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**JUVENILE JUSTICE MONITORING UNIT  
STATE OF MARYLAND**

**2017 FIRST QUARTER REPORT**

## **The Maryland Juvenile Justice Monitoring Unit (JJMU)**

The Juvenile Justice Monitoring Unit (JJMU) is an independent state agency housed in the Office of the Maryland Attorney General.

The mission of the JJMU is to promote the positive transformation of the juvenile justice system to meet the needs of Maryland's youth, families, and communities. This mission is accomplished by collaborating with all who are involved with the juvenile justice system.

The JJMU is responsible for reporting on Maryland Department of Juvenile Services (DJS/the Department) operated and licensed facilities across the state. Monitors from the unit conduct unannounced facility visits to guard against abuse and ensure youth receive appropriate treatment and services.

## **JJMU 2017 First Quarter Report Compendium**

The JJMU issues public reports covering each calendar quarter. Enclosed please find the compilation of 2017 first quarter reports from the Maryland Juvenile Justice Monitoring Unit. This report compendium provides data and analysis concerning treatment of and services provided to youth in DJS directly run and licensed facilities throughout Maryland.

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

The JJMU 2017 First Quarter Report compilation was produced by Margi Joshi, Nick Moroney, Tim Snyder and Eliza Steele of the JJMU. Thanks to Taran Henley, Terri Jarman, Fritz Schantz, and Maria Welker for technical assistance.

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

Current and prior reports of the Maryland Juvenile Justice Monitoring Unit and related responses are available through our website at:

<http://www.marylandattorneygeneral.gov/Pages/JJM/default.aspx>



**NICK MORONEY**  
*Director*

STATE OF MARYLAND  
JUVENILE JUSTICE MONITORING UNIT

June 2017

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, Director Lee, and State Advisory Board Members:

This is a report covering Maryland Department of Juvenile Services operated and licensed facilities during the first quarter of 2017.

The Cheltenham Youth Facility (CYF) physical plant was changed to a modern building complex on the grounds of the old facility towards the end of 2016.

The transition to the new building coincided with changes in facility administration. Operations at the facility, which has been renamed Cheltenham Youth Detention Center (CYDC), have not stabilized since the move and have given rise to serious concerns about youth and staff safety.

Please see the CYDC report on pages two through ten for more information.

Respectfully submitted,

*Nick Moroney*

Nick Moroney  
Director  
Maryland Juvenile Justice Monitoring Unit

Cc: Attorney General Brian Frosh  
Chief Deputy Attorney General Elizabeth Harris  
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# JUVENILE JUSTICE MONITORING UNIT 2017 FIRST QUARTER REPORT

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## Secure Detention Centers

Short-term, pre-disposition/pending placement

- Baltimore City Juvenile Justice Center (BCJJC)
- Cheltenham Youth Detention Facility (CYDC)
- Charles H. Hickey, Jr., School (Hickey)
- Thomas J.S. Waxter Children's Center (Waxter)
- Alfred D. Noyes Children's Center (Noyes)
- Western Maryland Children's Center (WMCC)
- Lower Eastern Shore Children's Center (LESCC)

## Committed Placement Centers

Long-term, post-disposition

- Victor Cullen Center (Cullen)
- J. DeWeese Carter Center (Carter)
- Backbone Mountain, Green Ridge, Savage Mountain, Meadow Mountain youth centers (Four youth centers)
- Silver Oak Academy (SOA)

## Incident and Population Trends

First quarter 2017 population and incident trends versus the same time last year:

- ✓ Average daily populations (ADP) of youth decreased at CYDC secure detention center and at Victor Cullen committed placement center.
- ✓ Fights and assaults decreased in secure detention at CYDC, Waxter, and WMCC and in committed placement at Cullen and the four youth centers.
- ✓ Physical restraints decreased in secure detention at CYDC, Hickey, Noyes, and WMCC and in committed placement at Carter and Cullen.
- ✓ Mechanical restraints were not used in secure detention at CYDC, Waxter, and LESCC or in committed placement at Carter. The use of mechanical restraints decreased in secure detention at Noyes and in committed placement at Cullen.
- ✓ Seclusion was not used in secure detention at LESCC and was only used once in secure detention at BCJJC and WMCC. The use of seclusion decreased in secure detention at Waxter and Noyes and at Victor Cullen committed placement center.
- Average daily population (ADP) increased in secure detention at BCJJC, Hickey, Waxter, Noyes, WMCC and LESCC. ADP also increased in committed placement at Carter, the four youth centers and SOA.
- Fights and assaults increased in secure detention at BCJJC, Hickey, and Noyes and in committed placement at Carter and SOA.
- Physical restraints increased in secure detention at BCJJC, Waxter, and LESCC and in committed placement at SOA and the four youth centers.
- Mechanical restraints increased in secure detention at BCJJC, Hickey, and WMCC, and in committed placement at the four youth centers.
- Seclusion increased in detention at CYDC and Hickey.
- There were 76 incidents of suicide ideation, 4 incidents of self-injurious behavior, and one suicide attempt at DJS-operated facilities during the quarter.

# **CHELTENHAM YOUTH DETENTION CENTER**

**Cheltenham Youth Detention Center (formerly Cheltenham Youth Facility)**

Cheltenham Youth Detention Center (CYDC), located in Prince George’s County, is a hardware secure (maximum security) detention center owned and operated by the Department of Juvenile Services (DJS/the Department). The DJS-rated housing capacity is 72 boys. African American youth represented 72% of total youth entries during the first quarter of 2017, compared to 74% in the first quarter of 2016. Hispanic/Latino youth represented 11% of entries in 2017, an increase of 2% compared to the first quarter of 2016.

<b>CYDC – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>70</b>	<b>65</b>	<b>62</b>
1. Youth on Youth Assault/Fight	37	47	26
2. Alleged Youth on Staff Assault	4	1	8
3. Physical Restraint	35	58	50
4. Use of Handcuffs and/or Shackles	8	12	0
5. Seclusion	0	0	4
6. Contraband	1	2	2
7. Suicide Ideation	3	7	3
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	2	4	1

Average daily population during the first quarter of 2017 decreased marginally, from 65 to 62, compared to first quarter of 2016. Over the same period, youth fights and assaults decreased by 45%. However, youth on staff assaults increased by 7 (from 1 to 8) and use of seclusion increased from zero to four.



## **CONCERNS ABOUT SAFETY AND SECURITY AT CYDC**

The DJS youth detention center in Cheltenham has been under new management since September of 2016. The Cheltenham Youth Facility also relocated to a newly constructed physical plant on the grounds of the old facility. The new facility is called the Cheltenham Youth Detention Center (CYDC) and it opened in November of 2016. There were several incidents of concern during the first quarter of 2017 that indicate that CYDC leadership needs to invest greater effort in improving the facility culture. It is vitally important that administrators prioritize the establishment of a safe and secure environment to protect both youth and staff from harm. Some of the incidents described in this report on the new Cheltenham facility involve staff behaving aggressively toward youth; some involve staff failing to take action when they should act decisively. Some incidents raise questions about negligence on the part of staff and administrators.

### **Staff Misconduct**

The following incidents highlight a pattern of aggressive staff behavior toward youth under their care.

Incident 142402 involved an allegation of abuse against a case manager on the Intensive Services Unit (ISU).<sup>1</sup> Video footage from the incident shows the case manager talking to a youth who is seated at a table in the unit dayroom. He leaves the dayroom, enters his office, removes his watch, and places it on his desk. He enters the dayroom again, approaches the youth, and taps the youth on the chest. He then steps back, squats down, and places both of his hands up in a boxing stance and moves toward the youth. The case manager and the youth begin to brawl. A staffer on the unit restrains the youth and moves him away from the case manager.

In a subsequent investigation by the Department's internal investigation unit (OIG), the case manager was asked about his verbal interaction with the youth after he tapped the youth on the chest. He reported that, "It was after he had been calling me a bitch. I probably said something like, show me I'm a bitch." The case manager said that the youth was cursing at him, and that, "I was just angry at the time....it was a way of me making a stand."

The shift commander did note problems with the case manager's behavior in an audit of the incident and Child Protective Services (CPS) and the Maryland State Police were contacted. However, according to the OIG investigation, an incident report was not immediately generated following the event.

The case manager continues to work with kids at the facility.

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<sup>1</sup> The ISU is a restrictive housing unit where youth allegedly involved in incidents of aggression while in the facility are sometimes housed. One of the purposes of the ISU is to provide youth with more intensive therapeutic supports and services in accordance with their individual needs.

In Incident 143146, a youth reached for an object on a teacher's desk and the staffer responded by grabbing the youth by his sweatshirt and throwing him to the ground. Staff assistance was called and the youth was removed from the classroom. As the youth was standing in the school hallway processing with other facility staff, the staffer who had grabbed and thrown the youth came out into the hallway and confronted the youth again and had to be separated from the youth by other staff. During a medical evaluation following the incident, the youth reported that, "he [the staffer] approached me like he was going smack me. I felt threatened." Child Protective Services was notified of the incident. In Incident 142970, the same staffer (who grabbed and threw the youth in Incident 143146) placed a youth in a chokehold during an attempt to physically restrain him and put him into his cell. An audit of Incident 142970 by the shift commander did not mention the inappropriate restraint by staff. The chokehold restraint was brought to the attention of administrators during a monitoring visit.

In Incident 142712, a youth was returning to a residential unit following school. A staffer exchanged words with the youth. The staffer then leaned his head to the side and moved toward the youth, so that the staffer's and the youth's face were very close. The youth stepped back and away from the staffer while keeping his hands at his waist. The staffer then moved toward the youth and wrapped his arms around the youth's arms and chest, took the youth to the ground, and began tussling with him. A supervisory staffer who was present subsequently noted: "Based on what I observed, the force [used by the staffer on the youth] appeared excessive." Other staffers had to intervene to physically pull the staffer off the youth and remove him from the unit. Prince George's County Child Protective Services (CPS) was notified of the incident but declined to initiate an investigation.

### **Lack of Adequate Supervision of Youth**

Several incidents during the first quarter involved a failure of staff to respond in a timely manner to youth behavior.

In Incident 142437, a youth housed in the infirmary was on suicide watch and (per Department protocol) was assigned a staffer to remain within arm's length of him to prevent him from hurting himself. The youth became agitated and began to walk around the infirmary while two staff stayed seated at a table several feet from the youth. The youth then opened a cell door directly underneath a slanted box holding a mounted TV. The youth started climbing on top of the door. Staff stayed seated watching the youth. The youth began swinging the door while perched on top of it. Staff continued to remain seated. The youth then climbed from the top of the door onto the top of the box. At this point, the two staffers got up and approached the youth who was now approximately nine to ten feet off the ground and began trying to convince him to come down. The youth refused and staff assistance was called.

The youth remained on top of the TV for over four hours as several staff tried to verbally process with him to get him to come down. During this time, the youth broke a light fixture above

the TV and proceeded to cut himself on his wrists and legs with broken glass. There were two other youth staying on the infirmary at the time. Rather than move the other two youth to another unit, staff confined them to their infirmary cells and at times allowed them to come out. When the youth were allowed out of their cells, they sometimes engaged in disruptive behavior, exacerbating the already tense situation on the infirmary.

On other living units, youth had to be locked in their cells so that staff could report to the infirmary and attempt to process with the youth on top of the TV. The director of mental health, who lived an hour away, was eventually called in and was able to process with the youth and convince him to climb down from the TV at around 8 pm. The youth was sent to a nearby hospital for medical and psychiatric evaluation.

The Juvenile Justice Monitoring Unit (JJMU) requested that the Department's internal investigation unit (OIG) conduct an investigation into the incident just described (Incident 142437). The request was denied on the basis that Cheltenham facility administrators conducted their own internal investigation. The JJMU does not have access to this kind of investigation.

The following two incidents (143066 and 143109) occurred approximately one month following the incident just described.

In Incident 143066, a youth in the infirmary complaining that his back was aching asked for a chair with back support. After supervisors did not respond to the request for at least an hour, the youth became agitated and restless and began to move a table toward the previously mentioned mounted box holding a TV. He attempted to climb onto the box holding the TV but was unable. The youth then walked over to a trash can, emptied it, and placed it upside down on the table to gain more height to reach the TV box. The staffer posted on the unit, who was a new hire, phoned the shift commander for assistance during these events (instead of radioing for staff assistance per facility protocol) but did not try to intervene and stop the youth. Eventually staff assistance arrived and began to physically restrain the youth while he was on top of the table. Staff then placed the youth in his infirmary cell.

A few days later in the infirmary, the same youth attempted to climb on top of the cell door located next to the mounted TV box (Incident 143109). The door had been left open by staff. The youth was able to climb up and onto the top of the door before staff assistance arrived. Staff began to swing the door back and forth to get the youth to come down, causing the youth to fall off and hit the ground, landing on his wrist. He was then restrained and placed in his cell.

In Incident 142503, three youth on the ISU refused to lock in their cells for the evening. Two of the youth began to throw around furniture, overturn desks, smash the unit phone, and destroy the unit water cooler and hand sanitizer machine. There were three staff posted on the unit. Two of the three staffers did not try to physically intervene but called for staff assistance after some time had elapsed. It took several minutes for staff assistance to arrive from other sections of the facility to assist in getting the situation under control. The youth began to assault

the two staffers who called for assistance. Support staff arrived on the unit after several minutes and were able to secure the kids in their cells.

In Incident 142626, a youth housed in the infirmary said he wasn't feeling well and requested to speak to a shift commander (often the highest ranking administrator onsite). He was told to wait half an hour for assistance and became very upset. He began running around the unit. The youth ran for several minutes and at one point, the youth grabbed a bottle of lotion and began dousing the infirmary floor, desks, and chairs. Staffers posted on the unit attempted to verbally process with the youth (but did not physically intervene) while they called the shift commander for assistance multiple times. The shift commander and staff assistance arrived after the third attempt. As soon as staff assistance arrived the youth immediately calmed down and began cleaning up the unit.

In Incident 142617, the school principal was providing instructional services to two youth housed in the infirmary. One youth refused school work and began to roam around the unit. At one point, the youth started to rub the principal's head and was told to stop. He then walked into the bathroom, filled his hands with soap, walked over to the principal again and rubbed the soap into the principal's head. According to the incident report, the principal stated to staff on duty that "you saw him about to do this and you said nothing, you just laughed." Instruction on the infirmary was cancelled for the rest of the day and was curtailed following this incident due to concerns about personal security on the part of educational staff.

### **Unreported Seclusion**

In Incident 142353, a youth was restrained for allegedly threatening staff and exhibiting aggressive behavior and was subsequently escorted to the ISU. He was locked in a cell on the ISU, however this instance of seclusion was not documented as such in the incident report. Seclusion procedures to safeguard the wellbeing of the youth were also not completed in accordance with DJS policy on seclusions.<sup>2</sup> All staff and administrators should be re-trained on policies and procedures governing seclusion.

### **Staff Posting**

Staffing assignments throughout the facility should take into account the strengths and experience of the staff involved, and more seasoned staff with demonstrated skills in establishing rapport with youth should be assigned to work with kids who may need more individualized attention.

For example, kids on the ISU often have more complex needs than youth in the general population at CYDC and are best served by experienced staff who have a history of working with youth in need of specialized attention. Yet during the quarter, new, inexperienced staff were

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<sup>2</sup> Md. Dept. of Juvenile Services Policy and Procedure RF-01-07.

posted on the ISU without receiving training provided by mental health staff for working with the population therapeutically. In addition, the ISU unit manager was out with an injury during much of the first quarter (and is still out on leave at time of writing).

### **Staffing Levels**

Staffing levels were not re-evaluated after the move to the new detention center. Due to differences in the physical layout of the new facility, certain posts may require higher staffing levels than were required in the old physical plant. The master control and intake areas were combined in the old facility but are separate in the new building. At the same time, staff are sometimes required to leave master control to meet staffing requirements in the intake area of the facility. Additionally, individual meeting rooms created for lawyer and case manager visits in the new facility also require increased staffing for supervision purposes.

Former positions that enhanced safety and security have been eliminated. For example, a security unit comprised of multiple staffers in the previous facility was formed to rapidly respond to calls for assistance throughout the campus. The security unit has been replaced by a single staffer designated as a rover that is assigned other duties and must obtain permission from the shift commander before responding to staff assistance.

Staffing issues stemming from resignations, injuries, and call-outs further exacerbate staffing levels and result in a significant number of staffers having to work double shifts multiple times a week.

Administrators at CYDC should conduct a thorough appraisal of staffing levels required to maintain a safe environment. The detention center should be staffed in a way that ensures appropriate numbers of staff are available to work on any given day. Staffing plans should be designed to ensure that the most capable and experienced staff are posted where their experience is most likely to be needed.

### **Programming**

Excessive downtime leads to boredom and frustration on the residential units and can contribute to incidents involving aggression. Excessive idle time is especially problematic in the infirmary and the ISU, where youth remain on the unit most of the day and often do not receive the full six hours of required education instruction due to teaching staff shortages. One youth who acted out in the infirmary (see incident 142626 – described earlier) indicated that he was expressing frustration about not having school. He said he wanted to get his GED, and he wanted to work and that “doing stuff like this [acting out] is the only way we can get stuff done.”

Due to the lack of a substitute teaching pool and teacher vacancies and call outs, school cancellations or half days off school are not uncommon for youths on other units as well. When school is called off, kids are stuck on residential units. DJS administrators and staff should have

constructive programming and recreational activities planned for the hours and days when youth cannot attend school.

During the quarter, two youth with a high school diploma were enrolled in the DJS-organized World of Work (WOW) program. However, their work assignments were contingent on the availability of a supervisory staffer who oversees the WOW program. The youth sat in high school classes whenever staff were unavailable to supervise them. Staffing for the WOW program should be increased to allow youth an opportunity to work throughout the school day. Students who have already earned a high school diploma should also have access to post-secondary opportunities to further academic progress and to learn professional skills. (For more information on education in DJS facilities, see the MSDE JSES section beginning on page 49).

Youth enjoy going to the indoor gym during recreation, but due to the limited number of available hours on weekdays as well as the number of youths and the amount of living units at the detention center, youth are only allowed to go to the gym on alternating days. During the quarter, there was some confusion among staff and youth about what days they were allowed to use the gym. A gym schedule should be posted on each unit informing youth of their allotted gym days and times. If a gym schedule were posted and adhered to, youth refusing to utilize the smaller recreation areas between the units (because they prefer and expect to use the gym) would perhaps change their minds.

There is a large outdoor space that includes a football field and running track located in the back of the facility and enclosed by a security fence that has yet to be utilized. Staff and administrators say the area is 'off limits' and that they do not know when the fenced outdoor recreation fields will be available for youth use. This large space should be made available for youth recreation without delay and should also be used as an option for additional structured programming.

### **Master Control**

The new physical plant includes a centralized master control area. Staffers assigned to master control are in charge of opening doors and monitoring all movement within the facility. They are also charged with helping to coordinate responses to emergency situations. Due to the design of the operational system, requests to open doors are handled in the order in which they are received and not based on the urgency of the request. This set up can result in delayed response times, which can impact the ability of staff to respond to calls for staff assistance in emergency situations.

At another DJS facility (BCJJC), the master control system is calibrated to automatically display real-time video of the area where a request to open a door has been made. This system ensures that master control staff immediately have a visual of the person making the request to open a door and do not have to search through multiple camera views to confirm that the request is legitimate before satisfying it. This feature can help the flow of movement within the facility

and prevent master control from opening the door for unauthorized persons. The Department should install the same feature in the master control system at CYDC and in the meantime, develop a streamlined process—such as a chart listing doors and the corresponding camera angles—to help support master control staff

During the quarter, a power outage in the facility prevented master control from opening doors for several hours. Administrators and the shift commander were the only staff with access to keys and they had to physically open doors for other staff throughout the facility. Unit managers should also have access to keys to use in emergency situations and to help hasten staff response times during calls for assistance.

### **Security Protocols and Safety Features**

In Incident 142102, a mental health clinician was in her office with a youth while a staffer posted on the unit was elsewhere on the unit floor. The youth picked up the clinician's keys and water bottle and walked out of the office, closing the door behind him. The clinician, believing that the youth had locked the door when he exited the office, called master control on the phone for emergency assistance, but the line was busy. The line remained busy as the clinician continued to call for the next five minutes. The clinician then pressed the panic button located in the office, but received no response. The youth eventually returned to the office with a DJS staffer, who had been posted with youth in another area of the unit, and placed the keys on the clinician's desk.

Direct care staff should be properly posted to maintain visual inspection of all youth at all times. This includes youth meeting with mental health or other support staff; DJS staff should not allow a situation where a youth meets individually with a clinician or education staff, for example, without a direct-care worker monitoring that area. In the incident just described, there was just one staffer responsible for monitoring the youth on the unit (including the youth meeting with the mental health clinician) all of whom had refused education while the unit's other staffer was in the school with youth who had not refused. The Department should adjust staffing ratios to ensure that individual staffers do not monitor groups of youth on their own.

Security mechanisms, like the panic button used in the incident just described, should be adjusted to include auditory alerts so that staff on the unit are made aware of an emergency whether or not they are positioned with the visual alarm in sight. The panic button should also trigger an audio alert to master control to ensure that staff outside the unit are also aware of an emergency situation and can respond accordingly. Phone lines to master control should remain open and be staffed 24 hours a day to ensure that anyone in the facility can get through and speak to someone in case of an emergency.

## **OTHER DETENTION CENTERS**



## Baltimore City Juvenile Justice Center

The Baltimore City Juvenile Justice Center (BCJJC) is a maximum security detention center for boys. The Maryland Department of Juvenile Services (DJS/the Department) owns and operates BCJJC, which has a DJS-rated housing capacity of 120 youth. African American youth represented 94% of total youth entries during the first quarter in both 2017 and 2016.

<b>BCJJC – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>86</b>	<b>84</b>	<b>101</b>
1. Youth on Youth Assault/Fight	45	64	97
2. Alleged Youth on Staff Assault	8	10	15
3. Physical Restraint	67	92	114
4. Use of Handcuffs and/or Shackles	40	23	33
5. Seclusion	1	3	1
6. Contraband	3	4	9
7. Suicide Ideation	10	5	9
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	4	1	2

Average daily population (ADP) at BCJJC increased overall by 20% during the first quarter of 2017 compared to the same period last year. This uptick was driven by a 35% increase in the ADP of youth charged as adults and held at BCJJC (from 45 youth to 61) and by the greater ADP of youth at BCJJC who are involved with the juvenile court system (up by 14% from 38 youth to 43).

Comparing the same time periods, fights and assaults increased by 52%, physical restraints increased by 24%, and incidents involving the use of mechanical restraints increased by 43%. In response to a spike in incidents involving aggression in early March, administrators placed two units on 'no movement' status for one week during which time youth did not leave

the living unit except for one hour a day for recreation outside or in the gym. Education staff, when available, delivered school services on the living units.

While there may be instances when staff feel that they cannot safely move youth from the unit due to a heightened sense of risk of incidents involving aggression, enforced stays on living units do not address the issues and problematic group dynamics that lead to incidents in the first place. The Department should increase staff capacity through training to help them identify and constructively and preemptively address issues as they arise. Collaboration between direct care and mental health staff should continue in order to establish a more structured environment and mitigate problematic group dynamics that can lead to incidents of aggression through a therapeutic (rather than punitive) approach.

### **Intensive Services Unit**

At certain facilities, including BCJJC, the Department operates a restrictive and self-contained housing unit called the Intensive Services Unit (ISU) to house youth struggling with challenges related to aggressive behavior. The ISU functions with an enhanced staff to youth ratio and was intended to include increased mental health services and supports such as staff mentoring of youth after they step down from the unit.

During the quarter, some youth on the ISU were being locked in for the night as early as 4:45 p.m., only coming out briefly for a five minute shower. Others were permitted to come back out of their cells after showers until 6:30 p.m. Administrators and supervisory staff at BCJJC should ensure that direct care workers enforce a youth bedtime of no earlier than 8:00 p.m. and that youth are not locked in their cells prematurely or for longer than necessary in the evenings.

At times during the quarter there were two ISUs in operation at BCJJC. The increased staff to youth ratio required on ISU meant that youth whose families did not visit them in detention were sometimes locked in their cells during visitation hours while staff escorted and supervised other ISU youth during visiting times. Additionally, the use of specially trained ISU staff to fill posts within two (rather than one) ISUs meant that they were less available to provide mentoring and other support services to youth on regular units who had stepped down from an ISU.

Operating two ISUs also means there are not typically enough teaching staff to provide full school day instruction by a certified teacher. When there are two ISUs, a teacher or instructional assistant provides half a day of education to each unit or alternates between units to teach youth in those units on a bi-daily basis.

Administrators at BCJJC should make every effort to limit the ISU population to one unit of youth. Both DJS and MSDE JSES (which operates the school at BCJJC) should ensure the availability of enough qualified personnel to meet staffing demands at times when it is absolutely necessary to have two ISUs operating.

## **Adult Housing Youth**

A substantial proportion of the population at BCJJC consists of youth facing charges in the adult criminal justice system. Youth charged as adults tend to have an extended length of stay usually spanning months, compared to a period of days or weeks for youth in the juvenile court system.<sup>3</sup> Individual mental health clinicians have started to address the needs of the population of youth charged as adults held at BCJJC by developing therapeutic groups including a book club and a group focused on adulthood. These initiatives should continue and be expanded.

An increasing number of youth, particularly among those facing adult charges, are earning a GED while in detention at BCJJC. Developing opportunities for post-secondary education, such as SAT preparation and testing or vocational education training courses, is key to meeting the needs of youth likely to be detained for a period of months. Administrators at BCJJC should continue to collaborate with mental health and education staff to develop constructive rehabilitative programming tailored to the needs of adult housing youth.

## **Support Services**

A large proportion of youth interviewed during the quarter said they had recently experienced the death of a close friend or relative and suffered other traumas related to violence against themselves or their loved ones. The Department allows youth to attend wakes for immediate family members (but not funerals), and staff and mental health clinicians at BCJJC often work together to help support grieving youth. The Department's plans to provide comprehensive and ongoing training to all detention staff in trauma-informed care should go forward.

Family contact is associated with decreased recidivism rates, enhanced academic performance, and improved mental health for youth in juvenile justice facilities.<sup>4</sup> However, youth in DJS facilities can only make two 10-minute phone calls to their family during the week. The Department should increase the basic allotment of weekly telephone calls to help facilitate family engagement.

While there are usually youth detained at BCJJC who have children of their own, DJS policy prohibits young children from attending regular visitation hours during the week. Youth may arrange special visits with their children through case managers if an adult, rather than the co-parent, is able to bring the child. Administrators at BCJJC have scheduled events for parenting youth and their children and these opportunities should continue and be held regularly to help facilitate family contact.

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<sup>3</sup> DJS Fiscal Year 2016 Data Resource Guide, p. 111, 115. Available at: [http://djs.maryland.gov/Documents/2016\\_full\\_book.pdf](http://djs.maryland.gov/Documents/2016_full_book.pdf)

<sup>4</sup> Agudelo, S. "The Impact of Family Visitation on Incarcerated Youth's Behavior and School Performance: Findings from the Families as Partners Project." Vera Institute for Justice. April 2013. <http://archive.vera.org/sites/default/files/resources/downloads/family-visitation-and-youth-behavior-brief.pdf>

## **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the school at BCJJC.

As stated earlier (in the Intensive Services Unit section), teacher shortages due to absences and vacancies at BCJJC can impact the delivery of education services to students on a consistent basis. In addition to complications posed by the operation of two ISU units, the increase in population at BCJJC has led to the utilization of what was previously an orientation unit (where youth do not participate in school) as a regular living unit. However, MSDE JSES does not always have access to enough staff to provide instruction to the former orientation unit.

Additionally, there is just one guidance counselor position at BCJJC, which is the same allotment as the Carter committed placement center. Whereas Carter has a 14-bed capacity and youth stay for several months at a time, BCJJC has a 120-bed capacity and an increased demand for records requests given the frequency with which youth come and go from detention. MSDE JSES should develop updated staffing models that take into account the needs of each facility.

During the quarter, two youths earned their GED. Education staff at BCJJC have, under difficult circumstances, worked to provide education services to the extent possible given resource and organizational limitations. MSDE JSES administrators should support efforts by education staff at DJS facilities by ensuring that there is a substitute pool of teachers and by establishing a program of post-secondary education options for youth in detention who have earned a high school diploma.

For more information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

### Charles H. Hickey, Jr., School

The Charles H. Hickey, Jr., School (Hickey) in Baltimore County is a maximum security detention center for boys. Hickey is owned and operated by the Department of Juvenile Services (DJS/the Department) and has a DJS-rated housing capacity of 72 beds. African American youth accounted for 77% of entries in the first quarter of 2017, compared to 76% during the first quarter of 2016.

Hickey – Selected Incident Categories	Q1 2015	Q1 2016	Q1 2017
<b>Average Daily Population (ADP)</b>	<b>43</b>	<b>47</b>	<b>52</b>
1. Youth on Youth Assault/Fight	31	28	39
2. Alleged Youth on Staff Assault	2	4	0
3. Physical Restraint	64	65	63
4. Use of Handcuffs and/or Shackles	12	8	13
5. Seclusion	23	6	7
6. Contraband	2	5	0
7. Suicide Ideation	10	5	4
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	6	2	0

Average daily population (ADP) in first quarter of 2017 increased by 11% compared to the first quarter of 2016, while youth on youth assaults or fights increased by 40% and the use of mechanical restraints increased by 63%.

Hickey administrators should continue to enhance safety, security, and staff performance with a focus on group dynamics and comprehensive supervision of youth.

## **Group Dynamics and Supervision of Youth**

In Incident 141570, a lead staffer was facilitating a community meeting. Several of the youth were restless during the meeting and words were exchanged between youth as the meeting progressed. One youth stood up and began waving his hands in an agitated manner. Another youth then got out of his seat and approached a youth sitting across from him and began to assault him. A group disturbance broke out and spread from the lower dayroom to the upper dayroom of the unit. Staff assistance arrived and it took 10 minutes for staffers to quell the disturbance. During the melee, youth located in the lower dayroom who were not involved in the fighting remained in the dayroom area instead of being secured in their rooms by staff. Some began jumping on furniture or milling about the area, contributing to the disarray. One youth stood on top of a table to get a better view of the fighting.

During the commotion, staffers performed an inappropriate physical restraint when they held a youth in a standing restraint then lifted his feet from the floor and set him down on his stomach. The staffers then carried him to his cell.<sup>5</sup>

Staff should be trained to recognize signs of potential turmoil among youth and respond proactively to help diffuse tense situations. Staff should also receive refresher courses on how to respond to group fights once they are underway, including instruction on basic security protocols such as securing youths in their rooms as soon as possible to help keep youths safe and restore order without delay.

In Incident 142627, youth on a residential unit were separated into two groups due to tension on the unit. The lead staffer on the unit was supervising one of the groups as they entered the unit from a back hallway. A youth pushed past the lead staffer and ran into the front dayroom of the unit in order to assault youth in the other group. Other youth from the group followed, leading to a group disturbance.

Following individual debriefing sessions with mental health staff, a youth reported that tension had been high on the unit for weeks and that “this ain’t over.” Another youth echoed these sentiments, stating that issues weren’t resolved and that he could not promise that he wouldn’t retaliate.

This incident (142627) underscores how the initial physical separation of youth who are not getting along - which preceded the incident – is not in itself a solution. Separation alone fails to address discord among youth in the long term or teach youth conflict resolution or coping skills to effectively deal with problems.

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<sup>5</sup> The shift commander in charge of reviewing the incident indicated that staffers had reacted appropriately in response to the incident. Administrators ultimately addressed the inappropriate restraint and the supervisor’s failure to properly critique the incident. Supervisory staff completing incident reviews should be providing objective critiques of workers’ behavior during the period leading up to an incident, during the event itself and during the period immediately following an incident. The Department should ensure that, in every case, balanced analysis of circumstances surrounding incidents occurs – such an approach is essential to effectively address deficiencies in staff performance.

Hickey administrators have implemented more comprehensive measures to help address problematic group dynamics on the unit following several incidents like the one described above. Community conferencing professionals have been scheduled to meet with youth on the unit to mediate differences, and mental health staff on the unit have started an anger management class for youth. Interventions that aim to address core issues fueling conflict should continue to be explored and expanded.

### **School Environment**

The Maryland State Department of Education Juvenile Services Education System (MSDE JSES) operates the school at Hickey.

Over a third of all aggressive incidents occurred in the school area of the facility during the first quarter of 2017. In Incident 142792, a staffer stayed back on a living unit with a youth for a short time while other youth from the unit were escorted to school. The staffer walked with the youth to school after other youth had entered the classroom. Upon entering the classroom, the youth started a verbal altercation with youth which then erupted in a group fight. All youth in the class were sent back to the residential unit and placed on seclusion for the morning.

According to a witness statement after the incident occurred, the staffer who held back the youth stated that he was apprehensive about bringing the youth to join the other youth in the classroom because of the potential for an incident to occur.

Staffers should take specific preventative steps when noticing a youth is agitated or upset by enlisting help from supervisory and mental health staff to assist in processing with or de-escalating youth. Administrators should also collaborate with mental health staff and supervisors to ensure consistent availability of clinicians, including in the school building, to aid in de-escalation and crisis intervention efforts.

Ongoing and open communication and collaboration between administrators, mental health staff, and education services leadership is necessary to ensure that the school functions as a safe and structured place for learning. Expectations about the roles of teachers and direct care staff in the management of youth behavior need to continue to be clarified. In addition to enhancing school security through increased attention to the movement of youth within the school building, MSDE JSES should support youth and staff by initiating the adoption of restorative justice techniques to address problematic youth behavior.

During the quarter, MSDE JSES staff and DJS facility administrators held a meeting on teacher concerns about a lack of safety and security. In one instance, a youth was able to enter a classroom unnoticed by direct care staff. Video footage shows the youth being escorted by a staffer down the hallway with other youth from his residential unit. The staffer turned to address another youth who was horse playing and, at that point, the youth slipped in through the open doorway of the classroom, walked behind a teaching assistant (who was seated at her desk located next to the teacher's desk), and behind the teacher, who was standing at her desk.

Security measures were put in place to address the particular lapse that occurred in the situation just described. Administrators at Hickey should support MSDE JSES personnel by resolving concerns about safety and security in the school building as they arise.

For more information on education in DJS facilities, see the MSDE JSES section beginning on page 49.

### **Family Engagement and Special Events**

Several special events, family engagement activities, and enrichment programs were planned and carried through by Hickey administrators during the first quarter of 2017. Two assemblies were organized around Black History Month, and a partnership with two local universities was established to initiate bi-monthly mentoring services provided by college students. Final arrangements are being made for an eight week long life skills-related class for youth which will center on conflict resolution and dealing with authority figures. The class is to be offered through the Baltimore City Police Department.

Hickey administrators have been bolstering family engagement efforts. During the first quarter, an average of two family-related activities a month were held at the facility and some of the events were exceptionally well attended.

Family events should be coupled with increased opportunities for phone contact with loved ones. For families who cannot make it to the facility for visits or events, telephone calls are an essential means by which parents stay in touch with their child, yet current DJS policy limits youth to two 10-minute phone calls per week. Plans to incorporate increased phone time with families should go forward.



## Thomas J.S. Waxter Children’s Center

The Thomas J.S. Waxter Children’s Center (Waxter) in Anne Arundel County is a maximum security detention center for girls. Waxter is owned and operated by the Maryland Department of Juvenile Services (DJS/the Department) and has a DJS-rated housing capacity of 42 beds. African American youth represented 68% of total youth entries during the first quarter of 2017, compared to 69% during the same period last year.

<b>Waxter – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>23</b>	<b>22</b>	<b>25</b>
1. Youth on Youth Assault/Fight	22	22	18
2. Alleged Youth on Staff Assault	1	4	5
3. Physical Restraint	40	50	56
4. Use of Handcuffs and/or Shackles	4	9	0
5. Seclusion	5	12	3
6. Contraband	4	1	1
7. Suicide Ideation	26	36	29
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	6	2	0

During the first quarter of 2017, the average daily population (ADP) at Waxter increased by 14% compared to the same period the year before. Over the same time, fights and assaults decreased by 18%, physical restraints increased by 12%, and seclusions decreased by 75%.

### Collaboration between Mental Health and Direct-Care Staff

In an effort to increase interdisciplinary collaboration, Waxter administrators hold quarterly all staff meetings that are carefully scheduled to ensure participation by education, medical, dietary, case management, mental health, and direct care personnel.

Efforts to further increase interdisciplinary collaboration should include a particular emphasis on mental health and direct-care staff. At Waxter, there were 29 incidents of suicide ideation during the quarter. The Department's data shows that 76.1% of girls in out-of-home placement during fiscal year 2016 had a moderate to high mental health need and 40% had a history of either physical or sexual abuse.<sup>6</sup> Increased presence and availability of mental health staff is necessary to support crisis intervention and help build capacity in direct care workers to work more constructively with youth facing intensive mental health challenges.

In an incident during the quarter (141444), a staffer directed a youth with an extensive history of trauma to separate herself in a small dayroom away from the rest of the unit as a consequence for earlier behavior. When the girl refused and threatened to stab staff with markers, a staffer directed her to go to her cell for a time-out. The youth - still escalated - walked to the back hallway where youth cells are located and began pacing back and forth with several staffers closely following her. Because it was a Sunday, no mental health staff were available on site to support direct care staff in efforts to process with the youth and try to de-escalate the situation. One of the staff began throwing items out of the youth's cell and kicking them around in the hallway and the youth became increasingly agitated and upset. The youth then threw a shoe at a staffer and the remaining staff began physically restraining her on the ground. During the restraint, the staffer who threw the items out of the youth's cell punched the girl twice in the face. The shift commander directed the staffer to remove herself from the situation but the staffer remained involved in the restraint. After the incident, the shift commander reported the conduct to Child Protective Services which investigated the incident. The staffer no longer works for the Department. Administrators at Waxter thoroughly reviewed the incident and found a wide range of problems with the staff response to the situation. Appropriate alternative responses were also identified and administrators have incorporated these approaches into staff trainings.

The Department's plans to train all direct care workers, including staff in detention centers, in trauma-informed care should go forward without delay. The Department should also ensure that mental health staff are available on site during youth waking hours at each site to work with youth, help address crises and provide training and support for direct care workers in their interactions with youth.

The prevalence of mental health needs among girls in the system also creates challenges related to comprehensive direct-care staffing at Waxter. When a youth exhibits or verbalizes suicidal behavior or an intention to self-harm, DJS policy appropriately requires the assignment of a staffer to monitor the youth one-to-one. When there are multiple youth on suicide watch at the same time, additional staffers are needed to work shifts in order to comply with the suicide watch and regular staffing ratio policies, which can and does increase a need for forced overtime.

### **Direct-Care Staffing**

Extended and short term staff absences due to sickness, injuries, and other conditions further complicates and exacerbates staff availability and ratio related challenges. Although (at times) there was just one actual vacancy that needed to be filled for direct care staff at Waxter during the first quarter, as many as seven staff were unavailable to work on a given day due to

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<sup>6</sup> DJS 2017 update to *Report on Female Offenders* (February, 2012).

extended leave connected to medical and personal reasons. (At time of writing [May 15, 2017] approximately 15 staffers at Waxter were unavailable to work). Administrators cannot hire substitute staffers in these situations, as the staffers' positions are technically filled.

These circumstances are not effectively factored into staffing allotments at each facility. The Department should work with the Department of Budget and Management to develop an updated staffing plan for DJS facilities that takes factors such as staff sickness and one-to-one staffing needs into account.

### **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the school at Waxter. Ongoing challenges related to staffing and retention resulted in gaps in the delivery of education services to youth at Waxter. For example, during the quarter a living unit was divided into two groups of youth because of a population spike and limited space in the education trailers. Due to teacher vacancies, only one group received teacher instruction during afternoon classes. On another occasion, a youth was prohibited from leaving the residential section of the facility because of vocalized plans to escape. This prevented the girl from going to the school trailers for three weeks. MSDE JSES did provide her with education packets to complete on the living unit but there was not always a teacher available to provide instruction or guidance to the youth.

A youth with limited English proficiency (LEP) was detained at Waxter beginning in early January. The youth, whose length of stay is likely to span several months, is provided with an interpreter but MSDE JSES does not have English Language Learners (ELL) teachers, as would be available to her in a community school. MSDE JSES should have ELL teachers at each DJS site to help support LEP students so they can fully participate in school.

An expanded budget based on individual facility needs and allowing for additional staff and other resources will be vital to MSDE JSES as it seeks to address ongoing problems with staffing, retention, and other deficiencies related to the provision of education services to youth in DJS facilities.

For more information, see the MSDE JSES section of this report beginning on page 49.

**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 DJS-rated capacity of 57. African Americans represented 59% of youth entries during the first quarter of 2017 compared to 71% in the first quarter of 2016. Hispanic youth accounted for 30% of youth entries versus 14% in the first quarter of 2016.

<b>Noyes – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>31</b>	<b>22</b>	<b>32</b>
1. Youth on Youth Assault/Fight	28	14	21
2. Alleged Youth on Staff Assault	1	2	1
3. Physical Restraint	66	38	24
4. Use of Handcuffs and/or Shackles	12	7	1
5. Seclusion	8	10	2
6. Contraband	3	1	1
7. Suicide Ideation	4	12	12
8. Suicide Attempt	0	1	0
9. Self-Injurious Behavior	3	0	0

Average daily population increased by 45% in the first quarter of 2017 in comparison to the first quarter of 2016 while youth on youth fights and assaults increased by 50%. Physical restraints, the use of mechanical restraints, and the use of seclusion decreased by 37%, 86%, and 80% respectively.

## **Use of Seclusion**

During a first quarter monitoring visit, a case manager was leading a group session on a unit. Toward the end of the session, a newly arrived youth complained to the case manager that he had not been given a phone call at intake and wanted to call his mom to let her know that he had been moved to Noyes from another institution. The case manager denied the request saying that she had other duties to complete.

The youth became upset, stood up from his seat, and repeated his request. The single staffer assigned to the unit confronted the youth face to face, cursed at and challenged the youth. The youth became further agitated. The case manager intervened to separate the staffer from the youth while attempting to de-escalate the situation. The staffer continued to goad the youth. Staff assistance was called and the youth was led to his cell and the door was locked.

Although the youth was secluded, seclusion forms were not completed and placed on the child's door and no one checked on the youth at periodic intervals as required by Department policy.<sup>7</sup> After sitting in his cell quietly for several minutes, the youth asked to be released from the cell. His pleas were ignored, and staff did not approach the youth's door to process with him. He became agitated again, and began to bang on the door to be let out. About ten minutes later, a supervisor came on the unit and let the youth out of the cell without incident.

Direct-care staff should be held accountable if they fail to utilize less restrictive methods of de-escalation before resorting to the use of seclusion. Once placed on seclusion, protocols in place for monitoring youth should be followed to help ensure youth safety and staff accountability. In situations where seclusion is arguably necessary (which does not include the situation described above), the seclusion must be discontinued once youth no longer pose a physical threat to themselves or others.<sup>8</sup>

## **Collaboration between Direct-care, Mental Health and Education Staff**

During a school monitoring visit, a youth in the school became agitated because he learned that another youth with whom he had a conflict in the community had been admitted to the facility. He began pacing throughout the classroom and allegedly tried to enlist other youth in helping him plan an assault against the incoming youth. Instruction time had to be cut short because of the disruption to the classroom environment. A staffer attempted to handle the situation by ordering the youth to sit down and pay attention but the youth remained restless throughout the rest of the class period. No one attempted to process with the youth outside of the classroom setting and mental health was not called to intervene.

Overreliance on the use of commands to maintain structure can be counterproductive. Staff should receive in-depth training on establishing rapport with youth and utilizing verbal processing to address disruptive behavior. Greater collaboration between mental health

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<sup>7</sup> Md. Dept. of Juvenile Services Policy and Procedure RF-01-07.

<sup>8</sup> Md. Dept. of Juvenile Services Policy and Procedure RF-01-07.

clinicians, education personnel, and DJS staff at Noyes should be prioritized to help ensure effective intervention and support for students requiring mental health services during the school day.

### **Group Dynamics**

In Incident 142118, three youth were housed in a cell on a unit during an overnight shift. Staff heard screams for help from the cell and found two youth assaulting another youth in the cell. The assaulted youth was removed from the facility for safety reasons. In Incident 142246, two youth on a different unit orchestrated an assault on another youth. The victim of the attack was sent off grounds to the hospital due to a head injury. Underlying tension between neighborhood and racial groups was suspected to have been a contributory factor to the aggressive behavior in both instances.

The Department, together with Montgomery County agencies, should ensure that intensive violence prevention and conflict resolution services are provided to help address discord between different groups of youth housed at Noyes.

### **Medical Services, Dietary Services, and Recreation**

Several youth reported lack of access to sick call forms during the quarter (Grievance 13314, 13358). Other youth reported that they were not seen by the facility medical unit until several days after placing a sick call request (Grievance 13386, 13356, 13354, 13387, and 13315). Sick call forms should be readily available at all times and on all units and any scheduling issues with medical staff should be resolved so that youth have prompt access to medical care.

Noyes uses an outside vendor to provide meals to youth. Several youth reported that they were consistently provided meals that did not adhere to their individual dietary restrictions. One youth with advanced stage kidney disease received cheese with meals despite being placed on a cheese-free diet due to his condition (Grievance 13290). Another youth, who is a vegetarian, was given meat for several meals (Grievance 13288), and youth who were on a dairy-free diet were given milk products (Grievance 13357 and 13285). Communication between the facility dietician and the food vendor should be improved and systemized to ensure youth with specialized dietary plans receive appropriate meals.

Because of space and physical plant limitations at Noyes, the gym area is also used as a cafeteria, a visitation room, and even a barbering and beautician area (when hygiene services are provided to youth). Youth only receive half an hour of recreation time (in place of the mandated full hour of large muscle exercise) during visitation days or when the barber or beautician is on site. In addition to restricted recreation during these times, several youth reported not receiving a full hour of recreation on multiple other days during the quarter (Grievance 13386). A consistent recreation schedule allowing for an hour of large muscle activity to take place outside of the residential unit and on a daily basis should be established for all youth at Noyes. Outdoor space at Noyes should be utilized to accommodate recreation needs.

## **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the school at Noyes. There are ongoing vacancies for a science teacher and a computer teacher. A position for an English Language Learner (ELL) teacher has been allocated because there is usually a significant number of Latino/Hispanic youth at Noyes who are not fluent in English – however, the position remains unfilled at time of writing (April 29, 2017).

During the first quarter, two adult housing youth had earned a high school diploma prior to arrival at Noyes but they were not afforded post-secondary educational or vocational options. MSDE JSES needs to ensure youth access to online college courses and DJS needs to ensure that the World of Work program offered at other DJS sites is available to high school graduates at Noyes.

For more about educational services provided by MSDE JSES in DJS facilities, see the section beginning on page 49.

**Lower Eastern Shore Children’s Center**

The Lower Eastern Shore Children’s Center (LESCC) is a hardware secure detention center located in Salisbury. LESCC is owned and operated by the Maryland Department of Juvenile Services (DJS/the Department) and has a DJS-rated housing capacity of 18 boys and six girls. African American youth represented 68% of entries during the first quarter of 2017, compared to 74% in 2016.

<b>LESCC – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>17</b>	<b>15</b>	<b>17</b>
1. Youth on Youth Assault/Fight	6	11	11
2. Alleged Youth on Staff Assault	0	0	1
3. Physical Restraint	16	23	28
4. Use of Handcuffs and/or Shackles	0	0	0
5. Seclusion	0	1	0
6. Contraband	1	2	0
7. Suicide Ideation	8	4	3
8. Suicide Attempt	0	0	1
9. Self-Injurious Behavior	5	2	0

Average daily population increased by two (from 15 to 17) during the first quarter of 2017 compared to the first quarter of 2016 while the number of youth fights and assaults remained the same. Physical restraints increased by five (from 23 to 28). Mechanical restraints and seclusion were not used within the facility during the first quarter of 2017.

There was one suicide attempt during the quarter at LESCC. In incident 142238, a youth was meeting with a mental health staff. The direct-care worker who was supervising the youth noticed that the youth “began to get very uncomfortable...his legs were shaking and he could not keep still....[The youth] walked outside the room and [he] walked back and forth and up and



down the intake hallway with his hands on his head trying to calm himself down.” The youth then continued his meeting with the mental health therapist, who told the direct-care staff that the youth was on suicide watch. After the meeting with the therapist, the youth returned to his cell where he sat down and tied his sweatshirt around his neck. The direct-care staffer immediately responded and called for assistance. Additional staff arrived and helped the staffer remove the sweatshirt from the youth’s neck. The youth was transported to a local hospital for a mental health evaluation. Secure detention is an inappropriate environment for youth with severe mental health challenges.

Several initiatives were introduced during the first quarter to enhance facility programming. The newly hired recreational specialist implemented a variety of structured activities during after-school hours and on weekends, and education staff are planning a gardening project to supplement formal instruction. A trauma-informed treatment provider is available to work with the female population. Each youth is paired with a staff mentor during their stay. Youth representatives also meet with administrators monthly to provide feedback on further improving the facility environment.

The number of staff positions should be increased at LESCC to support facility operations and ensure youth are able to receive appropriate levels of educational and mental health services.

Additional staffers are needed to:

- cover a post at the front entry to the facility (which is currently being covered by facility administrators);
- be available for one-on-one supervision of youth on suicide watch;
- escort youth to mental health, medical, and other appointments within the facility; and,
- provide supervision for youth requiring special education instruction outside the general classroom environment.

For information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

## 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 56% of total entries in the first quarter of 2017 compared to 68% in the first quarter of 2016.

<b>WMCC – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>13</b>	<b>20</b>	<b>22</b>
1. Youth on Youth Assault/Fight	2	18	12
2. Alleged Youth on Staff Assault	0	0	1
3. Physical Restraint	20	34	28
4. Use of Handcuffs and/or Shackles	7	4	5
5. Seclusion	1	2	1
6. Contraband	2	0	2
7. Suicide Ideation	1	1	1
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	5	1	0

The average daily population increased by two (from 20 to 22) during the first quarter of 2017. Fights and assaults decreased by 33% and use of physical restraints decreased by 18% during the same time period.

### Incident Reviews

Supervisory staff at WMCC are trained to perform comprehensive and timely audits of incidents to help promote staff accountability and ensure a safe environment for youth and staff at the facility. In Incident 141568, a staffer placed a chokehold on a youth to disengage him from another youth during an altercation. The staffer continued to apply the chokehold after removing

the youth off of the other youth. Staff assistance arrived and the staffer was instructed to remove himself from the restraint. The youth, who was gasping for air, was placed in a chair to allow him to catch his breath. In Incident 14306, a youth reached behind a staffer to grab some condiments from the cafeteria serving line. The staffer reacted by restraining the youth and taking him to the ground. Following the restraint, the staffer shoved the youth against a wall while escorting the kid to his cell. Although the youth involved did not report abuse to medical or any other staff in either incident, the incidents were flagged during incident review.

In line with facility practice, the shift commander on duty carefully reviews video of incidents immediately after they occur to assess staff performance, identify violations of policy and procedure, and identify potential abuse. After the incidents described above were reviewed, the staffers involved were removed from coverage (placed out-of-contact with youth) based on the review, and Child Protective Services and the Department's internal investigation unit were both notified.

### **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) is responsible for educational and vocational instruction at WMCC.

During the first quarter, a youth housed at the facility was a few credits shy of graduation from his local high school. The facility case manager worked on arranging with the local school to have the boy's academic work brought to the facility so that he could continue his educational progress and stay on target to graduate with his community school classmates.

Education staff should initiate an individualized learning plan for each youth and collaborate with case management and mental health staff to assist all youth in meeting identified educational goals.

For more information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

# COMMITTED PLACEMENT CENTERS

## Victor Cullen Center

The Victor Cullen Center (Cullen), in Frederick County, is a maximum security committed placement center owned and operated by the Maryland Department of Juvenile Services (DJS/the Department). The DJS-rated housing capacity is 48 boys. African American youth comprised 74% of total entries during the first quarter of 2017, compared to 82% during the first quarter of 2016.

<b>Victor Cullen – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>35</b>	<b>32</b>	<b>28</b>
1. Youth on Youth Assault/Fight	16	21	10
2. Alleged Youth on Staff Assault	4	7	3
3. Physical Restraint	63	51	37
4. Use of Handcuffs and/or Shackles	53	47	29
5. Seclusion	40	29	9
6. Contraband	3	7	2
7. Suicide Ideation	20	3	3
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	0	1	1

Average daily population (ADP) during first quarter of 2016 decreased 13% compared to the first quarter of 2016. During the same time period, youth on youth fights and assaults decreased by more than half, use of mechanical restraints decreased by more than a third, and the use of seclusion decreased by more than two-thirds. The Victor Cullen facility represents the deepest end of the juvenile justice system in Maryland and the youth population at the facility face a plethora of mental health-based and other challenges that require substantial ongoing support and availability of treatment and staffing resources if difficulties are to be addressed in an efficacious way. Given the complexity of challenges youth at Cullen face and the treatment

mandate inherent in the mission of the juvenile justice system, it is essential that the population of youth at Cullen be kept to an absolute minimum.

The significant downward trend in incident numbers has been achieved in the context of a population reduction and as the Department has begun moving to support staff in efforts to constructively and effectively manage interpersonal conflict among youth. Weekly conflict resolution and mediation sessions have been incorporated into facility programming. In addition, experts in facilitating community dialogue have been brought in to work with mental health staff on a rotating basis to help youth lead productive group meetings on the living units. The continuing availability of consistent supportive programming by trained professionals is critical in efforts to help youth master positive coping and life skills as well as in helping staff work constructively with youth. These efforts should continue to be increased and deepened.

### **Staffing**

The facility was under the direction of an acting superintendent during the first quarter of 2017 and interviews for a permanent facility head are ongoing at time of writing (May 1, 2017). Vacancies for direct-care staff have been filled as a result of hiring efforts, however most direct care staff currently have two years or less of experience. At the same time, experienced supervisors are not available to mentor and teach new staff due to illness and absenteeism at the middle management level. The population at Cullen must be kept as low as possible to provide an opportunity for new leadership to implement measures to work on staffing issues and promote overall staff development.

### **Treatment Culture**

The Department has contracted with an outside vendor to educate staff about the principles of trauma informed care. Nevertheless, intensive skills training for staff on utilizing evidenced-based and trauma-informed treatment interventions is still lacking. Instead, staff interventions are often guided by a control and compliance oriented approach that can escalate problems (as the incident described in the following paragraphs illustrates) rather than aid kids in identifying, processing and coping with difficult emotions. A clinician at Carter (another DJS-operated committed placement center) is receiving training in trauma-focused cognitive behavioral therapy (CBT-TF) and the Department should ensure that mental health staff at Victor Cullen (and at the four youth centers) also receive the training.

DJS policy<sup>9</sup> forbids the use of physical restraints for compliance however, in Incident 141865, a youth who refused to be locked in his cell for the night was restrained. As the youth sat in a chair in a corner, three staffers approached the youth and ordered him to go to his cell. The youth refused. The staffers reached for the youth's arms to lift him up out of the chair and

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<sup>9</sup> Md. Dept. of Juvenile Services Policy and Procedure RF-02-07.

the youth resisted. The youth was then picked up out of the chair and put on the ground in order to be handcuffed and delivered to his cell.

During the effort, the youth became extremely agitated and bit and kicked a staffer as staff attempted to lift him up and take him to his cell. The staffer responded to the youth's aggression by trying to punch the youth twice.<sup>10</sup> Another staffer and two youth intervened and attempted to prevent the staffer from having contact with the youth. Around the same time, a staffer who had the youth in a restraint intensified the force of his restraint by bending the youth forward forcefully, causing the youth to fall to the ground. Once on the ground, the staffer continued to use prohibited physical restraint techniques as he had his hand on the youth's neck and his knee in the youth's back to control the youth's movement.

According to a subsequent DJS Office of the Inspector General (OIG) investigation into the incident, the youth was upset about not being able to get in contact with his mom when he tried to call her and did not want to go back into his cell. The development of a therapeutic culture at Victor Cullen should be a top priority for the Department, facility administrators and facility staff.

### **Intensive Services Unit (ISU)**

The Intensive Services Unit (ISU) at Victor Cullen is a separate unit on facility grounds where kids involved in aggressive incidents are sometimes placed. Youth eat meals and attend school on the unit and are only allowed off of the unit to go to the gym for recreation.

The ISU is perceived by many youth as a punishment since they are not allowed to participate in some potentially valuable programming and are also not allowed to earn points and rewards in accordance with the behavior management system. Kids on the ISU should be allowed to participate in structured and therapeutic programming within the facility and also receive increased services tailored to their particular needs.

Youth are supposed to receive additional or more intensive supports and services while on ISU, yet staff are not properly trained to implement therapeutic responses to address individual needs of youth.

In Incident 142264, a youth was upset about not being allowed to leave the ISU. He began loudly banging on the table in the ISU dayroom. The youth was ordered to be quiet, and when he did not comply, he was ordered to go to his cell. According to an OIG investigation, the youth refused to leave the dayroom, a staffer put his hand on the youth and the youth pushed it away. The youth was physically restrained and became agitated. At this point another staffer

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<sup>10</sup> When interviewed by the OIG investigator about the incident above (141865), the staffer who had to be removed from the scene of the incident indicated that he had been allowed to review video footage of the incident before he was interviewed by an investigator. In order to help ensure the integrity of investigations, the Department and administrators at Victor Cullen should ensure that staff involved in incidents that are under investigation are not permitted to review video footage related to the incident until all internal and external investigations concerning the incident are completed.

went to get shackles to put on the youth because “that is what he was directed to do if there was a restraint on ISU.” Once the youth was placed in his cell, the staffer who initiated the restraint told the other staffers to leave the cell and began having an argument with the youth.

All staff, and in particular staff assigned to the ISU, must be trained to and expected to respond to problematic youth behavior therapeutically.

### **Structured and Therapeutic Programming**

The acting superintendent has encouraged the implementation of a greater variety of programming (including arts and crafts activities and increased recreation time on weekends) in an attempt to reduce downtime. Some youth periodically engage in other activities such as a mentorship group, a drumming circle, parenting classes, and canine therapy sessions. Structured programming should continue to be expanded and a longstanding opening for a recreation specialist should be filled without delay.

Outdoor space at Victor Cullen should be utilized on a consistent basis for extracurricular and recreational programming. Some youth are allowed to participate periodically in a ropes course located at one of the DJS youth camps in western Maryland. Similar apparatus should be made available at Cullen for all youth to use during weekday recreation periods and on weekends.

Youth report that listening to music is often taught as a coping mechanism during anger management therapy sessions, yet youth requests for individual music players to listen to music have been denied. Access to a variety of positive coping mechanisms, including music players, should be made available.

### **Family Engagement**

During the quarter, a youth who has two children said he was not able to keep in touch with his family because the family could not get transportation assistance from their home to the facility or even to a closer DJS location with video conferencing technology. Transportation services for youth families should be expanded to include assistance from a youth’s home to the facility or, at a minimum, to nearby DJS locations with video conferencing capabilities so that families can maintain some level of involvement in youths’ lives and participation in the treatment process.

Limited access to phone contact with families is also a major impediment to family engagement. Youth in long-term committed placement are allowed two 10-minute calls per week, the same allotment as in short-term detention centers. Youth phone calls with family members should be increased in amount and duration to allow for meaningful and sustained contact with loved ones.



During the quarter, the Department clarified the home pass policy and confirmed that eligible youth are permitted to participate in a minimum of two home passes during the last two phases of the behavior management system. Victor Cullen should continue to incorporate a gradually increasing number of home passes over the course of a youth's stay as part of planning for a successful transition back to home communities.

### **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the school at Victor Cullen.

Outstanding vacancies at the school include a school principal as well English and resource teachers. In addition, a position for a full-time Career Technology Education (CTE) teacher remains vacant. As a result, there is no consistent hands-on vocational instruction offered to students even though youth consistently express that they are interested in learning trades leading to employment or further training after release.

During the first quarter of 2017, there were several youth who had earned a high school diploma and the DJS organized World of Work program offers an opportunity for some of those youth to perform odd jobs throughout the campus for pay when staff are available to supervise.

Some high school graduates at Cullen began taking online community college classes through a partnership MSDE JSES established with Frederick County Community College. However, youth who earn a high school diploma or arrive at Cullen with a diploma after the start of the community college's semester are unable to enroll in courses and are therefore left without meaningful opportunities for education programming. The MSDE JSES partnership with Frederick County Community College should be refined to ensure that all youth at Cullen who have a high school diploma have access to community college courses.

MSDE JSES and DJS should collaborate to supplement these options by organizing opportunities to participate in employment, internships, and post-secondary classes in the community.

For more information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

## Youth Centers x4

The youth centers in western Maryland consist of four separate staff secure (not fenced and locked) facilities for boys and are owned and operated by the Maryland Department of Juvenile Services (DJS/the Department). The facilities are: Green Ridge (40-bed capacity); Savage Mountain (24 beds); Meadow Mountain (40 beds); and Backbone Mountain (48 beds). African American youth represented 67% of total youth entries to the youth centers during the first quarter of 2017, compared to 76% last year. Hispanic/Latino youth represented 10% of total youth entries during the first quarter of 2017, compared to 7% during the same period last year.

<b>Combined Youth Centers (x4) – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>89</b>	<b>112</b>	<b>113</b>
1. Youth on Youth Assault/Fight	21	49	27
2. Alleged Youth on Staff Assault	3	10	3
3. Physical Restraint	55	94	122
4. Use of Handcuffs and/or Shackles	24	24	41
5. Seclusion	0	0	0
6. Contraband	5	6	6
7. Suicide Ideation	0	12	11
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	0	2	0

Average daily population at the youth centers during the first quarter of 2017 increased very slightly compared to the same period last year. Over the same time, fights and assaults decreased by 45% while staff use of physical restraints and mechanical restraints increased by 30% and 71%, respectively.

## **Direct-Care Staffing**

Many kids placed at the youth centers say that they rely heavily on constructive relationships with direct-care staff for support. Some youth point to these relationships as being the primary source of support while they are in committed placement. However, staffing ratios at the youth centers do not ensure a sufficient number of staff to supervise groups of youth and also provide one-on-one support to individual kids as needed. As a result, some youth may act out in order to get attention from staff. For instance, in an incident during the quarter (141913) a youth was upset about not getting his points and yelled out, "I want to kill myself. Now I'll get more attention like everyone else."

The Department should undertake an assessment of staffing levels at detention and committed placement centers across the state to determine the appropriate number of positions necessary to ensure comprehensive staff supervision of youth and sufficient staff availability for verbal processing and relationship building. The need for enhanced staffing levels is especially critical at Savage Mountain youth center where many youth are placed after ejection from one of the other youth centers and these youth are likely to be in need of increased staff support.

In addition to increasing the level of staffing at the youth centers and given the role that direct-care workers play at the youth centers beyond basic supervision, the Department should enhance staff training. Because many youth rely on relationships with staffers for support, all direct-care workers should receive enhanced training in relational and treatment skills beyond the behavior focused interventions mandated by the DJS Challenge system. The Department's plans to provide staff with a training about the principles of trauma-informed care should go forward and be expanded to include actual trauma-informed skills training.

## **Mental Health Staffing**

There is also a need to increase the level of mental health staffing at the youth centers given DJS data which shows that 81.8% of boys in out of home placement in fiscal year 2016 had a moderate-to-high mental health need.<sup>11</sup> Mental health staff are not available in evenings and on weekends at the youth centers and there is not a mental health therapist for each group at each site. Each youth center should be staffed with one clinician for each group of youth and enough available mental health staff to ensure that there is a clinician available on site every day during youth waking hours, including evenings and weekends. An addictions counselor position at Backbone Mountain youth center that has remained vacant since August of 2016 should be filled as soon as possible. A clinician at Carter (another DJS-operated committed placement center) is receiving training in trauma-focused cognitive behavioral therapy (CBT-TF) and the Department should ensure that mental health staff at the youth centers (and Victor Cullen) also receive the training.

The youth centers are remotely located and as a result there are significant challenges in finding and maintaining connections with local mental health providers. The Department therefore relies on videoconferencing technology in place of in-person appointments with

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<sup>11</sup> DJS 2017 Update to *Report on Female Offenders* (February, 2012).

psychiatrists for initial evaluations and for prescribing medication, including psychotropic drugs, to kids at the youth centers.

### **Structured Programming**

Administrators at Green Ridge youth center have developed several initiatives to help reduce downtime and keep kids engaged in constructive activities, including a variety of community service programs. These efforts should continue at Green Ridge and serve as a model for the other youth centers where kids say they spend a substantial amount of time unengaged in any structured programming.

### **Family Engagement**

Family involvement can help support positive youth outcomes and experts suggest promoting family engagement by “eliminating or decreasing limitations for family mail, telephone correspondence, and visitation.”<sup>12</sup>

Kids at the youth centers consistently report the need for increased contact with their families. Youth are allowed to make two 10-minute phone calls a week—the same allotment for youth in short-term detention centers. While there are two times allocated per week for visitation hours, the remote location of the youth centers in far western Maryland makes it very difficult for families to access since most of the youth placed there come from different parts of the state.

The Department should enhance opportunities for family engagement by increasing the number and duration of youth phone calls and visitation hours. Transportation services for youth families should be expanded to include assistance from a youth’s home to the facility or, at a minimum, to nearby DJS locations with video conferencing capabilities so that families can maintain some level of involvement in youths’ lives and participation in the treatment process.

### **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the schools at each of the four youth centers. Chronic challenges related to a shortage of available teaching staff led to gaps in the delivery of education services at the youth centers during the quarter. At Backbone Mountain, there were vacancies for a science teacher, a career technology education teacher, a resource teacher, and an administrative assistant during the quarter. At Savage Mountain, the English teacher was on an extended absence and no substitute was provided. The principal for the schools at the youth centers also resigned during the quarter.

Plans to include the youth centers in MSDE JSES’ partnership between Frederick County Community College and Victor Cullen should go forward as currently only students placed at Backbone Mountain youth center have access to post-secondary education. This partnership

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<sup>12</sup> Shanahan, R., and diZerega, M. “Identifying and Empowering Families: A Charge for Juvenile Justice Agencies.” Vera Institute for Justice. February, 2016. pp. 4-6. Available at: <http://archive.vera.org/sites/default/files/resources/downloads/family-engagement-for-juvenile-justice-agencies.pdf>

should also be refined to ensure that even students who arrive at the youth centers or earn a high school diploma at the youth centers after the start of the community college semester have access to community college courses. Otherwise, kids at the youth centers who have earned a high school diploma will continue to be left without meaningful opportunities for education programming. Connections with other local colleges, such as Frostburg State University and Allegany College, should also be explored.

Vocational education at the youth centers is limited due to limited resources, including staffing shortages resulting from vacancies and an insufficient number of teacher positions. During the quarter, plans to help youth access and navigate the Maryland Workforce Exchange at Backbone Mountain were impeded by a lack of access to computers. Additionally, MSDE JSES relies on a single instructional assistant to provide instruction in certain career technology education (CTE) courses at DJS facilities across the state in addition to being assigned as the vocational education teacher at Savage Mountain. Each MSDE JSES school should have a dedicated CTE teacher to help ensure that students have consistent access to vocational education courses. MSDE JSES should also enhance the CTE curriculum to include hands-on courses in trades that can lead to employment. Partnerships with community-based organizations should also be developed to help enhance vocational education opportunities for kids placed at the youth centers.

For more information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

## Silver Oak Academy

Silver Oak Academy (SOA), located in Carroll County, is a privately-operated staff secure (not locked and fenced) committed placement center. SOA is licensed by the Maryland Department of Juvenile Services (DJS/the Department) to house up to 96 boys. African American youth represented 89% of total youth entries during the first quarter of 2017, compared to 83% during the same time period last year.

<b>SOA – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>58</b>	<b>46</b>	<b>58</b>
1. Youth on Youth Assault/Fight	9	1	11
2. Alleged Youth on Staff Assault	1	0	0
3. Physical Restraint	17	2	8
4. Use of Handcuffs and/or Shackles	0	0	0
5. Seclusion	0	0	0
6. Contraband	4	9	7
7. Suicide Ideation	0	0	0
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	0	0	0

Average daily population at SOA during the first quarter of 2017 increased by 26% compared to the same period last year. Over the same time, fights and assaults increased from one to eleven and physical restraints increased from two to eight.

With the increase in population, SOA administrators should move forward with plans to enhance staff training and focus on consistent implementation of the treatment model which supports constructive intervention into group dynamics and helps address behaviors that can lead to incidents of aggression.

Closer attention to staff posting and ratios should be an intrinsic component of these plans as comprehensive supervision is key to maintaining a safe and secure environment. During the quarter, individual direct-care staff were observed supervising groups of ten or more youth. Given the configuration of certain areas of the facility - such as the construction classroom in the workforce development building - additional staff postings will be necessary to ensure that teachers have support in supervising youth. Plans to bolster supervisory staff roles on each living unit should also go forward to ensure establishment of comprehensive staff supervision of youth and to promote consistent implementation of the program model.

Security cameras help establish a safe environment by promoting staff and youth accountability. There have been incidents of aggression in a stairwell on the living unit where there are no cameras, including an instance during the quarter (142434). The gymnasium also lacks security camera coverage. These areas and other blind spots should be camera covered.

Silver Oak provides youth with comprehensive rehabilitative services in a normalized, school-like environment. Youth participate in interscholastic sports, a variety of hands-on vocational education courses, and employment on site. Community based employment, internships, post-secondary education, and other extra-curricular programs are also available to youth.

During the first quarter, there was a vacancy for a barbering instructor that was covered by a substitute teacher. The vacancy should be permanently filled as soon as possible. The Certified Nursing Assistant (CNA) course has been offline while Silver Oak finalizes a partnership with Baltimore City Community College to enhance the program so that students can earn college credit on site at SOA and participate in Science Technology Engineering and Math (STEM) classes.

Staff, including all direct-care workers, receive training in a treatment model based on cognitive behavioral therapy that promotes individualization as well as consideration of group dynamics in interactions with youth. Youth receive treatment services on site and in the community. Families are mandated to participate in family therapy once a month.

Families of youth at Silver Oak are invited to attend on campus events, including sports games, when they are held. However, SOA visitation hours are limited to just once a month (in addition to the mandated monthly family therapy session). Research shows the positive impact of frequent family contact on behavior and school performance among youth in the juvenile justice system.<sup>13</sup> Visitation hours should be expanded in order to facilitate family engagement and promote positive youth outcomes.

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<sup>13</sup> Agudelo, S. "The Impact of Family Visitation on Incarcerated Youth's Behavior and School Performance: Findings from the Families as Partners Project." Vera Institute for Justice. April 2013.  
<http://archive.vera.org/sites/default/files/resources/downloads/family-visitation-and-youth-behavior-brief.pdf>

## J. DeWeese Carter Center

The J. DeWeese Carter Center (Carter), located on the eastern shore, is a maximum security committed placement center for girls. Carter is owned and operated by the Maryland Department of Juvenile Services (DJS/the Department) and has a DJS-rated housing capacity of 14 girls. African American youth represented 73% of total youth entries to Carter during the first quarter of 2017, compared to 66% during the same period in 2016.

<b>Carter – Selected Incident Categories</b>	<b>Q1 2015</b>	<b>Q1 2016</b>	<b>Q1 2017</b>
<b>Average Daily Population (ADP)</b>	<b>9</b>	<b>7</b>	<b>10</b>
1. Youth on Youth Assault/Fight	0	3	5
2. Alleged Youth on Staff Assault	1	2	1
3. Physical Restraint	7	18	9
4. Use of Handcuffs and/or Shackles	0	0	0
5. Seclusion	3	8	8
6. Contraband	0	0	0
7. Suicide Ideation	1	0	1
8. Suicide Attempt	0	0	0
9. Self-Injurious Behavior	3	2	0

Average daily population (ADP) at Carter during the first quarter of 2017 increased by 3 youth (43%) compared to the same period last year. Fights and assaults increased by 2 instances (66%), while physical restraints were halved and the number of incidents involving seclusion did not change.



## **Trauma-Informed Care**

A significant number of girls in the juvenile justice system have experienced trauma.<sup>14</sup> According to DJS data, 40% of girls in out-of-home-placement in fiscal year 2016 had a history of either physical or sexual abuse, compared to 13.5% of boys.<sup>15</sup> The facility superintendent has worked towards establishing a safe and calm atmosphere at Carter which is a critical step in adopting a trauma-informed approach. Staff have received an introductory training about trauma-informed care and managerial staff participate in monthly meetings about implementing a trauma-informed approach. The psychologist assigned to Carter has received training in Trauma Focused Cognitive Behavioral Therapy (TF-CBT). These efforts to establish a trauma-informed program should continue and plans to implement trauma treatment modules should go forward without delay.

Mechanical restraints were not used in any incident during the quarter and have not been used more than once per year in for the past three years inside the Carter facility. However, the Department's policy requires that all girls at Carter who are transported by the DJS transportation unit be mechanically restrained in shackles and handcuffs fastened to belly chains by a black metal box. This policy is applied indiscriminately to all girls at Carter. The Department should adopt a policy that allows for individualized determinations concerning the use of mechanical restraints during transportation.

According to the National Child Traumatic Stress Network, family engagement is a key component of delivering trauma-informed care<sup>16</sup> and DJS data shows that 89.3% of girls in out-of-home placements during fiscal year 2016 had a moderate to high family-related need.<sup>17</sup> However, the Department's policy limits youth (in both detention and committed placement centers) to two 10-minute phone calls per week. While there are also weekly visitation hours, Carter's remote location on the eastern shore makes it difficult for many families to make in-person visits. The Department should increase transportation assistance and also allow youth whose families are unable to attend weekly visitation hours to make additional phone calls and actively encourage the use of video-conferencing technology, whenever possible, to facilitate increased family contact.

During the quarter, the Department clarified that youth are permitted to participate in a minimum of two weekend home passes during their placement. Administrators at Carter should work with families to help coordinate numerous home passes to help prepare youth for a smooth transition from placement to the community.

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<sup>14</sup> Sherman, Francine & Balck, Annie. *Gender Injustice: System-Level Juvenile Justice Reforms for Girls*. Portland, OR: The National Crittenton Foundation, 2015. Available at:

<http://lawdigitalcommons.bc.edu/cgi/viewcontent.cgi?article=1987&context=lsfp>

See also Saar, M., Epstein, R., Rosenthal, L., and Vafa, Y. "Sexual Abuse to Prison Pipeline: The Girls' Story." February 2015. [http://rights4girls.org/wp-content/uploads/r4g/2015/02/2015\\_COP\\_sexual-abuse\\_layout\\_web-1.pdf](http://rights4girls.org/wp-content/uploads/r4g/2015/02/2015_COP_sexual-abuse_layout_web-1.pdf)

<sup>15</sup> DJS 2017 Update to *Report on Female Offenders* (February, 2012).

<sup>16</sup> Liane Rozzell. "The Role of Family Engagement in Creating Trauma-Informed Juvenile Justice Systems." The National Child Traumatic Stress Network. (September 2013). Available at:

[http://www.nctsn.org/sites/default/files/assets/pdfs/jj\\_trauma\\_brief\\_familyengagement\\_rozzelll\\_final.pdf](http://www.nctsn.org/sites/default/files/assets/pdfs/jj_trauma_brief_familyengagement_rozzelll_final.pdf)

<sup>17</sup> DJS 2017 Update to *Report on Female Offenders* (February, 2012).

## **Structured Programming**

Mental health, medical, case management, and direct-care staff facilitate groups during weekday evenings at Carter. Youth do not always have a full schedule of structured activities on weekends. Administrators at Carter should ensure that youth are engaged in constructive programming on the weekends, including off grounds activities connected to community service, employment, apprenticeships, internships and educational and recreational outings. On site programming should be available for youth who are not eligible to leave for off-grounds activities. Plans to foster connections with community based organizations that can help provide youth with recreational and therapeutic programming should go forward.

## **Education Services**

The Maryland State Department of Education, Juvenile Services Education System (MSDE JSES) operates the school at Carter but is not appropriately resourced. The principal position at Carter is shared with another facility located more than two hours away and the special education teacher at Carter doubles as the vocational education instructor. Additionally, Carter relies on another MSDE JSES employee who travels around the state to deliver instruction in a particular career technology education course on a rotating schedule, however the employee is subject to being assigned to remain at times at a particular facility because of ongoing teacher vacancies and is not available to teach the course to youth at Carter or other facilities during these periods. Each MSDE JSES site should be staffed to include both a dedicated, full-time principal and a dedicated, full-time vocational education teacher in addition to ensuring that special education mandates are fulfilled.

MSDE JSES has entered into an agreement with Frederick County Community College to provide youth in DJS facilities with access to online community college courses. Unfortunately, youth are only able to participate if they are already placed in a facility at the time that a college semester begins. As a result, some youth who have earned a high school diploma continue to not have access to post-secondary or vocational education. MSDE JSES and DJS should work together to connect girls at Carter to opportunities for education or employment based programming in the community.

For more information on education services in DJS facilities, see the MSDE JSES section beginning on page 49.

# **SMALLER FACILITY UPDATES**

## **SMALLER FACILITY UPDATES**

Incidents involving aggression at smaller facilities licensed by DJS remained low during the first quarter of 2017.

### **Liberty House Shelter – NOTICE OF CLOSURE**

Liberty House closed during the first quarter of 2017. It was a shelter care facility in Baltimore City operated by Youth Enterprise Services, Inc., and licensed by the Maryland Department of Juvenile Services (DJS/the Department). Liberty House was a safe, less restrictive alternative to secure detention and housed up to 10 boys between the ages of 13 to 18 years old in a home-like environment. Staff-to-youth ratios were low and allowed youth to receive personal attention while residing at the facility. There were no incidents of aggression reported during the period that the facility was open in the first quarter of 2017. Youth attended local schools and were able to participate in recreational and enrichment activities in the community.

### **Morning Star Youth Academy**

Morning Star Youth Academy is a staff secure (not locked or fenced) committed placement center on the eastern shore and is operated by Vision Quest, Inc. Morning Star is licensed by DJS to house up to 24 boys.

All direct-care staff are trained to implement a trauma informed treatment model. Group and individual therapy is provided by facility staff and outside contractors. An equine program supplements therapeutic programming.

In addition to therapeutic services, youth attend school and engage in a variety of recreational activities, including basketball, running, and biking, both on-site and in the community. Food portions should be increased to accommodate the high activity level of youth. Kids say that they are hungry during the day, and dietary staff often throw away food rather and provide kids with extra portions.

In addition, the cement gym floor at the facility becomes extremely slippery when wet and continues to pose a safety risk for youth due to the potential for injury during recreation. A rubberized floor should be installed without further delay.

Educational services have been enhanced through the addition of an on-site science lab and expansion of the library. In addition, a physical education teacher is being hired and a space for an art room has been allocated. Administrators should re-establish a student council to allow youth to offer feedback on facility operations, as was the practice in previous years.

### **One Love Group Home**

One Love Group Home (One Love) is an 8-bed group home in Baltimore City operated by Building Communities Today for Tomorrow, Inc. The home is licensed by and receives referrals from DJS. The program accepts adjudicated male youth between the ages of 17 and 20 years old and is geared toward preparing youth for independent living.

One Love provides youth with personalized care in a home-like environment. Youth either attend school or work in the community. Off-site recreational and extracurricular activities are offered on a consistent basis. Therapeutic services, substance abuse counseling, and life skills classes are offered on a weekly basis both on- and off-site. Individualized aftercare planning is provided by the site director before discharge from the home to help youth successfully transition back to their home communities.

# **MARYLAND STATE DEPARTMENT OF EDUCATION IN DJS FACILITIES**

## MARYLAND STATE DEPARTMENT OF EDUCATION IN DJS FACILITIES

The Maryland State Department of Education, through the Juvenile Services Education System (MSDE JSES), operates the schools in each of the 13 DJS detention and committed placement centers.

MSDE JSES is in the process of implementing a strategic plan with support from a team of experts on juvenile justice education systems. As the implementation process continues, MSDE JSES should closely collaborate with the experts to supplement the goals of the strategic plan so as to include additional areas identified as in need of improvement.<sup>18</sup> Identifying and addressing gaps in the MSDE JSES system is crucial to youth in JSES schools given evidence that addressing the education needs of youth in the juvenile justice system can help reduce recidivism.<sup>19</sup>

During the first quarter of 2017, an ongoing shortage of available teaching staff at JSES schools continued to contribute to problems related to the delivery of comprehensive classroom instruction to all youth on a daily basis. This issue stems in large part from inadequate staffing levels at certain facilities as well as high rates of turnover and a lack of substitute teachers to fill short- or long-term absences. As a result, youth in some facilities do not always receive the required six hours of classroom instruction a day and other programming, including special education services, may not be available as needed or required by law.

In order to resolve the need for increased education personnel, MSDE JSES should:

- Ensure the availability of a pool of substitute teachers;
- Comprehensively address issues with hiring and retention by enhancing human resources practices, offering competitive salaries and benefits, and improving agency culture; and,
- Undertake an assessment of staffing levels at each facility to develop a staffing model that reflects the operational needs of each facility.

Additional education programming and resources must be secured to fill current gaps in educational instruction. For example, every facility where youth spend several months at a time should offer youth an array of hands-on courses leading to certification in a variety of trades and should be staffed with sufficient career technology education staff and resources to do so. This includes committed placement centers, where the courts send adjudicated youth post-disposition, as well as detention centers - such as BCJJC and CYDC - where a substantial proportion of the average daily population is comprised of youth facing adult charges who are likely to spend months detained. Where staffing and other resources within MSDE JSES are

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<sup>18</sup> The most recently available report on the status of the strategic plan implementation can be accessed at: <http://marylandpublicschools.org/programs/Documents/JSE/JSESStrategicPlanBenchmarkReport012017.pdf>

<sup>19</sup> Seigle, E., Walsh, N., and Weber, J. "Core Principles for Reducing Recidivism and Improving Other Outcomes for Youth in the Juvenile Justice System." Council of State Governments, 2014. p. 30. Available at: <https://csgjusticecenter.org/wp-content/uploads/2014/07/Core-Principles-for-Reducing-Recidivism-and-Improving-Other-Outcomes-for-Youth-in-the-Juvenile-Justice-System.pdf>

insufficient to meet the demand for longer-term education and job-training programming, MSDE JSES and DJS should partner with community-based organizations - including local colleges and community colleges - to connect youth to the services they need.

Increased staffing and resources are also needed to meet the needs of students who are placed on the Intensive Services Unit (ISU), receive education services outside the general classroom, or are restricted to the living unit for part (or all) of the school day due to security concerns.

Additional areas in need of improvement in MSDE JSES schools include:

- Electives: MSDE JSES already provides youth access to certain elective courses but adding courses such as art and physical education will bring JSES schools closer to replicating community public schools and provide students with an opportunity to meet state graduation requirements.
- English as a Second Language (ESOL) classes: At certain DJS facilities at any given time there are several students with limited English proficiency who are assigned an interpreter who translates lessons and teacher instruction. However, there are no ESOL or ELL (English Language Learners) classes for students who need help in gaining proficiency in the English language. Students need access to English language courses in order to help them earn credits and progress in school at a comparable rate to peers who do not face a language barrier.
- Service learning hours: As part of the requirements for a Maryland high school diploma, students must complete 75 service learning hours. Some MSDE JSES schools already offer students access to projects that allow students to earn some hours towards satisfying the graduation requirement. Every MSDE JSES school should have sufficient service learning projects available for students and education staff available to oversee and implement the program on a daily or as needed basis.
- Post-secondary programming: MSDE JSES has begun working to address the need for post-secondary education programming given the number of youth in DJS facilities who have earned a high school diploma or GED.
  - Access to college courses: MSDE JSES has established a connection with Frederick County Community College to provide students in certain DJS facilities with access to community college courses. MSDE JSES should work to make certain that all eligible youth have access to post-secondary education regardless of whether or not the date youth enter a facility coincides with the beginning of a college semester.



- College entrance examinations: Some principals at MSDE JSES sites have worked with students who have earned a high school diploma to prepare for college entrance exams such as the SAT or ACT through informal work in a practice test book. MSDE JSES should support these efforts by organizing and institutionalizing SAT and ACT preparation classes with an assigned teacher and pertinent materials. Designating MSDE JSES sites as SAT or ACT testing sites, if possible, should also be explored as a way to help support students.
- Interagency collaboration: At the facility level, MSDE JSES and DJS should initiate formal systems that encourage ongoing collaboration and feedback between administrators, teachers, and direct-care staff to establish clear classroom expectations so that all staff are implementing a unified approach in the delivery of education services. Such a mechanism could ensure that teachers and direct care staff support each other to provide a positive learning environment for youth. It would also help ensure that direct care workers are briefed on teacher availability, holidays and training periods.

For more information on education services in particular DJS facilities, see the individual facility sections of this report.

# **MARYLAND DEPARTMENT OF JUVENILE SERVICES - RESPONSE**



The Department of Juvenile Services has reviewed the JJMU's first quarter report for 2017 and provides the following response.

The department will continue to urge the JJMU to adopt nationally-recognized standards and audit tools to ensure objective and credible evaluations of department facilities. JJMU staff should also be certified to audit all state and federal regulatory requirements (Md Code Ann., State Government §6-404). By doing so, the department would be provided clear, factual, measurable, and objective recommendations. Using objective standards would assist the JJMU in reducing any biased or subjective recommendations.

#### **DEPARTMENT OF JUVENILE SERVICES (DJS) PRACTICES BENEFITTING YOUTH**

##### **Family Engagement**

The department recognizes the important role of family and the need to have families engaged in their loved one's treatment to achieve the best outcome for youth in the department's care. Under the direction of DJS's Director of Family Engagement, the department continues to review all of its policies to ensure that families are included in all key decision points during their child's involvement with the system. The department has made family engagement a high priority and believes that a customer-friendly approach to keeping families connected during treatment will result in positive outcomes for youth.

In February 2017, the department launched family engagement activity tool kits at all DJS committed and detention facilities. These activities are planned for at least one hour and are designed to provide positive interaction between the youth and their family members to strengthen family connections.

Phone calls for youth in residential placements are fully paid for by the department to keep families connected and avoid placing additional financial burdens on families. Case managers and therapists work to facilitate family counseling and contact with family members in person, by phone, and through video conferencing. For youth in the Youth Centers and Victor Cullen, visitation hours are flexible to accommodate the travel times to those facilities. All youth are afforded two phone calls each week and can earn additional phone calls as well as home visits.

##### **Trauma-Informed Care Training for DJS Committed Placement Staff**

All staff in DJS committed facilities have been trained in trauma informed care. The comprehensive, evidence-based training gives staff important tools to assist youth whose past trauma affects their daily life, including contributing to their contact with the juvenile justice system. The training was provided by

the National Association of State Mental Health Program Directors (NASMHPD). NASMHPD trainers are experts in trauma and have trained staff from juvenile justice-involved and behavioral health agencies across the country.

Beginning in June 2017, NASMHPD will train all case managers and behavioral health staff in committed facilities in a specific group intervention known as Trauma, Addictions, Mental Health and Recovery (TAMAR). TAMAR is a 15 week program that combines psychodynamic therapy with expressive art therapy and psychoeducational techniques. Behavioral health staff and case managers will facilitate weekly groups. Additionally, a group of case managers and behavioral health staff will be trained as trainers of TAMAR in the Fall. This will strengthen the TAMAR program within the department's facilities.

## **DETENTION FACILITY RESPONSES**

### **Cheltenham Youth Detention Center (CYDC)**

In November 2016, the new Cheltenham Youth Detention Center opened. As with any new facility, fine tuning and adjustments have to be made to operational systems. Likewise, staff need to acclimate to the new systems and operational norms. Administrators and the department's IT staff are aware of technical problems with the surveillance system's ability to call up individual cameras based on intercom requests for movement, and repairs with the vendor have been scheduled. In the interim additional staff have been assigned to assist with master control operations. The system permits the operator to respond to requests based on priority to enable responses to emergencies.

In addition to the operational challenges noted above, the facility has experienced turnover in two key leadership positions, the facility superintendent, and assistant superintendent; as well as turnover in managerial and direct care staff positions. At the time of the writing of this report, an experienced superintendent has been installed, and a candidate for the assistant superintendent position has been recruited. Executive team staff from headquarters has been and will continue to provide on-site support and management training to improve facility operations and staff accountability. Direct care staff will receive refresher supervision and crisis management training. Youth behavior interventions include increased conflict resolution and counseling services provided by behavioral health staff.

A thorough staffing analysis for posts in the new building was completed prior to occupation of the building, and modifications are made as needed. Based on this staffing analysis, rovers were assigned to each shift to respond to emergencies, which is the primary responsibility of the position. CYDC's youth to staff ratios exceed national standards.

Finally, corrective actions have been taken with staff involved in the incidents cited by the monitor. These actions have included staff discipline up to and including termination, additional training, re-assignment of duties, and enhanced departmental executive staff support.

### **Baltimore City Juvenile Justice Center (BCJJC)**

The increase in population at BCJJC is due to the increased length of stay for youth charged as adults. Case processing delays, which appear to be isolated to Baltimore City, are a significant factor. We are working with our partners in the Juvenile Detention Alternatives Initiative (JDAI) collaborative to identify

and address delays. It is well established that long lengths of stay in detention leads to frustration, anxiety, and acting out behaviors among youth. These delays are contributors to increases in incidents.

The management team and behavioral health staff at BCJJC have continued to work collaboratively to develop and implement strategies to address incidents of youth on youth and youth on staff aggression. An increase in acts of aggression during the first quarter was attributed to the intake of multiple youth who had conflicts in the community, and incidents of gang recruitment. When a juvenile detention facility is full due to increased lengths of stay, then administrators have less flexibility to separate known enemies.

In order to address increased incidents among the youth, BCJJC administrators took the following actions: limited the movement of youth in two units for seven days, increased supervisory posts, and expanded the utilization of conflict resolution services.

Additionally, the capacity of the Intensive Services Unit (ISU) programming was increased from one to two units. Youth who could not be successfully maintained in the general population were placed in the ISU for the provision of intensive services and support to address issues of self-management, self-control, and conflict resolution. Youth in ISU were reviewed weekly to determine their stability and readiness to return to the general population. The expanded and modified services placed additional demands on staffing, however, these interventions were critical to provide for youth and staff safety.

The recent challenges experienced by BCJJC are primarily due to the fact that the facility population is above critical levels. The department must retain surge capacity for an influx of juveniles and, under the law, may reject incoming adult-hold youth to maintain that capacity. According to FY 2016 data as reported in the DJS Data Resource Guide, adult-hold youth length of stay at BCJJC is 109 days. More recent data shows this length of stay has increased to nearly 180 days.

### **Charles H. Hickey, Jr. School**

The management team at Hickey has provided enhanced conflict resolution, anger management, and programming to address the behaviors and needs of youth. Hickey also utilizes the services of Community Conferencing as an intervention to assist in resolving group conflicts.

The staff at Hickey are commended for their work to provide innovative family engagement activities. These activities have significantly improved family member involvement and visitation with youth.

### **Thomas J. S. Waxter Children's Center**

The Department appreciates JMU's recognition of the interdisciplinary collaboration of staff at Waxter to develop and provide services to youth. Waxter has a full complement of behavioral health staff to include: one full-time psychologist, two full-time social workers, one full-time counselor and one part-time counselor. Behavioral Health staff collaborates with direct care staff and provides guidance and support. Behavioral Health staff are available on-call, after hours, and on weekends.

The department has trained all committed programs in trauma informed care and is moving forward with training plans for detention staff.

Waxter's allotted direct care staff meets national standards of one staff-to-eight youth during daytime hours and one staff-to-sixteen youth during night hours. Several staff who were out on long term medical leave have returned.

### **Alfred D. Noyes Children's Center**

The staff who failed to document use of seclusion was addressed administratively and retrained in departmental seclusion procedures. Neither the staff's account nor youth statements support the assertion that the staff cursed or challenged the youth during this interaction.

Noyes administration facilitates collaboration with direct care staff, behavioral health staff, and education staff through staff meetings. Noyes utilizes Community Conferencing counseling services to address neighborhood and racial tensions among groups of youth. Specialized violence prevention training for all staff has been scheduled.

Noyes is working with its food service vendor to ensure that all specially ordered meals are properly labeled.

Noyes has assigned supervisory staff to ensure that sick call slips are readily available to youth.

On visitation and barbering days during the winter months, the youth receive 30 minutes of recreation in the gym and 30 minutes on the unit. When the weather permits, youth can complete large muscle activity in the recreation yard. The facility meets the mandatory one hour of large muscle exercise a day for youth.

### **Lower Eastern Shore Children's Center (LESCC)**

DJS assesses the mental health status of all youth at intake and admissions and refers youth in crisis for emergent care services.

LESCC meets nationally recognized staffing ratios of one staff-to-eight youth during daytime hours and one staff-to-sixteen youth during night hours.

### **Western Maryland Children's Center (WMCC)**

In the incidents cited by the monitor, the administration acted appropriately in accordance with DJS policy and procedures. Regarding the incident where a staffer used an inappropriate restraint, OIG, CPS and MSP investigated the incident. Staff was attempting to protect a small youth from being assaulted by a much larger youth. The staff had a difficult time protecting the smaller youth from the larger youth and utilized an improper restraint technique. The staff was held accountable through the standards of conduct for the use of the improper restraint technique.

## **COMMITTED FACILITY RESPONSES**

### **Victor Cullen**

A new superintendent has been appointed. Victor Cullen has no resident advisor vacancies at the time of this writing. The two supervisory vacancies are in the recruitment process. The leadership at Victor

Cullen has expanded programming and continues to train staff on utilizing evidence-based and trauma-informed treatment interventions.

All of Victor Cullen staff have been trained in trauma informed care. The facility has established a multidisciplinary team that oversees implementation of trauma practices. The team meets with the trauma informed care experts monthly to consult and develop strategies to create an overall trauma informed and therapeutic environment. For a comprehensive description of how DJS is implementing trauma informed care in its committed programs, please see the DJS introduction on trauma informed care.

In Incident 141865, the youth had been given a prolonged period of time to return to his room for the evening. Three staff engaged in counseling with the youth in an attempt to get him to walk to his room. Staff responded to the situation after approximately 30 minutes of ongoing coaching and counseling. Staff that responded inappropriately were addressed administratively, which includes termination of employment for one staff. Youth non-compliance can elevate to a point where it interferes with the orderly operations of the facility and restraint interventions must be utilized to ensure safety and security. As the monitor states, when DJS staff are confronted with ongoing youth non-compliance, they are expected to “take action when they should act decisively.” (JMU 2017 First Quarter Report, page 4)

The Intensive Services Unit (ISU) at Victor Cullen serves the most challenging youth. This unit provides more intensive specialized treatment services to youth who are disruptive in the general population environment. Youth on this unit have committed a serious behavior infraction. Victor Cullen has specialized training for staff that work on ISU.

Victor Cullen makes every effort to actively engage families. JMU cites the case of a youth who has children and whose family had difficulty with transportation. The Victor Cullen administration arranged for the youth to have four home visits prior to discharge.

### **Youth Centers**

The Youth Centers meet nationally recognized staffing ratios of one staff-to-eight-youth during daytime hours and one staff-to-sixteen youth during night hours. The assertion that a youth made a suicidal statement due to a lack of staff attention has little to do with staffing numbers, which were adequate. The department recognizes that youth may make inappropriate statements for attention. DJS’s most important priority is the safety and security of the youth in its care and, for that reason, all statements made by youth indicating possible self-harm are addressed by a mental health evaluation and increased supervision as needed.

All staff at the youth centers have been trained in trauma informed care. For a comprehensive description of how DJS is implementing trauma informed care in its committed programs, please see the DJS introduction on trauma informed care in committed placement.

Each Youth Center has sufficient behavioral health staff to address the needs of the population. There is at least four behavioral health positions at each Youth Center. The addictions counselor vacancy at Backbone Mountain Youth Center has been difficult to fill, and the department will continue to aggressively recruit to identify and hire a qualified candidate.

For a comprehensive description on how DJS is implementing increased opportunities for family engagement, please see the DJS introduction on family engagement.

#### **J. DeWeese Carter Center (Carter Center)**

We appreciate the JJMU's recognition of the department's efforts to provide programming for the girls at the Carter Center. During weekends, extra recreation time, community meetings, and educational/community outings are utilized to structure the program. Some unstructured time is acceptable and beneficial for youth.

#### **Silver Oak Academy (SOA) – Edited by DJS**

The Silver Oak program has had an influx of 25 new students since February 2017. It takes time for the new admissions to become acclimated to the program. The plan for reduction of the incidents is twofold, the increase of the staffing on the dorms, and the re-training of staff in the behavior management system.

Staffing was increased by three coach counselors on each shift as well as a Unit Manager to oversee each dorm on each shift. The increase in staff adds to the floor in the workforce building as well as the rest of the campus.

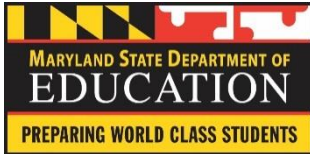
The increase in staffing and proper implementation of interactive supervision policy eliminates blind spots.

The program wanted to recruit the right candidate, the new licensed and registered barber instructor started on April 3rd, 2017.

The program supports family contact through structured visitation as well as positive youth development opportunities with family services. Students are afforded the opportunity for family contact at a minimum of twice per month through various structured activities.



**MARYLAND STATE  
DEPARTMENT OF EDUCATION  
- RESPONSE**



Karen B. Salmon, Ph.D.  
State Superintendent of Schools

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## **MSDE Response to the Juvenile Justice Monitoring Unit's 2017 First Quarter Report**

The Maryland State Department of Education (MSDE) has reviewed the Juvenile Justice Monitoring Unit's (JJMU) 2017 first quarter report in relation to the provision of educational services within Department of Juvenile Services' residential facilities. The MSDE appreciates JJMU's thoughtfully written report. The 2017 First Quarter Report provides an overview of specific concerns centered upon staffing and retention, substitutes, and post-secondary education.

### **Staffing and Retention**

The MSDE Juvenile Services Education System (JSES) acknowledges and agrees with the JJMU that hiring and retention of teachers has been problematic and the length of the hiring process continues to impact continuity of instructional services. At the time writing this response, May 31, 2017, the MSDE JSES has fourteen open classroom teaching positions. Four of the positions are in the process of being filled. The MSDE JSES has continued to place a concerted effort on addressing issues with hiring and retention through expanded recruitment activities, which include the use of various online teacher recruitment services. In addition, the MSDE JSES has hired a dedicated staff member to function as a Human Resources specialist specifically for JSES, procured two companies to provide contracted substitute services; and continue to offer a hiring and retention incentive for the JSES teachers and principals. The MSDE JSES acknowledges a request for additional teaching positions may be necessary and will continue to examine the adequacy of current staff throughout the coming months with the staffing committee, which was initiated in December 2016. The staffing committee will also continue to review the staffing at each facility as well as the possible transfer and/or reassignment of currently authorized vacant positions within the JSES. Final decisions will be based on analysis of data and trends within individual facilities. The JSES administration acknowledges that staffing analysis combined with on-going climate surveys, and enhancements such as use of retention and hiring incentives, and increases in the Institutional Educator Pay Plan (IEPP) is crucial to improving overall staff retention within the JSES.

### **Substitutes**

The need for substitute teachers has been recognized and acknowledged by the leadership at the MSDE. The MSDE JSES has completed a bid to procure services from two qualified vendors to provide substitute teachers. The implementation of a quality relationship with a vendor to provide substitute teachers will allow the JSES the ability to ensure the continuity of instruction when regular classroom teachers are absent for an extended period or when positions become vacant. Having the ability to provide quality, consistent, and affordable substitute staff in all schools is essential to ensuring that each school provides optimal educational services and the promotion of student achievement. The MSDE JSES will work collaboratively with the Department of Juvenile Services (DJS) to have a smooth roll out of the substitute teacher process.

## **Post-Secondary Education**

Juvenile Services Education System students who have obtained their high school diploma or General Education Development (GED) and desire to continue their educations at the college level are eligible to take the Accuplacer® assessment. The Accuplacer assessment will determine if students are on track to take credit-bearing courses or remediation. Based on the Accuplacer scores, school counselors assist students with completion of the application if needed and facilitates enrollment of the student into the identified on-line course(s).

Post-secondary education has been an area targeted for expansion in FY 18. The Memorandum of Understanding (MOU) with Frederick Community College (FCC) includes all eligible students enrolled in all thirteen JSES facilities. The JSES is in the process of creating additional partnerships with other community colleges around the state to afford students at designated facilities the opportunity to attend classes and/or events on college campuses with prior DJS approval. The challenge with the FCC program, or enrollment in any other community college program, is that JSES student enrollment must coincide with the beginning of the registration period in order for students to be enrolled in the selected community college. Open enrollment and open exit of JSES students does not always conform to this defined enrollment window. The JSES is continuing to work on expanding college partnerships as well as partnering with the College Board to offer the SAT and ACT.

## **Detention Centers**

### **Cheltenham Youth Detention Center**

With respect to the JJMU's report on students in Intensive Services Unit (ISU): Students in ISU receive their educational services in the school. Teachers do not go to the units to provide instruction.

The need for substitute teachers has been recognized and acknowledged by the leadership at the MSDE. The MSDE JSES has completed a bid to procure services from two qualified vendors to provide substitute teachers. The implementation of a quality relationship with a vendor to provide substitute teachers will allow the JSES the ability to ensure the continuity of instruction when regular classroom teachers are absent for an extended period or when positions become vacant. Having the ability to provide quality, consistent, and affordable substitute staff in all schools is essential to ensuring that each school provides optimal educational services and the promotion of student achievement. The MSDE JSES will work collaboratively with the DJS to have a smooth roll out of the substitute teacher process.

### **Baltimore City Juvenile Justice Center (BCJJC)**

For clarification purposes, the MSDE is pleased to report that BCJJC currently has two full-time school counselors as of March 29, 2017 to support student success. In addition, as of May 15, 2017, the MSDE JSES has a full-time teacher providing instruction to support the two ISU units.

Juvenile Services Education System students who have obtained their high school diploma or GED and desire to continue their education at the college level are eligible to take the Accuplacer® assessment. The Accuplacer assessment will determine if the student is on track to take credit-bearing courses or if they are in need of remediation. Based on the Accuplacer scores, school counselors assist students with the completion of the application if needed and facilitates enrollment of the student into the identified on-line course(s).

Post-secondary education has been an area targeted for expansion in FY 18. The Memorandum of Understanding (MOU) with Frederick Community College (FCC) includes all eligible students enrolled in all thirteen JSES facilities. The JSES is in the process of creating additional partnerships with other community colleges around the state to afford students at designated facilities the opportunity to attend classes and/or events on college campuses with prior DJS approval. The challenge with the FCC program, or enrollment in any other community college program, is that JSES student enrollment must coincide with the beginning of the registration period in order for students to be enrolled in the selected community college. Open enrollment and open exit of JSES students does not always conform to this defined enrollment window. The JSES is continuing to work on expanding college partnerships as well as partnering with the College Board to offer the SAT and ACT.

#### **Thomas J.S. Waxter Children's Center**

During the First Quarter of 2017, Waxter had two vacancies in the area of English and Social Studies. The English position was filled by the end of the first quarter. The MSDE JSES continues to recruit for open positions to support our English Language Learners (ELL) and acknowledges this is an area of teacher shortage around the state.

Refer to page 6.

#### **Alfred D. Noyes Children's Center**

The MSDE JSES concur with the JJMU report statement of an ongoing vacancy for a science teacher, a computer teacher and an ELL teacher. The MSDE JSES staff has continued to place concerted efforts and focus in 2017 on addressing issues with hiring and retention. The MSDE JSES has hired a dedicated person to function as a Human Resource Specialist to assist with the hiring.

The MOU with FCC is available to all eligible students enrolled in JSES schools. The challenge with the FCC program, or enrollment in any other community college program, is that a JSES student enrollment must coincide with the beginning of the registration period in order for the student to be enrolled in the community college. The open enrollment and open exit for JSES students do not always conform to this defined enrollment window.

### **Committed Placement Centers**

#### **Victor Cullen Center**

For clarification purposes; as of May 2017, a principal has been assigned at Victor Cullen Center (VCC) and the MSDE JSES is in the process of hiring an English teacher. Currently there are two vacant teaching positions at VCC and the MSDE agrees with the JJMU report that open positions need to be filled to provide consistent instruction for students.

Juvenile Services Education System students who have obtained their high school diploma or General Education Development (GED) and desire to continue their educations at the college level are eligible to take the Accuplacer® assessment. The Accuplacer assessment will determine if students are on track to take credit-bearing courses or remediation. Based on the Accuplacer scores, school counselors assists students with completion of the application if needed and facilitates enrollment of the student into the identified on-line course(s).

Post-secondary education has been an area targeted for expansion in FY 18. The Memorandum of Understanding (MOU) with Frederick Community College (FCC) includes all eligible students

enrolled in all thirteen JSES facilities. The JSES is in the process of creating additional partnerships with other community colleges around the state to afford students at designated facilities the opportunity to attend classes and/or events on college campuses with prior DJS approval. The challenge with the FCC program, or enrollment in any other community college program, is that JSES student enrollment must coincide with the beginning of the registration period in order for students to be enrolled in the selected community college. Open enrollment and open exit of JSES students does not always conform to this defined enrollment window. The JSES is continuing to work on expanding college partnerships as well as partnering with the College Board to offer the SAT and ACT.

#### **Youth Centers x4**

The principal at Backbone Mountain Youth Center and Savage Mountain Youth Center retired during the first quarter and the MSDE JSES has completed second round interviews for this position. The challenge of having qualified candidates to fill vacant teaching positions in the western region has been a continuing area of focus as the JSES has worked with the Maryland State Department of Human Resources to expand the recruitment pools.

With respect to the JJMU's contention that only Backbone Mountain Youth Center and Victor Cullen Center students have access to post-secondary education; The Memorandum of Understanding (MOU) with Frederick Community College (FCC) includes all eligible students enrolled in all thirteen JSES facilities. The JSES is in the process of creating additional partnerships with other community colleges around the state to afford students at designated facilities the opportunity to attend classes and/or events on college campuses with prior DJS approval. The challenge with the FCC program, or enrollment in any other community college program, is that JSES student enrollment must coincide with the beginning of the registration period in order for students to be enrolled in the selected community college. Open enrollment and open exit of JSES students does not always conform to this defined enrollment window. The JSES is continuing to work on expanding college partnerships as well as partnering with the College Board to offer the SAT and ACT.

Backbone Mountain Youth Center has five computers in the math classroom for student use. At the time of writing this report a service request was submitted to repair one of the computers in the math classroom. One additional classroom has five working computers and students have access to iPads.

#### **J. DeWeese Carter Center**

It is important to acknowledge that the principal at Carter has dual administrative responsibilities for the Lower Eastern Shore Children's Center in Salisbury, Maryland. This situation has existed since Carter was assumed by MSDE in 2009. In addition, it is important to note that the statement that the special education teacher at Carter doubles as the vocational education teacher is not true. The special education teacher left more than twelve months ago. A new special education teacher was hired in July of 2016. The teacher only provides instruction and case management.

### **Maryland State Department of Education in DJS Facilities**

The MSDE Juvenile Services Education System (JSES) acknowledges and agrees with the JJMU that hiring and retention of teachers has been problematic and the length of the hiring process continues to impact continuity of instructional services. At the time writing this response, May 31, 2017, the MSDE JSES has fourteen open classroom teaching positions. Four of the positions are in the process of being filled. The MSDE JSES has continued to place a concerted effort on addressing issues with hiring and retention through expanded recruitment activities, which include the use of various online

teacher recruitment services. In addition the MSDE JSES has hired a dedicated staff member to function as a Human Resources specialist specifically for JSES, procured two companies to provide contracted substitute services; and continue to offer a hiring and retention incentive for the JSES teachers and principals. The MSDE JSES acknowledges a request for additional teaching positions may be necessary and will continue to examine the adequacy of current staff throughout the coming months with the staffing committee, which was initiated in December 2016. The staffing committee will also continue to review the staffing at each facility as well as the possible transfer and/or reassignment of currently authorized vacant positions within the JSES. Final decisions will be based on analysis of data and trends within individual facilities. The JSES administration acknowledges that staffing analysis combined with on-going climate surveys, and enhancements such as use of retention and hiring incentives, and increases in the Institutional Educator Pay Plan (IEPP) is crucial to improving overall staff retention within the JSES.

The need for substitute teachers has been recognized and acknowledged by the leadership at the MSDE. The MSDE JSES has completed a bid to procure services from two qualified vendors to provide substitute teachers. The implementation of a quality relationship with a vendor to provide substitute teachers will allow the JSES the ability to ensure the continuity of instruction when regular classroom teachers are absent for an extended period or when positions become vacant. Having the ability to provide quality, consistent, and affordable substitute staff in all schools is essential to ensuring that each school provides optimal educational services and the promotion of student achievement. The MSDE JSES will work collaboratively with the Department of Juvenile Services (DJS) to have a smooth roll out of the substitute teacher process.

The MSDE JSES strives to provide programming and resources to ensure students have access to adequate career educational programming and technical resources. Every facility offers Career Research and Development (CRD). The CRD Course provides a framework in which students can explore potential career areas. Career Research and Development course content includes student development in the areas of business writing; soft employment skills, financial literacy, and provides the option to obtain industry recognized certifications such as restaurant food handling and retail management. Several facilities offer career and technology courses in addition to CRD.

The Charles H. Hickey School and the Baltimore City Juvenile Justice Center provide Office Systems Management (OSM). Office System Management is a business administration services course that provides students with an in-depth study of the structure and organization of information systems. Students develop managerial and technical skills for business support operations through applied learning. Students are also able to obtain industry certifications in Microsoft Office applications.

Current staffing vacancies have created gaps in career and technical educational programming. However, JSES is currently researching creative ways to fill these gaps. Ongoing efforts to increase staffing include traditional recruitment, posting a request for bids for contractors to provide services, and initiating conversations to enhance partnerships that connect youth to viable transitional employment opportunities.

**Electives:**

The MSDE JSES concur with the JJMU report statement that MSDE JSES already provides youth access to certain elective courses. Art is available through APEX Learning Virtual School and this opportunity is utilized when a student needs this course to complete graduation requirements.

Currently, the MSDE JSES does not offer physical education but agrees that providing this course would bring the MSDE JSES schools closer to replicating public schools in the community schools.

### **English as a Second Language**

The MSDE JSES continues to recruit for open positions to support our English Language Learners and acknowledges this is an area of teacher shortage. The shortage of teachers who can work English language learners is a big problem in a growing number of states according to a report by National Public Radio (nprEd) on February 23, 2017. In 2016, 32 states reported not having enough teachers for English language learners and Maryland is one of those states.

### **Service Learning**

Service Learning plans developed in JSES are mostly indirect and/or advocacy based due to the restrictions on student mobility and the inability for youth to have direct face-to-face contact with the community. There is also limited physical space in some facilities and this has traditionally limited whole-school projects that students can engage in. Service Learning implementation in the JSES is both systemic and site-based.

In January 2016, JSES implemented systemic service learning, with the implementation of 67 Blankets for Nelson Mandela. The Juvenile Services Education System also continues to implement curricular connections to service learning with infusion within lessons.

As part of the MSDE JSES policies and regulations, the Service Learning Policy was revised in July 2016. The policy will be reviewed and revised annually. Currently, Alfred D. Noyes Center, Backbone Mountain Youth Center, Savage Mountain Youth Center, Western Maryland Children's Center and Meadow Mountain Youth Center have site-based service learning plans in addition to the systemic-wide service learning plan. The Department of Juvenile Service (DJS) collaborates with the MSDE to be active partners with service learning projects. Many of the youth camps off-campus service learning activities occur because the DJS facilitates transportation. The DJS also facilitated several off site activities, which included the participation in the walk for breast cancer, the hearts for animals, and fundraisers for women's shelters.

### **Post-secondary programing**

Post-secondary education has been an area targeted for expansion in FY 18. The Memorandum of Understanding (MOU) with Frederick Community College (FCC) includes all eligible students enrolled in all thirteen JSES facilities. The JSES is in the process of creating additional partnerships with other community colleges around the state to afford students at designated facilities the opportunity to attend classes and/or events on college campuses with prior DJS approval. The challenge with the FCC program, or enrollment in any other community college program, is that JSES student enrollment must coincide with the beginning of the registration period in order for students to be enrolled in the selected community college. Open enrollment and open exit of JSES students does not always conform to this defined enrollment window. The JSES is continuing to work on expanding college partnerships as well as partnering with the College Board to offer the SAT and ACT.

### **Interagency collaboration**

The MSDE JSES agrees that establishing formal system collaboration between administrators, teachers, and direct-care staff to establish clear classroom expectation would be a unified approach in the delivery of educational services. The MSDE JSES is currently in the process of collaborating on

Positive Behavior Intervention and Supports (PBIS), which will ensure that teachers and direct care staff support a positive learning environment for youth as suggested by the JJMU report.

### **Strategic Plan**

The MSDE JSES is being supported by a team of experts from the University of Maryland on the verification and implementation of the Strategic Plan. This collaborative effort is designed to support the MSDE JSES in five areas: climate, resources, recruitment and staffing, curriculum and reentry. Benchmarks for the revised strategic plan have been drafted and refined as of May 26, 2017. Monthly meetings are scheduled with the team from the University of Maryland to discuss findings and to document concerns, recommendations, and progress toward the obtainment of Strategic Plan goals. The MSDE JSES is slated to continue to work with the University of Maryland team over the next year to continue the systemic implementation of the strategic plan.