult criminal. Sadly, this youth will be sanctioned as an adult and held fully responsible for all his



actions, despite the State's inability to provide the services that he has needed over the entire span of his lifetime.

### **Applicable Standards**

**Maryland Standards for Juvenile Detention Facilities 5.5.5.1 Special Nutrition Needs- Prescribed** *Special modified diets shall be provided when prescribed by the facility medical authority. The modified diet shall be planned by a facility dietician to recommend appropriate menu substitutions and address the special nutrition needs of the individual.*

**Maryland Standards for Juvenile Detention Facilities 5.5.5.2 Religious Reasons** *To the extent possible, special diets shall be provided for youth whose religious beliefs require adherence to religious dietary law.*

## **7. Youth Advocacy, Internal Monitoring and Investigation**

### **a. Youth Advocacy**

Ten grievances were filed this quarter. Youth say that they do not like to file grievances because doing so is a form of snitching.

The majority of the grievances involved the Mandela shower and sink stalls being clogged and the bedroom temperatures being too hot. Many of the grievances have been resolved. A corrective action is pending for the climate control issues on Mandela Hall.

The DJS Office of Quality Assurance and Accountability issued its most recent report on June 5, 2008.<sup>1</sup>

### **b. Incident and Child Abuse Reporting and Investigation**

Three investigations of alleged child abuse were conducted by DJS and CPS. A youth alleged that staff injured his finger while restraining him; another youth alleged that a staff threw him to the floor during a physical restraint. The third alleged that residential staff threw a youth to the ground and punched him in the face during an inappropriate restraint.

All allegations of abuse were ruled out by CPS and not sustained by DJS due to a lack of sufficient evidence.

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<sup>1</sup> <http://www.djs.state.md.us/quality-assurance/qir-chhs.pdf>

## RECOMMENDATIONS

1. The facility should create a Facility Operating Procedure for the weekly security inspection as part of the Facility Operational Plan.
2. Safety and sanitation inspections of all living units should be conducted on a weekly basis.
3. Administrators should conduct an asbestos inspection for the Peabody School and submit a copy of the report to The State Health Department's Industrial Inspector.
4. Facility Case Managers and Probation Officers should consistently maintain updated information on the youths' court cases by consistently communicating with the appropriate court officials and the youths' public defenders.
5. Medical personnel should ensure that all special individualized dietary menus are faxed to food services in a timely fashion.
6. Food services should collaborate with a DJS dietician to ensure the proper planning of dietary menus for youth who are on special diets.

## UNABATED CONDITIONS

1. Hickey does not have video surveillance cameras. The Department should provide additional funds for the installation of surveillance cameras in the living units, in master control, and at the gatehouse.
2. Seclusion forms must be properly completed and reviewed by administrators to ensure proper documentation and timely visits by shift commander and medical.
3. Administrators should apply for the 2008 annual fire safety inspection as soon as possible.
4. Youth are not consistently supervised at the Peabody school. Sufficient direct care staff should be posted in hallways to ensure that youth are in classes.
5. During school time, youth must be escorted while they are moving in the hallways.
6. Surveillance cameras should be installed in the hallways of the Peabody school.
7. A facility recreation specialist should create and implement an array of consistent recreation and leisure time lesson activities.





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**CHELTENHAM YOUTH FACILITY**  
**JANUARY – MARCH, 2009**

**Facility:** Cheltenham Youth Facility (CYF)  
11001 Frank Tippett Road  
Cheltenham, MD 20623  
Administrator: Quanetta West, Superintendent

**Date(s) of Visit:** January 8, 14, 20 and 30, February 3, 10, 18 and 24, March 5 and 17, 2009

**Reported by:** Nick Moroney  
Monitor

**Persons Interviewed:** Superintendent, Assistant Superintendent, Acting Superintendent, Head Nurse, Shift Supervisors, Child Advocate, Facility Case Manager Supervisor, Superintendent of Education, Teacher Supervisor, Residential Staff, Youth

**Date of Report:** April 2009

## INTRODUCTION

Cheltenham Youth Facility (CYF) is operated by the Department of Juvenile Services (DJS) and is located in Prince George's County. CYF serves young men from 12 to 18 years old. The facility includes three separate components. The detention component at CYF consists of youth awaiting trial, adjudication or committed placement. The Re-Direct program is a short-term program for committed youth. The third component at CYF is a shelter program for youth under court supervision who do not require secure confinement. The Shelter and Re-Direct units are located outside the security fence on the CYF campus.

## CRITICAL FINDING

- CYF was over-populated during the first quarter of 2009.

## FINDINGS

### 1. Population

#### a. General

<b>Facility Capacity</b>	<b>High Population</b>	<b>Low Population</b>	<b>Average Daily Population</b>	<b>Average Monthly Population</b>	<b>Number of Days Over Capacity</b>
115	135	90	113	<b>January 111 February 115 March 126</b>	72

A total of 767 youth were placed at CYF during the first quarter of 2009.

The CYF population was over the DJS set "115" facility capacity figure for most of the quarter (81%). On March 12, CYF population was at 134, the highest figure recorded in nine months and an increase of ten youth over the previous day.

Every day during the first quarter some youths at CYF had to share a cell during sleep time. Some had to sleep in "boats" rather than beds. "Boats" are fiberglass containers with a mattress inside that are placed on the floor. At many points during the first quarter, the number of youth housed in the infirmary exceeded the number of rooms available as sleeping quarters.



. The three residential cottages at CYF have a total of 67 rooms and 79 beds. In the case of Cornish Cottage, some cells are double or dormitory style. The new infirmary has 6 rooms. Youth at CYF should never have to sleep in boats. Youth should also be in single occupancy rooms per best practice as followed at the DJS detention facility in Chestertown.

DJS has responded, in part, to the problem of overpopulation by expanding the number of youth served in the Re-Direct program outside the fence. To accomplish this, DJS added another teacher to the Re-Direct education program. This approach will help somewhat to mitigate population spikes inside the fence. However, when CYF population is as high as it has been this quarter, the Re-Direct expansion is not a comprehensive answer to overpopulation at the facility.

CYF as currently utilized conflicts with the maximum 48-bed facility model DJS has endorsed and promulgated as the Maryland Model. CYF continues to be utilized as an overflow facility, a designation that appears to be based on the total area of open and enclosed physical space at Cheltenham. Such a calculation does not address ongoing overcrowding.

Overpopulation at CYF this quarter was not caused by an influx of youth from other counties outside the region. According to youth residency information on the DJS ASSIST database, most of the youth placed at CYF came from Prince George's County and other nearby counties. Out of a total of 142 youth at CYF on March 31, 2009, there were two youth from Baltimore City and three from Eastern Shore counties, the rest were from within the region. According to the Acting Regional Director, only a small number of youth are transferred to CYF from other DJS facilities and the minor influx from other DJS facilities is balanced by transfers from CYF to other DJS facilities.

A number of factors are propelling detention numbers upward, including the prosecution of long-standing warrants in Prince George's County. Another factor contributing to overpopulation is placement of youth into detention for a single weekend for punishment. This type of short-term placement is inappropriate and creates an extremely difficult situation for facility administrators. Unexpected weekend placements stretch important resources such as food, shelter, staff, and transportation.

Use of detention for weekend punishment highlights a need for more alternatives to detention. DJS expanded the "Operation Safe Kids" program for at-risk youth from Baltimore City into Prince George's County. There are also plans to expand a mentoring program involving university students working with youth. Such initiatives are a positive development.

**b. Detention and Pending Placement**

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>
<b>Detention</b>	4 (68, 73, 83 and 84 days)	3 (92, 96 and 102 days)
<b>Pending Placement</b>	10 (61, 61, 61, 64, 64, 74, 77, 80, 81 and 85 days)	1 (184 days)

A 14-year-old youth awaiting treatment placement entered CYF on October 29, 2008, and spent 184 days at CYF through March 31 (he ultimately left CYF on May 1, 2009).

Fifty-two youth took part in the Re-Direct program while twenty-five youth spent time in CYF shelter programs during the first quarter. The CYF shelter cottage is a converted house that was historically used as a family home by the facility superintendent. The building and shelter program is well appointed, maintained and managed. It is often occupied by just one or two youth and seems to be an underutilized asset.

**c. Population Breakdown by Race/Ethnicity**

	<b>1st Quarter 2008</b>	<b>1st Quarter 2009</b>
<b>Total Youth – CYF Detention</b>	494	540
<b>White</b>	73	69
<b>African American</b>	385	442
<b>Latino</b>	31	24
<b>Other/Unknown</b>	5	5



The total number of youth detained at CYF during the first quarter of 2009 rose by 9% over the first quarter of 2008. The number of African American youth detained rose 15% while the number of detained Latino and white youth at CYF fell by 24% and 6% respectively, over the same period.

### **Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.1.5.1** *The provision of ... living space shall be sufficient to adequately meet the needs of the detained youth.*

**Maryland Rules, Rule 11-112. Detention or shelter care.** *Maximum period of detention or shelter care – continued detention or shelter care pending the adjudicatory or waiver hearing may not be ordered for a period of more than thirty days.*

## **2. Staffing**

### **a. General**

A recruitment drive last fall followed by initial training sessions in early 2009 resulted in full staffing at CYF on March 1, 2009. A new assistant superintendent was hired last fall. The minimum staff to youth ratio standard was maintained throughout the quarter. Staff overtime hours have continued to decrease since the last months of 2008.

### **b. Staff Training**

Weekly staff trainings through Glass Mental Health on stress management, effective strategies with youth, family involvement and transition planning began on March 20 and will continue into the next calendar year.

## **3. Safety and Security**

### **a. Aggregate Incidents**

<b>Incident Categories</b>	<b>1<sup>st</sup> Quarter 2008</b>	<b>1<sup>st</sup> Quarter 2009</b>
1. Youth on Youth Assault	48	52
2. Youth on Youth Assault with Injury	31	26
3. Alleged Youth on Staff Assault	11	9
4. Alleged Youth on Staff Assault with Injury	5	4
5. Group Disturbance - No Injury	0	1
6. Group Disturbance – Injury or Destruction	0	2
7. Restraints	41	46
8. Restraints with Injury	24	20

9. Seclusions over 8 hours	0	2
10. Suicide Attempts, Ideation, Gestures, Behavior	25	14

Suicide related reports are down 44% at CYF over the same period in 2008. Youth on youth assaults are up 9% but injuries in such cases are down 16%. The pattern holds for physical restraints. While restraint usage is up 12%, injuries associated with restraints are down 19%.

There were no escapes or allegations of neglect at CYF this quarter. In addition, there were no sustained or founded child abuse cases or founded incidents of inappropriate staff conduct toward youth this quarter.

**Applicable Standard**

**Md. Dept. of Juvenile Services Policy and Procedure RF-02-07** *Crisis Prevention Management techniques may be utilized only to protect or prevent a youth from imminent injury to self or others or to prevent overt attempts at escape. In the event that a youth remains an imminent threat to self or others and the youth's behavior has escalated, restraints or seclusion may be used as a last resort. Employees may not use CPM techniques, including restraints or seclusion, as a means of punishment, sanction, infliction of pain or harm, demonstration of authority, or program maintenance (enforcing compliance with directions).*

**b. Incident-Related Procedures, Practices, and Reporting**

Videotaping did not take place during most incidents this quarter. No incidents were video recorded from January 1 through February 14. Failure to videotape serious incidents is unacceptable under DJS policy.

In April 2009, DJS installed cameras at various locations around CYF. Installation of the cameras will enhance safety and security and provide an important staff training tool.

**Applicable Standard**

**Md. Dept. of Juvenile Services Policy RF-05-07** *DJS employees shall videotape room extractions, escorts to seclusions, use of restraints, or other critical incidents that relate to the safety and security of a residential facility. Incidents shall be videotaped unless videotaping of the incident compromises the safety and/or security of youth and/or employees.*

**4. Physical Plant and Basic Services**

CYF is up to date and in compliance regarding fire safety.



The buildings at CYF are old and, with the exception of the recently renovated infirmary area, decrepit. The heating and cooling systems continued to deliver problems during the first quarter. Despite financial outlay to replace old piping and install new system components, problems with temperature control remain, leading to situations where buildings are too cold or excessively warm for youth and staff comfort.

Youths complained that they were issued a type of denim coat without warm interior lining. These coats are inadequate for cold weather conditions. DJS procurement staff at CYF made plans to obtain clothing that will comfortably withstand cold and blustery weather.

### **Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.1.5.1** *The provision of... heat, plumbing, ventilation, living space, noise levels and recreational space shall be sufficient to adequately meet the needs of the detained youth.*

**Md. Standards for Juvenile Detention Facilities 5.1.5.4** *Clothing ... services shall be maintained at a sufficient level to accommodate the number of youth at the facility.*

### **COMAR 14.31.06.07 (3) Physical Plant**

*Use a physical plant that is constructed and equipped in a manner consistent with the needs of the children...*

## **5. Education**

Education programming at CYF is operated by DJS. Youth records are requested and usually received promptly. Youth education strengths and challenges are promptly and professionally assessed upon entry to CYF and learning disabilities are addressed appropriately. Youth begin classes upon admission. The content and performance of classes and youth educational progress are positive.

Vocational programming at CYF offers youth constructive learning experiences including carpentry, horticulture and silk screening. However, vocational programming is critically under-funded and, with the possible exception of silk screening, not directly tied to career opportunities or widely recognized certification.

The silk screening course is taught by a professional business person who is respected by youth. He is able to teach youth in an especially positive manner. The course is very popular and youth learn a marketable skill. They produce distinctive and attractively designed clothing and other items. Youth also produce accomplished work in Carpentry and other vocational classes. In Horticulture, youth learn how to tend and nurture plants.

Administrators at CYF are seeking a volunteer instructor who will teach youth about photography and make use of an available dark room. CYF administrators are also reaching out to local businesses for help concerning product donations (e.g. soil, seed and wood) to benefit vocational education components.

The construction of a small greenhouse (previously proposed, partially constructed and then dismantled) would permit the horticulture program an opportunity to become self-sustaining. The carpentry and silk screening units could also become self-sufficient. They contribute valuable products to DJS system-wide but there is no mechanism to insure the programs receive value in kind for the products they provide.

Youth at CYF comment textbooks are outdated and classroom furniture is worn-out. The school also needs a second printer. DJS does not provide a dedicated budget for educational needs at CYF and this makes forward financial planning by school administrators difficult. DJS should delineate a dedicated school budget at CYF and other DJS-run educational units throughout the State to guarantee a sufficient, stable and dependable funding stream which will help ensure youth education needs are properly met.

#### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 4.1** *The Department shall ensure that educational services provided within the detention facility are consistent with state requirements and that they meet the individual needs of the youth.*

## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

During the first quarter of 2009, Community Case Managers (CCMs) were inconsistently involved in providing services to youth in CYF. CCMs are required to attend treatment service plan meetings (TSPs) for youth as part of a youth's treatment team. This monitor attended 5 TSPs at CYF attended by education, mental health and medical representatives, facility case management and residential care staff. Only one of the five meetings was attended by a Community Case Manager. While there may sometimes be legitimate reasons for non-attendance (court appearance etc.), some CCMs failed entirely to respond this quarter to notice of TSP meetings from the CYF facility case management supervisor.

At the end of the quarter, CYF staff report that "all [Community] Case Managers are communicating" and consistently attending TSP meetings. Those who cannot are reporting a legitimate reason for their absence.



### **Applicable Standard**

**Md. Dept. of Juvenile Services Policy for Case Management for Detained and Shelter Care Youth CJ-2-05 (1) The Community Justice Case Management Specialist shall:** (iii) Meet or consult with ... youth at the facility, within the first 10 days of a youth's admission... (vii) Visit a youth in detention or shelter care every two weeks, at a minimum, or more often as required by the facility treatment team while he resides in the facility.

#### **b. Recreational Programming**

In March, inter-facility basketball games resumed with a game between CYF and Lower Eastern Shore Children's Center (LESCC).

The exercise room needs renovation. The flooring is thoroughly worn. The room suffers from decades of wear and tear and the presence of hard to clean grime. Some large exercise machines are permanently out of commission after 20 plus years of service. The Superintendent has asked staff to remove the worn-out machines. The walls should be cleaned and repainted and worn exercise room flooring which poses a potential slippage hazard should be replaced. The Department should also secure new or gently used exercise equipment to replace the worn out machines.

### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 5.1.5.4 ... exercise and recreation ... services shall be maintained at a sufficient level to accommodate the number of youth at the facility.**

#### **7. Medical and Behavioral Health**

No monitoring issues identified this quarter.

#### **8. Youth Advocacy and Internal Monitoring**

Youth at CYF understand and use the grievance process and the youth advocate works diligently and effectively in addressing youth concerns.

In interviews, at a Youth Council Meeting and at a Facility Advisory Board Meeting during the first quarter, youth interested in Islam expressed a strong desire to practice their religion at CYF. Youth requests include the wearing of Muslim prayer caps, the use of prayer rugs and time set aside to pray.

During the first quarter, DJS instructed administrators at a private facility licensed through the Department that youth wishing to wear prayer caps for religious reasons

should be able to do so at any time. DJS should extend this right to youth at all DJS-run and DJS-licensed facilities.

The DJS Office of Quality Assurance and Accountability issued its most recent report on May 16, 2008.<sup>1</sup>

**Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 4.6** *Space and time shall be provided that may be used for religious purposes.*

**RECOMMENDATIONS**

1. DJS should ensure youth at CYF do not have to sleep on the floor in boats.
2. DJS should ensure youth at CYF do not have to share sleeping quarters.
3. DJS should provide dedicated school budget at all DJS-run schools.
4. DJS should ensure youth freedom to practice religion at all DJS facilities.

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<sup>1</sup> <http://www.djs.state.md.us/quality-assurance/qir-cheltenham.pdf>





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**THE DR. HENRY F. AND FLORENCE HILL GRAFF**  
**SHELTER FOR GIRLS**  
**JANUARY – MARCH, 2009**

**Facility:** The Dr. Henry F. and Florence Hill Graff Shelter for Girls  
8504 Mapleville Road  
Boonsboro, MD 21713  
Administrator: Bruce Anderson

**Date(s) of Visit:** January 14, February 13, and March 25, 2009

**Reported by:** Moira Lee  
Monitor

**Persons Interviewed:** Program Directors, Residential Care Staff, Case Manager,  
Teacher, and Youth

**Date of Report:** April 2009

## INTRODUCTION

The Dr. Henry F. and Florence Hill Graff Shelter for Girls ("Graff") is an 8-bed shelter for girls located in Boonsboro, Maryland. Most youth are from Washington and Frederick Counties. Graff is owned and operated by San Mar Children's Home, Inc. (San Mar). In addition to Graff, San Mar operates several programs for youth including a group home for girls, a therapeutic group home for girls and treatment foster care program for boys. San Mar is licensed by the Department of Health and Mental Hygiene and serves youth with psychiatric diagnoses. Graff is licensed by the Department of Juvenile Services (DJS).

Youth are referred to Graff by DJS and the Department of Social Services. Graff is a short-term shelter for girls waiting for a pending court placement or a long-term care facility. Girls may reside at Graff for up to 90 days.

## SUMMARY OF CRITICAL FINDINGS

- Graff Shelter is a nurturing environment for girls. The facility is clean and well manicured, the staff are conscientious and caring, and the girls say that their experiences at the shelter are positive.
- Graff Shelter lowered their population capacity from 12 to 8 youth.

## FINDINGS

### 1. Population

Graff serves youth who have substance abuse, education, and family issues as well as youth who have violated their parole. Graff does not accept youth who present a threat of safety to themselves or to others.

The residents at Graff range in age from 12-17. Youth referred by both Department of Social Services and DJS reside at Graff. Over the course of the quarter, from January through March, 12 girls have resided at Graff. The average length of stay of the 10 girls released from Graff during this quarter was 32.45 days.

Graff's chronic low population resulted in San Mar decreasing the population capacity from 12 to 8 youth and staff numbers were decreased accordingly. If the need arises and more youth are sent to Graff, they will be able to accommodate them immediately. When at capacity Graff maintains a 1 to 4 ratio of staff to youth.



## **2. Safety and Security**

Administrative staff reported that few incidents occur at Graff. While all staff are trained in the use of restraints, administrators reported that restraints are not used.

There were a total of 3 incidents at Graff this quarter. One incident, an allegation of child abuse occurring outside DJS custody, was reported to Graff administrators on December 31, 2008.<sup>1</sup>

Staff immediately reported the incident to Child Protective Services, but confused about DJS policy, did not report to DJS for 4 days. When the Director discovered the problem, he immediately sent a memo out regarding the reporting procedure, posted a new protocol in the administrative office at the shelter and held a staff meeting to ensure all staff were aware of proper protocol in reporting. This incident has not been entered into the DJS Reporting Database by DJS headquarters staff.

One incident involved a youth who AWOLed from the facility. The youth was returned to the facility by law enforcement within two hours of leaving. While out of Graff's care the youth reported being hit and touched inappropriately by a "strange man." The police were immediately notified. Staff responded to this incident in a prompt and appropriate manner.

### **Applicable Standard**

**COMAR 14.31.06.14.4(a)(b)** *Within 48 hours after a licensee files a report of child abuse or neglect with the local department of social services or the appropriate law enforcement agency, or within 48 hours after it becomes known to the licensee that the report has been filed, the licensee shall submit a written report to the licensing agency informing it of the activity; and unless inconsistent with the child's individual service plan, inform the child's parent of the allegation.*

## **3. Physical Plant and Basic Services**

### **a. Fire Safety**

Graff has a minimum of two fire drills per month, one during the first shift and one during the second shift. Emergency evacuation plans are posted on the door of each youth's bedroom. Staff are tested on the Graff emergency evacuation plan when they are hired and yearly thereafter.

### **b. Physical Plant**

Graff is a well-manicured and clean facility with a warm home-like environment.

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<sup>1</sup> Because it occurred on the last day of the quarter, this incident was not discussed in the 4<sup>th</sup> Quarter/Annual Report for 2008.

Staff reported that youth have asked to return to Graff when re-entering the juvenile justice system.

#### **4. Education**

##### **a. Type III School (School within or operated by the facility)**

The educational program at Graff is licensed by the Maryland State Department of Education. There is a classroom where all education takes place located within Graff house. Education staff offer an individualized program to help youth make a smooth transition back to school. A GED preparation program is available for youth who will not be returning to school when they leave the facility.

##### **1. Records**

A review of education files indicates education records are requested in a timely manner. The teacher created a new records request form to send to youths' previously attended schools and indicated that since she began using the new form that most records are received promptly.

##### **2. Educational Plan**

IEP's are received promptly and updated promptly by the teacher. Progress reports are written weekly for each youth.

##### **3. Classes**

Youth participate in class within 24 hours of admission. Given the small number of youth in the program, the teacher can give each youth a significant amount of individual attention. The classroom has one large square table so all youth and the teacher can interact and see one another.

Graff staff support the education program by integrating student success into the behavior management plan. All youth are required to complete educational assignments by Friday in order to participate in weekend outings. The teacher often utilizes community resources. Recently, the teacher took youth to a traveling museum exhibit on President Lincoln. The teacher also integrates current affairs into each lesson. Residential care staff participate and aid the teacher in educating the youth.

#### **5. Rehabilitative and Recreational Programming**

##### **a. Therapeutic Program**

Given the short duration of a youth's time at Graff, therapy is offered on an as-needed basis by therapists who are on-call 24 hours a day. In addition, a licensed social



worker holds weekly group meetings. Youth learn life skills through daily activities including table set up, cleaning, cooking and doing their laundry.

**b. Recreational Programming**

All youth participate in community service two times per week visiting a nursing home. Youth receive at least one hour of large muscle activity per day. The professional gardeners working for the state of Maryland will begin working with Graff shelter again this spring. The garden was a success last year. Youth enjoyed planting, harvesting, cooking, and eating the vegetables they grew. Youth also have a social outing one weekend night per week.

**c. Parental Involvement**

Parent visiting hours are from 12 p.m. to 3 p.m. on Saturdays and Sundays. Staff accommodate parent schedules by setting up additional visiting hours as needed.

**6. Medical**

There is a registered nurse at Graff who performs initial assessment of the youth. All youth visit the dentist if residing at Graff longer than 30 days. Youth self-administer their medication. Staff reported that most youth entering the facility are uninsured. In order for youth to obtain medical attention they must be taken to the acute care facility of the Washington County Hospital.

**UNABATED CONDITIONS**

1. DJS should enter all incidents into the Incident Reporting Database in a prompt manner.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
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**FACILITY REPORT**  
**GUIDE CATONSVILLE SHELTER FOR BOYS**  
**JANUARY - MARCH, 2009**

**Facility:** GUIDE Catonsville Structure Shelter for Boys  
5406 Valley Road  
Baltimore, Maryland 21218  
Administrator: Joan Morgan-Jones, Program Director

**Date(s) of Visit:** January 13 and February 12, 2009

**Reported by:** Tanya Suggs  
Monitor

**Persons Interviewed:** Supervisors, Direct care staff, and Youth

**Date of Report:** April 2009



## INTRODUCTION

Catonsville Shelter is operated by GUIDE Program Inc. The shelter is a non-secure residential program that is licensed by the Department of Juvenile Services. The modular residential unit is located on the grounds of Spring Grove State Hospital.

The shelter houses ten boys aged 12 to 18. The maximum length of stay is 90 days. The objective of the program is to provide temporary shelter, food, recreation and education to youth awaiting adjudication or placement.

## SUMMARY OF CRITICAL FINDINGS

- Assistant Teacher positions should be filled.
- Direct care staff must complete training in compliance with COMAR requirements.
- The Behavior Management System should be revised.
- The classroom walls should be fireproof.
- GED youth should be enrolled in local vocational/training programs.

## FINDINGS

### 1. Population

#### a. General

The home's capacity is 10. GUIDE is a 30-90 day program; however, at times youth stay less than 30 days.

According to the Shelter's Monthly Statistical Report, 44 youth were admitted by the end of February and 40 were released by the end of February. At the end of February, six youth remained in the home for over 30 days.

### 2. Staffing

#### a. General

GUIDE is fully staffed with the exception of the teacher's assistant. The teacher's assistant position became vacant in March. The home will begin interviewing for the position. Program administration continues to hire relief staff on a rotating basis.

**b. Staff Training**

COMAR regulations require that all staff complete their orientation training before working alone with youth. COMAR regulations also require that all staff complete an additional 40 hours of refresher training per year. GUIDE must promptly ensure that all staff have completed required training.

Last quarter, the Monitor reviewed four employee files and reported that employees had not received the required 40-hour initial and annual training, except for CPR and First Aid. Employees still have not been enrolled in the required training classes. A corrective action is pending. Uncertified staff continue to administer medications to youth.

**Applicable Standards**

**COMAR 14.31.06.05 (f) (1).** *Each employee who provides direct care to children shall receive a minimum of 40 hours of initial and annual training.*

**COMAR 14.31.06.15 (3) (d).** *Training shall be required before a program personnel individual may work with residents independently.*

**3. Safety and Security**

**a. Aggregate Incidents**

According to the DJS Incident Database, five incidents occurred during the first quarter. Five youths went AWOL. The number of incidents significantly declined from the last quarter when there were thirteen incidents including ten AWOL's, one suicide ideation/attempt, and two incidents involving contraband.

**b. Incident-Related Procedures, Practices, and Reporting**

On January 2 at 10:35 a.m., a youth voluntarily went to his room because he was feeling ill. According to the logbook, the youth was still in his room at 1 p.m. There was no indication as to whether a staff checked on the youth.

GUIDE's Safe Environment Plan does not include all COMAR requirements. The form should be revised to include COMAR SEP requirements.



### **Applicable Standard**

**COMAR 14.31.06.15.2 (a)(b)(c)(d)(e)(f)(g)(h)** *The safe environment plan shall include the physical space that the program shall provide to make the resident feel safe, comforted, and in control of the resident's behavior; the triggers and situations that increase stress or fear and may cause the resident to lose control of his or her behavior; the methods for calming or soothing that the resident prefers and has found to be successful; the resident's preferences regarding positive, nonphysical interventions, strategies, and supports if the resident's level of agitation increases; the medication that the resident may choose to take voluntarily, and that is appropriate clinically and agreed to and prescribed by the resident's treating physician; if the resident's level of agitation increases despite the use of the alternative interventions identified in the safe environment plan; any medical information that can affect the safety of a restrictive intervention, for example history of asthma, cardiac conditions, or other medical conditions; any trauma history that the resident has experienced; and any preferences or contraindications to the debriefing process.*

#### **c. Behavior Management Plan**

Youths earn incentives by accumulating points on a level system. The criteria by which youth earn and lose points appear to be subjective. No posted guidelines offer clear guidance on what actions prompt the earning or loss of points. Youth report they are verbally informed on the number of points they have earned or lost. Youths also report that they do not understand the system, and that they are confused about the criteria for earning and losing points.

### **Applicable Standard**

**COMAR 14.31.06.15.A (1) (a) (b) (c) (f)** *The licensee shall establish and follow written policies and procedures that are communicated the child, the child's parent, employees, and the placing agency; identify all approved forms of discipline; specify the approved procedures for the administration of each form of discipline; and periodically review the forms of discipline used for effectiveness and safety.*

#### **4. Physical Plant and Basic Services**

##### **a. Fire Safety**

Guide successfully completed the 2009 fire inspection; however, the plastic paneling of the classroom walls is flammable. The walls should be covered with fire-rated drywall or treated with a fire-retardant coating.

**b. Physical Plant**

The home is clean, organized, and tidy. The boys' rooms are well kept. No major physical plant concerns were noted this quarter. Emergency numbers are posted near the phone in the kitchen, with the exception of Child Protective Services, the licensing agency, and the poison control center. All emergency numbers should be posted near all of the phones in the home.

**c. Basic Services**

An annual health inspection was completed on October 23, 2008; no major findings were noted. The next inspection is due by October 23, 2009.

**5. Education**

**a. Type III School (School within or operated by the facility)**

**1. Special Education**

No special education files were reviewed this quarter.

**2. Educational Plan**

The Monitor reviewed two active files and one inactive file for compliance with requirements for a Student Progress Report and Personal Education Plan. The Personal Education Plan and Student Progress Report are forms that address each youth's learning style and detail the requirements for the youth to reach his educational goals.

One file contained all three required plans and reports. One file contained the two required plans/reports. The third file contained a Student Progress Report but no Personal Education Plan.

**b. General Educational Development Program (GED), College Courses**

GUIDE shelter should develop an appropriate vocational and community resource plan for youth who have completed their GED. GED youth are not enrolled in life skills training courses or vocational programming. GED students participate in class along with other youth during the day although they have already obtained their GED. They are not academically challenged, nor are they interested in completing the lower level work.



c. Vocational Programming

Under COMAR regulations, licensed residential programs are required to place youth in vocation and life skills training programs. Youth at Guide do not participate in vocational programs or life skills programs.

**Applicable Standards**

**COMAR 13.A.09.10.20.F .1** *Within 5 school days of entering a facility, a school shall develop a PEP for each student.*

**COMAR 14.31.06.17.2.G** *Within 30 days after admission, (licensees shall) develop for each child an individual service plan that identifies education, including special education and related services to implement the individualized education program of a student as required under the Individuals With Disabilities Education Act.*

**COMAR 14.31.06.12.D.4** *For a child who legally is not attending school, (the licensee) shall either provide for gainful employment or enroll the child in a training institute geared to the acquisition of suitable employment or necessary life skills.*

**COMAR 14.31.06.12.C (1-10)** *The licensee shall provide each child with life skills training appropriate to the age and capability of the child.*

6. Rehabilitative and Recreational Programming

a. Recreational Programming

Youth attend weekend outings occasionally. Youth are not linked to community programs as required by the group home's contract and COMAR.

**Applicable Standard**

**COMAR 14.31.06.12.B.1** *The licensee shall provide the children with a range of indoor and outdoor recreation and leisure activities both in the program and in the community.*

b. Rehabilitative Programming

The Treatment Service Plan - also referred to as the Individual Service Plan - is completed by administrators and clinical staff within 30 days of the youth's arrival at the home. It sets goals to address the needs of the youth. The Treatment Service Plan form used by GUIDE is informal and incomplete. It does not include all areas required by COMAR.

The Monitor reviewed three files, two active and one inactive, for compliance with Treatment Service Plan requirements. (See discussion in Education, above.) Two files included a Treatment Service Plan and one did not.

## **7. Medical**

### **a. Basic Medical Services**

GUIDE has an arrangement with a local physician who examines youth who have been in the home for 30 days. GUIDE staff consults with the physician's nurse by phone regarding other youth medical issues.

### **b. Other Issues**

On February 12, review of the medical log revealed that one youth had not received his medication that morning. The youth was not provided his medication until the only appropriately certified staff on duty returned from a community service trip.

GUIDE must insure that all staff complete the training requirements in the COMAR regulations.

## **8. Youth Advocacy, Internal Monitoring and Investigation**

### **a. Youth Advocacy**

The Monitor did not receive any grievances this quarter.

### **b. Youth Concerns**

Youth indicate that the home is comfortable and they eat well; however, they would like to participate in additional outings. The youth spend time watching television or playing video games.

## **RECOMMENDATIONS**

1. The home should hire an assistant teacher.
2. The home should revise their Treatment Service Plan form to adhere to the COMAR regulations.
3. Youth should be enrolled in vocational and life skills programming appropriate to their age and grade level.



4. GUIDE should seek out local community recreational opportunities for youth.
5. Medication must be administered to youth at the appropriate time.

### **UNABATED CONDITIONS**

1. Administrators must insure that all staff receive required training.
2. The Behavior Management Plan should reflect appropriate incentives for each level.
3. The Behavior Management Plan should be posted in clear view for youth and staff to review and discuss.
4. Classroom walls should be fireproof.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
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**FACILITY REPORT**  
**HADDON GROUP HOME FOR BOYS**  
**JANUARY - MARCH, 2009**

**Facility:** Haddon Group Home for Boys  
4802 Haddon Avenue  
Baltimore, MD 21207  
Administrator: Debbie Marini

**Date(s) of Visits:** January 5, February 10, 19, and 20, March 14, 2009

**Reported by:** Tanya Suggs  
Monitor

**Issues Monitored:**

- Population
- Staffing
- Safety/Security
- Physical Plant
- Education
- Medical
- Youth Advocacy

**Persons Interviewed:** Administrators, Direct Care Staff, and Youth

**Date of Report:** April 2009



## INTRODUCTION

Haddon Group Home for Boys is the former Colbourne Group Home. It was renamed after the street of its new location. Haddon Group Home is a non-secure group home that is located in West Baltimore City. The home houses a maximum of four DJS boys, ages 15-17; the Department of Human Resources no longer utilizes the home. The home is operated by The Maryland Mentor Network (MMN). The maximum length of stay is thirty days.

## SUMMARY OF CRITICAL FINDINGS

- The Staff and Administration fail to follow proper protocol for the reporting of incidents.
- The Administration has not applied for the 2009 annual fire alarm inspection.
- Staff are not providing lunch and snack to youth who attend the Phoenix Resource Center.
- Staff at the Phoenix Resource Center are not been following the Performance Educational Plan according to COMAR regulations.
- Youth do not receive physical examinations within the period that is required by COMAR regulations.
- Youth are admitted without complete medical exams.
- Medication is not administered properly.

## FINDINGS

### 1. Population

#### a. General

The home houses a maximum of four youth.

### 2. Staffing

#### a. General

A new Program Director was hired in January. The previous Program Director was demoted to the position of Group Home Manager and is a Certified Childcare Administrator. There is also one senior counselor in the home.

**b. Staff Training**

Since the hiring of the new program manager, staff have begun to receive required training. Certification is pending, in each area of training, for various employees.

**Applicable Standard**

**COMAR 14.31.06.05. F (1)** *The licensee shall ensure that each employee who provides direct care to children shall receive a minimum of 40 hours of initial and annual training.*

**3. Safety and Security**

**a. Aggregate Incidents**

The JJMU does not have access to Haddon records in the DJS Incident Reporting Database. This is an unabated issue since the 1<sup>st</sup> Quarter of 2008.

According to manually collected incident reports there were two incidents in the home this quarter.

Considering the number of youth currently housed in the home, the number of incidents significantly decreased. There were no critical incidents this quarter. There was one physical restraint.

There were no reports of neglect or child abuse this quarter.

**b. Special Report**

The Monitor's Office issued a Special Report based on conditions at Haddon this quarter. The incident instigating the report occurred when two youth allegedly sexually assaulted a third youth in the home. Staff did not report the incident to the Department of Juvenile Services as required by regulation, nor is there any evidence that staff reported to Child Protective Services (CPS) in a timely fashion as required by law.

When the incident was discovered, it appeared that staff falsified documents indicating that appropriate notifications had been made.

**c. Incident-Related Procedures, Practices, and Reporting**



Staff and Administration do not follow proper protocol for the reporting of incidents. Staff fail to document incidents in the logbook, fail to document incidents in a timely fashion, and do not adequately document pertinent information.

Two incident reports were completed by the Group Home Manager. One incident report is dated December 29 and the other is dated December 22; however, based on the fax cover letter, the reports were faxed to DJS on January 12 and January 14 – over three weeks after the incident. Staff on duty at the time of the incident should have immediately notified their supervisor and the DJS on-call administrator and filed a written incident report by 9 am the next morning. They took none of these actions.

According to the DJS investigative summary, the incident was reported to the OIG investigator on January 6, 2009 - over two weeks after the incident occurred. It appears that the only reason DJS became aware of the incident at that point was that a DJS Internal Monitor visited the home on January 6 and learned of the event.

According to the information that was provided to the JJMU Monitor by Baltimore City CPS, the incident was reported on January 12, 2009 - three weeks after the incident occurred.

Because the group home experienced numerous problems in 2008, ranging from fire safety violations to staffing problems, JJMU recommended that DJS take action as necessary to ensure the safety of youth in the home.

**d. Behavior Management Plan**

The home does not have a behavior management plan. A new Behavior Management Plan has been drafted and is pending.

**4. Physical Plant and Basic Services**

**a. Fire Safety**

The new home has not had an annual fire alarm inspection. Administrators should apply for The Haddon Group Home fire alarm inspection as soon as possible.

On January 5, an alarm system was installed for ground level windows.

All fire extinguishers in the home should be checked monthly and signed by staff.

**b. Physical Plant**

The home and furniture are in excellent condition. The interior and exterior of the home are very clean. The neighborhood is quiet and well kept. There is a brand new

washer and dryer located in the spacious kitchen area. The boys keep their rooms very clean and orderly.

CPS and DJS contact numbers should be added onto the emergency contact list.

**c. Basic Services**

A health environmental inspection was completed on October 10, 2008. No findings were noted.

**Applicable Standards**

**COMAR 14.31.06.08.A.2 (f)** *The licensee shall post adjacent to all telephones a list of emergency telephone numbers for the licensee's designee for emergencies.*

**COMAR 14.31.06.07 (A)(4).** *The licensee shall ensure compliance with the local fire and health requirements by submitting annually to the licensing agency, reports of all fire and health inspections conducted by the local jurisdiction.*

**5. Education**

**a. Type III School (School within or operated by the facility)**

**i. Educational Plan**

The youth from Haddon attend Phoenix Resource Center until they are placed in a public school.

Two education files (50%) were reviewed to ensure that Performance Educational Plans (PEP's) and Student Progress Reports (SPR's) are compliant with COMAR regulations. It is important that all areas on the PEP's and SPR's The files were well organized.

The PEP and SPR forms were missing information that is required by COMAR regulations. The PEP form did not include a space for the student's last name, student's educational plan, schedule of student's classes and teachers, and the transitional plan. The SPR did not include a space for the number of specific days of attendance, and the hours of instruction in each area.

**ii. Special Education**

One file of the two files reviewed contained an IEP. That IEP was incomplete and staff did not follow up to assure that the youth received an appropriate IEP in his public school placement.

**iii. Classes**



The Monitor visited the school on February 19. The teacher informed the Monitor that December 2008 was the last time the youths' used the computer room. Only two out of the four available computers worked.

The resource center did not have manipulatives such as educational videos, computer programs, educational games, or leisure time books. Only two of four computers were working. COMAR regulations require that a school possess instructional materials and equipment that include print, manipulative, audiovisual and electronic materials to address the needs of each youth's learning style, including special education youth.

b. General Educational Development Program (GED), College Courses,

No GED files reviewed this quarter.

**Applicable Standards**

**COMAR 13A.09.10.20.E.1 (a-f)** *Within 5 school days of a student's placement, a school shall acquire all of the following educational information from an official of the previous school placement for a student in order to determine an appropriate educational program: Student's previous grade placement; student's performance in each curricular area; student's high school credits earned to date, if applicable; student's IEP, if applicable; Maryland assessment results, if applicable; and student's days of attendance in the current school year.*

**COMAR 13.A.09.10.20.F .1** *Within 5 school days of entering a facility, a school shall develop a PEP for each student.*

**COMAR 13.A.09.10.20.G.1** *When a student leaves a school, a progress report that includes all of the following information shall be prepared ( See section for listed criteria).*

**COMAR 13A.09.10.20.H.1** *A school shall own instructional materials and equipment that include print, manipulative, audiovisual and electronic materials and equipment in sufficient variety, quantity, and quality to implement the educational program.*

**COMAR 14.31.06.12.A.1(b)** *If the child is a student with disabilities, cooperate with the team constituted under COMAR 13A.05.01 as appropriate to ensure that the child receives special education and related services as provided for in the child's individualized education program.*

6. Rehabilitative and Recreational Programming

a. Therapeutic Program

The Treatment Service Plan (TSP) form should be revised, as it does not include all areas required by COMAR. The TSP sets goals to address the needs of the youth and must be completed within 30 days of admission.

**b. Recreational Programming**

Youth attend weekend outings, but they are not linked to community programs. COMAR regulations requires that the youth in the home be engaged in community recreation programming.

**Applicable Standard**

**COMAR 14.31.06.12.B.1** *The licensee shall provide the children with a range of indoor and outdoor recreation and leisure activities both in the program and in the community.*

**7. Medical**

**a. Basic Medical Services**

Two medical files (50%) were reviewed for compliance with physical, dental, immunization, and medication administration requirements.

One file was missing information regarding dental and physical exams. One file indicated that the youth did not receive a medical and dental exam within thirty days. One youth was taken to dental after complaining of a damaged tooth, but he was not taken for a routine exam.

**b. Medication Administration**

File review indicated that staff consistently failed to administer the medication properly, either skipping doses or by skipping entire days.

**Applicable Standards**

**COMAR 14.31.06.13.G.1** *The licensee shall secure for each child a physical examination and a copy thereof within 30 days of admission or earlier if indicated by the child's health status.*

**COMAR 14.31.06.13.E.2** *The licensee shall unless a child has been examined and treated as necessary during the 12 months before the child's admission to the program, have each child examined by a dentist within 30 days after admission.*

**COMAR 14.31.06.13.C.2(a)(b)** *The licensee shall continue any current medications that the child is receiving at the time of admission to the program, and within 3 days of admission, consult with the licensee's medical care provider or the child's physician.*



8. Youth Advocacy, Internal Monitoring and Investigation

a. Youth Advocacy

No grievances were filed this quarter. Youth indicate that the home is comfortable.

RECOMMENDATIONS

1. The home should apply for a 2009 annual fire alarm inspection as soon as possible.
2. A list of emergency numbers should include the contact number of the licensing/placement agencies, and should be posted near all phones in the home.
3. Educational forms should be completed in its entirety and contain questions and subtitles based on COMAR requirements; staff should follow up to ensure that youth are receiving services bases on IEP recommendations; and a variety of operative manipulatives should be utilized on a consistent basis.
4. Youth should participate in community programming.
5. Dental, physical, and vision exams and immunizations must be up to date.
6. Medication must be properly dispensed.

UNABATED CONDITIONS

1. All employees should receive the required 40 hour initial and annual training prior to working with the youth.
2. Administrators should review files on an ongoing basis to ensure that trainings and documents are up to date.
3. The home has not developed a Behavior Management Plan.
4. The administration must assure that dental and eye exams are up to date.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**J. DEWEESE CARTER CHILDREN'S CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** J. DeWeese Carter Children's Center  
300 Scheeler Road  
Chestertown MD 21620  
Superintendent: Derrick Witherspoon

**Date(s) of Visit:** January 8 (Advisory Board), February 20, March 13, 2009  
February 9, March 20, 2009 (Nick Moroney)

**Reported by:** Claudia Wright  
Senior Monitor

**Persons Interviewed:** Superintendent, Assistant Superintendent, Custodial,  
Medical, Program and Maintenance staff, Youth, MSDE  
school personnel

**Date of Report:** April 2009



## INTRODUCTION

J. DeWeese Carter Youth Facility is a 15-bed detention center for boys. It is located in one wing of an adult residential psychiatric facility in Chestertown, Maryland. It is operated by the Maryland Department of Juvenile Services (DJS).

## SUMMARY OF CRITICAL FINDINGS

- Population was maintained below 15 throughout the quarter.
- There were no incidents of seclusion more than eight hours during the quarter.
- There was a significant increase in the use of restraints this quarter.
- The new school is open and operational.
- Structured rehabilitative programming has been improved.

## FINDINGS

### 1. Population

#### a. General

Facility Capacity	High Population	Low Population	Average Daily Population	Average Monthly Population	Number of Days Over Capacity
15	15	7	14	January 14 February 14 March 11	0

Although rated capacity for the Carter Center is listed as 27, the Department committed to maintaining the population at 15 (the number of single rooms in the facility) and has not violated that commitment for more than a year. This reduction of population contributed significantly to the steady improvement of conditions in the facility.

#### b. Detention and Pending Placement

	Number of Youth in Status 60+ Days	Number of Youth in Status 90+ Days	Average Length of Stay
Detention	0	0	20.60 days

<b>Pending Placement</b>	1 (70 days)	0	21.69 days
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c. Population Breakdown by Race/Ethnicity

	<b>1st Quarter, 2009</b>
<b>Total # of Youth Detained</b>	77
<b>White</b>	35
<b>African American</b>	42
<b>Latino</b>	0
<b>Other</b>	0

2. Staffing

J. DeWeese Carter Center was evaluated by the DJS Office of Quality Assurance and Accountability in September 2008. In that evaluation, Carter received a rating of Superior Performance in the area of staffing. Generally, the performance, quality and commitment of staff at Carter is very high.

However, during this quarter one staff person was dismissed from employment at Carter for misconduct outside the facility involving a DUI charge. In another incident in March, three staff persons were disciplined for improper conduct involving inappropriate verbal and physical conduct with youth. One youth was injured in that incident.

**Applicable Standard**

**Md. Dept. of Juvenile Services Standards of Conduct 2.10 Performance of Duties**  
*An employee of the Department shall be responsible for his or her own actions, as well as the proper performance of his or her duties. In carrying out the functions and objectives of the Department, and employee shall perform all duties in a manner that will maintain the highest standards of efficiency.*



### 3. Safety and Security

#### a. Aggregate Incidents

Incident Categories	1 <sup>st</sup> Quarter 2008	1st Quarter 2009
1. Youth on Youth Assault	4	8
2. Youth on Staff Assault	4	1
3. Group Disturbances (with bodily harm or property damage)	0	0
4. Group Disturbances (without bodily harm or property damage)	0	0
5. Restraints	7	16
6. Restraints with injuries	0	4
7. Seclusions more than 8 hours	0	0
8. Allegations of Child Abuse (DJS custody)	0	3
9. Escapes	1	0
10 Suicide Attempts or Gestures	0	2

#### b. Restraints

Incidents of restraint have increased significantly at Carter. This may be explained in part by the fact that seven of the 16 incidents involved one particularly difficult resident. The Department should consider whether that youth was inappropriately placed at Carter. It is also of concern that four of the restraints resulted in injury to youths.

#### c. Allegations of Child Abuse

The three allegations of child abuse filed this quarter concerned staff persons who engaged in ill-advised horseplay with several youths. One youth was injured. Five incident reports were eventually filed to document the events of the evening of March 4. The three child abuse allegations were not sustained. DJS Office of the Inspector General (OIG) sustained a finding of improper employee conduct, citing improper verbal and physical conduct with residents, and recommended disciplinary sanctions for two resident advisers and their supervisor.

#### d. Incident-Related Procedures, Practices, and Reporting

As indicated in the October 16, 2008 report of the Office of Quality Assurance and Accountability, the quality of written incident reports has improved.

e. **Security Equipment and Practices**

Carter now has fixed video cameras throughout the facility. The fence has been re-configured so that youth cannot stray into areas out of view of staff during outdoor recreation. The fence is reinforced with new climb-proof webbing. The maintenance man moved his tools and equipment to a new shed outside the fenced area. The administration has implemented a much more efficient method of monitoring keys.

f. **Seclusion**

Staff persons at Carter no longer rely on "Time Out" or seclusion to control residents.

g. **Behavior Management Plan**

There is a written behavior management plan at Carter. Residents can earn points toward various incentive items. Youth and staff understand and appropriately implement the Behavior Management Plan.

**Applicable Standards**

**Md. Dept. of Juvenile Services Policy and Procedure RF-02-07** *Employees of the Department of Juvenile Services (DJS)...shall establish and maintain a safe and orderly environment within each facility... Crisis Prevention Management techniques may be utilized only to: protect or prevent a youth from imminent injury to self and others or to prevent overt attempts at escape. In the event that a youth remains an imminent threat to self or others and the youth's behavior has escalated, restraints or seclusion may be used as a last resort. Employees may not use CPM techniques, including restraints or seclusion, as a means of punishment, sanction, infliction of pain or harm, demonstration of authority, or program maintenance.(enforcing compliance with directions).*

**Md. Dept. of Juvenile Services Policy and Procedure MGMT-03-07** *the Department of Juvenile Services (DJS) employees, and employees ... shall report and manage incidents involving a youth or program in a manner that provides for the public safety and the proper care, health, safety and humane treatment of DJS youth. Additionally, DJS employees ... shall notify law enforcement and the local Department of Social Services (DSS) of incidents as required by law.*

**Md. Dept. of Juvenile Services Policy and Procedure RF-01-07 (Revised)** *The Department of Juvenile Services (DJS) shall maintain a safe, secure area to isolate or seclude youth who present an imminent threat of physical harm to themselves or other individuals, have not responded to less restrictive methods of control or for whom less restrictive measures cannot reasonably be tried, or have escaped or are attempting to escape. The duration of seclusion shall be determined by the youth's level of risk, as indicated by his or her behavior and statements.*



**Md. Dept. of Juvenile Services Policy and Procedure RF-10-07** *The Department of Juvenile Services (DJS) shall utilize an incentive-based level system of behavioral management for detained youth which promotes the reinforcement of pro-social behaviors. The goal of the system is to emphasize pro-social interactions while consistently encouraging positive behaviors and modifying non-compliant, maladaptive behaviors. Employee training and methods of quality assurance will ensure the integrity and fair application of the behavior management program throughout DJS Detention Facilities.*

**4. Physical Plant and Basic Services**

**a. Fire Safety**

Carter complies with all applicable fire safety requirements.

**b. Physical Plant**

The condition of the physical plant improved with the reduction in population over the last year. The staff includes a full time maintenance man who tends to maintenance needs in a timely manner. All beds are suicide proof, and each youth has his own room. The exterior and the interior of the facility are clean and well kept.

**c. Basic Services**

The Food Service Manager from the Lower Eastern Shore Children's Center supervises food services at Carter. The presence of a qualified food services manager has improved the quality and quantity of food provided to youth. Headquarters nutrition personnel also monitor the food service provider. Extra healthy snacks are provided. Youth indicate that they are satisfied with the quality and the quantity of food.

Clothing appears to be adequate. Shoes are still a problem. Because the only outdoor play area is an asphalt court, shoes wear out quickly. Staff indicates that sometimes shoes wear out after only one or two basketball games. The administration continues to test various alternatives to address the shoe issues.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.2.1 Conformity with Codes** *All detention facilities shall conform to state fire safety requirements.*

**Md. Standards for Juvenile Detention Facilities 5.5.1 Food Service Management A** *full time staff member experienced in food service management shall supervise the food service operation within a detention facility.*

**Md. Standards for Juvenile Detention Facilities 5.6.5.1 Sufficient Inventory** *The stored inventory of clothing, bedding and linens shall exceed that required for the facility's maximum youth population. An inventory system shall be maintained to ensure the consistent availability of clothing, bedding, and linens to replace items that are lost, destroyed, or worn out.*

**Md. Dept. of Juvenile Services Policy and Procedure RF-04-07** *Department of Juvenile Services (DJS) facilities and programs shall be regularly inspected by Administrative Employees to ensure a safe, secure, clean and healthy environment for youth, employees and visitors. Inspections shall include all security devices, the state of sanitation, and maintenance in and around the facility as well as its property. Contact with employees and youth shall be part of the inspection process. Any deficits discovered shall be corrected in a timely manner.*

## **5. Education**

The Maryland State Department of Education (MSDE) provides education services at Carter. The new education building is now open. New furniture and equipment are in place. The building is clean, spacious and provides an ideal learning environment.

### **a. Records**

Review of 5 youth education files (33%) revealed that education records are requested and received in a timely manner. Youths at Carter enter school immediately upon arrival.

### **b. Special Education**

File review indicates that special education requirements are met consistently at Carter.

### **c. Educational Plan**

Each youth education file includes an individual education plan.

### **d. Classes**

Carter youth are in classes six hours per day. Observation reveals staff and youth engaged and on task. The new classrooms are very large and the population is small, so there is plenty of space to divide groups when necessary and to provide individualized attention. Teachers and students are using the new computers, overhead projector and other equipment appropriately.



e. General Educational Development Program (GED), College Courses

Very few students are able to participate in GED programs because of the short length of stay at Carter. Students who need GED programs are assisted on an individual basis.

f. Vocational Education

There are no vocational programs at Carter. Students would benefit from vocational or pre-vocational programs.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 4.1 Educational Services** *The Department shall ensure that educational services provided within the detention facility are consistent with state requirements and that they meet the individual needs of the youth.*

6. Rehabilitative and Recreational Programming

a. Structured Rehabilitative Programming

Staff and administration continue to provide a wide variety of programs to youth, including alcohol and drug abuse groups, focus groups and Town Hall meetings with the Superintendent. The Urban Leadership Institute conducts a weekly Life Skills program. The mental health and social work staff now provide ART (Aggression Replacement Therapy) 3 times per week. Renovation is continuing in the main building to adapt offices and recreation spaces to meet the needs of youth and staff.

b. Recreational Programming

Youth receive one hour of large muscle exercise per day. In addition to the outside recreation area, a former dining room has been converted into an exercise area with a climbing wall and various exercise equipment and games. However, outdoor space (the uncovered asphalt basketball court) is not adequate to meet the needs of the residents.

c. Parental Involvement

Parents are allowed to visit twice per week, and youth are allowed at least two phone calls per week.

**Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 4.5 Recreational activities** *A well-defined and structured recreation program shall be provided for each resident.*

## 7. Medical and Behavioral Health

### a. Basic Medical Services

The monitor reviewed five medical files (33%) at random. Youth who come to Carter receive prompt physical exams and screenings for mental health issues, substance abuse and suicide. The physician conducting the physical exam does the dental screening. Youth are not seen by a dentist unless referred by the physician or for emergencies.

### b. Medical Staff

The medical department is fully staffed. Medical services are provided on-call on the third shift and on some weekends. A physician is present one day per week and a psychiatrist is available one day per week for medication management. Dental services are provided in nearby Chestertown by appointment.

### c. Mental Health Services

There are two LCSW's, two case managers, and an addictions counselor who provide screening and counseling to youth.

#### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 4.3 health Care Services** *Health care services shall be in accordance with established Departmental policy and procedures.*

## 8. Youth Advocacy, Internal Monitoring and Investigation

### a. Youth Advocacy

Nine grievances were filed at Carter this quarter. The Youth advocate retrieves and processes grievances in a timely manner.

### b. Internal Monitoring

The DJS Office of Quality Assurance and Accountability issued its most recent report on October 16, 2008. The Program achieved Superior or Satisfactory Performance in 64% of the 44 standards evaluated.

### c. Incident and Child Abuse Reporting and Investigation



Child abuse allegations were reported and investigated in a timely manner. One investigation was conducted by DJS/OIG during the quarter. The report was timely and thorough.

### **Applicable Standards**

**Md. Department of Juvenile Services Policy and Procedure MGMT-01-07 Youth Grievance Policy** *The Department of Juvenile Services (DJS) shall permit youth and individuals on behalf of DJS youth to file a grievance for a circumstance or action related to behavior of other youth, behavior of employees, or conditions of confinement*

**Md. Standards for Juvenile Detention Facilities 5.4 Use of Force** *Youth shall be protected from acts of child abuse while in detention and incidents of suspected child abuse shall be reported by staff*

### **RECOMMENDATIONS**

1. The administration must ensure that all staff receive the required refresher training in the appropriate use of restraints.
2. Youth would benefit from vocational or pre-vocational programming.
3. Population should remain at no more than 15 youth.
4. Adequate outdoor recreation space and equipment should be provided.



MARLANA R. VALDEZ  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**KARMA ACADEMY OF KHI SERVICES, INC. (RANDALLSTOWN)**  
**JANUARY – MARCH, 2009**

**Facility:** Karma Academy  
4202 Holbrook Road  
Randallstown, MD 21133  
Program Director: Kay-Megan Washington

**Date(s) of Visit:** January 30, February 20, March 30, 2009

**Reported by:** Moira Lee  
Monitor

**Persons Interviewed:** Program Director, Residential Care Staff, and Youth

**Date of Report:** April 2009



## INTRODUCTION

The Karma Academy (“Karma”) is an 8-bed unlocked, staff-secure, privately managed residential program for boys. Karma is licensed by the Department of Juvenile Services (“DJS”) and operated by KHI Services, Inc. The program serves chronic low-level offenders with a focus on youth who need sex offender treatment and services. On average, the program takes between 6 – 9 months to successfully complete.

## SUMMARY OF CRITICAL FINDINGS

- Karma Director and therapists completed a sex offender youth certification training course.
- The program still has not adopted a nationally-recognized or evidence-based treatment model.

## FINDINGS

### 1. Population

The residents at Karma range in age from 14 -18 years old. As of the last day of the quarter, there were 6 residents. The average length of stay for youth was 408 days upon release, and the population at Karma was between 6 and 8 over the course of the quarter.

### 2. Staffing

Dr. Washington, the Program Director, has a Bachelor’s degree in Psychology, a Masters degree in clinical psychology and a Doctor of Psychology. She received her Residential Care Administrator’s Certificate in December 2008.

Karma employs two therapists and maintains 2 counselors’ 24-hours a day. All residential care staff have a minimum of a BA or the equivalent in years of experience working with youth. Therapists have a minimum of a Masters degree and are licensed professional counselors.

Direct care staff have not participated in any training for the treatment of sex offenders. The Director and the therapists recently completed a sex offender treatment certification program offered by a private vendor. Staff reported the program was helpful and worthwhile.

### 3. Safety and Security

There were a total of 11 incidents during the quarter. This is an increase from the 6 reported in the 3<sup>rd</sup> quarter. Karma staff having access to the DJS Incident Reporting Database has improved the timeliness of incident reporting.

#### a. Restraints and Seclusion

While all staff are trained in the use of restraints, administrators reported that restraints are not used.

#### b. Behavior Management Plan

There is a written behavior management plan at Karma. Karma does not use a point-based behavioral management system. Natural consequences of the youth's actions are incorporated to the system.

### 4. Physical Plant and Basic Services

The building is in need of dry wall repairs. Fire alarms are tested 2 times per week, with fire drills occurring at least once a month. The last reported fire inspection took place in December 2008. Karma passed the inspection.

#### Applicable Standard

**COMAR 14.31.06.07.D.4(a)(c)** *The licensee shall ensure that each building that houses children has walls that are regularly cleaned or painted; and kept free of perforations, cracks, or punctures.*

### 5. Education

Youth attend high school at New Town High School in Owings Mills or the Bridge Center in Arbutus, Maryland. The Bridge Center is an interim placement for students transferring into Baltimore County Public Schools from another jurisdiction while enrollment in their zone school is being facilitated. Karma residents do not attend the school as a permanent placement. Residents requiring Level V school placement attend the Florence Bertell Academy in Woodlawn.<sup>1</sup>

On a recent visit two youth were at the Karma house watching television during the day. The youth reported they had been waiting to interview at the Bridge Center for a week and a half. Staff report that youth typically start school immediately following the

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<sup>1</sup> Florence Bertell Academy provides academic, therapeutic, and behavioral services to youth with learning disabilities and/or emotional disabilities.



interview.

## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

Karma staff describe the model as a combination of Pathways, Positive Peer Culture (PPC), EQUIP and Aggression Replacement Therapy (ART). PPC/EQUIP and ART were not developed for sex-offending youth, and while ART, a 5-6 week training module, has been proven to be effective in working with at risk youth, PPC/EQUIP is not evidence-based.

Pathways is a workbook last updated by the author in 2001 and does not constitute a full treatment model nor have youth outcomes been scientifically evaluated for treatment programs using the Pathways workbook.<sup>2</sup> Finally, there is no empirical evidence showing that the conglomeration of these three models effectively rehabilitates youth.

Family Therapy, Individual Therapy, Group Therapy and Wilderness Challenge Therapy are also used in the program. Group therapy is held five days per week. Some examples of group therapy topics are: independent life skills; social skills/problem solving; and sex offender group. Youth receive individual therapy a minimum of one time per week, and often more frequently. In addition, PPC group meets three times per week and multifamily group therapy takes place one time per week.

### **b. Recreational Programming**

Youth receive one hour of large muscle activity a day. Youth are not allowed to participate in school sports.

## **7. Medical**

Medical and Dental Services are provided at the Chase-Brexton Medical Services facility in Randallstown, Maryland. The facility attempts to have youth physicals completed within their first 30 days and emergencies are normally transported to Northwest Regional Hospital.

## **8. Youth Advocacy, Internal Monitoring and Investigation**

The youth advocate visits Karma one time per week.

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<sup>2</sup> Kahn, Timothy J., Pathways: A Guided Workbook for Youth Beginning Treatment (3<sup>rd</sup> Edition - Nov 2001)

## RECOMMENDATIONS

1. Karma should create an activities schedule for youth waiting to start school.

## UNABATED CONDITIONS

1. DJS should promulgate standards for treatment of sex offenders based on the recommendations of the 2005 Sex Offender Task Force Report. Formal standards would be preferable to attempting to use the contracting process to enforce practice standards.
2. DJS should establish a position for Director of Treatment Services for Sex Offending Youth.
3. Karma should implement an evidence-based or nationally recognized treatment model to use with sex offending youth or show evidence that the conglomeration of other models effectively rehabilitates youth.
4. DJS should offer additional trainings for private providers treating sex offenders.
5. Youth should be allowed to participate in school sponsored sports and activities.





MARLANA R. VALDEZ  
Director

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**KARMA ACADEMY OF KHI SERVICES, INC. (ROCKVILLE)**  
**JANUARY – MARCH, 2009**

**Facility:** Karma Academy  
175 Watts Branch Parkway  
Rockville, MD 20850  
Program Director: Janet Scruggs

**Date(s) of Visit:** January 14, February 3, March 5, 2009

**Reported by:** Moira Lee  
Monitor

**Persons Interviewed:** Program Director, Residential Care Staff, Teacher, and Youth

**Date of Report:** April 2009

## INTRODUCTION

Karma Academy for Boys ("Karma") is a 13-bed residential treatment facility for boys located in Rockville, Maryland. It has been operated by KHI Services, Inc. since 1972. Karma is licensed by the Department of Juvenile Services ("DJS"). The building is owned by Montgomery County.

Youth are referred to Karma by DJS and the Department of Social Services. All youth are interviewed prior to being accepted to the program. On average, it takes youth between 9 and 12 months to successfully complete their treatment program at Karma.

## SUMMARY OF CRITICAL FINDINGS

- Karma Director and therapists completed a sex offender youth certification training course.
- The program still has not adopted a nationally-recognized or evidence-based treatment model.
- Incidents decreased significantly.

## FINDINGS

### 1. Population

The residents at Karma range in age from 14 -18 years old. As of the last day of the quarter, there were 11 residents. The average length of stay for youth was 212.9 days upon release and the population at Karma was around 11 over the course of the quarter.

Youth who are closer to achieving their individualized treatment goals are considered leaders for new residents. Youth in leadership roles sleep in rooms with newer residents and aid in orientating them to Karma. Administrators reported this sleeping arrangement helps reduce conflict among youth at Karma.

### 2. Staffing

#### a. General

Janet Scruggs, the Program Director, has been working at Karma in this capacity since Summer, 2007. Ms. Scruggs has a Masters in Education; she is a Licensed Professional Counselor in DC, working toward her Maryland license, and is a national board-certified Cognitive Behavioral Therapist. Ms. Scruggs has her Residential Child Care Administrator Certification. Karma also employs 2 therapists and maintains 3



counselors during the afternoon and weekend mornings. All residential staff have a minimum of a BA or the equivalent in years of experience working with youth.

**b. Staff Training**

Staff attend all trainings offered by DJS.

Direct care staff at Karma have not participated in any training for the treatment of sex offending youths. The Director and the therapists recently completed a sex offender treatment certification program offered by a private vendor.

In the summer of 2008, DJS Headquarters staff described a robust sex offender training, mentoring, and networking program that the Department currently operates. DJS staff said that Karma employees are eligible to participate in the trainings, but Karma staff said that none have been offered by the Department. In the fall of 2008, the Monitor's Office asked the Department for additional details on its juvenile sex offender training program and whether it is open to private providers, but at the time of this report, no response had been received. Karma staff continue to say that the Department has made no sex offender training courses available to them.

**3. Safety and Security**

There were a total of 12 incidents during the quarter. One youth was involved in all 12 incidents. From a review of the DJS Reporting Database it appears that one incident was entered multiple times. This is a decrease from the 18 reported in the 3<sup>rd</sup> quarter. Administrators attribute the decrease to the change in its population.

Staff having access to the DJS Incident Reporting Database has improved the timeliness of incident reporting.

**a. Restraints and Seclusion**

While all staff are trained in the use of restraints, administrators reported that restraints are not used. Staff have been instructed to call the Montgomery County Police Department if they are unable to verbally deescalate a situation and a serious disturbance seems imminent.

**4. Physical Plant and Basic Services**

**a. Fire Safety**

A fire inspection took place on July 30, 2008. Karma passed the inspection.

**b. Physical Plant**

The building is owned by Montgomery County. The interior building at Karma needs to be painted. Several holes in walls have been patched up but not repainted. The large piece of the ceiling drywall in the classroom/office has been replaced.

The exterior of the building is well maintained. The shed on the side of the building has been removed.

**Applicable Standard**

**COMAR 14.31.06.07.D.4(a)(c)** *The licensee shall ensure that each building that houses children has walls that are regularly cleaned or painted; and kept free of perforations, cracks, or punctures.*

**5. Education**

The school is operated by Montgomery County Public Schools, which is located in the building. The head administrator of the school also teaches. In addition to the head administrator there are 3 other teachers. The goal of the education program is to get youth on a path to graduate from high school. The school will be moved from Karma in the fall. Youth will begin attending Mark Twain High School, an alternative program in the community. The teachers currently teaching at Karma will continue teaching youth in the community. The freed-up school space will allow Karma to create an extra bedroom, eliminating the need to have bunk beds. In addition, it will be easier to make larger more time-consuming repairs since classes will no longer be held in the common areas of the house.

**a. Records**

Staff report that most school records are received in a timely fashion, with the exception of records requested from Baltimore City.

**b. Educational Plan**

A file review conducted this quarter showed that IEP's are up-to-date.

**c. Classes**

Youth participate in class within 24 hours of admission. Youth were observed in a Math and English class. All youth participated. At the end of January a technology class was created. Staff report youth are enjoying the class.



## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

Karma describes its program model as a Blended Strengths-Based Model (The Real Life Model). This is not a nationally recognized or evidence-based treatment model for sex offending youth.

Karma staff describe the model as a combination of Pathways, Positive Peer Culture (PPC), EQUIP and Aggression Replacement Therapy (ART). PPC/EQUIP and ART were not developed for sex-offending youth, and while ART, a 5-6 week training module, has been proven to be effective in working with at risk youth, PPC/EQUIP is not evidence-based.

Pathways is a workbook last updated by the author in 2001 and does not constitute a full treatment model nor have youth outcomes been scientifically evaluated for treatment programs using the Pathways workbook.<sup>1</sup> Finally, there is no empirical evidence showing that the conglomeration of these three models effectively rehabilitates youth.

Karma does not use a point-based behavioral management system. Natural consequences of the youth's actions are incorporated to the system. The program has been implemented, in part, through Positive Peer Culture groups, which are held 3 times per week and group meetings (including a sex offending youth group, anger management group, and a multi-family group), which are held 5 days per week.

Youth also have individual therapy sessions once a week. If a youth is having behavioral challenges, the youth, a therapist and the Program Director meet to determine whether the youth will lose a privilege (e.g., not going on an outing with the rest of the group).

### **b. Recreational Programming**

Youth participate in a number of structured recreational and leisure programs. Youth would benefit from a wider variety of athletic activities - only basketball is available at the facility. This quarter youth participated in a basketball tournament with another local alternative school. There is a posted schedule of activities.

## **7. Medical and Behavioral Health**

Youth at Karma self-administer their medication and are taken to their primary care physician for medical treatment. When a youth is in need of serious medical attention

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<sup>1</sup> Kahn, Timothy J., [Pathways: A Guided Workbook for Youth Beginning Treatment](#) (3<sup>rd</sup> Edition - Nov 2001)

he is taken to Shady Grove Adventist Hospital.

## 8. Youth Advocacy

Administrators reported that the child advocate visits Karma a minimum of two times per month. The grievance procedure is outlined for youth in their orientation packet. There were no grievances filed this quarter. Staff reported youth have been calling regular house meetings to deal with issues.

### UNABATED CONDITIONS

1. DJS should promulgate standards for treatment of sex offending youth based on the recommendations of the 2005 Sex Offender Task Force Report. Formal standards would be preferable to attempting to use the contracting process to enforce practice standards.
2. DJS should establish a position for Director of Treatment Services for Sex Offending Youth.
3. Karma should implement an evidence-based or nationally recognized treatment model to use with sex offending youth or show evidence that the conglomeration of other models effectively rehabilitates youth.
4. DJS should offer additional trainings for private providers treating sex offending youth.
5. Direct care staff should participate in a sex offender training program.
6. Karma should paint the first floor of the building.
7. Alternative alarm systems should be considered for the windows.
8. Staff should receive additional training to deal with potential AWOL situations.





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**KENT YOUTH BOYS GROUP HOME**  
**JANUARY – MARCH, 2009**

**Facility:** Kent Youth Boys Group Home  
7582 Quaker Neck Road  
Chestertown MD 21620  
Acting Program Administrator: Jillyn Coleman

**Date(s) of Visit:** January 8, February 25, March 4, 2009 (Board of Directors meeting); March 20 2009 (Nick Moroney)

**Reported by:** Claudia Wright  
Senior Monitor

**Persons Interviewed:** Administrators, Staff, Board Members

**Date of Report:** April 2009

## INTRODUCTION

Kent Youth Boys Group Home (Kent Boys) is located in Chestertown, on the Eastern Shore of Maryland. It is operated by Kent Youth, Inc., and provides a comfortable, home-like environment for 10 adjudicated boys aged 14 to 18. The home was founded in 1971 as a local alternative to institutional placement or placement out of state for Eastern Shore youth.

## SUMMARY OF CRITICAL FINDINGS

- After several difficult months, the program is proceeding under new leadership.

## FINDINGS

### 1. Population

#### a. General

Although the capacity of Kent Boys is 10, only 6 boys participated in the program during the first quarter. An allegation of child abuse occurred during the last quarter of 2008, and a moratorium on placements at Kent Boys was in effect from October 2008 until March 17, 2009. At the end of the quarter, there were still 6 boys in the program.

### 2. Staffing

#### a. General

During the last quarter of 2008, the Residential Case Manager at Kent Boys resigned. In February 2009, the Director resigned. Jillyn Coleman was appointed as Acting Director of Kent Youth, Inc. on February 23, 2009.

#### b. Staff Credentials

Acting Director Coleman is a certified Child Care Program Administrator.

### Applicable Standards

**COMAR 14.31.06.06.3** *The program administrator shall be certified as required by Health occupations Article, Title 20, and Annotated Code of Maryland.*

**COMAR 14.31.06.06.4** *If a program administrator leaves or is removed from a position as program administrator by death or for any other unexpected cause, the board of*



*directors shall immediately designate a certified program administrator to serve in that capacity.*

### **3. Safety and Security**

#### **a. Aggregate Incidents**

Six incident reports were filed during the first quarter. Two of these involved youth misbehavior at school, two were non-incident related injuries, and one reported a shortage of hot water and one referred to an allegation of child abuse off grounds. The allegation of child abuse is under investigation.

During the last quarter of 2008, a youth alleged that he had sexual relations with a program staff person on several different occasions. Both DJS and CPS investigations sustained the allegations. The staff person resigned, and subsequently was charged in state court with custodial child abuse. She is now facing trial on those charges. The youth involved was transferred to another DJS facility. While the case was under investigation, the Department imposed a moratorium on placements at Kent Boys Group Home. The Director of Kent Youth, Inc. resigned on February 23, 2009. The moratorium on placements was lifted on March 17, 2009.

#### **b. Incident-Related Procedures, Practices, and Reporting**

The program has recently revised the program handbook, the personnel policy guide for employees, and the Safe Environment Plan. The program has also designed a Client and Personnel Safety and Security Policy, which requires dual staff coverage at all times. Additionally, camcorders and panic buttons have been installed. All staff have been re-trained in the new safety policies.

#### **c. Behavior Management Plan**

Kent Youth has a written Behavior Intervention program called the Passage System. Youth are aware of the expectations and consequences for misbehavior outlined in the system. The program is detailed in the Program handbook that is provided to youth at Orientation.

#### **Applicable Standard**

**COMAR 14.31.06.15.A (1) (a) (b) (c) (f)** *The licensee shall establish and follow written policies and procedures that are communicated to the child, the child's parent, employees and the placing agency; identify all approved forms of discipline; specify the approved procedures for the administration of each form of discipline; and periodically review the forms of discipline used for effectiveness and safety.*

#### 4. Physical Plant and Basic Services

##### a. Fire Safety

The program complies with state and local fire regulations. Documentation of compliance is on display in the facility.

##### b. Physical Plant

Youths live in a beautifully renovated former parsonage, the Pat Biddle House. Offices and administrative areas are attached to the original home. The furniture and fittings are modern and comfortable, and the environment encourages a family like atmosphere. The program is in compliance with federal, state and local building and health codes. The home is clean and well maintained.

##### c. Basic Services

Youths receive adequate food, clothing and shelter. They have access to personal hygiene items, bathing and toilet facilities, clean linens and laundry facilities. These items are never removed or reduced for disciplinary reasons.

#### Applicable Standards

**COMAR 14.31.06.07 (A)(4)** *The licensee shall ensure compliance with the local fire and health requirements by submitting annually to the licensing agency, reports of all fire and health inspections conducted by the local jurisdiction.*

**COMAR 14.31.06.07.C.1** *The licensee shall maintain all structures and grounds in good condition, free from health or safety hazards.*

#### 5. Education

Residents at Kent Youth attend local public schools. Computer equipment is available to residents for research and homework. Time is set aside for supervised study.

#### Applicable Standard

**COMAR 14.31.06.12.2(C)** *The placing agency and licensee shall work cooperatively with the local school system to participate as appropriate in the child's educational activities.*



## 6. Rehabilitative and Recreational Programming

### a. Therapeutic Program

Kent Youth residents participate in the Passage program that includes a level system. Youngsters work their way up to higher levels with good behavior and participation in the program. Youth may be released 30 days after reaching the highest level. Each higher level increases privileges such as phone calls. Youths also receive individual and group counseling with an LCSW counselor, and have twice-weekly drug and alcohol education programs. Numerous life skills programs and activities, including cooking and cleaning, occur throughout the week.

### b. Recreational Programming

There is a weekly schedule of activities posted in the facility. Residents visit the local library, parks, malls and movie theaters. They attend local sports events and sometimes travel to museums, the aquarium and other outings. There is also a recreation room in the basement of the Biddle House where youths can watch TV and DVDs, read, and play games. There is a gym/workout room in an adjacent building, and youngsters can play basketball and other sports. Youth often do volunteer work in the community.

### c. Parental Involvement

Parents visit on Sunday afternoons. Phone calls are allowed in the evening, according to the level system. Parents are included in the preparation of Individual Service Plans and discharge plans. Parents participate in the orientation process. Through the Passage system, youths earn weekend home passes.

#### **Applicable Standards**

**COMAR 14.31.06.17.2.F** *Within 30 days after admission, develop for each child an individual service plan that identifies documentation indicating that the child, child's advocates, guardian, and family, when appropriate, have been involved in, informed of, and agree with the plan.*

**COMAR 14.31.06.12.B.1** *The licensee shall provide the children with a range of indoor and outdoor recreation and leisure activities both in the program and in the community.*

**COMAR 14.31.06.12.C.1** *The licensee shall have a written plan of normal daily routines which shall be made available to the children and employees.*

## 7. Medical

The residents at Kent Youth see a local family doctor for routine medical needs. The doctor is available as needed. The facility received a rating of Full Compliance in medication administration from the DJS Office of Quality Assurance and Accountability.

### **Applicable Standards**

**COMAR 14.31.06.17.8(a)** *The licensee shall examine each child upon admission.*

**COMAR 14.31.06.13.G.1** *The licensee shall secure for each child a physical examination and a copy thereof within 30 days of admission or earlier if indicated by the child's health status.*

**COMAR 14.31.06.13.H.1** *The licensee shall have and follow written policies and procedures for emergency medical, dental, or mental health needs requiring emergency hospital treatment, including communication of the need for immediate assistance.*

## 8. Youth Advocacy, Internal Monitoring and Investigation

### a. Youth Advocacy

The DJS Youth Advocate visits Kent Youth regularly and responds promptly to any grievances. Four grievances were filed this quarter.

The Youth Advocate discovered the alleged child abuse, which occurred during the last quarter of 2008, through the grievance process. She responded to the allegation in a thoroughly professional manner.

### b. Internal Monitoring

The DJS Office of Quality Assurance and Accountability evaluated Kent Youth in October 2008. Non-compliance was found in 31.6 % of the standards. Corrective action plans were submitted, and deficiencies were reported to have been implemented by November 2008.

### **Applicable Standard**

**COMAR 14.31.06.09.E.2 (a)(b)(c)** *The licensee shall provide the child and the child's parents, as appropriate, a description of how to file a grievance, including any formal grievance forms or other requirements for the format and content of the complaint.*



## RECOMMENDATIONS

1. The Kent Youth, Inc. Board of Directors should continue to monitor operations at the facility to ensure that all corrective action plans are implemented.
2. Kent Youth Boys Group Home is licensed to accommodate 10 youth – it should be fully utilized.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**LIBERTY HOUSE**  
**JANUARY - MARCH, 2009**

**Facility:** Liberty House  
5005 Liberty Road  
Baltimore, MD 21207  
Administrator: Monyette Robinson

**Date(s) of Visits:** February 17 and March 15, 2009

**Reported by:** Tanya Suggs  
Monitor

**Persons Interviewed:** Director, Direct Care Staff, and Youth

**Date of Report:** April 2009



## INTRODUCTION

Liberty House is a therapeutic group home operated by Youth Enterprise Services (YES) and licensed by the Department of Juvenile Services (DJS). It houses a maximum of ten at-risk male youth between the ages of 10 and 16.

## SUMMARY OF CRITICAL FINDINGS

- No DJS youth have been accepted into the program since January 2008.
- The Group Home Supervisor is not a certified Child Care Administrator.
- The home was issued an annual Fire Safety Inspection permit despite the fact that not all 2008 deficiencies were corrected.
- Youth have not received services as required in Individual Service Plans.
- GED youth are not enrolled in life skills or vocational education training.

## FINDINGS

### 1. Population

#### a. General

The home has not accepted DJS youth since January 2008.

The Group Home Supervisor expressed concerns with DJS and Department of Social Service youth co-mingling. Since Liberty is a DJS licensed home, it makes sense for the home to serve DJS youth. If Liberty is not planning to serve DJS youth, DHR should become the licensing agency. It is difficult for an agency to provide oversight and quality control when it has no children placed in the facility and little reason for regular interaction with the licensee via community case managers, social workers, child advocates, etc.

### 2. Staffing

#### a. General

The home is fully staffed.

#### b. Staff Credentials

Maryland law requires that administrators of residential facilities for children be certified by the State Board of Certification of Residential Child Care Administrators. The purpose of the board's certification requirement is to protect children by setting standards for the practice of residential childcare administration and to promote quality.

The Program Director is the only supervisor in the home. She is not certified.

### 3. Safety and Security

#### a. Aggregate Incidents

Incidents in the home are not reflected in the DJS Incident Database since there are no DJS youth in the home.

#### b. Incident-Related Procedures, Practices, and Reporting

A resident ran away on Friday, February 13 and returned on Monday, February 16. The incident was not recorded in the logbook, nor was there a record that the police were notified. The Department of Human Resources (the placing agency) was notified on Tuesday, February 17. The placing agency should have been notified within 24 hours, or by the Monday following the AWOL.

#### **Applicable Standard**

**COMAR 14.31.06.16.B (1) (2) AWOL.** *If the child has not returned to the program within 2 hours, the licensee shall notify the local law enforcement authority and the placing agency.*

#### c. Security Equipment and Practices

A number of minor incidents were not documented in the logbook.

### 4. Physical Plant and Basic Services

#### a. Fire Safety

On November 17, 2008, the Baltimore City Fire Marshal conducted a safety inspection. The report listed several violations that required correction; yet, a permit was issued on December 10, 2008 without correction of the violations. On March 14, 2009, the Monitor observed that there were no smoke detectors in two bedrooms on the third floor level.

In April, at the Monitor's request, the State Fire Marshal visited the facility, cited several violations, and gave the program seven days to take corrective action.

The last fire alarm inspection was conducted on November 12, 2008. The alarm system is in good standing.



**b. Physical Plant**

The physical plant is in need of minor repairs. The home is generally clean and tidy. There are large holes and cracks in the walls throughout the third level floor of the house. The sink in the basement is loose and standing on one leg and the sink on the third floor is detaching from the wall.

**c. Basic Services**

The next annual food health inspection is due by July 30, 2009. The facility passed the last inspection. The home should also apply for an annual Environmental Inspection to ensure that youth are not exposed to radon, tainted water, lead dust, and mold and mildew.

**Applicable Standards**

**Maryland Department of Juvenile Services Policy and Procedure RF-05-06** *Written policy, procedure, and practice require that the private sector operator of a program maintain the safety and security of youth, employees and visitors by ensuring that accurate youth information and other pertinent information is recorded through the documenting of events in a logbook. Information on daily activities and noteworthy events are recorded in logbooks. All logbooks are maintained in a confidential manner and not shared with youth or other unauthorized persons.*

**COMAR 14.31.06.07.D.4(a)(c)** *The licensee shall ensure that each building that houses children has walls that are regularly cleaned or painted; and kept free of perforations, cracks, or punctures.*

**COMAR 14.31.06.07 (A) (4).** *The licensee shall ensure compliance with the local fire and health requirements by submitting annually to the licensing agency, reports of all fire and health inspections conducted by the local jurisdiction.*

**COMAR 14.31.06.07.5** *Maintain evidence that the physical plant had been tested for and found to be free of hazards from lead paint, asbestos, and radon.*

**5. Education**

**a. General Educational Development Program (GED), College Courses**

During the quarter, the Monitor observed youth at home during the school day. Two youth were in the GED program but said they had not attended for two weeks. A third youth said he usually stays home from school and visits the shopping mall. Interviews of residents and file review indicate that youth who are engaged in GED preparation do not also have access to vocational training.

**b. Vocational Education**

Licensed residential programs are required to place youth in vocational and life skills training programs. Residents at Liberty are not involved in vocational programs, life skills or job readiness courses. Some education files also contained Individualized Service Plans (ISP) that require vocational training, job preparation training, and/or life skills training. There is no documentation that youth received any of the required services. A youth also confirmed that he had not received any of the services required in his ISP.

**Applicable Standards**

**COMAR 14.31.06.12.C** *The licensee shall provide each child with life skills training appropriate to the age and capability of the child.*

**COMAR 14.31.06.12.2(C)** *The placing agency and licensee shall work cooperatively with the local school system to participate as appropriate in the child's educational activities.*

**6. Rehabilitative and Recreational Programming**

**a. Therapeutic Program**

Residents receive individual and group counseling at community agencies. Two of seven active, youth Individual Service Plans were selected for review this quarter. One required that the youth receive vocational training, job search assistance, and group and individual therapy. He has not received any of these services. The second Plan called for the youth to receive individual counseling, yet it did not reflect that any counseling had been provided.

**7. Medical**

File review indicates that youth are not receiving physicals within the first thirty days after admission to the home.

**Applicable Standard**

**COMAR 14.31.06.13.G.1** *The licensee shall secure for each child a physical examination and a copy thereof within 30 days of admission or earlier if indicated by the child's health status.*



### RECOMMENDATIONS

1. Placing agencies should be informed of incidents within 24 hours of an incident.
2. Necessary repairs should be completed as soon as possible.
3. Administration should implement community vocational and life skills programs and ensure that GED students attend classes.
4. The program must ensure that youth are receiving services as stated in the youth's Individual Service Plan.
5. Physical exams must be completed within 30 days of admission.

### UNABATED CONDITIONS

1. DJS youth have not been accepted into the home since January 2008.
2. The administrator should apply for and obtain childcare certification immediately.
3. Youth are not engaged in vocational educational activities while they are in GED programs.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**LOWER EASTERN SHORE CHILDREN'S CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** Lower Eastern Shore Children's Center  
405 Naylor Mill Road  
Salisbury, MD 21801  
Superintendent: Derrick Witherspoon

**Dates of Visits:** January 29, February 5 and 12, March 6 and 20 (Offsite Interview), 2009

**Reported by:** Nick Moroney  
Monitor

**Persons Interviewed:** Superintendent, Supervisors, Case Managers, Mental Health Staff, Nursing Staff, Teaching Staff, Direct Care Staff, Dietary Staff, Custodial Staff, Youth

**Date of Report:** April 2009



## INTRODUCTION

The Lower Eastern Shore Children’s Center (LESCC) in Salisbury is a 24-bed maximum-security detention facility owned and operated by the Maryland Department of Juvenile Services (DJS). The facility opened in 2003 and is designed to house male and female youth awaiting adjudication or placement. Youth are separated into three housing pods according to gender and security considerations. Pod A houses a maximum of 6 girls; Pod B accommodates 6 boys; and Pod C houses 12 boys. Most youth at the facility are from the Eastern Shore.

## SUMMARY OF CRITICAL FINDINGS

- Operations at LESCC are running smoothly.

## FINDINGS

### 1. Population

#### a. General

Facility Capacity	High Population	Low Population	Average Daily Population	Average Monthly Population	Number of Days Over Capacity
24	29	20	25	January 26 February 24 March 26	63

Population has been up to or slightly over capacity during the quarter. All youth generally had their own room however, rooms designated as seclusion rooms were used as regular sleeping quarters during population spikes.

The majority of the 132 youth who were placed at LESCC during the first quarter came from Eastern Shore counties served by the detention center. There were also nine youth from Baltimore City; two each from Prince George’s County, Charles County and Montgomery County; one youth each from Howard County, Baltimore County, Anne Arundel County and Frederick County; and five youth with residency listed as “out of state.”

During the quarter, girls placed at Waxter were housed at LESCC because the bathrooms at Waxter were under renovation. Those renovations are complete. Population at LESCC is expected to return to normal.

**b. Detention and Pending Placement**

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>
<b>Detention</b>	1 (66 days)	0
<b>Pending Placement</b>	1 (70 days)	2 (87, 85 days)

**Monitor's Observations**

A 12-year-old youth awaiting placement at a treatment facility spent from January 6 to April 3 at LESCC. Initially, the youth was court ordered into the infirmary at Cheltenham Youth Facility (CYF), a DJS detention facility in Prince George's County. He arrived at CYF on November 7, 2008 and was sent to the Alfred D. Noyes Children's Center (Noyes) in Rockville, on December 15, 2008. The youth ended up at LESCC on January 6, 2009.

The youth was sent to LESCC from Noyes before a Certificate of Need (CON) was completed and consequently, a treatment placement bed at the Jefferson School was lost and the youth's acceptance into placement significantly delayed.

The CON process (formal certification of therapeutic needs) for the youth was re-started at LESCC. When the youth arrived at LESCC, he had spent almost 3 weeks on suicide watch and was highly agitated. The youth was medically assessed and able to come off suicide watch within a week of arriving at LESCC. Staff at LESCC established a constructive relationship with the youth and facilitated the completion of a CON. The youth then had to wait for another opening at the Jefferson School. He celebrated his 13<sup>th</sup> birthday on March 19 with a party organized by LESCC staff.

The LESCC Superintendent consistently stresses to staff the importance of "building effective relationships" and LESCC staff, the youth's case manager and the youth's public defender worked in tandem on his behalf to help him throughout the CON process. After spending close to 5 months in detention centers, a placement bed opened and the youth moved from LESCC to a placement at the Jefferson School on April 3, 2009.

If the certificate of need had been completed in January at Noyes, the initial placement bed awaiting the youth would not have been lost and the 12-year-old youth would have had to spend 2 months rather than 5 months in detention centers awaiting placement.



c. Population Breakdown

	1 <sup>st</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
<b>Total Number of Youth Detained</b>	135	132
<b>White/Caucasian</b>	56	42
<b>African American</b>	77	90
<b>Latino</b>	2	0
<b>Other/Unknown (ethnicity)</b>	1	0
<b>Male</b>	110	98
<b>Female</b>	25	34

There was a slight drop in the total number of youth detained at LESCC during the first quarter of 2009 compared with the same period in 2008. The number of African American youth detained at LESCC rose 17% while the number of detained white youth fell 25% compared with the first quarter of 2008.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.1.5.1** *The provision of ... living space shall be sufficient to adequately meet the needs of the detained youth.*

**Maryland Rules, Rule 11-112. Detention or shelter care.** *Maximum period of detention or shelter care – continued detention or shelter care pending the adjudicatory or waiver hearing may not be ordered for a period of more than thirty days.*

2. Staffing

Staff remains stable at LESCC and most staff have worked at the facility for over four years.

There is one vacancy among key positions – the Assistant Superintendent. The minimum staff to youth ratio standard was maintained throughout the quarter. According to the administrator, an additional Residential Adviser would alleviate pressure on staff when there are a number of youth on suicide watch or guarded care plans and one-on-one coverage is required.

Staff at LESCC received re-training on incident reporting this quarter. The training emphasized the importance of recording witness statements from every person present during an incident. LESCC staff are also being provided gender-responsive training.

**Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 5.1.5.5** *(S)taffing levels (should) ensure the proper supervision and safety of residents.*

**3. Safety and Security**

**a. Aggregate Incidents**

Incident Categories	1 <sup>st</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
1. Youth on Youth Assault	19	16
2. Youth on Youth Assault with Injury	12	9
3. Alleged Youth on Staff Assault	6	8
4. Alleged Youth on Staff Assault with Injury	5	9
5. Group Disturbances with bodily harm or property destruction	0	1
6. Restraints	33	40
7. Restraints with Injury	18	15
8. Seclusions over 8 hours	8	0
9. Suicide Attempts, Ideation, Gestures, Behavior	3	5
10. Alleged Inappropriate Staff Conduct/Comments	2	0

Reduction in the use of seclusion has been prioritized by the Superintendent at LESCC. The use of seclusion at LESCC has been significantly reduced. Youth on youth assaults and related injuries are also down. Physical restraints were up over the same period last year though injuries associated with restraints were down. Three restraints occurred as staff attempted to keep youth safe during incidents involving suicide related gestures or attempts.

A youth suffered redness and scraped skin at cuff sites after being shackled following an incident (# 72111). Mechanical restraints should only be used as necessary during transportation and DJS should utilize soft or padded shackles which are as secure as bare metal but cause fewer injuries to youth.



There was one report of Alleged Sexual Contact/Abuse and one of Alleged Physical Child Abuse (DJS Incident database # 70546 and # 70570, respectively) related to transportation of LESCC youth outside the facility but under DJS supervision on January 27.

The allegations of abuse and sexual contact were not sustained by the Office of the Inspector General (OIG) at DJS but concern remains regarding transportation policy in this case. The van, which contained both male and female youth, was driven by a lone male employee. Male and female youth should not be transported together and, when there are a number of youth in a van, there should be more than one employee supervising the youth.

#### **4. Physical Plant and Basic Services**

The physical plant is well maintained and in good condition. LESCC is up-to-date and in compliance with applicable fire safety inspections. The building has comprehensive sprinkler coverage. Emergency plans are posted and there are regular drills.

LESCC is in compliance with all applicable food and health inspections. Youth receive appropriate clothing and footwear in good condition. Food content, presentation and service are consistently excellent at LESCC. The cafeteria is clean and youth interviewed express satisfaction with the food served. The nutrition manager strives to offer fresh food and a balanced diet. In addition, the nutrition manager was recognized by the Maryland State Department of Education for his efforts in working with the LESCC education staff to reinforce classroom learning through food choice and presentation.

#### **5. Education**

The Maryland Department of Education (MSDE) operates the school at LESCC. The school principal oversees education at LESCC and the Carter detention facility in Kent County.

The teachers are dedicated and knowledgeable about student strengths and challenges. LESCC has a Special Education teacher to address youth needs. School records are promptly requested and received.

Classrooms are spacious. Computers and other equipment is up-to-date. Youth attend class from the time they enter the facility and instruction is provided every day (rare exceptions occur due to trainings and public holidays). Youth observed in class this quarter were engaged in interactive learning.

Youth work on career preparation skills such as completing resumes however, there is no vocational education component at LESCC. Youth would benefit from the incorporation of vocational work into the curriculum.

### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 4.1** *The Department shall ensure that educational services provided within the detention facility are consistent with state requirements and that they meet the individual needs of the youth.*

## **6. Rehabilitative and Recreational Programming**

### **a. Rehabilitative Programming**

Youth at LESCC participate online in Aggression Replacement Therapy twice weekly.

A program called "Gentlemen on a Mission" was introduced to staff on March 18 and is set to begin in the third quarter. Volunteers will be coordinated by a public charter school administrator from Salisbury who runs the program. The curriculum has a focus on building youth self-esteem through art, music, life skills, visualization and miscellaneous education-related activities. The program will run on Saturdays in 9-week blocks with 10 youth participating each session.

### **b. Recreational Programming**

All youth receive daily exercise including mandated large-muscle activities. Boys regularly play basketball in the gym and in a league with youth from other facilities. Girls' rollerblade and play volleyball.

At the beginning of the quarter, staff and administrators at LESCC initiated a popular and successful monthly event they call "Lower 'Shore After Dark" with food such as pizza and wings and activities such as games and movies. Youth who reach behavior level 4 and are positive role model for others may participate. Interest and excitement about this program runs high among youth. Staff reinforce this expectation and report that youth anticipation, as well as the event itself, positively affects youth behavior.

### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 5.1.5.4** *... exercise and recreation ... services shall be maintained at a sufficient level to accommodate the number of youth at the facility.*



## **7. Medical and Behavioral Health**

Onsite nurses and behavioral health staff tend to everyday medical, medication and mental health needs. Youth are transported to a local hospital in cases of emergency. The medical unit is fully staffed and youth receive timely examinations. Staff seem well-informed about youth needs and conscientiously follow appropriate procedure in caring for youth. When youth with medication needs are transferred or released, medical staff ensure medication needs are met while youth are in transition to other facilities or back to their communities.

## **8. Youth Advocacy, Internal Monitoring and Investigation**

Youth understand and use the grievance system. The DJS child advocate visits regularly and is diligent in the discharge of her duties. The grievance boxes are secure with forms available to youth.

In interviews with this monitor, youth commented positively about staff and conditions at LESCC. One youth said, "It's the best place I've been" and another youth commented, "If I have to be in detention, I want to be here."

The DJS Office of Quality Assurance and Accountability issued its most recent report on August 15, 2008.<sup>1</sup>

## **RECOMMENDATIONS**

1. Population at LESCC should never exceed 18 male and 6 female youth.
2. Youth should not have to sleep in a designated seclusion room because of overpopulation.
3. Youth at LESCC should not have to share sleeping rooms.
4. The school curriculum should include a vocational component.

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<sup>1</sup> <http://www.djs.state.md.us/quality-assurance/qir-less.pdf>



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**MORNINGSTAR YOUTH ACADEMY**  
**JANUARY – MARCH, 2009**

**Facility:** Morningstar Youth Academy  
1441 Taylors Island Road  
Woolford, Maryland 21677  
Chief Administrator: Mike Diaz

**Dates of Visits:** January 16 and 29, February 12 and 26, and March 13, 2009

**Reported by:** Nick Moroney  
Monitor

**Persons Interviewed:** Chief Administrators, Operations Director, Compliance Director, Admissions Director, Teachers, Supervisors, and Residential Staff and Youth

**Date of Report:** April 2009



## INTRODUCTION

Morningstar Youth Academy is a privately run residential camp serving up to 40 boys from 14 to 18 years old. The facility is licensed through the Maryland Department of Juvenile Services (DJS/the Department) as a large group home with a substance abuse treatment component and is located in rural Dorchester County on Maryland's Eastern Shore.

The center also provides residents with Aggression Replacement Therapy (ART), Equine Assisted Therapy, and partners with Eastern Shore Psychological Services to provide behavioral health therapy. There is a private alternative school on grounds for residents undergoing treatment. Youth are referred to Morningstar by DJS and typically stay from 6 to 9 months. VisionQuest Inc. has operated the facility since July of 2005. VisionQuest/Morningstar is also contracted with DJS to provide Functional Family Therapy (FFT) at Morningstar and at various locations around Maryland.

## SUMMARY OF CRITICAL FINDINGS

- Operations and programming at Morningstar are running smoothly.

## FINDINGS

### 1. Population

Forty-seven youth were served at Morningstar during the first quarter of 2009, of which 31 were African American and 16 were Caucasian.

While Morningstar was close to capacity (40) throughout the third quarter of 2008, the facility received fewer referrals from DJS and was below population capacity throughout the first quarter of 2009. In mid-March, there were 33 youth in residence. Morningstar administrators advise the program needs to maintain a minimum youth population of 36. Some youth have been removed by DJS before finishing the Morningstar program. Youth should not be removed from a treatment program for budgetary reasons.

When deemed appropriate or necessary, Morningstar recommends some youth transition to independent living after finishing the program. In the past, a number of youth who left Morningstar successfully transitioned through foster care to independent living using Mentor Maryland services. During this quarter, this Monitor has noticed that there is resistance to such recommendations on the part of DJS community case managers, which may be related to budgetary concerns.

Where appropriate, DJS should support independent living in order to help youth move from living situations that can lead to recidivism. Some youth have no stable

home life to return to after Morningstar while others may be attempting to leave neighborhoods or even home environments where illicit activities are difficult to avoid. In the long term, providing the funding to help youth become independent is more economical than paying for a continuing cycle of crime and punishment.

## **2. Staffing**

### **a. General**

A fulltime principal was recently hired to oversee the education program and a shift supervisor is transferring from another VisionQuest facility to bolster direct care staffing. Administrators continue to be interested in hiring experienced direct care workers; however, ongoing low population prevents them from hiring additional staff.

A program administrator, with responsibility for oversight of youth interviewing and intake, left to pursue another opportunity in January. One of the therapists with Morningstar has taken the state-mandated administrator's test and may fill the intake administrator vacancy.

Morningstar administrators continue to seek a physical education instructor and are considering hiring a fourth classroom teacher.

Appropriate staff to youth ratios were maintained throughout the quarter despite challenges posed by staff illness toward the end of the reporting period. Staff did not work an inordinate amount of overtime or suffer from lack of rest - Morningstar direct care workers work a "3 and 4" shift which includes an average of 3 ½ consecutive days off per week per worker.

### **b. Staff Training**

Trainings are all up to date. Staff undergo an initial 18 hours of training and then quarterly refreshers of between 8 and 10 hours training. In March, staff attended training offered by the Department on the "Seven Challenges" counter addiction program currently being instituted in DJS placement facilities statewide.

### **c. Staff Credentials**

Administrators at Morningstar have taken and passed the State exam for childcare certification.

## **3. Safety and Security**

### **a. Aggregate Incidents**



There was one reported AWOL, one reported physical restraint (which did not result in injury) and nine reported youth-on-youth assaults at Morningstar during the first quarter of 2009. There were no allegations of child abuse or neglect during the first quarter.

The Morningstar program does not use chemical or mechanical restraints. Staff are trained in the use of physical restraints as part of a crisis prevention program which emphasizes positive behavior reinforcement and which was recently positively vetted by the Governor's Office for Children.

**b. AWOL**

A single incident of AWOL occurred involving a youth who did not return from a home visit on March 22 (DJS incident database # 71986). The youth was due to leave Morningstar on March 26, having been at the facility since late June of 2008. This Monitor interviewed the youth in February and the youth said he felt that Morningstar had helped him but that he was "ready to go home."

**c. Incident-Related Procedures, Practices, and Reporting**

Staff are trained in crisis prevention and administrators emphasize de-escalation techniques. Each youth's file includes a Safety Environment plan, which is reviewed every 30 days and is updated in the event of an incident involving the youth concerned. Youth are medically assessed by onsite nursing staff following an incident.

**d. Security Equipment and Practices**

Log Book entry practices were recently revamped and staff retrained in notation procedure. Morningstar's key control policy includes the use of a safe for staff and visitor keys, which are logged and then inventoried periodically throughout the day.

**e. Behavior Management Plan**

Staff training on the behavior management plan is tailored toward positive reinforcement and preventative measures. Youth interviewed said they understand the behavior plan and that staff consistently apply the plan.

Safe Crisis Management, a comprehensive approach utilized at Morningstar encompasses both crisis prevention and everyday behavior management and is designed by the owner of JKM, Inc. The owner of JKM met with a panel at the (Maryland) Governor's Office for Children as part of a vetting process, which resulted in an approval of the training offered by JKM.

**4. Physical Plant and Basic Services**

**a. Fire Safety**

Morningstar has passed all applicable fire safety inspections. Administrators will initiate re-contact with the fire marshal at the end of the current quarter to arrange inspection. Fire drills are conducted each month with variations in locations and shifts. Youth and staff are aware of fire safety procedures and know where to go in the event of an emergency. Each room used by residents has an emergency egress in addition to the main door.

The Morningstar emergency response plan was successfully instituted during an electrical power outage due to snowstorm activity this quarter.

**b. Physical Plant**

The buildings at the facility are aged however, the facility is up to code, many buildings have been substantially renovated, and usable space has been expanded. Administrative staff conduct a daily 'walk through' in order to help ensure any issues of concern (electrics, debris, cleanliness, etc.) are addressed speedily.

Renovations and repairs to the recently designated gym building are continuing piecemeal in order to enable ongoing youth use of exercise equipment already in the building. Substantial progress on equipping the gym is anticipated by the summer of 2009. The Morningstar property includes wooded areas and open fields used for equestrian therapy and other programming.

**c. Basic Services**

Health and nutrition related inspections are up-to-date and conditions are satisfactory. The Food Service Facility license issued by the Maryland Department of Health and Mental Hygiene is valid through the end of 2009. Winterization was undertaken during the last quarter of 2008 and the distribution of winter clothing to residents (as they arrive) has been ongoing since that time. Youth interviewed report that food served is "good" and that clothing and hygiene needs are taken care of upon request.

The facility has plenty of space to allow for group counseling, recreational activities, visits, and for privacy during individual counseling.

**5. Education**

**a. Type III School (School within or operated by the facility)**

**1. Records**

School records for youth are requested as part of the intake process and the school principal liaises with contacts in the Maryland State Department of Education (MSDE) as needed to ensure timely delivery of education records.



## **2. Special Education**

Incoming youth are assessed through completion of a basic education test (TABE). Morningstar is not currently able to accept youth with IEPs but is working on a plan to facilitate appropriate local servicing of youth with special education needs in the future.

## **3. Educational Plan**

The Maryland Department of Education recently performed an assessment of Morningstar education programming which resulted in a positive report.

A new principal, Ms. Monica Jones, was appointed during the quarter and initiated a number of positive changes to the education program, including redesigning of report cards, which youth, guardians and therapists receive weekly. The reports are included in youth treatment plans and form part of the reports to the monthly multidisciplinary meetings. Youth guardians also receive updates on youth progress via regular telephone calls. Youth report the education program as being "better organized" under Ms. Jones' leadership. Administrators are currently planning a library room.

## **4. Classes**

The program offers 9<sup>th</sup> grade level and GRE preparation classes. Youth who have completed 9<sup>th</sup> Grade and who do not wish to take the GED track need to take into account that Morningstar currently does not offer 10<sup>th</sup>, 11<sup>th</sup> and 12<sup>th</sup> Grade classes.

Youth begin taking classes within a day of entering the program. The school day consists of 7 hours of classes, including 1 hour of physical education.

Classroom teachers offer appropriate instruction and youth were on task during classroom visits by this Monitor.

### **b. General Educational Development Program (GED), College Courses**

The GED program follows the Dorchester County Curriculum and is well organized, helping produce positive results for youth at Morningstar as noted in a MSDE report on education at the facility.

### **c. Vocational Education**

Currently, Morningstar does not offer vocational courses, however, youth do work on resume preparation and other career-related activities and the facility expects to expand career preparation opportunities with the upcoming opening of a computer lab for youth. The lab is ready pending Wi-Fi connection and a retired computer industry executive has volunteered to help instruct youth.

## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

Morningstar provides comprehensive therapeutic services focused on substance abuse counseling, including Cognitive Behavior Therapy (CBT) for substance abuse and Aggression Replacement Therapy (ART). The program offers group and individual therapy, and equestrian-based therapy. Therapy takes place daily.

Morningstar also provides Functional Family Therapy (FFT) and DJS has expanded statewide delivery of this evidence-based practice through Morningstar/VisionQuest and other providers.

A Centering Treatment Plan and Safe Environment Plan for each youth at Morningstar is initiated at intake. A "Master Problem List" and a preliminary plan of care are compiled within 72 hours. A POSIT (Problem Oriented Screening Instrument for Teenagers) test is also administered and scored within 72 hours of youth entry. (See the "medical" section for more information about initial assessment of incoming youth at Morningstar)

Youth at Morningstar also participate in community service in a nearby town and, as of this quarter, at the Blackwater National Wildlife Refuge, where youth re-landscaped the butterfly garden. Administrators are currently arranging to have youth participate in horticultural activities in Federalsburg.

Youth interviewed said that the program at Morningstar helped them work on negative "attitude" and "anger issues." They said they were pleased with Narcotics Anonymous guest speakers this quarter because they understand what youth are going through and are "real."

### **b. Recreational Programming**

While Morningstar is seeking a P.E. instructor, the Administrator ensures youth receive required daily large muscle exercise. Youth spend an average of two hours outside each day.

The facility includes a covered basketball court, a space for volleyball and football and a swimming pool for use from April through October. Morningstar administrators converted a large storage space into a recreation hall with a gym area for weight training equipment. Currently more equipment is being added and youth comment that the gym is "getting better." There is an organized schedule to assure all youth have a chance to use the gym daily.

Youths also go bicycle riding regularly and, in the absence of a physical education teacher, the operations director initiated a fitness program involving bike riding, jogging



and yoga workouts. Youth from Morningstar took part in a “half marathon” sporting event in Florida in January of 2009.

Administrators are planning for youth to take part in a local mini- triathlon during the second quarter of 2009. Youth will also be visiting a local library and a YMCA weekly.

### c. Parental Involvement

Morningstar therapists provide Functional Family Therapy for youth and parents to support youth throughout treatment and family members take part in multidisciplinary meetings. Residents call home once during the week and once on weekends and earn weekend visits home to maintain family contact and prepare for transition back to communities. Family visits take place once a week. Youth can receive and send mail any time excepting mail from correctional facilities or juvenile placements unless approved by a DJS community case manager. Incoming letters are checked for enclosures by administrators in front of youth, but are not read by Morningstar employees.

## 7. Medical

A fulltime registered nurse provides medical care onsite at Morningstar and youth have ongoing access to medical services. There is also a fulltime medical assistant who is a Morningstar employee. Medical services are explained to youth at intake. If a youth is in urgent need of medical attention, he is brought to the nurse immediately. There are two ‘sick calls’ per day where youth can request a visit to the nurse. The facility contracts locally to ensure the provision of behavioral health evaluations as required. Youth medical records are kept up to date and housed in a secure location. Medications are double-locked in a designated medical room.

Physicians are contacted about youth medications upon admission and substance abuse screening is done at intake and after home visits. Physical exams including dental and eye exams are completed in a timely way and youth interviewed stated they were satisfied with medical facilities at Morningstar.

Morningstar administers the DJS approved ‘Facility Initial Reception/Referral Screening Tool’ (‘FIRRST’) assessment instrument to help determine if a youth is appropriate for an admission “or is in need of further medical or mental health referral” (see DJS Policy and Procedure RF-03-07).

The MAYSI youth screening test is administered within two hours of entrance into the program and health and safety screening is completed within 24 hours. A Biopsychosocial assessment is completed within two weeks of youth entry to Morningstar and a Child and Adolescent Needs and Strengths (CANS) assessment

within 20 days. The CANS is also administered at 90 days and at discharge. (See the 'Therapy' section for more information on youth assessments at intake)

The Dorchester County Health Department provides HIV/AIDS and sex education to youth at Morningstar.

## **8. Youth Advocacy, Internal Monitoring and Investigation**

### **a. Youth Advocacy**

Youth at Morningstar understand and use the grievance system. The DJS child advocate visits twice weekly and is diligent in the discharge of her duties. The grievance box is secured and forms are readily available to youth.

### **b. Internal Monitoring**

The DJS Monitor visits regularly and Morningstar did not have any outstanding corrective action or licensing issues this quarter. However, a youth request did lead to a change in policy as detailed in "Youth Concerns," the following section.

### **c. Youth Concerns**

Christian and Muslim religious persons volunteer their time to interested youth at Morningstar. A youth expressed a wish to be able to wear a Muslim prayer cap (or Kufie). After receiving correspondence from a public defender who spoke with the youth, DJS ultimately instructed Morningstar administrators that youth wishing to wear a prayer cap for religious reasons should be able to do so at any time at Morningstar. DJS should ensure this right is extended to youth at all DJS-run and DJS-licensed facilities.

## **RECOMMENDATIONS**

1. Youth should not be removed for budgetary reasons from a treatment program before completing the program.
2. Where appropriate, DJS should provide funding for independent living in order to help youth move from living situations that can lead to recidivism.
3. DJS should continue statewide expansion of evidence-based therapies such as Functional Family Therapy (FFT), Multidimensional Treatment Foster Care (MTFC) and Multisystemic Therapy (MST) to help youth and reduce recidivism.
4. DJS should ensure the same freedom regarding religious practice granted to youth at Morningstar is extended to youth at all DJS-run and DJS-licensed facilities.





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**NOTICE OF SPECIAL REPORT ON CLOSURE  
MOUNT CLARE HOUSE  
MARCH 31, 2009**

**Facility:** Mount Clare House  
117 S. Callendar Street  
Baltimore, MD 21201  
Program Director: Marvin Stone

**Reported by:** Nick Moroney  
Juvenile Justice Monitor

On March 31, 2009, the Department of Juvenile Services (DJS) closed Mt. Clare, a Baltimore City group home that for twenty years provided critical services for many challenging youth. Mount Clare staff had a strong track record of success with youth who have complex emotional and behavioral problems.

The Department gave less than a week's notice of closure, leaving participating State agencies and private provider staff little time to arrange for alternative placements for vulnerable youth.

A full report on the Mount Clare closure by the JJMU Monitor and the subsequent written response by the Department of Juvenile Services can be accessed at:

**Mount Clare Closure Report**

<[http://www.oag.state.md.us/JJMU/reports/MT\\_CLARE%20 Closure.pdf](http://www.oag.state.md.us/JJMU/reports/MT_CLARE%20Closure.pdf)>

**DJS Response**

<[http://www.oag.state.md.us/JJMU/reports/Mt\\_Clare%20 House\\_4\\_2\\_09\\_DJS Respon  
se.pdf](http://www.oag.state.md.us/JJMU/reports/Mt_Clare%20House_4_2_09_DJS_Response.pdf) >



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**SYKESVILLE SHELTER CARE FACILITY**  
**JANUARY – MARCH, 2009**

**Facility:** Sykesville Shelter Care (SSC)  
7273 Cooper Drive  
Sykesville, Maryland 21784  
Facility Administrator: Bob Geddes/Teron Powell

**Date(s) of Visit:** January 6, February 24, March 3, 2009

**Reported by:** Philip J. Merson  
Senior Monitor

**Persons Interviewed:** Facility administrators, case managers, youth supervisors,  
and youth  
  
Carroll County Child Protective Services intake and  
investigative personnel

**Date of Report:** April 2009



## INTRODUCTION

Sykesville Shelter (Sykesville) is a private shelter care facility on State property in Carroll County. North American Family Institute manages the facility and the Department of Juvenile Services (DJS) licenses the facility. The facility can house and provide services for up to 10 females.

## SUMMARY OF CRITICAL FINDINGS

- Facility Administration and DJS did not remove a Direct Care staff person from working directly with youth, although Child Protective Services were investigating the staff for a reported physical child abuse at the facility.
- The facility illegally released a youth who had been court ordered into the facility.
- The facility failed to file an incident report with DJS according to DJS policies and procedures.
- The facility reported more incidents this quarter than in any quarter over the past 8 years.

## FINDINGS

### 1. Population

#### a. General

There were between 7 and 10 girls at the facility during the Monitor's visits this quarter. However, population numbers are often inaccurate in the DJS ASSIST database. A check of the DJS ASSIST database on March 20 revealed there were 46 girls housed at the facility from Jan. 1 through March 20. Thirty-seven were African American, eight were Caucasian and one was Asian.

#### b. Inaccurate Counts

According to the facility case manager, the facility no longer reports population figures to DJS Headquarters on a daily basis. On March 5, the youth counts in the DJS ASSIST database indicated Sykesville was housing 20 youth, but there were actually only eight girls at the facility. Thirteen of the 20 girls listed in ASSIST were no longer at the facility and ASSIST failed to indicate one girl who was at the facility.

Past Sykesville administrators said that DJS contacted them each morning between eight and 8:30 to update population counts. Current administration was unfamiliar with that practice.

### **Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.19.1.** *An employee may not make any false oral or written statement or misrepresent any material fact, under any circumstance, with the intent to mislead any person or tribunal. Reports submitted by employees shall be clear, concise, factual and accurate.*

#### **c. Inappropriate Placements**

DJS placed several high-risk youth in the shelter this quarter who had to be removed. DJS should properly assess youth before placing them to ensure that placements will meet their needs and that they will not threaten the safety of other residents or staff in the facility.

On January 23, police responded to a disturbance at the facility in which a youth became very loud, verbally abusive, threw files and a computer on the floor and punched holes in the wall<sup>1</sup>. The youth was removed from the shelter. The "Alerts" section of the ASSIST database had already indicated this youth had eight previous AWOL incidents from facilities, was suicidal and was a confirmed gang member. According to ASSIST, she also had several mental health diagnoses.

On March 2, a youth was removed for inappropriate behavior and threatening to harm staff. The DJS ASSIST database revealed that the youth had several security alerts on her record. She had two previous runaways from 2006 and in June of 2008, police arrested her as an adult for armed robbery, robbery, theft and assault. She was documented as a "violent repeat offender" and being investigated as a gang member. The youth also attempted suicide by tying a sheet around her neck at the Waxter facility on January 20.

Both of these youth exhibited serious behavioral, mental health, and security problems and should not have been placed in a non-secure shelter environment.

### **Applicable Standard**

**Maryland Code, Human Services, Department of Juvenile Services Title 9-226 and 9-234.** *The Department may establish and operate the facilities that are necessary to properly diagnose, care for, train, educate, and rehabilitate children who need these services... Legislative intent. The General Assembly intends that: (1) all children whose care is the responsibility of the State shall have similar protection for their health, their safety, and the quality of their care....*

<sup>1</sup>DJS Incident Report Number 70771



## 2. Staffing

### a. General

Staff to youth ratios appeared appropriate throughout the quarter.

### b. Changes in Leadership

Six weeks into the quarter, Teron Powell became the new Director at Sykesville. Mr. Powell holds a Bachelor's Degree from McDaniel College and was employed as a case manager supervisor at the Thomas O'Farrell program/facility (now closed).

### c. Sustained Staffing Violations by DJS

Administration dismissed one staff person from direct care responsibilities for challenging a youth to fight with her on January 14.<sup>2</sup> The DJS Office of the Inspector General did not create an incident report until February 13, but did finally sustain violations against staff for her actions. Sykesville reportedly dismissed the staff from employ.

## **Applicable Standards**

**Maryland Department of Juvenile Services Standards of Conduct 2.2.3.** *An employee acting in his or her official capacity may not use any coarse, profane, or insolent language, or take action towards... delinquent youth, offenders [or] clients that is abusive or otherwise considered offensive to contemporary community standards, except as required as part of an approved treatment program.*

## 3. Safety and Security

### a. Incidents

There were 15 incidents reported this quarter through March 15, 2009, compared to 3 during the same time-period last year. According to the DJS Incident Report database, there were:

- 4 incidents of Alleged Inappropriate Conduct/comments by Youth;
- 2 incidents of Alleged Inappropriate Conduct/comments by Staff;
- 2 Alleged Youth on Staff Assaults;
- 1 incident labeled "Other" involving the illegal release of a youth from custody
- 1 Runaway;
- 1 Contraband Incident (knife);
- 1 Destruction of Property;

<sup>2</sup> DJS Incident Report Number 70994

- 2 incidents of Alleged Physical Abuse – Not in DJS Custody; and
- 1 incident involving a Law Enforcement Officer coming On-grounds (staff locked herself out of her car).

**b. Failure to Remove Staff During Alleged Abuse Investigation**

A youth alleged physical abuse to the DJS Child Advocate on February 6, 2009,<sup>3</sup> who promptly reported it to Carroll County Child Protective Services. She said the abuse occurred on February 3; DJS began investigating on February 16.

During a monitoring visit on February 24, staff told the Monitor that administration did not remove the staff person under investigation from directly supervising the youth.

This Monitor notified the facility administration of COMAR requirements and the facility administration suspended and subsequently terminated the staff. Upon notification of the problem, DJS advised they would provide training to facility staff on COMAR regulations and writing incident reports.

DSS/CPS “ruled out” the incident, and DJS/OIG completed an investigation. The DJS report did not sustain any violations against staff for unnecessary use of force or for failing to remove staff from direct care coverage while under investigation for abuse. However, the report did acknowledge the investigator contacted the Acting Facility Administrator and determined staff “remained in coverage after the incident was reported.”

It is paramount that DJS/OIG ensure facilities are complying with COMAR during any investigation of child abuse.

**Applicable Standard**

**COMAR 14.31.06.14.5 (d)** *Upon being notified of or making a report alleging that an employee has subjected a child to abuse or neglect, the licensee shall place the employee on administrative leave and remove the employee from access to the children. This regulation does not prohibit a licensee from suspending without pay or discharging an employee alleged to have subjected a child to abuse or neglect.*

**c. Illegal Release of a Committed Youth**

The facility improperly released a youth from custody in violation of a shelter case order from court and allowed her to go home with her mother on January 29. DJS placed the youth in shelter because she had been charged with Possession and Distribution of a Controlled Dangerous Substance and a drug dealer was threatening her life.<sup>4</sup> The youth had been court-committed but a County Sheriff, reportedly unaware of the court commitment and the threat on her life, requested her release as a witness

<sup>3</sup> DJS Grievance Report 7596 and Incident Report Number 70885

<sup>4</sup> Incident Report 70724



to an illegal drug distribution case. Miscommunication between the facility, the DJS case manager and the Wicomico County Sheriff resulted in her illegal release. On Feb. 4, DJS and the County Sheriff reported that she was safe and had been placed in an addiction program that day.

#### **Applicable Standard**

**Maryland Courts and Judicial Proceedings Article 3-820.** ...After a CINA disposition, when the court has ordered a specific placement of a child, a local department may remove the child from that placement prior to a hearing only if: (1) Removal is required to protect the child from serious immediate danger; (2) The child's continued placement in the court-ordered placement is contrary to the welfare of the child; or (3) The person or agency with whom the child is placed has requested the immediate removal of the child.

#### **d. Database Access**

Facility administrators should have access to directly input incident information into the incident report database. There is often a long lag time between when the facility makes the report and when that report gets into the system.

As reported above, Incident Number 70994 occurred on January 14 but DJS did not enter the incident in the database until February 13, almost 1 month after the incident occurred. Incident Number 71796 occurred on March 2 and DJS did not enter it into the database until March 16, 2 weeks after the incident occurred.

DJS advised there would be Incident Report training for the facility employees. However, once DJS employees become aware of incidents they should also ensure proper and timely entries into the database.

#### **Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.19.1.** An employee may not make any false oral or written statement or misrepresent any material fact, under any circumstance, with the intent to mislead any person or tribunal. Reports submitted by employees shall be clear, concise, factual and accurate.

### **4. Physical Plant and Basic Services**

#### **a. Fire Safety**

The Fire Marshal inspected the facility on January 23, 2009. The inspection found violations in the smoke detectors and fire alarm system. Facility personnel have corrected the defects.

As of March 27, the facility had not performed any fire drills since December 31, 2008.

**Applicable Standard**

**COMAR 14.31.07. 5(a)(b)** *The licensee shall hold emergency drills at least monthly, and on each shift, at least quarterly.*

**b. Physical Plant**

- *Kitchen Renovation*  
DJS renovated the kitchen and they are still waiting for a new dishwasher.
- *Porch Repairs*  
DJS is making plans to repair the porch area starting March 27.
- *Bathroom*  
Floor still needs repairs.
- *Basement*

On April 20, a resident called the Monitor's office to report that the school in the basement had a foul order. She was pregnant, felt the basement was unsafe and expressed concern about mold and mildew. The basement facility becomes damp and emits a foul odor when it rains.

The Monitor visited the facility the next day and observed a foul odor, mold in the sump pump area and a clogged drain outside the basement door. The classroom was not being used during the visit. A heater was running full blast and the basement was very warm. DJS (who owns the building and is responsible for repairs) was notified of the problem and advised they would make sure it was corrected.

**Applicable Standard**

**COMAR 14.31.06.07.C.1.** *The licensee shall maintain all structures and grounds in good condition, free from health or safety hazards.*

**c. Basic Services**

The Health Department inspected the facility on May 27, 2008 and facility personnel corrected several minor violations for caulking and food storage.



**5. Education (Type III School Within or Operated by the Facility)**

According to education personnel at the facility, they request school records within 5 days of a youth's placement and normally receive them in a timely manner.

Also according to education personnel, youth are fully assessed via IEP for educational or learning disabilities and they receive appropriate Special Education services to address educational or learning disabilities

Each youth reportedly has an individualized learning plan to meet his/her goals.

Youth participate in class within 24 hours of admission and attend classes for at least 4 hours per day. However, the classroom is in a crowded damp basement that emits a foul odor in wet weather (See Physical Plant).

There appear to be sufficient and appropriate instructional materials available for youth.

**6. Rehabilitative and Recreational Programming**

**a. Therapeutic Program**

The facility uses the Normative Community Approach as their treatment model. The model incorporates Positive Peer Culture and Cognitive Behavior Therapy models involving vision/mission driven community concepts.

**b. Recreational Programming**

Youth reportedly receive structured recreational and leisure programming daily but youth interviews indicate their activities are limited in variety. They reportedly play cards, knit, shop at a local mall and go outside to the park next door to take walks "if staff feels up to it."

**Applicable Standard**

**COMAR 14.31.06.12.B.1** *The licensee shall provide the children with a range of indoor and outdoor recreation and leisure activities both in the program and in the community.*

**c. DJS Community Case Managers' Involvement**

According to Sykesville administration, a youth filed a grievance the end of February regarding a lack of case manager visitations. Since the youth filed the grievance, she has not complained further about visits from her community case manager.

**7. Medical**

**a. Basic Medical Services**

Youth normally receive prompt physical exams, including dental, vision and immunizations at a local clinic within 30 days of admission. However, there was a concern noted by the DJS Program Evaluation Unit regarding a youth not receiving her required medication six days into the program. DJS advised that Sykesville corrected the situation immediately upon determination of the problem.

**8. Youth Advocacy, Internal Monitoring and Investigation**

**a. Youth Advocacy**

A DJS Child Advocate is assigned to the facility and she visits weekly. This office received three grievances for the quarter.

**b. Internal Monitoring**

The DJS Program Evaluation Unit conducted visits to the facility on January 8, February 26-27, March 3 and March 18 of this quarter. The unit completed comprehensive reports that indicated numerous concerns with the physical plant, food services, basic life needs, health care, programming and incident reporting. Of particular concern was the lack of appropriate medication, food, personal hygiene supplies, structured recreation activities and a failure to properly process and report a youth displaying suicidal behavior. The audits also found problems in the record keeping for several staff who did not have appropriate background checks noted in their personnel files.

**RECOMMENDATIONS**

1. Facility Administration and DJS must remove a Direct Care staff person from working directly with youth, while Child Protective Services is investigating the staff for a reported physical child abuse at the facility.
2. The facility should not release court-committed youth without proper authorization.
3. The facility should file incident reports in accordance with DJS Policy.
4. The facility should reduce the number of aggressive incidents at the facility.
5. Supplies of food, personal hygiene items and medication must be sufficient.



6. Youth should receive the appropriate amount of exercise and recreational programming according to COMAR and DJS regulations.

### UNABATED CONDITIONS

1. The school in the basement of the facility is crowded, uncomfortable and possibly unsafe. The basement should be kept dry and properly maintained, renovated or should not be used.
2. DJS should make the database available for entry of incident reports.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**THE WAY HOME – MOUNTAIN MANOR**  
**JANUARY – MARCH, 2009**

**Facility:** The Way Home-Mountain Manor  
3800 Frederick Avenue  
Baltimore, MD 21229  
Administrator: Leah Simmons

**Date(s) of Visit:** February 5 and March 13, 2009

**Reported by:** Moira Lee  
Monitor

**Persons Interviewed:** Administrators and Youth

**Date of Report:** April 2009



## INTRODUCTION

The Way Home ("TWH") is a non-secure group home for girls who are committed to the Department of Juvenile Services. It is located within the Mountain Manor complex of therapeutic programs in West Baltimore. The Way Home closed for several months during 2008. The program re-opened in May, 2008 and can provide services to 15 residents.

## SUMMARY OF CRITICAL FINDINGS

- This quarter the population remained consistently under capacity.

## FINDINGS

### 1. Population

TWH serves youth who have histories of substance abuse, high-risk behaviors, psychiatric disorders, low self-esteem, and educational issues. The residents at TWH range in age from 14-18 years old.

The population at TWH has been consistently low this quarter. Over the course of the quarter, from January through March, 11 girls have resided at TWH. The average length of stay of the 6 girls released from TWH during this quarter was 131.42 days.

### 2. Staffing

Four staff were released from TWH this quarter per the request of DJS Headquarters. Staff had previously been eligible to work at the group home, but recent changes to DJS standards for eligibility changed and staff no longer met the requirements. TWH staff is in the process of hiring new staff for the group home.

### 3. Safety and Security

According to the DJS Incident Reporting Database, 15 incidents were reported during the quarter. One incident involved an altercation between a youth and a staff, whereby other youth in the program aided in separating the staff and the youth involved. Administrators were immediately notified and promptly responded to the situation. The staff member was promptly sent home and following the investigation was terminated from the position. The police filed charges against both the staff and youth involved. A report was filed with Child Protective Services the morning following the incident.

There have been some problems with case management review scheduling and on February 6 a youth filed a grievance<sup>16</sup> to have his case reviews completed according to facility policy. The grievance spurred administration into action to develop a better scheduling process.

**b. Recreational Programming**

Youth consistently receive 2 hours of structured recreational and leisure programming daily and 1 hour of large muscle exercise (outside when possible).

**7. Medical and Behavioral Health**

No issues or concerns noted except for the above concern in the Safety and Security section regarding youth "cheeking" medications and crushing them for snorting later. Administration has reminded medical personnel to check youth closely to ensure they are swallowing their medications.

**8. Youth Advocacy, Internal Monitoring and Investigation**

**a. Youth Advocacy**

It appears child advocates are properly reviewing and processing youth grievances. As noted above, youth had to file grievances to have case managers' complete weekly reviews and to have soap brought onto the unit.

**b. Internal Monitoring**

To date, the DJS Office of Quality Assurance has not completed a review of the facility.

**c. Incident and Child Abuse Reporting and Investigation**

Staff and Investigators need more tools to fully investigate incidents. Most altercations and incidents are not recorded by video and investigators continue to rely on the questioning of youth and staff to try to determine what actually occurred in an incident. Investigations usually end up with one person's word against another's, resulting in unreliable findings. Video surveillance cameras would be a big help, as may some other advanced investigative techniques.

This Office continues to receive some investigative reports in an untimely manner. On March 17, this office received a DJS/OIG investigative report for Alleged Inappropriate Sexual Conduct by staff for an incident that occurred on December 24,

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<sup>16</sup> DJS Grievance Number 7641



difficult cottage in the facility) were in the classroom. The class was participating in a game of "Hangman." Some youth were not listening to the teacher. Others walked in and out of the classroom and some youth were interrupting the class with rap poems. The resident advisor staff person did not intervene.

### **Applicable Standard**

**Maryland Department of Juvenile Services Detention Standards 4.1** *The Department shall ensure that educational services...meet the individual needs of the youth. A comprehensive educational program that addresses individual learning styles and special education needs shall be provided to every resident...*

#### **e. General Educational Development Program (GED), College Courses**

The program provides youth with access to a GED program managed through MSDE.

#### **f. Vocational Education**

Two different vocational programs are at the facility. One is through MSDE and one is through DJS. The MSDE program is through the National Center for Construction, Education and Research (NCCER). The DJS program is through the National Labor College (NLC). The programs are only for youth who have graduated from school or who are participating in a GED program. Reportedly, there are 12 youth participating in the programs. There are no vocational programs for the other 30 youth at the facility.

NCCER reportedly provides youth an opportunity to receive an OSHA 10 certificate, a First/Aid CPR card, and an NCCER certificate, transcript and pocket card. During a visit the Monitor observed one construction class taught by a Certified Craft Instructor. Six youth participated in the class and appeared engaged and cooperative as they completed wiring and circuitry projects with a hands-on display.

### **6. Rehabilitative and Recreational Programming**

#### **a. Therapeutic Program**

Victor Cullen provides youth with 1 hour per week for individual counseling and 1 hour per week for participation in a mental health group. The PPC/EQUIP model is used; it provides 2 EQUIP and 3 PPC groups per week. The program also provides one outpatient visit per youth per week. There have been some scheduling problems due to a lack of sufficient staff. Therapists are not available to fill in for those who are off or on sick leave. The addition of one more therapist should help with that concern.

The physical plant condition is satisfactory. Interiors and exteriors are clean and there is a process in place for storage and maintenance of hazardous substances.

**c. Basic Services**

A health inspection was conducted on January 13, 2009. There are no food preparation, storage or service issues at this time.

On Feb. 2, a youth submitted a grievance<sup>15</sup> to have soap supplied to the facility. The person in charge of maintaining the supply of soap was off for several days and no one was handling his duties. Soap was delivered on Feb. 5.

**5. Education**

**a. Records**

School records are requested within 24 hours and normally received very promptly.

**b. Special Education**

The education department assesses youth for educational or learning disabilities. Most youth receive appropriate special education services to address educational or learning disabilities, but staff say that some youth do not receive appropriate language services for speech problems.

**c. Educational Plan**

Youth have an individualized learning plan to meet their goals but as mentioned above, the education model for BMP is a point system that involves the gaining and/or losing of points for certain desirable advantages.

**d. Classes**

Youth participate in class within 24 hours of admission and attend classes for at least 5 hours/day. Classrooms have sufficient space and skilled personnel to allow youth to pursue individual learning goals and administrators have moved the library into the school building to allow easier access by students. The administration has moved the vocational training area from the school to a free-standing building where the library used to be. This allows for an atmosphere that does not inhibit work on noisy vocational projects and protects the school from disruption.

During one visit, the Monitor observed a science class. Two instructional staff, one resident advisor, and eleven youth from Rutledge Cottage (considered the most

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<sup>15</sup> DJS Grievance Number 7631



The youth are evaluated daily, weekly, and monthly to determine their progress towards earning progressively longer home passes and demonstrating incorporation of the program into their daily living.

Each week youth receive 1 hour per week of individual counseling, 1 hour of mental health counseling, 2 EQUIP groups, 3 PPC groups, and 1 hour of outpatient therapy. However, the treatment program must work around the education program, which works on a different BMP involving point sheets. To ensure consistency for the benefit of all the youth at the Victor Cullen facility, this conflict in BMPs should be evaluated and resolved.

According to ASSIST data, from the facility's opening on July 1, 2007 through March 23, 2009, 94 youth were admitted to the Victor Cullen program. Fifty-two of these youth (55%) successfully completed the program. There were 23 "unsuccessful" releases and 6 Escapes/AWOL's. Nine youth were released by the court and four were transferred to another facility.

The low rate of successful completion raises questions about the adequacy of the admission process

#### 4. Physical Plant and Basic Services

##### a. Fire Safety

An Emergency Management/Risk Assessment Team has been formed to survey staff about ongoing concerns. An Emergency Call-In list has been established and procedures for shutting off the water have been implemented.

Fire drills have been completed monthly.

Inspections of the Sprinkler System and Range-hood Fire Suppression were completed on February 14, 2008.

Records indicate the completion of fire drills in January and February for most of the cottages. Drills were missing for Rutledge cottage for both months.

#### **Applicable Standard**

**Department of Juvenile Services Detention Standards 5.2.1** *All detention facilities shall conform to State fire safety requirements. The State Fire Marshall is responsible for inspecting state institutions and insuring appropriate safety procedures.*

##### b. Physical Plant

**b. Increase in Assaults**

Population increased by 25% between 1<sup>st</sup> Quarter, 2008 and 1<sup>st</sup> Quarter, 2009 (32 to 42), but youth on youth assaults increased by 90% (10 to 19). Youth on Youth Assaults Involving Injury increased from 2 to 9.

**c. Illegal Drug Use/Contraband**

On March 5, staff discovered that a youth from the Prettyman Cottage, identified as the “drug cottage” by administration, had been crushing his prescribed medication and giving them to another youth to snort.<sup>13</sup> The facility completed an investigation. Staff advised that youth receive their medications at the medical unit on Diggs cottage and administrators of the medication normally ensure youth are swallowing their meds before leaving.

**d. Failure to Report Activity Regarding an Explosive Device**

On January 20, a staffing supervisor learned of information suggesting several youth were trying to steal supplies from staff’s office to create an explosive device or bomb. Administration had to order the staffing supervisor submit a report several days later because she failed to submit one initially.<sup>14</sup> A DJS/OIG investigation completed on Feb. 2 resulted in several sustained findings against the supervisor.

**Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 2.13.2 Breach of Security** *An employee may not take any action or fail to take any action when the action or failure to act causes a breach of security or a potential breach of security by jeopardizing the safety or security of any employee, delinquent youth, offender, client, visitor or member of the public.*

**e. Security Equipment and Practices**

The fence alarms and stationary video surveillance equipment is operating properly throughout all areas of the facility except for the school. The school still needs installation of video surveillance equipment.

**f. Behavior Management Plan (BMP)**

Victor Cullen utilizes the EQUIP Program, combined with Positive Peer Culture (PPC) and Aggression Replacement Training (ART). Youth participate in individual and group counseling sessions and are expected to demonstrate pro-social behaviors and values in progressively more complex situations.

<sup>13</sup> DJS Incident Report 70925

<sup>14</sup> DJS Incident Report Number 70420



- This office received grievances<sup>10</sup> on Feb. 18 for incidents that occurred in November and December of 2008 involving a staff person making inappropriate comments and gestures to youth. The staff was reportedly counseled and disciplined for her actions. One incident report was also completed for the same staff person acting inappropriately<sup>11</sup> on December 31.

### Applicable Standard

**Maryland Department of Juvenile Services Standards of Conduct 2.2.3.** *An employee acting in his or her official capacity may not use any coarse, profane, or insolent language, or take action towards... delinquent youth, offenders [or] clients that is abusive or otherwise considered offensive to contemporary community standards, except as required as part of an approved treatment program.*

### 3. Safety and Security

#### a. Aggregate Incidents (From DJS Incident Reporting Database)

Incident Categories	1 <sup>st</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
1. Youth on Youth Assault	10	19
2. Youth on Youth Assault with Injury	2	9
3. Alleged Youth on Staff Assault	7	5
4. Alleged Youth on Staff Assault with Injury	1	0
5. Group Disturbances (with bodily harm or injury)	0	1
6. Group Disturbances (without bodily harm or property destruction)	0	1
7. Restraints	23	24
8. Restraints with Injury	4	5
9. Allegations of Child Abuse	1	1
• Physical		
• Sexual	1	0
10. Allegations of Child Neglect	0	0
11. Escapes/AWOL's	0	2 <sup>12</sup>
12. Suicide Attempts, Ideation, Gestures, Behavior	1	1

<sup>10</sup> DJS Grievances 7485 and 7486

<sup>11</sup> DJS Incident Report 08-69862

<sup>12</sup> AWOLs while on Home Pass

## Applicable Standard

**Maryland Code, Human Services, Department of Juvenile Services Title 9-226 and 9-234.** *The Department may establish and operate the facilities that are necessary to properly diagnose, care for, train, educate, and rehabilitate children who need these services... Legislative intent. The General Assembly intends that: (1) all children whose care is the responsibility of the State shall have similar protection for their health, their safety, and the quality of their care....*

## 2. Staffing

### a. Staffing Ratios

On January 14, only one staff person was assigned to supervise six youth during showers – 3 in their rooms and 3 in the showers. One youth went into another youth's room and assaulted him while staff was observing the showers, injuring his face and neck.<sup>7</sup> Administrative staff acknowledged that two staff should be available during showers, but that they were down 12 PINs and DJS Headquarters was not filling positions fast enough.

## Applicable Standards

**Maryland Department of Juvenile Services Detention Standards 5.1.5.3 t.** *Youth to staff ratios developed by the Department shall ensure adequate supervision of youth.... Staff to youth ratios shall not be generalized, but rather based on facility design and age, activity and program level and other related factors.*

**5.1.5.5** *Staffing levels shall ensure the proper supervision and safety of the residents.*

### b. Staff Misconduct

Incidents of staff misconduct this Quarter included:

- On Feb. 14, a staff person inappropriately placed her hands on a youth for no reason.<sup>8</sup> A DJS/OIG investigation resulted in a sustained finding against staff.
- On December 22, (this office did not receive this investigative report until March 16) a staff inappropriately touched a youth's buttocks during showers.<sup>9</sup> An investigation by MSP, CPS and DJS failed to reveal sexual abuse but DJS/OIG did sustain a violation of standards for inappropriate conduct.

<sup>7</sup> DJS Incident Number 70242

<sup>8</sup> DJS Incident Number 09-71008

<sup>9</sup> DJS Incident Report Number 08-69794



**c. Home Jurisdiction of Youth**

As of February 20, the 42 youth in the facility were from the following jurisdictions:

Baltimore City	12	Harford – 3
Wicomico	5	Montgomery - 3
Prince George's	4	Washington - 3
Anne Arundel	3	Carroll – 2
Charles	3	
Baltimore County, Frederick, Dorchester, and St. Mary's - 1 each		

**d. Inappropriate Youth Referrals**

DJS continues to either place some inappropriate youth in the program at Victor Cullen or fails to provide some youth with appropriate services. This threatens the safety and security of youth and staff in the facility.

On January 26, a youth was involved in a youth on youth fight.<sup>1</sup> The same youth attacked another youth in the restroom on the same day.<sup>2</sup> On February 6, the same youth attacked another youth in school, breaking his nose and causing a concussion.<sup>3</sup> Maryland State Police charged the youth with assault and released him back to the facility. On February 18, the same youth attacked another youth at school and staff had to restrain him. He broke away from staff, attacked the youth again and staff had to restrain him again.<sup>4</sup> On February 21, the youth was upset about his food and threw a milk carton at staff.<sup>5</sup> In spite of this youth's aggressive and violent behavior and the danger to other youth, staff continues to try to work with the youth.

During an observation of classes, this Monitor observed one youth trying to start a fight with another youth. Education personnel acknowledged that the youth was very problematic in school. I advised the facility administrator of my concerns and he advised they were still trying to work with the youth. On Feb. 13, the same youth refused to stop watching television and threatened to assault staff. Another staff intervened but he remained aggressive as he attacked choked and bit staff.<sup>6</sup> The Monitor spoke with the Facility Administrator twice about the danger the youth presented – eventually the program removed him.

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<sup>1</sup> DJS Incident Report Number 70530

<sup>2</sup> DJS Incident Report Number 70532

<sup>3</sup> DJS Incident Report Number 70854

<sup>4</sup> DJS Incident Report Number 71137

<sup>5</sup> DJS Incident Report Number 71214

<sup>6</sup> DJS Incident Report Number 71002

## INTRODUCTION

The Victor Cullen Center ("VCC") is a State owned and operated secure treatment facility for adjudicated males. It is located in Frederick County, Maryland just north of Sabillasville. The facility will eventually accommodate 48 youth in four cottages, but it currently houses 41 youth.

## SUMMARY OF CRITICAL FINDINGS

- Population increased by 25% between 1<sup>st</sup> Quarter, 2008 and 1<sup>st</sup> Quarter, 2009, but youth on youth assaults increased by 90% (from 10 to 19).
- Some of the youth referred to the Victor Cullen program are not appropriate for the facility's positive peer culture program.
- Several incidents involved staff placing their hands on youth inappropriately.
- The facility no longer provides two staff on each unit during the night shift.
- Administrative leadership changed again. There have been three different superintendents since the facility opened less than 2 years ago.
- One fulltime therapist's position should be filled.
- Vocational programming is only available for approximately 25% of the youth.

## FINDINGS

### 1. Population

#### a. General

Facility Capacity	High Population	Low Population	Average Daily Population	Number of Days Over Capacity
48	42	36	40	0

#### b. Population Breakdown by Race/Ethnicity

1st Quarter, 2009 (Through Mar. 20)	
Total # of Youth Committed	65
White	15
African American	47
Latino	3





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**VICTOR CULLEN CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** Victor Cullen Center  
6000 Cullen Drive  
Sabillasville, MD 21780  
Administrator: Mark Bishop, Acting Superintendent

**Date(s) of Visit:** January 7, 20, February 10, 19, and March 3, 2009

**Reported by:** Philip J. Merson  
Senior Monitor

**Persons Interviewed:** Facility Administrators, Directors, Supervisors, and Youth  
Maryland State Department of Education Educators  
Department of Social Services, Child Protective Services

**Date of Report:** April 2009

7. There should be at least 2 staff responsible for entering incidents to the Incident Reporting Database.
8. Youth should not remain in seclusion if they are calm and no longer a threat to themselves or others.

### UNABATED CONDITIONS

1. Create additional residential care staff positions to accommodate the frequent need for staff to monitor youth on a one-on-one basis.
2. Parenting classes should be offered to youth.
3. Extend and expand contracts for gender specific training and life skills courses.
4. DJS should create policy and procedure relating to the use of mechanical restraints on pregnant youth to address their unique physical needs.
5. Fully implement an evidence-based treatment program specifically designed for girls.
6. Provide additional staff training and/or hire additional credentialed staff at Waxter to ensure that group and program meetings are meaningful and that the treatment model is fully and appropriately implemented.
7. Develop vocational programs.
8. Increase the frequency of gender responsive training courses.
9. Install surveillance cameras.



A consultant has been working with Waxter to develop gender specific programming for the detention unit for nearly two years. She completed a 6 week curriculum consisting of 30 lesson plans. Each lesson plan focuses on a different aspect of the youths' emotional or social well-being. Examples of sessions include: building self-esteem; dealing with anger; and parenting. No date has been determined for the implementation of the curriculum.

**b. Recreational Programming**

There have been numerous activities for youth and staff this quarter. Women's History month was the impetus for several activities this quarter including arts and crafts, a poetry reading, and a mural project.

**7. Internal Monitoring**

The DJS Office of Quality Assurance and Accountability issued its most recent report on January 8, 2009. The Program achieved Superior Performance on 1 of the 44 standards evaluated; Satisfactory Performance on 12 (32%); Partial Performance on 13 (35%); and Non-Performance on 11(30%) of the 44 standards evaluated.<sup>4</sup>

**RECOMMENDATIONS**

1. DJS Headquarters should lower the population by diverting more youth to community programs and informing Judges of the issues caused by overpopulation.
2. No youth should have to sleep on the floor.
3. Committed and detained girls should not be intermingled.
4. Facility operating procedures must be implemented to ensure that basic custodial responsibilities are fulfilled. This includes ensuring that girls have underwear and that common areas remain clean.
5. DJS should move the committed care program out of the Waxter facility to create sufficient space for detained youth.
6. Youth with mental health issues should not be accepted at Waxter.

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<sup>4</sup> <http://www.djs.state.md.us/quality-assurance/qir-waxter.pdf>

#### 4. Physical Plant and Basic Services

##### a. Physical Plant

The bathroom project was completed in the end of February. The bathrooms are a significant improvement over the old ones.

The building is antiquated and cannot safely house the number of youth sent to the facility.

##### b. Basic Services

Youth complained both in interviews and grievances that they were not receiving proper night clothes and underwear.

#### **Applicable Standard**

**Md. Standards for Juvenile Detention Facilities 5.6.5.2** *Youth shall be provided the opportunity to have three sets of clothes per week and clean underclothes daily.*

#### 5. Education

##### a. General

The social studies teacher began teaching a new career class to the committed youth.

One youth complained she was not receiving education for three weeks while she resided in the tour office for safety concerns.

##### b. Vocational Education

A teacher is currently working with Anne Arundel Community College to offer vocational training programs for the committed youth.

#### 6. Rehabilitative and Recreational Programming

##### a. Therapeutic Program

The mental health clinicians were trained in Dialectical Behavioral Therapy ("DBT") at the end of January. According to the facility Superintendent, the mental health clinicians plan to train residential care staff in DBT this quarter and implement the new therapeutic model as soon as possible. The implementation of DBT has been in the planning stage for over 1 year.



There are no stationary surveillance cameras at Waxter. After the last day of the 3<sup>rd</sup> quarter Waxter acquired one hand-held video camera to videotape incidents. The camera was broken by a resident 2 months later.

#### **Applicable Standard**

**Md. Dept. of Juvenile Services Videotaping of Incidents Policy RF-05-07** *DJS employees shall videotape room extractions, escorts to seclusions, use of restraints, or other critical incidents that relate to the safety and security of a residential facility. Incidents shall be videotaped unless videotaping of the incident compromises the safety and/or security of youth and/or employees.*

#### **f. Seclusions**

Seclusions may not be used to punish or sanction youth. Youth may not be secluded to maintain order when there is insufficient staff coverage. Seclusion may only to be used when a youth presents an imminent threat to herself or others.

A review of the seclusion log book for a 4 week period showed 3 separate occasions when 3 or more youth were secluded at the same time and released at the same time. One youth was in seclusion 6 times in a 2 and a half week period. Administrators report seclusion is used to try and prevent fighting.

A review of 12 seclusion files in January and February revealed that most youth were in seclusion while staff observation of the youth noted that the youth was "lying down or sitting calmly." Administrators reported that while youth may have been in their rooms calmly sitting they may still have been verbally threatening to fight if they were released. These threats were not recorded on the tracking forms.

#### **Applicable Standard**

**Md. Dept. of Juvenile Services Policy and Procedure RF-02-07** *Employees of the Department of Juvenile Services (DJS) and DJS-licensed private residential facilities shall establish and maintain a safe and orderly environment within each facility. Crisis Prevention Management (CPM) techniques may be used only by staff who have completed a DJS-approved training program and who provide documentation of completion of semi-annual refresher training. Crisis Prevention Management techniques may be utilized only to: protect or prevent a youth from imminent injury to self and others or to prevent overt attempts at escape. In the event that a youth remains an imminent threat to self or others and the youth's behavior has escalated, restraints or seclusion may be used as a last resort. Employees may not use CPM techniques, including restraints or seclusion, as a means of punishment, sanction, infliction of pain or harm, demonstration of authority, or program maintenance (enforcing compliance with directions).*

A review of the detention log in February indicated that youth threatened each other often and were non-compliant. Staff wrote on more than one occasion youth threatening or non-compliant "again." Youth reported in grievances and interviews that they do not feel safe at the facility.

**a. Aggregate Incidents**

Incident Categories	1 <sup>st</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
1. Youth on Youth Assault	20	22
2. Youth on Youth Assault with Injury	2	5
3. Alleged Youth on Staff Assault	15	10
4. Alleged Youth on Staff Assault with Injury	2	0
5. Group Disturbances (with bodily harm or injury)	0	0
6. Group Disturbances (without bodily harm or property destruction)	0	1
7. Restraints	60	62
8. Restraints with Injury	4	3
9. Seclusions for more than 8 hours	0	0
10. Allegations of Child Abuse Physical	4	5
11. Escapes/AWOL's	0	0
12. Law Enforcement Response to Incidents	1	1
13. Suicide Attempts, Ideation, Gestures, Behavior	38	39

There were a total of 165 incidents this quarter. This is a significant increase from the 59 reported incidents in the 4<sup>th</sup> quarter. However, this is not a significant change from the same period last year.

**b. Incident-Related Procedures, Practices, and Reporting**

There were significant delays, often weeks, in reporting incidents in the beginning of the quarter. DJS headquarters staff assisted Waxter in developing and implementing a new incident reporting process. This significantly improved the timeliness of reporting. The new staff member responsible for entering incidents to the Incident Reporting Database also assists in training staff in reporting accuracy. There are still minor delays in reporting due to the fact that only one staff member is responsible for entering of all incidents. Therefore, when the staff member is not working no one enters incidents.

A new process has been implemented to increase accuracy in tracking seclusions. Administrative staff review seclusion tracking sheets and provide corrective action plans to residential care staff in an effort to improve quality and consistency in reporting of seclusions.

**e. Security Equipment and Practices**

The metal detectors installed in the 3<sup>rd</sup> quarter are not operational.



**Applicable Standard**

**Maryland Rules, Rule 11-112. Detention or shelter care.** *Maximum period of detention or shelter care – continued detention or shelter care pending the adjudicatory or waiver hearing may not be ordered for a period of more than thirty days.*

**c. Population Breakdown by Race/Ethnicity**

	<b>1st Quarter, 2008</b>	<b>2<sup>nd</sup> Quarter, 2008</b>	<b>3rd Quarter, 2008</b>	<b>1<sup>st</sup> Quarter, 2009</b>
<b>Total # of Youth Detained</b>	201	241	237	227
<b>White</b>	57	58	58	47
<b>African American</b>	137	169	167	176
<b>Latino</b>	6	7	8	2
<b>Other</b>	1	7	4	2

Over 77.5% of youth at Waxter this quarter were African American. Throughout the last year the percentage of African American girls at Waxter was consistently around 70%.

**2. Staffing**

Monica Collier recently was recently named Assistant Superintendent at Waxter. Ms. Collier formerly worked at the Baltimore City Juvenile Justice Center and most recently at DJS Headquarters.

Staff and administrators consistently report the need for additional staff members. Staff report that because of limited space, even with a 1:6 staff to youth ratio, the environment is neither safe nor manageable. Additionally, staff report working extensive overtime hours. Staff attribute the overtime to staff being out due to injury and calling in sick.

**Applicable Standards**

**Md. Standards for Juvenile Detention Facilities 5.1.5.5** *(S)taffing levels (should) ensure the proper supervision and safety of residents.*

**3. Safety and Security**

When a youth is placed at Waxter a team comprised of representatives from the nursing, educational, mental health, case management and counseling staff meet to discuss a holistic treatment plan for the youth. At a recent treatment service plan meeting, two court orders were reviewed. In one case, a judge ordered a youth to stay at Waxter for 2 days and after completing the stay to be released home.

As this office has discussed in past reports, judges do not have legal authority to send youth to detention for any reasons other than being a danger to themselves or others or a pre-hearing flight risk. This is a widespread judicial practice throughout the State that DJS must address with the judiciary.

Two out of 5 youth who were asked when they thought they would leave the facility stated that the Judge told them they could be released to the community, but since no family member would pick them up they were sent to detention. These youth should have been sent to shelter care - not detained.

Youth Jane Doe exemplifies the dangers of detaining youth with mental health issues. Youth Doe was directly involved in 35% or 9 of 26 incidents sampled in the beginning of the quarter. Staff report she is a part of or instigates at least 75%-80% of all incidents at Waxter. Youth Doe was in 10 incidents during the last 11 days of the quarter. Throughout the quarter Youth Doe needed a one-on-one staff member to monitor her behavior, she was unable to attend school because of her disruptive, and often violent, behavior, and she assaulted and injured a staff member. As a result, teaching staff had to work with Youth Doe on her unit, the injured staff had to take time off work, and administrative staff had frequent and regular meetings to address Youth Doe's behavioral issues – a tremendous drain on facility resources and a threat to the safety of other youth and staff.

**c. Detention and Pending Placement**

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>	<b>Average Length of Stay</b>
<b>Detention</b>	3 (88, 75, 62 days)	1 (110 days)	13.45 days
<b>Pending Placement</b>	3 (60, 65, 93 days)	1 (133 days)	28.32 days

Waxter does not have the space to allow administrators to classify youth based on offense, age or size. Administrators attempt to separate youth by their status in the adjudication process.



report that if they are in danger of being injured by other youth they stay on the pending placement or committed unit. During the construction period, committed and detention girls slept together in the open dorm room on Unit C.

## **ii. Increase in Incidents**

Overcrowded conditions result in an increase in incidents. In the first two months of the 4<sup>th</sup> Quarter, 2008, staff reported 39 incidents. In the same period this year, staff have reported 72 incidents, an almost 85% increase. Since last quarter, restraint use increased by 36% in the first two months of the quarter.

The facility does not have enough space to separate youth to protect them from one another. Youth interviewed reported that fighting occurs "all the time" or "daily." Many are worried about getting "jumped" or beaten up by other youth. While almost all youths report that staff intervene and try to protect them, there were too many to effectively control.

Staff and youth report that committed and detention youth are also intermingled during the day. Girls are locked in their rooms for hours if a fight is imminent. Sometimes youths stay in an administrative office with staff. One youth reported that she resided in an administrative office for 3 weeks and received no education or programming during that time.

## **iii. Unsanitary Conditions**

Finally, overcrowding leads to unsanitary physical conditions. On a visit on Saturday, February 21, the new bathroom facilities were dirty and unhygienic. Two Monitors observed bloody tissues and garbage on the floor and multiple clogged toilets.

Youths consistently report that they do not have enough underwear and no longer receive night clothes. In one grievance, a youth complained of being disciplined for refusing to leave her room. She would not leave her room because she had no underwear.

In the first quarter of 2007, this Office reported that youth at Waxter were not receiving underwear. The reemergence of the issue indicates that there still is no effective protocol to ensure that youth receive appropriate clothing.

## **b. Inappropriate Placement of Youth**

Inappropriate placement of youth drains facility resources, contributes to overcrowding and increases incidents. The use of consequence beds and insufficient in-state placements for youth with mental health issues contributes to overcrowding and safety concerns at the facility.

Overpopulation remains a risk in the future. While the population decreased by the end of the quarter, the use of "consequence beds"<sup>2</sup> and inappropriate placement of youth are continuing problems which contribute to overcrowding.

In January, sleeping area was limited because dorms were closed<sup>3</sup> while their bathrooms were renovated. Between January 1<sup>st</sup> and February 24<sup>th</sup>, there were more youths than beds on 43 of 55 days. Staff reported that through January and February youths slept on the floor in boats in the common area of the detention unit. Youths reported that when there were not enough boats to go around, they slept on the floor on mattresses.

Construction on the bathrooms was completed in the end of February. The new bathroom facilities are a significant improvement over the old ones. They provide both sufficient area and a measure of privacy for the girls. Even with all dorms reopened, however, the facility continued to be overcrowded.

Overpopulation causes three major problems:

- (1) Youth are inappropriately intermingled;
- (2) Incidents increase; and
- (3) Physical conditions become unsanitary.

#### **i. Intermingling**

Population pressure drives staff to mix pre-adjudication (detention) and post-disposition (committed) girls for sleeping. Particularly when the facility is overcrowded, mixing girls from difference programs is the only way to ensure that most girls have a bed. This practice violates Maryland Human Services Article §9-238.1 (a)(6), which states in relevant part:

*The Department shall serve children...with programming that: ... uses detention and committed facilities that are operationally separate from each other and that do not share common program space, including dining halls and educational or recreational facilities.*

During a monitoring visit on February 24, eleven girls were observed sleeping on the A Unit, reserved for youth in the committed care program. Six of those girls were in detention status and five were in the committed care program. Youth and staff said this practice is common, even after the completion of the bathrooms. Youth in detention

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<sup>2</sup> Youth are ordered to stay in detention as a consequence for violating their parole.

<sup>3</sup> Waxter has three units. The sleeping area in the A unit consists of 14 individual cells. Girls in the committed treatment program sleep here. The B unit is for girls in pre-adjudication status (detention) and consists of 13 individual cells and a dorm sleeping area with 6 beds. The C unit is for girls awaiting placement in a committed care program. The sleeping area consists of one large room with 12 beds. The tour office has one cell. Youth needing special monitoring sleep here.



## INTRODUCTION

Thomas J. S. Waxter Children's Center is a State owned and operated detention/residential treatment facility in Laurel, Maryland. The facility is comprised of one detention unit, one pending placement unit, and one secure committed program for young women under the age of 22. According to the Superintendent, the current maximum population capacity is 46.

## SUMMARY OF CRITICAL FINDINGS

- Incidents increased.
- Population was over capacity.
- No change in services to committed youth since 2<sup>nd</sup> quarter, 2008.
- Bathroom project completed

## FINDINGS

### 1. Population

#### a. Overcrowding

Facility Capacity	High Population	Low Population	Average Daily Population	Average Monthly Population	Number of Days Over Capacity
46*	53	29	41	January 36 February 39 March 39	39

\*Facility capacity from January through February was 34. When all units were reopened after the completion of the bathroom project the capacity returned to 46.

Waxter was over population capacity for 44% of the 1<sup>st</sup> quarter.

During the 3<sup>rd</sup> quarter, 2008 Waxter's population was low relative to other quarters during the year. Staff stated this was due to increased efforts to divert youth to the community. There was a sharp rise in the population this quarter resulting in youth sleeping in "boats"<sup>1</sup>, sleeping on the floor, and commingling of committed and detained youth.

<sup>1</sup> Fiberglass sleeping "shells" into which a mattress is inserted.



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**THOMAS J.S. WAXTER CHILDREN'S CENTER**  
**JANUARY – MARCH, 2009**

**Facility:** Thomas J.S. Waxter Children's Center  
375 Red Clay Road, SW  
Laurel, MD 20724  
Administrator: Mark Hamlett

**Date(s) of Visit:** January 6 and 8  
February 10, 18, 21, 24 and 27  
March 12 and 27, 2009

**Reported by:** Moira Lee, Marlana Valdez, Claudia Wright, Nick Moroney,  
and Tanya Suggs  
Monitors

**Persons Interviewed:** Administrators, Case Managers, Clinicians, Medical Staff,  
Residential Care Staff, Youth

**Date of Report:** April 2009



## 6. Youth Advocacy

The advocate for TWH visits the program 2 times per week. Administrators report the advocate is very attentive to youth in the program.

### UNABATED CONDITIONS

1. Administrators and DJS case managers should develop a clear policy regarding clothing to be sure that youth do not go without adequate clothing.
2. Administrators, DJS Headquarters staff and regional directors should develop a policy that insures that each girl attends the school best suited to her needs.

Administrators have planned a round table discussion in April with staff from other state programs serving girls. The round table will focus on why girls AWOL and possible prevention methods.

#### 4. Physical Plant and Basic Services

##### a. Fire Safety

The Way Home is located on the third floor of the main Mountain Manor building. This building has sprinklers, and all fire certifications are in order.

##### b. Basic Services

Staff and youth have indicated difficulty in obtaining the girls' clothing from the Department of Juvenile Services in a timely manner.

#### **Applicable Standard**

**COMAR 14.31.06.D.1** *The licensee shall ensure that the children have an adequate supply of clean, comfortable, well-fitting clothes, and shoes for indoor and outdoor wear.*

#### 5. Education

Youngsters at TWH go outside the program to school. Some of the girls go to specialized schools, which have been determined to meet their needs, and some attend the local public school. Administrators have expressed frustration because they are unable to ensure that girls are able to go to a school that best meets individual needs. Currently, all residents are in programs which suit their needs.

Girls at TWH come from several DJS regions of Maryland. Some regions make funds available for the girls to go to specialized schools. Some do not, and those girls have no alternative but to go to the assigned school for the Mountain Manor neighborhood. Because TWH incorporates a therapeutic model, interventions are important throughout the day. The school program takes up the largest part of the day, and when the school program does not support, or interferes with, the therapeutic model, intervention is inconsistent and success is more difficult or impossible.

#### 5. Recreational Programming

Girls participate in a wide variety of activities both on and off campus. In the evenings, there are community groups, NA meetings and individual counseling. Parents visit twice per week. Weekend activities include field trips and shopping.



- b. More appropriate and effective crisis intervention training should be provided

**3. Safety and Security**

- a. The Department should finalize Commitment Care Standards for review.

**4. Physical Plant and Basic Services**

- a. The driveways at Savage Mountain and Backbone Mountain should be resurfaced.
- b. The shower house at Green Ridge should be remodeled.
- c. The gym floor at Green Ridge should be upgraded.
- d. The tennis shoes purchased for the youth should be of better quality.

**5. Rehabilitative and Recreational Programming**

- a. Community Case Managers should make site visits to see the youth in their caseload rather than having one Community Case Manager see all of the youth from their county, or doing "courtesy" visits for other Community Case Managers.
- b. Community Case Managers should follow the same youth through their entire involvement with the Department of Juvenile Services.
- c. Groups should be limited to nine youth (maximum of ten) as prescribed in the PPC model.

**6. Education**

- a. Extensive vocational training, certification, and job placement should be provided to facilitate entry into the work force.

## **Applicable Standards**

**Department of Juvenile Services Detention Standards 4.3.2.1** *The Department shall be responsible for acquiring, either directly or by agreement or contract with a public or private mental health agency, necessary mental health care and services ...*

### **8. Youth Advocacy, Internal Monitoring and Investigation**

The Child Advocate makes weekly rounds to each Center. The grievances received by this Monitor during the quarter indicated that the Child Advocate addressed the issues appropriately. DJS assigns an Office of Investigations and Audits (OIA) Investigator to the Youth Centers, and he responds as needed.

## **RECOMMENDATIONS**

### **1. Staffing**

- a. DJS should fill direct care staff vacancies.
- b. DJS should contract for additional Mental Health Counselors to meet youth needs.
- c. DJS should regionalize training scheduling to be more responsive and timely in providing staff training.

### **2. Safety and Security**

- a. A policy and procedure should be developed and followed to ensure that all vehicle keys are secured.

## **CONDITIONS UNABATED FOR MORE THAN 30 DAYS**

### **1. Population**

- a. Youth admitted into the Youth Centers should meet the written admissions criteria. Youth with significant juvenile crime histories and those not meeting the IQ, behavioral or mental health criteria should not be admitted.

### **2. Staffing**

- a. DJS should seek to be removed from MCTC.



**Savage Mountain:** Various youth participated in a Community Service project at the Frostburg Glendening Park. Other youth attended the ACIT basketball tournament, took a field trip to Big Run State Park and Savage River Dam, or participated in the teambuilding exercises at Frostburg State University. One group went on a Reflections camping trip.

**Meadow Mountain:** Youth participated in a number of off campus activities including: sled riding, snow tubing, caving, hiking, a trip to the Pittsburgh Zoo, teambuilding at FSU, and participation in the Cultural Event Series at FSU.

**Backbone Mountain:** Youth helped out at the St. Michaels Church fish fry and visited the Dennett Road nursing Home. Others helped unload trucks at the Food Pantry in Oakland Md. Some youth were able to attend the ACIT tournament at FSU. Others participated in FSU teambuilding.

### c. Parental Involvement

Each Center also holds periodic "family days" to give family members the chance to visit the Center and participate with youth in special activities. Youth make weekly contact with parents/guardians via phone and can earn home visits as they near completion of the residential program. Each Center now has video capability so that conferences can be held with parents and/or Community Case Managers when on site visitation is difficult.

## 7. Medical and Behavioral Health

The DJS Youth Centers contract with the Allegheny Health Department for health services. As the Youth Centers have enrolled more troubled youth, the caseload for the Mental Health Clinicians at the Centers, and crisis counseling sessions have increased significantly, and there is a need for additional Mental Health Counselors to handle the need.

For example, in addition to a caseload of only 19 at Green Ridge, where there are 40 youth, there was 1 crisis referral from July through September of 08. From October through December, there were 6 crisis referrals, and the caseload was 20. Between January and March of this year, the caseload increased to 24, and the referrals for crisis intervention counseling increased to 16.

At Backbone Mountain where there are 48 youth, the caseload was 25 in February of 08, and 9 youth were on psychotropic medications. In February of 09, the caseload had increased to 30 and 18 youth were on psychotropic medications.

## **Applicable Standard**

**Department of Juvenile Services Policy CJ-1-05.1.** *Youth who are committed to the Department of Juvenile Services (DJS) for placement, and youth committed to community based residential programs shall be assigned a Community Justice Case Management Specialist. DJS operated residential programs shall also assign a Facility Case Management Specialist. The Facility Case Management Specialist shall maintain daily contact with the youth and be responsible for the coordination of all services within the facility. In collaboration with the Community Justice Case Management Specialist and the facility Interdisciplinary Treatment Team, the Facility Case Management Specialist shall develop a Treatment Service Plan (TSP) and ensure that prescribed services are made available and delivered in accordance with the Department's Treatment Service Plan (TSP) Policy.*

*(2) The Community Justice Case Management Specialist shall:*

*(vi) Meet at least monthly with youth who are in residential care in Maryland to assess treatment progress and plan for community reintegration.*

### **b. Recreational Programming**

The daily schedule breaks large muscle exercise into the following three categories:

- Therapeutic Recreation - organized sports; allows youth to participate in these activities in a structured team approach;
- Ropes - involves team and individual skills building activities structured around an indoor and outdoor adventure challenge component;
- Gym - open format that allows youth to be involved in activities from individual circuit training to small group skills building activities such as basketball, softball, home run challenges, hot shot, and three point contests.

A combination of all three types of recreational programming allows all youth to receive daily large muscle activity without conflicting with other daily scheduled programming.

The Reflections/Ropes Program is undergoing renovation after administrators determined that the programming was not being fully or effectively implemented.

The Youth Centers incorporate as much off-campus recreation, educational and treatment related activities as they can given the staffing, and transportation limitations. Examples of activities include:

**Green Ridge:** Various youth participated in Community Service by helping out at the Rocky Gap State Park, with the Red Cross, with the Healing Hunger program, and Angel Food Ministries. Field trips included the Pittsburgh Zoo, Flight 93 Memorial, a bike trip and a trip to Dolly Sods in West Virginia.



that youth will commit to abstinence from drugs or alcohol. Instead it encourages honest dialogue with youth about their relationship with drugs and alcohol, and in taking responsibility for their decisions.

Youth Center treatment staff members conduct monthly interdisciplinary team meetings to review the treatment needs of each youth. Direct care staff team members from each group meet on a weekly basis to review the progress and issues concerning each individual in the group.

The presence of the "gang mentality" in the Centers places pressure on youth not to "snitch" on other youth, and thus affects the treatment process. Gang loyalty sometimes predominates in youth interactions with the Centers, especially as youth know that they will return to their communities where gang influence and potential consequences for snitching is a very real concern.

The challenge as expressed by DJS administration is to move beyond gang identification and become more effective in treatment intervention.

DJS staff now report that there is increased emphasis on aftercare, and that initial planning for aftercare is taking place in all Centers at the time of enrollment. Community Case Managers' participation in aftercare and visitation of youth in the Centers has increased somewhat.

Many youth in the Centers do not receive monthly visits from their assigned Aftercare Worker. Even when visits are made, most youth do not see their Aftercare Worker. Instead, a different Community Case Manager makes a "courtesy visit". Prince Georges County has one person who visits all of the youth from PG County in the Youth Centers, regardless of who DJS assigned to be the youth's Aftercare Worker.

This practice significantly diminishes the quality of contact with youth. It is important for continuity, relationship development, and communication that the same Community Case Manager follows youth through the entire process of involvement with the Department. Regular and frequent Community Case Manager contact with youth and family is crucial to the overall success of the treatment experience. Baltimore City consistently has the lowest rate of Case Manager/Aftercare Worker visitation at the Youth Centers.

In January, out of the 142 youth placed in the Centers for whom an on-site visit was required, only 74 youth received visits. Of those 74 visits, 36 were courtesy visits. These figures assume that all of the youth who were either admitted or released during the month, 38 in all, were seen while in the community. A few youth were seen while on home passes from the Centers. In February, 113 out of 144 youth were visited on-site by Community Case Managers, with 71 being "courtesy visits." In March, 108 youth were visited by Community Case Managers, and 67 of those visits were "courtesy visits."

**a. Special Education**

The Centers enroll many youth who require special educational services. Typically, about a quarter to a third of the youth in the Centers, require some level of special education. Some youth are at such a low level of cognition and reading that they cannot read or understand the basic questions presented during intake. These youth require much more individualized treatment intervention, and tend to become scapegoats, and the target of others' frustrations in the group.

**b. Classes**

The Youth Centers Educational Program provides 4 hours of classroom instruction each school day. Youth also receive drug/health education, and very limited vocational instruction. Youth not returning to school are not prepared to enter the workforce. Physical Education credit is given at Green Ridge, Savage Mountain, and Backbone Mountain. Meadow Mountain is in need of a Physical Educational Instructor.

**c. General Educational Development Program (GED), College Courses**

Typically, about 30% of the youth in the Centers enter the General Educational Development Program. Approximately 70-75% of the youth that take the GED exam passes the test and earns their diplomas.

The Honor Academy is a Learning Partnership between Garrett County Community College and DJS. The Youth Centers houses Honor Academy students at Backbone Mountain in a cabin on the property. In addition to regular treatment programming, the youth participate in some college preparation courses. The Honor Academy seeks to enroll as many youth as qualify, which has ranged from 10 to 16 thus far.

**d. Special Educational Event**

A number of youth participated in the Black History Month contest held at each Center, and a few went on to present at a forum held by the Youth Centers at Frostburg State University on March 10<sup>th</sup>.

**6. Rehabilitative and Recreational Programming**

**a. Therapeutic Program**

The therapeutic intervention modality at the Youth Centers is Positive Peer Culture, (PPC), and EQUIP. Recently the treatment approach known as The Seven Challenges has been added to the Substance Abuse aspect of programming. The Seven Challenges takes a realistic approach to helping youth in that it does not assume



#### 4. Physical Plant and Basic Services

##### a. Fire Safety

The Youth Centers hold fire drills as required. All of the Centers hold current Fire Marshal Inspection Reports.

##### b. Physical Plant

The driveways at Backbone Mountain and Savage Mountain are in need of resurfacing. The shower facility at Green Ridge is in need of replacement, and the gym floor is also in need of replacement.

#### **Applicable Standard**

**COMAR 14.31.06.07.C(1).** *The licensee shall maintain all structures and grounds in good condition, free from health or safety hazards.*

##### c. Basic Services

All of the Youth Centers have current Health Department inspections.

The youth and staff in the Centers consistently comment that the tennis shoes and boots are of low quality and wear out very quickly. Purchasers note that they are forced to use State approved vendors even if that means spending more money in the long run by replacing cheap shoes and boots, etc. with more cheap products.

#### **Applicable Standards**

**Maryland Department of Juvenile Services Detention Standards 5.6.5** *The stored inventory of clothing, bedding, and linens shall exceed that required for the facility's maximum youth population. An inventory system shall be maintained to ensure the consistent availability of clothing, bedding, and linens to replace items that are lost, destroyed, or worn out.*

##### **5.6.5.2 Clothing**

*Youth shall be provided the opportunity to have three complete sets of clean clothing per week.*

**COMAR 14.31.06.10.D.** *The licensee shall ensure that the children have an adequate supply of clean, comfortable, well-fitting clothes, and shoes for indoor and outdoor wear*

#### 5. Education

The youth in the Centers typically do well in the education program, gaining on the average between two and four months for every month that they would expect to gain in public school.

Over the past 4 years since being required to accept much more challenging youth, the Youth Centers have experienced significant increases in the number of assaults and behavior necessitating restraint intervention. Green Ridge in particular has experienced a dramatic increase. This may be due in part to Mountain Quest, which is a relatively short-term intensive intervention program that enrolls some very challenging youth. The Youth Centers must be credited with more complete reporting, which influences the data to some extent.

**b. Incident-Related Procedures, Practices, and Reporting**

The Youth Center Staff do not video tape incidents and do not have video taping capability. The DJS video taping policy is impractical for the Youth Centers to follow. Stationary surveillance cameras should be installed instead.

One escape occurred because a staff member had a key ring including his car keys on his person. Youth took the keys unbeknownst to the staff. A policy and procedure should be developed and followed to ensure that all vehicle keys are secured.

The Department continues to lack Commitment Care Standards. DJS directs the Youth Centers to follow the Youth Center Procedure Manual and DJS Policies and Directives.

**Applicable Standards**

**Maryland Department of Juvenile Services Policy RF-05-07.** *The Department of Juvenile Services (DJS) employees shall videotape room extractions, escorts to seclusion, use of restraints or other critical incidents that relate to the safety and security of a residential facility. Incidents shall be videotaped unless videotaping of the incident compromises the safety and/or security of youth and/or employees. The Department encourages the video taping of incidents to de-escalate incidents and to prevent further misbehavior and the use of physical restraint.*

**Maryland Department of Juvenile Services Standards of Conduct 2.12** *An employee shall take all reasonable means to prevent escapes....*

**Maryland Department of Juvenile Services Detention Standards 5.1.2.2** *Security refers to the provision of staff and resident safety and to the prevention of escape from the facility. Security shall also include measures to prevent persons from entering the facility or grounds illegally. Means to ensure security shall consist of physical features of the buildings and grounds, policy and procedures, and staffing arrangements.*

**Maryland Department of Juvenile Services Detention Standard 3.1.2** *Any residential program utilized by the Department as a residential alternative to secure detention must be approved for use by the Department, must be licensed, and must conform to all requirements as articulated in COMAR*



### **Applicable Standards**

**Maryland Department of Juvenile Services Detention Standards 5.1.3.** *Staffing arrangements shall aim to provide a safe, humane, and caring environment.*

**Maryland Department of Juvenile Services Detention Standards 2.2.1.** *The Department shall ensure that designated classes of departmental and vendor employees are trained according to the standards established by the Maryland Correctional Training Commission.*

**Maryland Correctional Training Commission Standards 12.10.1.02.B.3** *An individual may not legally exercise the duties of a mandated position until the individual has met selection and training standards of the Commission.*

### **3. Safety and Security**

#### **a. Aggregate Incidents**

**Note:** The table below does not reflect the actual total number of incidents and some incidents involve more than one category. For example, a youth on youth assault may also include a restraint.

<b>Green Ridge</b>	<b>2005 *</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
Youth on Youth Assaults	6	17	22	31
Restraints/Use of Force	5	7	14	47
<b>Total</b>		25	38	80

<b>Savage Mountain</b>	<b>2005 *</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
Youth on Youth Assaults	4	16	19	20
Restraints/Use of Force	5	5	16	15
<b>Total</b>		23	38	39

<b>Meadow Mountain</b>	<b>2005 *</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
Youth on Youth Assaults	3	19	17	19
Restraints/Use of Force	9	7	11	14
<b>Total</b>		26	29	42

<b>Backbone Mountain</b>	<b>2005 *</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
Youth on Youth Assaults	5	19	22	23
Restraints/Use of Force	12	26	24	28
<b>Total</b>		48	48	55

**\* Incident data available for 3 of 4 Quarters, April through December 05.**

<b>Backbone Mountain</b>	January, 2009	February, 2009	March, 2009	Total Overtime Hours and Cost
Total Positions	60	60	63	
Total Positions filled	55	55	54	
Total Vacancies	5	5	9	
Staff out	1 sick leave	0	1 death of staff	
Overtime hours/cost	89.5/\$2,303.27	48.5/\$1,358.65	156.6/\$4,035.60	294.6/\$7,697.52

<b>Youth Ctr. Totals:</b>	<u>Jan.</u>	<u>Feb.</u>	<u>Mar.</u>	<u>Total</u>
<b>Overtime hours:</b>	386.3	235.1	605.9	<b>1,227.3</b>
<b>Overtime cost:</b>	\$9,586.18	\$6,041.80	\$15,133.05	<b>\$30,761.03</b>

The Youth Centers have hired additional direct care staff for each Center, but still have a significant number of vacancies. As of this writing there are 28 Youth Center staff vacancies as noted above. Most of the new staff the Youth Centers hired in 2008 have attended 80 hrs of training provided by the Region III trainers, medical certification training, and Entry Level Training, but have not received full certification.

Staff shortage affects programming and the ability to avail youth of off campus therapeutic activities. When the Centers undertake off campus, they often require staff overtime, and the Department greatly discourages overtime because of the expense.

**b. Staff Training**

New staff hires in the Youth Centers have had to wait several months before training was scheduled by DJS Headquarters. DJS should regionalize training to be more responsive and timely in addressing training needs. Additionally, because of the ongoing need for training, DJS should provide two additional trainers in Region III to handle the training requirements.

DJS provides a form of crisis intervention training called "CPM." Staff and administrators have complained numerous times not only to this Monitor, but internally as well, about the inadequacy of the training. The training does not prepare staff to effectively control bigger and more aggressive youth, particularly if the youth is against a wall, or advancing toward another, and staff cannot get behind the youth. The training also does not address the use of handcuffs and leg shackles which are used at times with particularly aggressive youth. The training in de-escalation is also inadequate. In fact, CPM training is no longer on the approved list of behavioral intervention training courses in the COMAR regulations.



**Applicable Standards**

**DJS Youth Centers Procedure Manual, DJS Youth Centers Guidelines for Admission.**

*The nature of the program and the fact that it is staff secure requires that youth be capable of a certain level of reasoning, decision making, and emotional maturity. It is also vital that students who are accepted will not present a threat to the other students or to the staff.*

**DJS Youth Centers Procedure Manual, DJS Youth Centers Guidelines for Admission.** *Other issues, which generally should be considered impediments for admission, are severe aggression and/or explosive personality disorder, since staff and student protection are of paramount importance. Students with histories of assaultive/violent behavior who pose a threat to the safety of students and staff or who have a history of absconding from other programs are generally not appropriate.*

**2. Staffing**

**a. General**

<b>Green Ridge</b>	January, 2009	February, 2009	March, 2009	Total Overtime Hours and Cost
Total Positions	50	50	51	
Total Positions filled	45	45	43	
Total Vacancies	5	5	8	
Staff out	1 sick leave	1 sick leave	1 sick leave	
Overtime hours/cost	102.4/\$2,572.63	99.7/\$2,445.66	225.9/\$5,510.99	428/\$10,529.28

<b>Savage Mountain</b>	January, 2009	February, 2009	March, 2009	Total Overtime Hours and Cost
Total Positions	50	50	51	
Total Positions filled	44	44	45	
Total Vacancies	6	6	6	
Staff out	0	0	0	
Overtime hours/cost	125.3/\$3,065.46	63.9/\$1,672.39	128.5/\$3,360.96	317/\$8,098.81

<b>Meadow Mountain</b>	January, 2009	February, 2009	March, 2009	Total Overtime Hours and Cost
Total Positions	55	55	52	
Total Positions filled	46	46	47	
Total Vacancies	9	9	5	
Staff out	0	0	0	
Overtime hours/cost	69.1/\$1,644.82	23.0/\$565.10	94.9/\$2,225.50	187/\$4,435.42

White	(21) -31%	(16) -25%	(15) -23%
African American	(34) -51%	(40) -63%	(39) -60%
Latino	(9) -13%	(6) -10%	(10) -15%
Other	(3) -5%	(1) -2%	(1) -2%

<b>Savage Mountain Youth Center</b>	3 <sup>rd</sup> Quarter, 2008	4 <sup>th</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
Total Quarterly Population	52	51	59
White	(11) -21%	(10) -20%	(9) -15%
African American	(40) -77%	(40) -78%	(50) -85%
Latino	(1) -2%	(1) -2%	
Other			

<b>Meadow Mountain Youth Center</b>	3 <sup>rd</sup> Quarter, 2008	4 <sup>th</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
Total Quarterly Population	65	55	57
White	(26) -40%	(20) -36%	(22) -38%
African American	(37) -57%	(34) -62%	(34) -60%
Latino	(2) -3%	(1) -2%	(1) -2%
Other			

<b>Backbone Mountain Youth Center</b>	3 <sup>rd</sup> Quarter, 2008	4 <sup>th</sup> Quarter 2008	1 <sup>st</sup> Quarter 2009
Total Quarterly Population	66	79	73
White	(20) -30%	(18) -23%	(18) -25%
African American	(39) -59%	(58) -73%	(52) -71%
Latino	(4) -6%	(2) -3%	(3) -4%
Other	(3) -5%	(1) -1%	

On pages 2 and 3 under Population, the term Average Daily Population in the table is incorrect. It should be Total Quarterly Population. This is stated correctly under the Green Ridge Youth Center population section.

On pages 5 and 6 under Safety and Security: According to the DJS incident database, the finding for Youth-on-Youth Assaults and Physical Restraints does not match for the years referred to in the table.

The number of African American youth at the Youth Centers' has increased over the past two quarters (except at Meadow Mountain). The number of Latino and White youth has been relatively stable or declined.



## INTRODUCTION

The DJS Youth Centers provide commitment care services in four separate facilities:

**Green Ridge**, located in Allegany County near Flintstone, provides 40 beds and serves western Maryland male youth in three separate programs – Mountain Quest, a 90-day intensive adventure based treatment impact program; Revelations, a substance abuse program lasting a minimum of 120 days, and a therapeutic program averaging six to eight months.

**Savage Mountain**, located in Garrett County near Lonaconing, provides 36 beds in a six to eight month treatment program, and serves male youth primarily from non-western Maryland counties.

**Backbone Mountain** provides 48 beds. Thirty-two beds are currently dedicated to the six to eight month treatment program, and 16 beds are dedicated to youth in the college program. Backbone Mountain serves male youth residing primarily in non-western Maryland counties.

**Meadow Mountain** provides 40 treatment program beds and specializes in treatment of addictions in a six to nine month program. Meadow Mountain serves male youth residing primarily in non-western Maryland counties.

## FINDINGS

### 1. Population

#### a. General

The combined population capacity of the Youth Centers is 164. As the Department of Juvenile Services has lost treatment resources, attempted to reduce out of state placements, and sought to utilize residential placement as a last treatment resort, the Youth Centers have been required to enroll increasing numbers of youth who exceed prior acceptance criteria. Several youth have histories or convictions of serious threat and violence, including carjacking, robbery with a deadly weapon, or hand gun violation. Reportedly, between a quarter and a third of the youth have histories of gang involvement. Youth demonstrating more serious mental health issues, and/or low educational functioning are increasing.

#### b. Population Breakdown by Race/Ethnicity

<b>Green Ridge Youth Center – 6-9 mo. Program and Mt. Quest combined</b>	<b>3<sup>rd</sup> Quarter, 2008</b>	<b>4<sup>th</sup> Quarter 2008</b>	<b>1<sup>st</sup> Quarter 2009</b>
Total Quarterly Population	67	63	65



**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**DEPARTMENT OF JUVENILE SERVICES YOUTH CENTERS**  
**JANUARY – MARCH, 2009**

**DJS Youth Centers Headquarters**      326 Queen City Drive  
Cumberland, Maryland 21502  
Dale Schroyer, Regional Director  
Bob McKelvie, Deputy Regional Director

**Facilities**

Green Ridge YC  
10700 15 Mile Creek Road NE,  
Flintstone, MD 21530  
Judy Hodel, Supervisor  
Visits: January 27, February 20,  
March 10, 2009

Savage Mountain YC  
164 Freedom Lane  
Lonaconing, MD 21539  
Steve Northcraft, Supervisor  
Visits: January 8, 26,  
February 17, March 11, 2009

Meadow Mountain YC  
234 Recovery Rd,  
Grantsville, MD 21536  
Bill Pickerel, Supervisor  
Visits: January 9, February 11  
March 9, 2009

Backbone Mountain YC  
24 Camp 4 Road  
Swanton, MD 21562  
Dick Gero, Supervisor  
Visits: January 14,  
February 3, 19, March 23, 2009

**Reported by:**                      Tim Snyder, Monitor

**Persons Interviewed:**        Various staff including: Deputy Regional Director, Center Supervisors, Case Managers, Residential Advisors, Support Staff, and Youth

**Date of Report:**                April 2009



## **b. Recreational Programming**

Youth participate in a number of structured recreational and leisure programs but would benefit from a wider variety of athletic activities - only basketball is available at the facility because of space limitations. There is a posted schedule of activities. Youth are allowed to go on off-campus trips, including to off-campus NA meetings. The home is located across the street from a lovely urban lake – this is a natural and inexpensive resource for athletic activities such as walking or jogging. Staff would like to take youth to this area more often, but due to limited staff they are unable to do so.

The Facility Advisory Board for WDSH has created a “Topics for Enrichment” series. Advisory Board members will lead sessions for youth one time per month. Some suggested sessions include: financial literacy, preparing for college, and a field trip to the naval academy. Only one session, dealing with interviewing skills, occurred this quarter.

## **7. Youth Advocacy**

The child advocate visits WDSH regularly and reports that conflicts generally are worked out informally between staff and youth.

### **RECOMMENDATIONS**

1. Increase the number of PINs allotted to WDSH.
2. Offer additional physical/athletic activities.

## **5. Education**

### **a. Type III School (School within or operated by the facility)**

The educational program at WDSH is licensed by the Maryland State Department of Education. There is a classroom, where all education takes place located on the second floor of the facility. Two of the teachers from WDSH were reassigned this quarter to other DJS facilities. The teachers from the Day Reporting program at WDSH are now teaching youth in the committed care drug rehabilitative program. Education consists of group lecture and class discussion as well as individual packets of materials.

#### **1. Records**

The teacher supervisor reported she receives most records from youths' former schools promptly.

#### **2. Educational Plan**

IEP's are received promptly and updated regularly by the teacher supervisor.

#### **3. Classes**

Youth participate in class within 24 hours of admission. Youth were observed in an integrated Math and Language Arts class. All but one youth participated and were engaged.

## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

WDSH did not have a treatment model for much of last year. Staff have since been trained in and have implemented Positive Peer Culture. There are no plans to implement EQUIP at this time.

DJS adopted the "Seven Challenges" treatment model and curriculum for all residential substance abuse programs operated by the State. Currently the "Seven Challenges" model is under review for designation as an Evidence-Based Practice by the National Registry of Evidence-Based Practices (NREBP) of the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). Early studies have shown "Seven Challenges" to significantly reduce continuing substance abuse by youth, particularly those with co-occurring mental health diagnoses. WDSH staff were trained in the Seven Challenges treatment model at the end of March and shortly thereafter implemented the program.



## 2. Staffing

Insufficient staffing has significantly affected the number of activities and incidents at WDSH. One staff retired this quarter and the PIN was eliminated. In the past year WDSH has had 4 PINS eliminated. Staff report that in order to safely monitor youth there should be 3 residential care staff on duty at all times and 4 staff to take 20 youth on an activity outside the facility. Currently, there are only two staff on duty at all times. The result of having only 1 staff to supervise 10 youth (1:10 staff to youth ratio) is fewer activities for all youth and, according to staff, increased incidents.

## 3. Safety and Security

Administrators report that the staff shortage has led to an increase in incidents. While WDSH has few incidents overall, this quarter there were 5 incidents, a slight increase from 3 reported last quarter. The incidents included an attempted AWOL by 3 youth and two successful AWOL's involving three youth. Restraints and seclusions are not used at WDSH.

### a. AWOLS

One AWOL occurred when a youth pushed passed staff members as they were entering the house. The staff was injured trying to block the door when the youth was running past.

The second incident involved two youth leaving the premises through a window in the day room. This incident resulted in two staff members being disciplined.

There were also 3 attempted AWOL's this quarter.

## 4. Physical Plant and Basic Services

### a. Fire Safety

This facility is equipped with fire sprinklers. Youth and staff participate in fire drills once per month.

### b. Physical Plant

The facility is consistently clean and well maintained. WDSH provides a comfortable environment for youth.

## INTRODUCTION

William Donald Schaefer House (WDSH) is a 20-bed, 90-day substance abuse treatment program for committed boys. It is located near Druid Hill Park in northwest Baltimore City, Maryland.

## SUMMARY OF CRITICAL FINDINGS

- Implementation of Positive Peer Culture
- Increase in population
- Staff shortage

## FINDINGS

### 1. Population

#### a. General

Facility Capacity	High Population	Low Population	Average Daily Population	Average Monthly Population	Number of Days Over Capacity
20	18	12	15	<b>January</b> 15 <b>February</b> 14 <b>March</b> 17	0

The population has increased at WDSH over the quarter. In previous quarters youth were referred to WDSH with incomplete referral packets, which delayed acceptance of youth to the program. Staff indicate they are receiving more complete referral packets which has helped to increase WDSH's population.

#### b. Population Breakdown by Race/Ethnicity

	1st Quarter, 2008	2 <sup>nd</sup> Quarter, 2008	3rd Quarter, 2008	1 <sup>st</sup> Quarter, 2009
<b>Average Daily Population</b>			14	15
<b>White</b>	10	7	7	10
<b>African American</b>	22	25	20	25
<b>Latino</b>	5	6	3	1





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**WILLIAM DONALD SCHAEFER HOUSE**  
**JANUARY – MARCH, 2009**

**Facility:** William Donald Schaefer House  
907 Druid Park Lake Drive  
Baltimore, MD 21217  
Administrator: Martin Callum

**Date(s) of Visit:** January 12 and 15, March 6, 2009

**Reported by:** Moira Lee  
Monitor

**Persons Interviewed:** Administrator, Program Director, Residential Care Staff,  
Teacher, and Youth

**Date of Report:** April 2009

- b. Vitreous china fixtures should be replaced with a substance that cannot be broken or used by youth to harm self or others.
- c. The pods should have acoustic material installed to dampen the excessive noise created by the removal of carpeting.
- d. All the doors in the facility should function as designed.
- e. The control room computer should be fixed to indicate accurately whether doors are locked or unlocked.

**4. Education**

- a. A post GED program should be offered.
- b. School should remain open during the high youth anxiety time of the holidays when additional staffing and programming is needed.

**5. Rehabilitative and Recreational Programming**

- a. Additional programming is needed, especially during evenings and weekends.

**6. Youth Advocacy, Internal Monitoring and Investigations**

- a. DJS should cease the policy of hampering the work of the JJMU Monitors by escorting Monitors on their visits to DJS facilities.



## UNABATED CONDITIONS

One of the most significant factors that affect the safety, security, programming and the overall care of youth is the quantity and quality of staffing. The Department should make priority fiscal decisions based on achieving its own stated staffing analysis.

WMCC provides only one staff member each for the two 6 bed pods, even when overpopulated. DJS replies that a 1:6 or a 1:8 ratio is industry standard. Staff report, and this Monitor agrees, that having only one person on the locked pod, especially when 8 youth are present, presents a risk to safety and security, especially as two youth have no individual sleeping rooms and must be maintained together in the day room.

DJS should maintain its own recommended staffing level at WMCC, especially on second shift and on weekends when administrative staff and teachers are not in the facility. Many extra responsibilities demand staff attention and often stretch staff availability for direct supervision or crisis intervention. Staff on second shift do laundry, handle any medical calls, attend to family visitation, complete required paperwork, and often receive youth in the facility. Two staff members are supposed to be present for intake of youth, and this does not always occur.

### **1. Population**

- a. The purpose of detention should be maintained and not used as weekend consequence or punishment

### **2. Staffing**

- a. Recruiting, hiring and training should continue at WMCC so that DJS recommended staffing levels can be maintained.
- b. Double staffing should be maintained on all units, with three staff on pod C when the population is over 12, especially on second shift and weekends when administration and education staff members are not available.
- c. A Training Coordinator should be provided as recommended by the DJS Office of Quality Assurance and Accountability.
- d. The intake of youth into the facility should be attended by two staff as required.

### **3. Safety/Security**

- a. The outside recreation area should receive additional fencing to provide security so that youth can receive regular outdoor recreation.

## **Applicable Standard**

**DJS Detention Standard 7.3.2 Access to information:** *The Department shall ensure that internal and independent monitors and auditors are afforded the broadest possible access, relevant to their particular function and consistent with notions of privacy, to all appropriate information, records, data, and to staff and youth of the facility that is being monitored.*

## **RECOMMENDATIONS**

1. A PIN position should be provided for the 2<sup>nd</sup> Addictions Counselor position, and the position should be filled.
2. A PIN position should be provided for the 2<sup>nd</sup> Social Worker position, and the position should be filled.
3. A dedicated Recreational Specialist position should be provided.
4. Completion of the needed fencing upgrades should be funded and completed.
5. Staff members must follow safety protocol in ensuring that all doors in the facility are secured following entry and egress.
6. DJS should seek to be removed from MCTC.
7. CPM training should be replaced with more complete and effective training should be provided to staff.
8. Crisis intervention training should be provided more frequently, and on a regional basis, to avoid the long time it takes for new staff members to become fully certified.
9. The reading and resource library at WMCC should be expanded to include a wider range and level of educational and reading entertainment material.
10. Community Case Managers should attend TSP meetings.
11. Video conferencing should be made available for out of region parents and Community Case Managers to more easily participate in TSP meetings.
12. Background checks should be completed swiftly to expedite the recruitment of staff and volunteers.



If needed, the youth is placed on 1-on-1 watch until he is cleared to be taken off intensive supervision. Physical exams are completed within 72 hours of admission.

**b. Mental Health Services**

WMCC uses the services of a psychiatrist who sees most of the youth. A Social Worker meets with individuals as needed.

**8. Youth Advocacy, Internal Monitoring and Investigation**

**a. Youth Advocacy**

Youth have access to grievance forms and Child Advocates visit frequently - usually twice per week.

**b. Community Advisory Board**

In response to concerns about instructions from DJS to facility advisory board members regarding the reporting of possible abuse or neglect, a DJS representative wrote: "There is no law prohibiting the use of a chain of command to make reports of abuse/neglect allegations to Child Protective Services, etc." However, during the WMCC Advisory Board meeting on January 09, the Advisory Board Chair directed Board members that "all cases of child abuse should be reported to (the Facility Administrator)...and the Department of Social Services until further notice." Secretary DeVore stated there would be clarification from his office at the next Advisory Board meeting.

DJS continues to promote an increased role of Community Advisory Board members in the oversight of facilities. DJS Administrators have invited Advisory Board members to visit facilities, meet with youth and staff, and report on observations. In reality, few Advisory Board members have time to visit. Apart from the WMCC Advisory Board Chairman, no Advisory Board members have made oversight visits since the DJS initiative began.

**c. JJMU Monitoring**

DJS standards require that monitors be provided the "broadest possible access...to staff and youth." However, WMCC requires JJMU Monitors be escorted during visits to the facility. This policy compromises the ability of the monitor to gather crucial information regarding safety and security of youth.

**d. DJS Internal Monitoring**

The DJS Office of Quality Assurance and Accountability issued its most recent report on July 17, 2008.<sup>3</sup>

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<sup>3</sup> <http://www.djs.state.md.us/quality-assurance/qir-wmcc.pdf>

Lack of available staff and inadequate fencing prevents youth from being able to go outdoors at times, even during fair weather conditions. The indoor gym is used daily for recreation and includes a ping pong table. Youth at the highest level on the Behavior Management Plan are permitted to use weights and the 6 exercise machines in the weight room.

On March 13, WMCC and Victor Cullen youth took part in a basketball tournament and the following week, a volunteer drill instructor began working on physical training (PT) with youth. It took over a year for the volunteer to gain clearance and provide PT programming for youth.

In spite of an acknowledged need and a desire to provide more programming at WMCC, youth continue to have a lot of “down time,” particularly over weekends and during the holidays, according to youth. School closed from December 24 to January 4 – a time of high anxiety for youth who must spend the holidays away from loved ones. The lack of activities throughout much of the day reflects poor planning, and adds additional pressures on the staff on hand during the holidays. Youth end up spending a lot of time on the pods playing cards, watching TV, or sleeping. Administrators say resources are not available to provide needed programming. Volunteers are hard to recruit, a situation exacerbated by an excessively long background checking process and resulting in potential volunteers losing interest or finding other ways to volunteer time in their communities.

WMCC permits parents or guardians to visit youth on Wednesday evenings and weekends.

### **Applicable Standard**

**Maryland Standards for Juvenile Detention Facilities 4.5.1.2.** *The recreational program shall provide a variety of planned structured large muscle and leisure activities. These activities shall include, but need not be limited to the following: organized sports and games that require large muscle activity and permit equal opportunity for participation, supervised small group leisure activities, creative activities, quiet individual leisure activities, activities adapted for physically and developmentally challenged residents.*

## **7. Medical and Behavioral Health**

### **a. Basic Medical Health**

When staff members admit youth to WMCC they are screened for suicidal ideation using the FIRRST Tool. Youth with suicidal ideation are transported to the local hospital. If the youth admits to or is suspected of being under the influence of drugs or alcohol, he is sent to the hospital for medical clearance. After a youth is admitted to WMCC he is given mental health and addiction assessments within 2 hours.



## **Applicable Standard**

**Maryland Standards for Juvenile Detention Facilities 4.1.** *The Department shall ensure that educational services provided within detention facilities are consistent with State and Federal requirements and meet the individual needs of the youth. Educational services shall be provided on an individual or small group basis. Personnel shall be deployed on the basis of identified instructional needs. A comprehensive educational program that addresses individual learning styles and special education needs shall be provided to every youth admitted to a detention facility. A continuum of comprehensive, quality educational programs and services shall be multifaceted and with a continuous integrated multi-disciplinary process for educating all youth that reflects diversity and commonality. The educational program shall adhere to all applicable educational regulations.*

## **6. Rehabilitative and Recreational Programming**

### **a. Therapeutic Program**

Multidisciplinary staff members at WMCC develop a Treatment Service Plan for all residents. This Monitor observed two Treatment Team sessions on February 12. The facility Case Manager, the Educational Director, the Social Worker, and the Acting Assistant Director were present as well as the two youths, who initially refused to participate. One of the youths changed his mind and both sessions ultimately appeared productive. For youth outside of Region III, Community Case Manager and parent participation is infrequent.

The Confinement Review Unit, Residential Case Managers, and Community Services personnel meet every Tuesday to review youth status and develop transition and post-detention placement plans.

The Substance Abuse Counselor holds one group a week when she is available. Each pod has a group session every third week. The Social Worker also holds three to five group sessions per week on anger management with selected youth. When the Substance Abuse Counselor or the Social Worker is unavailable, the programming is not provided.

### **b. Recreation Programming**

A full time Recreational Director resigned. Because of the staffing shortage, direct coverage employees could not be spared to organize recreational programming. The consequence is that already inadequate recreational programming at WMCC was further diminished. With the increased staffing from Savage Mountain, the Recreation Director position may be reinstated.

**c. Education Plan**

Youths have an Individualized Learning Plan, and special education youth have an Individualized Education Plan as required. IEP meetings at WMCC are only sporadically attended by parents, especially when youth are from outside Region III.

**d. Classes**

Youth attend class for 6 hours. When population is over capacity, teachers have to teach on the pods which are not designed for educational purposes. During the first quarter, youth participated in 'Read Across America Day' and in learning activities associated with Dr. Seuss's birthday. Youth also created posters promoting reading for a local pre-school.

**e. General Educational Development Program (GED), College Courses.**

WMCC now offers a GED program, however youth who have already completed high school or the GED complain the WMCC school does not offer them anything other than a basic job search process. DJS should expand educational resources to include higher level educational materials so that appropriate academic work is available for all youth at WMCC. In addition, DJS should expand the limited library resources at WMCC, particularly higher level reading materials.

Youth in Pending Placement status work out of texts in core curriculum subjects so that they can earn credit hours.

**f. Vocational Education**

WMCC offers basic career preparation activities but does not offer vocational education or a career preparation program, in which youth research different career paths, write resumes, and practice filling out job applications.

On March 18, 2009, WMCC held its first career fair. Representatives from the Army National Guard, Western Maryland Consortium, Baran Institute of Technology, and Hagerstown Community College were present.



## **Applicable Standards**

**Maryland Standards for Juvenile Detention Facilities 5.1.2.2.** *Safety and security refers to the provision of staff and resident safety and to the prevention of escape from the facility. Security shall also include measures to prevent persons from entering the facility or ground illegally. Means to ensure security shall consist of physical features of the building and grounds, policy and procedures and staffing arrangements.*

**Maryland Standards for Juvenile Detention Facilities 6.2.4.** *(Building design) shall not present an expectation of abusive behavior and vandalism and invite challenge by residents, nor shall it be assumed that every youth behaves in a violent and destructive manner. Security and safety of residents dictate construction materials designed to prevent injury or suicidal conduct.*

## **4. Physical Plant and Basic Services**

### **a. Fire Safety**

WMCC holds fire drills as required. A February 2 Fire Marshal's report indicated storage methods at WMCC for flammable and combustible liquids and gasses as a concern and cited the Educational Director's office as a potential fire hazard due to its excessive messiness. WMCC designated a locked cabinet for flammable and combustible materials, and the office has been cleaned up and organized.

### **b. Basic Services**

Youth report food is of good quality is available in sufficient amounts. A Washington County Health Inspection was conducted on December 1, 2008.

## **5. Education**

### **a. School Records**

Staff report that records are requested from youth's home schools within 24 hours of their admission to WMCC and are usually received within 5 days.

### **b. Special Education**

WMCC education staff use the Child Find system to assess whether youth need supportive educational services. Approximately 30% to 50% of the youth at WMCC require some level of special education.

Two particular youths were involved in numerous incidents involving restraint and seclusion. Out of the total of 54 incidents labeled "Alleged Inappropriate Conduct/Comments by Youth", Youth "L" was involved on 13 occasions while Youth "Y" was involved in 7 different incidents. Youth "L" was also involved in 12 restraints.

WMCC leadership has placed added emphasis on ensuring more accurate and complete incident reporting - this may have contributed to increased number of incidents reported.

Staff report that emphasis has been placed on de-escalation techniques rather than the use of force, and on limiting the placement of youth in locked rooms except overnight and during documented seclusions. Youth have reportedly been testing of limits leading to an increase in incidents.

**c. Security Equipment and Practices**

DJS staff and this Monitor have emphasized inadequacy of fencing at WMCC for the past three years. The Department straightened the back fence to make it more difficult to escape but has not completed other fencing upgrades. Staff report fence upgrades are no longer in the budget.

On February 12, this Monitor approached the front doors of WMCC and was able to enter the facility through both sets of doors undetected. This Monitor notified the Superintendent, and the doors were secured. The lock was replaced.

During a visit on January 29, this Monitor noted that the outer door to the medical unit was open and remained open. This breach of appropriate safety practice was communicated to the Superintendent and was corrected.

**d. Behavior Management Plan**

WMCC uses a multi level behavioral management plan with increased privileges as youth achieve higher levels. Youth wear color-coded wristbands signifying their achievement level. Staff evaluate behavior each evening and youth levels may change based on behavior that day. Feedback, rewards, and consequences are timely and meaningful. WMCC administrators recently added another level because many youth were achieving the highest level early in their stay and had run out of positive behavior incentives. Youth comment the system is fair and consistently say they are well treated by staff.



**b. Staff Training**

In interviews, staff frequently complained about the inadequacy of staff Crisis Prevention and Management (CPM) training. The training does not prepare staff to physically control youth of significant size and weight, particularly if the youth is aggressively approaching someone. DJS CPM does not train staff in the application of handcuffs or leg shackles even though these implements are used on youth. Staff lacking sufficient training may end up injuring youth.

We continue to recommend that DJS develop comprehensive effective training programs specific to juvenile workers. The Maryland Correctional Training Commission currently oversees DJS training; MCTC is geared toward adult corrections.

**Applicable Standard**

**Maryland Standards for Juvenile Detention Facilities 5.1.5.5.** *(S)taffing levels (should) ensure the proper supervision and safety of residents.(OK)*

**3. Safety/Security**

**a. Aggregate Incidents<sup>2</sup>**

<b>Incident Categories</b>	<b>3<sup>rd</sup> Quarter 2008</b>	<b>4<sup>th</sup> Quarter 2008</b>	<b>1st Quarter 2009</b>
1. Youth on Youth Assault	8	13	16
2. Youth on Youth Assault with Injury	2	8	4
3. Alleged Youth on Staff Assault	2	4	3
4. Alleged Youth on Staff Assault with Injury	2	2	2
5. Restraints	29	28	51
6. Allegations of Physical Child Abuse	1	2	2
7. Seclusions	6	2	19
9. Law Enforcement Response to Incidents	1	1	0
10. Suicide Attempts, Ideation, Gestures, Behavior	8	1	1

**b. Incident-Related Procedures, Practices, and Reporting**

According to the DJS database, incidents have increased at WMCC. Restraints have increased by 82% percent and seclusions increased from 2 to 19 in the 1<sup>st</sup> quarter.

<sup>2</sup> Source: DJS Incident Reporting Database

## Applicable Standards

**Maryland Standards for Juvenile Detention Facilities, Part II, Purposes, Values and Goals of Juvenile Detention Facilities.** *Detention is the temporary care of youth who, pending court disposition, require secure custody for the protection of themselves or the community in physically restricting facilities. The major goals of a juvenile detention facility are: the protection of the public, the provision of a safe, humane, caring environment, and access to required services for youth.*

**Human Services Article §9-238.1. Programming for Regional Services.** *In general – The Department shall serve children...with programming that...delivers service on a regional basis.*

## 2. Staffing

### a. General – 1<sup>st</sup> Quarter, 2009

<b>Total PINS (Positions with benefits)</b>	68 (according to DJS staffing analysis)
<b>Total Contractual Positions</b>	0
<b>Total Vacancies</b>	9 Resident Advisors (RA's), 1 Nurse

WMCC has 9 Resident Advisor vacancies and a full-time nurse vacancy.

The current WMCC staffing schedule only provides 7 direct care staff on 1<sup>st</sup> and 2<sup>nd</sup> shifts, and 5 overnight. The Department conducted a staffing analysis in 2008 and recommended that 10 direct care staff be assigned to 1<sup>st</sup> and 2<sup>nd</sup> shifts, and for 6 to be assigned to the 3<sup>rd</sup> shift. On April 30<sup>th</sup> DJS downsized Savage Mountain Youth Center from 36 to 12 youth. Four Savage Mountain staff members have been transferred to WMCC. Additionally, DJS has recently given WMCC permission to interview for 5 contractual direct care positions.

DJS Quality Assurance and Accountability personnel recommend that WMCC have a Training Coordinator, but DJS Headquarters has not approved that position. In addition, DJS removed the designated PINS for a second Addictions Counselor position and a second Social Worker position. DJS had dedicated one RA position to recreation programming, but that position has now been lost. Two staff who were awaiting transfer to Savage Mountain will now stay at WMCC. One staff is slated to go to Victor Cullen. WMCC had only 28 direct care staff to provide the bare minimum of coverage. The additional staff will be of great help.



**b. Detention and Pending Placement**

	<b>Number of Youth in Status 60+ Days</b>	<b>Number of Youth in Status 90+ Days</b>
<b>Detention</b>	3	0
<b>Pending Placement</b>	1 (62)	1 (98)

Some youth from outside Region III continue to be transferred to WMCC. According to the DJS ASSIST database, 22 youth from outside the region were admitted to WMCC during the 1<sup>st</sup> Quarter, 2009.

According to staff, a Washington County youth was sent to WMCC for a weekend in January as punishment pursuant to a judge's order. JJMU has previously raised the question of the legality of returning youth to secure detention without a due process hearing.

**c. Population Breakdown by Race/Ethnicity**

	<b>3<sup>rd</sup> Quarter, 2008</b>	<b>4<sup>th</sup> Quarter, 2008</b>	<b>1<sup>st</sup> Quarter, 2009</b>
<b>Incidents of Confinement</b>	122	128	135
<b>White</b>	72 (59%)	54 (%)	50 (37%)
<b>African American</b>	45 (37%)	66 (51%)	83 (61%)
<b>Latino</b>	4 (3%)	6 (5%)	2 (2%)
<b>Other</b>	1 (1%)	2 (2%)	0

Minority representation in the population at WMCC has increased during this quarter. Of the 83 African American youth detained at WMCC during this Quarter, 24 came from a county jurisdiction outside Region III.

## INTRODUCTION

The Western Maryland Children's Center (WMCC) is a State owned and operated detention facility located near Hagerstown in Washington County. WMCC is designed to accommodate a total of 24 youth in two 6-bed pods and one 12-bed pod. At present only males are housed at the facility.

## SUMMARY OF CRITICAL FINDINGS

- DJS is not following their own recommended staffing pattern for WMCC.
- Ten staff vacancies need to be filled.
- Fencing security additions are needed.
- Programming is insufficient.

## FINDINGS

### 1. Population

#### a. General

#### WMCC Population - 1<sup>st</sup> Quarter, 2009<sup>1</sup>

Facility Capacity	Month	High Population	Low Population	Average Daily Population	Average Monthly Population	Number of Days Over Capacity
24	January	26	20	23	23	3
24	February	24	16	19	21	0
24	March 26	27	22	25	22	2

WMCC was over population a total of 25 days, or 28% of the 1<sup>st</sup> Quarter, 2009. When WMCC is over-populated, the additional youth must sleep in the day room in "boats" (fiberglass sleeping containers into which a mattress is placed).

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<sup>1</sup> Source: DJS Facility Quarterly Population Analysis, 1<sup>st</sup> Quarter, 2009.





**MARLANA R. VALDEZ**  
*Director*

STATE OF MARYLAND  
OFFICE OF THE ATTORNEY GENERAL  
JUVENILE JUSTICE MONITORING UNIT

**FACILITY REPORT**  
**WESTERN MARYLAND CHILDREN'S CENTER**  
**JANUARY– MARCH, 2009**

**Facility:** Western Maryland Children's Center  
18420 Roxbury Road  
Hagerstown, Maryland 21740  
Facility Administrator: Ed King

**Date(s) of Visit:** January 6, 29, February 12, 24, March 12, 26, 2009

**Reported by:** Tim Snyder  
Monitor

**Issues Monitored:**

- Staffing
- Incidents
- Programming

**Persons Interviewed:** Facility Administrator, Group Living Supervisors, Resident Advisors and Youth

**Date of Report:** April 2009

2008.<sup>17</sup> According to the report, the investigator completed the investigation on January 5, so there was a 2 ½ - month lag between completion of the investigation and receipt of the report by JJMU.

### **Applicable Standard**

**Maryland Department of Juvenile Services Standards of Conduct 7.5.1.** *All investigative reports shall contain complete information regarding the complaint and a clear chronological account of investigative action and findings.*

### **RECOMMENDATIONS**

1. The facility must reduce youth-on-youth assaults.
2. Youth referred to the Victor Cullen program must be appropriate for the facility's positive peer culture program.
3. Staff should not place their hands on youth in an inappropriate manner.
4. DJS should stabilize the facility's administrative leadership.
5. All youth should have access to vocational programming.
6. The facility must conduct fire drills and safety inspections consistently and according to established guidelines.

### **UNABATED CONDITIONS**

1. Investigators with OIG should utilize investigative tools other than personal interviews to determine veracity of fact-finding.
2. Investigations must be comprehensive and complete.
3. DJS should complete a Memorandum of Understanding for handling child abuse cases that the Frederick County Department of Social Services and law enforcement have initiated.
4. The facility should provide two staff on each unit during the night shift.

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<sup>17</sup> DJS Incident Report 08-69794





Maryland Department of  
**Juvenile Services**  
Treating • Supporting • Protecting

May 28, 2009

**DJS Response**

In response to the first quarter reports from the JJMU, DJS has worked with its facility Superintendents and its licensed program providers to provide comments to each report as listed below. DJS thoughtfully considered the reporting and suggestions provided by the JJMU and will take corrective action in areas in need of our attention and response.

We have also included links, when available, to our own internal Quality Improvement (QI) reports. These reports are extremely comprehensive and in great detail outline the areas where our facilities need improvement (and where they are excelling) and how they rate as compared to other facilities across the state. As always, DJS is committed to the youth in our care and we continue to work diligently with an eye toward both the public safety and our youths' success. For ease of review, please reference the JJMU report for each facility or program when reviewing each individual site's response.

**DETENTION CENTERS**

**Alfred Noyes Children's Center (Noyes)**

On page 2 of the report: for clarity, DJS' overnight staffing ratio is 1:16, therefore there was no case of insufficient staffing when this incident occurred. The facility was coping with a higher than average population but nighttime ratios were met. The dorm rooms discussed have always been utilized at Noyes.

At the top of page 7, higher rates of certain incidents were noted by the JJMU but without the background necessary to understand those numbers. The facility is very aware that five female youth were responsible for nearly 80% of youth on staff assaults, 85% of seclusions and over 90% of mechanical restraint use during the quarter. Often, a small number of youth or a certain type of youth can cause significant increases in numbers such as this. For example, the average daily population number at the facility did not change (48), but the female population nearly tripled during the 1st quarter of 2009 to 21

girls versus the 1st quarter of 2008 where there were only 9 girls. Noyes continues to work on reducing incident numbers and uses its data to determine why incidents are happening and how best to prevent them.

On page 12, the report notes a lack of outdoor recreation. Noyes does not take youth outside when the temperature is below 50 degrees, which it was a majority of the first quarter. In the warmer months, youth will enjoy outdoor recreation on a more regular schedule. Also on page 12, structured programming was occasionally canceled due to a volunteer not being able to make it to Noyes but substitute events were utilized in those cases. Noyes continues to work on additions to their programming schedule. As well on page 12, the monitor incorrectly states that the facility has a part time psychologist; the psychologist is a full time staff.

To read DJS' own internal Quality Improvement report on Noyes, please follow this link: <http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Baltimore City Juvenile Justice Center (BCJJC)**

On pages 4 and 5 under Staffing, there is no independent monitoring information in this section. The entirety of the monitoring of this provision is quoted from the federal CRIPA monitors report. If the JJMU monitor did not monitor this provision, it should be noted as such and other outside monitor's reports should not substitute for the JJMU's.

On page 6, the JJMU monitor writes that "staff" indicate that handcuffs are used in "virtually every restraint." It was not noted exactly which of the over 140 staff persons stated this to the monitor, but DJS' own statistics as well as reviews of incident reports and videos do not support this. We know that the JJMU monitor does not approve of the use of handcuffs; that opinion, though one DJS does not subscribe to for security reasons, cannot be bolstered by a staff person's statement and no other evidence. All of BCJJC's videos and incident reports are available for review at any time.

On page 7, though an allegation is made about youth stealing others' food, there is no foundation laid or evidence given for this assertion at all.

On page 9, it should be noted that BCJJC is not monitored by "CRIPA" (which is a federal statute) but by two federal CRIPA monitors. It is also monitored by DJS' own internal Quality Improvement Unit. To read DJS' own internal Quality Improvement report on BCJJC, please follow this link: <http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Charles H. Hickey Jr. School (Hickey)**

Section 2A Safety and Security



Monitor reports a discrepancy with the reporting of alleged child abuse cases in the DJS Incident Reporting Database and Baltimore County Child Protective Services. (the number of allegations that we have reported for this quarter is two.) The other could have been incidents reported by personnel outside of Hickey or that had happened to a youth that was under our care but occurred in a different location. Not enough detail was given to determine this.

#### Section 2C Security Equipment and Practices

Monitor reports that we do not have any operable cameras. Hickey had two operable cameras on campus. One was on Douglas Hall and the other was on Mandela Hall. We are in the process of requesting more and/or getting broken cameras fixed.)

#### Section 3A Physical Plant and Basic Services Fire Safety

Monitor states general fire inspection was due in September 2008 and had not been completed. Both fire alarm inspections and annual fire safety inspections were completed in August 2008. Monitor states facility has not submitted a mandated asbestos inspection for the Peabody School. Per the Maintenance Department, this inspection is not needed because the buildings are new.

#### Section 4A Education Supervision

Monitor reports that supervision in school has not improved and that youth walk unsupervised throughout hallways. It is unclear if this was a one-time occurrence or if the monitored observed regular school activities for many days before coming to this conclusion. Our students are supervised at all times. A direct care staff is assigned to each classroom and three direct care staff are assigned to monitor the hallways.

#### Section 5B Recreational Programming

Monitor reports that youth are required to receive 1 hour recreation and 1 hour of leisure time but then seems to confuse the two. Each youth is given 1 hour of *recreation* during the weekdays and 2 hours during the weekends; this is typically outside or in the gym. Each youth is given *leisure* time at the end of the day from 7 pm to 8 pm. During this time they are allowed to watch TV, play cards, write letters, play board games or engage in any other type of constructive activity supervised by staff. Their leisure time is not coordinated for them.

#### Section 6C Mental Health Services

Monitor reports that Hickey does not have the staff or expertise to provide intensive mental health services to youth with serious illness. Notwithstanding that the monitor is not a clinician, licensed clinical social worker or licensed psychologist, Hickey has without question some of the finest mental health services in the state and routinely manages very difficult youth who are ordered by the court to be detained by DJS.

Any staff member at Hickey who has a concern that a youth is at imminent risk of harm can notify the Glass Mental Health Team 24 hours a day/7 days a week. Any staff member can place a youth on suicide watch level until a Glass Mental Health Licensed

Therapist responds (always within an hour) to assess the youth. If the youth is identified as being a danger to himself or others and expresses a specific plan to commit suicide, or if in the clinical judgment of the therapist requires a psychiatric hospitalization the youth after being assessed by the Glass emergency responder is sent to the nurse's station in the infirmary. Arrangements are made for the youth to be sent to the closest emergency room and he is accompanied by Hickey one-to-one staff. Glass Mental Health has established a relationship with the Department of Psychiatry and with Sheppard Pratt Hospital where many of the youth are referred if hospitalized is required following the independent psychiatric evaluation. The Glass Mental Health clinician who has assessed the youth consults with a licensed Psychologist and a Child and Adolescent Psychiatrist and records of the Glass assessment of the youth are faxed to the emergency room and hard copies are given to the Hickey one-to-one staff who accompanies the youth to the hospital. Glass works in close collaboration with the 24/7 nursing staff at Hickey in this process. The shift commander is contacted also as well as the nursing staff.

Youth placed on suicide watch levels are placed on a suicide watch log which is electronically completed by Glass and sent to all unit managers and administrators and nursing at Hickey. Hard copies of the suicide watch logs are maintained by nursing, on the units and backups are maintained in hard copy and electronically by Glass Mental Health.

At current time, if the Hickey Team (staff members, unit managers, direct care staff and Glass Mental Health Team members which comprise 10 licensed master's level personnel as well as the Licensed Psychologist and Psychiatrist) is concerned that a youth is in need of a individualized behavioral plan, a plan is developed and implemented by Glass. Copies of the behavioral plan are electronically sent to nursing, case managers and all administrative staff at Hickey. Behavioral plans are also developed and implemented for youth placed on suicide watch. All youth placed on any suicide watch level are also seen by a psychiatrist who maintains clinic hours 3 days per week at Hickey and she and another psychiatrist are available 24/7 for emergency psychiatric consults. In addition, any youth with emergency psychiatric problems or who are on psychotropic medication upon admittance are referred to both Medical and Mental Health. The psychiatrists can continue previously prescribed medication orders as appropriate and usually write orders for several days; that youth is also evaluated by the psychiatrists.

Glass also is actively involved in the provision of evidence-based group and family therapy interventions utilizing Aggression Replacement Training (ART) and Cannabis Youth Treatment Programming Curriculums. These groups and family groups which are conducted twice weekly during weekday and weekend visiting hours along with at least 15 hours of group programming weekly are conducted at Hickey. In addition, there is a mental health therapist in the Hickey Peabody School operated by the Maryland State Department of Education who is available and meets with youth who receive special educational interventions in the school and who have been identified as being in need of counseling interventions services as indicated on their IEP's. This therapist and the psychologist meet with the school teachers and school administrators at Hickey weekly to discuss and implement classroom interventions with difficult to manage youth. The



mental health staff has also trained the Hickey staff and developed a training model and manual that addresses the following topics:

- Anxiety Disorders
- Autism Spectrum Disorders
- Bipolar Disorder
- Borderline Personality Disorder
- Change
- De-escalation Techniques
- Depression
- Dialectical Behavior Therapy
- Hyperactivity
- Psychiatric Disorders Common Amongst Detained Youth (Conduct Disorder, Oppositional Defiant Disorder, etc.)
- Schizophrenia
- Suicide

In addition a “Brown Bag” lecture series has been initiated where staff is invited to attend a series of trainings conducted by Glass Mental Health. The next scheduled series includes a presentation on “Substance Abuse and the Family.” Staff attend the series of lectures during lunch time hours and are encouraged to participate in the discussions and eat their lunches during the presentations.

In addition the following is the process for Accessing Behavioral Health Services: A youth may self-refer for behavioral health services by completing a Request for Services form (available at the nurse’s station in the infirmary, at school, and in Case Manager’s offices). Completed forms should be placed in the Sick Call Box at the Dining Hall. Hickey staff also make routine referrals to the Glass Mental Health Team by filling out an Initial Screening and Assessment Referral form.

To read DJS’ own internal Quality Improvement report on Hickey, please follow this link: <http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Cheltenham Youth Facility (CYF)**

On page 6 of the report, a notation is made about youth-on-youth assaults being up 9%. It is unclear how this was calculated or whether the total population was taken into account. A rate calculation (# of incidents x 100/ADP x days in the month) is the more accurate measure since it takes lower or higher population numbers into account. To read DJS’ own internal Quality Improvement report on CYF, please follow this link: <http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **J. DeWeese Carter Center (Carter)**

On page 3 under the Staffing section, it is true that one youth was injured in that incident but the implication from the JJMU report is that staff injured him. The video surveillance was reviewed by CPS and OIG and it was discovered that staff did not strike the youth. MSP also reviewed the tape and examined the youth, and it was discovered and later confirmed that the youth bit his own lip to worsen his injuries. This was also confirmed by several youth witnesses.

On page 4, as to the allegations of child abuse, it was determined through OIG, CPS and MSP that the youth was not injured by staff during the incident.

On page 8 under Recreational Programming, the Carter Center's recreation yard is 6000 square feet and also houses a grassy area within it. This is more than adequate for 15 youth.

On page 9 it lists that there is no psychologist for Carter. Carter not only has a psychologist, Dr. Walter Roemer, it also employs one licensed clinical social worker, two case managers and one addictions counselor. To read DJS' own internal Quality Improvement report on Carter, please follow this link:

<http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Lower Eastern Shore Children's Center (LESCC)**

In the statistics on page 5, the increases in youth-on-staff assaults were mostly due to the actions of one particular female youth. Like at other facilities, these numbers can be affected by one or a small group of very difficult youth making comparisons year-to-year difficult to make. The incident referenced on page 6 was not a LESCC incident. The incident happened while youth were in a transportation van; DJS Transportation Staff are not a part of LESCC's facility personnel.

On page 7 under Rehabilitative and Recreational Programming, the ART (Aggression Replacement Training) program for youth was started during the quarter reviewed and other programming included Family Day, a tea party (for the girls), a spades tournament and Friday Night Movies (for youth on levels 3 and 4).

On page 8 there is nothing unusual about using a seclusion room (which is just another room with a bed in it) for a sleeping room if our population requires it. The LESCC has to provide accommodations when the court system and law enforcement bring a youth to the facility and this is a good option for doing so. Youth at LESCC only share rooms when the population exceeds the limit of 27 youth.

On page 8, a recommendation is made for a vocational component. We absolutely agree that the school would be more complete if it offered a vocational component; any vocational option of schooling at LESCC has to go through the Maryland State Department of Education. The DJS Quality Improvement (QI) education reviewer is



encouraging MSDE to provide at least one vocational option for the youth there as well. MSDE has plans for a computer business career tech component that will be integrated into the curriculum at both LESCC and the Carter Center. To read DJS' own internal Quality Improvement report on LESCC, please follow this link:

<http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Waxter Children's Center (Waxter)**

On page 2 the monitor states youth were sleeping "on the floor" when Waxter was over population. Youth slept on a stack of bunks with a mattress in it, they were not sleeping on the floor.

On page 4 it notes that "one youth reported that she resided in the administrative office for three weeks and received no education or programming at that time." This youth had significant mental health and aggression problems. She was placed on a plan that allowed for the safety of the other youth and staff but also allowed for teachers to visit her individually and for her to have a one-on-one staff. As much as she could be integrated into the facility, she was.

Also on page 4, the issue with the youth's undergarments was resolved in a late February email conversation between the Superintendent and one of the monitors.

Many of the concerns of the monitoring team could be resolved even faster if they were included on the written debriefing form at the end of the monitoring visit. To read DJS' own internal Quality Improvement report on Waxter, please follow this link:

<http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

### **Western Maryland Children's Center (WMCC)**

Section 1.b 2<sup>nd</sup> paragraph reads "a Washington County youth was sent to WMCC for a weekend in January as punishment." A review of ASSIST confirms that this did not happen.

Section 2.a's table outlines current staffing shortages; though these staff were not employed in the first quarter of 2009, the full time RN will start on 06/03/09 and five contractual positions were approved and interviewed for on 05/12/09.

Section 3.a's table regarding incidents in the 1<sup>st</sup> quarter of 2009 is incorrect; we have recorded 48 restraints not 51 and 11 seclusions not 19.

Section 3.b 3<sup>rd</sup> paragraph, WMCC made some changes in its seclusion practices based on recommendations of the Quality Improvement (QI) team, but WMCC has always emphasized using seclusion when warranted and reporting all incidents. The marked increase in incidents is more than likely attributable to particular youth mentioned in the

previous two paragraphs and the sustained increase in out of area youth rather than “testing of limits” by youth.

Section 3.c 2<sup>nd</sup> and 3<sup>rd</sup> paragraphs; as each issue was raised by the JJMU monitor it was addressed and remedied immediately. But it should be noted that neither of these issues presented a safety or security risk to the residents.

Section 5.e, Education section:

When a student who has been issued a high school diploma is admitted to WMCC, they participate in the Graduate Program while in school each day. The Graduate Program is a multi-pronged approach to the students’ needs. First, an interview of the student is conducted to ascertain what he was associated with concerning education and/or work prior to being detained. We also help students set goals for their future education and / or work if they have not already done so. With this information the teacher supervisor or designated instructional assistant will work with that student and /or outside agencies to gather information and activities, which will help him either, research his interests or continue working toward it. Second, the student is given a binder, which will be used to keep all of the life skills/employment skills assignments he is given. Each school day the student will be required to continue work on the numerous assignments that constitute the life skills program for graduates, which includes, but is not limited to, identify community resources, understanding taxes, setting goals, and exploring career options. It is expected that the instructional assistant assigned to maintain the students’ binder will meet with the student to discuss his progress and to further discuss some of the concepts presented in the binder. Third, the student is asked to become part of the classroom around him by participating in career exploration class, as well as acting as a tutor to other students or as a teacher’s assistant through grading papers. In this way the student is not only working independently toward his own goals, but is also developing leadership and responsibility through his interaction with other youth in the academic setting. And last, if the student is going to attend community college or college, he is encouraged to work through assignments in higher level English and math texts in order to prepare him for the college admissions tests and/or the basic courses he will be required to take during his freshman year.

January = 30 youth served during month who had reading scores - reading level = 6.49  
5 graduates served during month  
61%of students served were special education

February = 37 youth served during month who had reading scores - reading level = 7.22  
3 graduates served during month  
49% youth served were special education

March = 47 youth served during month who had reading scores - reading level = 7.42  
2 graduates served during the month  
51% youth served were special education



\*\*\* Please Note \*\*\*\* Some students carried over from month to month

Also on page 8 in this section, the JJMU report reads, "DJS should expand the limited library resources at WMCC, particularly higher level reading materials." WMCC's library has books by authors such as J.R.R. Tolkien, James Patterson, John Grisham, John Kennedy, Nelson Mandela, Stephen King, Michael Crichton, Robert Ludlum, Tom Clancy, Alex Haley and Russell Freedman. We also have the entire Harry Potter series and a full encyclopedia; we always appreciate more books in our library, but feel these books offer advanced readers what they need.

Section 5.f, Education section:

All students in the course are given a vocational self-assessment within a week of admission to WMCC. From the results of the self-assessments students are given the opportunity to research a career of their interest in order to find out educational and skill requirements for the job. Students may be asked to create a power-point based on the research, as well as, an annual, monthly, and weekly budget based on the salary they would make within their chosen career. One goal of the class is to expose students to a variety of career clusters (tracks) through discussion, reading, research, and video, in order to allow students to explore the possibilities the work-force has to offer. For students in attendance for a short period of time, much of the class focuses on appropriate decision making concerning their future with an emphasis on career and educational choices. Students who are in class for more than a week will develop employability skills by receiving instruction in such areas as goal setting, job searching, and completion of applications, resumes, and job interviews. Career Exploration also offers students information on current job trends, economic issues, and financial planning.

Section 6.b. reads, "A full time Recreational Director resigned"- This was actually a Resident Advisor performing in the Recreational Advisor role. His date of resignation was 04/21/09, which is not within the review period and therefore should not be listed in this report. The report also reads that WMCC has, "already inadequate recreational programming." This may be the opinion of the monitor, but we have increased our programming from 148.5 hours in the month of September 2008 to 308 hours in the Month of March 2009; this was accomplished through the addition of a recreational position, which will be reinstated and by the increased involvement of our educational, social work and addictions staff.

Section 7.b reads, "A social worker meets with individuals as needed." The social worker also reviews all youth's MAYSI screens and uses that information to gauge which youth require more attention initially. The social worker also meets with the youth who have counseling as a component in their Individualized Education Plan and he conducts "Anger Management" groups with youth from all of the Pods.

Section 8.b. The second paragraph is misleading. Several (approximately nine) Community Advisory Board members performed walk-through inspections and submitted findings when the initiative began.

Section 8.c. reads “WMCC requires JJMU Monitors be escorted during visits to the facility.” Due to security concerns and the ability for facility staff to be available for questions that may arise while monitors are on-site, DJS has directed that JJMU monitors are escorted throughout our facilities. Monitors still may speak to youth and staff alone so there is no hindering of the monitor’s work or access at WMCC. To read DJS’ own internal Quality Improvement report on WMCC, please follow this link: <http://www.djs.state.md.us/quality-assurance/quality-improvement-reports.html>

## **TREATMENT CENTERS**

### **Backbone Mountain Youth Center**

No comments

### **Green Ridge Youth Center**

No comments

### **Meadow Mountain Youth Center**

On pages 5 and 6 under Safety and Security: According to the DJS incident database, the finding for Youth-on-Youth Assaults and Physical Restraints does not match for the years referred to in the table.

### **Savage Mountain Youth Center**

No comments

### **William Donald Schaefer House (WDSH)**

Prior JJMU reports have noted that WDSH was not using a proven treatment program. As the monitors note, WDSH is now utilizing the Seven Challenges program which is an evidence-based program as well as Positive Peer Culture (PPC).

### **Victor Cullen Center (VCC)**

On page 3 of the JJMU report, the monitor mentions a problematic youth (2<sup>nd</sup> paragraph) who was involved in several incidents at VCC. That youth is now on community safety (the highest focus area) and just completed his third home pass. He also participated in the pre-apprenticeship program and has the highest grade average in the class. Though the JJMU may see a youth as “inappropriate” for VCC’s program, VCC staff are



committed to working with some of the most difficult youth in the state; they find that through patient work and consistency, many of them, like this young man, can succeed given that chance.

The other youth referred to in the 3<sup>rd</sup> paragraph of page 3 was not “eventually” removed from the program. He was charged by state police for assaulting staff and removed that evening.

On page 4 of the report, it notes one staff was supervising six youth. A 1:6 ratio is an appropriate staff to youth ratio.

### **LICENSED PROGRAMS**

#### **Allegany County Girls Group Home**

**Census:** The census has remained low due to lack of referrals and group home appropriate referrals.

**Training:** TACT II training was completed by two managers. The first staff training for the TACT II is slated for May 23, 2009. The plan is to have all staff trained by June 15, 2009. As of May 18<sup>th</sup>, all staff have completed CPR training as well as first aid. It is the policy of the ACGGH to have all staff complete required trainings.

**Fire Safety:** The Fire Inspection has since been completed (5/18/09) and a copy submitted to the JJMU. It is the policy of the ACGGH to have a fire inspection completed annually.

**Basic Medical Services:** It is the policy of the ACGGH to ensure the safety of medications and the medicine cabinet is to remain locked at all times with the medication lock box keys in the cabinet. Staff are reminded during staff meetings to ensure that this policy is adhered to.

#### **Aunt CC's Harbor House**

**Aggregate Incidents:** The Shelter has taken in more youths that are pending placement, and though courts order youth into shelter pending placement, this population has added to the increase in AWOLs as well as the increased number of youth leaving school and not returning to the shelter. The program will continue to work with and support every youth admitted to the shelter.

**Education:** At the Shelter, youth are engaged in Life Skills Groups, and Life Skills Education such as washing clothes, helping to prepare meals, making beds, personal hygiene, and filling out job applications in person and online.

The Harbor House is a shelter, we do not have a vocational program. The youth enrolled in the public school system may receive such programming as part of their basic education services.

**Rehabilitative and Recreational Programming:** The youth at the Harbor House will receive recreational services at the Greenmount Recreation centers. The youth began attending the week of May 18, 2009. The days available are Monday, Thursday and Friday after 6:00 PM.

**Basic Medical Services:** Any youth placed at this shelter for 30 days or more will have physicals scheduled. The medication storage cabinet has a built-in lock and the office where it is located is also locked. Every effort will be made to retrieve any medications from a previous placement or the youths' home.

**Youth Advocacy:** The Advocate has the only key to the grievance box. The old lock has been replaced with a new lock by the Advocate. The time that a youth is in the program ranges from hours to days, therefore only pertinent information will be covered with the youth (i.e. grievances, medical, emergency preparedness). The youth participate in groups and the Youth Handbook is read (which covers these processes along with other program functions.) The grievance forms are placed in the activity room and are easily accessible to the youth.

**Youth Concerns:** Based on the constant transition of youth in and out of the program, it is not always feasible due to safety and security issues to take them on outings. Whenever possible, the shelter would like to keep the youth engaged in outside activities.

## **Guide Shelter**

### 1. Population General

The vast majority of our youth do not stay 30 days. According to the Shelter's Monthly Statistical Report, 19 youth were admitted by the end of February and 24 youth were released by the end of February. At the end of February, 0 youth remained in the home for over 30 days. The average length of stay during the 2009 fiscal year up until the end of April 2009 was 7.19 days.

### 2. Staffing Staff Training

Since the last site visit; all staff members have been brought up to date with their required 40 hours of training. Management will monitor to ensure that all staff training hours are current and in compliance with COMAR.



The staff at GUIDE are not required to be med certified, and do not administer medications. All staff have been credentialed to monitor youth who self administer medication. There was never a time where a staff member who was not credentialed monitored medications.

3. Safety and Security

Incident-Related Procedures, Practices, and Reporting

Regarding the January 2nd incident, after speaking with the staff member on duty at the time in conjunction with the logbook entries, the following was determined: There was a relaxed schedule that day because the youth were still on holiday break. The youth in question complained of being tired and asked staff if he could lie down in his room. The youth was granted permission to do so and it was documented in the logbook. Rounds were made every half hour noting that the youth in question was in his room.

Safe Environment Plan:

COMAR states that the Safe Environment Plan shall include the following:

- a. Physical space to make the resident feel safe, comforted, and in control of their behavior
- b. Triggers and situations that increase stress or fear and may cause the resident to lose control
- c. Methods of calming or soothing that the resident prefers and has found to be successful
- d. The resident's preferences regarding positive, nonphysical interventions, strategies, and supports if the resident's level of agitation increases
- e. Medication that is appropriate clinically and agreed to and prescribed by the resident's treating physician, if the resident's level of agitation increases despite the use of the alternative interventions identified in the Safe Environment Plan
- f. Medical information that can affect the safety of a restrictive intervention
- g. Trauma history

All of the above areas have been identified on GUIDE's Safe Environment Plan format. The form is broken down into all of the relevant categories, and completed by the resident and Human Service Professional. The youth's parents, staff, and Case Manager are all informed of the contents of the individual's Safe Environment Plan.

Behavior Management Plan:

Pages 15 through 16 of the Resident Handbook address the resident behavior management system (Level System). Page 17 of the handbook includes the actual resident point sheet which defines standards for various infractions. The youth

are verbally informed about point losses and gains. The resident's levels are posted for their review on the Resident Information Board daily. The Resident Handbook is also posted there. If a resident has concerns about their points, they can ask a staff member for permission to review their individual point sheet. All residents are explained the rules and regulations of the program upon entry by way of group meetings. Each resident is also given a Resident Handbook to review at their leisure; they sign off that they understand the rules and the sign off sheet goes into their individual case files.

4. Physical Plant and Basic Services

Fire Safety

The plastic paneling of the classroom walls is flammable. The walls should be covered with fire-rated drywall or treated with a fire-retardant coating.

Completed: 2/28/09

Physical Plant

Emergency numbers: The agencies were added to our list and the numbers are posted throughout the facility near the phones as well as in the Intake Office, Staff Communication Board, and on the Resident Communication Board.

Completed: 2/13/09

5. Education

General Educational Development Program (GED), College Courses

Residents who have a GED at GUIDE work on resumes and interviewing techniques during class time. They are also allowed to pick up applications from various establishments while residing at the shelter. The above encourages life skills training. The program is unsure of how to proceed in this matter because we do not allow residents to be off grounds unsupervised. We will seek guidance from MSDE regarding how to respond to this issue.

6. Rehabilitative and Recreational Programming

Recreational Programming

Youth attend weekend outings occasionally. There is a calendar that is posted monthly for activities. The youth participate in outings every weekend. The youth are linked to community programs. Twice a week the youth go to "Paul's Place" where they serve food to the homeless and distribute clothing as well. The youth also go to the Baltimore Rehabilitation Shelter where the participants hold groups and share experiences. Currently the program is negotiating a contract with the YMCA.



### Rehabilitative Programming

The JJMU report notes that the Treatment Service Plan form used by GUIDE is informal and incomplete and that it does not include all areas required by COMAR.

The GUIDE Individual Service Plan includes the following:

1. Measurable objectives
2. Implementation dates and strategies
3. Individuals responsible for providing the supports, services, implementation, and monitoring of the plan
4. Signature page indicating that the youth, guardian, and family when appropriate, have been informed of , and agree with the plan  
Note: when form is complete, it addresses family; health care; life skills; personal & social development; recreation plan; vocational training

The above areas are all the areas required by COMAR. The form is broken down into all the relevant categories, and completed by the resident and Human Service Professional. The youth's parents, staff, and Case Manager are all informed of the contents of the Individual Service Plan.

It was noted that one file contained two required reports but no Treatment Service Plan and that the third file contained two of the required plans/reports but no Personal Education Plan. Without the youth's name, we cannot rectify this; when this is found, noting it in writing to the on-site administrator will facilitate any needed correction.

### 7. Medical

#### Other Issues

In the particular incident, the resident's medication was picked up from the pharmacy after his scheduled dose because it was not ready. The youth and credentialed staff member were both on the trip. The youth received his medication upon return to the shelter. Again, all staff have been credentialed to monitor youth who self administer medication.

### 8. Youth Advocacy, Internal Monitoring and Investigation

#### Youth Concerns

There is a calendar that is posted monthly for activities. The youth participate in outings every weekend. The outings include: roller skating, bowling, laser tag, Dave & Buster's, movies, festivals, special seasonal events etc. The activities rotate weekly so that everyone participates in something of interest. The program

is currently negotiating a contract with the YMCA that will allow our residents to use their facilities on a regular basis.

### **Karma Rockville**

1. Staff training - The certification program is highly recommended by the Sex Offender Task Force and DJS.
2. Safety & Security - This resident was eventually discharged due to his non-compliance. Due to our "no hands" policy, we can not stop a resident who is determined to AWOL but we encourage compliance and follow up appropriately.
3. Physical Plant - Estimates are being received to paint the first floor and this should be completed by June 15th.
4. Education/Records - We have reported occasional problems receiving records from Baltimore City.
5. Therapeutic Program.- The program at Karma encapsulates all of the areas necessary to successfully rehabilitate sex offenders per the sex offender certification. Moreover, nearly all residents who successfully complete the sex offender's program at Karma have not re-offended sexually since we began accepting sex offenders in 1988.
6. Recreational Programming - Basketball is not the only recreation offered, but it is the most preferred. Residents also have the option to play with the football, baseball, kickball, volleyball and have Tae-Bo for indoor recreation on rainy days.
7. "Pathways" is only one tool used in our sex offender's group. We also use relevant articles, "The Courage to Heal" workbook, as well as, individual, family and group therapy.

### **Kent Youth Boys Home**

Under Incident-related procedures, practices, and reporting: Camcorders and panic buttons have not been installed and are not required to be installed.

Under the Recommendations section:

1. The Kent Youth board is currently monitoring and will continue to monitor operations at the facility to ensure that all corrective action plans are implemented. At the May 20th meeting, the Board will assemble a sub-committee who will monitor the policies and oversee the implementation. The board will conduct a monthly, unannounced inspection of the facility and review the log book and conduct staff and youth interviews; this will provide necessary oversight. The sub-committee will also encourage open communication between the members and the staff and the youth. All staff members are held accountable for policy and procedural violations.
2. Currently, the Kent Youth Boys home is full.

### **Liberty House**



Though DJS currently licenses Liberty House, there are no DJS youth at Liberty House nor were there any in the first quarter of 2009 or at all in the last year. The youth who are placed there are placed by other state agencies and their records are not under the purview of the JJMU.

## **Haddon House**

### Special Report and Incident Reporting

In regards to the alleged sexual assault that occurred at Colbourne in January 2009, it became apparent that staff were using an outdated list of names for DJS. Staff are currently using the appropriate contact list and following all DJS incident reporting standards.

### Behavior Management Plan

The Haddon House does have a behavior management plan and it is available for review.

### Physical Plant and Basic Services

#### *Fire Safety*

The home was inspected by the Maryland State Fire Marshal's Office on August 12, 2008. The next inspection will be August 2009. The report is on file in the Program Office. Staff working within the home check the fire extinguishers monthly and sign off on the tag attached to the fire extinguisher.

#### *Physical Plant*

A new Program Manager was hired to manage the Community-based program of MENTOR Maryland in January 2009. This Program Manager directly supervises the Group Home Manager.

### Education

The Type III School is directly supervised by our Director of Schools. All PEP's and SPR's are compliant with COMAR regulations and the MSDE. Since the last visit by the JJMU monitor, the program has purchased additional manipulatives to be used with those that were already in place. There are working computers within the school and the students are able to use them as scheduled within the school day.

### Therapeutic Program

The Treatment Plan utilized by the program is in compliance with the COMAR.

### Recreational Program

The youth placed at Haddon have regularly scheduled outings that occur within the community. The program has a membership at the local YMCA which is just one activity the youth participate in. Schedules are available for review at any time.

### Medical

The program ensures regular compliance with COMAR related to medical care for clients. The program is reviewed monthly by MENTOR Maryland's Quality Assurance Department and all clients are seen within 30 days of admission for a physical examination. Clients within the program are required to have dental exams every 6 months and newly admitted clients are seen by the agency psychiatrist within 3 days of admission for a medication review.

#### Training

Since the new Program Manager began with the agency, all staff hired to work in the group home meet the 40 hour initial and annual training requirement prior to beginning work with youth. She keeps a training log up to date in the office and the log is available at anytime. MENTOR Maryland has seen significant improvement in the programming occurring for the youth placed at Haddon since January 2009. The youth are thriving in the environment which is evident by the decrease of incident reports as well as the number of goals they are meeting. The home will continue to improve and implement best practices in working with the youth referred for the program.

#### **Sykesville Shelter**

The JJMU notes that the Facility Administration did not remove a Direct Care staff person from working directly with youth, even though Child Protective Services was investigating the staff for a reported physical child abuse at the facility. Failure to communicate the incident reported to Facility Administration led to that program staff member being permitted to work. Facility administrators are reviewed regulations with both DJS investigators and JJMU monitors to correct and prevent further incidents such as this from occurring in the future.

The report noted that the facility released a youth who had been court ordered into the facility. The Facility Case Manager discussed concerns with regards to releasing youth with DJS workers. The Facility Case Manager received confirmation to proceed with the release of the youth, and was under the belief that protocol was adhered to.

The facility was noted for failing to file an incident report with DJS according to DJS policies and procedures. Failure to report incidents and incident reporting timeliness is an ongoing concern for the facility. Assistance from DJS was requested and training is set for May 26, 2009. It was also noted that the facility no longer reports population figures to DJS Headquarters on a daily basis. All efforts to correct this will be made and should be completed by May 30, 2009.

The administration dismissed one staff person from direct care responsibilities. The DJS Office of the Inspector General (OIG) did sustain violations against that staff who left employment at the end of January 2009.

The Fire Marshal inspected the facility on January 23, 2009. The inspection found violations in the smoke detectors and fire alarm system. Facility personnel have



corrected those defects. The facility will conduct all fire drills monthly in accordance with COMAR beginning May 22.

Work has begun on porch repairs and a dishwasher is forthcoming. The Facility Administration continues to work with DJS to correct basement issues. To date, the shelter has thoroughly sanitized the entire room in which the sump pump is located; replaced the sump pump; sanitized the well in which the pump was located; replaced and sealed the cover to the well; scrubbed the walls and sealed them with new coats of paint.

### **The Way Home**

As a response, prior to a youth's admission, a clothing inventory will be taken by the Program Director and a needs assessment will be made. After an assessment is completed, the DJS case manager and TWH staff will work together to meet the clothing needs of the youth prior to admission. If a youth is admitted without clothing, the youth will have access to clothing that has been donated to TWH until permanent clothing can be provided.

Currently all our youth are appropriately placed in an educational setting. When a youth is first admitted to the program, it can take a few weeks to enroll them into a program due to not having all of their information available. Currently TWH utilizes four different educational programs to meet our residents' needs: Augusta Fells Savage Institute of Visual Arts, The Baltimore Academy, Chesapeake Center for Youth Development and The Mountain Manor School. TWH can contact the DJS educational liaison if we have difficulties with enrollment.