

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

2015 SECOND QUARTER REPORT

Enclosed please find the compilation of second quarter 2015 reports from the Maryland Juvenile Justice Monitoring Unit (independent juvenile monitor). This report compendium provides data and analysis concerning treatment of and services provided to youth in Department of Juvenile Services (DJS/the Department) directly run and licensed facilities throughout Maryland.

The Department's response and a response from the Maryland State Department of Education are included, as indicated on the contents page.

The JJMU Second Quarter 2015 Report was produced by Margi Joshi, Nick Moroney, Tim Snyder and Eliza Steele. Thanks to Taran Henley, Fritz Schantz and Maria Welker for technical assistance.

We respectfully submit this report to the Governor, members of the General Assembly, the Secretary of Juvenile Services, and members of the State Advisory Board for Juvenile Services as required under Maryland law.

All current and prior reports of the Juvenile Justice Monitoring Unit and related responses are available through our website at www.oag.state.md.us/jjmu.



NICK MORONEY
Director

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

August 2015

The Honorable Lawrence J. Hogan, Jr., Governor
State of Maryland

The Honorable Thomas V. Mike Miller, Jr., President of the Senate
Maryland General Assembly

The Honorable Michael E. Busch, Speaker of the House of Delegates
Maryland General Assembly

Members of the General Assembly

The Honorable Sam J. Abed, Secretary
Department of Juvenile Services

The Honorable Arlene F. Lee, Executive Director
Governor's Office for Children

Members of the State Advisory Board for Juvenile Services
c/o Department of Juvenile Services

Dear Governor Hogan, Senate President Miller, Speaker of the House Busch, Members of the General Assembly, Secretary Abed, Ms. Lee, and State Advisory Board Members:

The State of Maryland is at a turning point - we know now that borrowing money to put our young people in facilities far from home in the hopes of addressing their needs and helping them overcome challenges has not worked (http://djs.state.md.us/drg/Sections/Recidivism_2014.pdf).

We know that localized outcome and data driven organizations such as Thread in Baltimore City are incredibly successful in their work to enable our most at-risk kids (www.thread.org).

The takeaway: let's engage local professionals and organizations to support our kids when needed and let's stop throwing lives and money away on a failed model of justice and service provision.

If we invest in our youth and in proven services and treatments, we can fully reform juvenile justice in Maryland.

If we manage that - and it can and must be done - then we will be also have stemmed the tide into adult jails and prisons.

Respectfully submitted,

Nick Moroney

Nick Moroney
Director
Maryland Juvenile Justice Monitoring Unit

Cc: Attorney General Brian Frosh
Chief Deputy Attorney General Elizabeth Harris
Deputy Attorney General Thiruvendran Vignarajah
Ms. Christine Buckley, Treasurer's Office
Deputy Secretary Linda McWilliams, Mr. Karl Pothier and Mr. Jay Cleary, DJS
Margi Joshi, Tim Snyder and Eliza Steele, JJMU

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JUVENILE JUSTICE REFORM IN MARYLAND

Right-size the System

Reduce the Use of Secure Detention

The average daily population (ADP) of kids in Department of Juvenile Services' (DJS/the Department) detention centers during the second quarter of 2015 declined by 20% compared to the same time in 2013. This reduction is part of a positive trend that is rooted in declining juvenile crime rates and ongoing efforts by DJS to reduce the use of secure detention for pre- and post-disposition youth. In Baltimore City, DJS has continued to make notable strides in reducing the secure detention population since reinvigorating the Annie E. Casey Foundation's Juvenile Detention Alternative Initiative (JDAI). The ADP (excluding children charged as adults) at the boys' detention center in Baltimore City (BCJJC) during the quarter decreased by 11% compared to the same period in 2014.

Expand and Support Juvenile Detention Alternatives Initiative (JDAI)

A spike in population during the quarter at the Hickey detention center, which houses youth from multiple jurisdictions, underscores the need to establish JDAI sites statewide. The Department has initiated JDAI in Prince George's County where full participation from the court and other stakeholders is still needed to reduce the inappropriate use of secure detention.

Reduce Commitments to DJS

Research indicates that keeping kids out of the deep-end of the juvenile justice system is "more cost effective than incarceration," and yields "fundamental benefits such as decreased recidivism [and] more appropriate treatment for youth."¹

The ADP in DJS committed placements during the second quarter of 2015 declined by 30% compared to the same time in 2013. Efforts to sustain this reduction should continue in order to address issues identified in a 2015 report by DJS and the Annie E. Casey Foundation. The report found that 27% of commitments to DJS are for technical violations of probation and that 59% of commitments were for kids assessed as low to moderate risk for reoffending.²

Rates of commitment for low and medium risk kids were especially high in Prince George's and Wicomico counties.³ Data shows that the juvenile divisions the Office of the Public Defender in these jurisdictions (and others, including Frederick and Washington counties) are understaffed.⁴ According to a 2013 study, kids who are "represented by attorneys with social

¹ National Juvenile Justice Network (NJJN). "Community-Based Supervision: Increased Public Safety, Decreased Expenditures." November 2014. p. 2 http://www.njcn.org/uploads/digital-library/NJCN-YAP_CBA-costs_Nov2014_FINAL2.pdf

² Doors to Commitment: What Drives Juvenile Confinement in MD, The Annie E. Casey Foundation Juvenile Justice Strategy Group - January 2015, p. 13 and 43.

<http://www.djs.maryland.gov/docs/AECF%20Assessment%20of%20MD%20Dispositions%20-%20Updated%20March%2016%20-%20Final%20PDF.pdf>

³ Ibid, p. 26.

⁴ State of Maryland Office of the Public Defender, Fiscal Year 2014 Annual Report, p. 36.

<http://msa.maryland.gov/megafile/msa/speccol/sc5300/sc5339/000113/020000/020985/unrestricted/20150437e.pdf>

workers were nearly three times more likely to receive alternative sentences than those without social workers.”⁵ The budget for the Office of the Public Defender should be amended to allow for increased hiring of attorneys and social workers to ensure that kids and families who cannot afford private lawyers and other services have equal opportunities for effective representation.

The State of Maryland, through coordination among DJS, the courts and other state agencies should reduce the overuse of commitment to DJS and out-of-home placement by also expanding community-based treatment resources. State law should be changed to prohibit the commitment of youth to DJS for technical violations of probation. Additionally, DJS and the courts should ensure low or medium risk youth are not sent to out-of-home placement.

Given the findings of the report by DJS and the Annie E. Casey Foundation, the State of Maryland and the Department should abandon plans for the construction of new committed placement facilities. Instead of taking out bonds to fund the construction of expensive and ineffective institutions, the State should invest in treatment services that can be accessed by children and their families in the community – with or without DJS involvement. Community-based services are less expensive than residential facilities and more effective at meeting the needs of justice involved youth, including those assessed as high-risk.⁶

CPS and Improving Safety, Programming and Services in Facilities

Child Protective Services (CPS) in DJS Facilities

Child Protective Services (CPS) investigates allegations of abuse and neglect at DJS-operated and licensed facilities only when the alleged victim is under 18 years old and only if the alleged victim is reported to have sustained a visible injury. CPS should ascertain facts (conduct interviews, review any available video footage and documentation) before deciding whether or not to investigate (see Hickey, p. 27). Maryland law should mandate that CPS independently responds to all allegations of abuse in facilities (as is routine practice in Carroll County) and CPS protections should be extended to cover all kids in DJS facilities, regardless of age.

Provide Evidence-Based and Trauma-Informed Services in Facilities

In recent years, the Department has achieved an overall increased level of safety in the detention and committed placement centers that it operates. Efforts to enhance safety of youth and staff should be sustained and coupled with the adoption of evidence-based services and a trauma-informed approach throughout the Maryland juvenile justice system. Everyone who has contact with kids, including all DJS employees, MSDE-JSE (Maryland State Department of Education, Juvenile Services Education) staff, law enforcement, the judiciary and court personnel⁷, should be comprehensively trained in adolescent development, mental health, and trauma and its effects. Additionally, services for vicarious trauma should be available to everyone working with kids in the juvenile justice system.

⁵ Guerin, L., Otis, M. and Royse, D. “Increasing Alternative Sentencing in the Juvenile Justice System Through a Partnership Between Public Defenders and Social Workers,” *Journal of Forensic Social Work*. 3:261–277, 2013.

⁶ NJJN, 2014 p. 1 http://www.njjn.org/uploads/digital-library/NJJN-YAP_CBA-costs_Nov2014_FINAL2.pdf

⁷ National Child Traumatic Stress Network, http://www.nctsn.org/sites/default/files/assets/pdfs/judge_bench_cards_final.pdf

The Department should replace the current behavior management system with evidence-based, trauma-informed programming (see Committed Placement section, p. 6). DJS policies that counteract the rehabilitative focus of the juvenile justice system – including indiscriminate shackling and strip searching – should be abandoned. Strip searches can be re-traumatizing for youth and "undermine, rather than help, a child's wellbeing."⁸ Health experts agree that "shackling is humiliating for young people, that it harms their identity development, and that young people are more vulnerable to lasting harm from feeling humiliation and shame."⁹

Telephone System in DJS Facilities

In 2014, payphones were installed in each of the DJS detention and committed placement facilities under a contract with a private company. DJS policy does not permit youth to make extra calls if money is added to his or her account. The Department should ensure that the contracted company fully disables the ability of parents to pay into telephone accounts that youth are not permitted to use. Also, frequent technical problems with the phone system result in youth having phone calls to family members cut off before the allotted time is up. The Department should ensure that technical problems with the phones are permanently addressed.

Children Charged as Adults

Research indicates that charging and prosecuting kids in the adult criminal justice system creates worse outcomes for youth and public safety.¹⁰

Children who are charged as adults in Baltimore City and whose cases are eligible for transfer to the juvenile court are automatically detained at the juvenile detention facility (BCJJC). Housing kids charged as adults in a juvenile facility is a developmentally appropriate measure that has protected a substantial number of youth from being held at the adult detention center in Baltimore City, without compromising safety at BCJJC.

Effective October 1, 2015, youth in Maryland charged as adults with the possibility of transfer to the juvenile court will be held at a DJS detention center, as opposed to an adult facility.

In preparation for the changes that will take effect in October, DJS and the Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) will need to adapt certain practices, including the behavior management approach and educational offerings, to meet the needs of kids charged as adults in DJS facilities (see Detention introduction, p. 17-20).

While using juvenile detention centers to house kids charged as adults is an advance, Maryland law should be changed to end the prosecution of children as adults.

⁸ Jessica Feierman and Riya Shah, Juvenile Law Center. "Protecting Personhood: Legal Strategies to Combat the Use of Strip Searches on Youth in Detention," Rutgers Law Review, 2007. <http://www.jlc.org/blog/juvenile-law-centers-findings-strip-searches-youth-detention-cited-international-report>

⁹ National Juvenile Defender Center, Campaign against Indiscriminate Juvenile Shackling Fact Sheet, 2014. <http://njdc.info/wp-content/uploads/2014/09/CAIJS-Fact-Sheet-2014.pdf>

¹⁰ Steinberg, Laurence. "Adolescent Development and Juvenile Justice." *Annual Review of Clinical Psychology* Volume: 5 Issue: 1 (2009-01-01) p. 459-485.

Facility Incident and Population Trends

Second quarter 2015 incident and population trends versus the same time last year:

- ✓ Average daily populations (ADP) of youth in secure detention decreased at Baltimore City Juvenile Justice Center (BCJJC), Cheltenham Youth Facility (CYF), and Western Maryland Children's Center (WMCC).
- ✓ ADP of youth in committed placement decreased significantly at J. DeWeese Carter Center (Carter), the Victor Cullen Center (Cullen), and the youth centers in western Maryland.
- ✓ Youth fights/assaults decreased at BCJJC and CYF detention centers and in committed placement at Cullen, Carter, and the youth centers.
- ✓ Physical restraints in detention decreased at BCJJC, CYF, and WMCC and in committed placement at Carter, Cullen, Silver Oak Academy (SOA) and the youth centers.
- ✓ Mechanical restraints were not utilized at Lower Eastern Shore Children's Center (LESCC) detention center or in committed placement at Carter. The use of mechanical restraints decreased at BCJJC, CYF, Thomas J.S. Waxter Children's Center (Waxter), Alfred D. Noyes Children's Center (Noyes) detention centers and in committed placement at Cullen.
- ✓ There were no seclusions at BCJJC, CYF, and WMCC detention centers or in committed placement at Carter. Seclusions decreased at Charles H. Hickey, Jr., School (Hickey) detention center and at Cullen.
- Average daily population of youth increased by 38% at the Hickey detention center.
- Youth fights/assaults and physical restraints increased at Noyes, Hickey, Waxter and LESCC detention centers.
- Mechanical restraints increased at Hickey and WMCC detention centers and at the youth centers.
- The use of seclusion in detention increased at Noyes, LESCC, and Waxter.
- There was a total of 80 instances of suicidal ideation and 17 incidents of self-injurious behavior at the 14 DJS-operated facilities during the second quarter of 2015. Forty-five percent of suicide ideations occurred at Waxter hardware secure detention center.

COMMITTED PLACEMENT CENTERS

The average daily population in DJS-operated committed placement facilities during the second quarter of 2015 declined 30% compared to the same period two years ago. This reduction is a positive step towards remedying issues identified in a recent report by DJS and the Annie E. Casey Foundation which found that:

- 27% of commitments to DJS are for technical violations of probation and that,
- 59% of commitments were for youth assessed as low to moderate risk for reoffending.¹¹

The State of Maryland, through coordination among DJS, the courts and other state agencies should continue to reduce the use of commitment (to DJS) and out-of-home placement by expanding community-based treatment resources. Such options have been proven to be more effective and less expensive than incarceration, including for high-risk youth.¹²

Provide Evidence-Based, Trauma-Informed Treatment

Youth who are committed to out-of-home placement should receive individualized, evidence-based, trauma-informed treatment services in a therapeutic environment.

Research shows that, given the high prevalence of trauma among youth in the juvenile justice system,¹³ “implementation of a trauma-informed approach using both trauma training for direct care staff and a trauma-focused intervention [is] effective in reducing psychological distress among youth” and reducing staff utilization of seclusions and restraints.¹⁴

However, there is no evidence-based and trauma-informed therapeutic model in operation in DJS committed placement centers and direct care staff are not trained in treatment programming.

Instead, the Department has implemented a points and level behavior management system in all DJS facilities that is neither therapeutic nor evidence-based, but acts as a barrier to individualized treatment. The Department should replace the current behavior management system with a trauma-informed, evidence-based treatment program. All staff – specifically all direct care staff – should be trained to implement this approach. Mental health clinicians should be trained to deliver evidence-based trauma therapy and should support direct care workers in de-escalation efforts and in daily interactions with youth.

¹¹ Doors to Commitment: What Drives Juvenile Confinement in MD, The Annie E. Casey Foundation Juvenile Justice Strategy Group - January 2015, p. 13 and 43.

<http://www.djs.maryland.gov/docs/AECF%20Assessment%20of%20MD%20Dispositions%20-%20Updated%20March%2016%20-%20Final%20PDF.pdf>

¹² National Juvenile Justice Network, November 2014. p. 1 http://www.njjn.org/uploads/digital-library/NJJN-YAP_CBA-costs_Nov2014_FINAL2.pdf

¹³ Trauma histories among justice-involved youth: findings from the National Child Traumatic Stress Network European Journal of Psychotraumatology 2013, 4: 20274 - <http://dx.doi.org/10.3402/ejpt.v4i0.20274>

¹⁴ Ibid.

Youth may be ejected from the staff secure youth centers and sent to Victor Cullen, (maximum security committed placement facility for boys) in response to aggressive behavior. However, evidence-based therapies in aggression replacement are not available at the youth centers, Cullen or any DJS-operated facility. Evidence-based services for aggression replacement should be available at all facilities operated and licensed by DJS.

At Victor Cullen, the Department has established an Intensive Services Unit (ISU) which is a self-contained and restrictive housing unit for kids involved in aggressive incidents.

The creation of an ISU is not an appropriate response to the need for treatment programming in DJS facilities, where all youth should receive evidence-based, individualized services in a therapeutic environment. Youth who are placed in an ISU do not receive evidence-based treatment for aggression replacement. Kids in an ISU are also prevented from progressing in the behavior management system which determines their eligibility for certain incentives, privileges and release from the facility.

The Department also plans to convert the Savage Mountain staff secure youth center into a hardware secure placement. Increasing the restrictiveness of the facility in which a child is placed, without implementing programming that is evidence-based and trauma-informed, is not likely to lead to progress in treatment.

Stop Indiscriminate Strip Searches and Shackling

The Department should end practices that counteract the promotion of a therapeutic environment.

The use of strip searches can be re-traumatizing for youth and can "undermine, rather than help, a child's wellbeing."¹⁵ DJS policy requires all youth to be strip searched following all visits and trips off grounds, including outings earned as a reward for good behavior. Youth are required to remove all of their clothes, squat and cough while observed by staff. All youth are subject to this practice whether or not there is reasonable suspicion that they are hiding something potentially harmful.

DJS policy also requires youth in secure facilities to be restrained in handcuffs, shackles, waist chains and a black box with a padlock for transport to and from court, medical and educational appointments. The policy applies to all youth including those who are eligible for earned home passes and off-grounds activities. Health experts agree that "shackling is humiliating for young people, that it harms their identity development, and that young people are more vulnerable to lasting harm from feeling humiliation and shame than adults."¹⁶

The Department should change or jettison policies mandating indiscriminate shackling and strip searching.

¹⁵ Jessica Feierman and Riya Shah, Juvenile Law Center. "Protecting Personhood: Legal Strategies to Combat the Use of Strip Searches on Youth in Detention," Rutgers Law Review, 2007. <http://www.jlc.org/blog/juvenile-law-centers-findings-strip-searches-youth-detention-cited-international-report>

¹⁶ National Juvenile Defender Center, Campaign against Indiscriminate Juvenile Shackling Fact Sheet, 2014. <http://njdc.info/wp-content/uploads/2014/09/CAIJS-Fact-Sheet-2014.pdf>

Increase Family Engagement

Family engagement is a critical component of establishing a trauma-informed juvenile justice system.¹⁷ Supporting family engagement is especially important in committed placement centers where kids may spend several months or even a year away from their families. The Department should increase family engagement by facilitating family involvement in the treatment process whenever possible.

DJS limits youth to two 10-minute phone calls per week and those calls can be interrupted by technical issues (see Juvenile Justice Reform section, p. 3). This practice applies to youth in short-term detention and in long-term committed placement centers. The Department should allow kids to talk to their families on the phone more often and for longer periods.

Family visits are limited to certain hours on two specified days a week while studies show frequent contact with family members is associated with better behavior and academic performance for youth.¹⁸

Visits are usually limited to two family members per visit. At times the Department has allowed special visits outside of the usual hours or with siblings under 16, children of youth, or extended family members. Special visits must be requested by a youth, arranged through facility case managers and approved by facility superintendents (DJS Policy RF-706-15).

The Department should increase regular visitation days and expand visitation hours so as to accommodate family visits whenever possible. Additionally, facility superintendents and case managers should be proactive in encouraging and facilitating regular and special visits.

Given the remote location of most DJS-operated committed placement centers and the difficulty some families may have in accessing them, DJS should provide transportation between family homes and facilities where children are placed. Currently, families seeking transportation assistance from the Department must first get to a DJS facility in either Baltimore or Laurel before traveling to the facility housing their child.

According to the Department's behavior management system, youth can earn up to two home passes during their length of stay in some committed placement centers. Home passes of gradually increasing duration should be incorporated and occur regularly in all DJS-operated committed placement centers.

Juvenile justice systems should "use more family-centered, collaborative interventions."¹⁹ The Department should increase family involvement when a child is in placement and consider possible treatment or service needs of the family as a whole as a part of the plan for each youth.

¹⁷ Liane Rozzell, National Childhood Traumatic Stress Network. September 2013. "The Role of Family Engagement in Creating Trauma-Informed Juvenile Justice Systems." http://www.njcn.org/uploads/digital-library/NCTSN_family-engagement-trauma-informed-systems_Liane-Rozzell_September-2013.pdf

¹⁸ Villalobos Agudelo, Sandra (2013). The Impact of Family Visitation on Incarcerated Youth's Behavior and School Performance. <http://www.vera.org/pubs/impact-of-family-visitation-on-incarcerated-youth>

¹⁹ Liane Rozzell, National Childhood Traumatic Stress Network. September 2013, p. 5 http://www.njcn.org/uploads/digital-library/NCTSN_family-engagement-trauma-informed-systems_Liane-Rozzell_September-2013.pdf

Increase and Enhance Educational Services and Professional Opportunities for Youth

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) is responsible for providing educational services to students in all DJS-operated detention and committed placement centers.

There is a need for increased MSDE-JSE personnel and technology resources to ensure that the educational needs of youth in committed placement are met. Students who have earned their GED or high school diploma do not have access to post-secondary educational programming. Educational resources including access to the internet and online and on-campus enrollment at local community colleges and universities should be available to all youth in DJS facilities (see MSDE-JSE section, p. 38-40).

Hands-on vocational education is not available on a daily basis at all DJS committed placement centers. There should be a dedicated vocational education instructor at each MSDE-JSE school to ensure daily access to courses leading to nationally recognized certification in a variety of professions and trades.

The Department and MSDE-JSE should collaborate to ensure professional opportunities such as employment and internships on grounds and in the community are available to youth.

DJS should expand the World of Work program, which compensates youth for work done at facilities, to all of the committed placement centers and ensure youth in the program are paid at least the statutory minimum wage.

Victor Cullen Center

Victor Cullen Center (Cullen), in Frederick County, is a maximum security committed placement center owned and operated by the Department of Juvenile Services (DJS/the Department). The DJS-rated housing capacity is 48 boys. African American youth represented 78% of total entries to Cullen during the second quarter of 2015, down from 91% during the same period last year.

Victor Cullen – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	47	44	34
1. Youth on Youth Assault/Fight	27	32	16
2. Alleged Youth on Staff Assault	8	10	4
3. Restraint	77	87	30
4. Use of Handcuffs and/or Shackles	42	61	27
5. Seclusion	34	38	11
6. Contraband	8	1	0
7. Suicide Ideation/Attempt	1	2	6

Average daily population decreased by 23% during the quarter compared to the same time last year. Fights and assaults decreased by 50%. Physical restraints decreased by 66%. The use of mechanical restraints and seclusions decreased by 56% and 71%, respectively.

Cullen is the only hardware secure committed placement center for boys in the state and boys placed there are likely to be facing issues of anger or aggression. A substantial number of boys are placed at Cullen after being ejected from other placements for fighting. However, there is no evidence-based treatment for anger management or aggression replacement at Cullen (or any other DJS-operated facility).

There is no evidence-based or trauma-informed treatment model at Victor Cullen. All staffers, especially direct care workers, should be trained to help implement a trauma-informed, evidence-based treatment program. Collaboration between direct care workers and mental

health clinicians should be ongoing to support staff in responding appropriately to the treatment needs of kids at Cullen.

The Intensive Services Unit (ISU) is a self-contained housing unit at Cullen for kids involved in aggressive incidents that the Department determines to be in need of increased attention. There are no evidence-based services for aggression replacement on the ISU.

The creation of an ISU is not an appropriate substitute for the implementation of a treatment program and the establishment of a therapeutic culture at Victor Cullen. All youth at Victor Cullen should receive individualized, intensive treatment services without having to be removed from the general population and placed on a separate housing unit.

Kids on the ISU are prohibited from participating in the behavior management system (which governs youth eligibility for certain incentives, privileges and release). Youth on the ISU should be enabled to advance through the points and levels system in the same way as their peers on regular housing units.

Structured recreational programming is limited at Victor Cullen. Organized recreational and therapeutically orientated activities should be substituted for excessive downtime, especially on weekends. Savage Mountain youth center has indoor and outdoor climbing elements. All DJS committed placement centers, including Victor Cullen, should offer youth similar indoor and outdoor experiential recreation outlets locally.

The Maryland State Department of Education, Juvenile Services Division (MSDE-JSE) has made progress in improving the school climate and program at Victor Cullen. A career technology education instructor was hired during the quarter and greenhouse and aquaponics projects are available for students. Efforts to enhance educational offerings should continue and be expanded to include post-secondary programming for students at Cullen who have already earned a high school diploma or GED (see MSDE-JSE section, p.38-40).

Youth Centers x4

The youth centers consist of four separate staff secure facilities for boys owned and operated by the Maryland Department of Juvenile Services (DJS/the Department): Green Ridge (40-bed capacity), Savage Mountain (36 beds), Meadow Mountain (40 beds), and Backbone Mountain (48 beds) youth centers. African American youth represented 73% of total youth entries during the second quarter of 2015, down slightly from 74% during the same period last year.

Cameras have been installed but are not fully operational at all four youth centers.

Combined Youth Centers (x4) – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	144	140	88
1. Youth on Youth Assault/Fight	41	42	21
2. Alleged Youth on Staff Assault	10	4	5
3. Restraint	84	65	60
4. Use of Handcuffs and/or Shackles	29	19	22
5. Seclusion	0	0	0
6. Contraband	15	10	2
7. Suicide Ideation/Attempt	3	3	3

Average daily population (ADP) at the youth centers decreased by 37% during the second quarter compared to the same period last year. Fights and assaults decreased by 50%, however, physical restraints only decreased by 8%. Incidents involving the use of mechanical restraints increased by 16%. The Department should provide comprehensive training for staff in therapeutically orientated responses to youth behavior.

There is no evidence-based and trauma-informed treatment program at the youth centers. Direct care staff are not trained in any therapeutic approach. All staff should be trained to implement a trauma-informed, evidence-based treatment program. Plans to introduce a puppy training program at Savage Mountain youth center should go forward and be expanded to other facilities.

At Meadow Mountain, the dedicated substance abuse youth center, two out of four addictions counselor positions are vacant. These vacancies should be filled without delay.

Some youth are ejected from the youth centers and sent to Victor Cullen (maximum security committed placement facility for boys) for fighting. However, there are no evidence-based therapies for anger management or aggression replacement at the youth centers (or at Victor Cullen).

The Department plans to convert the Savage Mountain youth center into a maximum security facility by installing a security fence and making other changes to the physical plant.

Converting Savage Mountain into a maximum security facility is an inappropriate response to the need for an evidence-based, trauma-informed treatment program at the youth centers (and at other DJS facilities). Augmenting the security level of a facility without implementing evidence-based, therapeutic services and enhancing staff training is not likely to meet the treatment needs of youth in DJS placements. The Department should make individualized and intensive evidence-based treatment services available to youth outside of restrictive and high-security environments.

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) operates schools at each of the four youth centers. Eligible students at Backbone Mountain youth center are able to attend a local community college. Kids who are placed at other youth centers who already have a GED or high school diploma do not have access to post-secondary education. The Department and MSDE-JSE should collaborate to ensure that all eligible students have access to post-secondary education.

There is one vocational education instructor who proctors the GED exam at Green Ridge and travels across the state instructing vocational courses at other facilities. Each youth center should have a dedicated vocational education instructor to ensure that all students have access to a variety of hands-on vocational education programs on a daily basis (see MSDE-JSE section, p. 38-40).

Savage Mountain and Meadow Mountain youth centers have climbing elements (climbing walls, ropes course, etc.), however, each of the four youth centers and all other DJS committed placement centers should offer youth both indoor and outdoor experiential recreation outlets locally.

Silver Oak Academy

Silver Oak Academy (SOA), located in Carroll County, is a privately operated staff secure (not fenced) committed placement center for up to 96 boys which is licensed by the Department of Juvenile Services (DJS/the Department). African American youth represented 83% of total entries to SOA in the second quarter of 2015, down from 90% during the same period last year.

SOA – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	47	63	62
1. Youth on Youth Assault/Fight	6	10	9
2. Alleged Youth on Staff Assault	1	0	2
3. Restraint	7	22	11
4. Use of Handcuffs and/or Shackles	0	0	0
5. Seclusion	0	0	0
6. Contraband	6	16	12
7. Suicide Ideation/Attempt	0	0	0

Average daily population during the second quarter (62) remained relatively constant compared to the same quarter last year (63). Fights and assaults decreased slightly while the use of physical restraints decreased by 50%. Efforts to reduce the use of physical restraint should continue.

During the quarter, 12 SOA students earned high school diplomas. Silver Oak provides comprehensive services in a therapeutic, school-like environment. Staff are trained in a treatment model based on cognitive-behavioral therapy. Students can earn credits towards graduation requirements and receive a high school diploma or prepare for and take the GED exam. There is a variety of vocational courses leading to certification in a number of fields including culinary arts, barbering, construction and healthcare.

Students participate in interscholastic sports and also work, study (at community college) and volunteer regularly in the local community. Silver Oak contracts with a private company to provide aftercare services to augment DJS case management.

The J. DeWeese Carter Center

The J. DeWeese Carter Center (Carter) is a maximum security committed placement center for girls. Located on the eastern shore, Carter is owned and operated by the Maryland Department of Juvenile Services (DJS/the Department). African American girls represented 63% of total youth entries during the second quarter of 2015, down from 66% during the same period last year.

Carter – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	12	10	8
1. Youth on Youth Assault/Fight	0	2	1
2. Alleged Youth on Staff Assault	0	0	1
3. Restraint	8	13	5
4. Use of Handcuffs and/or Shackles	1	1	0
5. Seclusion	0	0	0
6. Contraband	0	0	0
7. Suicide Ideation/Attempt	2	4	0

The average daily population decreased and incidents remained low during the quarter. Efforts to minimize incidents of aggression and the use of physical restraints and seclusions should continue at Carter. Staff and administrators at Carter have provided additional afternoon programming. Administrators at other facilities should take steps to increase structured programming as excessive downtime can contribute to incidents.

In the juvenile justice system, 75% of kids have been exposed to trauma.²⁰ Girls in the system are four times more likely than their male counterparts to have experienced sexual abuse and almost twice as likely to experience complex trauma.²¹ However, DJS direct care staff are

²⁰ Mental Health and Juvenile Justice Collaborative for Change, "Better Solutions for Youth with Mental Health Needs in the Juvenile Justice System." 2014, p. 2 <http://cfc.ncmhjj.com/wp-content/uploads/2014/01/Whitepaper-Mental-Health-FINAL.pdf>

²¹ Human Rights Project for Girls, Georgetown Law Center on Poverty and Inequality, Ms. Foundation for Women, "Sexual Abuse to Prison Pipeline: The Girls' Story," 2015. p. 8 http://rights4girls.org/wp-content/uploads/r4g/2015/02/2015_COP_sexual-abuse_layout_web-1.pdf

not trained in any therapeutic model and there is no evidence-based, trauma-informed treatment program at Carter.

Mechanical restraints were not used in any incident during the quarter. Staff at Carter have demonstrated an ability to privilege verbal de-escalation and treatment oriented interactions with youth over physical interventions. The Department should support these efforts to promote a therapeutic environment by implementing an evidence-based, trauma-informed treatment program in place of the current behavior management system.

Mental health clinicians should be certified to deliver and all DJS staff should be trained to help implement evidence-based, trauma-informed treatment.

Policies and practices that undermine efforts at the facility level to create a therapeutic atmosphere should be changed by DJS. Research indicates that "conditions in juvenile justice systems risk re-traumatizing girls. Routine procedures, including the use of restraints and strip searches...can be particularly harmful to victims of trauma by triggering their traumatic stress symptoms."²²

Department policy requires all youth to be strip searched following all visits (including with lawyers) and trips off grounds, including outings earned as a reward. Kids are required to remove all of their clothes, squat and cough while observed by staff. All youth are subject to this practice whether or not there is reasonable suspicion that they are hiding something potentially harmful.

DJS policy also requires all youth to be mechanically restrained in handcuffs, shackles, waist chains and a black box with a padlock, for transport to and from court, medical and educational appointments. The policy applies to all youth (including those who have been cleared to participate in activities in the community) without any individualized determination of risk. Twice during the quarter a girl at Carter was transported for earned home passes in the apparatus described above because her parent did not have the resources to drive between Prince George's County and Carter in Chestertown on the eastern shore.

The Department should stop the practices of indiscriminate shackling and strip searching of youth and change DJS policy accordingly.

Youth in committed placement are away from their families for several months or even a year and family engagement is a critical component of providing trauma-informed care.²³ The Department should increase the duration and number of weekly phone calls currently allotted to youth and expand visitation days and hours to accommodate family visits whenever possible (see Committed Placement introduction, p. 7). Additionally, facility administrators should be proactive in encouraging and facilitating increased home passes and facility visits. Family engagement should not entail transporting kids for home passes in chains or strip searching youth after family visits to a facility, as currently required by DJS policy.

²² Ibid, 14.

²³ Liane Rozzell, National Childhood Traumatic Stress Network. "The Role of Family Engagement in Creating Trauma-Informed Juvenile Justice Systems." http://www.njjn.org/uploads/digital-library/NCTSN_family-engagement-trauma-informed-systems_Liane-Rozzell_September-2013.pdf

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) operates the school at Carter.

Post-secondary educational programming is insufficient. There are three short-term career technology education courses. Youth at Carter need access to comprehensive post-secondary programming on a daily basis to ensure that they have appropriate educational services over the course of their length of stay (at least six to nine months). Youth should be enrolled in local community colleges or universities, and have access to career-oriented certificate programs on grounds at Carter and in the community.

A girl who arrived at Carter in March with a GED did not receive proper educational services. Although she scored high enough on a placement exam to enroll in language arts courses, she was not permitted to matriculate at a nearby community college. MSDE-JSE and DJS should enable eligible students to enroll in local colleges on campus and online, and to secure community-based internships and employment (see MSDE-JSE section, p. 38-40).

Savage Mountain and Meadow Mountain youth centers have climbing elements (climbing walls, ropes course, etc.), however, all DJS committed placement centers, including Carter, should offer youth both indoor and outdoor experiential recreation outlets locally.

An additional vehicle is needed to connect girls to educational and professional opportunities in the community. DJS should provide Carter with another vehicle to be used for off-grounds activities and to ensure appointments can be kept.

DETENTION CENTERS

Progress continues in reducing the number of kids inappropriately housed in secure detention and improving safety at the two largest Maryland Department of Juvenile Services (DJS/the Department) operated detention facilities (BCJJC, p. 21, CYF, p. 23). However, three DJS-operated detention facilities had significant increases in incidents during the second quarter (Noyes, p. 31, Hickey, p. 25, Waxter, p. 29) compared to the same period last year.

Secure Detention Population

The utilization of alternatives to secure detention by DJS and the courts has helped contribute to a 6% reduction in the average daily secure detention population compared to the same time last year. During the second quarter of 2015, the average daily population (ADP) of youth at BCJJC in Baltimore City and CYF in Prince George's County decreased by 14% and 28%, respectively, compared to the same time last year. Incidents of aggression and restraints declined significantly and seclusion was not utilized at BCJJC or CYF. Reductions in population and incidents occurred while certain youth charged as adults were housed at these facilities. Housing kids charged as adults has not resulted in an overall increase in population or incidents and has protected a substantial number of children from the dangers of being held in an adult facility.

According to a report by the Justice Policy Institute, "options that keep youth home and engaged in school and family life are documented to produce better outcomes both for youth and public safety."²⁴ DJS should continue to identify and revise internal policies, procedures, and processes that result in the inappropriate use of secure detention.

In Baltimore City, DJS has partnered with stakeholders, including the courts, to implement the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI). JDAI aims to reduce the secure detention population by promoting the use of effective alternatives. A spike in population during the second quarter at the Hickey detention center, which houses youth from multiple jurisdictions, underscores the need to establish JDAI sites statewide. JDAI efforts were re-launched in Prince George's county in 2014 and should continue with full participation from the court and other stakeholders.

Secure Detention Facility Safety

While there were reductions in incidents at BCJJC and CYF during the quarter, incidents of aggression and use of restraints remained high at Noyes, Hickey, and Waxter detention centers. The use of mechanical restraints at Hickey increased by 350% and the use of physical restraints more than doubled at Waxter. Management practices at these facilities should promote a safe and therapeutically structured milieu and all direct care staff and supervisors should be comprehensively trained in de-escalation techniques and conflict resolution to reduce incidents of aggression and minimize the use of restraints. All staff should also receive training in Youth

²⁴ Justice Policy Institute, "Sticker Shock: The Price We Pay for Youth Incarceration", December 2014, p. 6 http://www.justicepolicy.org/uploads/justicepolicy/documents/sticker_shock_final_v2.pdf.

Mental Health First Aid as soon as possible. Mental health clinicians should be involved in unit activities, de-escalation and close collaboration with DJS direct care staff.

There were 54 incidents of suicidal ideation and 16 incidents of self-injurious behavior in DJS detention centers during the second quarter. Secure detention is not an appropriate environment for kids facing mental health challenges and research indicates “people with behavioral health problems simply get worse in detention, not better.”²⁵ The courts and DJS should work to connect kids to appropriate mental health services in the community.

Housing Youth Charged as Adults

Legislation will take effect in October 2015 requiring certain kids charged as adults to be housed in DJS-operated detention centers. Housing kids charged as adults in DJS facilities is a developmentally appropriate measure that will serve to enhance public safety. Kids held in juvenile facilities are less likely to reoffend than those held in adult facilities, and are more likely to receive appropriate health and education services.²⁶

The Department should change the current behavior management approach and MSDE-JSE should enhance the education program to prepare for the increased presence of youth charged as adults.

Behavior Management

The Department has implemented a points and level system, Challenge, in all of its committed care and detention facilities that is neither evidence-based, nor trauma-informed. The Department should replace the Challenge behavior management system with trauma-informed, evidence-based programming in all DJS facilities.

Under the current behavior management system, youth earn daily points which they can redeem for incentives, including hygiene products and snack foods, once per week. Sanctions for rule infractions prevent kids from participating in useful programming, such as the Boys’ Club at BCJJC and mentoring sessions at Hickey, for up to 30 days, which is longer than the average length of stay in detention.²⁷ Such sanctions are in addition to loss of points, and in some cases level demotions, associated with rule infractions.

The Challenge behavior management system does not allow pre-disposition youth (those awaiting a court decision on their case) to progress through levels and limits their incentives to generic hygiene products. This behavior management approach is especially detrimental to youth charged as adults who are more likely to have longer lengths of stay in detention under

²⁵ Justice Policy Institute, “Dangers of Detention,” p. 8. http://www.justicepolicy.org/images/upload/06-11_rep_dangersofdetention_ji.pdf

²⁶ Just Kids of Maryland, “SB 172/ HB 618 Fact Sheet.” <http://justkidsmaryland.org/wp-content/uploads/2015/02/Fact-Sheet-SB-172-HB-618.pdf>.

²⁷ According to the DJS FY 2014 Data Resource Guide (p.20), the average length of stay in detention for pre-disposition youth was 16.1 days and for youth pending placement was 26.7 days. http://www.djs.maryland.gov/drg/Full_2014_DRG.pdf

pre-disposition status than youth charged as juveniles. Under the current practice, kids may remain ineligible for incentives other than generic hygiene items for a period of weeks or even months – despite having consistently abided by the behavior management system – simply because the status of their court case has not changed.

Several DJS-operated detention centers have an Intensive Services Unit (ISU) for kids the Department determines to be in need of additional support and more individualized attention. Children on the ISU are removed from the general population and are prohibited from participating in the behavior management system which governs youth eligibility for certain incentives and privileges.

The Department should adopt evidence-based, trauma-informed programming that provides equal recognition to all youth for progress they make, provides kids with meaningful and timely incentives, and does not include disproportionately punitive sanctions.

Educational and Vocational Programming

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) is responsible for providing educational services to students in all DJS-operated detention and committed placement centers.

Educational programming needs to be augmented for the detention population. The need to close gaps in educational services is particularly important to ensure that kids charged as adults, who may be in detention for several months, have appropriate and comprehensive educational programming available to them for the entire length of their stay.

Some students may enter detention requiring a small number of credits to graduate high school, however youth cannot earn a high school diploma while in MSDE-JSE schools. For youth who have earned a high school diploma, a variety of post-secondary educational and vocational options should be made available (see MSDE-JSE section, p. 38-40).

The World of Work program offers compensation to youth for work done at some DJS facilities. This program should be available at all facilities and the Department should ensure that youth in the program are paid at least the statutory minimum wage.

Family Engagement

DJS limits youth to two 10-minute phone calls per week and those calls can be interrupted or disconnected because of technical issues (see Juvenile Justice Reform section, p. 3). This policy applies to youth in short-term detention and in long-term committed placement centers. The Department should allow kids to talk to their families on the phone more often and for longer periods.

Visits are limited to certain hours on two specified days a week while studies show frequent contact with family members is associated with decreased incidents and improved

academic performance for detained youth.²⁸ During the quarter, a youth remarked to a monitor that he had discouraged family members from visiting him because he did not want to be strip searched after his family left (see also Committed Placement introduction, p. 6).

Visits are usually limited to two family members per visit. At times the Department has allowed special visits outside of the usual hours or with siblings under 16, children of youth, or extended family members.

Special visit requests must be arranged through facility case managers and approved by facility superintendents. During the second quarter, some youth were denied special visits on the basis that they were not pending out-of-state placement. The Department has clarified that visitation policy does not limit special visits to kids pending out-of-state placement (DJS Policy RF-706-15).

The Department should increase regular visitation days and expand visitation hours to accommodate family visits whenever possible. Additionally, facility superintendents and case managers should be proactive in encouraging and facilitating regular and special visits. Policies and practices that may impede family engagement, including indiscriminate strip searches, should be changed.

²⁸ Villalobos Agudelo, Sandra (2013). The Impact of Family Visitation on Incarcerated Youth's Behavior and School Performance. <http://www.vera.org/pubs/impact-of-family-visitation-on-incarcerated-youth>

Baltimore City Juvenile Justice Center

The Baltimore City Juvenile Justice Center (BCJJC) is a 120-bed hardware secure detention center for boys owned and operated by the Department of Juvenile Services (DJS/the Department). African American youth represented 95% of total youth entries during the second quarter of 2015, compared to 94% during the same period last year.

BCJJC – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	87	95	82
1. Youth on Youth Assault/Fight	71	68	49
2. Alleged Youth on Staff Assault	3	12	9
3. Restraint	104	104	75
4. Use of Handcuffs and/or Shackles	34	46	28
5. Seclusion	68	72	0
6. Contraband	4	11	2
7. Suicide Ideation/Attempt	4	2	6

Average daily population during the second quarter decreased by 14% compared to the same time last year. Over the same period, fights and assaults and physical restraints decreased by 28%. Seclusion was not used during the quarter.

Decreases in population and incidents were achieved while housing a significant number of youth charged as adults at BCJJC. Housing kids charged as adults has protected a substantial number of youth from being held at the adult jail in Baltimore without undermining safety at BCJJC.

Incidents of suicide ideation increased from two to six and there were four incidents of self-injurious behavior. Secure detention is a particularly inappropriate environment for kids facing mental health challenges. All staff should receive training in Youth Mental Health First Aid as soon as possible. Mental health clinicians' offices should be relocated to the space immediately outside the living units at BCJJC to facilitate increased involvement in unit activities, in de-escalation and in working with youth in collaboration with DJS direct care staff.

During the quarter, a youth requested a special visit with his child before leaving for placement. The request was denied by a case manager on the basis that the youth was not being sent out-of-state. The Department has clarified that visitation policy does not limit special visits to kids pending out-of-state placement (DJS Policy RF-706-15). Facility administrators and case managers should be proactive in encouraging and facilitating regular and special visits.

Cheltenham Youth Facility

Cheltenham Youth Facility (CYF), located in Prince George's county, is a maximum security detention center owned and operated by the Department of Juvenile Services (DJS/the Department). The DJS-rated housing capacity is 115 boys. African American youth represented 78% of total entries during the second quarter of 2015, compared to 80% during the same time last year.

More youth charged as adults will be housed in DJS detention centers beginning October 1, 2015. The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE), which operates the school at CYF, should expand curriculum options (including post-secondary education) in detention center schools to accommodate youth with extended lengths of stay, including kids charged as adults who are housed in DJS detention centers (see MSDE-JSE section, p. 38-40).

CYF – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	98	78	56
1. Youth on Youth Assault/Fight	48	33	16
2. Alleged Youth on Staff Assault	6	4	2
3. Restraint	88	44	20
4. Use of Handcuffs and/or Shackles	3	9	5
5. Seclusion	3	0	0
6. Contraband	6	2	0
7. Suicide Ideation/Attempt	7	5	0

Average daily population during the quarter decreased by 28% compared to the same time last year. Fights and assaults decreased by 52%, physical restraints decreased by 55% and incidents involving the use of mechanical restraints decreased by four. Seclusion was not used during the quarter.

Efforts to enhance youth and staff safety by incorporating mental health staff, privileging verbal de-escalation and reducing the use of restraints and seclusions should continue at CYF and be expanded at other DJS facilities.

There was an incident during the quarter (#128073) where a youth who was known to have a seizure disorder was assaulted by another youth and subsequently restrained by a staffer. The youth suffered a seizure during the incident.

The youth was hospitalized and returned to CYF the following evening. That night, a public defender came to CYF to meet with his clients, including the youth involved in the incident who had returned from the hospital. While the youth was waiting to meet with his lawyer, he wandered off and DJS staff were unsure of his exact location within the facility for approximately fifteen minutes. The youth then appeared in a visiting area, and, according to an investigation by the Department's Office of the Inspector General (OIG), he was "walking in a very unusual manner and...sweating profusely." The youth still had a black eye from the incident the day before and explained to the public defender that "his neck was bothering him and that his head kept falling or pulling back."

After speaking with the youth for a short time the public defender "decided that based upon what he was seeing and hearing from [the youth] that immediate medical care was necessary." A nurse responded and 911 was called. When the EMTs arrived, they suspected that the youth had "suffered six or seven seizures, some of which lasted for several minutes." As the EMTs were preparing to transport the youth to the hospital, a DJS staff shackled the child's ankles. When he began to apply handcuffs to the boy's wrists, an EMT objected because the youth could be injured if he had another seizure while his hands were cuffed. After "debating with the EMT for approximately thirty seconds, the security officer agreed to shackle only [the youth's] legs." The staffer, with the EMT's permission, then handcuffed the shackles on the boy's ankles to the stretcher.

Facility staff would not allow the youth to leave CYF until they completed paperwork. In the time it took the facility nurse to complete the paperwork (between seven and eight minutes), the youth suffered another seizure.

Departmental and facility policies, procedures, and practices should not prioritize security measures or paperwork over immediate medical needs of youth.

The Department should revise policies and staff training to ensure that youth in medical emergencies receive proper care as immediately as possible without delays due to interference by DJS staff or routine protocol.

A secure facility is an inappropriate environment for youth with complex medical conditions. The courts and DJS should ensure that youth with such medical needs are not held in a secure facility.

Charles H. Hickey, Jr., School

The Charles H. Hickey, Jr., School (Hickey) in Baltimore County is a 72-bed secure detention center for boys owned and operated by the Department of Juvenile Services (DJS/the Department). African American youth accounted for 67% of entries in the second quarter of 2015, down from 68% during the same period last year.

Hickey – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	53	39	54
1. Youth on Youth Assault/Fight	47	29	50
2. Alleged Youth on Staff Assault	5	3	9
3. Restraint	101	64	96
4. Use of Handcuffs and/or Shackles	9	6	27
5. Seclusion	22	32	18
6. Contraband	2	3	2
7. Suicide Ideation/Attempt	13	2	11

The average daily population increased by 38% during the second quarter of 2015 compared to the same time last year. The Department should implement the Annie E. Casey Foundation’s Juvenile Detention Alternatives Initiative (JDAI) statewide to ensure appropriate alternatives to detention are available to all youth (see Detention introduction, p. 17). As a recent Justice Policy Institute report highlights, “options that keep youth home and engaged in school and family life are documented to produce better outcomes both for youth and public safety.”²⁹

While population increased 38% during the second quarter, fights and assaults increased by 72%, physical restraints increased by 50% and the use of handcuffs and shackles more than quadrupled compared to the same time last year. Staff should be trained in conflict resolution

²⁹ Justice Policy Institute, “Sticker Shock: The Price We Pay for Youth Incarceration”, December 2014, p. 6. http://www.justicepolicy.org/uploads/justicepolicy/documents/sticker_shock_final_v2.pdf.

and therapeutic de-escalation techniques to enhance safety and reduce the use of physical and mechanical restraints.

Incidents involving suicidal ideation increased from two to eleven compared to the same time last year. Secure detention is a particularly inappropriate environment for children with mental health issues. Staff are not properly trained to meet their needs and research indicates “people with behavioral health problems simply get worse in detention, not better.”³⁰

Staff should be trained to implement culturally competent, therapeutically oriented interventions in response to problematic behavior in place of reliance on restraints. Incident #129431 involved a youth who had an assigned interpreter and was placed in the infirmary following his return from a hospital for a psychiatric evaluation. The child requested to eat in his cell away from the other kids in the dayroom. When staff denied his request, he threatened them with a plastic spork.

A staffer responded by physically restraining the youth and placing him in his cell. The youth became more agitated during the restraint. The staffer continued restraining the child, who was in his bed, while another staff member entered the cell and held the boy’s legs.

Staff instructed the youth’s interpreter to supervise the youth in the dayroom while they restrained the child. The interpreter was therefore unable to help translate attempts at de-escalation, verbal directives or help the child to communicate while he was being physically restrained by staff. Interpreters should remain with the child they are working with at all times and should not be directed by DJS staff to supervise kids.

Mental health staff should be involved in assisting with de-escalation efforts. Also, there should be comprehensive, on-going training for direct care staffers on adolescent development and mental health.

Proper incident reporting protocols were not followed in incident #129206 at Hickey during the quarter. A youth reported to a direct care staffer that he was assaulted by two other youth during a bathroom break the previous day and was experiencing pain in his ribs, shoulder, and back.

According to a subsequent investigation (of incident #129206) by DJS’ internal investigation unit, the staffer who was supposed to be supervising the youth at the time of the fight heard tussling inside the bathroom, looked in and observed the youth “horseplaying” and “throwing punches.” The staffer intervened and pulled the youths apart. The staffer did not complete an incident report, take the youth to be seen by medical staff, or report the incident to his supervisors, as is required by DJS policy.³¹ The Department and Hickey management should ensure that all staff are properly trained to create a safe environment, protect youth from harm, and report incidents.

³⁰ Justice Policy Institute, “Dangers of Detention,” p. 8. http://www.justicepolicy.org/images/upload/06-11_rep_dangersofdetention_jj.pdf

³¹ Md. Dept. of Juvenile Services Policy and Procedure MGMT-03-07 and RF-11-05.

The DJS internal investigation into #129206 was hampered by a problem with the security camera system which prevented access to video footage of the bathroom area at the time of the incident. Technical problems with the camera system should be permanently addressed to help ensure staff accountability and enhance staff training.

In a separate incident (#129285) involving a physical restraint, a youth indicated to a nurse that he had been punched and choked by one of the staffers who restrained him. The nursing report documented the child's statement on the nursing form and noted that there were abrasions to the child's left hand middle finger, on his neck, and on his left knee. The nurse also noted that the youth rated his pain level as a seven out of ten.

However, on the same document the nurse checked the "no" box for the question, "Do the circumstances indicate that the youth may have been abused? If yes, report to CPS." The nurse did not call Child Protective Services (CPS) to report the allegation of abuse.

Nursing staff in DJS facilities are statutorily mandated to report allegations of abuse. The Department should ensure that nursing staff properly report to CPS situations where youth allege that they have been abused or where the circumstances indicate that the youth may have been abused.

A Hickey staffer subsequently called Baltimore County CPS to make a mandated report of the allegation. Baltimore County CPS declined to investigate the allegation on the basis that the Hickey staffer reporting the allegation indicated that the child had not sustained any injuries. Allegations of abuse coming from DJS facilities should be independently reviewed by CPS whether or not there is a report of injury.

A DJS internal investigator reviewed video footage from a camera in the classroom where the restraint took place. When the investigator asked to see camera footage from a second camera in the classroom for a better view of the restraint, administrators at Hickey told the investigator that the second camera "was not working properly", and that "the footage [from the camera] is not good for it has gaps in time and an unclear view" (DJS Office of the Inspector General Investigative Report #15-129293, p. 7). When the investigator indicated to administrators that she was required to view all relevant footage in order to complete her investigation, she was given access to the footage from the second camera.

Upon reviewing footage from the second camera, the investigator noted that "the recording was clear" and there were no gaps in time in the recording. The investigator reported that the second camera showed the staffer involved in the restraint "raising his right arm with a fist" and coming down toward the youth's head. The investigator also reported that the camera showed the staffer's left leg being raised and moved back down toward the youth's head area.

The DJS investigator then contacted CPS to inform them of the updated findings from the video footage. The DJS investigator also indicated that the child had in fact sustained injuries, including knots on his head and abrasions to his finger, elbow and knee. After receiving this information from the DJS investigator, CPS decided to open an investigation. Hickey administrators did not provide the CPS investigator with the video footage from the second classroom camera, and the case was ultimately ruled out.

Child Protective Services should be mandated to respond to all allegations of abuse in facilities and ascertain facts (conduct interviews, request and review all video footage and documentation involving the allegation) before deciding whether or not to launch an investigation. Decisions to open a full investigation should not be made on the basis of reported lack of injury (or the age of the alleged victim, see p. 2 for more information).

The Department should ensure that facility administrators fully comply with internal and external investigations, and release all camera footage of incidents under review to investigators.

At Hickey, youth involved in aggressive incidents and who the Department determines to be in need of additional supports and individualized attention are removed from the general population and placed on an Intensive Services Unit (ISU). Although DJS policy limits the use of mechanical restraints to situations when kids pose an imminent risk to themselves or others,³² children on the ISU are mechanically restrained when entering or leaving the ISU. Indiscriminate use of mechanical restraints is contrary to the principles of trauma-informed care and can be harmful for youth.³³ The Department should end the practice of routine shackling of children (see also pages 3 and 6).

Some students who have their high school diploma have the opportunity to participate in the World of Work program at Hickey. Participants are given various job assignments on facility grounds and receive compensation for their work. The World of Work program should be available at all other DJS facilities and offer youth at least the statutory minimum wage. Post-secondary options should be expanded at Hickey and other facilities to include access to online community college courses and vocational courses leading to certification (see MSDE-JSE section, p. 38-40).

³² Md. Dept of Juvenile Services Policy and Procedure RF-02-07.

³³ Center for Juvenile Justice, "Prohibition of Indiscriminate Shackling in Colorado Juvenile Courts." [http://www.colorado.gov/clics/clics2013a/commsumm.nsf/b4a3962433b52fa787256e5f00670a71/95cfd4fabbc18dec87257b4f006dae57/\\$FILE/13HseJud0416AttachB.pdf](http://www.colorado.gov/clics/clics2013a/commsumm.nsf/b4a3962433b52fa787256e5f00670a71/95cfd4fabbc18dec87257b4f006dae57/$FILE/13HseJud0416AttachB.pdf)

Thomas J.S. Waxter Children’s Center

The Thomas J.S. Waxter Children’s Center (Waxter) is a 42-bed hardware secure detention center for girls. Waxter is owned and operated by the Department of Juvenile Services (DJS/the Department) and is located in Anne Arundel County. African American youth represented 72% of total entries during the second quarter of 2015, down compared to 77% during the same period last year.

Waxter – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	29	28	29
1. Youth on Youth Assault/Fight	25	16	36
2. Alleged Youth on Staff Assault	3	5	9
3. Restraint	34	30	65
4. Use of Handcuffs and/or Shackles	1	9	7
5. Seclusion	5	9	10
6. Contraband	3	0	2
7. Suicide Ideation/Attempt	19	30	36

While the average daily population increased by 4% during the second quarter of 2015 compared to the same time last year, fights and assaults increased by 125% and physical restraints increased by 117%.

Incidents of suicide ideation increased by 20% and there were also three incidents of self-injurious behavior.

Waxter staff should receive enhanced training on youth mental health, trauma and its effects on behavior and de-escalation methods to help reduce the use of restraint and seclusion. Department data shows that 75% of girls in DJS have a moderate-to-high mental health need and 46% have been the victims of physical or sexual abuse in their lives.³⁴ Mental health

³⁴ DJS Report on Female Offenders, 2012. p. 11. <http://www.djs.state.md.us/docs/Girls.Feb.2012.Report.pdf>

clinicians and direct care workers should collaborate closely to defuse situations before they escalate into fights, restraints or seclusions.

Excessive downtime can contribute to increased incidents. During the quarter, administrators at Waxter adjusted the staff schedule to help meet a need for increased structured programming. This approach should continue and be expanded at other facilities.

Staffing shortages are an ongoing concern at Waxter. At time of writing there were ten vacancies for direct care staffers (July 23, 2015). These positions should be filled as soon as possible. Efforts to increase retention, including mentoring partnerships between veteran staffers and new hires, should be strengthened at Waxter. Three vacancies for management positions should also be filled as soon as possible to help ensure sufficient administrative staffing.

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) operates the school at Waxter.

There is a lack of viable post-secondary educational offerings available to youth at Waxter. During the quarter, multiple youth who had earned a high school diploma or GED spent several months in detention without comprehensive daily educational programming. MSDE-JSE should ensure the daily availability of post-secondary education to youth in DJS facilities.

Together, MSDE-JSE and DJS should ensure that all youth in detention have access to appropriate educational and vocational programming on a daily basis (see MSDE-JSE section, p. 38-40).

The World of Work program, which compensates youth for work done at facilities, is available at Waxter for eligible youth. Youth participating in World of Work should be paid at least the statutory minimum wage.

Alfred D. Noyes Children's Center

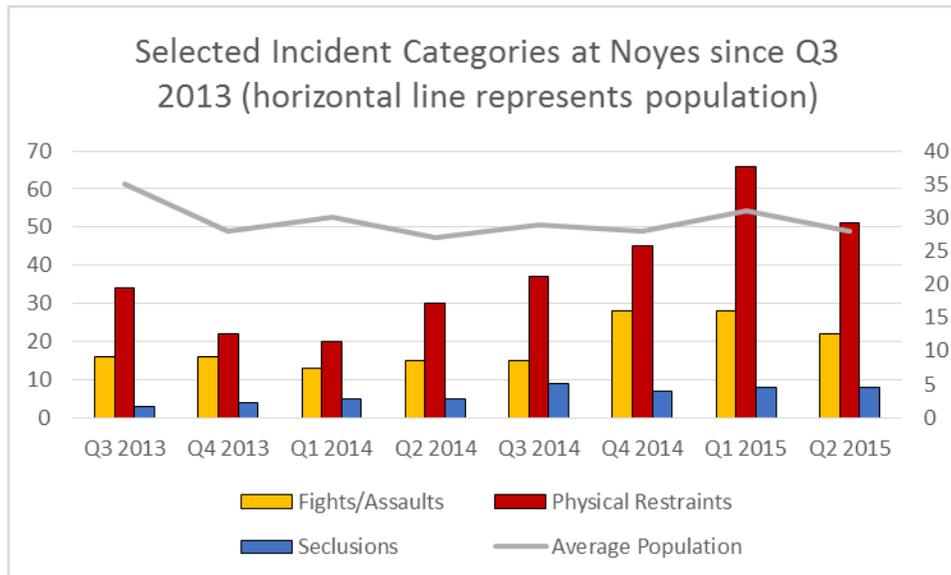
The Alfred D. Noyes Children's Center, located in Montgomery County, is a Department of Juvenile Services (DJS/the Department) owned and operated maximum security detention center for boys and girls with a combined DJS-rated capacity of 57. Most cells at Noyes are double (or higher) occupancy. Housing two or more youth per cell is a risk to institutional and resident safety.

African Americans represented 67% of youth entries during the second quarter of 2015, compared to 75% of entries in the same period last year. Hispanic/Latino youth accounted for 19% of youth entries during the second quarter compared to 10% during the same time last year.

Noyes – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	42	27	28
1. Youth on Youth Assault/Fight	7	15	22
2. Alleged Youth on Staff Assault	4	0	3
3. Restraint	17	30	51
4. Use of Handcuffs and/or Shackles	0	5	3
5. Seclusion	1	5	8
6. Contraband	2	1	1
7. Suicide Ideation/Attempt	8	8	10

Average daily population increased by 3% during the first quarter of 2015 compared to the same time last year. During the same time period, youth on youth assaults and fights increased by 47%, physical restraints increased by 70%, and seclusions increased by 60%.

The graph below indicates increases in fights/assaults, restraints and seclusions over the last several quarters while the population (shown in the gray line) has trended downwards.



A pattern of increased incidents despite a decrease in ADP over the last several quarters points to a need for improved staff training in de-escalation and therapeutically oriented responses to youth behavior. Mental health clinicians should support direct care staff in de-escalation efforts in order to promote a therapeutic approach and minimize staff use of physical interventions such as restraints and seclusions.

Although there is only one girls unit at Noyes (and three for boys), 36% of incidents occurred on the girls unit – including two group disturbances. The Department’s data shows that 75% of girls in DJS have a moderate-to-high mental health need and 46% have been the victims of physical or sexual abuse in their lives.³⁵ This data underscores the need to introduce trauma-informed training for direct care staff at Noyes that emphasizes youth mental health needs in order to maintain youth and staff safety.

Excessive downtime may have also contributed to increased incidents at Noyes. A recreation specialist position, which has been vacant for a year, should be filled as soon as possible. Community organizations offering to provide programming and enrichment activities within the facility should be encouraged.

The Maryland State Department of Education, Juvenile Service Education division (MSDE-JSE) provides schooling services in DJS facilities. During the quarter, there was a student at Noyes who had already earned a GED but was not afforded access to post-secondary education programming. The Department and MSDE-JSE should collaborate to provide students with post-secondary education programming in all facilities (see MSDE-JSE section, p. 38-40).

The World of Work program should be available at Noyes and should provide youth with at least the statutory minimum wage.

³⁵ DJS Report on Female Offenders, 2012. p. 11. <http://www.djs.state.md.us/docs/Girls.Feb.2012.Report.pdf>

Lower Eastern Shore Children's Center

Lower Eastern Shore Children's Center (LESCC), located in Wicomico County on the eastern shore, is a secure detention center owned and operated by the Department of Juvenile Services (DJS/the Department). There are six cells for girls and 18 cells for boys. African American youth represented 76% of youth entries during the second quarter of 2015, up from 59% during the same period last year.

LESCC – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population (ADP)	22	17	19
1. Youth on Youth Assault/Fight	7	4	16
2. Alleged Youth on Staff Assault	0	1	2
3. Restraint	48	22	30
4. Use of Handcuffs and/or Shackles	0	1	0
5. Seclusion	3	0	2
6. Contraband	1	0	0
7. Suicide Ideation/Attempt	9	12	5

Average daily population increased by 12% during the quarter compared to the same time last year while fights and assaults quadrupled and physical restraints increased by 36%. Comprehensive mental health and substance abuse staffing is necessary to promote a safe and therapeutic environment. Mental health clinicians should be available for increased involvement in unit activities, de-escalation and collaboration with DJS direct care staff.

A longstanding vacancy for a substance abuse counselor remained unfilled until the end of the quarter. Currently there is a vacancy for a mental health therapist which should be filled without delay. Mental health clinicians from the community are filling in at LESCC three days a week, however, the Department should ensure LESCC has comprehensive access to mental health personnel.

Western Maryland Children's Center

Western Maryland Children's Center (WMCC), located in Washington County, is a 24-bed maximum security detention center for boys owned and operated by the Maryland Department of Juvenile Services (DJS/the Department). African American youth represented 65% of total entries during the second quarter of 2015, up from 61% during the same period last year.

WMCC – Selected Incident Categories	Q2 2013	Q2 2014	Q2 2015
Average Daily Population	24	19	17
1. Youth on Youth Assault/Fight	7	6	5
2. Alleged Youth on Staff Assault	0	0	1
3. Restraint	20	26	17
4. Use of Handcuffs and/or Shackles	1	3	7
5. Seclusion	1	4	0
6. Contraband	0	2	0
7. Suicide Ideation/Attempt	0	2	3

The average daily population declined 11% in the second quarter of 2015 compared to the same time last year. Seclusion was not used during the quarter, and the use of physical restraints declined by 35% compared to the same time last year. However the use of mechanical restraints increased. Staff should be trained in therapeutic de-escalation techniques and (per DJS policy) mechanical restraints should not be used except as a last resort when youth actively present an imminent risk of physical harm to themselves or others.³⁶

There were seven direct care staff vacancies during the quarter. The Department should improve its hiring practices to ensure that vacancies are filled in a timely and efficient manner.

Students with a high school diploma should have daily access to comprehensive post-secondary educational programming (see MSDE-JSE section, p. 38-40).

³⁶ Md. Dept of Juvenile Services Policy and Procedure RF-02-07.

There are limited vocational or educational opportunities for students at WMCC with a high school diploma or GED. ServSafe certification, a basic food hygiene course, is the only post-secondary educational option for students at WMCC. During the quarter, a youth with a high school diploma who had completed the ServSafe program had to sit in on high school classes while he was detained.

The World of Work program should be available at WMCC and program participants should be paid at least the statutory minimum wage.

Outdoor space at WMCC is limited to an enclosed concrete basketball court directly behind the facility. The outdoor area should be expanded to allow access to green space for recreational purposes and for outdoor service learning activities (such as community gardens) which are available at other DJS facilities.

SMALLER FACILITY UPDATES

Liberty House Shelter

Liberty House is a 10-bed capacity DJS-licensed shelter care facility in Baltimore City operated by Youth Enterprise Services, Inc. Liberty House offers a less restrictive alternative to secure detention for boys 13 to 18 years old. Youth reside in a home-like environment and are under 24-hour care with a staff to resident ratio of 1 to 4. They attend school and recreational activities in the community and have access to community-based mental health services. The shelter continues to be an appropriate alternative to secure detention and incidents of aggression remained low during the quarter.

Morning Star Youth Academy

Morning Star Youth Academy is licensed by DJS and located on the eastern shore. The facility closed in 2014. During the second quarter of 2015, administrators were planning to resume operations and reopen the facility in the third quarter.

One Love Group Home

One Love is an 8-bed group home located in Baltimore City operated by Building Communities Today for Tomorrow, Inc. The home is licensed by and receives referrals from DJS. The program focuses on providing adjudicated boys between the ages of 17 and 20 with the skills and services they need to facilitate transition back to home communities.

The group home is a comfortable, home-like environment and youth attend school, work, and engage in recreational and volunteer activities in the surrounding community. One Love has a structured points and level system which allows youth to earn meaningful rewards (walks in the community, allowance money, food from nearby community restaurants) on a daily and weekly basis.

Youth receive individual and group therapy (including trauma therapy if indicated), life-skills training, and substance abuse counseling. Family therapy is not available at this time.

Incidents of aggression remained low during the quarter. One Love continues to offer youth effective, individualized services in a safe and nurturing environment and the program serves as an alternative to long term placement in a secure facility.

The Way Home (NOTICE OF CLOSURE)

The Way Home, located in west Baltimore and licensed by the Department of Juvenile Services to serve up to 12 girls, closed during the second quarter. The Way Home served as an appropriate alternative to long term placement in a secure facility.

William Donald Schaefer House

William Donald Schaefer House is a staff secure (not locked and fenced) substance abuse treatment program with the capacity to serve up to 19 adjudicated boys between the ages of 13 and 17. The program runs for approximately 120 days and is located in a converted home in Baltimore City. Individual and group substance abuse counseling is provided. Schaefer House also partners with multiple community organizations to provide youth with enrichment and recreational programs and activities. Incidents of aggression remained low during the quarter.

Educational services are provided by the Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE). During the quarter, several youth were studying for the GED but did not have access to up-to-date GED preparation software or materials. Post-secondary options for youth are limited to ServSafe certification, a basic course in food handling hygiene. Updated technological resources, including internet access, should be provided to students. Post-secondary education, internships and employment in the community should be available to students who have received a high school diploma (see MSDE-JSE section, p. 38-40).

Currently youth at Schaefer House are not allowed to earn home passes. DJS should incorporate home passes into the program in order to facilitate transition back to home communities.

THE MARYLAND STATE DEPARTMENT OF EDUCATION IN DJS FACILITIES

The Maryland State Department of Education, Juvenile Services Education division (MSDE-JSE) is responsible for providing educational services to students in all DJS-operated detention and committed placement centers. School programs in DJS facilities have benefited from the educational expertise and resources provided by MSDE-JSE. However, significant work is needed to strengthen the education services provided to youth in DJS facilities.

As part of its continued efforts to enhance educational services to students, MSDE-JSE is developing a three year strategic plan. The plan is consistent with recent guidance from the U.S. Department of Education and U.S. Department of Justice on providing high-quality educational services in juvenile justice secure settings, and emphasizes five main areas of focus:

1. Environment and Climate
2. Resources
3. Recruitment and Staffing
4. Rigorous and Relevant Curriculum
5. Re-entry

Within these main areas of focus, MSDE-JSE has created specific goals with targeted completion dates to aid them in the development of an education program that is directly comparable in quality to services offered in community schools.

Additional areas of concern that are not addressed in MSDE-JSE plans and corresponding recommendations are discussed below and should be incorporated into the strategic plan.

1. Environment and Climate – MSDE-JSE plans to collaborate with DJS to promote an atmosphere that values education.

JJMU concern: Students at MSDE-JSE schools currently attend classes organized by living unit rather than grade level which hinders the ability of teachers to provide instruction that is appropriate for each student in the classroom.

JJMU recommendation: Plans to organize classes by grade level should be realized as soon as possible and more teaching staff positions should be added to accommodate this practice.

JJMU concern: Students face challenges transitioning back to home schools.

JJMU recommendation: MSDE-JSE should regularly coordinate with a designated representative from the student's school district via letters, progress reports, and phone call updates (as MSDE-JSE plans to do with students' families).

2. Resources – MSDE-JSE plans to increase resources including access to technology and additional course offerings.

JJMU concern: Most students do not have access to the internet or up-to-date software programs to use for educational purposes. Although there are a small number of desktop computers for student use at some facilities, MSDE-JSE schools lag far behind community schools in providing high school students with access to technology. The lack of up-to-date technology also impedes students preparing for the GED exam, which is administered electronically.

JJMU recommendation: MSDE-JSE should prioritize accessibility to technology. Plans to secure funding through grants should go forward as soon as possible and be coupled with proposals for increased state financing.

3. Recruitment and Staffing – MSDE-JSE plans to enhance hiring, retaining and training practices.

JJMU concern: Recruiting and retaining staff in MSDE-JSE schools is complicated by competition with local school systems where teachers receive higher salaries and have summers off.

JJMU recommendation: MSDE-JSE should increase compensation and benefits to boost recruitment and retention of qualified personnel.

JJMU concern: Due to current staffing levels at JSE schools, students may have to complete worksheets on their own when teachers are out because of illness or vacation.

JJMU recommendation: MSDE-JSE should secure more teaching personnel and plans to create a pool of substitute teachers should be accelerated.

4. Rigorous and Relevant Curriculum – MSDE-JSE plans to emphasize academic re-engagement in detention centers and accumulation of high school credits in committed placement centers.

JJMU concern: Students cannot earn a high school diploma while in detention or committed placement.

JJMU recommendation: MSDE-JSE should enable students to earn their high school diploma while detained or committed to a DJS facility.

JJMU concern: Post-secondary educational programming is limited in detention and committed placement centers.

JJMU recommendation: Through collaboration with DJS, MSDE-JSE should increase post-secondary educational and vocational opportunities for students, including:

- Preparation courses for college entrance exams (including SAT, ACT, and Accuplacer tests)
- Enrollment in community college or college online and on-campus
- Employment in the local community and within the facility
- Professional internships in the community
- Online and on-campus career training and experience leading to recognized certification, particularly in areas, such as STEM, where there is a high demand for workers³⁷

JJMU concern: Plans to emphasize skill development in detention centers do not take into account the educational needs of kids with extended lengths of stay, including kids charged as adults who are housed in DJS detention centers.

JJMU recommendation: More youth charged as adults will be housed in DJS detention centers beginning October 1, 2015. Curriculum options in detention center schools should be expanded to accommodate youth with extended lengths of stay, including kids charged as adults who are housed in DJS detention centers.

5. Re-entry – MSDE-JSE plans to facilitate student transition to home schools

JJMU concern: All youth do not necessarily receive credit toward graduation for academic work completed in MSDE-JSE schools upon returning to their home school.

JJMU recommendation: A designated staff in every MSDE-JSE school should ensure that credits earned while in detention or committed placement are transferred to the community school and appropriately applied toward graduation requirements for a high school diploma.

JJMU concern: Kids are in need of ongoing support to enroll in school or secure employment after leaving detention or committed placement.

JJMU recommendation: MSDE-JSE should partner with DJS at the outset of a child's placement to provide guidance and support to parents, and create a thorough aftercare plan to ensure that kids enroll in school, employment or job training.

³⁷ Careers in STEM (Science, Technology, Engineering and Math) are attainable without a college degree and available in most metropolitan areas: <http://www.brookings.edu/research/reports/2013/06/10-stem-economy-rothwell>



MARYLAND Department of Juvenile Services

Successful Youth • Strong Leaders • Safer Communities

August 28, 2015

DJS Response to the Juvenile Justice Monitoring Unit's 2015 Second Quarter Report

The Department of Juvenile Services (DJS) appreciates the JJMU's recognition of its' reform efforts. The Department will give thoughtful consideration to recommendations provided by the JJMU as we continue to focus on reforms designed to keep low risk youth out of secure confinement.

DJS alternatives to detention include community-based detention programming in all jurisdictions, shelter care, evening reporting centers, and privately operated programs. A detailed report entitled, "Report on the Utilization of Alternative to Detention Programming" prepared by the Department in response to the Report on the Fiscal 2015 State Operating Budget (SB170) and the State Capital Budget (SB171 and Related Recommendations – Joint Chairman's Report, 2014 Session) provides a comprehensive summary of the continuum of detention alternatives and a gap analysis for services of youth pending a disposition hearing. In January 2015, the Department expanded detention alternative programming by contracting with the Community Conferencing Center, a conflict transformation and community justice organization that provides ways for people to safely, collectively and effectively prevent and resolve conflicts and crime. Community conferencing services are available to communities in Anne Arundel County, Baltimore City, Baltimore County, Mid-Eastern Shore Region and Prince Georges County. Referrals for community conferencing services may be made by the police, school police, juvenile court, the state's attorney's office, and DJS (pre-court supervision).

The Department continues to partner with the Annie E. Casey Foundation to analyze juvenile population data to help guide reform efforts. The Department requested that the foundation explore why reductions in the youth crime rates were not translating into proportional reductions in commitments. The January 2015 report entitled "Doors to Commitment: What Drives Juvenile Confinement in Maryland", completed by the Annie E. Casey Foundation Juvenile Justice Strategy Group determined that 59% of committed youth were assessed as low to moderate risk for reoffending, and 27% of commitments to DJS were for technical violations of probation. In efforts to increase objectivity and develop standardization for decision-making in determining court referrals for violations of probation, the Department implemented the Accountability and Incentive Management Program (AIM). The AIM Program establishes levels of graduated sanctions based on the type of violation and incentives for compliance with probation requirements. Thereby, the most serious violations lead to court referrals.

The AIM Program was piloted in December 2014 and implemented state-wide in July 2015. The Department will closely monitor implementation to determine the impact on commitments for technical probation violations. The AIM Program and its objectives have been presented to the Maryland judiciary.

Provide Evidence-Based and Trauma-Informed Services in Facilities

The Department appreciates the JJMU's recognition of the overall increased level of safety in detention and committed facilities. A principal component of this accomplishment has been the implementation of CHALLENGE, a behavior management program. The CHALLENGE Program establishes parameters for respectful relationships between youth and staff and youth and youth. It focuses on de-escalation of behavior, and incorporates evidence-based behavioral principles to promote the development of pro-social skills through a system of rewards and incentives. Research supports the use of behavior management strategies for maintaining order, minimizing disruption and improving the residential climate. The provision of effective treatment services requires a structured predictable environment, where youth feel physically and psychologically safe to engage in treatment. The principles of the CHALLENGE Program support trauma informed care. The Department strongly disagrees with the JJMU recommendation that the behavior management program should be replaced.

The Department has developed a Request for Proposals to procure programming and training for additional trauma informed care services. The request seeks programming and training for direct care staff and clinical staff. The Department has acquired additional programming to address anger management and aggression needs of our youth. In August 2015, case management and behavioral health staff at committed facilities were trained in Social Skills Training and Aggression Replacement Techniques (START), which is based on Aggression Replacement Training (ART). ART is an evidence-based treatment for youth with aggressive behaviors. Youth are taught social skills, aggression management skills, and moral reasoning skills. The aforementioned programs will enhance the current provision of services to include psychological screenings, individual counseling and cognitive behavioral therapy, evidence-based substance abuse programming, group and family therapy.

Telephone System in DJS Facilities

The JJMU reports technical problems with the youth phone system. The Department is aware of these issues and is working with the contractor to resolve them.

COMMITTED PLACEMENT CENTERS

Provide Evidence-Based, Trauma-Informed Treatment

The Department disagrees with the JJMU assertion that there is no evidence-based programming in DJS committed facilities. The value of implementing CHALLENGE, the behavior management program that incorporates evidence-based principles was discussed in the above section. The CHALLENGE Program is not a treatment program; rather it is the foundation for establishing a supportive environment for the provision of treatment services. Existing treatment services, the expansion of anger management services and the request for proposals to provide staff training in trauma informed care are noted above.

The Department recognizes the importance of a well-trained work force and its impact on rehabilitative efforts in our residential facilities. At the time of hire, all direct care residential staff receive a minimum

of six weeks of classroom instruction and must receive entry level certification from the Maryland Correctional Training Commission (MCTC) prior to working with youth. Training topics include motivational interviewing, adolescent development, youth and staff relationships, communication skill building, de-escalation and behavior management techniques, safety and security. Thereafter, direct care staff receives a minimum of 48 hours of in-service training annually. Annual training includes training in the CHALLENGE Program, with a focus on positive relationship building, role modeling, and de-escalation. Direct care staff also receives training in Youth Mental Health First Aid, USA for Adults Assisting Young People (YMHFA), an evidenced based model designed to teach lay people methods of assisting a young person who may be in the early stages of developing mental health problems or in a mental health crisis.

All behavioral health staff are certified and/or licensed to provide services in their areas of specialty. Additionally, all newly hired behavioral health staff (licensed social workers, professional counselors, addictions counselors, psychologists) receives three weeks of entry level training. Thereafter, behavioral health staff is required to complete 20-30 hours of training annually to maintain their license. They also participate in ongoing departmental training.

DJS believes that the work force is qualified to meet the needs of youth. DJS will continue its' efforts to research evidence-based interventions and training for staff.

JJMU reports that youth in the Intensive Services Program (ISU) are not permitted to progress in the behavior management system. The ISU intervention purpose is to support youth in self-management and behavioral change. The youth placed in the ISU Program have not made progress in the behavior management program due to assaultive behaviors with their peers and/or staff. To provide for the safety of others, these youth are removed from the general population and are provided intensive one to one services in ISU to help them stabilize their behavior. Highly specialized individual treatment plans are developed for each youth. Issues of anger management and conflict resolution are addressed individually by a therapist. Mental health staff work closely with direct care staff to model appropriate implementation of interventions. Individualized plans contain coping strategies such as anger management techniques with practical suggestions for staff to encourage behavioral compliance through positive feedback. When the youth is able to demonstrate an improved ability to self-manage they are returned to the general population. The ISU intervention has been very successful in providing for the safety of youth and staff and youth have demonstrated improved self-management skill development.

Stop Indiscriminate Shackling and Strip Searches

The Department limits the use of restraints to youth determined to be the highest risk to public safety. Restraints are required for the secure transport of youth assigned to detention and the two hardware secure facilities. Youth placed in staff secure programs are not restrained during transport, with exception of instances where there is a known risk for escape, or threat to harm self or others.

Search procedures are implemented to reduce and eliminate the introduction of contraband in facilities which may jeopardize safety and security for youth and staff. The Department's strip search procedures

are implemented only when youth have exposure to the public or there are reasons to suspect that the youth may have contraband.

Increase Family Engagement

DJS is committed to increasing and incorporating family engagement into all service delivery areas beginning with intake, thru probation, commitment and aftercare supervision. Increased family engagement is a component of the agency's strategic re-entry plan. Additionally, DJS has designated a position for a Family Engagement Coordinator of Services.

FACILITY RESPONSES

Throughout the report the JJMU reiterates the need for anger management and a trauma-informed treatment model in DJS committed facilities. The DJS response will be re-emphasized in this section. The Department has expanded anger management programming by procuring START, Social Skills Training and Aggression Replacement Techniques. In August 2015, staff in committed facilities were trained in START, and program implementation is scheduled for September, 2015. Training was provided by Dr. Sheldon Braaten from the Behavioral Institute For Children and Adolescents. The curriculum addresses social skills training, anger control and moral reasoning; and includes how to run training groups, deal with resistance and how to enhance generalization of learned skills.

DJS Behavioral Health staff has extensively researched trauma informed care programming to expand current services. The Department has developed a request for proposal that is currently being routed for approval. DJS continuously strives to provide treatment services that are in line with national trends, best practices, and are evidence-based in order to achieve positive outcomes for youth in our care.

Victor Cullen

The Department appreciates the JJMU'S recognition of the therapeutic work of the staff at Victor Cullen, DJS's only hardware secure program for boys. The decrease in fights, assaults, physical restraints, use of mechanical restraints and seclusion are noted in the report. Collaboration between direct care staff and mental health clinicians is achieved through the establishment of multi-disciplinary treatment teams assigned at a ratio of one team for every twelve youth.

JJMU makes multiple inaccurate assertions about the Intensive Services Unit (ISU) Program at Victor Cullen. The ISU Program at Victor Cullen provides a more intensive level of care to the youth displaying a higher need of services. The primary goal of the program is to provide stabilization and transitional services that focus on immediate and long-term symptom reduction, improved self-management of behavior and acquisition of prosocial problem-solving skills in order for youth to integrate safely into the general population. The use of a dedicated unit allows for more individualized and intensive supervision and treatment, while keeping other youth safe from acts of aggression. The youth assigned to the ISU Program must show stabilization prior to re-integration. Allowing all regular program privileges in ISU would decrease the reinforcement needed to assist in changing behavior. Youth are returned to regular programming in the least amount of time as possible.

Youth Centers

A significant number of youth are ejected from the Youth Centers which are all staff secure, meaning there are no physical barriers to prevent escapes. Three of the Youth Centers have dormitory living areas that present challenges in managing youth behavior. The Department has analyzed the profile, security and treatment needs of the youth who have been unsuccessfully removed from the Youth Centers to develop therapeutic programming, staff training and physical plant modifications. Savage Mountain Youth Center has been determined to be the most suitable location. The JJMU reference to the Savage Mountain project as listed on page 11 and 17 of the report presumes that DJS is only addressing the need for an increased level of security. The Department plans to install security fencing and has begun staff training and program development to address the behavioral and treatment needs of the targeted population. The ability to successfully serve youth at Savage Mountain will reduce the number of youth who must be sent out of state for services.

DJS appreciates the JJMU's recognition of the significant decrease in fights and assaults at the Youth Centers. Staff interventions for acts of aggression begin with implementing de-escalation techniques and must result in the use of physical and mechanical restraints when behavior escalates to provide for safety of the youth and staff. As noted, physical restraints decreased by 8% and the use of mechanical restraints increased by 16% (from 19 to 22) when compared to the second quarter of 2014. All instances of physical and mechanical restraints are reviewed by management to determine adherence with Departmental policy and procedures. All staff receive ongoing training in de-escalation and Youth Mental Health First Aid to enhance skills for addressing crisis situations.

Recruitment to fill vacant positions is on-going.

J. DeWeese Carter Center

The Department appreciates the JJMU's recognition of additional programming at Carter. All youth are screened for trauma exposure using the Trauma Symptom Checklist for Children. An individualized treatment plan is developed for each youth to address her specific treatment needs. Youth are provided with individual and group therapy and bi-weekly family therapy. The Department's plans to expand anger management and trauma informed care as noted previously in this response. The Department's response regarding the use of mechanical restraints and search procedures are listed in the "Stop Indiscriminate Shackling and Strip Searches" section of this report.

Detention Center Responses

Baltimore City Juvenile Justice Center

Seclusion was reduced to zero incidents during this quarter compared to 72 incidents in the 2nd quarter of 2014. Incidents of fights, assaults and physical restraints decreased compared to the same period in 2014. Youth mental health needs are addressed by clinical staff assigned to the facility. Throughout a youth's stay in detention behavioral health staff are available and responsive to the needs of youth. When behavioral health staff determine a youth has intensive mental health needs that cannot be met at the facility, the youth is referred for hospitalization and/or placement in an intensive mental health services facility. Staff training in Youth Mental Health First Aid and the suicide prevention policy and procedures remains ongoing.

Cheltenham Youth Center

DJS appreciates JJMU's acknowledgement of the work of staff at the Cheltenham Youth Center. There was a significant reduction in incidents of fights, assaults, and the use of restraints compared to the same time in 2014. Seclusion was not used during this quarter.

The Department thoroughly investigated and took corrective action to address the performance issues related to incident #128073 cited in the JJMU report. Department procedures do not prioritize the use of restraints or the completion of medical documents over medical care in an emergent situation. The determination of the emergency and need for critical medical care is made by DJS medical personnel or the responding EMTs. DJS provides medical documentation for the treating hospital that addresses current medication and known allergies, however, the provision of pertinent documentation must never delay medical care in an emergent situation as this information can be sent later.

Charles H. Hickey School

There was an increase in the population at Hickey and an increase in incidents of fights, assaults and physical restraints. Several of the youth involved in these incidents were youth with significant mental health service needs. The facility administration and behavioral health staff worked closely with the direct care staff to address supervision skills and interventions to manage the impulsive and aggressive behaviors of these youth.

JJMU reports that secure detention is an inappropriate placement for youth facing mental health challenges. At admissions, all youth receive an initial mental health screening utilizing the Massachusetts Youth Screening Instrument (MAYSI) to identify youth who may require immediate mental health care. Youth who are unstable are not accepted. A more extensive evaluation is completed as part of the Multi-Disciplinary Assessment Staffing Team (MAST) assessment process that is completed while the youth is in detention. When behavioral health staff determine a youth has intensive mental health needs that cannot be addressed at the facility, that youth is referred for hospitalization and/or placement in an intensive mental health services facility or program. All incidents of suicide ideation are addressed immediately. Staff is trained to respond to all comments of suicidal ideation by placing youth on alert for close supervision, pending an assessment by a mental health practitioner. The facility is staffed with trained mental health professionals who are on-call at all times to address the youth's immediate need and provide guidance to direct care staff.

The JJMU cites an incident in which staff failed to complete an incident report and obtain an immediate medical assessment for a youth involved in a physical altercation as required by Departmental policy and procedures. The incident was investigated by the DJS Office of the Inspector General (OIG) and appropriate disciplinary actions were taken.

JJMU also cites an incident in which a nurse failed to report a youth's allegation of physical abuse following a restraint. Departmental procedures require an administrative review of all incidents; during the review the youth's allegation was noted and reported to Child Protective Services (CPS), State Police and the DJS Office of the Inspector General for investigation. JJMU reports that CPS was not provided all the video of the incident, however, the OIG investigator advised CPS in writing of the video recording of

the incident captured by two cameras. CPS did not advise DJS of any difficulty obtaining any video that was requested, and CPS has screened out the incident. DJS has taken appropriate corrective actions.

Thomas J. S. Waxter Children's Center

Incidents of fights, assaults, and restraints increased during this quarter compared to the same time in 2014. The facility administration and behavioral health staff have worked closely with the direct care staff to manage behaviors of several very aggressive youth. In keeping with Departmental procedures all youth receive a mental health evaluation at intake. All incidents of suicidal ideation and self-injurious behaviors are addressed by direct care and mental health staff. The facility is staffed with trained mental health professionals who are on-call at all times to address the youth's immediate need and provide guidance to direct care staff. The following behavioral health positions are assigned to the facility: a licensed clinical professional counselor, a clinical social worker, a licensed psychologist, two substance abuse counselors, and a half time licensed social worker. Clinical hours have been expanded to provide coverage evenings and weekends.

Staff training in de-escalation, Youth Mental Health First Aid, and the Department's Suicide Prevention Policy and Procedures is ongoing. Incidents of suicide ideation are reviewed by facility administrators to ensure adherence to Departmental policy and procedures.

Administrative vacancies, to include the facility superintendent and assistant superintendent, have been filled. Recruitment to fill direct care positions is ongoing.

Alfred D. Noyes Children's Center

Incidents of youth assaults, fights, and restraints increased during this quarter. A significant number of youth with challenging behaviors have been in placement at Noyes. Executive staff is working with the Noyes administration to develop strategies to improve management of youth behavior.

Recruitment efforts to fill the recreation position have not been successful but remain ongoing.

Lower Eastern Shore Children's Center

Incidents of youth assaults and fights increased during this quarter. A significant number of incidents were attributed to one youth with a history of mental health issues. Mental health staff and direct care staff were responsive to each incident. An appropriate placement was secured and the youth has been placed.

LESCC has filled the substance abuse counselor vacancy. The existing mental health therapist vacancy has been posted and interviews will take place in the very near future. The community mental health clinicians will continue to provide services until the position is filled.

Western Maryland Children's Center

There was a slight increase in the use of mechanical restraints, from three to seven incidents in this quarter. Mechanical restraints are used as a last resort when a youth actively presents an imminent risk of physical harm to themselves or others.

WMCC has filled all its direct care vacancies.

The facility continues to create opportunities for additional programming to keep youth engaged. The recreation specialist position has established opportunities for additional special events and activities, particularly on holidays and weekends.

William Donald Schaefer House

The Department appreciates the JJMU'S recognition of the community enrichment opportunities afforded to the youth participating in the substance abuse program at the Schaefer House.

Silver Oak Academy

Silver Oak Academy is a privately operated staff secure group home licensed by the Department. Incidents of restraints, fights and assaults decreased during this reporting period.



August 31, 2015

MSDE Response to the Juvenile Justice Monitoring Unit's 2015 Second Quarter Report

The Maryland State Department of Education (MSDE) acknowledges the continuous and valuable contribution which the Juvenile Justice Monitoring Unit (JJMU) makes to ensure that the educational and treatment needs of youth under the jurisdiction of the Department of Juvenile Services (DJS) are being met in compliance with State law (Chapter 255, Acts of 2002 and Chapter 12, Acts of 2006).

MSDE appreciates the close review JJMU gave to the MSDE Strategic Plan and the additional suggestions offered. Below are MSDE's responses to JJMU's additional areas of concerns that are not addressed in the MSDE-JSES plan.

MSDE Response to JJMU General Recommendations (Pages 38-40)

- **Homogeneous Grouping of Students Based on Grade Level**

Currently, youth attend school based upon their living units. MSDE JSES and DJS collaborated in January 2015 to initiate a pilot for homogeneous grouping at Victor Cullen Center. Due to a variety of variables the pilot was unsuccessful and MSDE JSES, with DJS's input, decided the pilot should be temporarily discontinued. MSDE JSES plans to revisit this pilot using lessons learned from the earlier experiment during the upcoming fiscal year in hopes of developing a model for implementation state-wide in long-term residential facilities.

- **Addition of More Teaching Staff**

MSDE JSES concurs with the JJMU recommendation that additional teaching positions are required to accommodate restructuring school schedules based on grade level as opposed to living units. MSDE will seek additional budget allocations through the State budget process to increase the number of teacher positions.

- **Coordinate with Designated Representative for the Student's school district.**

MSDE JSES is actively engaged in working with pupil personnel staff or the identified educational liaison who facilitate transition of youth for local school systems (LSS) across the state. MSDE JSES's Coordinator of Guidance and Student Records routinely meets with counseling supervisors from LSS to provide updates related to the transition of youth between MSDE JSES and all 24 LSS and private schools within Maryland.

Additionally, MSDE JSES conducts quarterly reviews of credits earned for youth who have transitioned back to their home schools to ensure that credits earned while at JSES facilities are accepted.

- **Lack of Available Technology-Based Resources**
 MSDE JSES concurs that access to the internet and the installation of technology in all schools will provide an opportunity to both enhance and support instructional services. JSES is currently working to finalize the centralized access to instructional software to a main server located at MSDE Headquarters in Baltimore. Completion of this process is progressing. MSDE Office of Information Technology (MSDE OIT) has assisted in connecting thirteen of the 14 schools to the main server. The only site remaining which needs to be connected is Alfred D. Noyes Center which cannot be connected until the current renovations are completed and the facility reopens in October. MSDE anticipates that JSE will be able to introduce online instructional resources within JSES schools across the state once technological issues are resolved. MSDE JSES and DJS are collaborating to assure all technology protocols are followed and proper security measures deployed prior to piloting online student access.
- **Teacher Salary Enhancement**
 MSDE agrees that teacher salaries need to be increased. MSDE seeks to convene the Institutional Educators Pay Plan (IEPP) committee to discuss increased compensation as well as benefits for the JSES staff. MSDE will advocate for additional resources through the State budget process.
- **Substitute Pool**
 MSDE JSES is exploring several options for developing access to a substitute teacher pool. MSDE recognizes this is a critical area to address teacher vacancies, vacation leave, and medical leave. MSDE will be advocating for the required additional funding and staffing required through the State budget process.
- **Post-Secondary Education**
 MSDE JSES agrees that having options for youth who possess a high school diploma is important. To this end, for youth who have a high school diploma, MSDE JSES provides youth the ability to take the Accuplacer, receive instruction in areas of weaknesses, and receive additional career technology educational opportunities. MSDE seeks additional funding for post-secondary activities through the State budget process, although data shows that few youth are eligible for post-secondary education.
- **Increased Career Technology Opportunities/Internships**
 Currently all fourteen school sites provide a minimum of three Career Technology Education (CTE) programs leading towards certification. With the introduction of additional youth charged as adults into the detention sites (who will likely remain in detention longer than youth pending adjudication or treatment placement) JSES will explore additional options for CTE programming. MSDE will seek additional resources through the State budget process, including staffing and space. MSDE JSES is exploring options with DJS for internships within designated facilities for youth, particularly youth who have already received a Maryland high school diploma.

- **High School Diploma**
Youth attending MSDE JSES schools have the ability to progress toward earning credits for a high school diploma and to obtain a high school diploma through examination. Youth who accumulate enough credits to obtain their high school diploma are awarded the diploma upon return to their home schools. MSDE JSE can award diplomas for students who earn a diploma by examination.
- **Youth Charged As Adults Population**
MSDE JSES' program of study and course offerings will allow youth charged as adults access to credit bearing courses during their detention stays. MSDE JSES will explore options for providing additional CTE offerings and post-secondary options beyond those currently offered in detention sites. MSDE will seek funds through the State budget process for additional resources, including staffing, funding, and physical space. These additional resources will need to be obtained for these sites in order for these enhancements to occur.
- **Aftercare Planning**
MSDE JSES collaborates with DJS with regard to each youth's educational needs. Currently, focus is being placed on enhancing MSDE JSES' role in the transition process with respect to educational transition to home schools. The development of transition guidelines has resulted from this collaborative approach and plans are underway to refine and re-implement these plans over the next fiscal year to assure youth's successful transition from MSDE JSES educational services to their home schools.

MSDE Response to Facility Based Concerns

Treatment Sites

Victor Cullen Center

Since the JJMU First Quarter Report, a new administrator has been hired for Victor Cullen Center (VCC) and a great deal of emphasis has been placed on developing and expanding educational services and a positive school climate. MSDE JSES appreciates JJMU's recognition of the efforts at VCC. MSDE JSES is currently exploring options to provide post-secondary opportunities for youth at VCC including: reinstating the previous relationship with Frederick Community College which was discontinued due to lack of qualified students and collaborating with the community college system to provide online access to courses and certifications.

Youth Centers

Three of the Youth Centers have vacant career technology education (CTE) instructor positions and the fourth site provides career technology instruction by the career research and development instructor. A staff member is working temporarily on a rotating basis to provide OSHA 10 training. Once CTE instructors are hired, the following CTE programs will be offered which lead to nationally recognized industry certifications: National Center for Construction Education and Research (NCCER) Core Construction; ServSafe; and OSHA 10. Additionally, C-Tech (Green

Technology, Mission Breakout, and Connect to Business) instruction is provided at all four Youth Centers.

J. DeWeese Carter Center

JSES is exploring options for providing designated online courses from Chesapeake College for the youth residing at Carter who have a high school diploma. Youth at Carter who obtain or possess their high school diploma are also provided access to a minimum of three CTE courses. Youth's access to employment opportunities as well as internships in the Chestertown community will be addressed through collaboration with DJS.

Detention Sites

MSDE JSES response to comments regarding the detention sites is embedded in the general recommendations portion of this response, no additional site specific comments for the detention centers are required.