JUVENILE JUSTICE MONITORING UNIT

OFFICE OF THE ATTORNEY GENERAL

2014 ANNUAL REPORT

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Director

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

February 2015

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

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

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

Members of the General Assembly

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

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

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

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

Enclosed please find the 2014 Annual Report of the Maryland Juvenile Justice Monitoring Unit (JJMU). The annual report provides data and analysis concerning treatment of and services provided to youth in Department of Juvenile Services (DJS/the Department) directly run and licensed facilities throughout Maryland. This report incorporates findings through the end of the fourth quarter of 2014. The Departments' response and a response from the Maryland State Department of Education are included, as indicated on the contents page.

The "Juvenile Justice Reform In Maryland" section details DJS spending on the operation

of secure detention and committed placement facilities during the past fiscal year. Overuse of secure detention and committed residential placement is taking place while research indicates community-based options are more beneficial to youth and more cost efficient. Plans to build more committed placement facilities, at an estimated cost of $179 million, should not go forward. Instead, the Department should increase funding for community-based resources (see pages 5-6).

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

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

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

I am pleased to answer any questions you may have about this report. I can be reached at nmoroney@oag.state.md.us. My three colleagues and I look forward to continuing to work with all interested parties to guard against abuse and ensure appropriate treatment and services are provided for youth in Maryland.

Respectfully submitted,

Nick Moroney

Nick Moroney
Director
Maryland Juvenile Justice Monitoring Unit

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

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JUVENILE JUSTICE REFORM IN MARYLAND

During fiscal year 2014, the Maryland Department of Juvenile Services (DJS/the Department) spent $111,659,988 to operate fourteen detention and committed placement facilities.[1]

The average daily cost per youth in DJS detention facilities in FY 2014 was $670. In recent years, the DJS administration has successfully worked to reduce the number of youth unnecessarily placed in secure detention. Between FY 2012 and FY 2014, the average daily population (ADP) of youth in secure detention centers statewide decreased by 36%.[2]

The reduction can be attributed to DJS efforts to decrease the number of youth in detention awaiting placement and to the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) which promotes the appropriate use of alternatives to secure detention. The result is that the average daily population at the secure juvenile detention center in Baltimore City decreased 22% between 2011 and 2014. Hundreds of thousands of dollars were saved without compromising public safety.[3] The JDAI effort should be expanded statewide.

In DJS operated committed placement centers, the average per diem cost during FY 2014 was $470 per child.[4] Although the detention population has declined in recent years, there is evidence that committed placement to residential facilities is overused. According to DJS data, only 28% of committed residential placements in FY 2014 were for crimes of violence or other felonies while 68% of committed placements to out-of-home facilities were for misdemeanor offenses.[5]

Overuse of residential placement is taking place even as research indicates community-based options are more beneficial to youth and more cost efficient. According to a report from the Justice Policy Institute, "options that keep youth at home and engaged in school and family life are documented to produce better outcomes both for youth and public safety."[6] The report notes "community-based programming that can provide individualized, wraparound services based on the unique needs of each youth and that engage family and connect the youth to neighborhood resources can cost much less – about $75 per day."[7]

Committing youth to residential facilities "imposes heavy burdens on family members, leaves confined youth vulnerable to assaults, exposes our communities to higher rates of recidivism, and impedes young people's transition to adulthood."[8] Given the potential harm to

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[1] DJS FY 2014 Data Resource Guide, p. 191 http://www.djs.state.md.us/drg/Full_2014_DRG.pdf
[2] Ibid, 96.
[3] GOCCP, Crime Statistics. http://www.goccp.maryland.gov/msac/crime-statistics.php
[4] DJS FY 2014 Data Resource Guide, p. 191 http://www.djs.state.md.us/drg/Full_2014_DRG.pdf
[5] Ibid, 129.
[6] Justice Policy Institute, "Sticker Shock: The Price We Pay for Youth Incarceration." December 2014, p. 6 http://www.justicepolicy.org/uploads/justicepolicy/documents/sticker_shock_final_v2.pdf
[7] Justice Policy Institute, "Sticker Shock: The Price We Pay for Youth Incarceration," Executive Summary. December 2014, p.1 http://www.justicepolicy.org/uploads/justicepolicy/documents/executive_summary_-_sticker_shock_final.pdf
[8] Justice Policy Institute, "Sticker Shock: The Price We Pay for Youth Incarceration." December 2014, p. 3 http://www.justicepolicy.org/uploads/justicepolicy/documents/sticker_shock_final_v2.pdf

youth, out-of-home placement should not be ordered by the courts except as a last resort and only in situations when a child poses a serious risk and when community-based options have been exhausted.

Given this background and the need to reduce overreliance on committed placements, the Department should focus on engaging individualized and intensive service resources within the communities of the youth being served. However, DJS (and Maryland state government) currently plans to spend $179 million to construct three new state-operated committed placement centers which would create 120 more committed placement beds. Such facilities interrupt "normal adolescent development and can contribute to recidivism when a young person might have naturally aged out of delinquency."[9]

The Department (and Maryland state government) should scrap plans to construct costly and likely ineffective new committed placement centers and instead commit to long term investment in community based treatment options offering individualized and intensive services as needed. Such an approach is less expensive for the state and would increase Maryland's ability to effectively meet the needs of youth and their families.

[9] Ibid, 5.

Facility Incident and Population Trends

Incident and population trends in 2014 compared with 2013:

- ✓ Average combined daily population (ADP) in DJS detention facilities decreased by 9%.
- ✓ Combined ADP in DJS committed placement facilities decreased by 13%.
- ✓ Incidents involving aggression decreased at the Charles H. Hickey, Jr., School (Hickey), Cheltenham Youth Facility (CYF) and the Thomas J.S. Waxter (Waxter) detention centers and in committed placement at the four youth centers in western Maryland.
- ✓ Use of physical restraints in committed placement centers decreased at Victor Cullen and the four youth centers, and in detention at Hickey, Waxter, Lower Eastern Shore Children's Center (LESCC) and CYF.
- ✓ Utilization of mechanical restraints (handcuffs and/or shackles) decreased by 29% at Hickey and by 90% at the J. DeWeese Carter (Carter) committed placement center for girls.
- ✓ Seclusion of youth declined at the Baltimore City Juvenile Justice Center (BCJJC) and CYF detention centers.

- Incidents involving aggression increased in detention at BCJJC, LESCC and Noyes and in committed placement at Carter, Victor Cullen, and Silver Oak Academy (SOA).
- Use of physical restraints increased at BCJJC, Noyes, and the Western Maryland Children's Center (WMCC) detention centers. Physical restraint of children in committed facilities significantly increased at Carter and at SOA.
- Utilization of mechanical restraints increased at Victor Cullen and BCJJC, CYF, Noyes, WMCC, and Waxter.
- Seclusion of youth increased at Hickey, Noyes, and WMCC detention centers and at Carter and Victor Cullen committed placement centers.
- There were 336 incidents involving suicide ideation and 60 incidents of self-injurious behavior at Department of Juvenile Services-operated facilities. Facilities operated by DJS are not appropriate settings for children with serious mental health issues.

Snapshot Of Ongoing Concerns:

- DJS plans to spend $179 million on three new committed placement centers. This money would be better spent on intensive services for youth (including high risk youth) within their own communities (see page 5). See the JJMU Third Quarter 2014 report for more details: http://www.oag.state.md.us/JJMU/reports/14_Quarter3.pdf

- DJS policy requires all youth to be transported to and from medical and educational appointments in shackles and handcuffs fastened to belly chains and black boxes. Policy also requires youth be strip searched after visits with families and lawyers, and after earned outings in the community. The Department should end the practice of strip searching and shackling children without individualized determination of risk (see page 33).

- Under current Maryland law, CPS investigates allegations of abuse and neglect involving kids under 18 who have sustained an injury. Maryland law should be changed to empower CPS to investigate all allegations of abuse or neglect involving youth in the custody or under the supervision of DJS, whether or not the child has a visible injury or is over 18. See the JJMU Second Quarter 2014 report for more details: http://www.oag.state.md.us/JJMU/reports/14_Quarter2.pdf

- Changes to telephone access in DJS facilities subject youth to diminished privacy and decreased protections. During the third quarter, DJS installed telephones in common areas of the living units in its facilities. The Department now requires youth to use the recently installed telephones for calls to family, lawyers and case managers. Calls made from these phones may be recorded and DJS has access to the recorded calls. Recordings may be released to outside entities, including law enforcement. The Department should ensure that no phone calls are recorded and that kids are able to make phone calls in private settings. Kids should be able to make phone calls to lawyers, family members and community case managers using a staff phone in an office with a case manager present, as was previous practice. See the JJMU Third Quarter 2014 report for more details: http://www.oag.state.md.us/JJMU/reports/14_Quarter3.pdf

COMMITTED PLACEMENT CENTERS

In fiscal year 2014, the Maryland Department of Juvenile Services spent $33,725,103 to operate its committed placement centers.[10] Out-of-home or committed placement should not be used except as a last resort in situations when a child cannot be served at home or in the local community. According to the National Juvenile Justice Network, a growing body of evidence shows that "post-adjudication incarceration for youth can have extremely negative ramifications for the youth's ability to get back on the right track."[11]

In DJS operated committed placement centers, the average per diem cost during FY 2014 was $470 per child.[12] "By contrast [with committed placement], community-based programming that can provide individualized, wraparound services based on the unique needs of each youth and that engage the family and connect the youth to neighborhood resources can cost much less – as little as $75 per day."[13]

In 2014, the average daily population of youth in DJS-operated committed placement centers decreased by 13% compared to 2013. This trend should continue in an effort to ensure that only youth who cannot be served in the community are in out-of-home placements. As it works to reduce the inappropriate use of out-of-home placements, the Department should also focus on developing a treatment culture in its committed placement facilities that administrative and direct care staff are trained to implement and model.

Need for Treatment Resources in Committed Placement Centers

Currently, DJS' committed placement centers do not provide sufficient treatment services. Therapies to manage anger or aggression are not available in DJS-operated committed placement centers. Most youth in the juvenile justice system have experienced trauma.[14] However, DJS staff are not trained in the effects that trauma has on children, or how to identify and best respond to behavioral manifestations of a child's traumatization.

The Department should implement evidence-based treatment models in order to promote a therapeutic culture in which children receive individualized services. Staff and administrators should be trained "to give priority to continuous intensive treatment in how they respond to disruptive and aggressive behavior."[15] Committed placement centers should engage families and be equipped with a higher ratio of clinical staff to residents to allow youth to have several individual counseling sessions per week with a psychologist, psychiatrist or

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[10] DJS FY 2014 Data Resource Guide, p. 191 http://www.djs.state.md.us/drg/Full_2014_DRG.pdf

[11] National Juvenile Justice Network. "Community-Based Supervision: Increased Public Safety, Decreased Expenditures." November 2014. p. 1 http://www.njjn.org/uploads/digital-library/NJJN-YAP_CBA-costs_Nov2014_FINAL2.pdf

[12] DJS FY 2014 Data Resource Guide, p. 191 http://www.djs.state.md.us/drg/Full_2014_DRG.pdf

[13] Justice Policy Institute, "Sticker Shock: The Price We Pay for Youth Incarceration," Executive Summary. December 2014, p. 1 http://www.justicepolicy.org/uploads/justicepolicy/documents/executive_summary_-_sticker_shock_final.pdf

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

[15] SAHMSA National Registry of Evidence-based Programs and Practices, "Mendota Juvenile Treatment Center Program." http://www.nrepp.samhsa.gov/ViewIntervention.aspx?id=38

social worker.[16] The DJS behavior management system should complement principles of the treatment program and adolescent development (see page 35). Security measures should not preclude, counteract or overwhelm the promotion of a therapeutic environment.

Strip Searching and Shackling

Youth in DJS committed placement centers are routinely strip searched and shackled, and physical restraints and seclusion may be used although there is evidence that "any situation in which [trauma survivors] have no control over what happens to them can be retraumatizing," including "very blatant examples like strip searches, restraint or…seclusion."[17] The Department should end the practice of indiscriminate shackling and strip searching (see page 33). Administrators and staff should continue to receive ongoing training on effective communication and de-escalation techniques to counter the use of restraints and seclusion.

Family Engagement in Committed Placement Centers

Family engagement is limited at DJS committed placement centers while, according to DJS data, 90% of girls and 79% of boys have a moderate to high family related need.[18] Research links increased family visitation to improved behavior among incarcerated youth[19] and indicates family engagement is key in establishing trauma-informed programs.[20]

Family visitation is usually limited to certain hours on two days per week while the location of most DJS committed placement centers makes them difficult to reach for many families. Regular telephone contact with family members is limited to two ten minute calls per week, the same amount allotted to youth in detention. Depending on their level in the DJS behavior management program, youth can buy more phone calls with earned points. Youth in the advanced stages of the behavior program may participate in two home passes. The Department should increase weekly phone calls, visitation hours and home passes for youth in treatment to foster as much family engagement as possible.

Education in Committed Placement Centers

Options for post-secondary and vocational education are limited in DJS committed placement centers. All students who are eligible should have access to higher education at local colleges and universities, and through online courses. There should be a dedicated vocational education instructor at each committed placement center. Students should be able to participate in internships and employment opportunities onsite and in the community to acquire new skills and build self-esteem. The chance to earn and be awarded a high school diploma should be available to students while in DJS committed placement centers.

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[16] Ibid

[17] Penney, D., National Center for Trauma Informed Care, "Creating a Place of Healing and Forgiveness: The Trauma-Informed Care Initiative at the Women's Community Correctional Center of Hawaii." 2013, p. 3 http://www.nasmhpd.org/docs/NCTIC/7014_hawaiian_trauma_brief_2013.pdf

[18] DJS Report on Female Offenders, February 2012, p. 11 http://www.djs.state.md.us/docs/Girls.Feb.2012.Report.pdf

[19] Vera Institute, "The Impact of Family Visitation of Incarcerated Youth's Behavior and School Performance," April 2013. http://www.vera.org/sites/default/files/resources/downloads/family-visitation-and-youth-behavior-brief.pdf

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

Victor Cullen Center

The Victor Cullen Center is a hardware secure (fenced and locked) committed placement facility operated by the Department of Juvenile Services (DJS/the Department). The facility is located in Frederick County and has a DJS-rated housing capacity of 48 boys. African American youth represented 89% of total youth entries in 2014 compared to 88% in 2013.

Victor Cullen – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**45**	**46**	**43**
1. Youth on Youth Assault/Fight	69	85	104
2. Alleged Youth on Staff Assault	33	30	20
3. Physical Restraint	287	283	265
4. Use of Handcuffs and/or Shackles	195	171	178
5. Seclusion	86	97	106
6. Contraband	13	17	6
7. Suicide Ideation/Attempt	9	7	13

The average daily population at Cullen during 2014 decreased by 7% compared to 2013. Fights and assaults increased by 22%. Incidents involving the use of seclusion and mechanical restraints also increased.

The hiring of four mental health clinicians during 2014 was a positive addition to the staffing at Cullen. However, the facility is still lacking in therapeutic resources that could contribute to the establishment of a treatment culture.

Victor Cullen is the only hardware secure committed placement center for boys in the state and youth placed there are likely to be facing serious challenges involving anger or aggression. Also, youth are frequently moved to Victor Cullen in response to alleged disruptive or aggressive behavior at other, less restrictive facilities. However, therapies to develop youth skills in anger management or aggression replacement are not available at Cullen.

Administrators and direct care staff at Victor Cullen are not trained in any evidence-based treatment model. Given that most youth in the juvenile justice system have experienced traumatic victimization,[21] all staff – direct care and administrative – should be trained to implement trauma-informed therapeutic programming that enables them to "give priority to continuous intensive treatment in how they respond to disruptive and aggressive behavior."[22]

The Department's data shows that 79% of boys in out-of-home placement have a moderate-to-high family related need.[23] However, opportunities for family engagement are limited due to Cullen's location and DJS policy regarding phone calls, visitation and home passes (see page 10). The Department should expand opportunities for family engagement at Victor Cullen.

Development of a safe learning environment will also support efforts to establish a treatment culture at Cullen. There were significant safety concerns in the school during 2014. On-site mental health clinicians, DJS staff and administrators, and Maryland State Department of Education Juvenile Services Education (MSDE-JSE) personnel should collaborate to address behavioral issues on an individual basis using a clearly defined therapeutic approach that incorporates closely aligned treatment and education goals and services.

Currently, there is no GED or post-secondary school track available to students. There should be an opportunity for students with a high school diploma or GED to enroll in college courses (online and on campus). All youth, especially those already in possession of a high school diploma or GED, should be able to gain employment (on grounds and in the community), and participate in formal vocational education programs that lead to certification in a variety of fields.

There is a need for increased and varied team- and confidence-building recreational programming at Cullen. Plans to install an outdoor and indoor ropes course (high and low elements) should go forward without delay.

Research suggests that facilities should adopt "programs that take a therapeutic approach to changing behavior by focusing on constructive personal development," and include programs that are matched to address the specific needs and challenges of the youth being served.[24] The Department should invest in treatment resources and devote considerable attention to the establishment of a safe and therapeutically oriented culture at Victor Cullen.

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

[22] SAHMSA National Registry of Evidence-based Programs and Practices, "Mendota Juvenile Treatment Center Program." http://www.nrepp.samhsa.gov/ViewIntervention.aspx?id=38

[23] DJS Report on Female Offenders, Feb 2012, p. 16 http://www.djs.state.md.us/docs/Girls.Feb.2012.Report.pdf

[24] Lipsey, M., Howell, J., Kelly, M., Chapman, G., Carver, D. "Improving the Effectiveness of Juvenile Justice Programs." December, 2010, p. 28 http://cjjr.georgetown.edu/pdfs/ebp/ebppaper.pdf

Youth Centers x4

The youth centers consist of four separate staff secure (not fenced) facilities for boys owned and operated by the Maryland Department of Juvenile Services (DJS/the Department): Green Ridge (40 beds), Savage Mountain (36 beds), Meadow Mountain (40 beds) and Backbone Mountain (48 beds) youth centers. African American youth represented 73% of totally youth entries in 2014, compared to 76% in 2013.

Security cameras have not been installed as planned at any of the four youth centers.

Combined Youth Centers (x4) – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**162**	**146**	**124**
1. Youth on Youth Assault/Fight	174	181	140
2. Alleged Youth on Staff Assault	19	44	30
3. Physical Restraint	253	381	284
4. Use of Handcuffs and/or Shackles	52	91	92
5. Seclusion	0	0	0
6. Contraband	50	45	29
7. Suicide Ideation/Attempt	15	21	18

The combined average daily population at the four youth centers during 2014 was 124, a 15% decline compared to 2013. Incidents involving aggression decreased 23% and the use of physical restraints decreased 25%, however the use of mechanical restraints remained high.

Youth may be moved between youth centers, or ultimately to a higher security facility (Victor Cullen or an out-of-state facility), in response to disruptive or aggressive behavior. However, there are no specific programs to address anger or aggression issues at any of the four youth centers (or Victor Cullen). Evidence-based therapies to support kids in their ability to manage aggression and anger should be available to all youth in committed placement.

Given that most youth in the juvenile justice system have experienced traumatic victimization,[25] all staff – direct care and administrative – should be trained to implement an evidence-based, trauma-informed therapeutic program (or programs) that enables them to "give priority to continuous intensive treatment in how they respond to disruptive and aggressive behavior."[26]

The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) operates the schools at each of the youth centers (see page 40). There is a need for increased vocational education options at the youth centers especially for youth who have already earned their high school diploma or GED. Community based options for employment and vocational training should also be available. Currently, students do not have access to the internet for educational purposes.

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

[26] SAHMSA National Registry of Evidence-based Programs and Practices, "Mendota Juvenile Treatment Center Program." http://www.nrepp.samhsa.gov/ViewIntervention.aspx?id=38

Silver Oak Academy

Silver Oak Academy (SOA/Silver Oak) is a privately operated staff secure (not locked and fenced) committed care center located in Carroll County and licensed by the Maryland Department of Juvenile Services (DJS/the Department). In June 2013, the license was expanded to allow Silver Oak to house up to 96 boys. African American youth represented 90% of total youth entries in 2014, compared to 88% of entries in 2013.

SOA – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**47**	**54**	**62**
1. Youth on Youth Assault/Fight	19	24	39
2. Alleged Youth on Staff Assault	4	3	2
3. Physical Restraint	18	17	59
4. Use of Handcuffs and/or Shackles	0	0	0
5. Seclusion	0	0	0
6. Contraband	15	24	64
7. Suicide Ideation/Attempt	1	2	1

The average daily population during 2014 increased by 15% compared to 2013 while incidents involving aggression and physical restraint increased at a higher rate. As the population at Silver Oak continues to increase following the expansion of their license, staff and administrators should devote significant attention towards minimizing the use of physical restraints as their utilization can be harmful to individuals, particularly those who have experienced trauma.[27]

The increase in restraints may, in some instances, be related to youth placed at SOA following ejections from other committed placement centers. Mental health staff should work especially closely with these youth to help facilitate a safe transition into their placement at

[27] Penney, D., National Center for Trauma Informed Care, "Creating a Place of Healing and Forgiveness: The Trauma-Informed Care Initiative at the Women's Community Correctional Center of Hawaii." 2013, p. 3 http://www.nasmhpd.org/docs/NCTIC/7014_hawaiian_trauma_brief_2013.pdf

SOA. Additionally, security cameras should be installed without delay to facilitate accuracy in reviewing incidents and to enhance staff training.

While there was an increase in incidents involving aggression, Silver Oak continued to provide valuable treatment services in a nonrestrictive, therapeutic, school-like environment during 2014. All staffers at Silver Oak are trained in a treatment model based on the principles of cognitive-behavioral therapy and a comprehensive therapeutic approach incorporating trauma-informed care.

Students at Silver Oak can graduate from high school or choose to pursue a GED. They also participate in interscholastic sports teams and a variety of vocational education programs, including a Certified Nursing Assistant course that was added during the third quarter. During 2014, Silver Oak added a transitional living unit for students who wish to remain on campus after graduation while they work in the community and attend college. Twenty seven students at Silver Oak earned and received a high school diploma during 2014.

The J. DeWeese Carter Center

The J. DeWeese Carter Center is a DJS-operated, 14-bed hardware secure (locked and fenced) committed placement center for girls located on the eastern shore of Maryland. African American youth represented 74% of total entries to Carter in 2014 compared to 78% in 2013.

There are a significant number of staffing vacancies as of the end of 2014 and beginning of 2015. These positions should be filled as soon as possible as staffing impacts safety and security, facility-based activities including recreation as well as community outings which can be used as a meaningful reward.

Carter – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**11**	**11**	**11**
1. Youth on Youth Assault/Fight	6	6	9
2. Alleged Youth on Staff Assault	11	2	4
3. Physical Restraint	44	43	60
4. Use of Handcuffs and/or Shackles	1	10	1
5. Seclusion	12	9	15
6. Contraband	4	0	2
7. Suicide Ideation/Attempt	18	15	15

The average daily population at Carter during 2014 remained the same as in the two previous years, however, fights and assaults increased by one-third. While Carter is the only hardware secure committed placement center for girls in the state, therapies to support management of aggression or anger are not available.

Physical restraints increased by 40% and seclusions increased by 67% in 2014 compared to 2013. Research indicates that "[m]ost youth detained in juvenile justice facilities have extensive histories of exposure to psychological trauma."[28] Seclusion and restraint "are

[28] Ford, J., Blaustein, M. (October, 2013). Systemic Self-Regulation: A Framework for Trauma-Informed Services in Residential Juvenile Justice Programs. *Journal of Family Violence*, 28 (7).

likely to re-traumatize women who are trauma survivors and to cause trauma responses in women who had not previously experienced trauma."[29]

Exposure to trauma can undermine the ability of youth to manage behavior and emotions. All staff and administrators at Carter should receive comprehensive and ongoing training in trauma-informed treatment models and therapies that promote self-regulation among youth.[30]

Department of Juvenile Services' data indicates that 90% of girls in out-of-home placements have a moderate to high family need.[31] Girls from various parts of Maryland are placed at Carter, however, opportunities for family engagement are limited due to Carter's remote location and DJS policy regarding phone calls, visitation and home passes (see page 10). The Department should expand opportunities for family engagement to promote comprehensive treatment at Carter.

The Department is obliged to provide for at least one hour per day of large muscle exercise, however, the outdoor recreation space at Carter cannot be used during the winter. The recreation specialist works to create indoor activities but space is extremely limited. Youth should have routine access to a local community recreation center to ensure they have enough space and equipment to allow opportunities for regular exercise.

The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) provides school related services at Carter. During 2014, there was a girl at Carter who had remained there for nearly a year. The youth had already earned her GED while in detention (prior to coming to Carter) yet she was not afforded any opportunities for higher education while she was in placement at Carter. The MSDE-JSE program should have an established track for post-secondary school students that includes access to a nearby college and to online courses.

The Department of Juvenile Services and MSDE-JSE should work together to implement a community-based program of employment and internship opportunities. Currently, vocational education programs are not offered on a daily basis at Carter and are limited to a basic food hygiene course and four modules in network cabling. Plans to add a course leading to certification in customer service should go forward.

Girls at Carter continue to be transported to medical and educational appointments in handcuffs and shackles fastened to belly chains with black boxes (see page 33). Plans to have girls placed at Carter take the GED test at a nearby community college should be implemented without requiring girls to be mechanically restrained during transport.

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http://www.traumacenter.org/products/pdf_files/Trauma%20Services%20in%20Residential%20Juvenile%20Justice%20Settings_Ford_Blaustein.pdf

[29] Penney, D., National Center for Trauma Informed Care, "Creating a Place of Healing and Forgiveness: The Trauma-Informed Care Initiative at the Women's Community Correctional Center of Hawaii." 2013, p. 3 http://www.nasmhpd.org/docs/NCTIC/7014_hawaiian_trauma_brief_2013.pdf

[30] Ibid.

[31] DJS Report on Female Offenders, Feb 2012, p. 11 http://www.djs.state.md.us/docs/Girls.Feb.2012.Report.pdf

DETENTION CENTERS

In fiscal year 2014, the Maryland Department of Juvenile Services (DJS/the Department) spent $70,750,077 to operate its seven detention centers.[32]

Sending a child to a detention facility (secure detention) while awaiting a court hearing or committed placement should not happen except as a last resort and only when there has been an objective and individual determination of risk that indicates a youth cannot stay or wait in the community. According to the National Juvenile Justice Network, research has shown that diversion and community supervision programs are more cost-effective than incarceration, decrease recidivism, provide more appropriate treatment for youth, reduce stigma associated with formal juvenile justice system involvement, and increase family participation.[33]

In recent years, the Department of Juvenile Services has worked to reduce the inappropriate use of secure detention. In 2014, the average daily population of youth in DJS detention centers statewide decreased 23% compared to 2012. This reduction is partially attributable to DJS' work with the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) in Baltimore City. The JDAI project is a coordinated effort between DJS, the courts and other stakeholders to promote appropriate alternatives to secure detention.

The Department should expand JDAI across Maryland to minimize the inappropriate use of secure detention. (A recent spike in the statewide secure detention population underscores the need to continue and expand the appropriate use of alternatives to secure detention in Maryland.[34])

In recent years, the Department has notably improved operations in detention centers to enhance safety for youth and staff. During 2014, incidents of aggression, physical restraint, seclusion and mechanical restraint decreased in most detention centers. An exception was the Alfred D. Noyes Children's Center. Although there was a 22% reduction in average daily population at Noyes in 2014 (compared with 2013), incidents of aggression, restraints and seclusions increased substantially.

Secure detention is a particularly inappropriate environment for kids with mental health needs and yet many youth with such needs are sent to and admitted into detention centers. Incidents of suicide ideation in DJS detention centers increased 16% between 2012 and 2014. The Department should bolster therapeutic services available to kids in detention. Additional therapeutic resources would also benefit youth in need of additional support as they enter DJS detention centers following ejection from committed placement.

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[32] DJS FY 2014 Data Resource Guide, p. 191 http://www.djs.state.md.us/drg/Full_2014_DRG.pdf

[33] National Juvenile Justice Network. "Community-Based Supervision: Increased Public Safety, Decreased Expenditures." November 2014. p. 2 http://www.njjn.org/uploads/digital-library/NJJN-YAP_CBA-costs_Nov2014_FINAL2.pdf

[34] The average daily population of DJS youth in secure detention statewide increased by 19% during the fourth quarter of 2014 compared to the same time in 2013. These figures do not include youth being charged as adults who may be held in DJS detention centers.

Baltimore City Juvenile Justice Center

The Baltimore City Juvenile Justice Center (BCJJC) is a secure detention center for boys operated by the Department of Juvenile Services (DJS/the Department) which rates housing capacity at 120. African American youth represented 94% of total youth entries during 2014 compared with 97% in 2013.

In Baltimore City, DJS partnered with the courts and other stakeholders to participate in the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) which promotes the appropriate use of alternatives to secure detention. Continuous and diligent participation in JDAI should receive added emphasis given that the population of DJS youth at BCJJC increased 23% during the fourth quarter of 2014 compared to the same time last year.

The recent population increase does not include youth facing adult charges held at BCJJC as a result of an agreement between DJS and the Maryland Department of Public Safety and Correctional Services (DPSCS, the adult corrections agency). Housing certain youth charged as adults at BCJJC is a positive development that has protected a substantial number of youth from being held at the adult detention center in Baltimore.

BCJJC – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**98**	**81**	**90**
1. Youth on Youth Assault/Fight	264	209	270
2. Alleged Youth on Staff Assault	28	13	34
3. Physical Restraint	428	347	395
4. Use of Handcuffs and/or Shackles	136	114	171
5. Seclusion	394	246	199
6. Contraband	42	26	25
7. Suicide Ideation/Attempt	34	17	28

The chart above shows that, comparing 2014 with 2013, there was an 11% increase in average daily population at BCJJC. Over the same period, fights and assaults increased by 29%; physical restraints increased by 14%; and the use of mechanical restraints increased by 50%. Administrators, managers and direct care staff at BCJJC should model and promote the

use of verbal de-escalation techniques and request pre-emptive assistance from mental health and case management staff to help prevent incidents involving aggression and restraints.

During the last quarter of 2014, administrators and staff at BCJJC focused on addressing the increase in incidents. This initiative has begun to show success, especially in reducing seclusions. While there was a slight decrease in ADP (approx. 2%), there was a far larger decrease in some incident categories during the fourth quarter of 2014 compared with the third quarter.

	Q3 2014	**Q4 2014**
Average Daily Population	**88**	**86**
Assaults/fights	68	65
Physical Restraint	103	86
Use of Handcuffs/Shackles	51	32
Seclusions	48	9

The chart above tabulates a decrease in physical restraints of 17%; a 37% dip in the use of handcuffs and shackles; and a steep decline of 81% in seclusion of youth (in the fourth quarter of 2014 in comparison to the prior quarter).

The effort to reduce incidents should continue and include a particular focus on reducing the number of fights and assaults.

Cheltenham Youth Facility

Cheltenham Youth Facility (CYF) is a secure detention center for boys owned and operated by the Department of Juvenile Services (DJS/the Department) and located in Prince George's County. The Department has determined a facility housing capacity of 115 youth at CYF. African American youth represented 79% of total youth entries in both 2014 and 2013.

The average daily population at CYF during 2014 decreased by 10% compared to 2013. This reduction is mainly attributable to the Department's success in reducing the number of youth stuck in detention for long periods of time before being transferred to a long term committed placement center.[35]

Conversely, Department of Juvenile Services' data indicates that secure detention continues to be overused in Prince George's County. While the rate of juvenile complaints received by DJS in fiscal year 2014 reflected a drop of 43% in Prince George's County since fiscal year 2005, the rate of Prince George's County youth in secure detention increased by 115% during the same period. The data further indicates that large numbers of Prince George's County youth were detained in response to violations of court orders as opposed to for serious offenses. [36]

In order to guard against the inappropriate use of secure detention, the Department re-launched the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) in Prince George's County at the end of 2014. The JDAI project brings together DJS, the courts and other stakeholders to reduce the overuse of secure detention by promoting the appropriate utilization of alternatives. All involved stakeholders, including the courts, should participate actively in JDAI as research shows that "pre-trial detention and post-adjudication incarceration for youth can have extremely negative ramifications for the youth's ability to get on the right track."[37]

During 2014 there were significant reductions in incidents of aggression, physical restraint and seclusion at CYF in comparison with the previous year. Fights and assaults declined 29% while incidents involving physical restraint and seclusion decreased by 54% and by 88%, respectively.

However, incidents involving the use of mechanical restraints increased by 41%. Mechanical restraints should not be used except as a last resort in situations when a child presents an imminent threat to himself or others.

The chart on the following page offers a comparison of average daily population and incident rate data at Cheltenham for the past three years.

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[35] Compared to fiscal year 2012, the pending placement population in FY 2014 decreased by 43% while the pre-disposition detention population remained relatively steady. DJS Long Term Trends in Prince George's County, December 2014. p. 6 http://www.djs.maryland.gov/docs/PGCo_Region_Trends_FY2014.pdf

[36] Ibid. 4, 10.

[37] National Juvenile Justice Network. "Community-Based Supervision: Increased Public Safety, Decreased Expenditures." November 2014. p .1 http://www.njjn.org/uploads/digital-library/NJJN-YAP_CBA-costs_Nov2014_FINAL2.pdf

CYF – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**104**	**88**	**79**
1. Youth on Youth Assault/Fight	259	187	135
2. Alleged Youth on Staff Assault	36	22	9
3. Physical Restraint	454	299	139
4. Use of Handcuffs and/or Shackles	36	17	24
5. Seclusion	61	7	1
6. Contraband	21	21	12
7. Suicide Ideation/Attempt	48	22	16

Youth at CYF who struggle with issues of aggression may be placed on the Intensive Services Unit (ISU). These youth have been identified as being in need of increased supports. However, during 2014, they were not receiving education services equal to those of youth on regular housing units. Plans for the Maryland State Department of Education Juvenile Services Education division to implement a full education schedule (including six hours of teacher instruction) on the ISU should go forward.

Incident reports at CYF are not uploaded to the incident report database until several weeks after the incident occurs. The Department should permanently correct issues with the database software that prevent staff at CYF from logging into the system, approving incidents for submission to the database, and editing incidents that have been posted. To the extent possible, facility administrators should ensure that incidents are uploaded to the database without delay.

Charles H. Hickey, Jr., School

The Charles H. Hickey, Jr., School (Hickey School/Hickey) in Baltimore County is a 72-bed secure detention center for boys, operated by the Department of Juvenile Services (DJS/the Department). The average daily population decreased 23% in 2014 compared with 2013. African American youth accounted for 69% of entries in 2014, up from 65% in 2013.

The overall decrease in Hickey School population is a positive trend and should continue. According to juvenile justice experts, "punitive responses to juvenile crime (e.g., the incarceration of juvenile offenders in correctional facilities) are far more expensive and often less effective than less harsh alternatives (e.g., providing juvenile offenders rehabilitative services in community settings)."[38] In order to ensure that appropriate alternatives to secure detention are widely available, the Department should focus on a statewide plan to expand the Juvenile Detention Alternatives Initiative (JDAI) of the Annie E. Casey Foundation.

The chart below indicates that average daily population (ADP), incidents involving aggression and the use of physical restraints all decreased at Hickey in 2014. While ADP fell 23%, physical restraints decreased 39% and the use of mechanical restraints decreased 29% compared with the previous year. However, seclusions increased 15% in 2014 versus 2013.

Hickey – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**60**	**52**	**40**
1. Youth on Youth Assault/Fight	153	130	97
2. Alleged Youth on Staff Assault	22	12	6
3. Physical Restraint	249	303	186
4. Use of Handcuffs and/or Shackles	18	31	22
5. Seclusion	53	72	83
6. Contraband	6	7	10
7. Suicide Ideation/Attempt	49	36	26

[38] Piquero, A., Steinberg, L. *Rehabilitation Versus Incarceration of Juvenile Offenders: Public Preferences in Four Models for Change States*. http://www.macfound.org/media/article_pdfs/WILLINGNESSTOPAYFINAL.PDF p.1.

In 2013, Hickey management implemented additional incident review procedures and enhanced staff training in an attempt to decrease the use of restraints. The effort has been successful and should continue and be expanded to include work to decrease seclusions.

Staff at Hickey developed a mentoring program (Boys 2 Men) and a fitness program (Residents Making a Change) to foster youth growth and development. The Department should facilitate the development of similar programs at all DJS facilities.

Participation in the Hickey fitness program is contingent on youth demonstrating positive behavior throughout each week. Youth placed on the Intensive Services Unit (ISU) at Hickey (who are sent there to be provided additional supports) are not allowed to participate in either the mentoring or the fitness program. Meaningful activities and incentives should be available for all youth in DJS facilities.

The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) is responsible for providing educational services at Hickey. Youth placed on the ISU do not receive the required six hours of educational instruction on a consistent basis. Teacher instruction for kids in the ISU should be for the full length of the school day at Hickey.

Thomas J.S. Waxter Children's Center

The Thomas J.S. Waxter Children's Center (Waxter) is the only all-girls detention center in the state. Waxter is owned and operated by the Department of Juvenile Services (DJS/the Department) and located in Anne Arundel County. Waxter has a DJS rated capacity of 42 beds. African American youth represented 80% of total youth entries during 2014, compared to 74% in 2013.

Waxter – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**31**	**26**	**25**
1. Youth on Youth Assault/Fight	93	106	66
2. Alleged Youth on Staff Assault	24	15	10
3. Physical Restraint	226	172	147
4. Use of Handcuffs and/or Shackles	9	8	24
5. Seclusion	29	26	27
6. Contraband	10	18	6
7. Suicide Ideation/Attempt	75	117	130

While there was a slight decrease (4%) in average daily population in 2014 compared with 2013, fights and assaults decreased by 38% and incidents involving physical restraints decreased by 15%. While physical restraints decreased, the use of mechanical restraints increased by 20%. Administrators at Waxter attribute the rise in the use of mechanical restraints to an increasing number of girls detained at Waxter following ejection from mental health facilities (Residential Treatment Centers [also called RTCs]).

Secure detention is a particularly inappropriate environment for youth with mental health needs. However, girls with serious mental health needs continue to be sent to and admitted into detention. Incidents of suicide ideation increased by 11% at Waxter in 2014 compared with 2013. And, in addition to the 130 incidents of suicide ideation during 2014, there were also 18 incidents of self-injurious behavior. The Department should therefore increase mental health

services at Waxter. Additionally, plans to train all direct care staff in Youth Mental Health First Aid should go forward.

Waxter faced significant challenges in maintaining full staffing during 2014. At the end of the year, there were 16 vacancies. As a stopgap measure, four staff have been temporarily reassigned to Waxter from another DJS detention center for a period of several months. Vacancies should be filled as soon as possible and Waxter (and DJS human resources) should attempt to maintain a pool of qualified job candidates on an ongoing basis**.**

The Maryland State Department of Education, Juvenile Services Education division provides school related services at Waxter. Currently, vocational education programming is limited to a course offering certification in basic food safety training that is offered once per marking period. Plans to add a course leading to certifications in customer service and medical coding and billing should be implemented.

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. Most cells at Noyes are double (or higher) occupancy. Housing two or more youth per cell is a risk to institutional and resident safety and is contrary to the best practice of placing residents in individual rooms. African Americans represented 76% of youth entries in 2014, up 6% over 2013.

While the overall average daily population decreased by 22% in 2014 compared with 2013, mechanical restraint usage and seclusions both increased by 136%. Fights and staff utilization of physical restraints also increased significantly in 2014 (compared to 2013).

Noyes – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**49**	**37**	**29**
1. Youth on Youth Assault/Fight	84	53	71
2. Alleged Youth on Staff Assault	14	9	5
3. Physical Restraint	139	103	132
4. Use of Handcuffs and/or Shackles	6	11	26
5. Seclusion	19	11	26
6. Contraband	8	15	7
7. Suicide Ideation/Attempt	21	22	37

Noyes administrators attribute the increase in incidents to a rising number of youth with mental health needs and to an increased population of youth who are placed in detention following ejection from committed placement.

Although secure detention is an inappropriate environment for kids with mental health needs, many youth with such needs are sent to and admitted into detention centers. A 68% rise in suicidal ideation at Noyes underscores the need for expanded mental health services. Youth entering detention following ejection from placement are also in need of additional

support. The Department should bolster and enhance mental health services and interventions to meet the needs of all of these children.

The Department should also ensure that Noyes administrators, management and direct care staff are further or more intensively trained to utilize and model verbal de-escalation techniques and that staffers are encouraged to seek assistance from mental health professionals and case manager workers onsite before resorting to restraints and seclusion.

The Department has completed renovations to the outdoor educational trailer at Noyes. The trailer had been in a dilapidated state and in need of many repairs. New floors and doors were installed, walls were freshly painted, and structural deficits were corrected.

A renovated classroom at Noyes.

The Department plans to install additional cameras for monitoring of high traffic areas in the facility, including the areas outside the education trailer and outside the education resource room. These plans should be expedited. The installation of security cameras in these locations will enhance safety for both staff and residents. Camera footage can be used as a staff training tool and its availability prompts assiduousness in written incident reporting.

Lower Eastern Shore Children's Center

The Lower Eastern Shore Children's Center (LESCC) in Salisbury is a secure detention center owned and operated by the Maryland Department of Juvenile Services (DJS/the Department), with 18 cells for boys and six cells for girls. Overall average daily population was down by 10% during 2014 compared with the previous year. African American youth represented 67% of total youth entries in 2014, an increase of 6% (compared to 61% in 2013).

LESCC – Selected Incident Categories	2012	2013	2014
Average Daily Population (ADP)	**19**	**20**	**18**
1. Youth on Youth Assault/Fight	41	27	32
2. Alleged Youth on Staff Assault	11	2	15
3. Physical Restraint	91	160	138
4. Use of Handcuffs and/or Shackles	13	6	5
5. Seclusion	19	8	8
6. Contraband	7	10	1
7. Suicide Ideation/Attempt	13	26	43

Incidents involving fighting were more common and instances of suicide ideation increased substantially at LESCC in 2014 compared with 2013 even though there was a 10% decrease in average daily population.

A longstanding vacancy for an addictions counselor throughout 2014 remains unfilled at time of writing (January 2015). The Department should fill this position as soon as possible as substance abuse-related groups are needed and are not being held.

Western Maryland Children's Center

The Western Maryland Children's Center (WMCC), located in Washington County, is a 24-bed secure detention center for boys owned and operated by the Maryland Department of Juvenile Services (DJS/the Department). African Americans comprised 59% of youth entries in 2014, a 10% increase compared with 2013.

The overall average daily population decreased by 14% percent in 2014 compared with 2013. However, as the chart below indicates, staff utilization of physical restraints, mechanical restraints, and seclusion all increased in 2014 compared with the previous year.

WMCC – Selected Incident Categories	2012	2013	2014
Average Daily Population	**22**	**21**	**18**
1. Youth on Youth Assault/Fight	20	40	40
2. Alleged Youth on Staff Assault	9	0	3
3. Physical Restraint	72	87	96
4. Use of Handcuffs and/or Shackles	17	11	16
5. Seclusion	12	8	12
6. Contraband	5	4	2
7. Suicide Ideation/Attempt	9	14	9

Facility management at WMCC attribute the increase in incidents to an increasing influx of youth with mental health needs and also of youth who placed in detention following ejection from a committed placement. Although secure detention is an inappropriate environment for kids with mental health needs, many youth with such needs continue to be sent and admitted into detention centers. Mental health services and interventions should be enhanced at WMCC to meet the needs of these children and to provide additional support to youth entering detention following ejection from a committed residential placement.

In addition to bolstering mental health services, staff should utilize verbal de-escalation techniques and seek pre-emptive assistance from mental health professionals and case managers before resorting to the use of restraints and seclusion.

There are currently seven vacancies for resident advisor (direct care) positions at WMCC. The Department should facilitate the expeditious hiring of qualified staff to meet facility staffing requirements. Improving staff to resident ratios results in enhanced youth supervision and can lead to fewer incidents. It also allows staff to provide individualized attention to residents who could benefit from extra support.

The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) is responsible for educational and vocational instruction at WMCC. Opportunities for post-secondary educational, vocational, and work experience is currently limited. Students who have already obtained their high school diploma are forced to attend high school level classes.

Youth who qualify should have access to higher education and the option of gaining job-related skills during their time in detention. The Maryland State Department of Education should include WMCC in its plan to introduce career technical education courses such as business administration and certification courses in internet and computing and in green systems technology to DJS facilities.

STRIP SEARCHES AND SHACKLING

"Seventy five percent of youth in the juvenile justice system have experienced traumatic victimization."[39] For survivors of trauma, "any situation in which they have no control over what happens to them can be retraumatizing," including "very blatant examples like strip searches, restraint or…seclusion."[40]

Strip Searches

Current DJS policy requires all youth in DJS facilities to be strip searched following all visits and trips off grounds, including outings earned as a reward for good behavior. Youth are required to remove all of their clothes, squat and cough while observed by staff. All youth are subject to this practice whether or not there is reasonable suspicion that they are hiding something potentially harmful.

As noted above, the majority of youth in the juvenile justice system have experienced traumatic victimization. Strip searches "can trigger flashbacks and exacerbate a traumatized child's stress and mental-health problems."[41] Their utilization "undermines, rather than helps, the child's well-being."[42]

Research on adolescent development indicates that strip searches are particularly harmful to youth, "in fact, 'a child may well experience a strip search as a form of sexual abuse.'"[43]

The Department should end the practice of conducting strip searches without individualized determination of risk or reasonable suspicion that a child is hiding something potentially harmful.

Shackling

Current DJS policy requires all youth to be restrained in handcuffs, shackles, waist chains and a black box with a padlock when they are transported to and from court, medical and educational appointments. Children remain restrained in public waiting rooms and during receipt of medical services.

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

[40] Penney, D., National Center for Trauma Informed Care, "Creating a Place of Healing and Forgiveness: The Trauma-Informed Care Initiative at the Women's Community Correctional Center of Hawaii." 2013, p. 3 http://www.nasmhpd.org/docs/NCTIC/7014_hawaiian_trauma_brief_2013.pdf

[41] Brief for the Juvenile Law Center as Amicus Curiae, Joe Smook v. Minnehaha County, SD. http://www.jlc.org/blog/juvenile-law-centers-findings-strip-searches-youth-detention-cited-international-report

[42] Ibid.

[43] Jessica R. Feierman & Riya S. Shah, *Protecting Personhood: Legal Strategies to Combat the Use of Strip Searches on Youth in Detention*. 60 Rutgers L. Rev. 67 (2007) http://www.scotusblog.com/movabletype/archives/06-1034Amicus.pdf

This policy is in place at all DJS-operated facilities including committed placement centers, where the Department is mandated to provide a program of rehabilitation. It applies uniformly to all youth, including those in committed placement who are permitted to participate in community outings and/or home passes as rewards for good behavior.

Children should not be transported "in conditions that in any way subject [them] to hardship or indignity."[44] Experts in child psychology, adolescent development and trauma have testified on the harmful and damaging effects that shackling has on young people, particularly those who have experienced traumatic victimization.[45] As mentioned above, the majority of youth in the juvenile justice system have experienced some form of trauma.

The Maryland Department of Juvenile Services should end the practice of shackling children without individualized determination of risk and instead develop policies - such as those of New York State - which do not permit the use of mechanical restraints during transportation except if necessary for public safety.[46]

[44] Human Rights Watch. Custody and Control: Conditions of Confinement in New York's Juvenile Prisons for Girls 2006 by Human Rights Watch. http://www.hrw.org/reports/2006/us0906/7.htm

[45] Affidavit of Dr. Marty Beyer http://njdc.info/wp-content/uploads/2014/09/Beyer-Affidavit-w-CV-Jan-2015-Final.pdf; Affidavit of Dr. Julian Ford http://njdc.info/wp-content/uploads/2014/09/Ford-Affidavit-Final-Dec-2014.pdf; Affidavit of Dr. Donald Rosenblitt http://njdc.info/wp-content/uploads/2014/09/Rosenblitt-Affidavit-Notarized-CV-Final-1-6-15.pdf

[46] 9 NYCRR §168.3(a) "Permissible physical restraints, consisting solely of handcuffs and footcuffs, shall be used only in cases where a child is uncontrollable and constitutes a serious and evident danger to himself or others. . . . Use of physical restraints shall be prohibited beyond one-half hour unless a child is being transported by vehicle and physical restraint is necessary for public safety."

BEHAVIOR MANAGEMENT PROGRAM

The Department of Juvenile Services (DJS) has implemented a behavior management program called Challenge in all DJS operated facilities.

Challenge is a points and levels system. Youth receive points daily based on their ability to follow staff directions, maintain personal appearance requirements, demonstrate verbally and socially appropriate behavior, and stay on-task.

Points can be redeemed for designated reinforcer items and/or activities at the end of the week. Reinforcers include items such as name brand hygiene products, stationary, and snacks (fruit, chips, and cookies) as well as activities such as being able to watch a movie or play video games for a designated period of time.[47] Children are eligible for a greater variety of weekly reinforcers as they progress through the levels.[48]

Kids committed to placement sites must progress through five levels of Challenge before DJS will recommend them for release. Promotion from level to level is contingent on a minimum length of stay for each level and on the child completing a checklist of level-specific assignments and tasks. Examples of tasks and assignments include:

- earning a certain percentage of points each week
- attending orientation and therapy sessions
- reciting youth rules from the handbook (referred to as the "youth creed")
- writing and reading aloud several writing assignments such as a goodbye letter to your past life and criminal activity and your challenges to personal change
- keeping a journal
- [and] requesting feedback from staff about one's progress.

While Challenge intends to establish structure and foster personal growth for participants, the lack of uniform applicability, limited opportunities for youth to receive meaningful and timely rewards, and overly rigid adherence to checklists and mandates consistently undermine its aims. The Challenge program can be improved and better equipped to meet its stated objectives by taking the following into account and adjusting the program as needed:

- *Children who are identified as needing individualized and intensive services are housed in a separate unit, the Intensive Services Unit (ISU), in detention. Children placed on the ISU are not allowed to participate in the Challenge program. Additionally, children in predisposition status cannot move through the levels of the Challenge program. They are limited to redeeming their points for hygiene products.*

✓ **Recommendation:** All children in detention should be afforded equal opportunity to participate in the program.

[47] Challenge Program Manual for Youth, pages 14-17.
[48] *Ibid.*

- *Research on adolescent development shows that adolescents are particularly attuned to rewards and that immediate incentives can positively shape adolescent behavior*.[49]

✓ **Recommendation:** Challenge should include more timely incentives for good behavior, including providing daily rewards rather than the current practice of reserving reinforcers for the end of the week.

✓ **Recommendation:** Recognition and rewards for youth accomplishments should be expanded beyond the limited list of weekly reinforcers currently available. Examples of meaningful rewards include community outings, certificates given to kids to acknowledge level promotions and public recognition of their promotion during facility community meetings.

✓ **Recommendation:** Children who receive a certain percentage of points at the end of the week could be rewarded with a pizza party or other organized social event, which can serve as a form of social reinforcement that promotes positive behavior since all participants earned their place in the event for each having accomplished a positive goal. Studies show that "healthy adolescent development is promoted by inclusion in a peer group that values and models prosocial behavior".[50]

- The Challenge program emphasizes compliance and adherence to uniform behavior. **Recommendation:** Emphasis should be shifted toward providing individualized services and interventions in a supportive and therapeutic environment that help foster positive youth development. This approach allows for individualization and recognizes that making mistakes and learning from them is a normal part of adolescent development.[51] Programs which are therapeutically oriented are more effective than those focused on maintaining external control and discipline.[52]

✓ **Recommendation:** Staff should be trained in therapeutic techniques which show them how to develop and maintain healthy and constructive relationships with residents and how to model self-regulation, social, and decision making skills for the youth under their care. As researchers have recognized, "positive modeling and connection between staff members and residents are usually considered to be critical components of effective institutional environments."[53]

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[49] Bonnie, R. J., Johnson, R.L., Chemers, B.M., & Schuck, J.A. (2013) Reforming juvenile justice: A developmental approach. Washington DC: National Research Council. p.94

[50] Ibid p.102

[51] Ibid p.38

[52] Lipsey, M., Howell, J., Kelly, M., Chapman, G., Carver, D. "Improving the Effectiveness of Juvenile Justice Programs." December, 2010, p. 23 http://cjjr.georgetown.edu/pdfs/ebp/ebppaper.pdf

[53] http://www.pathwaysstudy.pitt.edu/documents/RPD%20Residential%20Confinement%20Knowledge%20Brief.pdf (p.5)

SMALLER FACILITY UPDATES

Karma Academy (NOTICE OF CLOSURE)

Karma Academy closed at the end of October of 2014. The facility provided residential treatment for low level sex offenders in a nonrestrictive and homelike setting. Kids adjudicated for sex offenses are often unable to remain in their homes. The Department of Juvenile Services needs to ensure that, with the closing of Karma, youth are not inappropriately placed in a more restrictive setting.

Kent Youth Boys' Group Home (NOTICE OF CLOSURE)

Kent Youth group home closed during the third quarter of 2014. Kent Youth provided treatment services to boys in a safe, non-restrictive and homelike environment.

Liberty House Shelter

Liberty House is a DJS-licensed shelter care facility in Baltimore City operated by Youth Enterprise Services, Inc., that offers a less restrictive alternative to secure detention for boys 13 to 18 years old. Boys reside in a home-like environment and are under 24-hour care with a staff to resident ratio of 1 to 4. They attend school and recreational activities in the community and have access to community-based tutoring and behavioral health services. Incidents were low in 2014 and the shelter continues to be an appropriate alternative to secure detention.

One Love Group Home

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

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

In addition, youth receive individual and group therapy (including trauma therapy if indicated), life-skills training, and substance abuse counseling. Family therapy is not available at this time. Services are provided within the context of a supportive, caring environment.
Incidents remained rare in 2014, and One Love continued to offer youth effective, individualized services in a less restrictive, safe, and nurturing environment.

Morning Star Youth Academy (NOTICE OF CLOSURE)

Morning Star Youth Academy closed during the third quarter of 2014.

The Way Home (temporarily closed)

The Way Home, located in west Baltimore, is a privately operated group home licensed by the Department of Juvenile Services to serve up to 12 girls. The Way Home is temporarily closed while the facility undergoes renovations.

William Donald Schaefer House

William Donald Schaefer House is a staff secure (not locked and fenced) substance abuse treatment program for adjudicated male youth between the ages of 13 and 17. The program has the capacity to serve 19 youth and is located in a converted home in Baltimore city. Program duration is approximately 120 days.

In addition to educational services provided by the Maryland State Department of Education and individual and group substance abuse counseling, Schaefer House partners with multiple community organizations to provide youth with enrichment programs and activities.

In 2014, youth received mentoring services and health education from local organizations. In addition, they had the opportunity to participate in a service learning program offered in partnership with the American Visionary Art Museum. Incidents were low in 2014 and Schaefer House continued to provide valuable services to youth under safe and comfortable conditions.

THE MARYLAND STATE DEPARTMENT OF EDUCATION IN DJS FACILITIES

The Maryland State Department of Education Juvenile Services Education program (MSDE-JSE) is responsible for providing educational services to students in detention and placement centers operated by the Maryland Department of Juvenile Services (DJS). During its tenure, MSDE-JSE has brought educational resources and expertise to DJS-operated facilities. According to MSDE-JSE data, the MSDE-JSE made a 3% increase in math gains in FY 2014 compared to FY 2013. However, a reported 4% decrease in reading scores and 7% decrease in the General Educational Development (GED) test pass rate suggests that more work needs to be done to ensure that children leaving detention and placement have achieved academic progress that will prepare them for future success.[54]

Investing resources to improve educational services and outcomes for MSDE-JSE students should be a priority. For juveniles who are incarcerated, "access to a high-quality education during their confinement is a vitally important and cost-effective strategy for ensuring they become productive members of communities".[55] Youth who participate in some form of higher education are half as likely to be recommitted, even when compared to peers with similar histories.[56]

Recognizing the need to strengthen educational services for incarcerated youth, the federal government recently disseminated a set of guiding principles for providing high quality education in juvenile justice facilities.[57] Consistent with the federal guidelines summarized and distilled below, MSDE-JSE should make several improvements in its delivery of educational services.

- Federal Guideline 1: Provide a facility climate that prioritizes education, provides conditions for learning, and includes behavioral and social support services that address the individual needs of all youth, including those with disabilities.

    - At MSDE-JSE schools, Individualized Education Program(s) [IEPs] are modified to reflect resource availability rather than a student's current needs. Special education staff have both administrative and teaching roles, making it difficult for them to fulfill IEP instructional mandates. MSDE-JSE should enhance resources

[54] Educational Coordinating Council for Juvenile Services Educational Programs Annual Report FY2014 p.8
[55] U.S. Departments of Education and Justice, *Fact Sheet on Correctional Education Guidance Package*, Washington, D.C., 2014, available at http://www2.ed.gov/policy/gen/guid/correctional-education/fact-sheet.pdf
[56] U.S. Departments of Education and Justice, *Fact Sheet on Correctional Education Guidance Package*, Washington, D.C., 2014, available at http://www2.ed.gov/policy/gen/guid/correctional-education/fact-sheet.pdf
[57] U.S. Departments of Education and Justice, *Guiding Principles for Providing High-Quality Education in Juvenile Justice Secure Care Settings*, Washington, D.C., 2014, p. iv. http://www2.ed.gov/policy/gen/guid/correctional-education/guiding-principles.pdf

and support services at its schools, including hiring additional staff, to meet the educational needs of its students.

- Federal Guideline 2: Secure necessary funding to support educational opportunities for all youths comparable to opportunities for peers who are not system-involved.

  - With the exception of one small program at a boys' facility, MSDE-JSE students do not have access to post-secondary education, and options for vocational education are limited. All youth should have access to higher education at local colleges and universities, and through online courses. Youth should also be able to participate in internships and employment opportunities in the community. A variety of hands-on vocational education courses that are of particular interest to the individual youth being served should be available either on grounds or in the community.

  - Girls at MSDE-JSE schools do not have opportunities to pursue higher education. This year two girls at Carter who had earned their GEDs were not afforded access to university, community college, or formal employment. Institutions are required by law to have equal educational opportunities for female and males.[58] MSDE-JSE should offer post-secondary educational opportunities for girls at MSDE-JSE schools. Vocational education programs that are available in boys' facilities, such as basic construction and job safety courses, should be equally available in those serving girls.

- Federal Guideline 3: Actively recruit, employ, and retain qualified education staff with skills relevant to juvenile justice settings who can impact student outcomes by creating and sustaining effective learning environments.

  - MSDE-JSE continues to face significant challenges recruiting and retaining qualified teachers as positions in public school pay better and include school year and summer holidays. Because of the shortage of qualified teachers, some MSDE-JSE teachers have to teach outside of their area of certification. Teacher absences or shortages can also result in students completing worksheets on their own instead of receiving formal instruction. The MSDE leadership should prioritize the MSDE-JSE program and work to secure increased funding and positions to add teachers and support staff.

[58] U.S. Departments of Education and Justice, *Letter on the Civil Rights of Students in Juvenile Justice Facilities,* Washington, D.C., 2014, p.4, available at http://www2.ed.gov/policy/gen/guid/correctional-education/cr-letter.pdf

- Federal Guideline 4: Ensure rigorous and relevant curricula aligned with state academic and career and technical education standards that use methods, tools, materials, and practices that promote college and career readiness.

    - All MSDE-JSE schools should have computers with internet access for educational purposes

    - Current practice is to conduct classroom instruction by living unit rather than grade level at most DJS facilities. Teachers are expected to provide instruction in multiple grade levels in a single class period. Classes should be differentiated by grade level as is common practice in the community.

- Federal Guideline 5: Develop policies and procedures to ensure successful re-entry into communities.

    - MSDE-JSE does not ensure that high school credits earned while in detention or placement are being transferred to a student's community school. Students cannot earn a high school diploma while enrolled in a MSDE-JSE school. MSDE-JSE should coordinate with community schools before and after a student is released to ensure that credits are appropriately applied toward a student's diploma. Students should have the option of earning a high school diploma while enrolled in a MSDE-JSE school.

    - MSDE-JSE should collaborate with DJS to form after care plans for students nearing program completion so that students who leave placement are enrolled in an educational program or have employment options upon release.

Appendix

The Juvenile Justice Monitoring Unit

The mission of the Juvenile Justice Monitoring Unit (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 Department of Juvenile Services (DJS) operated and DJS licensed programs across Maryland.

The Unit was established in 2000, codified in 2002, and originally housed in the Governor's Office of Children, Youth, and Families. In 2006, the monitor's office was moved to the Office of the Maryland Attorney General and renamed the Juvenile Justice Monitoring Unit.

1. The Monitor's Function

Public reports of the JJMU's evaluations are issued on a quarterly basis and address the following issues:

- Treatment of and services to youth, including:
  - whether their needs are being met in compliance with State law;
  - whether their rights are being upheld;
  - whether they are being abused;
- Physical conditions of the facility;
- Adequacy of staffing; and
- Effectiveness of the child advocacy grievance process and DJS monitoring process.

Monitors make unannounced visits to facilities with frequency determined by challenges and progress at each facility. Monitors review the DJS population and case note databases and follow up on incidents in facilities, particularly those involving alleged staff on youth violence, youth on youth violence, and other incidents involving injury or an allegation of abuse or neglect. They also review DJS internal investigative reports and grievances filed by youth in facilities. Monitors participate in multi-agency meetings convened to discuss reports of alleged child abuse or neglect in facilities.

In calendar year 2014, JJMU staff conducted dozens of facility monitoring visits (and attended facility related meetings) that resulted in monitoring reports available at www.oag.state.md.us/jjmu. The Unit worked diligently with the Maryland Department of Juvenile Services and a variety of state and local agencies and youth-serving organizations to improve the quality of services for Maryland youth. The agencies and organizations included the Juvenile Detention Alternatives Initiative of the Annie E. Casey Foundation; the Maryland State Advisory Board for Juvenile Services and various facility advisory boards; Advocates for Children and Youth (ACY); the Female Youth Workgroup; Maryland State's Attorneys' Offices; the Maryland Office of the Public Defender including the Juvenile Protection Division; the

Maryland Disability Law Center; the American Civil Liberties Union of Maryland; Child Protective Services units; and the Montgomery County Commission on Juvenile Justice.

2. Current Issues

During 2014, the JJMU continued to work with DJS and other stakeholders to address particular concerns including overuse of secure detention facilities and of out-of-home commitment. As of early 2015, the population of juvenile services-involved youth at DJS detention centers continues to decline while utilization of appropriate alternatives to secure detention have increased. More work needs to be done to ensure youth are not unnecessarily or inappropriately committed to out-of-home placement.

3. Personnel

The Maryland Juvenile Justice Monitoring Unit (JJMU) consists of four staff members including the director (and not including unfilled vacancies). Staff members utilize knowledge of detention and committed care program operations and management, civil rights law, treatment modalities, social work, education, advocacy and counseling.

Nick Moroney was appointed director in April of 2011. He joined as a monitor in February of 2008, was promoted to senior monitor in early 2010 and became acting director in October of the same year. Before he joined the JJMU, Mr. Moroney taught in an alternative public school for troubled youth. Prior to teaching, he worked as an editor and writer on issues affecting vulnerable populations in Maryland and Washington, D.C. Mr. Moroney holds a Master's Degree from Georgetown University and a B.Sc. from Towson University.

Margi Joshi joined the JJMU as a monitor in August of 2014. Prior to joining the JJMU, Ms. Joshi worked as a social worker for youthful offenders at a treatment-oriented maximum security prison where she coordinated a mentorship and art program and led re-entry modules. Before becoming a social worker, Ms. Joshi worked as a regulatory compliance specialist for a large research university. She holds a Juris Doctor and a Master's Degree in Social Work from Tulane University and a B.A. degree from Georgetown University.

Tim Snyder is a senior monitor who joined the Unit in 2001. Before becoming a monitor, Mr. Snyder spent eleven years serving as Director of the New Dominion School in Maryland, an adventure-based residential treatment program for troubled youth. He also worked in direct care and family services at New Dominion School in Virginia. As a private practitioner, Mr. Snyder consulted with numerous families experiencing difficulties with their children. He holds an M.A. in Pastoral Counseling (special emphasis in marriage and family counseling) from LaSalle University and a B.A. degree from Guilford College (Sociology).

Eliza Steele is a senior monitor who joined the JJMU in 2012. Prior to accepting a permanent position, Ms. Steele worked as an intern for the JJMU during 2011 when she visited facilities and contributed to the 2011 Pictorial Report. Ms. Steele has also studied with a judge in juvenile court in Pennsylvania where she attended court proceedings and shadowed a school based probation officer. She holds a B.A. degree from Dickinson College and is pursuing a Master's Degree in Social Work at the University of Maryland.

MARYLAND
Department of
Juvenile Services

Successful Youth • Strong Leaders • Safer Communities

February 18, 2015

DJS Response to the Juvenile Justice Monitoring Unit's 2014 Annual Report

The Department of Juvenile Services (DJS) appreciates the time and effort that JJMU has taken to provide the 2014 Annual Report. We have thoughtfully considered all findings and recommendations provided. We are appreciative of the JJMU's recognition of our accomplishments during the past year.

The Department has and continues to work to implement reform efforts designed to keep low risk youth out of secure confinement. This includes detention reforms achieved through the Juvenile Detention Alternatives Initiative (JDAI), an Annie E. Casey Foundation program as well as legislative reforms such as SB 122 which requires an intake officer who authorizes detention of a child for a violation of community detention to immediately file a petition to authorize the continued detention of a child. The juvenile court must hold a hearing on the petition no later than the next court day unless extended for no more than five days by the court on good cause shown. We will continue our efforts to expand JDAI collaborations statewide.

The Department supports that where appropriate, intensive, community based services are preferable to out of home placements. The department has invested $25 million to stand up and support evidence based community located services like Functional Family Therapy (FFT) and Multi-Systemic Therapy (MST). We also maintain slots for the statewide Care Management Entity (CME) which uses a community based wrap-around service model, and the Department contracts with Youth Advocate Programs, Inc. in Baltimore City, a nationally recognized non-residential program that provides community based programs for high risk youth as an alternative to residential placement. Additionally, DJS has expanded its use of community based programming in Prince George's County by restoring funding for the Choice program to serve youth in Prince George's County. DJS has also contracted with Community Conferencing to prioritize its use as an alternative to court action.

The Department continues to evaluate the population of youth that must be served in out of home placements. Currently, the Department is working with the Annie E. Casey Foundation to analyze decisions and processes that drive juvenile commitments.

Despite the success evidenced by falling crime rates and Department reforms in driving down detention populations, a population of committed youth still remains in committed programs out of state due to not having appropriate programming space in Maryland to accommodate them. The Department is obligated to serve these youth committed by the court in a setting determined by the court. In order to meet the security level and treatment needs of these youth, the Department must contract for out of state services.

Our view is that it is far better for those youth to be treated in Maryland rather than an out of state program and therefore, we will continue to explore ways to meet that need with services located in Maryland.

DJS Response to JJMU Snapshot of Ongoing Concerns

- **JJMU Capital Plan**
  The Department will make adjustments to the capital construction plan to address the needs of the committed population. See above paragraph regarding the committed population.
- **JJMU Use of Mechanical Restraints, Strip Searches**
  The Department's policies must address public safety, and safety concerns for youth and staff. Current procedures require the use of mechanical restraints routinely for all youth placed in *hardware secure facilities*, to include detention and two committed facilities. Youth placed in staff secure facilities are transported in mechanical restraints if it is determined that they present as a security risk. Youth are strip searched after visits to reduce and eliminate the introduction of contraband in the facility.
- **JJMU Current law for CPS investigations**
  DJS abides by current law in reporting allegations of abuse. In addition to notifying Child Protective Services, all allegations are reported to the State Police for investigation. Additionally, DJS's internal Inspector General's office conducts investigations into allegations of abuse independent of Child Protective Services and the State Police.
- **JJMU Youth Phone System**
  The federal Prison Rape Elimination Act, Standards for Juvenile Facilities require that youth are provided at least one way to report abuse or harassment to a public or private entity, or office that is not part of the agency and is able to receive and immediately forward youth reports. The Department has installed a youth phone in the dayroom of each living unit to give youth direct access while enabling ongoing supervision by direct care staff. The Department has contracted with Maryland 211 to provide a 24/7 hotline to receive youth complaints of sexual abuse or harassment. Reports are forwarded to Child Protective Services and the DJS Office of the Inspector General for investigation. Utilization of the phone system gives youth the ability to make reports of abuse immediately while remaining anonymous if they choose to, which is a requirement of the Prison Rape Elimination Act. Having a phone for the sole purpose of making PREA complaints would not afford the youth anonymity. The phone system is also used by youth to make calls to family members. Sensitive calls that require a level of privacy are made under the supervision of the case manager in the case manager's office. Calls to youth attorneys are not recorded. All other recorded calls are made available to the Inspector General as needed for investigative purposes.

Need for Treatment Resources in Committed Placement Centers

Beginning in July 2013, the Department established a comprehensive evaluation initiative known as MAST, Multi-Disciplinary Assessment Staffing Team. The MAST initiative standardized evaluations that are completed when youth are in detention. These evaluations include completion of a psychological, psycho-

social, educational testing, trauma screening, substance abuse and medical screening. Therapists in residential facilities use the MAST evaluations, in addition to their own assessments, to develop an individualized treatment plan for each youth. Therapists provide individual counseling and cognitive-behavioral therapy to youth, both of which have been shown to be effective in addressing the mental health issues of juvenile justice youth. Issues of anger management and trauma are addressed individually. In groups, anger management is addressed through the use of psycho-educational materials in Forward Thinking, an evidence-based journaling series that focuses on the development of appropriate coping strategies. Youth participating in the 7 Challenges Substance Abuse Program also receive anger management counseling. Additionally, the Department has conducted extensive research to determine best practices and evidence-based approaches to providing trauma informed care and anger management. The Department is in the process of developing a request for bids to expand staff training and services to youth in these areas.

The type of programming and frequency of youth contact with a therapist is based on the individual needs of the youth. The JJMU report references the Wisconsin "Mendota Juvenile Treatment Center Program" which describes a specialized program that offers intensive mental health treatment to the most violent male adolescents held in a correctional facility. In Maryland, the state operated program that serves this population is located at Victor Cullen Academy. Like the Mendota Juvenile Treatment Center Program, the ratio of behavioral health staff is twice that assigned to other committed programs. The ratio of therapists to youth at Victor Cullen is one therapist for every 12 youth, which meets and exceeds therapist generally assigned in residential treatment centers.

Family Engagement in Committed Placement Centers

Therapists determine the need and schedule family counseling and therapy sessions. Visitation is offered at each facility two times each week. Upon request, the DJS community case managers assist families with transportation to the facilities. Youth are afforded home visits as a therapeutic intervention to help prepare them to transition back to the community. The Department is currently developing a re-entry strategic plan with a goal of increasing family engagement.

Education in Committed Placement Centers

The Maryland Department of Education is responsible for providing education services to DJS youth. We support the need for GED, post-secondary education and expanded vocational education for youth. Youth housed at the four Youth Centers are eligible to participate in the college program at Garrett College.

FACILITY RESPONSES

Victor Cullen

Victor Cullen is the only state run hardware secure treatment facility which serves youth with the most serious committing offenses and aggressive histories**.** Given the impulsivity and needs of this population incidents of aggression fluctuate. The facility management and treatment staff have been responsive in addressing the individual needs of youth. DJS and education staff work collaboratively to address behaviors of youth occurring in school. The Department is developing an intensive services unit to provide an additional alternative to addressing the needs of the most aggressive youth. Behavior health resources at Victor Cullen are adequate to meet the needs of the population. There are six mental health clinicians assigned to the facility, four therapists, a clinical supervisor, and a half time licensed psychologist who provides programmatic and clinical supervision. The Department is seeking to procure additional programming and training for all staff in the areas of trauma informed care and anger management.

Family therapy is provided by clinical staff. Youth are afforded home visits as a therapeutic tool to assist with re-integration with their families. Youth also maintain contact with their families via facility visits, letter writing, video conferencing and phone calls. Transportation assistance is also provided to families. The Department funds two postage stamps and two phone calls weekly for each youth.

Comprehensive services to youth also include daily recreation and participation in the C.H.A.M.P.S. (Changing Habits and Making Progressive Strides) Program, an intramural sports, arts, and academic challenge program. Activities include competitions in basketball, baseball, soccer, tennis, and bowling; art, poetry and creative writing contest; and academic bowl competitions. Intramural activities are scheduled with other DJS facilities, and with Job Corps youth. Youth at Victor Cullen are also afforded opportunities to participate in the Reflections Camping Program, a year round camping program located at Meadow Mountain Youth Center. Camping activities are varied, and include confidence and team building events. The Reflections Program has a full ropes course. The Department is considering establishing some of the components of the ropes course at Victor Cullen.

Youth Centers

Programming to address anger management and trauma is described in the Need for Treatment Resources in Committed Placement Centers section of this report.

Youth located at the four Youth Centers have the opportunity to earn college credits through participation in the Garrett Community College Program. During the past year 20 eligible youth participated.

J. DeWeese Carter Children's Center

At admission all youth are screened for trauma exposure using the Trauma Symptom Checklist for Children (TSCC). Each youth receives an individualized treatment plan to address their specific treatment needs, along with weekly individual therapy and bi-weekly family therapy. Programming to address anger management is provided through CHALLENGE, the Department's behavior management program, individual counseling and therapy, and psycho-educational material utilizing Forward Thinking, a cognitive behavioral journaling series that uses evidence-based strategies to assist youth in making positive changes to their thoughts, feelings, and behaviors. Additionally, the Department has conducted extensive research of best practices and evidence-based approaches to expand anger management programming and trauma informed care. The Department is in the process of developing a request for bids to expand staff training and services to youth in these areas.

JJMU cites research indicating that "restraint and seclusion is likely to re-traumatize women who are trauma survivors…." Department policy and procedures uses seclusion only as therapeutic intervention to allow youth an opportunity for "time-out" to regain self-control. Seclusion is not used as punishment, and is limited to situations where youth present an imminent threat of physical harm to themselves or others, they have not responded to less restrictive methods of control or for whom less restrictive measures cannot reasonably be tried; or when youth have escaped or are attempting to escape. Youth are not placed in seclusion for a pre-determined amount of time. When seclusion is used, staff observes youth every 10 minutes and counsel with the youth to return him/her to the treatment milieu as soon as possible. Staff that meet with the youth may be case managers, behavioral health, and/or supervisors. The Department provides extensive de-escalation training to all staff to minimize the use of restraints and seclusion. There were 15 incidents of seclusion used at Carter during 2014, that averaged one hour per incident. All

incidents of restraint and seclusion are reviewed by facility administrators to ensure compliance with Departmental policy and procedures.

As noted by JJMU, the Carter Center has limited indoor recreation space. The Department contracts with the Kent County Parks and Recreation Center to augment the need for indoor space during inclement weather. Youth are transported to the recreation center where there is a large indoor gym.

Detention Centers

The Department's efforts to support alternatives to detention are discussed in the opening remarks of this response.

In July 2014, the Department completed the roll out and implementation of CHALLENGE, the behavior management program. CHALLENGE is now operational in all DJS detention and residential facilities. This enables single focused and directed training resources for staff. Outcomes are showing improved consistency of managing youth behavior. The Department appreciates JJMU's recognition of the improved structure and reduction of aggressive behavior in detention.

The JJMU reported a concern for youth with mental health needs being placed in detention. Recognizing that placement in detention can be an emotionally stressful event, the Department screens **all** youth at admission utilizing the Massachusetts Youth Screening Instrument (MAYSI) to identify youth who may require immediate mental health care. A more extensive evaluation is completed by mental health staff as part of the Multi-Disciplinary Assessment Staffing Team (MAST) process. Throughout a youth's stay in detention behavioral health staff are available and responsive to the needs of youth. When behavioral health staff determine a youth has intensive mental health needs that cannot be meet at the facility, the youth is referred for hospitalization and/or placement in an intensive mental health services facility.

All DJS direct care staff are trained to refer youth in crisis to mental health staff for an assessment. Beginning June 2014, the Department began utilizing Youth Mental Health First Aid, USA for Adults Assisting Young People, an evidence based model to train all direct care staff. Youth Mental Health First Aid is designed to teach staff how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. The course introduces common mental health challenges for youth, reviews typical adolescent development and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations. As required by the Department's Suicide Prevention Policy and Procedures staff are trained to respond to all verbalizations, self-injurious behaviors and suicide gestures by providing one on one direct supervision until the youth can be assessed by mental health staff.

Baltimore City Juvenile Justice Center

Facility administrators and behavioral health staff have been responsive to the increase in acts of aggression. During the 4th quarter of 2014 implemented strategies resulted in a decrease of incidents.

Cheltenham Youth Facility

The Department in partnership with the Annie E. Casey Foundation continues to work with the stakeholders in Prince Georges County to launch the Juvenile Detention Alternative Initiative.
The Department's IT unit has corrected the database problem reported by JJMU. All incidents occurring at Cheltenham have been entered in the database.

Charles H. Hickey, Jr. School

The Department appreciates JJMU's recognition of the efforts of facility staff to more effectively manage youth behavior. JJMU reports that youth in the Intensive Services Program (ISU) are not permitted to participate in special activities. The youth placed in the ISU program are youth who have engaged in assaultive behaviors with their peers and staff and therefore are restricted from participating in rewarding extracurricular activities.

Alfred D. Noyes Children's Center

The increase in restraints can be attributed to staff managing the behavior of several youth with chronic mental health and maladaptive behaviors. Seven youth accounted for an 80% increase in incidents during the 4th quarter. Consistent with protocols these youth were evaluated by mental health professionals and referred for psychiatric hospitalization as needed. Long term specialized placements were secured to meet the needs of the youth. Behavioral health staff, administrators and direct care staff work collaboratively to manage the behaviors of youth. All incidents of restraint and aggression are reviewed by the facility administrator and monitored by the executive director. Use of restraints is required to prevent youth from harming themselves or others. All direct care staff complete crisis prevention management, verbal de-escalation, and mental health first-aid training annually.

Lower Eastern Shore Children's Center

The slight increase in incidents of youth on youth assaults, 32 in 2014 compared to 27 in 2013, were due to incidents occurring in the last two months of the year. These behaviors were attributed to a younger, more impulsive age group ranging from 12 to 14 years of age. These youth were provided additional behavioral health services.

Incidents of suicidal ideations/verbalizations increased during 2014 compared to 2013 at LESCC. As reported, the Department screens **all** youth at admission utilizing the Massachusetts Youth Screening Instrument (MAYSI) to identify youth who may require immediate mental health care. Twenty six percent of the reported ideations were reported during this screening. The facility is staffed with trained behavioral health staff to address the mental health needs of youth.

A more extensive evaluation is completed by mental health staff as part of the Multi-Disciplinary Assessment Staffing Team (MAST) process. Throughout a youth's stay in detention behavioral health staff are available and responsive to the needs of youth. When behavioral health staff determine a youth has intensive mental health needs that cannot be meet at the facility, the youth is referred for hospitalization and/or placement in an intensive mental health services facility.
The Department continues to actively recruit to fill the vacant addictions counselor position at LESCC. In the interim, substance abuse assessments have been re-assigned to staff from headquarters.

Thomas J.S. Waxter Children's Center

The Department appreciates JJMU's recognition of the decrease in incidents of aggression and physical restraints. Mechanical restraints are applied as a last resort to safely move youth to appropriate locations for de-escalation. Two youth accounted for 66% of the mechanical restraint usage in 2014. Youth are evaluated by behavioral health staff following the use of restraints. Staff training in de-escalation, Youth Mental Health First Aid, USA for Adults Assisting Young People, and the Department's Suicide Prevention Policy and Procedures is ongoing. All incidents of physical and mechanical restraint use are reviewed by facility administrators to ensure adherence to Departmental policy and procedures.

The following positions are assigned to the facility to provide mental health services: a licensed clinical professional counselor, a clinical social worker, licensed psychologist, two substance abuse counselors, and a half time licensed social worker. The social worker and the psychologist also conduct Multi-Disciplinary Assessment Staffing Team (MAST) evaluations for the youth at the facility. Clinical hours have been expanded to provide coverage evenings and weekends.

The Waxter facility experienced a significant number of vacancies. Resident advisors were voluntarily re-assigned from two facilities to support staffing during recruitment to fill the vacancies. Recruitment interviews are held every two weeks. At present two resident advisor positions are vacant.

Western Maryland Children's Center

The slight increase in the use of restraints and seclusion were required interventions to address the behaviors of extremely aggressive youth. The facility has adequate behavioral health staff assigned consisting of a full time social worker, an addictions professional counselor, and a half-time psychologist.

Three of the seven vacant resident advisor positions have been filled. Recruitment is underway to fill the remaining positions.

William Donald Schaefer House

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

BEHAVIOR MANAGEMENT PROGRAM

In July 2014, the Department completed implementation of the CHALLENGE Program in all detention centers. The CHALLENGE Program is now implemented in all DJS detention and committed facilities. This enables the Department to focus training and supervisory resources, and the youth learn one set of expectations which better prepares them to adjust to a change of environment when they move from detention to a DJS committed facility. CHALLENGE is a behavior management program which incorporates evidence-based behavioral principles. Behavior management is grounded in the principles of *positive reinforcement* and *modeling* and is intended to encourage pro-social behavior. Behavior management strategies are designed to elicit *positive* behavior. Reinforcing positive behavior means providing a stimulus or reward that strengthens the behavior and increases the future probability of the desired behavior. The program uses social reinforcement, a point and level system, and tangible reinforcers to strengthen desired pro-social behaviors. Research supports the use of behavior management strategies for maintaining order, minimizing disruption, improving climate and reducing problem behavior. The Department has achieved positive outcomes as evidenced by improved interactions between staff and youth and a reduction in acts of aggression.

All programs require ongoing training and monitoring to support consistent application. Staff receives CHALLENGE training in entry level training, annual in-service training, and interim updates as needed at each facility. Program oversight and modifications are approved by the Central Program Committee, chaired by the Director of Behavioral Health; implementation is monitored by two behavior health clinical supervisors (one assigned to detention and one to committed programs), in addition to administrators and behavior health staff at each facility. Program evaluations are conducted by the Department's research and evaluation unit.

The CHALLENGE Program clearly establishes behavioral expectations for youth and staff responses for youth accountability. These expectations create a structured and safe environment in which treatment services can be provided. It establishes an environment of respect and fairness that places the responsibility for compliance and behavioral change on the youth. The program uses checklists that guide behavioral and treatment service expectations through each level. Contrary to the JJMU report, these checklists do not prohibit individualized services for youth; in fact Treatment Teams are expected to amend the checklist to address each youth's target behaviors and treatment services. In committed programs an Individualized Treatment Plan is established for each youth. The plan is monitored monthly by the Treatment Team to assess each youth's progress towards earning release.

JJMU reports a concern that youth who are placed in Intensive Service Units (ISU) are not permitted to participate in the CHALLENGE Program. The behavior of youth placed in ISU continues to be managed using the CHALLENGE Program. Youth placed in ISU are placed there because they have been assaultive to peers and/or staff in the general population. Aggressive behaviors are not behaviors that should be reinforced and therefore these youth do not earn levels or privileges while removed from the general population. JJMU cited a second group of youth who do not progress through the CHALLENGE levels. These are youth placed in detention pending adjudication. Youth in pre-adjudication are placed on level I and they earn level I privileges. If committed, they begin to earn levels towards eligibility for release as do all other youth. JJMU suggests that youth should receive daily reinforcers. Staff is trained to socially reinforce youth by giving verbal praise. Youth also receive immediate reinforcement by the awarding of points and written positive comments on their point cards. Each youth's percentage of points earned daily and level promotion is posted on a Challenge board in the living unit. Recognition of youth accomplishments are addressed in daily community meetings held on the unit. On a weekly basis, youth earn an opportunity to go to the reinforcer (games) room where they can spend points for items such as snacks, stationary, brand name hygiene products, and video games. Providing this level of reinforcer each day would significantly reduce the incentive for youth to meet behavioral expectations. In addition to weekly reinforcers, youth have opportunities to earn special privileges, such as participation in pizza parties, movie events, and off campus trips, as appropriate.

The majority of the JJMU recommendations regarding CHALLENGE Program implementation are already being implemented. Contradictions to the principles of behavior management were noted above.

Private Providers

Silver Oak Academy

Silver Oak Academy (SOA) is a privately operated staff secure group home licensed by the Department. In 2014 there was a noted increase in incidents of aggression requiring the use physical restraints. Program changes impacting the increase in incidents include a 15% increase in population, management of significant behavior problems, and re-training of staff in new programming. SOA continues to provide valuable programming for DJS youth.

Smaller Facility Updates

As reported by JJMU, a number of smaller programs closed during 2014, however, the Department continues to contract for programs to meet the needs of the current population.

Maryland State Department of Education
Juvenile Services Education

Response to JJMU 2014 Annual Report

Page 12

JJMU Statement: "Currently, there is no GED or post-secondary track available to students."

MSDE Response: Juvenile Services Education (JSE) has a GED curriculum that is imbedded in the core courses taught in the facilities. Students receive instruction in the content area which allows them to earn credit as well as develop the skills necessary to succeed on the GED.

Students with high school diplomas/GED first take the Accuplacer which is a placement test used by community colleges to determine if a student needs to take non-credit courses in mathematics or English prior to enrolling in credit-bearing postsecondary coursework. JSE provides the remediation to students who are not successful on the Accuplacer. The experience to date is that most students require remedial course work prior to postsecondary enrollment.

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Page 14

JJMU Statement: "There is a need for increased vocational education options at the youth centers especially for youth who may have already earned their high school diploma or GED. Community based options for employment and vocational training should also be available. Currently, students do not have access to the internet for educational purposes."

MSDE Response: JSE provides a variety of career technology education (CTE) options for youth including those who have already earned their high school diplomas and continues to explore additional CTE opportunities that can benefit its students. JSE is supportive of developing options for community based employment experiences for youth through collaboration with the Department of Juvenile Services.

JSE is currently in the process of upgrading technology resources within all school sites. As this process continues JSE in concert with DJS will be exploring options for access to designated internet based learning opportunities.

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Page 18

JJMU Statement: "The MSDE-JSE program should have an established track for post-secondary school students that include access to a nearby college and to online courses.

The Department of Juvenile Services and MSDE-JSE should work together to implement a community-based program of employment and internship opportunities. Currently, vocational education programs are not offered on a daily basis at Carter and are limited to a basic food hygiene course and four modules in network cabling. Plans to add a course leading to certification in customer service should go forward.

Girls at Carter continue to be transported to medical and educational appointments in handcuffs and shackles fastened to belly chains with black boxes (see page 33). Plans to have girls placed at Carter take the GED test at a nearby community college should be implemented without requiring girls to be mechanically restrained during transport."

MSDE Response: JSE currently has an established post-secondary program through Garrett College. This program is housed at Backbone Youth Facility. Over the past year, the number of youth qualifying for this program has been steadily decreasing. JSE is exploring options for providing online post-secondary options for implementation as JSE's current technology initiative is completed.

JSE is supportive of collaborating with DJS to provide youth opportunities to participant in community based employment/internship options. JSE provides a variety of career technology educational courses/classes for the students at Carter. An additional class culminating in a retail customer services certification is scheduled for deployment in the near future.

Measures taken for safety and security reasons are not within the purview of MSDE.

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Page 23

JJMU Statement: "Youth at CYF who struggle with issues of aggression may be placed on the Intensive Services Unit (ISU). These youth have been identified as being in need of increased supports. However, during 2014, they were not receiving education services equal to those of youth on regular housing units. Plans for the Maryland State Department of Education Juvenile Services Education division to implement a full education schedule (including six hours of teacher instruction) on the ISU should go forward."

MSDE Response: JSE has collaborated with DJS to ensure youth residing on CYF's ISU unit are provided with six hours of teacher-led instruction per day.

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Page 25

JJMU Statement: "The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) is responsible for providing educational services at Hickey. Youth placed on the ISU do not receive the required six hours of educational instruction on a consistent basis. Teacher instruction for kids in the ISU should be for the full length of the school day at Hickey."

MSDE Response: JSE has collaborated with DJS to ensure youth residing on Hickey's ISU unit are provided with six hours of teacher-led instruction per day.

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Page 27

JJMU Statement "The Maryland State Department of Education Juvenile Services Education division provides school related services at Waxter. Currently, vocational education programming is limited to a course offering certification in basic food safety training that is offered once per marking period. Plans to add a course leading to certifications in customer service and medical coding and billing should be implemented."

MSDE Response: JSE provides a variety of career technology educational courses/classes for the students at Waxter including: ServSafe, office systems management, and C-Tech. An additional class culminating in a retail customer services certification and medical billing and coding are scheduled for deployment in the near future.

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Page 32

JJMU Statement "The Maryland State Department of Education Juvenile Services Education division (MSDE-JSE) is responsible for educational and vocational instruction at WMCC. Opportunities for post-secondary educational, vocational, and work experience are currently limited. Students who have already obtained their high school diploma are forced to attend high school level classes.

Youth who qualify should have access to higher education and the option of gaining job related skills during their time in detention. The Maryland State Department of Education should include WMCC in its plan to introduce career technical education courses such as business administration and certification courses in internet and computing and in green systems technology to DJS facilities.

MSDE Response: The short length of stay within detention facilities affects the types of career technology educational courses which can be offered. Currently, JSE provides opportunities at detention sites for youth to receive instruction in office systems management and courses such as ServSafe which either provide youth with the opportunity to develop basic computer skills and or/earn industry certifications and do not require a large number of direct instructional hours. At WMCC JSE offers ServSafe and OSHA 10 in addition to Office Systems Management. JSE will explore options for implementing Green Systems at WMCC.

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Page 39

JJMU Statement: "At MSDE-JSE schools, Individualized Education Program(s) [IEPs] are modified to reflect resource availability rather than a student's current needs. Special education staff have both administrative and teaching roles, making it difficult for them to fulfill IEP instructional mandates. MSDE-JSE should enhance resources and support services at its schools, including hiring additional staff, to meet the educational needs of its students."

MSDE Response:
JSE does not support amending or developing student IEPs to reflect resource availability. IEPs implemented at JSE schools –whether amended or initially developed- must be individually appropriate for students with disabilities to receive special education and related services in the least restrictive environment and progress in the general curriculum. JSE implemented a process to monitor and verify that IEPs are reviewed and drafted consistent with the procedural requirements of IDEA and State law.

JSE has a comprehensive monitoring system both at the program and school level. The Special Education Coordinator's program monitoring team regularly schedules monitoring visits to the program's school sites throughout the year. The program monitoring team provides feedback to each school principal which includes specific information on IEP revisions/changes. Principals are required to conduct regular school-based monitoring of records and practices to ensure adherence to special education policies and procedures, including IEP revisions.

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Page 40

JJMU Statement: "With the exception of one small program at a boys' facility, MSDE-JSE students do not have access to post-secondary education, and options for vocational education are limited**."**

MSDE Response:
JSE currently has an established post-secondary program through Garrett College. This program is housed at Backbone Youth Facility. Over the past year, the number of youth qualifying for this program has been steadily decreasing. JSE is exploring options for providing online post-secondary options for implementation as JSE's current technology initiative is completed.

During the past year JSE completed a significant expansion and update of the Career and Technology Education (CTE) offerings in its schools in both committed and detention facilities across the state. CTE coursework is now aligned to the programs of study being offered in the Local School Systems so that students can return to their community schools with credit towards CTE graduation requirements in Business Administrative Services, Construction, and Career Research and Development. JSE also offers specific coursework to prepare youth for direct entry into the telecommunication and hospitality industries. Students can leave with the following industry certifications: ServSafe, OSHA 10, C-Tech, NCCER Construction and Office Systems Management. The Program continues to explore other career-focused options for its students.

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JJMU Statement: "MSDE-JSE should offer post-secondary educational opportunities for girls at MSDE-JSE schools. Vocational education programs that are available in boys' facilities, such as basic construction and job safety courses should be equally available in those serving girls."

MSDE Response: At present, post-secondary opportunities are made available for girls on a case by case basis. JSE plans on deploying OSHA 10 at additional sites including Waxter and Carter based upon completion of training of additional teachers.

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JJMU Statement: "Some MSDE-JSE teachers have to teach outside of their area of certification. Teacher absences or shortages can also result in students completing worksheets on their own instead of receiving formal instruction."

MSDE Response: JSE schools, like those in the local school systems, sometimes require teachers to provide instruction in content areas for which they do not hold an endorsement. In these instances, these teachers are provided with support from designated Highly Qualified (HQ) Lead Content Teachers. These HQ Lead Content Teachers also provide support for staff covering classes in situations of long-term absences and vacancies.

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Page 41

JJMU Statement: "All MSDE-JSE schools should have computers with internet access for educational purposes. Current practice is to conduct classroom instruction by living unit rather than grade level at most DJS facilities. Teachers are expected to provide instruction in multiple grade levels in a single class period. Classes should be differentiated by grade level as is common practice in the community.

MSDE Response:

JSE is currently working to install technology in all of its facilities. Smart Boards along with laptops have been installed at all sites.

MSDE and DJS are exploring the feasibility of grouping students based upon their achievement levels. A pilot program at Victor Cullen began in January 2015.

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JJMU statement: "MSDE-JSE does not ensure that high school credits earned while in detention or placement are being transferred to a student's community school. Students cannot earn a high school diploma while enrolled in a MSDE-JSE school. MSDE- JSE should coordinate with community schools before and after a student is released to ensure that credits are appropriately applied toward a student's diploma. Students should have the option of earning a high school diploma while enrolled in a MSDE-JSE school.

MSDE Response:
As previously shared in MSDE's response to the JJMU's First Quarter 2014 Reports, MSDE has taken actions to promote the acceptance of credits being applied towards students' graduation requirements. Course names and content for academic and required classes have been revised to be consistent with the core subjects in the local school systems. These include: English (9-12), History (United States, Government, and World History), Math (Concepts of Algebra, Algebra I/II, Geometry, and Pre-Calculus), and Science (Biology, Physical Science, Concepts of Chemistry, and Environmental Science). Credits earned during a youth's enrollment in JSE are documented on the standardized State Record Transfer Forms. Pursuant to MSDE/DJS Transition Procedures, the reports are forwarded to the receiving school system when the youth is released from DJS custody. The receiving school is responsible for applying the credits earned in the JSE programs towards the student's graduation requirements.

The LSS is able to contact the JSE school or the Program's Coordinator for Guidance and Student Records in the event that there are questions regarding a student's credits. The JSE Coordinator for Guidance and Student Records completes quarterly audits of students' records and contacts the LSS regarding credits earned. The last audit indicated that credits earned by students enrolled in JSE were being accepted by LSSs.

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