

**The Youth Rehabilitation and Treatment
Center Special Oversight Committee
of the Nebraska Legislature**

**Legislative Report
December 15, 2020**

The Youth Rehabilitation and Treatment Center Special Oversight Committee Members:

Senator John Arch, District 14 - Chair

Senator Tony Vargas, District 7 - Vice Chair

Senator Tom Brandt, District 32

Senator Machaela Cavanaugh, District 6

Senator Mike Groene, District 42

Senator Sara Howard, District 9

Senator Steve Lathrop, District 12

Senator John Lowe, District 37

Senator Dave Murman, District 38

Senator Patty Pansing Brooks, District 28

Senator Anna Wishart, District 27

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Acknowledgments:

The Oversight Committee would like to recognize Senator Steve Halloran for effectuating the meeting with Hastings city officials and for his involvement. The Committee would like to thank Inspector General for Child Welfare Jennifer Carter, Ombudsman Julie Rogers, Nebraska Commissioner of Education Matt Blomstedt, State Court Administrator Corey Steel, Deputy Administrator of the Juvenile Services Division Jeanne Brandner and Foster Care Review Office Executive Director Monika Gross for their participation in meetings, hearings and tours and for providing information and insight. Additionally, the Committee thanks Department of Health and Human Services Chief Executive Officer Dannette Smith and her team for arranging access to the youth facilities, providing information on current operations, answering a multitude of questions, sharing their vision and recognizing the Legislature as a partner. Finally, the Committee expresses its appreciation for the many dedicated people who work everyday to give the youth in Nebraska's juvenile justice system an opportunity for a brighter future.

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Executive Summary

In August of 2019, a multiple system breakdown of the Youth Rehabilitation and Treatment Center (YRTC) program on the Geneva campus resulted in an emergency situation necessitating the relocation of the girls at YRTC-Geneva. While the girls were temporarily moved as an immediate safety measure, the event served as a catalyst for the Department of Health and Human Services (DHHS) to quickly embark on an undertaking to make sweeping changes to the programs serving youths under the supervision of the department's Office of Juvenile Services (OJS). On January 22, 2020, the Legislature's Health and Human Services Committee released a report entitled *Health and Human Services Committee Report to the Nebraska Legislature on the Youth Rehabilitation and Treatment Centers* (HHS report)¹. The report includes an examination of the events leading up to the breakdown and a detail of actions taken from August 2019 to January 2020. This report is a continuation of that work.

In response, the Legislature enacted a series of measures intended to provide a regulatory framework to continue the transformation of these programs into a stronger rehabilitative model. This transition was initially started with the passage of LB 561 in 2013 and LB 464 in 2014. The legislation passed by the One Hundred and Sixth Legislature during the 2020 session continues the trajectory towards measured change and includes: a definition of YRTCs, their purpose and services; a requirement for a 5-year operations plan with stakeholder input; a requirement for an emergency plan; a requirement for a transportation plan; a requirement to hire a superintendent to oversee educational programs; clarification of agency responsibility with respect to maintenance and building repairs; a requirement to use evidence-based and validated tools, programming and services at the YRTCs; the prohibition of restricting communication with family as punishment; clarification of the juvenile court's jurisdiction; a requirement for an annual facilities review and the creation of the YRTC Special Oversight Committee.

The YRTC Oversight Committee, consisting of 11 legislative members, met with various state officials to discuss their involvement with youth under the jurisdiction of OJS, toured the facilities and held a public hearing to gather additional information. Through this process, the Oversight Committee gained a better understanding of the path DHHS was attempting to take and DHHS accepted the importance of the Legislature's involvement in reaching the shared goal of improving the YRTC system and services under OJS. In order for the Legislature to continue its role in guiding and facilitating the path forward, the Oversight Committee makes the following recommendations:

For legislative action:

- Fund a cost and needs assessment for an inpatient (hospital or psychiatric residential treatment center) as permitted under Neb. Rev. Stat. §83-106;
- Require the Department of Health and Human Services to conduct a cost assessment for necessary capital improvements and structural changes to the buildings on the Kearney campus, including but not limited to restructuring sleeping facilities, bathing facilities and common areas;

¹ The entire report can be found here: https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

- Develop and enact language to clarify the Legislature’s intention that there shall not be a waiting list for youth seeking medical services including treatment for youth who sexually harm and youth who are chemically dependent;
- Clarify the state’s responsibility for the education of youth in state facilities including: identifying the entity/entities responsible for addressing special education needs; clarifying responsibility for educational outcomes and oversight; creating an education system for youth housed within the Department of Health and Human Services and the Department Corrections; and ensuring consistent funding and resources;
- Adopt language to require notice be given to the Legislature when substantial changes could be made to the facilities and programs under the jurisdiction of the Department of Health and Human Services’ Office of Juvenile Services (see Neb. Rev. Stat. § 68-909(2) and § 68-912 (4))
- Effectuate further study of the ability to track and report on youth discharged from the supervision of the Office of Juvenile Services including tracking prescription medications, services received and post-discharge outcomes;
- Amend Neb. Rev. Stat. § 50-450 to direct the Executive Board of the Legislative Council to reappoint members to the Youth Rehabilitation and Treatment Center Special Oversight Committee with a committee termination date of December 31, 2021.

For the Department of Health and Human Services:

- Under Neb. Rev. Stat. § 43-427(2)(j), consider a review of all facilities under the jurisdiction of the Office of Juvenile Services for needed improvements (not limited to youth rehabilitation and treatment centers specifically);
- Under the five-year operations plan required by Neb. Rev. Stat § 43-427, consider outlining the development of a uniform and transparent process for evaluating youth upon admission to a youth rehabilitation and treatment center to determine the best level of care and identify legislative action if necessary;
- Under Neb. Rev. Stat. § 43-427(2)(g) & (p), consider detailing entry and discharge plans, including when communication is initiated with families, foster care and the courts and what information is communicated.

For the Youth Rehabilitation and Treatment Center Special Oversight Committee (if extended):

- Continue to seek periodic briefings by the Department of Health and Human Services regarding the development and implementation of the five-year operations plan required under Neb. Rev. Stat. § 43-427;
- Conduct a survey of juvenile court judges regarding their perception of the programming available at youth rehabilitation and treatment centers or other treatment facilities under the jurisdiction of the Office of Juvenile Services and their reasons for committing or not committing a youth to those programs.

Creation of the Oversight Committee

The Youth Rehabilitation and Treatment Center Special Oversight Committee (Oversight Committee) was created with the passage of LB 1144 during the second session of the One Hundred Sixth Legislature. Under provisions of LB 1144, the committee “may study the quality of care and related issues at the youth rehabilitation and treatment centers. The committee shall provide oversight of the administration and operations, including funding, capacity, and staffing practices at the youth rehabilitation and treatment centers” (Slip Law attached – see appendix 1).

LB 1144 was one of a package of bills passed during the 2020 legislative session intended to address ongoing problems related to the Youth Rehabilitation and Treatment Centers (YRTCs), which serve youth in the juvenile justice system ages fourteen to nineteen. The YRTCs are under the jurisdiction of the Office of Juvenile Services (OJS) within the Nebraska Department of Health and Human Services (DHHS) (Neb. Rev. Stat § 43-404(2)).

The YRTC bill package consisted of seventeen pieces of legislation (package summary attached – see appendix 2), many of which were introduced as a direct response to a crisis situation that unfolded at the YRTC-Geneva in August of 2019. LB 1144, was one such bill that was based on recommendations made in a Health and Human Services Committee report initiated in response to the Geneva situation. The January 2020 *Health and Human Services Committee Report to the Nebraska Legislature on the Youth Rehabilitation and Treatment Centers* (HHS report)² found that continuing “challenges related to facilities maintenance, staffing and programming” at the YRTC-Geneva culminated into an unstable condition that resulted in the girls living at the facility being relocated for their safety.

² The entire report can be found here: https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

Committee Meetings and Tours

On March 13, 2020 Governor Pete Ricketts issued an emergency declaration in order to address the coronavirus COVID-19 pandemic in Nebraska. As a result, the Legislature was recessed for a prolonged period from March 13, 2020 until July 20, 2020. The pending YRTC bills were not passed and signed into law until August, giving the Oversight Committee a brief window of time to carry out its duties as set forth in LB 1144. The Oversight Committee took the following actions:

- August 27, 2020 - Committee members met virtually to discuss a study plan;
- September 8, 2020 - Committee members met virtually for an educational briefing on the YRTCs;
 - Nebraska Commissioner of Education Matt Blomstedt provided information regarding challenges with educating youth in juvenile justice facilities;
 - State Ombudsman Julie Rogers and Inspector General of Nebraska Child Welfare Jennifer Carter provided background information with respect to the continuing problems at the YRTCs;
 - State Court Administrator Corey Steel and Deputy Administrator Jeanne Bradner provided insight on the courts' role in a youth's commitment to and release from a YRTC;
 - Monika Gross, executive director of the Foster Care Review Office (FCRO) provided an overview of the data the FCRO had collected with respect to the YRTC population.
- September 18, 2020 - Committee members toured the YRTC campus in Geneva and the Hastings Regional Center Campus;
- October 23, 2020 - Committee members toured the Lincoln facility for high-acuity and high-risk youth and the Whitehall Campus in Lincoln;
- October 23, 2020 - the Committee held an invite-only public hearing with the following testifiers:³
 - Danette Smith, Chief Executive Officer, DHHS;
 - Dr. Janine Fromm, Executive Medical Officer, DHHS;
 - Larry Kahl, Chief Operating Officer, DHHS;
 - Ken Ellis, Missouri Youth Services Institute;
 - Matt Blomstedt, Nebraska Commissioner of Education;
 - Corey Steel, State Court Administrator;
 - Jennifer Carter, Inspector General of Nebraska Child Welfare;
 - Monika Gross, Executive Director, Foster Care Review Office.

³ [The entire transcript of the hearing can be accessed here: https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf)

Summary of DHHS Plans

In addition to the creation of the Oversight Committee, the YRTC bill package passed in August 2020 included legislation implementing the HHS Committee's report recommendations requiring DHHS to develop a five-year operations plan for the YRTCs and to submit the plan to the Legislature on or before March 15, 2021. The legislation, LB 1140, (Slip Law attached - see appendix 3) requires DHHS to develop the plan with input from key stakeholders and specifically prohibits DHHS from establishing or moving a YRTC to a new or existing state facility or a private facility (unless temporary for an emergency) until March 30, 2021.

DHHS Plan October 21, 2019

For background, after the girls were removed from YRTC-Geneva, DHHS released a *Draft Youth Rehabilitation Center Business Plan* (attached - see appendix 4) on October 21, 2019. As summarized in the HHS report⁴:

- The October YRTC Business Plan proposed to:
 - Create a YRTC-Lincoln at the Lancaster County Youth Services Center;
 - Make YRTC-Kearney the hub of the YRTC system;
 - Send all youth - male and female - to YRTC-Kearney first for evaluation;
 - Send high-needs males or female youth to YRTC-Lincoln for intensive behavior modification, family treatment and support;
 - Return youth to YRTC-Kearney, once stabilized;
 - Send female youth to YRTC-Geneva once they are ready to transition out of the YRTCs.

Also in October of 2019, DHHS signed a five-year contract with the Lancaster County Board of Commissioners to lease a portion of the Lancaster County Youth Services Center to serve high-acuity and high-risk males and females committed to the YRTC system. The YRTC-Lincoln started serving high-acuity and high-risk males and females and the Geneva campus began serving as the re-entry program for girls.

DHHS Plan July 15, 2020

As noted earlier, the 2020 legislative session - originally scheduled for January 8 through April 23 - was suspended for four months during which time DHHS entered into a \$576,000 contract with the Missouri Youth Services Institute (MYSI) beginning in August 2020 to provide an assessment of the YRTC system and facilitate strategic planning. The department released a second business plan as well. On July 15, 2020 DHHS released the *YRTC & Youth Facilities Initial Transition Plan* (attached - see appendix 5).

- The July Transition Plan proposed to:
 - Close the YRTC-Geneva campus and move female programming to newly renovated buildings at the Hastings Regional Center campus by October 2020;

⁴ The entire report can be found here: https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

- Return the YRTC-Kearney campus to male only and expand and enhance services;
- Maintain YRTC-Kearney as the hub of the YRTC system;
- Continue serving high-acuity and high-risk male and female youth at the Lincoln site with the future potential for a PRTF (psychiatric residential treatment facility);
- Move the males served by chemical dependency program in Hastings to the Whitehall campus in Lincoln by October 2020;
- Continue serving male youth who sexually harm (YSH) at the Whitehall campus.

In response to the second plan, the Legislature adopted AM 3088 to LB 1140 (attached - see appendix 6). AM 3088 states:

“...The department shall not establish a new youth rehabilitation and treatment center or establish or move a youth rehabilitation and treatment center to a new or existing state or private facility until March 30, 2021, after the completion of the planning process required under this section. Youth committed to the Office of Juvenile Services and residing at a youth rehabilitation and treatment center may be moved to an existing state or private facility on a temporary basis in the event of an emergency, pursuant to the emergency plans created under section 6 of this act, and in compliance with the requirements and restrictions in section 7 and 8 of this act.”

Correspondence with Nebraska Attorney General August 14, 2020 and September 18, 2020

The male chemical dependency program at the Hastings Regional Center campus is not considered a youth rehabilitation and treatment center and DHHS indicated it would continue with its plan to relocate these youth to be served at the Whitehall facility in Lincoln. Consequently, on August 14, 2020, Senators Sara Howard, Steve Halloran, Dave Murman and Tom Brandt requested an attorney general’s opinion (attached - see appendix 7). The opinion request asked for clarification as follows:

1. Does the Legislature need to amend the law, specifically section 83-305, before the Chemical Dependency Program at the Hastings Regional Center is dismantled and the boys are moved to Whitehall in Lincoln?
2. Similarly, does the Legislature need to amend section 83-305 before a YRTC can be established at the Hastings Regional Center or before the Hastings Regional Center can be used to house the female youth from the YRTC since the YRTC at the Hastings Regional Center will not be a state hospital or used a[sic] mental health facility as required under 83-305? Must the provision establishing a state hospital in Adams County at the Hastings Regional Center be stricken?
3. Would the Legislature need to amend the law to redirect the appropriations designated in LB 330 (2017) for the construction of a building for the specific use of the Chemical Dependency Program so that the building may be used as a YRTC instead?
4. Would it be necessary for the Legislature to reallocate funds from the Hastings Regional Center operations budget, Program 361, to the operations budget at Whitehall prior to the establishment of the Chemical Dependency Program at Whitehall?

On September 18, 2020, Nebraska Attorney General Doug Peterson issued opinion No. 20-010 (attached - see appendix 8). To questions number one and two, the opinion concluded that no amendment would be necessary to move the chemical dependency program nor to establish a YRTC at the Hastings Regional Center as Nebraska statute gives OJS “oversight and control of the youth rehabilitation and treatment centers” and gives OJS the authority to “[e]xercise all powers and perform all duties necessary to carry out its responsibilities under the Health and Human Services, Office of Juvenile Services Act.”⁵ To questions 3 and 4, the Attorney General again concluded legislation would not be necessary to reallocate funds.

Other Correspondence

Also in response to DHHS’s purported plan to move the chemical dependency program to Lincoln in preparation of re-locating the girl’s YRTC program, Senator John Arch acting as chair of the Oversight Committee, sent a letter to CEO Smith on September 11, 2020 (attached - see appendix 9). The letter indicated that in passing LB 1140, it was the Legislature’s intent to stop any additional changes or “disruptions of youth and staff” until the Department completes the five-year plan as required. Senator Arch stated members of the Oversight Committee had serious concerns and that CEO Smith should be prepared to address these issues at a pre-scheduled meeting with the Department and the committee members on September 18, 2020.

On September 15, 2020, CEO Smith sent a letter as required by Neb. Rev. Stat. § 71-810 to Patrick O’Donnell, Clerk of the Legislature, and Governor Pete Ricketts giving notice of the intent to relocate the youth chemical dependency program from the Hastings Regional Center to the Whitehall Campus in Lincoln (attached - see appendix 10).

On October 1, 2020, the boys served by the chemical dependency program in Hastings were moved to the Whitehall campus in Lincoln.

Provisions of LB 1148, also included in the package of YRTC bills, restricts OJS from changing the placement of a youth unless notice of the placement change is filed with the court and such notice is provided to all interested parties, including parents, at least seven days prior to transfer (slip law attached - see appendix 11). DHHS indicated that all notification requirements set forth in LB 1148 were followed in transitioning the youth from the Hastings Regional Center campus to the Whitehall Campus.

Additionally, provisions of LB 1140 require DHHS to develop policies and procedures regarding the transportation of YRTC youth (attached - see appendix 12). DHHS indicated that all provisions of the adopted policy were followed in the transportation of the youth between Hastings and Whitehall and no

⁵ Neb. Rev. Stat §43-404 (2016) and §43-405 (2016). These sections of statute were amended by 2020 Neb. Laws LB 1188, sections 3 and 4, effective November 14, 2020.

restraints were utilized. It was further noted that the youth being transferred did not fall under YRTC policies as Whitehall is licensed as a psychiatric residential treatment facility.

Department of Health and Human Services

Leadership:

Dannette Smith - Chief Executive Officer

Larry Kahl - Chief Operating Officer

Dr. Janine Fromm - Executive Medical Officer

Mark LaBouchardiere - Administrator, Office of Juvenile Services

Andrea Lowe - Director of Legislative Services

Goals for a Youth Treatment System

After the tour of the Hastings Regional Center campus on September 18, 2020 and during the October 23, 2020 hearing, leadership from DHHS presented to the Oversight Committee its plan for reformation of the YRTCs and its goals for creating a Youth Treatment System. A package of information was provided during both occasions and those are included in this report (attached - see appendices 13 & 14).

DHHS states its goals of the Youth Treatment System are as follows:

- Help youth develop skills to be successful and productive in their communities;
- Provide quality education and clinical services;
- Implement a system of programming and services to meet youth's individual needs;
- Operate gender- and culturally-appropriate programming;
 - Identify separate space for female youth in YRTC system.

DHHS states it will meet the above goals through the following treatment model:

- Enhanced clinical services: Individualized therapy, family therapy, nursing support, psychiatric support with medication management;
 - Supplement with chemical dependency services to address co-occurring disorders exhibited by majority of YRTC youth;
 - Re-evaluate Phase program;
- Educational Services: Academic achievement and engagement are critical elements for successful re-entry. They include core curriculum, life skills, emotional intelligence and career skills;
- Programming for engagement: Appropriate activities, on- and off-campus, to develop a youth's life skills, trade skills, interpersonal skills and self-worth;
- Re-entry planning: Preparing youth to return home, through partnerships with families, community supports and juvenile probation.

The department supports its goals and reformation plan, in part, with reference to the Juvenile Services Committee of the Nebraska Children's Commission's report, "*Phase I Strategic Recommendations, December 2013*"⁶.

⁶ A copy of the entire Children's Commission report can be found here:

[https://childrens.nebraska.gov/PDFs/Reports/OJS/Juvenile%20Services%20\(OJS\)%20Committee%20Phase%20I%20Strategic%20Recommendations%2012,2013.pdf](https://childrens.nebraska.gov/PDFs/Reports/OJS/Juvenile%20Services%20(OJS)%20Committee%20Phase%20I%20Strategic%20Recommendations%2012,2013.pdf)

Recommendations based on the Nebraska Children's Commission report include:

- Create an intensive, highly structured treatment facility in most appropriate community with programming designed specifically for high-risk juvenile law violators;
- Require the YRTCs to provide evidence-based, trauma-informed treatment for behavioral disorders, mental health disorders, and chemical dependencies to include appropriate medication assisted treatment;
- Develop a decision matrix to establish YRTC entrance criteria that takes into account appropriate screening and assessment scores, seriousness of the crime, and the need for more intense interventions because of previous intervention failure.

Facilities

Prior to the enactment of LB 1140 in 2020, there existed no enabling language in statute for Youth Rehabilitation and Treatment Centers. As part of the YRTC bill package, LB 1140 provides a statutory framework for these facilities and requires accreditation from a nationally known entity that provides such accreditation. Currently, the Kearney and Geneva facilities are accredited under the American Correctional Association. They are not state licensed facilities.

The chemical dependency program and the program for youth who sexually harm are currently located at the Whitehall campus in Lincoln. The Whitehall facility is a psychiatric residential treatment facility (PRTF) and is licensed by the state as a healthcare facility and accredited by the national Joint Commission which is a licensing body for health care facilities.

YRTC - Kearney (see appendix 15)

Physical Capacity: 170

Census as of 12/8/2020: 40 male, 16 female & 3 off campus (this means in court, in jail or on escape status).⁷

LB 1188 (slip law attached - see appendix 16) includes a provision that requires the Youth Rehabilitation and Treatment Center-Kearney to be used for the treatment of boys only by July 1, 2021, thus necessitating relocating the girls' program.

At the October 23, 2020 hearing, CEO Danette Smith encouraged the Oversight Committee members to tour the Kearney campus to see the improvements that have taken place within the last year. She indicated that the relationships between the youth and their peers and between the youth and staff have improved (see hearing transcript page. 19)⁸.

On October 15, 2020, OJS Administrator Mark LaBouchardiere released the quarterly room confinement utilization report as required by Neb. Rev. Stat. § 83-4,134.01 (attached - see appendix 17).

The average confinement time per incident for male youth at Kearney during the 1st quarter of the 2020/2021 Fiscal Year is lower when compared to previous years.

⁷ Census data has been impacted by the COVID-19 pandemic as indicated in testimony at the October 23, 2020 hearing by both Executive Medical Officer Dr. Janine Fromm and State Court Administrator Corey Steel. See hearing transcript pages 6 and 79. The impact COVID-19 has had on the YRTC census is also addressed in The State of Nebraska Foster Care Review Office, Annual Report 209-2020. The report can be found in its entirety here: [here:https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf](https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf)

⁸ [The entire transcript of the hearing can be accessed here: https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf)

Avg. Time* FY 20-21		Avg. Time* FY 19-20		Avg. Time* FY 18-19		Avg. Time* FY 17-18	
July	8.78	July	19.75	July	31.5	July	43
Aug.	9.08	Aug.	31.75	Aug.	19.5	Aug.	32
Sept.	6.27	Sept.	22	Sept.	26.25	Sept.	36.5
		Oct.	21.25	Oct.	20.25	Oct.	40.5
		Nov.	17.25	Nov.	27.75	Nov.	21.75
		Dec.	20.5	Dec.	20	Dec.	19
		Jan.	15.56	Jan.	17.75	Jan.	22.25
		Feb.	15.85	Feb.	18.5	Feb.	30
		March	27.37	March	20.25	March	23.5
		April	12.29	April	21.75	April	37.75
		May	15.08	May	12	May	43.5
		June	16.58	June	16.25	June	42.5

*Average Time is in Hours

YRTC - Geneva (see appendix 18)

Capacity: 18

Census as of 12/8/2020: 0

In DHHS’s October 2019 business plan, the Geneva campus was to be utilized for girls transitioning back into the community. As stated in the HHS report⁹, an incomplete sewer project and damage believed to be caused by internal vandalism, left the LaFlesche building on the Geneva campus uninhabitable. Once the girls were moved in August 2019 to the Kearney campus, work began on repairing and refurbishing the LaFlesche building at a cost of \$610,499. The Geneva re-entry program began in February 2020.

The Oversight Committee toured the Geneva campus on September 18, 2020 and had the opportunity to see the refurbished LaFlesche building. Facility Administrator Camella Jacobi and OJS Administrator Mark LaBouchardiere accompanied the committee members as well as Inspector General Jennifer Carter and Monika Gross, executive director of the Foster Care Review Office. Ms. Jacobi told the committee there were no girls going through the re-entry program at that time. As of October 19, 2020,

⁹ The entire report can be found here: https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

15 girls had gone through the re-entry program for an average stay of 45 days. There was one re-commitment.

At both the September meeting and the October hearing, CEO Smith said the inability to maintain and recruit clinical staff made keeping the Geneva campus operational as a YRTC difficult. She explained to the committee her idea to repurpose funding and facility usage to better meet the needs of the youth served and to maximize the use of taxpayer dollars.

CEO Smith asserted to the Oversight Committee that the Hastings Regional Center campus would be an appropriate place to locate an all-female YRTC due to an already existing pool of staff with clinical expertise and a history of longevity, as well as the ability to recruit additional staff as needed. The girls could potentially receive chemical dependency counseling there as well. Two new cottages, initially built to house the chemical dependency program for boys, could serve the girls in a “homelike” setting and allow for youth to be grouped based on similar treatment needs. Additionally, the Hastings campus has a school with a cafeteria and an administrative building.

According to the quarterly room confinement utilization report, the average confinement time per incident for female youth at Kearney during the 1st quarter of the 2020/2021 Fiscal Year is lower when compared to previous years. These comparisons include the reports issued when the girls’ program was located exclusively in Geneva and prior to the girls being moved to Kearney in 2019. These numbers do not reflect the youth that are being served in the Lincoln facility.

Avg. Time* FY 20-21		Avg. Time* FY 19-20		Avg. Time* FY 18-19		Avg. Time* FY 17-18	
July	7.27	July	28.75	July	27.25	July	15
Aug.	5.04	Aug.	23.5	Aug.	17.75	Aug.	14.5
Sept.	4.25	Sept.	23	Sept.	28.25	Sept.	20.75
		Oct.	19	Oct.	31	Oct.	18.5
		Nov.	20	Nov.	24.25	Nov.	6.5
		Dec.	23.5	Dec.	28.75	Dec.	11
		Jan.	26.09	Jan.	29	Jan.	7
		Feb.	42.04	Feb.	15.25	Feb.	10
		March	14.31	March	22.75	March	14.5
		April	16.73	April	20.25	April	10.7
		May	6.86	May	38	May	17.5
		June	10.57	June	29	June	16.5

*Average Time is in hours

Hastings Regional Center (see appendix 19)

Capacity: 24

Census as of 12/8/2020: 0

On September 18, 2020 the Oversight Committee also toured the Hastings Regional Center campus. Facility Safety Coordinator Grant Johnson and OJS Administrator Mark LaBouchardiere accompanied the committee members as well as Inspector General Jennifer Carter and Foster Care Review Office Executive Director Monika Gross. After the tour, the members were introduced to new Chief Operating Officer Larry Kahl, Assistant Director of Schools Dr. Scott English and Andrea Lowe, new DHHS Director of Legislative Services. Committee members were briefed on DHHS’s proposed plans with respect to a Youth Treatment System by Chief Executive Officer Dannette Smith and Executive Medical Officer, Dr. Janine Fromm.

At the time of the tour, the chemical dependency program was still located at that campus, however as mentioned earlier, notice had already been given with respect to DHHS’s intention of moving the program to Lincoln. Senators also were given the opportunity to visit Building 3 which housed the chemical dependency program for youth.

While in Hastings, the Oversight Committee also had the opportunity to visit with city leaders who expressed frustration with the department's lack of transparency and communication with respect to re-locating the chemical dependency program. Since that time, DHHS reports leadership continues to meet and be in contact with Hastings' administration, state employees at the Hastings campus and community partners. At the October 23, 2020 hearing, Chief Operating Officer Larry Kahl stated that the department was in the process of hiring a human resources business partner dedicated to the Kearney, Hastings and Geneva areas (see hearing transcript page 11).¹⁰ DHHS was in the interviewing stage of potential candidates at the time of this report's release.

During the tour, the Oversight Committee saw the new facilities on the Hastings Regional Center campus including two new living cottages with the capacity to accommodate 24 youth. While the majority of the construction was completed in June and July 2020, the Oversight Committee was told the new cottages needed additional renovation which includes hardening walls, raising ceilings and filming windows prior to them being used as a juvenile treatment building. During the time of the tour, the eight youths in the chemical dependency program were living in Building 3, an older facility on the campus.

For background in regards to the funding for the youth programming at the Hastings campus, in adopting the biennium budget during the 2013 and 2015 sessions, the Legislature approved a total of over \$8 million dollars in General Fund appropriations for the purpose of renovating Building 3 on the Hastings campus to house the chemical dependency program and to demolish select vacant buildings. During the 2017 session, the Legislature authorized DHHS to repurpose the reappropriated funds to construct facilities at the Hasting Campus, instead of fixing Building 3, to house the chemical dependency program for males, as well as fund the demolishing of buildings at the Hastings Regional Center. The amount provided for the construction was roughly \$5.2 million (pertinent pages of slip laws LB 198 (2013), LB 660 (2015) and LB 330 (2017) attached - see appendix 20).

As mentioned earlier in the report, members of the Legislature asked for an Attorney General's opinion with respect to the potential of using the new cottages as part of a YRTC for girls when LB 330 (2017) specified the facilities were to be used as housing for males in the chemical dependency program. In opinion No. 20-010, the Attorney General states "appropriations bills must be restricted to appropriations only and cannot enact substantive law..."

According to the quarterly room confinement utilization report, the Juvenile Chemical Dependency Program does not use room confinement for behavioral management.

¹⁰ [The entire transcript of the hearing can be accessed here: https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf)

YRTC - Lincoln (see appendix 21)

Capacity: 11 girls and 9 boys

Census as of 12/8/2020: 4 boys and 2 girls¹¹

On October 23, 2020 members of the Oversight Committee toured the Lincoln YRTC facility, which is located within the Lancaster County Youth Services Center. DHHS entered a 5-year contract with Lancaster County in October of 2019 to lease a portion of the building which also serves as a temporary detention facility for youth in the juvenile justice system. The committee was accompanied by Inspector General Jennifer Carter, Foster Care Review Office Executive Director Monika Gross, YRTC-Lincoln Facility Administrator Sarah Brownell, Chief Operating Officer Larry Kahl, OJS Administrator Mark LaBouchardiere, Executive Medical Officer Dr. Janine Fromm and DHHS Director of Legislative Services Andrea Lowe.

DHHS's original plan from October 21, 2019 for the Lincoln facility was for it to serve high-acuity or high-risk youth with intensive behavior modification needs. The youth were to be placed at the Lincoln facility temporarily until transitioning back to Kearney. Dr. Fromm told the committee members the Lincoln program is more successful than anticipated and that a majority of the youth being served were transitioning directly out of Lincoln back into the community (as of 10/23/20 only one youth was referred back to Kearney after treatment in Lincoln). She suggested some of the youth who were displaying significant behavior problems in Kearney may have been doing so in order to be sent to solitary room confinement as a result of feeling unsafe in the Kearney's dorm-style setting. Dr. Fromm emphasized that many of the youth in the YRTC system are victims of abuse, neglect and mental illness and do not belong in the same population as those with true criminogenic tendencies. Being able to make sure youth being admitted to Lincoln are with the appropriate peer group and controlling the entrance criteria have had positive results. During the October 23, 2020 hearing, Dr. Fromm told members of the Oversight Committee that the Lincoln facility gives DHHS the "flexibility" to determine levels of care (see hearing transcript page 52)¹².

Facility Administrator Sarah Brownell said thus far, there have been no issues between the female and male youth despite the fact that they have the ability to see into a portion of each other's designated side of the pod. Ms. Brownell also assured committee members that while the YRTC youth share portions of the Lancaster County Youth Services Center, there is absolutely no overlap in programming or staff of the detention facility and the YRTC. She said the YRTC youth are kept out of their rooms as long as possible and are involved in intensive programming all day. Ms. Brownell indicated there are

¹¹ Census data has been impacted by the COVID-19 pandemic as indicated in testimony at the October 23, 2020 hearing by both Executive Medical Officer Dr. Janine Fromm and State Court Administrator Corey Steel. See hearing transcript pages 6 and 79. The impact COVID-19 has had on YRTC census is also addressed in The State of Nebraska Foster Care Review Office, Annual Report 2019-2020. The report can be found in its entirety here: [here:https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf](https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf)

¹² [The entire transcript of the hearing can be accessed here: https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf)

plans to lease another pod (J-Pod) to be used for educational office space and independent study. At the writing of this report, execution of the lease was in its final stages.

Because the Lincoln facility has been operational under a year, there is no comparison available for room confinement utilization. Below is the quarterly room confinement utilization report for the boys and girls in the Lincoln facility for the 1st quarter of the 2020/2021 Fiscal Year.

*Avg. Time FY 20-21 - Male-Lincoln		Avg. Time FY 20-21 Female-Lincoln	
July	11.2	July	15.25
Aug.	12.67	Aug.	0
Sept.	1.83	Sept.	18.63
Oct.		Oct.	
Nov.		Nov.	
Dec.		Dec.	
Jan.		Jan.	
Feb.		Feb.	
March		March	
April		April	
May		May	
June		June	

*Average Time is in hours

Whitehall (see appendix 22)

Overall Capacity: 24

Capacity (Youth Who Sexually Harm): 8 in Community Life Cottage

Census as of 12/8/2020: 7

Capacity (Chemical Dependency): 8 in Warner House Cottage

Census as of 12/8/2020: 5

The Oversight Committee toured the Whitehall campus on October 23, 2020. Accompanying the committee members were Whitehall Facility Administrator Dr. Jessie Foster, Chief Operating Officer Larry Kahl, OJS Administrator Mark LaBouchardiere, Executive Medical Officer Dr. Janine Fromm and, DHHS Director of Legislative Services Andrea Lowe. Inspector General Jennifer Carter and Foster Care Review Office Executive Director Monika Gross also attended the tour.

Prior to the committee's October tour, Inspector General Carter visited the Whitehall facility on September 15, 2020 and took extensive notes on the campus layout, the living quarters, meal plans, education, and the ability to accommodate additional youth if necessary. The notes were shared with members of the Oversight Committee (attached - see appendix 23). The Inspector General's biggest concern was accommodating the youth if the program census were to increase. In the previous two years, the chemical dependency program census averaged 13 youth.

DHHS leases the space at Whitehall from the Department of Administrative Services (DAS). Most recently, the space at the Whitehall campus was utilized as a psychiatric residential treatment facility (PRTF) for youth who sexually harm (YSH). As noted earlier, DHHS relocated the boys being served in the chemical dependency program (CD) in Hastings to the Whitehall campus on October 1, 2020. The youth of both programs now reside on the Whitehall campus. Dr. Foster told the committee members that since it is licensed as a PRTF, the staff at Whitehall are trained to work with both populations, however, the two programs are completely separate and the YSH youth and CD youth have no interaction.

There are currently two identical living cottages on the Whitehall campus being utilized by the youth. The Warner House cottage is being occupied by the YSH youth and the Community Life cottage is being occupied by the CD youth. Each cottage can accommodate up to 8 youth. The Family Life Cottage has recently been updated and can accommodate an additional 8 youth, while work will begin soon to update the Knight House Cottage, which can also accommodate 8 youth. The campus also includes the Morton School, in which each program is separate and has two teachers per program. The two treatment programs receive separate educational instruction in order to accommodate the time differences it takes to complete each program. The average stay for the chemical dependency program is 90 days and is exclusively a credit-recovery program while the YSH program takes an average of 8 months to complete and offers a more traditional educational schedule.

Dr. Fromm noted at the October 23, 2020 hearing that the only complaint the youth in the CD program had about their relocation to Lincoln was about bedding and a lack of hot sauce. (see hearing transcript page 12)¹³.

Dr. Foster did indicate there was a “waiting list” for youth to be accepted into the chemical dependency program. At the October 23 2020 hearing, when asked about the waiting list, Mr. LaBouchardiere responded as follows:

“So what you're referring to is what Dr. Foster had mentioned today. Currently with our youth who sexually harm, we have eight youth there. And we have five youth in our youth-- our chemical dependency program. So-- I'll take my mask off-- so the--what Dr. Foster was talking about is we have a-- we've got three kids who are currently on our-- he was referring to it as a wait list; he was meaning more a referral list. So from those three kids, there's actually two kids who have been accepted into the chemical dependency program so far. The third one is still being referred and being evaluated. I actually had Dr. Foster meet with Senator Cavanaugh right after the meeting for that clarification, because what we do do is we get those referrals in. That-- it's still a process, like I mentioned to the group today, that just 'cause we get a referral in, we're not going to-- we may not take the kid in. We have COVID concerns, where we have to make sure there's a 14-day wait, make sure there's no symptoms, especially if the kid is at-- sitting at home right now. All it takes is one kid to come in. I don't know where that kid has been. I think [INAUDIBLE] is taking safety precautions to come in, in, into our program right away, potentially to affect our staff and our youth, so those are some of the reasons why some of those delays.” (see hearing transcript page 20).¹³

Mr. LaBouchardiere expressed confidence that capacity would not be an issue at any facility as the goal of DHHS was to shorten the length of stay due to more efficient and effective programming. With respect to the CD program, he indicated Lincoln had more community resources and that more youth were being served in the community as required by law.

¹³ [The entire transcript of the hearing can be accessed here: https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Transcripts/SpecialCommittees/YRTC%20Committee%2010-23-20.pdf)

Missouri Youth Services Institute

In August of 2020 DHHS entered into a year-long contract for \$576,000 with the Missouri Youth Services Institute (MYSI), a nonprofit juvenile justice consulting firm that assists in modifying juvenile justice systems from a correctional model to a therapeutic and rehabilitative model.

The basic principles of the MYSI approach are as follows:

- Small, Non-Institutional Facilities Close to Home
- Integrated Treatment: Treating the Whole Person
- Individual Care Within a Group Treatment Model
- Safety through Supervision, Structure and Relationships
- Integrated Treatment and Education
- Families and Communities as Partners in Treatment
- Support from Transition through Aftercare

Ken Ellis, a MYSI consultant with 14-years of experience, testified in front of the Oversight Committee during the October 23, 2020 hearing. Mr. Ellis stated that MYSI's relationship with the YRTC system began with an initial assessment to determine if it was "a good fit." Due to COVID-19, the first contacts were telephone conversations with YRTC staff. In August, two consultants visited with the youth and are continuing on-site consultations throughout the next year.

Mr. Ellis pointed out that MYSI is not about adopting an external model but about meeting the system where it is and developing a team that can identify best practices. The MYSI approach is focused on youth being successful with staff assistance. The integrated-team approach includes trauma-sensitive mentoring that teaches youth appropriate social-emotional skills and how to respond to triggers of past traumatic experiences. As opposed to punishment and point systems, youth are held to consistent behavioral expectations and are personally accountable for their actions.

With the integrated approach, groups work together and not in silos. For example, a youth would not be pulled out of school or programming in order to have an individual meeting with a counselor. Instead everyone will be consistently working as a group, with front-line staff participating in aspects of the youth's services. Mr. Ellis said our YRTC system is somewhat short staffed, however, the consultants' intent is not to increase the staffing budget but rather to repurpose existing staff to become part of a management team.

An informational pamphlet about MYSI was provided to the committee members at the hearing (attached - see appendix 24). In response to questions raised by committee members during the hearing regarding MYSI's past success in other facilitating juvenile justice system reforms in other states and MYSI's assessment of the facilities under OJS, DHHS provided the Oversight Committee with an article on Virginia's reform efforts and MYSI's Pre-Assessment report on the Nebraska system on December 7, 2020 (attached - see appendix 25).

Staffing

During tours on September 18, 2020 and October 23, 2020 and during the hearing on October 23, 2020, members of the Oversight Committee expressed concern regarding the staff at all of the facilities overseen by OJS. Issues that were raised included loss of jobs, staff morale, the transportation of staff between facilities and staff training.

As a follow-up to numerous questions proposed by the Oversight Committee, on December 7, 2020 DHHS provided the Oversight Committee Chairman John Arch with answers to specific questions along with spreadsheets showing current staffing at all of the facilities, a proposed youth facilities human resources plan (YF HR Plan), facility staffing turnover rates and a comparison of 2019 and 2020 staffing turnover at YRTC-Geneva specifically (attached - see appendix 26).

With respect to the Oversight Committee members' questions regarding staff training, DHHS provided information regarding required training for all staff and additional training specific to job classifications (attached - see appendix 27). In addition, Registered Behavior Technician (RBT) training and Trauma Affect Regulation: Guide for Education & Therapy (TARGET) training is being provided at YRTC-Lincoln (see appendix 26 for more information). There are future plans to provide TARGET training to all YRTC staff.

In a December 7, 2020 video conference with Chairman Arch, Chief Operating Officer Larry Kahl, OJS Administrator Mark LaBouchardiere and Executive Medical Officer Dr. Janine Fromm discussed the additional information. Mr. LaBouchardiere stressed that it is not general practice to fill all "open" or available positions unless necessary to meet staff-youth ratios. He indicated the goal is to increase staff-youth ratios in order to realize a more effective treatment model of service. According to the information provided, there are currently a total of 346 filled positions at all the OJS youth facilities and 204 vacant positions. The YF HR Plan indicates a need for 480.5 staff positions with 351.5 of those already filled.

YRTC - Kearney

Current staffing

161 positions filled

94 positions vacant

12/2019 - 11/2020 Overall Turnover Rate

32%

YF HR Plan

221.5 positions needed

161 positions filled

YRTC - Geneva

Current staffing

17 positions filled (noted by DHHS that 2 staff members recently transferred positions leaving 15 filled)

41 positions vacant

12/2019 - 11/2020 Overall Turnover Rate

24%

12/2018 - 11/2019 Overall Turnover Rate

32%

YF HR Plan

27 positions needed

16 positions filled (noted by DHHS recent transfer by staff leaving 15 filled)

Since January 2020, 42 staff members have left the YRTC-Geneva

20 former YRTC Geneva staff have joined the Medicaid Long Term Care Division eligibility team currently located at the Geneva campus

3 staff have taken other positions within DHHS

19 have left state government employment

Staff currently being transferred between Geneva and Kearney

8 Youth Security Specialists II (YSSII)

1.5 Teacher positions (one teacher divides time between Kearney and Lincoln)

NOTE: There are 10 YSII members on staff but two are unable to participate in transfer

All staff are provided State vehicles. Driving time is considered part of 8-hour shift.

Hastings

Current Staffing

62 positions filled

21 positions vacant

12/2019 - 11/2020 Overall Turnover Rate

17%

YF HR Plan

81 positions needed

62.5 positions filled

DHHS has noted it believes all staff currently at the Hastings campus are committed to staying if the campus is transitioned to a YRTC. MYSI consultants are in the process of training and coaching the current Hastings staff.

YRTC - Lincoln

Current Staffing

56 positions filled

43 positions vacant

12/2019 - 11/2020 Overall Turnover Rate

41%

YF HR Plan

98 positions needed

60 positions filled

Staff currently being transferred between Geneva and Lincoln

1.5 Teacher positions (one teacher divides time between Kearney and Lincoln)

All staff are provided State vehicles. Driving time is considered part of 8-hour shift.

Whitehall

Current Staffing

50 positions filled

5 positions vacant

12/2019 - 11/2020 Overall Turnover Rate

19%

YF HR Plan

53 positions needed

52 positions filled

Expenditures

YRTC - Kearney

Two portable trailers for classroom use. Leased from Williams Scotsman for 24 months (contract attached - see appendix 28)

\$1,966.98/month for each modular plus \$20.98 for property tax recovery for each

\$17,267.19 - cost for installation and tear down for modular one

\$17,071.99 - cost for installation and tear down for modular two

\$63,971.19 - total cost for modular one

\$63,775.99 - total cost for modular two

\$500/each for property tax recovery (annual tax Williams Scotsman pays for owning a unit that is leased or rented)

Total: \$128,747.18

Funding Source: Program 250 - OJS

YRTC - Geneva

Construction and Improvement Cost of LaFlesche building

\$375,970 - Construction

\$19,250 - Painting

Total: \$395,220

Funding Source: Program 250 - OJS

Hardening walls, raising ceilings, filming windows

\$175,279 plus an estimated \$40,000 for ceiling/sprinkler (cost of work shared by DAS/DHHS)

Funding Source: Program 250 - OJS & DAS

Hastings Regional Center

Demolition of old buildings and construction of two new living quarters and school/administration building.

\$5,210,000 - New Construction

\$2,897,000 - For Demolition

Total: \$8,107,000

Funding Source: DHHS

Hardening walls, raising ceilings, filming windows

\$175,279 plus an estimated \$40,000 for ceiling/sprinkler (cost of work shared by DAS/DHHS)

Funding Source: Program 250 - OJS & DAS

YRTC - Lincoln

5-year contract with Lancaster County to lease portion of Lancaster County Detention Center

\$352,000 first year with 2% increase each year thereafter

Funding Source: 250 - OJS

The rent payment schedule for Lease Contract #65191825 is below:

Lease Year	Description	Square Foot	Rate	Annual Rent	Monthly Rent
1	Base Rent	18,137	\$19.46	\$352,946.02	\$29,412.17
2	Base Rent	18,137	\$19.85	\$360,004.94	\$30,000.41
3	Base Rent	18,137	\$20.25	\$367,205.04	\$30,600.42
4	Base Rent	18,137	\$20.65	\$374,549.14	\$31,212.43
5	Base Rent	18,137	\$21.06	\$382,040.12	\$31,836.68

Contract for leasing additional space (J-Pod) for educational offices and space

\$40,000 per year

Funding Source: 250 - OJS

The rent payment schedule for the amended Lease Contract #65191825 is below (the figures represent a combination of both the original space and the J-Pod at a reduced rate)

Lease Year	Description	Square Foot	Rate	Annual Rent	Monthly Rent
1	Base Rent	18,137	\$19.18	\$347,867.66	\$28,988.97
2	Base Rent	20,222	\$19.56	\$395,615.12	\$32,967.93
3	Base Rent	20,222	\$19.95	\$403,527.42	\$33,627.29
4	Base Rent	20,222	\$20.35	\$411,597.97	\$34,299.83
5	Base Rent	20,222	\$20.76	\$419,829.93	\$34,985.83

Whitehall

Improvements to the Warner House and Community Life cottages for chemical dependency and youth who sexually harm.

\$35,000 (project completed)

Funding Source: Cost shared between State Building Division - DAS & DHHS - Behavioral Health Division general fund budget.

Potential for improvements to the Knight House and Family Life cottages.

\$35,000 (improvements to Family Life cottage has been completed, Knight House in progress)

Funding Source: Cost shared between State Building Division - DAS & DHHS - Behavioral Health Division general fund budget.

Administrative Office of the Courts and Probation

The County Court acting in a Juvenile Court capacity or Separate Juvenile Court of each county has “juvenile justice” jurisdiction over any juvenile 11 years and older who is adjudicated or waiting adjudication for offenses misdemeanor, felony, status or traffic offenses (Neb. Rev. Stat. § 43-247).

Not until all levels of probation supervision and community-based services have been exhausted can a motion be made to commit the juvenile to a YRTC. OJS is a party to such motion. Once a motion has been made, hearing held, and commitment decided, the court orders intensive supervised probation, which places the juvenile under the custody and care of OJS for placement at a YRTC until discharged. Notification of a pending discharge must be given 60 days in advance and again in 30 days. Once notification has been given, the court sets a continued disposition hearing, prior to which OJS and the Administrative Office of the Courts and Probation must work in collaboration to develop a reentry plan. Once the plan is approved, the juvenile resumes supervision by probation (Neb. Rev. Stat. § 43-286).

No juvenile under the age of 14 may be committed to a YRTC (Neb. Rev. Stat. § 43-251.01)

On September 8, 2020 Supreme Court Administrator Corey Steel and Deputy Administrator of the Juvenile Services Division Jeanne Brandner briefed the Oversight Committee on the relationship between probation and YRTCs.

According to Mr. Steel, prior to 2013 when juveniles in the system needed services their families were not able to afford, the court would make them state wards in order to access Medicaid funding. This would also put the youth under the care, custody, and supervision of OJS. In 2009, a pilot project was launched in the Omaha-area which sought to keep the youth under the jurisdiction of probation while DHHS provided the Administrative Office of the Courts and Probation funds for needed youth services. The year-and-half long pilot resulted in a reduction in the number of state wards, shorter stays on probation and more wrap-around services for system-involved families.

The pilot became the impetus for a complete juvenile justice overhaul which was enacted by the Legislature in 2013 and 2014 through LB 561 and LB 464, respectively. In summary, juvenile probation was allocated funding in order to continue to serve youth on probation who needed access to community, in-home and placement services, including pre-YRTC commitment and post-YRTC commitment juvenile reentry supervision (formally referred to as juvenile parole under OJS. More detail of the history of LB 561 and LB 464 can be found in the HHS Committee YRTC report.¹⁴ A juvenile reentry program was created within the Juvenile Services Division of the Office of Probation, however the YRTCs were left under the jurisdiction of DHHS as the judicial branch philosophically believes it should not operate facilities.

¹⁴ https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

Mr. Steel told committee members the changes made to the juvenile justice system continues to reduce the need for out-of-home placements and continues to save the state money.

According to Ms. Brandner, the two branches of government (executive and judicial) are now working in conjunction to better serve youth in the juvenile justice system and probation has “beefed up” its re-entry protocols. Prior to commitment to a YRTC, youth are supervised by Probation. Upon commitment to a YRTC, Probation passes on all historical information of the youth to DHHS but continues to be engaged with Specialized Officers at the facilities and the original Home Officer in the youth’s resident district working with the family. Every month after admission, a Family Team Meeting is conducted to begin planning for discharge. The court is notified so a re-entry hearing can be scheduled. At the re-entry hearing, the court reviews the individualized reentry plan and orders conditions of probation to be followed once the youth is discharged. The Home Officer is also able to supervise any youth who are able to participate in community furloughs prior to being discharged. The Specialized Officers at the YRTCs coordinate a “warm hand-off” to the Home Officer in the district in order for seamless transition and allow for service engagement to immediately occur.

In the fall of this year, two Specialized Officers began covering the YRTC - Kearney and one Specialized Officer began rotating between the Geneva and Hastings campuses. Most recently, in October 2020, a third Specialized Officer was hired to rotate between the YRTC - Lincoln and the Whitehall campus. A Juvenile Reentry Supervisor oversees these officers and the reentry process. The youth’s originating probation officer remains part of the equation and coordinates with an onsite officer. Ms. Brandner added that within the past six months, probation officers and DHHS YRTC staff have initiated collaborative staffing meetings every Thursday to focus on youth who have been at the facility for an extended time period, those who are not progressing and those who are nearing their nineteenth birthday. They found many youth were not being released due to noncompliance and the collaborative staffing has resulted in the discharge of several youth resulting in a lower census.

Mr. Steel also presented to the Oversight Committee during the October 23, 2020 hearing *The Juvenile Services Division, Fiscal Year 2019, Detailed Analysis* report was provided (attached - see appendix 29). According to the report, 4,623 youth were served on probation during the 2019 fiscal year. Of those, a majority (3,025) were adjudicated for misdemeanor offenses or infractions. During fiscal year 2019, 1,980 youth were put in out-of-home placements. The average annual cost of out-of-home services per youth is \$21,312.60 compared to \$4,154.93 for youth receiving in-home and/or community-based services.

A juvenile committed to a YRTC resumes under the supervision by probation once his or her reentry plan is approved by the court and the youth is discharged. Mr. Steel indicated probation provides enhanced supervision after release to mitigate the chances of recidivism. The Administrative Office of the Courts and Probation track the rates of recidivism of youth placed on probation in order to measure the effectiveness of the juvenile justice system. For Fiscal year 2019, the recidivism rate for youth

successfully discharged from probation was 22%, which is a 2% reduction from the previous year. For juveniles, recidivism is based on violations that occur within one year of a successful discharge from probation. The adult definition for recidivism, which means a violation within 3 years of being released, applies to juveniles that age out of the juvenile system within one year of release and don't recidivate as juveniles.

Education

The YRTC system is comprised of two schools accredited under Rule 10 by the Nebraska Department of Education (NDE) with separate special purpose agreements; Kearney West (boys) and Geneva North (girls), which both currently reside at the West Kearney Campus.¹⁵ The YRTC interim-program school in Lincoln is accredited under the two schools located at the West Kearney Campus. These schools operate under the supervision of OJS, rather than NDE. (Neb. Rev. Stat. § 79-703(4); Neb. Rev. Stat. § 43-407). Additionally, DHHS operates interim-program schools approved under Rule 18 by the NDE.

As part of the YRTC legislative package, LB 1188 also requires the Department of Health and Human Services to establish the position of superintendent of institutional schools to administer the education programs at the YRTCs. The position must be established by December 1, 2020. The superintendent of institutional schools shall report directly to the chief executive officer of DHHS, and must submit an annual report to the State Board of Education to maintain accreditation (Neb. Rev. Stat. §83-127).

On March 6, 2020, DHHS and NDE entered into an interagency agreement which granted NDE administrative oversight of YRTCs. This agreement allowed NDE to appoint a Director of Schools who works collaboratively with DHHS to implement long-term plans regarding curricula, staffing, and student development within the YRTC educational systems (attached - see appendix 30). While the current agreement expired on November 30, 2020, at the writing of this report the departments were finalizing a new agreement effective December 1, 2020 to June 30, 2021.

In a briefing to the Oversight Committee on September 9, 2020, NDE Commissioner Matt Blomstedt stated that he had appointed NDE Deputy Commissioner Deborah Frison as Director of Schools, per the interagency agreement, and that they had hired Scott English as Assistant Director of Schools, who has been on-site at YRTC-Kearney since March, running day-to-day operations.

As part of the long-term planning process, NDE worked with education consultant Dr. Lynette Tannis. In her research of national approaches to juvenile justice education, she noted that most states have some combination of juvenile justice agencies, education agencies, or private providers overseeing education in their juvenile justice facilities (attached - see appendix 31).

In his testimony during the October 27, 2020 Oversight Committee hearing, Commissioner Blomstedt made the following recommendations:

- The need for a clarification of responsibility for education for systems involved youth with regards to special education;
- The need to clarify partner roles and responsibilities for educational outcomes and oversight;
- The ability to build a cohesive education system with DHHS-run facilities;

¹⁵ List of Rule 10 accredited schools can be found here:
<https://cdn.education.ne.gov/wp-content/uploads/2018/06/List-of-Accredited-Schools-20-21.pdf>

- The need for cohesion in education systems between NDE, DHHS, and the Department of Corrections;
- The need for consistent funding and educational resources model for all public and private partners in the system; and
- The need for DHHS, Probation, NDE and all partners to communicate regularly regarding juveniles in the care and custody of DHHS, prior to, during, and after crucial transition points.

Office of the Inspector General of Nebraska Child Welfare

The Office of the Inspector General of Nebraska Child Welfare (OIG) was established within the office of Public Counsel in 2012 with the purpose of increasing accountability and improving operations of the Nebraska child welfare system through investigation and program review (Neb. Rev. Stat. § 43-4302).

The OIG has been actively monitoring the activities surrounding the YRTCs since the office's inception and particularly after the August 2019 events on the Geneva campus. The *Office of Inspector General of Nebraska Child Welfare Annual Report, 2019-2020* was released on September 15, 2020.¹⁶ The report provides a detailed timeline of the events that have transpired since the Office of the Inspector General of Child Welfare was contacted by DHHS CEO Smith regarding the Geneva situation on August 12, 2019, up to Governor Ricketts signing the bill requiring a five-year plan (LB 1140) on August 11, 2020.

On September 9, 2020, former Inspector General of Child Welfare and current Ombudsman Julie Rogers and current IG Jennifer Carter provided the Oversight Committee with background information regarding the situation at the YRTCs and expressed their continuing concerns as the YRTC transformation evolves. Inspector General Carter has also accompanied the committee members on tours of the various locations and provided testimony at the October 23, 2020 hearing (written testimony attached - see appendix 32). Both the Office of the Inspector General of Nebraska Child Welfare and the Ombudsman's office have been investigating circumstances that led to the initial crisis at Geneva and a report is expected to be released in early January 2021.

In the view of the Office of the Inspector General of Nebraska Child Welfare, DHHS has been largely reactionary since the initial crisis at YRTC - Geneva, implementing significant changes to the YRTC system without long-range planning and deliberation thus creating an unstable environment. Concerns raised by the OIG have remained consistent:

- Initial move of the girls from Geneva to the Kearney campus was done quickly and without notice and led to disruption in both the girls' and boys' programs; concerns with respect to safety and adequacy of living space; issues with separation and segregation of the boys and girls throughout the campus; the rearrangement of schedules; a lack of proper programming and lost education hours for the girls.
- Numerous changes in leadership and job duties at the YRTCs and in OJS.
- Multiple business plans in one year were developed without input from stakeholders and have led to confusion, speculation, and uncertainty.
- Repurposing the use of numerous facilities has caused concern among staff and community members as well as triggered renovation projects and unforeseen costs.

¹⁶ *The Office of Inspector General of Nebraska Welfare Annual Report, 2019-2020* can be found in its entirety here: https://nebraskalegislature.gov/FloorDocs/106/PDF/Agencies/Inspector_General_of_Nebraska_Child_Welfare/285_20200915-132600.pdf

- Reduction in staff and transporting staff between different facilities and programs and retraining efforts have impacted morale and could possibly further exacerbate DHHS's problems with attracting and retaining qualified workers.
- The potential inability to adequately serve youth coming into the system due to capacity restraints.

According to the OIG, "[t]he initiatives and changing plans have created a great deal of instability in the system. The breadth and frequency of the changes have made it hard for our office to evaluate each change and the effect those changes have on the youth..."

The OIG has recommended the YRTC system should be allowed to stabilize without further disruption and the Oversight Committee should ensure the planning process required by LB 1140 is comprehensive and "robust."

Foster Care Review Office

Nebraska's Foster Care Review Office (FCRO), established by law in 1982, is charged with providing "information and direct reporting to the courts, the Department of Health and Human Service, the Office of Probation Administration, and the Legislature regarding the foster care system in Nebraska; to provide oversight of the foster care system; and to make recommendations regarding foster care policy to the Legislature" (Neb. Rev. Stat. § 43-1302). FCRO has the statutory authority to review cases of youth in out-of-home care including those who are committed to a YRTC.

The FCRO releases a quarterly analysis about the youth placed at the YRTCs. On September 9, 2020 FCRO Executive Director Monika Gross briefed the Oversight Committee on the quarterly report released on March 1, 2020, which included additional analysis of the YRTCs given the exceptional circumstances.¹⁷

In addition to joining the committee members on facility tours, Ms. Gross also provided testimony at the October 23, 2020 hearing and a summary of the FCRO's annual report released on September 1st.¹⁸(testimony and summary attached - see appendix 33). According to Ms. Gross, the portion of the annual report dedicated to analysis of the YRTCs is essentially a replication of information found in the quarterly report. The analysis found:

- The average daily population of youth committed to a YRTC decreased during fiscal year 2019-2020 from a high of 126 in July/August of 2019 to a low of 88 in June 2020, for an overall reduction of almost 28% in the average daily population;
- The population of girls declined from a high of 39 in June 2019 to a low of 16 in November 2019, with a slight increase over a two-month period;
- The population of boys declined from a high of 83 in June 2019 to a low of 66 in June 2020;
- During the last quarter of 2019, the girls population declined and then stabilized while the boys remained relatively steady until the onset of the COVID-19 pandemic in March 2020. A comparison of the June 2019 population to the June 2020 population shows a decline in the boys' population of 19.9 percent and a decline in the girls' population of 43.6%;
- Minority youth are disproportionately represented for both boys and girls in the YRTCs - Black, Hispanic, Native American, and youth of two or more races are over-represented compared to Nebraska's youth population at large (Hispanic girls are an exception and slightly under-represented);
- Almost 63% of the girls and 42% of boys have a history of removal from their homes due to abuse and/or neglect;
- Girls have an average of 19.1 different foster care placements in their lifetime and boys have an average of 13.3 placements;

¹⁷ The State of Nebraska Foster Care Review Office First Quarterly Report March 1, 2020 can be found in its entirety here: <https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-q1-quarterly-report.pdf>

¹⁸ The State of Nebraska Foster Care Review Office, Annual Report 209-2020 can be found in its entirety here: [here:https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf](https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-annual-report.pdf)

- Average stay for girls at a YRTC is 311 lifetime days and 295 for boys;
- The placement appears safe for 96% of the boys and 71% of the girls;
- 93% of the girls were placed at a YRTC for a misdemeanor compared to 56% of the boys, while 44% of the boys had committed a felony compared to 7% of the girls;
- A majority of the youth at the YRTC have a mental health diagnosis (95%), but over 85% of the girls had been prescribed psychotropic medications compared to 44% of the boys.

In moving forward, Ms. Gross recommended the system ensure individual treatment plans consider trauma and mental health history; programs are age-and developmentally appropriate, using best practices and assuring safety for both staff and youth; adequate oversight and resources for education are available and that buildings meet safety standards.

Conclusion/Recommendations

To examine the specific deficiencies that ultimately led to the reorganization of the YRTC system and resulted in the August 2019 turmoil in Geneva is not the task of the Youth Rehabilitation and Treatment Center Oversight Committee as that has been examined in the previous HHS report¹⁹; rather the purpose of the Oversight Committee is to oversee the system's restoration, provide guidance, and facilitate a path forward.

While the disruption that occurred in Geneva was unacceptable, an opportunity presented itself to more fully develop a system that truly moves to a stronger to a rehabilitative model. Moving ahead, it is imperative that the three branches of government are transparent, keep the lines of communication open and work collaboratively to ensure our facilities are safe and sound, but most importantly, ensure the youth are provided the services and tools needed to grow into thriving adults.

At the conclusion of this report, DHHS had started holding meetings with stakeholders to develop the five-year operations plans as required under LB 1140. The meetings were being moderated by the University of Nebraska-Lincoln's College of Business. The five-year plan is paramount to the successful operation of the YRTC system for years to come. However, there still is a long road ahead and many concerns remain. Including:

- The flexibility for DHHS to determine placement of a youth within the continuum of care without denying services or violating court orders;
- The need to improve educational and vocational outcomes for youth in the juvenile justice system;
- The available capacity to quickly and appropriately accommodate unexpected influxes of youth;
- The impact of recent and future changes on staff and on the communities in which facilities are located;
- The ability to hire and retain qualified staff; and
- The availability of data to determine post-release success.

For these reasons, the Oversight Committee makes the following recommendations:

For legislative action:

- Fund a cost and needs assessment for an inpatient (hospital or psychiatric residential treatment center) as permitted under Neb. Rev. Stat. §83-106;
- Require the Department of Health and Human Services to conduct a cost assessment for necessary capital improvements and structural changes to the buildings on the Kearney campus, including but not limited to restructuring sleeping facilities, bathing facilities and common areas;

¹⁹ The entire report can be found here: https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf

- Develop and enact language to clarify the Legislature’s intention that there shall not be a waiting list for youth seeking medical services including treatment for youth who sexually harm and youth who are chemically dependent;
- Clarify the state’s responsibility for the education of youth in state facilities including: identifying the entity/entities responsible for addressing special education needs; clarifying responsibility for educational outcomes and oversight; creating an education system for youth housed within the Department of Health and Human Services and the Department Corrections; and ensuring consistent funding and resources;
- Adopt language to require notice be given to the Legislature when substantial changes could be made to the facilities and programs under the jurisdiction of the Department of Health and Human Services’ Office of Juvenile Services ((see Neb. Rev. Stat. § 68-909(2) and § 68-912 (4))
- Effectuate further study of the ability to track and report on youth discharged from the supervision of the Office of Juvenile Services including tracking prescription medications, services received and post-discharge outcomes;
- Amend Neb. Rev. Stat. § 50-450 to direct the Executive Board of the Legislative Council to reappoint members to the Youth Rehabilitation and Treatment Center Special Oversight Committee with a committee termination date of December 31, 2021.

For the Department of Health and Human Services:

- Under Neb. Rev. Stat. §43-427(2)(j), consider a review of all facilities under the jurisdiction of the Office of Juvenile Services for needed improvements (not limited to youth rehabilitation and treatment centers specifically);
- Under the five-year operations plan required by Neb. Rev. Stat § 43-427, consider outlining the development of a uniform and transparent process for evaluating youth upon admission to a youth rehabilitation and treatment center to determine the best level of care and identify legislative action if necessary;
- Under Neb. Rev. Stat. § 43-427(2)(g) & (p), consider detailing entry and discharge plans, including when communication is initiated with families, foster care and the courts and what information is communicated.

For the Youth Rehabilitation and Treatment Center Special Oversight Committee (if extended):

- Continue to seek periodic briefings by the Department of Health and Human Services regarding the development and implementation of the five-year operations plan required under Neb. Rev. Stat. § 43-427;
- Conduct a survey of juvenile court judges regarding their perception of the programming available at youth rehabilitation and treatment centers or other treatment facilities under the jurisdiction of the Office of Juvenile Services and their reasons for committing or not committing a youth to those programs.

APPENDIX 1

SLIP LAW

LB1144 (2020)

LEGISLATIVE BILL 1144

Approved by the Governor August 06, 2020

Introduced by Health and Human Services Committee: Howard, 9, Chairperson; Arch, 14; Cavanaugh, 6; Hansen, B., 16; Murman, 38; Walz, 15; Williams, 36.

A BILL FOR AN ACT relating to state institutions; to amend sections 81-8,242, 81-8,243, 81-8,246, 81-8,247, 81-8,249, 81-8,250, 81-8,251, 81-8,252, 81-8,253, and 81-8,254, Reissue Revised Statutes of Nebraska, and section 43-4318, Revised Statutes Cumulative Supplement, 2018; to provide for notice and reporting to the office of Inspector General of Nebraska Child Welfare; to create the Youth Rehabilitation and Treatment Center Special Oversight Committee of the Legislature; to eliminate obsolete language relating to the Public Counsel; to require an annual review and physical inspection of and a staffing report on certain state institutions by the Public Counsel; and to repeal the original sections.

Be it enacted by the people of the State of Nebraska,

Section 1. Section 43-4318, Revised Statutes Cumulative Supplement, 2018, is amended to read:

43-4318 (1) The office shall investigate:

(a) Allegations or incidents of possible misconduct, misfeasance, malfeasance, or violations of statutes or of rules or regulations of:

(i) The department by an employee of or person under contract with the department, a private agency, a licensed child care facility, a foster parent, or any other provider of child welfare services or which may provide a basis for discipline pursuant to the Uniform Credentialing Act;

(ii) Subject to subsection (5) ~~(3)~~ of this section, the juvenile services division by an employee of or person under contract with the juvenile services division, a private agency, a licensed facility, a foster parent, or any other provider of juvenile justice services;

(iii) The commission by an employee of or person under contract with the commission related to programs and services supported by the Nebraska County Juvenile Services Plan Act, the Community-based Juvenile Services Aid Program, juvenile pretrial diversion programs, or inspections of juvenile facilities; and

(iv) A juvenile detention facility and staff secure juvenile facility by an employee of or person under contract with such facilities;

(b) Death or serious injury in foster homes, private agencies, child care facilities, juvenile detention facilities, staff secure juvenile facilities, and other programs and facilities licensed by or under contract with the department or the juvenile services division when the office, upon review, determines the death or serious injury did not occur by chance; and

(c) Death or serious injury in any case in which services are provided by the department or the juvenile services division to a child or his or her parents or any case involving an investigation under the Child Protection and Family Safety Act, which case has been open for one year or less and upon review determines the death or serious injury did not occur by chance.

(2) The department, the juvenile services division, each juvenile detention facility, and each staff secure juvenile facility shall report to the office (a) all cases of death or serious injury of a child in a foster home, private agency, child care facility or program, or other program or facility licensed by the department or inspected through the commission to the Inspector General as soon as reasonably possible after the department or the Office of Probation Administration learns of such death or serious injury and (b) all allegations of sexual abuse of a state ward, juvenile on probation, juvenile in a detention facility, and juvenile in a residential child-caring agency. For purposes of this subsection, serious injury means an injury or illness caused by suspected abuse, neglect, or maltreatment which leaves a child in critical or serious condition.

(3)(a) The Office of Juvenile Services shall report to the office of Inspector General of Nebraska Child Welfare as soon as reasonably possible after any of the following instances occur at a youth rehabilitation and treatment center:

(i) An assault;

(ii) An escape or elopement;

(iii) An attempted suicide;

(iv) Self-harm by a juvenile;

(v) Property damage not caused by normal wear and tear;

(vi) The use of mechanical restraints on a juvenile;

(vii) A significant medical event suffered by a juvenile; and

(viii) Internally substantiated violations of 34 U.S.C. 30301 et seq.

(b) The Office of Juvenile Services and the office of Inspector General of Nebraska Child Welfare shall, if requested by either party, work in collaboration to clarify the specific parameters to comply with subdivision (3) (a) of this section.

(4) The department shall notify the office of Inspector General of

Nebraska Child Welfare of any leadership changes within the Office of Juvenile Services and the youth rehabilitation and treatment centers.

(5) ~~(3)~~ With respect to any investigation conducted by the Inspector General pursuant to subdivision (1)(a) of this section that involves possible misconduct by an employee of the juvenile services division, the Inspector General shall immediately notify the probation administrator and provide the information pertaining to potential personnel matters to the Office of Probation Administration.

(6) ~~(4)~~ Any investigation conducted by the Inspector General shall be independent of and separate from an investigation pursuant to the Child Protection and Family Safety Act. The Inspector General and his or her staff are subject to the reporting requirements of the Child Protection and Family Safety Act.

(7) ~~(5)~~ Notwithstanding the fact that a criminal investigation, a criminal prosecution, or both are in progress, all law enforcement agencies and prosecuting attorneys shall cooperate with any investigation conducted by the Inspector General and shall, immediately upon request by the Inspector General, provide the Inspector General with copies of all law enforcement reports which are relevant to the Inspector General's investigation. All law enforcement reports which have been provided to the Inspector General pursuant to this section are not public records for purposes of sections 84-712 to 84-712.09 and shall not be subject to discovery by any other person or entity. Except to the extent that disclosure of information is otherwise provided for in the Office of Inspector General of Nebraska Child Welfare Act, the Inspector General shall maintain the confidentiality of all law enforcement reports received pursuant to its request under this section. Law enforcement agencies and prosecuting attorneys shall, when requested by the Inspector General, collaborate with the Inspector General regarding all other information relevant to the Inspector General's investigation. If the Inspector General in conjunction with the Public Counsel determines it appropriate, the Inspector General may, when requested to do so by a law enforcement agency or prosecuting attorney, suspend an investigation by the office until a criminal investigation or prosecution is completed or has proceeded to a point that, in the judgment of the Inspector General, reinstatement of the Inspector General's investigation will not impede or infringe upon the criminal investigation or prosecution. Under no circumstance shall the Inspector General interview any minor who has already been interviewed by a law enforcement agency, personnel of the Division of Children and Family Services of the department, or staff of a child advocacy center in connection with a relevant ongoing investigation of a law enforcement agency.

Sec. 2. (1) It is the intent of the Legislature to establish a reporting system in order to provide increased accountability and oversight regarding the treatment of juveniles in youth rehabilitation and treatment centers.

(2) Beginning on January 1, 2021, the Department of Health and Human Services shall submit a report electronically to the office of Inspector General of Nebraska Child Welfare each January 1, April 1, July 1, and October 1. Such report shall include the following information for the prior calendar quarter:

(a) The number of grievances filed at each youth rehabilitation and treatment center separated by facility;

(b) A categorization of the issues to which each grievance relates and the number of grievances received in each category;

(c) The process for addressing such grievances; and

(d) Any actions or changes made as a result of such grievances.

Sec. 3. The Legislature finds that in the summer of 2019, the Department of Health and Human Services notified the Health and Human Services Committee of the Legislature of deteriorating conditions at the Youth Rehabilitation and Treatment Center-Geneva. Such conditions necessitated the relocation of female youth from the Youth Rehabilitation and Treatment Center-Geneva due to living conditions posing a threat to the health, safety, and welfare of the female youth residing at the facility under court order. The Health and Human Services Committee of the Legislature found, through a series of public hearings and comments during the 2019 interim, that there was a breakdown in the day-to-day operations of the Youth Rehabilitation and Treatment Center-Geneva, including (1) disrepair of the facilities making them uninhabitable, (2) inadequate staffing, (3) a lack of proper behavioral or mental health services and treatment programming, and (4) a lack of health care, including, but not limited to, medication management. The Department of Health and Human Services has released a business plan to reorganize the youth rehabilitation and treatment center model in Nebraska on a condensed timeline without consultation or input from the Legislature or stakeholders with experience and expertise in youth rehabilitation and treatment. The safety, quality of life, and right to a safe treatment environment for these youth is of the utmost concern to the Legislature, and it is clear the Youth Rehabilitation and Treatment Center-Geneva has reached a critical point in its ability to care for the female youth entrusted to its care.

Sec. 4. (1) The Executive Board of the Legislative Council shall appoint a special committee of the Legislature to be known as the Youth Rehabilitation and Treatment Center Special Oversight Committee of the Legislature. The committee shall consist of no more than eleven members of the Legislature appointed by the executive board. Members shall include the chairperson of the Health and Human Services Committee of the Legislature, two other members of the Health and Human Services Committee of the Legislature, one member of the

Appropriations Committee of the Legislature, two members of the Education Committee of the Legislature, the chairperson of the Judiciary Committee of the Legislature, one other member of the Judiciary Committee of the Legislature, and one member of the Legislature from each legislative district in which a youth rehabilitation and treatment center is located. The Youth Rehabilitation and Treatment Center Special Oversight Committee shall elect a chairperson and vice-chairperson from the membership of the committee. The executive board may provide the committee with a legal counsel, committee clerk, and other staff as required by the committee from existing legislative staff. The committee may hold hearings and request and receive progress reports from the Department of Health and Human Services regarding the youth rehabilitation and treatment centers.

(2) The Youth Rehabilitation and Treatment Center Special Oversight Committee of the Legislature may study the quality of care and related issues at the youth rehabilitation and treatment centers. The committee shall provide oversight of the administration and operations, including funding, capacity, and staffing practices at the youth rehabilitation and treatment centers. The committee shall provide oversight for planning at the youth rehabilitation and treatment centers. The committee shall utilize existing studies, reports, and legislation developed to address the conditions existing at the youth rehabilitation and treatment centers. The committee shall not be limited to such studies, reports, or legislation. The committee shall issue a report with its findings and recommendations to the Legislature on or before December 15, 2020.

(3) The Youth Rehabilitation and Treatment Center Special Oversight Committee of the Legislature shall terminate on December 31, 2020.

Sec. 5. Section 81-8,242, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,242 The Public Counsel shall be a person well equipped to analyze problems of law, administration, and public policy, and during such person's his term of office shall not be actively involved in partisan affairs. No person may serve as Public Counsel within two years of the last day on which such person he served as a member of the Legislature, or while such person he is a candidate for or holds any other state office, or while such person he is engaged in any other occupation for reward or profit.

Sec. 6. Section 81-8,243, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,243 The Public Counsel shall serve for a term of six years, unless removed by vote of two-thirds of the members of the Legislature upon their determining that the Public Counsel he has become incapacitated or has been guilty of neglect of duty or misconduct. If the office of Public Counsel becomes vacant for any cause, the deputy public counsel shall serve as acting public counsel until a Public Counsel has been appointed for a full term. The Public Counsel shall receive such salary as is set by the Executive Board of the Legislative Council.

Sec. 7. Section 81-8,246, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,246 In selecting matters for his attention, the Public Counsel shall ~~address himself~~ particularly review to an administrative act that might be:

- (1) Contrary to law or regulation;
- (2) Unreasonable, unfair, oppressive, or inconsistent with the general course of an administrative agency's judgments;
- (3) Mistaken in law or arbitrary in ascertainment of fact;
- (4) Improper in motivation or based on irrelevant considerations;
- (5) Unclear or inadequately explained when reasons should have been revealed; or
- (6) Inefficiently performed.

The Public Counsel may ~~concern himself~~ also work to strengthen with ~~strengthening~~ procedures and practices which lessen the risk that objectionable administrative acts will occur.

Sec. 8. Section 81-8,247, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,247 The Public Counsel may receive a complaint from any person concerning an administrative act. The Public Counsel He shall conduct a suitable investigation into the things complained of unless the Public Counsel he believes that:

- (1) The complainant has ~~available to him~~ another remedy available which the complainant he could reasonably be expected to use;
- (2) The grievance pertains to a matter outside the Public Counsel's his power;
- (3) The complainant's interest is insufficiently related to the subject matter;
- (4) The complaint is trivial, frivolous, vexatious, or not made in good faith;
- (5) Other complaints are more worthy of attention;
- (6) The Public Counsel's His resources are insufficient for adequate investigation; or
- (7) The complaint has been too long delayed to justify present examination of its merit.

The Public Counsel's declining to investigate a complaint shall not bar the Public Counsel him from proceeding on the Public Counsel's his own motion to inquire into related problems. After completing his consideration of a complaint, whether or not it has been investigated, the Public Counsel shall

suitably inform the complainant and the administrative agency involved.

Sec. 9. Section 81-8,249, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,249 (1) If, having considered a complaint and whatever material the Public Counsel he deems pertinent, the Public Counsel is of the opinion that an administrative agency should (a) consider the matter further, (b) modify or cancel an administrative act, (c) alter a regulation or ruling, (d) explain more fully the administrative act in question, or (e) take any other step, the Public Counsel he shall make ~~state his~~ recommendations to the administrative agency. If the Public Counsel so requests, the agency shall, within the time he has specified, inform the Public Counsel ~~him~~ about the action taken on such his recommendations or the reasons for not complying with them.

(2) If the Public Counsel believes that an administrative action has been dictated by a statute whose results are unfair or otherwise objectionable, the Public Counsel he shall notify ~~bring to~~ the Legislature of such ~~Legislature's~~ ~~notice his~~ views concerning desirable statutory change.

Sec. 10. Section 81-8,250, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,250 The Public Counsel may report ~~publish his~~ conclusions and suggestions by transmitting them to the Governor, the Legislature or any of its committees, the press, and others who may be concerned. When publishing an opinion adverse to an administrative agency, the Public Counsel he shall include any statement the administrative agency may have made to the Public Counsel ~~him~~ by way of explaining its past difficulties or its present rejection of the Public Counsel's proposals.

Sec. 11. Section 81-8,251, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,251 (1) In addition to whatever reports he or she may make from time to time, the Public Counsel shall on or about February 15 of each year report to the Clerk of the Legislature and to the Governor concerning the exercise of his or her functions during the preceding calendar year. The report submitted to the Clerk of the Legislature shall be submitted electronically. In discussing matters with which he or she has dealt, the Public Counsel need not identify those immediately concerned if to do so would cause needless hardship. So far as the annual report may criticize named agencies or officials, it must include also their replies to the criticism. Each member of the Legislature shall receive an electronic copy of such report by making a request for it to the Public Counsel.

(2)(a) On or before December 15 of each year, the Public Counsel shall submit a report electronically to the Clerk of the Legislature as required under section 15 of this act regarding state institutions.

Sec. 12. Section 81-8,252, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,252 If the Public Counsel has reason to believe that any public officer or employee has acted in a manner warranting criminal or disciplinary proceedings, the Public Counsel he shall refer the matter to the appropriate authorities.

Sec. 13. Section 81-8,253, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,253 No proceeding, opinion, or expression of the Public Counsel shall be reviewable in any court. Neither the Public Counsel nor any member of the Public Counsel's ~~his~~ staff shall be required to testify or produce evidence in any judicial or administrative proceeding concerning matters within the Public Counsel's ~~his~~ official cognizance, except in a proceeding brought to enforce sections 81-8,240 to 81-8,254.

Sec. 14. Section 81-8,254, Reissue Revised Statutes of Nebraska, is amended to read:

81-8,254 A person who willfully obstructs or hinders the proper exercise of the Public Counsel's functions, or who willfully misleads or attempts to mislead the Public Counsel's ~~Counsel in his~~ inquiries, shall be guilty of a Class II misdemeanor. No employee of the State of Nebraska, who files a complaint pursuant to sections 81-8,240 to 81-8,254, shall be subject to any penalties, sanctions, or restrictions in connection with such employee's ~~his~~ employment because of such complaint.

Sec. 15. (1)(a) The office of Public Counsel shall conduct an annual physical review of the following state institutions:

- (i) The Youth Rehabilitation and Treatment Center-Geneva;
- (ii) The Youth Rehabilitation and Treatment Center-Kearney;
- (iii) Any other facility operated and utilized as a youth rehabilitation and treatment center under state law;
- (iv) The Hastings Regional Center;
- (v) The Lincoln Regional Center;
- (vi) The Norfolk Regional Center; and
- (vii) The Beatrice State Developmental Center.

(b) Such physical review may include a review of the condition of buildings and grounds and the physical wear and tear of buildings, fixtures, equipment, furniture, security systems, and any improvements to the facility.

(2) The office of Public Counsel shall report to the Legislature on the condition of such state institutions. The report shall be due on or before March 15, 2021, for the 2020 calendar year, and on or before December 15 of each year beginning in 2021, for the period beginning with December 1 of the prior year through November 30 of the then current year. Such report shall include, for each state institution listed in subdivision (1)(a) of this

section:

- (a) The findings and observations from the annual physical review;
- (b) Recent inspection reports regarding the facility;
- (c) Staffing information, listed separately for each state institution, including, but not limited to:
 - (i) The number of assaults on staff;
 - (ii) Staffing levels;
 - (iii) Staff retention rates; and
 - (iv) Staff turnover rates, including unfilled and vacant positions; and
- (d) The number of reports received by the office of Public Counsel for each institution and any systemic issues identified as a result of such physical review.

Sec. 16. Original sections 81-8,242, 81-8,243, 81-8,246, 81-8,247, 81-8,249, 81-8,250, 81-8,251, 81-8,252, 81-8,253, and 81-8,254, Reissue Revised Statutes of Nebraska, and section 43-4318, Revised Statutes Cumulative Supplement, 2018, are repealed.

APPENDIX 2
SUMMARY OF
YRTC BILL PACKAGE

YRTC Bill Package 2020 and key dates

- 8/1/2020** - establish the position of Superintendent for education at youth facilities (LB 1188);
- 12/15/2020** - DHHS to develop an emergency plan for YRTCs (LB 1140);
- 12/15/2020** - Legislative Oversight Committee report due (LB 1144);
- 12/31/2020** - Oversight Committee terminates (LB 1144);
- 1/1/2021** - DHHS reports number of grievances filed at each facility to the Inspector General (and each Jan. 1, April 1, July 1 and Oct. 1) (LB 1144);
- 3/15/2021** - Inspector General reports to the Legislature a review of all six state institutions (due each Dec. 15th thereafter) (LB 1144);
- 3/15/2021**- DHHS submits 5-year operational plan to the Legislature (LB 1140);
- 12/15/2021 (and each year thereafter)- DHHS submits update to Legislature of operational plan (LB 1140);
- 3/30/2021** - DHHS shall not establish or move a YRTC prior to this date (LB 1140).

YRTC - LB 1140 (HHS Committee) - Operations Plan

(contains provisions of LB 1141, LB 1142, LB 1143 and LB 1145)

Defines youth rehabilitation and treatment centers as “facilities operated to provide programming and services to rehabilitate and treat juveniles. Requires each YRTC to provide: (1) safe and sanitary space for sleeping, hygiene, education, programming, treatment, recreation, and visitation; (2) health care and medical services; (3) appropriate physical separation and segregation of juveniles based on gender; (4) sufficient staffing to comply with law and to protect the safety and security of each juvenile; (5) training that is specific to the population being served at the YRTC; (6) a facility administrator for each YRTC who has the sole responsibility for the administration of a single YRTC; (7) an evaluation process for the development of an individualized treatment plan within 14 days of admission to a YRTC; (8) an age-appropriate and developmentally-appropriate education program for each juvenile that can award relevant and necessary credits toward high school graduation that will be accepted by the juvenile's home district; (9) a case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community; (10) compliance with federal programs and funding such as Medicaid, child welfare funding, the Special Education Act, and other funding guidelines as appropriate; (11) research-based or evidence-based programming that includes living skills, vocational training, behavior management and modification, substance abuse awareness, job training and job placement assistance; and (12) research-based or evidence-based treatment services for behavioral and mental health issues, sex offender behaviors, substance abuse, and victims of physical or sexual abuse.

LB 1141 (HHS Committee)

Requires the Dept. of Health and Human Services to develop a five-year operations plan for the YRTCs and submit such plan to the HHS Committee and Legislature on or before **March 15, 2021**

The plan shall be developed with input from key stakeholders (not defined) and shall include, but not be limited to:

- Description of population served at each YRTC;
- Organizational chart of supervisors and operations staff (administrative staff shall not have oversight over more than one center);
- Staff centralized or managed onsite, including facility and maintenance staff;
- Consideration of taxpayer investments already made and community support;
- Description of each rehabilitation program offered at the YRTC;
- Description of each mental health treatment plan offered at the YRTC;
- Description of reentry and discharge planning;
- Staffing plan that ensures adequate staffing;
- An education plan developed in collaboration with the Department of Education;
- A capital improvements budget;
- An operating budget;
- A disaster recovery plan;
- A plan to segregate the juveniles by gender on separate campuses;
- A parenting plan for juveniles who are parenting;
- A statement of the right of juveniles placed at the YRTCs, including right to privacy and the rights of parents or guardians;
- Quality and outcome measurements for tracking outcomes of juveniles discharged, including an exit survey of such juveniles;
- Key performance indicators shall be included in the annual report required under LB 1140;
- Requirement for trauma-informed training for staff;
- Methods and procedures for investigations at the YRTC;
- A grievance process for juveniles placed at the YRTCs;

On or before **December 15, 2021 and each December 15th thereafter**, DHHS shall submit a report to the Legislature regarding such operations plan and key performance indicators.

DHHS shall not establish a new youth rehabilitation and treatment center or establish or move a youth rehabilitation and treatment center to a new or existing state or private facility until **March 30, 2021**, after the completion of the planning process, unless moved temporarily in the event of an emergency.

LB 1142 (HHS Committee)

Requires DHHS to develop an emergency plan for YRTC's on or before **December 15, 2020** and defines emergency as "a public health emergency or a situation including fire, flood, tornado, natural disaster, or damage to a YRTC that renders it uninhabitable." It does not include inadequate staffing. Allows for the temporary placement (max. 7 days) of a juvenile at a criminal detention facility in the case of an emergency.

The emergency plan must: (1) identify and designate alternative placement facilities for the placement of juveniles in the event a YRTC must be evacuated and the administrator of the proposed alternative placement must agree to be designated as such in the emergency plan; (2) identify barriers to implementation of an effective emergency plan, including necessary administrative or legislative changes; (3) include procedures for providing reliable, effective, and timely notice that an emergency plan is being implemented to various parties including staff, the juveniles, the families and legal guardians of the juveniles, the courts, the HHS Committee, the Ombudsman and the Office of Inspector General for Child Welfare; and (4) detail the plan for transportation of juveniles to a temporary placement facility.

If an emergency plan is implemented, notice must be provided to involved parties 24 hours before implementation if practicable.

LB 1143 (HHS Committee)

Permits DHHS to conduct a needs assessment and cost analysis for the establishment of an inpatient adolescent psychiatric unit at the Lincoln Regional Center. If the department chooses to conduct such an assessment, it must contract with an outside consultant. Additionally, if an assessment is conducted, DHHS must submit to the Legislature a report including: (1) a needs assessment including the number of adolescents expected to use such an inpatient psychiatric facility; (2) the cost of opening an existing facility at the Lincoln Regional Center for use as an inpatient psychiatric unit; (3) the cost of necessary construction, upgrades, or repairs if a facility at the Lincoln Regional Center was reopened; (4) the annual operating costs of an inpatient adolescent psychiatric unit including any federal funds available; and (5) the cost savings realized by moving adolescents from out-of-state institutions back to Nebraska for treatment at an inpatient adolescent psychiatric unit.

LB 1145 (HHS Committee)

Requires DHHS policies and procedures regarding the transportation of YRTC youth to also apply to any private contractor utilized by the Office of Juvenile Services.

YRTC - LB 1144 (HHS Committee) - Youth Rehabilitation and Treatment Centers Special Oversight Committee of the Legislature

(also includes provisions of LR 298 and LB 1085)

Requires the Office of Juvenile Services to report to the Inspector General of Child Welfare (OIG) if any of the following occur at a YRTC: assault, escape, attempted suicide; self-harm by a juvenile, property damage, use of mechanical restraints, a significant medial event for the juvenile, or internally substantiated violation of 34 U.S.C. 30301 et seq. (Prison Rape Elimination).

Beginning **Jan. 1, 2021 and each Jan. 1, April 1, July 1 and Oct. 1**, DHHS shall report to the OIG the number of grievances filed at each youth center, to include a categorization of the issues related to each grievance, the process for addressing grievances, and any actions or changes made as a result of grievances.

OJS must also report to the OIG any change in leadership within OJS and/or the YRTCs

Additionally, the Office of Public Counsel (ombudsman) would be required to conduct an annual review and physical inspection of the six state institutions and report to the Legislature on the condition of the institutions, staffing information and systemic issues identified. For 2020, the report shall be due on **March 15, 2021**. The report shall be due **Dec. 15th** for each year thereafter and shall cover the period of Dec. 1 of the previous year through Nov. 30.

LR 298 (Howard)

- Executive Board shall appoint members to oversight committee
- No more than 11 members, shall include:
 - Chair of Health and Human Services Committee
 - 2 members of the Health and Human Services Committee
 - 1 member of the Appropriations Committee
 - 2 members of the Education Committee
 - Chair of the Judiciary Committee
 - 1 additional member of the Judiciary Committee
 - 1 member of the Legislature from each legislative district in which a YRTC is located
- The Committee's duties include:
- Study the quality of care and related issues at the YRTCs;
- Provide oversight of the administration and operations, including funding, capacity and staffing practices;
- Provide oversight for planning at the YRTCs;
- Utilize existing studies, reports and legislation, but not be limited to such;
- Issue a report on before **December 15, 2020** with its findings and recommendations
- The Oversight Committee shall terminate on **December 31, 2020**.

LB 1085 (Howard)

Change references to the Public Counsel to ensure gender-neutrality

YRTC - LB 1148 (Vargas) - Change provisions of the placement of juveniles at YRTCs
(also contains provisions of LB 458, LB 906, LB 969 and LB 975)

Requires the Office of Juvenile Services to provide the treatment plan developed for each juvenile committed to a YRTC to the committing court and interested parties. The court has the authority to set the matter for a hearing to review the plan.

Restricts the ability of the OJS to transition youth to a subacute treatment facility unless such facility is licensed as such and OJS files notice to interested parties at least seven days prior to transfer. The court on its own motion or upon the filing of an objection by an interested party may order a hearing to review the transfer.

Allows any party to file a motion for a review of a juvenile's commitment to a YRTC and clarifies the juvenile court's jurisdiction to review a juvenile's treatment plan and progress while committed to a YRTC and make changes.

LB 458 (Lathrop)

Allows child advocacy centers to have access to DHHS records connected to specific cases reviewed by child abuse and neglect investigation or treatment teams.

LB 906 (DeBoer)

Clarifies child advocacy centers are responsible for maintaining video recordings of forensic interviews. Provides more specific restrictions on when and how recording could be shared.

LB 969 (Wayne)

Provides that a defendant has the right to have a physical copy of a video recording in which they are described.

LB 975 (Geist)

Allows DHHS to share information received from reports of adult and child abuse within the department for the purpose of complying with other state or federal investigations.

YRTC - LB 1188 (Howard) - Provide duties for OJS related to education at YRTCs

(also contains provisions of 1147, 1149 and LB 1150)

Requires OJS to establish the position of superintendent to administer education programs at the YRTCs and all DHHS institutions that house youth by **August 1, 2020**. Such person shall hold a Nebraska certificate to administer.

Provides that the superintendent reports directly to the CEO of DHHS.

Requires an annual report to the State Board of Education as a requirement for accreditation.

LB 1147 (Vargas)

Clarifies DHHS is responsible for the administration of any YRTC building where a juvenile resides including daily maintenance, minor repairs, custodial maintenance and operations.

LB 1149 (Vargas)

Requires OJS to use “evidence-based and validated” risk and needs assessment to create an individualized treatment plan for each youth.

Requires OJS to use evidence-based policies, practices and procedures in the operation of the YRTCs.

Requires OJS to include in its annual report an update on its efforts to utilize evidence-based models.

Includes the Health and Human Services Committee as a recipient in DHHS’s reporting regarding the investigation into the fitness, abuses or wrongs alleged to exist in an institution run by DHHS.

Clarifies that a juvenile’s in-person visitation, phone call or electronic communication cannot be limited or withheld as a sanction.

LB 1150 (Brandt)

Provides that beginning July 1, 2021, the Youth Rehabilitation Center-Kearney shall be used for the treatment of boys only and the Youth Rehabilitation Center-Geneva shall be used for the treatment of girls only, if DHHS is still operating those facilities at that time.

Requires that any other facility operated as a youth rehabilitation center shall provide safe and appropriate gender separation.

An exception is made to where DHHS may utilize either the Kearney or Geneva facility in the event of an emergency for up to seven days as long as safe and appropriate gender separation is ensured during that time.

APPENDIX 3

SLIP LAW

LB1140 (2020)

LEGISLATIVE BILL 1140

Approved by the Governor August 06, 2020

Introduced by Health and Human Services Committee: Howard, 9, Chairperson; Arch, 14; Cavanaugh, 6; Hansen, B., 16; Murman, 38; Walz, 15; Williams, 36.

A BILL FOR AN ACT relating to juveniles; to amend sections 43-401 and 43-403, Reissue Revised Statutes of Nebraska, and section 43-251.01, Revised Statutes Cumulative Supplement, 2018; to provide requirements for operating a youth rehabilitation and treatment center; to require youth rehabilitation and treatment center operations plans and emergency placement plans from the Department of Health and Human Services under the Health and Human Services, Office of Juvenile Services Act; to authorize a needs assessment and cost analysis for an inpatient adolescent psychiatric unit; to change provisions relating to transportation to youth rehabilitation and treatment centers; to provide a duty for the Revisor of Statutes; to harmonize provisions; to provide operative dates; to repeal the original sections; and to declare an emergency.

Be it enacted by the people of the State of Nebraska,

Section 1. (1) Youth rehabilitation and treatment centers shall be operated to provide programming and services to rehabilitate and treat juveniles committed under the Nebraska Juvenile Code. Each youth rehabilitation and treatment center shall be considered a separate placement. Each youth rehabilitation and treatment center shall provide:

(a) Safe and sanitary space for sleeping, hygiene, education, programming, treatment, recreation, and visitation for each juvenile;

(b) Health care and medical services;

(c) Appropriate physical separation and segregation of juveniles based on gender;

(d) Sufficient staffing to comply with state and federal law and protect the safety and security of each juvenile;

(e) Training that is specific to the population being served at the youth rehabilitation and treatment center;

(f) A facility administrator for each youth rehabilitation and treatment center who has the sole responsibility for administration of a single youth rehabilitation and treatment center;

(g) An evaluation process for the development of an individualized treatment plan within fourteen days after admission to the youth rehabilitation and treatment center;

(h) An age-appropriate and developmentally appropriate education program for each juvenile that can award relevant and necessary credits toward high school graduation that will be accepted by the juvenile's home school district;

(i) A case management and coordination process, designed to assure appropriate reintegration of the juvenile with his or her family, school, and community;

(j) Compliance with the requirements stated in Title XIX and Title IV-E of the federal Social Security Act, as such act existed on January 1, 2020, the Special Education Act, or other funding guidelines as appropriate;

(k) Research-based or evidence-based programming for all juveniles that includes a strong academic program and classes in health education, living skills, vocational training, behavior management and modification, money management, family and parent responsibilities, substance use awareness, physical education, job skills training, and job placement assistance; and

(l) Research-based or evidence-based treatment service for behavioral impairment, severe emotional disturbance, sex offender behavior, other mental health or psychiatric disorder, drug and alcohol addiction, physical or sexual abuse, and any other treatment indicated by a juvenile's individualized treatment plan.

(2) Each youth rehabilitation and treatment center shall be accredited by a nationally recognized entity that provides accreditation for juvenile facilities.

(3) Each youth rehabilitation and treatment center shall electronically submit a report of its activities for the preceding fiscal year to the Clerk of the Legislature on or before July 15 of each year beginning on July 15, 2021. The annual report shall include, but not be limited to, the following information:

(a) Data on the population served, including, but not limited to, admissions, average daily census, average length of stay, race, and ethnicity;

(b) An overview of programming and services; and

(c) An overview of any facility issues or facility improvements.

Sec. 2. (1) The Department of Health and Human Services shall develop a five-year operations plan for the youth rehabilitation and treatment centers and submit such operations plans electronically to the Health and Human Services Committee of the Legislature on or before March 15, 2021.

(2) The operations plan shall be developed with input from key stakeholders and shall include, but not be limited to:

(a) A description of the population served at each youth rehabilitation and treatment center;

(b) An organizational chart of supervisors and operations staff. The operations plan shall not allow for administrative staff to have oversight over more than one youth rehabilitation and treatment center and shall not allow for clinical staff to have responsibility over more than one youth rehabilitation and treatment center;

(c) Staff who shall be centralized offsite or managed onsite, including facility and maintenance staff;

(d) A facility plan that considers taxpayer investments already made in the facility and the community support and acceptance of the juveniles in the community surrounding the youth rehabilitation and treatment center;

(e) A description of each rehabilitation program offered at the youth rehabilitation and treatment center;

(f) A description of each mental health treatment plan offered at the youth rehabilitation and treatment center;

(g) A description of reentry and discharge planning;

(h) A staffing plan that ensures adequate staffing;

(i) An education plan developed in collaboration with the State Department of Education;

(j) A capital improvements budget;

(k) An operating budget;

(l) A disaster recovery plan;

(m) A plan to segregate the juveniles by gender on separate campuses;

(n) A parenting plan for juveniles placed in a youth rehabilitation and treatment center who are parenting;

(o) A statement of the rights of juveniles placed at the youth rehabilitation and treatment centers, including a right to privacy, and the rights of parents or guardians;

(p) Quality and outcome measurements for tracking outcomes for juveniles when they are discharged from the youth rehabilitation and treatment center, including an exit survey of such juveniles;

(q) Key performance indicators to be included in the annual report required under this section;

(r) A requirement for trauma-informed training provided to staff;

(s) Methods and procedures for investigations at the youth rehabilitation and treatment center; and

(t) A grievance process for juveniles placed at the youth rehabilitation and treatment centers.

(3) The department shall submit a report electronically to the Clerk of the Legislature on or before December 15, 2021, and each December 15 thereafter regarding such operations plan and key performance indicators.

(4) The department shall not establish a new youth rehabilitation and treatment center or establish or move a youth rehabilitation and treatment center to a new or existing state or private facility until March 30, 2021, after the completion of the planning process required under this section. Youth committed to the Office of Juvenile Services and residing at a youth rehabilitation and treatment center may be moved to an existing state or private facility on a temporary basis in the event of an emergency, pursuant to the emergency plans created under section 6 of this act, and in compliance with the requirements and restrictions in sections 7 and 8 of this act.

Sec. 3. Section 43-251.01, Revised Statutes Cumulative Supplement, 2018, is amended to read:

43-251.01 All placements and commitments of juveniles for evaluations or as temporary or final dispositions are subject to the following:

(1) No juvenile shall be confined in an adult correctional facility as a disposition of the court;

(2) A juvenile who is found to be a juvenile as described in subdivision (3) of section 43-247 shall not be placed in an adult correctional facility, the secure youth confinement facility operated by the Department of Correctional Services, or a youth rehabilitation and treatment center or committed to the Office of Juvenile Services;

(3) A juvenile who is found to be a juvenile as described in subdivision (1), (2), or (4) of section 43-247 shall not be assigned or transferred to an adult correctional facility or the secure youth confinement facility operated by the Department of Correctional Services;

(4) A juvenile under the age of fourteen years shall not be placed with or committed to a youth rehabilitation and treatment center;

(5)(a) Before July 1, 2019, a juvenile shall not be detained in secure detention or placed at a youth rehabilitation and treatment center unless detention or placement of such juvenile is a matter of immediate and urgent necessity for the protection of such juvenile or the person or property of another or if it appears that such juvenile is likely to flee the jurisdiction of the court; and

(b) On and after July 1, 2019:

(i) A juvenile shall not be detained unless the physical safety of persons in the community would be seriously threatened or detention is necessary to secure the presence of the juvenile at the next hearing, as evidenced by a demonstrable record of willful failure to appear at a scheduled court hearing within the last twelve months;

(ii) A child twelve years of age or younger shall not be placed in detention under any circumstances; and

(iii) A juvenile shall not be placed into detention:

(A) To allow a parent or guardian to avoid his or her legal responsibility;

(B) To punish, treat, or rehabilitate such juvenile;

(C) To permit more convenient administrative access to such juvenile;

(D) To facilitate further interrogation or investigation; or

(E) Due to a lack of more appropriate facilities except in case of an emergency as provided in section 8 of this act;

(6) A juvenile alleged to be a juvenile as described in subdivision (3) of section 43-247 shall not be placed in a juvenile detention facility, including a wing labeled as staff secure at such facility, unless the designated staff secure portion of the facility fully complies with subdivision (5) of section 83-4,125 and the ingress and egress to the facility are restricted solely through staff supervision; and

(7) A juvenile alleged to be a juvenile as described in subdivision (1), (2), (3)(b), or (4) of section 43-247 shall not be placed out of his or her home as a dispositional order of the court unless:

(a) All available community-based resources have been exhausted to assist the juvenile and his or her family; and

(b) Maintaining the juvenile in the home presents a significant risk of harm to the juvenile or community.

Sec. 4. Section 43-401, Reissue Revised Statutes of Nebraska, is amended to read:

43-401 Sections 43-401 to 43-424 and sections 2, 6 to 8, and 10 of this act shall be known and may be cited as the Health and Human Services, Office of Juvenile Services Act.

Sec. 5. Section 43-403, Reissue Revised Statutes of Nebraska, is amended to read:

43-403 For purposes of the Health and Human Services, Office of Juvenile Services Act:

(1) Aftercare means the control, supervision, and care exercised over juveniles who have been paroled;

(2) Committed means an order by a court committing a juvenile to the care and custody of the Office of Juvenile Services for treatment;

(3) Community supervision means the control, supervision, and care exercised over juveniles committed to the Office of Juvenile Services when a commitment to the level of treatment of a youth rehabilitation and treatment center has not been ordered by the court;

(4) Emergency means a public health emergency or a situation, including fire, flood, tornado, natural disaster, or damage to a youth rehabilitation and treatment center, that renders the youth rehabilitation and treatment center uninhabitable. Emergency does not include inadequate staffing;

(5) (4) Evaluation means assessment of the juvenile's social, physical, psychological, and educational development and needs, including a recommendation as to an appropriate treatment plan;

(6) (5) Parole means a conditional release of a juvenile from a youth rehabilitation and treatment center to aftercare or transferred to Nebraska for parole supervision by way of interstate compact;

(7) (6) Placed for evaluation means a placement with the Office of Juvenile Services or the Department of Health and Human Services for purposes of an evaluation of the juvenile; and

(8) (7) Treatment means type of supervision, care, confinement, and rehabilitative services for the juvenile.

Sec. 6. (1) The Department of Health and Human Services shall develop an emergency plan for the Youth Rehabilitation and Treatment Center-Geneva, the Youth Rehabilitation and Treatment Center-Kearney, and any other facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law.

(2) Each emergency plan shall:

(a) Identify and designate temporary placement facilities for the placement of juveniles in the event a youth rehabilitation and treatment center must be evacuated due to an emergency as defined in section 43-403. The administrator of a proposed temporary placement facility shall consent to be designated as a temporary placement facility in the emergency plan. A criminal detention facility or a juvenile detention facility shall only be designated as a temporary placement facility pursuant to section 8 of this act;

(b) Identify barriers to implementation of an effective emergency plan, including necessary administrative or legislative changes;

(c) Include procedures for the Office of Juvenile Services to provide reliable, effective, and timely notification that an emergency plan is to be implemented to:

(i) Staff at the youth rehabilitation and treatment center where the emergency plan is implemented and the administrator and staff at the temporary placement facility;

(ii) Juveniles placed at the youth rehabilitation and treatment center;

(iii) Families and legal guardians of juveniles placed at the youth rehabilitation and treatment center;

(iv) The State Court Administrator, in a form and manner prescribed by the State Court Administrator;

(v) The committing court of each juvenile placed at the youth rehabilitation and treatment center;

(vi) The chairperson of the Health and Human Services Committee of the Legislature; and

(vii) The office of Public Counsel and the office of Inspector General of

Nebraska Child Welfare;

(d) Detail the plan for transportation of juveniles to a temporary placement facility; and

(e) Include methods and schedules for implementing the emergency plan.

(3) Each emergency plan shall be developed on or before December 15, 2020.

Sec. 7. (1) The Department of Health and Human Services shall ensure that the administrator of each temporary placement facility described in an emergency plan required under section 6 of this act consents to the temporary placement of juveniles placed in such facility pursuant to the emergency plan. Prior to inclusion in an emergency plan as a temporary placement facility, the department and the administrator of the temporary placement facility shall agree on a cost-reimbursement plan for the temporary placement of juveniles at such facility.

(2) If an emergency plan required under section 6 of this act is implemented, the Office of Juvenile Services shall, at least twenty-four hours prior to implementation, if practical, and otherwise within twenty-four hours after implementation of such emergency plan, notify the persons and entities listed in subdivision (2)(c) of section 6 of this act.

Sec. 8. In the event of an emergency and only after all other temporary placement options have been exhausted, the Office of Juvenile Services may provide for the placement of a juvenile for a period not to exceed seven days at a criminal detention facility, if allowed by law, or a juvenile detention facility, as such terms are defined in section 83-4,125.

Sec. 9. (1) The Department of Health and Human Services may conduct a needs assessment and cost analysis for the establishment of an inpatient adolescent psychiatric unit housed within the Lincoln Regional Center. If the department chooses to conduct such needs assessment and cost analysis, the department shall contract with an outside consultant with expertise in needs assessment and cost analysis of health care facilities for the purpose of conducting such assessment and analysis.

(2) If a needs assessment and cost analysis is conducted by the department, the department shall submit a report electronically to the Health and Human Services Committee of the Legislature and the Clerk of the Legislature ninety days after the completion of such needs assessment and cost analysis. Such report shall contain the following information:

(a) A needs assessment, including the number of adolescents expected to use such inpatient adolescent psychiatric unit;

(b) The cost of opening an existing facility at the Lincoln Regional Center for use as an inpatient adolescent psychiatric unit;

(c) The cost of reopening the facility at the Lincoln Regional Center, including the costs for necessary construction, upgrades, or repairs;

(d) Annual operating costs of such unit, including, but not limited to, any federal funds available to operate the unit in addition to General Fund appropriations; and

(e) Cost savings realized by moving adolescents from out-of-state institutions back to Nebraska for treatment at such unit.

(3) For purposes of this section, adolescent means a person under the jurisdiction of the juvenile court.

Sec. 10. Policies and procedures of the Department of Health and Human Services regarding the transportation of juveniles placed at the youth rehabilitation and treatment centers shall apply to any private contractor utilized by the Office of Juvenile Services to transport juveniles placed at the youth rehabilitation and treatment centers.

Sec. 11. The Revisor of Statutes shall assign sections 1 and 9 of this act to Chapter 83, article 1.

Sec. 12. Sections 1, 9, and 10 of this act become operative three calendar months after the adjournment of this legislative session. The other sections of this act become operative on their effective date.

Sec. 13. Original sections 43-401 and 43-403, Reissue Revised Statutes of Nebraska, and section 43-251.01, Revised Statutes Cumulative Supplement, 2018, are repealed.

Sec. 14. Since an emergency exists, this act takes effect when passed and approved according to law.

APPENDIX 4

DHHS

YRTC BUSINESS PLAN

OCT. 21, 2019

Youth Rehabilitation & Treatment Centers Business Plan

Monday, October 21, 2019

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Pete Ricketts
Governor

Dannette R. Smith
Chief Executive Officer

Youth Rehabilitation and Treatment Centers System Business Plan

Outline:

- I. **Executive Summary**
 - a. Background
 - b. Vision
 - c. Benchmarking and guiding principles
 - d. Business goals
- II. **YRTC System Campus Business Descriptions – YRTC-Kearney, YRTC-Lincoln and YRTC-Geneva**
 - a. Capacity and key highlights
 - b. Programming
- III. **Performance Metrics – YRTC-System and Campus Specific**
- IV. **Education**
- V. **Implementation Plan**
 - a. YRTC-Lincoln phased plan
 - b. YRTC-Geneva timeline
- VI. **Future Planning and Development**

I. Executive Summary

Background

For over 130 years, the State of Nebraska has been providing rehabilitation services for youth. The Youth Rehabilitation and Treatment Center (YRTC) at Geneva began operations in 1892, and the Kearney location began operations in 1881. Since opening the doors, both facilities have supported the mission as it has evolved and expanded over the years, despite growing modern constraints – aging physical plants (dating back to the 1950s), increased requirements for programming and staffing, and labor supply challenges.

The State of Nebraska has an opportunity to improve the services provided to youth at its YRTCs. This includes depth and scope of programming, appropriate staffing (levels and qualifications), updated facilities and security functionality, treatment and care protocols, and the educational and rehabilitative needs of its resident youth. The current facilities, staffing and programming are not best suited to meet the current needs, nor sustainable in meeting desired future state demands. This plan outlines initiatives to address immediate facility concerns and staffing needs necessary for the security, safety, health, wellness and development of youth residents.

In December of 2013, the Nebraska Children's Commission, along with the Juvenile Services (OJS) Committee, produced a report outlining recommendations specific to YRTC with the purpose of creating an "ideal juvenile justice treatment system." This plan includes details that reflect the intent of OJS's recommendations; for intermediate and long-term planning for YRTC.

In July and August of this year, a group of cross-system stakeholders met to discuss an immediate emergent need, and to design a desired future state. These meetings are noteworthy in signaling "**system collaboration**," as well as commonality for improving the outcomes for our youth. The stakeholder group included members from the Department of Health and Human Services (DHHS), Probation and the juvenile courts, non-profits and advocacy organizations, and the Legislature. The outcome of these meetings produced a vision for the YRTC:

Vision

- Children have **hope and sense of the future** – they have identified and are living the best version of themselves.
- Children have a **voice and choice** in plans for their future as well as services and resources to help them be successful.
- Children view their experience at the YRTC as a "watershed moment" in their lives – something having a **profound and positive impact on who they are** as a person.
- The **focus of treatment is on the whole family** and is rooted in compassion and well-being.
- Children are **connected to family, mentors and other caring adults** for support and guidance.
- Children **experience increased resiliency and skills**.

- Children **successfully transition** from the YRTC with a focus on tailored services and treatment timelines based on the need for opportunities to experience the “real world” before transitioning back to the community, and expectations that are age and developmentally appropriate.

Benchmarking & Guiding Principles

The leadership of the Department of Administrative Services (DAS) and DHHS consulted with the DLR Group for the purpose of evaluating current and potential interim facilities, and to gain an understanding of the desired future vision for YRTC. The DLR Group was helpful in providing benchmark research from states that have undergone similar transitions of its juvenile rehabilitation treatment programs. Similarly, DHHS has collected benchmark research from other state’s programs. Preliminary review of the research identified several key success factors in both facility design and programming. Below is an adaption from the research elements and is inclusive of the ***Child and Adolescent Service System Program (CASSP)*** principles identified in the ***2013 OJS report***. These serve as guiding principles in designing and implementing plans for YRTC.

- Multi-disciplinary team (MDT)¹ planning and execution of among state agencies
- Engaging key system stakeholders in planning and collaboration – DHHS, DAS, Probation, the juvenile courts, advocacy organizations and the Legislature
- Strength-based programming that promotes adolescent brain development and positive human development – skills building, mental health, healing and personal growth, empowerment, problem solving and emotional intelligence
- Adoption of small-group care model core elements – cohort consistency, relationships, homelike living spaces, self-care and shared responsibilities of shared spaces
- Appropriate aftercare and re-entry are essential to case planning and successful transitioning back to the community
- Academic achievement and engagement are critical elements for case planning and successful re-entry – core curriculum, life skills, emotional intelligence and career skills
- Engaging families as partners early and throughout the continuum of care
- Promotion of psychological and physical safety for residents and staff with integration into daily activities
- Designing facilities that promote treatment and development vs. juvenile detention
- Data is continuously collected, analyzed and reported to drive decision making, guide case planning, quality improvement and success with activities and programming

1. MDT includes unit manager, LMHT, clinical supervisor, case manager, teachers, principal, nurse, behavioral analyst, behavioral tech & activity specialist

DHHS is committed to its mission of *Helping People Live Better Lives*. This includes ensuring care environments are culturally, linguistically and ethnically diverse to support our youth and families in providing youth rehabilitation and treatment services.

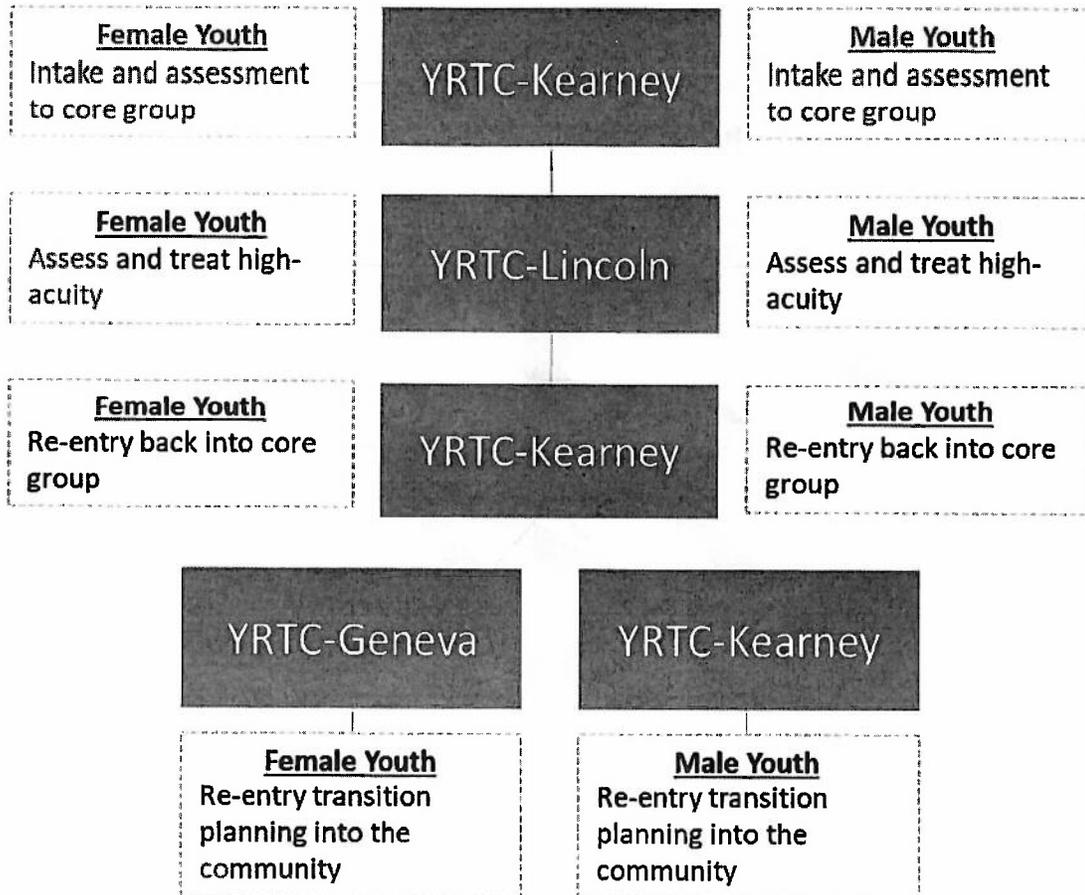
As current operations are not sustainable, the Department must execute strategies to position the State's YRTC's for future success. Given the emergent facility and staffing needs, DHHS will take a three-pronged approach in developing the **YRTC System**, implementing a plan to achieve short-term goals, and allow for **long-range strategic planning** done in collaboration with key *system stakeholders*. This three-pronged approach will address immediate facility needs, while ensuring the safety and well-being of the resident population.

Business Goals:

- Develop a system that will provide appropriate level of care and security for youth they progress in their treatment.
- Implement targeted interventions to high-acuity, at-risk youth separate from the core group that is positively responding to programming.
- Develop population specific programming (gender, acuity, culture, linguistics and race) and programming based on a youth's progress and needs for transitioning back to the community.

YRTC Treatment System – Three-Pronged Approach:

The three-pronged approach will accomplish these goals utilizing facilities based on their security and service capabilities. The facilities include YRTC-Kearney, YRTC-Lincoln and YRTC-Geneva.



II. YRTC System Campus Business Descriptions

YRTC-Kearney

This plan includes current services provided at the YRTC-Kearney campus. YRTC-Kearney is the hub for the YRTC system, providing initial intake, assessment and programming for the core group of youth. YRTC-Kearney has a capacity to serve 172 youth. The campus includes five open living units, with one unit having separate youth sleeping rooms, and four units providing a dormitory-style setting. YRTC-Kearney has a dining hall and chapel, and recreational activities which include an indoor pool, gymnasium, weight room, baseball field, outdoor play pads, a soccer field and an obstacle course.

Key Highlights

- The YRTC-Kearney campus includes the Dickson Behavioral Stabilization Unit, which is the most secure unit on campus. This unit is utilized for youth who are struggling to be compliant with programming, exhibit aggressive behavior or who have displayed other behaviors which make them a risk to themselves, others or the well-being of the facility.
- YRTC-Kearney's school is an accredited high school from which youth can graduate. Additional training and certifications are available for youth in vocational career paths.

Programming

The programming at YRTC-Kearney is based on the Phase model, which assesses youth behavior from admission through discharge. Upon arrival at YRTC-Kearney and throughout their stay, youth are given assessments to establish baseline metrics, and then to assess progress as they move through the programming. The facility uses the University of Rhode Island's Change Assessment Scale (URICA) to assess a youth's readiness to change. This assessment is given upon admission and again toward the end of Phase 2. Another tool used is the Inventory of Callous-Unemotional Traits (ICU) which assesses the personality trait of callousness or emotional coldness. This assessment is administered upon admission and again during Phases 3 and 5 of the program.

The Phase model is an incentive based program in which youth are scored daily on their compliance with the program, interactions with their peers and their interactions with staff. A youth's scores dictate their movement through the program and identifies which incentives they are eligible to receive.

YRTC-Lincoln

This plan will seek to establish services at Lancaster County Youth Services Center (LCYSC or YRTC-Lincoln), which has the capacity of 20 individual rooms divided between two separate pods, a day room and a separate secure outdoor recreational space. **New programming** will be developed to serve the needs for both male and female youth with high behavioral acuity and will include **intensive behavioral modification** programming, **family treatment** and **family support**. This will establish a model for successful transition for youth back to YRTC-Kearney where they can continue core programming or back to the community (if youth age out). Similar to the core programming, YRTC-Lincoln may include treatment for mental health conditions such as conduct disorders, oppositional defiant disorders, borderline personality disorders, disruptive mood dysregulation disorders, ADHD and PTSD.

Key Highlights

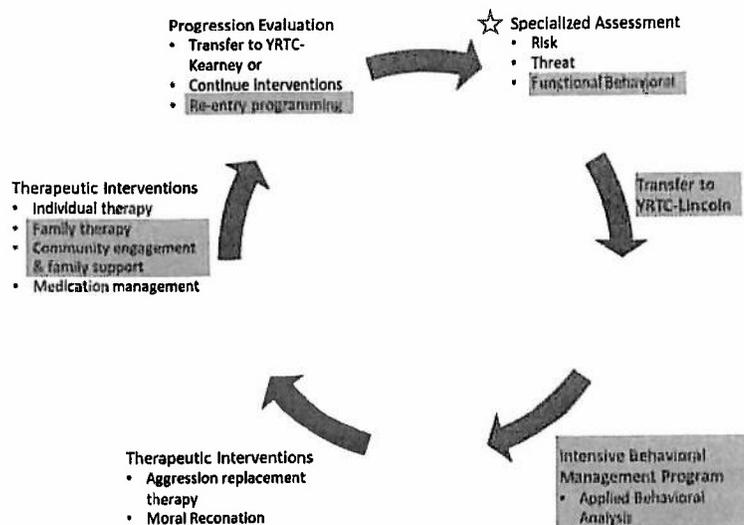
- This plan allows for separation of female and male youth, one pod for each gender.
- This plan allows for implementation of **targeted behavioral programming** for high-acuity youth, a trauma therapy model, family therapy and medical and psychiatric staffing.
- The facility provides the appropriate **physical structure and security** required to serve high-acuity youth.
- Operations will be phased into this location to allow for appropriate adjustment for both youth and staff development.

The youth that will be relocated to YRTC-Lincoln have unique needs and require intensive, targeted behavioral programming specific to these needs. They are admitted with known severe behavioral issues, or since in custody, they have demonstrated behaviors that have escalated to the degree that they cannot be safely managed in the congregate care setting on the YRTC-Kearney campus.

The YRTC-Lincoln physical structure will provide additional security and supervision capabilities through individual rooms with the ability to secure. These are critical capabilities to have when providing treatment when youth behaviors are imminently dangerous to themselves, other youth and staff. While these capabilities are key, this population will also require unique therapeutic programming to replace problematic behavior tendencies with adaptive, functional behavior.

In addition to security and supervision capabilities, YRTC-Lincoln will provide intensive programming for youth in the YRTC system who are not responding to behavioral treatment at YRTC-Kearney. This is only after the YRTC-Kearney team has thoroughly assessed the youth and determined that more intensive behavioral interventions are needed to help stabilize the youth. The treatment at YRTC-Lincoln, outlined below, will be highly therapeutic in a safe and secure treatment setting.

Once the youth's behaviors have stabilized and they are responding to programming, the youth will return to the main campus at YRTC-Kearney for continuation of their treatment program, but at a reduced intensity level.



Behavioral management, including specific therapeutic models such as Applied Behavioral Analysis, have well researched validity and applicability to a wide range of populations that experience disruptive or maladaptive behavior. This includes children with Autism Spectrum Disorder and other developmental disabilities as well as individuals in the criminal justice system.

Behavioral management interventions can be provided in various intensities and settings from outpatient, home based models to intensive residential models. Youth at YRTC-Lincoln will receive intensive behavioral modification interventions from staff specifically trained in behavioral modification through the Behavior Analyst Certification Board (BACB).

**Items in green indicate new programming*

Programming Highlights

- Specialized assessment – risk, threat and functional behavior
- Intensive behavioral management interventions
- Staff trained and supervised by Board Certified Behavior Analysts
- Enhanced family treatment and support
- Progress and transition to re-entry programming

Direct care staff (formerly youth security specialists) will be certified as Registered Behavioral Technicians (RBT) which will involve creating a different classification for this direct care staff. Other staff will also receive the RBT training including the recreational therapy staff but will not be required to be certified for their classification. Current activity specialist staff will also be re-classified and additional requirements around recreational therapy will be required of the job to ensure the recreational therapy provided to the youth is expanded beyond what is currently being provided at the YRTC-Kearney.

YRTC-Geneva

This plan also includes re-establishing services at the YRTC-Geneva campus with the primary purpose of housing female youth that will be transitioning back to the community. Based on historical volumes and capacity, the program will serve between 3-6 female youth.

Programming Highlights

Youth that will be transitioning back to the community have different needs from those that are within the core population. The youth will need to be in an environment that is less restrictive and mimics a home environment. Programming will include family treatment and enhancing personal life skills. The final 60 days of a youth's treatment will include 30 days of preparation and the final 30 days of skills application. At day 30, an Individualized Re-entry Plan (IRP) is due to the court for review. This transition process will require collaboration between the YRTC treatment team, Probation's Re-entry supervisor, community providers and schools to ensure a smooth transition.

During the preparation phase, treatment within the facility will include medication management, and weekly family and individual therapy (or more frequent depending on youth and family needs). The YRTC team will continue to collaborate with the Department of Labor and Vocational Rehabilitation to offer opportunities for obtaining needed job certifications to facilitate successful re-entry.

The YRTC-Geneva program will follow the same Phase 5 model offered at the YRTC-Kearney campus with an emphasis on life skills, increased responsibilities, community involvement and independent living. Individual, group and family therapy will transition to the YRTC-Geneva campus. The programming will continue to be individualized and based on the youth's assessments. Components of the YRTC-Geneva program will include:

- Peer support group meetings 5 days per week
- Daily independent living skills training
- School services for youth who have not graduated; vocational training for those youth who have graduated 5 days per week
- Individual and family therapy and family engagement based on the treatment plan, at least 1x per week for each, continuing through discharge
- Multi-Disciplinary team meeting 1x per week to include the family or other natural supports
- Recreational therapy at least one hour per day
- Work release and opening a bank account for youth who have graduated. Youth still in school will have an opportunity for volunteer activities
- Weekly furloughs or day passes for the youth to meet with providers
- Community visits to ensure youth are comfortable in the community setting
- Home visits by Probation Officer, case manager and therapist
- Facilitated restorative justice conferences in home community
- Preparation and attending the hearing for re-entry

III. Performance Metrics

YRTC System Performance Metrics		
Goal	Metric	Baseline
Decrease assaults on staff by 20%	- 20%	132
Decrease female youth readmissions	<= 15%	33%
Decrease male youth readmissions	<=15%	19%
Decrease all youth re-offending	TBD	TBD
Decrease female youth elopements	- 50% <= 6	13
Decrease male youth elopements	- 50% <= 9	19

YRTC System Performance Metrics	
Campus	Metric
YRTC - Kearney	Family engagement
	Educational achievements
	Family satisfaction
	Teammate satisfaction
	Decrease Dickson admits
	Furlough success goals
	Length of Stay
	Number of confined youth
YRTC - Lincoln	Family engagement
	Educational achievements
	Family satisfaction
	Teammate satisfaction
	Length of Stay
	ABA Metrics
	Number of confined youth
YRTC - Geneva	Family engagement
	Educational achievements
	Family satisfaction
	Teammate satisfaction
	Furlough success goals
	Length of stay
	Number of confined youth

IV. Education

Unification across the DHHS-OJS Special Purpose School System

The Department of Health and Human Services – Office of Juvenile Services will collaborate with the Nebraska Department of Education to maintain an accredited Special Purpose School System serving all youth committed to its care across multiple campuses. West Kearney High School, located on the YRTC-Kearney campus, will serve as the DHHS-OJS Special Purpose School System's hub, with additional school buildings at the YRTC-Geneva campus and the proposed YRTC-Lincoln campus.

General Requirements for the Special Purpose School System

- To continue as an accredited school system, the DHHS-OJS Special Purpose School System will meet the mandatory requirements for legal operation as set forth in Title 92 NAC 10, sections 003.01 through 003.11.
- DHHS-OJS and NDE will seek to revise the West Kearney High School's Special Purpose School Agreement to include all school sites across the DHHS-OJS Special Purpose School System.
- DHHS-OJS will develop unified curricula across all school sites, ensuring all schools offer fall and spring semesters, plus an 8-week summer school session. The school year will run July 1st through June 30th.
- DHHS-OJS will retain a Superintendent who will head administration of the Special Purpose School System.
- DHHS-OJS will establish a governing body (school board) for its school system.
- DHHS-OJS will collaborate with the NDE and the appropriate school district(s) to ensure the educational needs of all students are met, including those with a disability.

Additional Goals of the Special Purpose School System

- DHHS-OJS will enhance use of multi-site and distance learning as authorized by Title 92 NAC 10, and as appropriate with students' educational needs.
- DHHS-OJS will enhance the students' career readiness and employability upon discharge, in partnership with NDE Vocational Rehabilitation and Nebraska Department of Labor.
- DHHS-OJS will continue to collaborate with NDE, Probation and the appropriate school district(s) to facilitate timely, successful re-entry into public school or post-secondary education program.

Additional Requirements per School:

**YRTC-
Kearney**

- School Principal
- Media/Technology staff
- Library for students

- Special Education Director
- Guidance Counselor

- At least one teacher endorsed in: science, language arts, math and social sciences

**YRTC-
Geneva***

- School Principal
- Media/Technology staff
- Library for students

- Special Education staff
- Guidance Counselor

- At least one endorsed teacher for: science, language arts, math and social sciences

**YRTC-
Lincoln***

- School Principal
- Media/Technology staff
- Library for students

- Special Education staff
- Guidance Counselor

- At least one endorsed teacher for: science, language arts, math and social sciences

Considerations for Revised Special Purpose Agreement:

- DHHS-OJS could request the sharing of principals and other mandatory staff positions between multiple school buildings when any one YRTC site's population may nullify the need for full-time staff onsite.
- DHHS-OJS must consider the requirements of any labor union/teaching contracts when exploring staffing alternatives.
- DHHS-OJS could consider initially using portions of the Kearney and Geneva school libraries to begin a library in Lincoln or entering into a library sharing agreement with another Lincoln residential placement, such as Lancaster County Youth Services Center.

V. Implementation Plan

YRTC – Lincoln Phased Development Plan

Phase	Operations	Programming	Youth Progression
Phase 1 October 15 – December 2019	<ul style="list-style-type: none"> ▪ Lease execution ▪ Cameras installation 12/15/19 ▪ IT Networking & connectivity 12/15/19 ▪ Contract management 11/15/19 (pharmacy, FBA training [UNMC], trauma model, laundry, food services, religious, transportation) ▪ Recruitment 10/21/19 ▪ FOP plan 10/16-10/18/19 ▪ FOP 10/21-10/25/19 ▪ Ordering supplies 11/30/19 ▪ Capital equipment 11/30/19 ▪ LCYSC & YRTC-Lincoln daily scheduling 12/15/19 ▪ Staff security access 12/15/19 ▪ Develop policies & procedures 11/15/19 	<ul style="list-style-type: none"> ▪ Staff training BCBA ▪ Staff training ART & MRT ▪ Finalize assessments ▪ Develop modification programming ▪ Clinical support contracting (psychiatric/medication, MH therapy, pharmacy, dental, medicine & nursing) ▪ Education model & agreements *all contracts commence 10/17/19, execute 11/01/19 	<ul style="list-style-type: none"> ▪ 3 females
Phase 2 February – March 2020	<ul style="list-style-type: none"> ▪ POD 1 & 2 30 min glass installation ▪ Locker enhancements ▪ Staff on-boarding 	<ul style="list-style-type: none"> ▪ Trauma model (TARGET) 	<ul style="list-style-type: none"> ▪ 4 females ▪ 3 males <i>cumulative</i>
Phase 3 May 2020			<ul style="list-style-type: none"> ▪ 4 females ▪ 4 males <i>cumulative</i>

YRTC – Geneva Timeline

Date	Activity
October 9, 2019	<ul style="list-style-type: none"> ▪ Facility construction completed
October – November 2019	<ul style="list-style-type: none"> ▪ Re-training staff 10/25/19 ▪ Furniture 10/25/19 ▪ Construction punch list and clean up ▪ Contracting (food, medical & recreational) 11/30/19
November - December 2019	<ul style="list-style-type: none"> ▪ Female youth and family assessment ▪ Order supplies & capital equipment ▪ Installation of beds
January 2019	<ul style="list-style-type: none"> ▪ Female youth transition (3-6)

VI. Future Planning and Development

Establishing the state of Nebraska's YRTC system, combined with family engagement and partnering with juvenile probation, will achieve the business goals:

- Develop a system that will provide appropriate level of care and security for youth they progress in their treatment.
- Implement targeted interventions to high-acuity, at-risk youth separate from the core group that is positively responding to programming.
- Develop population specific programming (for gender and acuity levels), and programming based on a youth's progress and needs for transitioning back to the community.

Achieving these goals is a short-term approach. There remains a need to address the aging physical structure, on-going security needs and staff recruitment challenges particularly in rural markets. Moreover, additional work is needed to develop a long-term plan which addresses root causes, reduces recidivism and ultimately enhances the lives of Nebraska's youth.

Many states are faced with similar problems, and there is no one system that has been developed to address all the root causes. There are states, however, that have implemented models which have achieved success and demonstrated a reduction of re-incarceration rates in both juvenile and adult corrections (as youth age). Two notable benchmark studies are in New York City and ***The Missouri Model***. Though unique geographically, both these models have common themes for success.

New York City Model – C2H (Close to Home)¹

- Involving a broad group of stakeholders in the reform design
- Understand the current population to determine appropriate needs
- Establish a clear process to guide dispositional decision-making
 - The Youth Level of Service/Case Management Inventory (YLS/CMI) to assess a young person's criminogenic needs
 - Structured Decision-Making (SDM) grid
- Emphasize community-based programming within the new system
- Residential program design around 3 core elements – education, family engagement and release planning and aftercare

Missouri Model²

- Emphasis on community-based programming and engagement, close to youth's home
- Focus on youth development and family engagement
- Emphasis on academic, pre-vocational and communication skills
- Closely supervised small groups, with individualized attention
- Positive environments vs least restrictive with coercive techniques

- Prevention and early intervention

1. Weissman, M., Ananthakrishnan, V. & Vincent Schiraldi, February 2019. *Moving Beyond Youth Prisons: Lessons from New York City's Implementation of Close to Home*. Columbia University, New York.
2. Mendel, R. & The Annie E. Casey Foundation, *The Missouri Model – Reinventing the Practice of Rehabilitating Youthful Offenders*. Baltimore, MD.

Additionally, the DLR Group provided examples of facility design projects they have worked on in Colorado, Oregon and Los Angeles. The facilities were designed based on the **LA Model**:

- Multi-disciplinary team planning occurs with collaboration across agencies
- Programming is focused on skill-building, mental health, healing and personal growth
- Families are engaged early and often
- Aftercare and re-entry are the core drivers for planning
- Small-group care model – therapy, living spaces and relationships
- Probation and other staff are consistently integrated into program delivery
- Programming is individualized and data driven

These models are inclusive of themes that are consistent with the earlier mentioned research, guidelines and most notably the December 2013 recommendations from the **Nebraska Children's Commission – Juvenile Services (OJS) Committee**.

Establishing the YRTC-System is the first step to reforming Nebraska's youth services. DHHS is committed to Nebraska's youth – ensuring they lead healthy lives and receive appropriate planning, treatment, skills development and successful re-entry back to their communities. We will lead this initiative and work collaboratively with key stakeholders in redesigning our system of care across the continuum, to better serve our youth and their families.

APPENDIX 5

DHHS YRTC AND YOUTH
FACILITIES

INITIAL TRANSISTION PLAN

JULY 15, 2020

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

YRTC & Youth Facilities Initial Transition Plan

July 15, 2020

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Pete Ricketts
Governor

Dannette R. Smith
Chief Executive Officer

Helping People Live Better Lives

Executive Summary

Timeline overview

In October 2019, DHHS' business plan established the YRTC **system** as an approach to implement multiple **levels of care**, and set a framework to enhance **programming** specific to the various levels at each of the campuses. The plan established YRTC-Kearney as the hub for both male and female youth, the Lincoln Facility for high-acuity male and female youth, and the YRTC-Geneva campus as a re-entry program for female youth. If successful, the piloted re-entry program would be replicated for male youth on the Kearney campus.

The intent of the business plan was to achieve these goals while DHHS worked on next phase initiatives. Prior to DHHS opening of the Lincoln Facility and the YRTC-Geneva campus in late February, DHHS established a **Future State Planning Committee**, which met on February 6, 2020. During this meeting, the stakeholders reviewed the vision statements developed from sessions held in July and August of 2019, an overview of the business plan, and research of industry best practices. The stakeholders were also provided updates on several initiatives, including facility renovations and clinical programming plans. Prior to the meeting, stakeholders participated in a survey to provide input on next phase opportunities. Finally, stakeholders were provided a summary of two consulting firms that would conduct a deeper assessment of the system that would be used for long-term strategic and developmental planning. With input from the stakeholders, DHHS selected the Missouri Youth Services Institute (MYSI) to conduct the assessment and facilitate the strategic and operational planning.

DHHS engaged MYSI to conduct an initial assessment of the YRTC Kearney campus as the hub of the system. The assessment would include key personnel and stakeholder interviews, data analysis and organizational design – systems, processes, protocols, models and structure. Scheduled to commence March 1, the assessment was altered due to COVID-19 travel restrictions, requiring the interviews and data analysis to be conducted remotely. The assessment was limited to these activities, with the notion that future work would follow.

During this period, DHHS was also taking steps to strengthen its **clinical programming** model. DHHS established a new director-level position in March 2020, which would evaluate clinical programming and ensure seamless coordination of care planning and treatment across the system. This position is a critical starting point to revamping all the treatment programming, implementing new progression models and integrating individualized and family trauma therapy.

Also in March, DHHS entered into a contractual agreement with the Nebraska Department of Education (NDE) to provide leadership and administrative oversight for the YRTC and youth high schools. This move has been pivotal as DHHS establishes the YRTC school system, coordinates initiatives with the other residential youth high schools, and aligns technology initiatives across all campuses. The move has proven invaluable as NDE leadership has provided subject matter expertise and identified several gaps in the education system.

In response to multiple incidents on the Kearney campus, DHHS leadership implemented an action plan in February 2020 to address immediate concerns in security, emergency response, staff training and development, facility modifications, command and coordination with local law enforcement, and communication both internally and with local law enforcement.

Beginning on February 27, 2020, YRTC leadership (unit managers, medical director, therapists and administrators) in collaboration with juvenile probation, have been conducting case reviews of youth that have been in the system longer than 9 months. The goal of this process was to review the current treatment progress of each youth, and to determine the suitability for re-entry. This process was valuable for youth who were ready for re-entry, and allowed the facility to deliver enhanced care and re-calibration of the programming as a result of decreased census. Periodic case review of each youth will be a standard of care going forward.

The initiatives DHHS has worked on since releasing the business plan are critical to achieving the initial goals of establishing a system and enhancing the programming across the system. Equally important, these initiatives are important first steps to **shifting the culture** at each of the YRTC campuses and youth facilities with priority focus on **clinical therapy, rehabilitation and education**.

Next steps – addressing challenges and positioning for the future

The ultimate goal of the future state planning is to determine how best to position the youth services programs to meet the needs of Nebraska’s youth. This includes all **care points** across the **continuum of care**. DHHS will continue to work with the Committee to determine the system’s path forward, while continuing to position each facility and each program in preparation for this **future state**.

In order to best position itself for the future, DHHS must address several operational challenges that exist, while leveraging the capabilities of each campus.

Challenges and business needs:

- Maintaining operations at both the YRTC Geneva and Kearney campuses has historically been hampered by the ability to recruit and retain staff.
 - YRTC-Geneva staffing has been problematic for the last three years, including the most recent months since reopening as a transitional site for female youth.
 - YRTC-Geneva is struggling to maintain appropriate operational staffing levels of critical care staff.
 - YRTC-Kearney has had some success in recruiting staff; however, it has not been able to maintain staffing levels, based on most recent census levels.
- There is a significant need to recruit and develop appropriate staff with renewed emphasis on clinical therapy.
- There is an overwhelming desire from stakeholders to reinstate gender-designated campuses. This will ease operational coordination while enhancing clinical programming and education delivery.

Addressing these challenges will not only help achieve operational efficiencies, but assist in shifting the **culture** with focus on **therapy, treatment, and education**. DHHS has several **opportunities** to leverage the capabilities (staff and facilities) of all existing campuses in order to maximize resources and enhance care.

The following plan will better position YRTC System and other residential youth programs for future development, and transition into more community-based programming.

Facility Programming Summary

YRTC Geneva	YRTC Kearney	Lincoln Facility	HRC	Whitehall
Current Status				
Re-entry female youth	Hub, YRTC male and female youth	High-acuity male and female youth	Male youth with substance use disorder (SUD)	Male youth who sexually harm (YSH)
October 2020				
Close campus, move female programming to new HRC facilities	Hub, YRTC male youth only	Maintain <i>Future potential for PRTF for high mental health services, male and female youth</i>	Hub, YRTC female youth only	YSH and SUD male youth

Youth Facilities Transition Plan

- **Close the Geneva campus and relocate all female treatment programs to the Hastings Regional Center campus.**
 - Despite efforts to re-establish services in Geneva, staffing and location limit this campus as a sustainable option without severely impacting operational performance.
 - Geneva staff vacancy rate:
 1. 2018 25%
 2. 2019 24%
 3. 2020 58%
 - Geneva staff overtime: 218 hrs per pay period over the last twelve months
 - Geneva staff turnover rate:
 1. 2018 47%
 2. 2019 59%
 3. 2020 19%
 - Females would once again have their own campus with increased potential and capabilities.
 - The Hastings Regional Center (HRC) has two new buildings that can accommodate up to 24 residents in **individual rooms**.
 - HRC has stable, trained staff, allowing appropriate recruiting and flexibility in staffing.
 - Allows for more comprehensive female programming, to include adding a SUD program.
 - Hastings provides a broader level of community resources to support programming and youth re-entry.
 - Would have to evaluate the need for enhanced security, including possibly a secure fence.
 - The Geneva campus could be repurposed by the state, or the state could allow the city of Geneva to lease the building for community purposes.

➤ **Return YRTC-Kearney to a male-only campus with expanded, enhanced services.**

- The YRTC-Kearney campus has experienced a shift over the last few years towards more of a correctional centric focus. The on-going recruiting concerns, combined with a declining emphasis on education and clinical therapy, have contributed to this shift as well.

- **Kearney staff vacancy rate:**

1. 2018	22%
2. 2019	26%
3. 2020	31%

- **Kearney staff overtime: 961 hrs per pay period last twelve months**

- **Kearney staff turnover rate:**

4. 2018	46%
5. 2019	60%
6. 2020	25%

- Reducing the census (moving female youth off campus) will lessen the pressures on staffing, and allow for the opportunity to develop leadership and staff, and/or recruit as appropriate.
- Continued changes to the clinical programming and education initiatives will greatly enhance the much-needed cultural shift on the Kearney campus.
- Additional work with the Missouri Youth Services Institute (see summary page), a nationally recognized consulting group that developed the Missouri Model, will further aid in implementing program, paradigm, and desired cultural changes.

➤ **Maintain the mission of the Lincoln Facility – serving high-acuity male and female youth:**

- Since becoming operational in February 2020, the facility has been phasing in its staffing based on the treatment needs of our youth assigned to the facility.
- The staffing and therapy are in place, serving both male and female youth who have been clinically diagnosed to have higher mental health needs.
- The location is ideal, offering a closer proximity to Lancaster and Douglas Counties.
- The capacity of the facility is a total of 20 individual rooms in two separate pods (11 rooms and 9 rooms).
- Both the programming and physical structure are well-suited to meet the needs of this youth population. This facility does have the flexibility to shift its mission to a psychiatric residential treatment facility.

➤ **Designate the Whitehall Campus to serve both male SUD and YSH programs.**

- Reimbursement for both SUD and YSH services at Whitehall come from Medicaid and Probation for PRTF level of care.
- The average daily census over the last five years is 14 boys – there are appropriate recruiting capabilities and staffing to accommodate both programs.
- The capacity includes 4 cottages with 8-9 beds in each. Additionally there is a school that can accommodate up to 36 youth, a gym, a 4-bedroom home, a vocational rehab area, and 2 separate buildings being used for administration and DHHS Human Resources.
- The buildings on this campus are dated, structurally sound but in need of cosmetic changes and updating of surveillance system.

Missouri Youth Services Institute (MYSI) summary

DHHS contracted with MYSI to conduct an on-site assessment beginning March 30, 2020. This process included a key stakeholder interviews, data analysis and documentation review. Due to COVID-19 and “stay at home” orders in Missouri, the process was limited to key stakeholder interviews (YRTC staff, juvenile probation, judges and community stakeholders), which accomplished via conference calls. The purpose of the interviews were to obtain strengths, weaknesses and their overall thoughts on the YRTCs. The findings of the Pre-Assessment were documented in a report dated April 13, 2020. These findings revealed several areas that needed to be addressed in revising current programmatic operations.

In order to develop an implementation plan for the YRTC male and female programs, MYSI is proposing a team of two (2) consultants to conduct an interview and assessment of the present operations and programs at the Kearney and Geneva (then Hastings) sites in order to prioritize the needs to be addressed. This would include extensive interviews with staff at all levels, and a representation of the youth and their families.

The MYSI consultants will travel weekly to the YRTC locations. They will be “boots on the ground,” working with both leadership and youth alike to model behavior and provide a structured learning environment, all with the goal to change the culture. MYSI will coach and mentor YRTC leadership and staff, including role playing, leading group meetings and engaging youth for development.

The MYSI team will work with DHHS to put into place recommendations for the physical layout of the facility; the necessary modifications to make the units youth friendly; the size and types of groups into the units; the staffing patterns and the utilization of staff, and the development of an overall therapeutic group treatment process for the facility. The MYSI team will also assist DHHS with employee recruitment and retention, as well as assist in a process to assess the present staff’s strengths, weaknesses, abilities and motivation. Other MYSI initiatives would include, but not limited to:

Goals to be achieved

- **Leadership Retreat** with executive & facility leadership
- Establish an in-house **Champions Team** of representative staff members across all campuses for ongoing feedback and support around program fidelity and implementation
- Construct a **Developmental Stage System Matrix** – a revised Level System for youth programming that includes curricula, experiences, and developmental assignments with focus on individualized, internalized change
- Develop a defined but expandable core support team for youth, **Unit-based Management** with participants whose roles and responsibilities are clearly spelled out both in the care coordination process and by virtue of their DHHS or contracted position description.
- Develop a revised **Case Planning Process** that includes the assessment phase, program components and all current meeting/processes designed to make decisions regarding youth initial on campus placement, subsequent campus programming, progress, and recommendations for release.

- Develop a **Training Plan** to evaluate current training, coaching and supervision to support the proposed developmental model.

Performance Metrics *(based on designated facility metrics, generally including):*

- Reduction in escapes
- Reduction in violence
- Reduction in assaults (on staff and on youth)
- Reduction in critical incidences
- Educational accomplishments
- Reduction in use of restraints and confinement
- Reduction in suicide attempts and self-harm
- Reduction in recidivism
- Off campus activities
- Youth and family satisfaction

Facilities Transition Timeline

	July 2020	August 2020	September 2020	October 2020	November 2020
Execute contract with MYSI	X				
Security enhancements to HRC residential buildings	X	X	X		
Meetings with legislators & stakeholders	X				
Meetings with youth facility teammates	X				
Training of Whitehall and Hastings teammates	X	X			
MYSI onsite at YRTC campuses		X	X	X	X
Transfer SUD youth to Whitehall			X		
Move female youth from Kearney & Geneva to Hastings				X	
Close Geneva YRTC program				X	
MYSI begins leadership development					X

APPENDIX 6
AMMENDMENT 3088
LB1140 (2020)

AMENDMENTS TO LB1140
(Amendments to AM3035)

Introduced by Howard, 9.

- 1 1. On page 4, after line 20, insert the following new subsection:
2 "(4) The department shall not establish a new youth rehabilitation
3 and treatment center or establish or move a youth rehabilitation and
4 treatment center to a new or existing state or private facility until
5 March 30, 2021, after the completion of the planning process required
6 under this section. Youth committed to the Office of Juvenile Services
7 and residing at a youth rehabilitation and treatment center may be moved
8 to an existing state or private facility on a temporary basis in the
9 event of an emergency, pursuant to the emergency plans created under
10 section 6 of this act, and in compliance with the requirements and
11 restrictions in sections 7 and 8 of this act."

APPENDIX 7

SENATORS' REQUEST FOR
ATTORNEY GENERAL
OPINION

Nebraska State Legislature

SENATOR SARA HOWARD

District 9
132 North 40th Street
Omaha, Nebraska 68131
(402) 699-5514

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COMMITTEES

Chairperson - Health and Human Services
Banking, Commerce and Insurance
Committee on Committees
Rules

8.14.20

Attorney General Doug Peterson
Nebraska Attorney General's Office
2115 State Capitol
P.O. Box 98920
Lincoln, NE 68509

Dear Attorney General Peterson,

We are writing to request an opinion on the necessity of legislation to effectuate the Department of Health and Human Services' stated plan to move the Chemical Dependency Program at the Hastings Regional Center to the Whitehall program in Lincoln and to then create a Youth Rehabilitation and Treatment Center (YRTC) for girls at the Hastings Regional Center.

Nebraska's statutes establish the Hastings Regional Center in Adams County as a state hospital to provide mental and behavioral health services. The Hastings Regional Center has long housed the Juvenile Chemical Dependency Program. In 2017, the Legislature specifically appropriated funds for the construction of a new building to be used by the Chemical Dependency Program at the Hastings Regional Center. The Department of Health and Human Services (DHHS) has announced plans to use this new building for a YRTC instead.

Neb. Rev. Stat. 83-305 designates the Hastings Regional Center in Adams County as a state hospital for the treatment of mental illness. Neb Rev. Stat. 83-101.06 states that DHHS "shall: (1) Administer the *clinical programs and services* of . . . the Hastings Regional Center." Further, Neb. Rev. Stat. 83-305.04 requires the Department of Health and Human Services (DHHS) to utilize at the regional centers a rehabilitation model defined as "a comprehensive approach to treatment and rehabilitation of a person with a disability caused by a mental illness." In addition, Neb. Rev. Stat. 71-810(3) requires that DHHS notify the Governor and the Legislature "of any intended reduction or discontinuation of regional center services." That notice must be submitted electronically to the Legislature and detail the services that will be used to replace the reduction in regional center services. Under the contemplated plan to move the Hastings Regional Center Chemical Dependency Program to Whitehall in Lincoln, the bed availability will be reduced from 24 to 8. Notice has not been given in accordance with the requirements of the statute.

In 2017, the Legislature through LB 330 (section 8) appropriated over \$5 million for the express purpose of constructing a new building at the Hastings Regional Center for use by the Chemical Dependency Program. The building was built for the needs of that program and recently completed. The appropriations for the operation of the Hastings Regional Center are found in Program 361. Program 361 falls under Program 365 which covers all the three Regional Centers (Hastings, Norfolk, and Lincoln). Whitehall, however, falls under a different division and budget program and is not within Program 365 for the Regional Centers.

Our understanding of DHHS's plan derives from conversations with DHHS CEO Dannette Smith, statements by CEO Smith in the press, and a document entitled "YRTC & Youth Services Initial Transition Plan" (attached). Currently, the Hastings Regional Center Chemical Dependency Program is still utilizing Building #3 on the HRC campus even though the newly constructed building for that program is complete. Instead, as of October 1, 2020, the male youth being served in the Chemical Dependency Program will be moved to Whitehall in Lincoln. The building constructed for the Chemical Dependency Program will never be used by it. We understand the capacity at Whitehall to be 8 beds for youth needing substance use disorder treatment. There are currently 9 male youth being served by the Chemical Dependency Program. In 2019 the average census for the Chemical Dependency program was 14 and never lower than 10 youth.

DHHS's plan also contemplates moving the female youth committed to the YRTC and currently housed at the YRTC in Kearney, into the newly constructed Chemical Dependency Program building at the Hastings Regional Center. The YRTC in Geneva would be closed down. Prior to moving the girls, DHHS plans to renovate the newly constructed building at Hastings to fortify the walls and change the windows, among other renovations, so that it would serve a more correctional purpose and could accommodate the needs and behaviors of the females committed to the YRTC. The renovations were to be completed and the girls were to be moved by October 1, 2020. However, LB 1140 passed by the Legislature and signed by the Governor this month requires that DHHS complete its YRTC operational planning process before moving the female youth and establishing a new YRTC in Hastings. The female youth may not be moved until March 2021 under that bill.

Our understanding is that DHHS still intends to move the male youth in the Chemical Dependency Program to Whitehall by October 1, 2020. DHHS may begin to renovate and retrofit the new building at the Hastings Regional Center to accommodate the female youth at the YRTC as soon as September. The girls would then be moved to the Hastings Regional Center in March 2021.

We are requesting your opinion on the following questions:

1. Does the Legislature need to amend the law, specifically section 83-305, before the Chemical Dependency Program at the Hastings Regional Center is dismantled and the boys are moved to Whitehall in Lincoln?
2. Similarly, does the Legislature need to amend section 83-305 before a YRTC can be established at the Hastings Regional Center or before the Hastings Regional Center can

be used to house the female youth from the YRTC since the YRTC at the Hastings Regional Center will not be a state hospital or used a mental health facility as required under 83-305? Must the provision establishing a state hospital in Adams County at the Hastings Regional Center be stricken?

3. Would the Legislature need to amend the law to redirect the appropriations designated in LB 330 (2017) for the construction of a building for the specific use of the Chemical Dependency Program so that the building may be used as a YRTC instead?
4. Would it be necessary for the Legislature to reallocate funds from the Hastings Regional Center operations budget, Program 361, to the operations budget at Whitehall prior to the establishment of the Chemical Dependency Program at Whitehall?

We would be grateful for your opinion on these questions. Given DHHS's timeline to begin implementing this new plan by October 1, 2020, it would be very helpful and much appreciated if we could receive guidance as soon as possible. Thank you in advance for your consideration.

If you need any additional information, please do not hesitate to contact us.

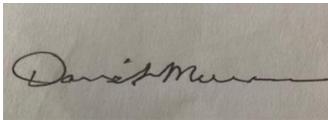
Sincerely,



Senator Sara Howard
District 9
Chair, Health and Human Services Committee



Senator Steve Halloran
District 33



Senator Dave Murman
District 38



Senator Tom Brandt
District 32

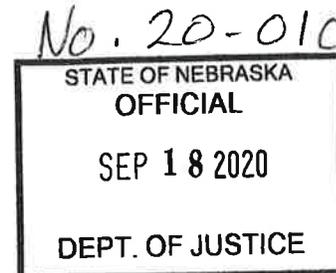
APPENDIX 8
ATTORNEY GENERAL
OPINION
NO. 20-010



STATE OF NEBRASKA
Office of the Attorney General

2115 STATE CAPITOL BUILDING
LINCOLN, NE 68509-8920
(402) 471-2682
TDD (402) 471-2682
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DOUGLAS J. PETERSON
ATTORNEY GENERAL



SUBJECT: Necessity of Legislation to Implement the Department of Health and Human Services' "YRTC & Youth Facilities Initial Transition Plan"

REQUESTED BY: Senator Sara Howard, Senator Tom Brandt, Senator Steve Halloran, and Senator Dave Murman
Nebraska Legislature

WRITTEN BY: Douglas J. Peterson, Attorney General
Leslie S. Donley, Assistant Attorney General

You have requested an opinion from this office as to whether the Legislature must enact legislation prior to the Department of Health and Human Services ("DHHS") taking certain actions relating to its "YRTC & Youth Facilities Initial Transition Plan," dated July 15, 2020. At issue is DHHS' plan to move the Juvenile Chemical Dependency Program ("JCDP") currently located at the Hastings Regional Center ("HRC") to the Whitehall Campus at the Lincoln Regional Center ("LRC"), and then establish a youth rehabilitation and treatment center ("YRTC") for girls at the HRC. You have requested that we provide our guidance on these issues as soon as possible, "[g]iven DHHS's timeline to begin implementing this new plan by October 1, 2020."

BACKGROUND

Your opinion request letter references several statutes for our consideration. First, Neb. Rev. Stat. § 83-305 (2014), which "designates the [HRC] in Adams County as a state hospital for the treatment of mental illness." Second, under Neb. Rev. Stat. § 83-101.06 (2014), DHHS "shall . . . [a]dminister the clinical programs and services of the [HRC]" Third, DHHS is required to utilize a "rehabilitation model" for services

provided at the regional centers, which is defined as “a comprehensive approach to treatment and rehabilitation of a person with a disability caused by a mental illness in order to assure that such person can perform those physical, emotional, social, and intellectual skills needed to live and work in the community.” Neb. Rev. Stat. § 83-305.04 (2014). Lastly, you state that under Neb. Rev. Stat. § 71-810(3) (2018), DHHS is required to “notify the Governor and the Legislature ‘of any intended reduction or discontinuation of regional center services.’” In this regard, you indicate that under the proposed move to Whitehall, the number of beds available for the JCDP will be reduced from 24 to 8.¹

According to your opinion request letter, in 2017 the Legislature appropriated over \$5 million dollars to construct a new building at the HRC for the JCDP. The building was recently completed, but has not been used for the program. You state that appropriations for the operation of the HRC are found in Program 361, which falls under the budget program for all three regional centers (Program 365). You indicate that Whitehall falls under a different division and budget program. It is your understanding that the male youth in the JCDP will be moved to Whitehall on October 1, 2020.

With respect to the proposed plan to move the female youth currently housed at the YRTC-Kearney to the new building at the HRC, you state that DHHS plans to renovate the building to fortify the structure “so that it would serve a more correctional purpose and . . . accommodate the needs and behaviors of the females committed to the YRTC.” The YRTC at Geneva will then close. While DHHS had planned to move the girls by October 1, certain legislation passed last month (2020 Neb. Laws LB 1040, § 2) requires DHHS to complete a YRTC operational planning process prior to establishing a new YRTC in Hastings. You state that “DHHS may begin to renovate and retrofit the new building . . . to accommodate the female youth at the YRTC as soon as September. The girls would then be moved . . . in March 2021.”

ANALYSIS

With this background in mind, you have posed a number of questions to us regarding DHHS’ authority to implement the proposed plan under current law. We will discuss each of your questions separately below.

- I. Does the Legislature need to amend the law, specifically section 83-305, before the Chemical Dependency Program at the Hastings Regional Center is dismantled and the boys are moved to Whitehall in Lincoln?

Neb. Rev. Stat. § 83-305 (2014) states:

The state hospital established in Lancaster County for the treatment of mental illnesses shall be known as the Lincoln Regional Center. The state

¹ DHHS officials inform us that the notice required under § 71-810 was provided to the Governor and the Clerk of the Legislature on September 15, 2020.

hospital established in Madison County shall be known as the Norfolk Regional Center. The state hospital established in Adams County shall be known as the Hastings Regional Center.

“In construing a statute, a court must determine and give effect to the purpose and intent of the Legislature as ascertained from the entire language of the statute considered in its plain, ordinary, and popular sense.” *State ex rel. BH Media Group, Inc. v. Frakes*, 305 Neb. 780, 793, 943 N.W.2d 231, 243 (2020); *Aksamit Resource Mgmt. v. Nebraska Pub. Power Dist.*, 299 Neb. 114, 123, 907 N.W.2d 301, 308 (2018). Section 83-305, ascertained from the entirety of its language considered in its plain, ordinary, and popular sense, designates three existing state hospitals for the treatment of mental illness as “regional centers.” The plain language of § 83-305 does not define “state hospital” or “regional center.” Notably, the JCDP is not referenced in § 83-305 nor is any other program or service.

Neb. Rev. Stat. § 83-108 (Cum. Supp. 2018)² provides, in pertinent part, that DHHS “shall have oversight and general control of the . . . hospitals for the mentally ill, [and] facilities and programs operated by the Office of Juvenile Services” DHHS also has broad authority over the admission, assignment and transfer of patients and residents in facilities under its jurisdiction. Neb. Rev. Stat. § 83-109 (Cum. Supp. 2018). As amended by 2020 Neb. Laws LB 1148, § 14 (effective date: November 14, 2020), Neb. Rev. Stat. § 83-108.04 provides that “[f]or children committed to the Office of Juvenile Services, [DHHS] may use other public facilities operated by [DHHS] for the care and treatment of such children or may contract for the use of space in another facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law.”

With respect to the JCDP, Neb. Rev. Stat. § 43-407(2) (2018), amended by 2020 Neb. Laws LB 1148, § 12, and 2020 Neb. Laws LB 1188, § 6, with an effective date of November 14, 2020, provides, in pertinent part:

A juvenile may be committed by a court to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center operated and utilized in compliance with state law pursuant to a hearing described in subdivision (1)(b)(iii) of section 43-286. The office shall not change a juvenile's placement except as provided in this section. If a juvenile placed at a youth rehabilitation and treatment center is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the Office of Juvenile Services may arrange for such treatment to be provided at the Hastings Regional Center or may transition the juvenile

² Section 83-108 was amended during the 2020 legislative session to give DHHS oversight and general control over “any facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law.” 2020 Neb. Laws LB 1188, § 17 (effective date: November 14, 2020).

to another inpatient or subacute residential treatment facility licensed as a treatment facility in the State of Nebraska and shall provide notice of the change in placement pursuant to subsection (3) of this section. . . .³

(Emphasis added.) As indicated in the emphasized language above, the Office of Juvenile Services (“OJS”) *may* place a juvenile needing such treatment at the HRC or another inpatient or subacute residential treatment facility in the state. Section 43-407(2) gives the OJS the authority and discretion to place a juvenile where it deems appropriate. We do not read this provision as requiring that the treatment be provided at the HRC.

Our research indicates that Neb. Rev. Stat. 83-306, repealed by 2004 Neb. Laws LB 1083, § 149, previously required that “[t]he three state hospitals for the mentally ill described in section 83-305 shall provide care and treatment for all persons suffering from mental illnesses who are admitted to the state hospitals.” Neb. Rev. Stat. § 83-306 (Reissue 2002). Section 83-306(4) further specified treatment of a particular illness at a specific regional center: “Persons addicted to the excessive use of alcohol shall . . . be committed to the Hastings Regional Center” *Id.* However, even with a specific statutory requirement for the treatment of persons with a particular illness, this office previously concluded that the Department of Public Institutions, the agency responsible for operation of the HRC at that time, was not statutorily prohibited from terminating the Medical Detoxification program for individuals addicted to alcohol. Op. Att’y Gen. No. 49 (March 28, 1985). “Simply, no specific statute requires that a Medical Detoxification program must be maintained at the [HRC]. Whether the Medical Detoxification program at the [HRC] is terminated is a management decision which may be made by the Department of Public Institutions.” *Id.* at 2.

“The intent of the Legislature may be found through its omission of words from a statute as well as its inclusion of words in a statute.” *Stewart v. Nebraska Dep’t of Revenue*, 294 Neb. 1010, 1019, 885 N.W.2d 723, 730 (2016). This prior statute illustrates that the Legislature knows how to employ language expressing its intent to require certain programs at specific facilities, and did not use such language in § 43-407(2) or any other statute. Since no specific statute creates the JCDP or requires the program to be maintained at the HRC, it is our opinion that DHHS’ proposed plan to move the JCDP to Whitehall constitutes a management decision, for which no legislation is necessary.

The statutes cited in your opinion request letter do not change our conclusion in this regard. While Neb. Rev. Stat. § 83-101.06 (2014) requires DHHS to “administer the clinical programs and services” offered at the regional centers, this requirement is limited to those programs and services “as may be provided by the department.” The statute does not require DHHS to provide any particular service or program at HRC. Nor does it restrict the use of the HRC to only clinical programs. And while Neb. Rev. Stat. § 83-305.04 requires that DHHS “utilize a rehabilitation model when appropriate for services

³ We note that specific references to YRTC-Kearney and YRTC-Geneva in § 43-407 were struck by the 2020 legislation.

provided at the regional centers under the jurisdiction of the department,” there is nothing in your request letter or in the materials provided to us by DHHS to suggest this model will not be utilized when the JCDP is moved to Whitehall.

You have asked us whether § 83-305 must be amended before DHHS’ proposed plan to move the JCDP to Whitehall may proceed. Based on the foregoing, we conclude that no such amendment is necessary. DHHS has broad control and discretion over the facilities under its jurisdiction, the programs and services offered at those facilities, and the admission, assignment and transfer of the patients and residents to those facilities. Section 43-407 indicates that the treatment at issue may be provided at HRC or another facility in the state as determined by the OJS. Section 71-810 suggests that the HRC JCDP may be discontinued so long as the behavioral health services provided at Whitehall are sufficient to replace the services provided at HRC.⁴ In sum, we conclude that DHHS’ plan to move the JCDP to Whitehall appears to be authorized under existing law.

- II. Similarly, does the Legislature need to amend section 83-305 before a YRTC can be established at the Hastings Regional Center or before the Hastings Regional Center can be used to house the female youth from the YRTC since the YRTC at the Hastings Regional Center will not be a state hospital or used as a mental health facility as required under § 83-305? Must the provision establishing a state hospital in Adams County at the Hastings Regional Center be stricken?

As we concluded in response to your first question, there is no need to amend § 83-305 to create the proposed YRTC at the HRC. Under Neb. Rev. Stat. § 43-404 (2016),⁵ the OJS “shall have oversight and control of the youth rehabilitation and treatment centers.” Neb. Rev. Stat. § 43-405 (2016)⁶ authorizes the OJS to “[e]xercise all powers and perform all duties necessary to carry out its responsibilities under the Health and Human Services, Office of Juvenile Services Act.” Under Neb. Rev. Stat. § 43-407, “[t]he [OJS] shall design and make available programs and treatment services

⁴ Neb. Rev. Stat. § 71-810(2) (2018) provides, in pertinent part:

The division [of Behavioral Health] may reduce or discontinue regional center behavioral health services only if (a) appropriate community-based services or other regional center behavioral health services are available for every person receiving the regional center services that would be reduced or discontinued, [and] (b) such services possess sufficient capacity and capability to effectively replace the service needs which otherwise would have been provided at such regional center

⁵ Amended by 2020 Neb. Laws LB 1188, § 3 (effective date: November 14, 2020).

⁶ Amended by 2020 Neb. Laws LB 1188, § 4 (effective date: November 14, 2020).

through youth rehabilitation and treatment centers.”⁷ Certain language in LB 1140 appears to further sanction DHHS’ ability to establish a YRTC at the HRC as proposed, subject to the conditions set out in the legislation:

The department shall not establish a new youth rehabilitation and treatment center or establish or move a youth rehabilitation and treatment center to a new or existing state or private facility until March 30, 2021, after the completion of the planning process required under this section. Youth committed to the [OJS] and residing at a youth rehabilitation and treatment center may be moved to an existing state or private facility on a temporary basis in the event of an emergency, pursuant to the emergency plans created under section 6 of this act, and in compliance with the requirements and restrictions in sections 7 and 8 of this act.

2020 Neb. Laws LB 1140, § 2, codified at Neb. Rev. Stat. § 43-427. In addition, we understand that there was no apparent need to enact enabling legislation prior to DHHS’ establishing the “YRTC-Lincoln” at the Lancaster County Youth Services Center earlier this year.

You have also asked whether the Legislature should strike the provision establishing a state hospital in Adams County at the HRC. According to DHHS officials, the HRC has not operated as a state hospital for the mentally ill for a number of years. We also understand that the JCDP is the only program currently offered at the HRC. Accordingly, the Legislature may want to consider amending § 83-305 to reflect the HRC’s actual use.

- III. Would the Legislature need to amend the law to redirect the appropriations designated in LB 330 (2017) for the construction of a building for the specific use of the Chemical Dependency Program so that the building may be used as a YRTC instead?

The specific appropriation referenced above states, in pertinent part:

The unexpended General Fund and Nebraska Capital Construction Fund appropriation balances existing on June 30, 2017, are hereby reappropriated.

⁷ As noted above, the Legislature eliminated references to “Youth Rehabilitation and Treatment Center-Kearney” and “Youth Rehabilitation and Treatment Center-Geneva” in § 43-407 in the 2020 legislation. *Cf.* Neb. Rev. Stat. § 83-107.01, amended by 2020 Neb Laws LB 1188, § 16 (effective date: November 14, 2020), which lists the state institutions under DHHS’ supervision, including the YRTCs at Kearney and Geneva, and sets out the gender separation requirements of the YRTCs “so long as the department operates” such facility.

[DHHS] is hereby authorized to repurpose reappropriated funds originally appropriated to this program for the renovation of Building 3 at the [HRC]. Such reappropriated funds shall be used to construct a facility at the [HRC] to house the chemical dependency program for males in state custody.

There is included in the reappropriated fund balances in this program an estimated \$2,897,000 to demolish buildings at the [HRC] determined by the Vacant Building and Excess Land Committee to be vacant as defined in section 72-811.

2017 Neb. Laws LB 330, § 8.⁸

This office has indicated on numerous occasions that appropriations bills must be restricted to appropriations only and cannot enact substantive law. Op. Att’y Gen. No. 91020 (March 25, 1991).⁹ “[A]n appropriations bill is separate and distinct from other substantive legislation.” Report of the Attorney General, 1979-1980, No. 289 at 416. Our position was based on constitutional provisions relating to appropriations bills, which require one subject and a new legislative act to amend or repeal existing law. Our prior opinions also pointed out the difficulty with including substantive provisions in appropriation bills: “One practical problem of putting such language in appropriation bills

⁸ As indicated, the 2017 appropriation was a reappropriation of funds originally appropriated to Program No. 919 for the renovation of Building 3 at the HRC. The legislative history of the project indicates that DHHS’ original capital construction project request was made for the 2013-2015 biennium budget cycle with a FY2014 request for \$6,876,890 for “[t]he renovation of Building #3 at the [HRC] to house a Chemical Dependency Treatment Program for 24 adolescent males.” 2013-2015 Capital Construction and Building Renewal Budget Request, October 4, 2012, at 4. The original appropriation was made via LB 198, § 11 (2013), which stated, “[DHHS] is hereby authorized to renovate Building No. 3 at the [HRC] to house the chemical dependency program serving adolescent males in state custody.” In 2015, the Legislature appropriated \$4,883,000 for FY2015-16, for the same purpose of renovating Building No. 3 to house the chemical dependency program. See LB 660, § 9 (2015). Most recently, the Legislature appropriated the undisbursed balances in Program No. 919 existing on June 30, 2019 and June 30, 2020. See LB 297, § 47 (2019). LB 297 contained no specific authorization language regarding these funds found in prior capital construction legislation in each of the three prior biennium budget cycles. DHHS’ 2019-2021 request simply seeks a reappropriation for “Program 919 Hastings Regional Center (HRC) Building No. 3 Renovation.” 2019-2021 Capital Construction and Building Renewal Budget Request, September 14, 2018, at 4.

⁹ See also Op. Att’y Gen. No. 35 (August 14, 2000); Op. Att’y Gen. No. 92054 (April 1, 1992); Opinion of the Attorney General No. 24, February 17, 1981; Report of the Attorney General, 1977–1978, No. 75 at 112 and No. 241 at 368; and Report of the Attorney General, 1975–1976, No. 201 at 281 and No. 214 at 296.

is the fact that such bills are in the nature of temporary laws. They are never placed with our permanent laws, but are only printed once, in the Session laws. Thus they do not come to the attention of persons having to deal with the government.” Opinion of the Attorney General to Governor Exon (March 25, 1974), 1974 Legislative Journal at 1313. There is no provision in the permanent laws that discusses “a facility at the [HRC] to house the chemical dependency program for males in state custody.” The only provision we could find relating to the JCDP is the reference to “inpatient or subacute substance abuse or behavioral health residential treatment” and the HRC in Neb. Rev. Stat. § 43-407.

The premise of your question appears to be that the language in LB 330 requires the JCDP to be housed at the new facility at the HRC. As explained above, appropriation bills do not create substantive provisions. And as indicated in our responses to questions I and II, DHHS already has the ability under current law to plan to use the HRC facility for a proposed YRTC. Consequently, the Legislature must decide as a matter of policy whether substantive legislation is necessary to restrict the use of the HRC facility.

- IV. Would it be necessary for the Legislature to reallocate funds from the Hastings Regional Center operations budget, Program 361, to the operations budget at Whitehall prior to the establishment of the Chemical Dependency Program at Whitehall?

According to the 2019 mainline budget bill, LB 294, § 104, the HRC is listed as a program classification (No. 361) within DHHS Program No. 365, “Mental Health Operations.” According to DHHS officials, the administrative costs of operating the JCDP at HRC are currently paid from Program No. 365 and will continue to be paid from this program when JCDP is transitioned to Whitehall. Thus, it is not necessary for the Legislature to “reallocate” funds prior to the proposed move.

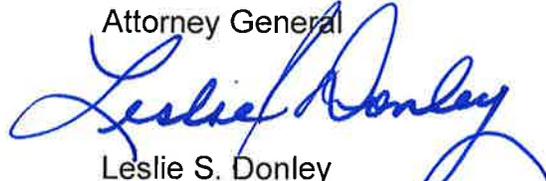
CONCLUSION

Based on the foregoing, it is our opinion that no legislative amendments to Neb. Rev. Stat. § 83-305 are necessary in order for DHHS to implement its “YRTC & Youth Facilities Initial Transition Plan.” While the proposed transfer of the JCDP to Whitehall may proceed as scheduled, DHHS is prohibited from establishing a new YRTC or establishing or moving a YRTC to a new or existing state or private facility until March 30, 2021, following the completion of the planning requirements set out in § 43-427. There is also no need to “redirect” the appropriation expended to construct the building originally intended for the JCDP, notwithstanding DHHS’ decision to repurpose the building.

Finally, other funding or administrative considerations regarding the regional centers, the OJS, or the YRTC's, are matters of policy as opposed to legal questions, which the Youth Rehabilitation and Treatment Center Special Oversight Committee¹⁰ or the Legislature as a whole is best equipped to address.

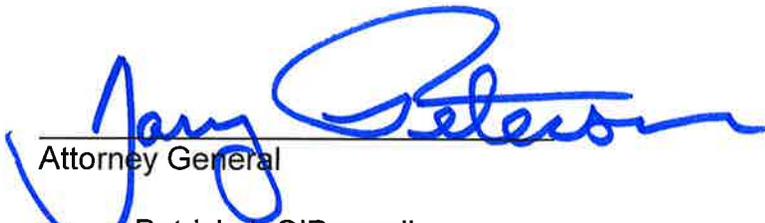
Sincerely,

DOUGLAS J. PETERSON
Attorney General



Leslie S. Donley
Assistant Attorney General

Approved by:



Attorney General
pc Patrick J. O'Donnell
Clerk of the Nebraska Legislature

49-2564-29

¹⁰ See 2020 Neb. Laws LB 1144, § 4 (effective date: November 14, 2020).

APPENDIX 9

SEN. ARCH LETTER
TO CEO SMITH (DHHS)
SEPT. 11, 2020

Nebraska State Legislature

SENATOR JOHN K. ARCH

District 14
State Capitol
PO Box 94604
Lincoln, Nebraska 68509-4604
(402) 471-2730
jarch@leg.ne.gov



COMMITTEES

Vice Chairperson - Health and Human Services
General Affairs
Urban Affairs

September 11, 2020

Dannette R. Smith
Chief Executive Officer
Department of Health and Human Services
301 Centennial Mall South, P.O. Box 95026
Lincoln, NE 68509

RE: YRTC Special Oversight Committee of the Legislature

Dear CEO Smith,

The Youth Rehabilitation and Treatment Centers Special Oversight Committee of the Legislature, created pursuant to LB 1144, has had the opportunity to meet twice to discuss issues regarding the state's YRTCs and the committee's role in overseeing the progression of these operations. During our discussions, numerous concerns were raised with respect to reported actions currently being taken by the Department of Health and Human Services. On behalf of the committee, I wanted to make sure you were aware of those concerns.

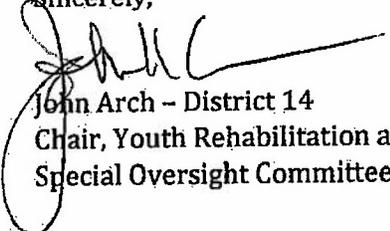
As you know, along with LB 1144, the Legislature passed and the Governor signed into law, a number of bills aimed at addressing the shortcomings of our YRTC programs that were brought to light by the crisis at Geneva in August of 2019. Among the package of bills was LB 1140, which included a provision that states *"The department shall not establish a new youth rehabilitation and treatment center or establish or move a youth rehabilitation and treatment center to a new or existing state or private facility until March 30, 2021, after the completion of the planning process required under this section..."* The planning process referred to in that section is the five-year operations plan the Department is to develop with input from key stakeholders.

While I understand that you had to act quickly and decisively when moving the girls from Geneva last August for their own safety, the Legislature's intent with respect to LB 1140 was to hit the pause button on any further disruptions of youth and staff and give the Department the opportunity to ensure the development of its operations plan was done in a thoughtful and deliberative manner with input from key stakeholders. Regardless, it appears there continues to be movement with respect to these programs. In addition to the transfer of the youth substance abuse program from the Hastings Regional Center (HRC) to the Whitehall Campus in Lincoln, it has been rumored that employees at Geneva and HRC are being encouraged to consider different employment options.

While the substance abuse program is not technically a youth rehabilitation and treatment center, it appears that the relocation is intended to accommodate change to the girl's YRTC program in the very near future without the operations plan in place.

In our deliberations within the committee, members of the Oversight Committee have discussed serious concerns that continued efforts of the Department to move forward in reconfiguring these programs prior to the development of a comprehensive plan is in conflict with the intent of the Legislature. I do appreciate your willingness to meet with the committee members on September 18th and wanted to make you aware of our conversations prior to that date so you can be prepared to address these issues at that time. I look forward to visiting with you on the 18th.

Sincerely,



John Arch - District 14
Chair, Youth Rehabilitation and Treatment Center
Special Oversight Committee

APPENDIX 10
CEO SMITH (DHHS)
LETTER TO
CLERK OF THE LEGISLATURE
SEPT. 15, 2020

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

September 15, 2020

Patrick J. O'Donnell
Clerk of the Legislature
State Capitol, Room 2018
Lincoln, NE 68509-4604

The Honorable Pete Ricketts, Governor
State Capitol, Second Floor
P.O. Box 94848
Lincoln, NE 68509-4848

Re: Notification pursuant to Neb. Rev. Stat. §71-810 of relocation of Regional Center services

Dear Mr. O'Donnell and Governor Ricketts:

Neb. Rev. Stat. §71-810 requires the Department of Health and Human Services to notify the Governor and the Legislature of reportable changes in Regional Center services. Notice of the intent to relocate the Hastings Juvenile Chemical Dependency Program (HJCDP) to the Whitehall Campus in Lincoln, Nebraska was given to members of the legislature on July 16, 2020. The substance use treatment program provides residential treatment for adolescent males from the ages of 13 to 18 years. The average length of stay is approximately 3-4 months, and utilizes evidenced based practices including motivational interviewing, various cognitive behavioral therapy approaches, contingency management, medication assisted treatment and Brief Strategic Family Therapy.

The Juvenile Chemical Dependency Program currently has eight patients. Whitehall is a psychiatric residential treatment facility licensed and accredited as part of the Lincoln Regional Center. A separate cottage on the Whitehall campus will be designated for the Juvenile Chemical Dependency Program with capacity for eight adolescent males from the ages of 13 to 18 years.

Because the program is being relocated and not discontinued, DHHS will not see an overall reduction in personnel or expenditures.

Please let me know if you have any questions regarding this information. A copy of the July 16, 2020 notice is attached for your reference.

Respectfully,

Dannette R. Smith, MSW
Chief Executive Officer
Department of Health and Human Services

APPENDIX 11

SLIP LAW

LB1148 (2020)

LEGISLATIVE BILL 1148

Approved by the Governor August 06, 2020

Introduced by Vargas, 7; Howard, 9; Lathrop, 12; DeBoer, 10.

A BILL FOR AN ACT relating to protected persons; to amend sections 28-377, 28-378, 28-716, 28-719, 28-726, 28-728, 28-730, 29-1926, 43-247.02, 43-407, 43-408, 83-108.04, and 83-901, Reissue Revised Statutes of Nebraska, and sections 43-286 and 43-2,108.01, Revised Statutes Supplement, 2019; to change provisions relating to access to and use of certain records and reports of abuse and neglect; to provide for immunity as prescribed; to change provisions relating to forensic interviews and video recordings; to provide and change requirements for placement and treatment of juveniles; to eliminate obsolete provisions; to harmonize provisions; and to repeal the original sections.

Be it enacted by the people of the State of Nebraska,

Section 1. Section 28-377, Reissue Revised Statutes of Nebraska, is amended to read:

28-377 Except as otherwise provided in sections 28-376 to 28-380, no person, official, or agency shall have access to the records relating to abuse unless in furtherance of purposes directly connected with the administration of the Adult Protective Services Act and section 28-726. Persons, officials, and agencies having access to such records shall include, but not be limited to:

(1) A law enforcement agency investigating a report of known or suspected abuse;

(2) A county attorney in preparation of an abuse petition;

(3) A physician who has before him or her a person whom he or she reasonably suspects may be abused;

(4) An agency having the legal responsibility or authorization to care for, treat, or supervise an abused vulnerable adult;

(5) Defense counsel in preparation of the defense of a person charged with abuse;

(6) Any person engaged in bona fide research or auditing, except that no information identifying the subjects of the report shall be made available to the researcher or auditor. The researcher shall be charged for any costs of such research incurred by the department at a rate established by rules and regulations adopted and promulgated by the department;

(7) The designated protection and advocacy system authorized pursuant to the Developmental Disabilities Assistance and Bill of Rights Act, 42 U.S.C. 6000, as the act existed on September 1, 2001, and the Protection and Advocacy for Mentally Ill Individuals Act, 42 U.S.C. 10801, as the act existed on September 1, 2001, acting upon a complaint received from or on behalf of a person with developmental disabilities or mental illness; and

(8) The For purposes of licensing providers of child care programs, the department, as required or authorized by state law, federal law, federal regulation, or applicable federal program provisions and in furtherance of its programs.

Sec. 2. Section 28-378, Reissue Revised Statutes of Nebraska, is amended to read:

28-378 The department or appropriate law enforcement agency shall provide requested information to any person legally authorized by sections 28-376 to 28-380 to have access to records relating to abuse when ordered by a court of competent jurisdiction or upon compliance by such person with identification requirements established by rules and regulations of the department or law enforcement agency. Such information shall not include the name and address of the person making the report, except that the department may use the name and address as required or authorized by state law, federal law, federal regulation, or applicable federal program provisions and in furtherance of its programs and the county attorney's office may request and receive the name and address of the person making the report with such person's written consent. The name and other identifying data of any person requesting or receiving information from the registry and the dates and the circumstances under which requests are made or information is released shall be entered in the registry.

Sec. 3. Section 28-716, Reissue Revised Statutes of Nebraska, is amended to read:

28-716 Any person participating in an investigation or the making of a report of child abuse or neglect required by section 28-711 pursuant to or participating in a judicial proceeding resulting therefrom or providing information or assistance, including a medical evaluation or consultation in connection with an investigation, a report, or a judicial proceeding pursuant to a report of child abuse or neglect, shall be immune from any liability, civil or criminal, that might otherwise be incurred or imposed, except for maliciously false statements.

Sec. 4. Section 28-719, Reissue Revised Statutes of Nebraska, is amended to read:

28-719 Upon complying with identification requirements established by regulation of the department, or when ordered by a court of competent

jurisdiction, any person legally authorized by section 28-722, 28-726, or 28-727 to have access to records relating to child abuse and neglect may request and shall be immediately provided the information requested in accordance with the requirements of the Child Protection and Family Safety Act. Except for such information provided to department personnel and county attorneys, such Such information shall not include the name and address of the person making the report of child abuse or neglect. The names and other identifying data and the dates and the circumstances of any persons requesting or receiving information from the central registry of child protection cases maintained pursuant to section 28-718 shall be entered in the central registry record.

Sec. 5. Section 28-726, Reissue Revised Statutes of Nebraska, is amended to read:

28-726 Except as provided in this section and sections 28-722 and 81-3126, no person, official, or agency shall have access to information in the tracking system of child protection cases maintained pursuant to section 28-715 or in records in the central registry of child protection cases maintained pursuant to section 28-718 unless in furtherance of purposes directly connected with the administration of the Child Protection and Family Safety Act. Such persons, officials, and agencies having access to such information shall include, but not be limited to:

(1) A law enforcement agency investigating a report of known or suspected child abuse or neglect;

(2) A county attorney in preparation of a child abuse or neglect petition or termination of parental rights petition;

(3) A physician who has before him or her a child whom he or she reasonably suspects may be abused or neglected;

(4) An agency having the legal responsibility or authorization to care for, treat, or supervise an abused or neglected child or a parent, a guardian, or other person responsible for the abused or neglected child's welfare who is the subject of the report of child abuse or neglect;

(5) Any person engaged in bona fide research or auditing. No information identifying the subjects of the report of child abuse or neglect shall be made available to the researcher or auditor;

(6) The Foster Care Review Office and the designated local foster care review board when the information relates to a child in a foster care placement as defined in section 43-1301. The information provided to the office and local board shall not include the name or identity of any person making a report of suspected child abuse or neglect;

(7) The designated protection and advocacy system authorized pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. 15001, as the act existed on January 1, 2005, and the Protection and Advocacy for Mentally Ill Individuals Act, 42 U.S.C. 10801, as the act existed on September 1, 2001, acting upon a complaint received from or on behalf of a person with developmental disabilities or mental illness;

(8) The person or persons having custody of the abused or neglected child in situations of alleged out-of-home child abuse or neglect;

(9) The department, as required or authorized by state law, federal law, federal regulation, or applicable federal program provisions and in furtherance of its ~~For purposes of licensing providers of child care programs, the Department of Health and Human Services; and~~

(10) A probation officer administering juvenile intake services pursuant to section 29-2260.01, conducting court-ordered predispositional investigations prior to disposition, or supervising a juvenile upon disposition; and -

(11) A child advocacy center pursuant to team protocols and in connection with a specific case under review or investigation by a child abuse and neglect investigation team or a child abuse and neglect treatment team convened by a county attorney.

Sec. 6. Section 28-728, Reissue Revised Statutes of Nebraska, is amended to read:

28-728 (1) The Legislature finds that child abuse and neglect are community problems requiring a coordinated response by law enforcement, child advocacy centers, prosecutors, the Department of Health and Human Services, and other agencies or entities designed to protect children. It is the intent of the Legislature to create a child abuse and neglect investigation team in each county or contiguous group of counties and to create a child abuse and neglect treatment team in each county or contiguous group of counties.

(2) Each county or contiguous group of counties will be assigned by the Department of Health and Human Services to a child advocacy center. The purpose of a child advocacy center is to provide a child-focused location for conducting forensic interviews and medical evaluations for alleged child victims of abuse and neglect and for coordinating a multidisciplinary team response that supports the physical, emotional, and psychological needs of children who are alleged victims of abuse or neglect. Each child advocacy center shall meet accreditation criteria set forth by the National Children's Alliance. Nothing in this section shall prevent a child from receiving treatment or other services at a child advocacy center which has received or is in the process of receiving accreditation.

(3) Each county attorney or the county attorney representing a contiguous group of counties is responsible for convening the child abuse and neglect investigation team and ensuring that protocols are established and implemented. A representative of the child advocacy center assigned to the team shall assist the county attorney in facilitating case review, developing and updating

protocols, and arranging training opportunities for the team. Each team must have protocols which, at a minimum, shall include procedures for:

(a) Mandatory reporting of child abuse and neglect as outlined in section 28-711 to include training to professionals on identification and reporting of abuse;

(b) Assigning roles and responsibilities between law enforcement and the Department of Health and Human Services for the initial response;

(c) Outlining how reports will be shared between law enforcement and the Department of Health and Human Services under sections 28-712.01 and 28-713;

(d) Coordinating the investigative response including, but not limited to:

(i) Defining cases that require a priority response;

(ii) Contacting the reporting party;

(iii) Arranging for a video-recorded forensic interview at a child advocacy center for children who are three to eighteen years of age and are alleged to be victims of sexual abuse or serious physical abuse or neglect, have witnessed a violent crime, are found in a drug-endangered environment, or have been recovered from a kidnapping;

(iv) Assessing the need for and arranging, when indicated, a medical evaluation of the alleged child victim;

(v) Assessing the need for and arranging, when indicated, appropriate mental health services for the alleged child victim or nonoffender caregiver;

(vi) Conducting collateral interviews with other persons with information pertinent to the investigation including other potential victims;

(vii) Collecting, processing, and preserving physical evidence including photographing the crime scene as well as any physical injuries as a result of the alleged child abuse and neglect; and

(viii) Interviewing the alleged perpetrator;

(e) Reducing the risk of harm to alleged child abuse and neglect victims;

(f) Ensuring that the child is in safe surroundings, including removing the perpetrator when necessary or arranging for temporary custody of the child when the child is seriously endangered in his or her surroundings and immediate removal appears to be necessary for the child's protection as provided in section 43-248;

(g) Sharing of case information between team members; and

(h) Outlining what cases will be reviewed by the investigation team including, but not limited to:

(i) Cases of sexual abuse, serious physical abuse and neglect, drug-endangered children, and serious or ongoing domestic violence;

(ii) Cases determined by the Department of Health and Human Services to be high or very high risk for further maltreatment; and

(iii) Any other case referred by a member of the team when a system-response issue has been identified.

(4) Each county attorney or the county attorney representing a contiguous group of counties is responsible for convening the child abuse and neglect treatment team and ensuring that protocols are established and implemented. A representative of the child advocacy center appointed to the team shall assist the county attorney in facilitating case review, developing and updating protocols, and arranging training opportunities for the team. Each team must have protocols which, at a minimum, shall include procedures for:

(a) Case coordination and assistance, including the location of services available within the area;

(b) Case staffings and the coordination, development, implementation, and monitoring of treatment or safety plans particularly in those cases in which ongoing services are provided by the Department of Health and Human Services or a contracted agency but the juvenile court is not involved;

(c) Reducing the risk of harm to child abuse and neglect victims;

(d) Assisting those child abuse and neglect victims who are abused and neglected by perpetrators who do not reside in their homes; and

(e) Working with multiproblem status offenders and delinquent youth.

(5) For purposes of sections 28-728 to 28-730 ~~this section~~, forensic interview means a video-recorded interview of an alleged child victim conducted at a child advocacy center by a professional with specialized training designed to elicit details about alleged incidents of abuse or neglect, and such interview may result in intervention in criminal or juvenile court.

Sec. 7. Section 28-730, Reissue Revised Statutes of Nebraska, is amended to read:

28-730 (1) Notwithstanding any other provision of law regarding the confidentiality of records and when not prohibited by the federal Privacy Act of 1974, as amended, juvenile court records and any other pertinent information that may be in the possession of school districts, law enforcement agencies, county attorneys, the Attorney General, the Department of Health and Human Services, child advocacy centers, and other team members concerning a child whose case is being investigated or discussed by a child abuse and neglect investigation team or a child abuse and neglect treatment team shall be shared with the respective team members as part of the discussion and coordination of efforts for investigative or treatment purposes. Upon request by a team, any individual or agency with information or records concerning a particular child shall share all relevant information or records with the team as determined by the team pursuant to the appropriate team protocol. Only a team which has accepted the child's case for investigation or treatment shall be entitled to access to such information.

(2) All information acquired by a team member or other individuals pursuant to protocols developed by the team shall be confidential and shall not

be disclosed except to the extent necessary to perform case consultations, to carry out a treatment plan or recommendations, or for use in a legal proceeding instituted by a county attorney or the Child Protection Division of the office of the Attorney General. Information, documents, or records otherwise available from the original sources shall not be immune from discovery or use in any civil or criminal action merely because the information, documents, or records were presented during a case consultation if the testimony sought is otherwise permissible and discoverable. Any person who presented information before the team or who is a team member shall not be prevented from testifying as to matters within the person's knowledge.

(3) Each team may review any case arising under the Nebraska Criminal Code when a child is a victim or any case arising under the Nebraska Juvenile Code. A member of a team who participates in good faith in team discussion or any person who in good faith cooperates with a team by providing information or records about a child whose case has been accepted for investigation or treatment by a team shall be immune from any civil or criminal liability. The provisions of this subsection or any other section granting or allowing the grant of immunity from liability shall not be extended to any person alleged to have committed an act of child abuse or neglect.

(4) A member of a team who publicly discloses information regarding a case consultation in a manner not consistent with sections 28-728 to 28-730 shall be guilty of a Class III misdemeanor.

(5) A child advocacy center shall maintain the video recording of all forensic interviews conducted at that child advocacy center. Such maintenance shall be in accordance with child abuse and neglect investigation team protocols established pursuant to section 28-728. The recording may be maintained digitally if adequate security measures are in place to ensure no unauthorized access.

(6) Information obtained through forensic interviews may be shared with members of child abuse and neglect investigation teams and child abuse and neglect treatment teams.

(7) A custodian of a video recording of a forensic interview shall not release or use the video recording or copies of such recording or consent, by commission or omission, to the release or use of the video recording or copies to or by any other party without a court order, notwithstanding any consent or release by the child victim or child witness, except that:

(a) The child advocacy center where a forensic interview is conducted may use the video recording for purposes of supervision and peer review required to meet national accreditation standards;

(b) Any custodian shall release or consent to the release or use of the video recording upon request to law enforcement agencies authorized to investigate, or agencies authorized to prosecute, any juvenile or criminal conduct described in the forensic interview;

(c) Any custodian shall release or consent to the release or use of the video recording upon request pursuant to a request under the Office of Inspector General of Nebraska Child Welfare Act;

(d) Any custodian shall provide secure access to view a video recording of a forensic interview upon request by a representative of the Department of Health and Human Services for purposes of classifying cases of child abuse and neglect pursuant to section 28-720 or determining the risk of harm to the child and needed social services of the family pursuant to section 28-713. Such representative shall be subject to the same release and use restrictions as any custodian under this subsection; and

(e) Any custodian shall release or consent to the release or use of the video recording pursuant to a court order issued under section 29-1912 or 29-1926.

Sec. 8. Section 29-1926, Reissue Revised Statutes of Nebraska, is amended to read:

29-1926 (1)(a) Upon request of the prosecuting or defense attorney and upon a showing of compelling need, the court shall order the taking of a video videotape deposition of a child victim of or child witness to any offense punishable as a felony. The deposition ordinarily shall be in lieu of courtroom or in camera testimony by the child. If the court orders a video videotape deposition, the court shall:

(i) Designate the time and place for taking the deposition. The deposition may be conducted in the courtroom, the judge's chambers, or any other location suitable for video recording videotaping;

(ii) Assure adequate time for the defense attorney to complete discovery before taking the deposition; and

(iii) Preside over the taking of the video videotape deposition in the same manner as if the child were called as a witness for the prosecution during the course of the trial.

(b) Unless otherwise required by the court, the deposition shall be conducted in the presence of the prosecuting attorney, the defense attorney, the defendant, and any other person deemed necessary by the court, including the parent or guardian of the child victim or child witness or a counselor or other person with whom the child is familiar. Such parent, guardian, counselor, or other person shall be allowed to sit with or near the child unless the court determines that such person would be disruptive to the child's testimony.

(c) At any time subsequent to the taking of the original video videotape deposition and upon sufficient cause shown, the court shall order the taking of additional video videotape depositions to be admitted at the time of the trial.

(d) If the child testifies at trial in person rather than by video

~~videotape~~ deposition, the taking of the child's testimony may, upon request of the prosecuting attorney and upon a showing of compelling need, be conducted in camera.

(e) Unless otherwise required by the court, the child shall testify in the presence of the prosecuting attorney, the defense attorney, the defendant, and any other person deemed necessary by the court, including the parent or guardian of the child victim or child witness or a counselor or other person with whom the child is familiar. Such parent, guardian, counselor, or other person shall be allowed to sit with or near the child unless the court determines that such person would be disruptive to the child's testimony. Unless waived by the defendant, all persons in the room shall be visible on camera except the camera operator.

(f) If deemed necessary to preserve the constitutionality of the child's testimony, the court may direct that during the testimony the child shall at all times be in a position to see the defendant live or on camera.

(g) For purposes of this section, child means a person eleven years of age or younger at the time the motion to take the deposition is made or at the time of the taking of in camera testimony at trial.

(h) Nothing in this section shall restrict the court from conducting the pretrial deposition or in camera proceedings in any manner deemed likely to facilitate and preserve a child's testimony to the fullest extent possible, consistent with the right to confrontation guaranteed in the Sixth Amendment of the Constitution of the United States and Article I, section 11, of the Nebraska Constitution. In deciding whether there is a compelling need that child testimony accommodation is required by pretrial video videotape deposition, in camera live testimony, in camera video videotape testimony, or any other accommodation, the court shall make particularized findings on the record of:

- (i) The nature of the offense;
- (ii) The significance of the child's testimony to the case;
- (iii) The likelihood of obtaining the child's testimony without modification of trial procedure or with a different modification involving less substantial digression from trial procedure than the modification under consideration;
- (iv) The child's age;
- (v) The child's psychological maturity and understanding; and
- (vi) The nature, degree, and duration of potential injury to the child from testifying.

(i) The court may order an independent examination by a psychologist or psychiatrist if the defense attorney requests the opportunity to rebut the showing of compelling need produced by the prosecuting attorney. Such examination shall be conducted in the child's county of residence.

(j) After a finding of compelling need by the court, neither party may call the child witness to testify as a live witness at the trial before the jury unless that party demonstrates that the compelling need no longer exists.

(k) Nothing in this section shall limit the right of access of the media or the public to open court.

(l) Nothing in this section shall preclude discovery by the defendant as set forth in section 29-1912.

(m) The Supreme Court may adopt and promulgate rules of procedure to administer this section, which rules shall not be in conflict with laws governing such matters.

(2)(a) No custodian of a video recording videotape of a child victim or child witness alleging, explaining, denying, or describing an act of sexual assault pursuant to section 28-319, 28-319.01, or 28-320.01 or child abuse pursuant to section 28-707 as part of an investigation or evaluation of the abuse or assault shall release or use a video recording videotape or copies of a video recording videotape or consent, by commission or omission, to the release or use of a video recording videotape or copies of a video recording videotape to or by any other party without a court order, notwithstanding the fact that the child victim or child witness has consented to the release or use of the video recording videotape or that the release or use is authorized under law, except as provided in section 28-730 or pursuant to an investigation under the Office of Inspector General of Nebraska Child Welfare Act. Any custodian may release or consent to the release or use of a video recording videotape or copies of a video recording videotape to law enforcement agencies or agencies authorized to prosecute such abuse or assault cases on behalf of the state.

(b) The court order may govern the purposes for which the video recording videotape may be used, the reproduction of the video recording videotape, the release of the video recording videotape to other persons, the retention and return of copies of the video recording videotape, and any other requirements reasonably necessary for the protection of the privacy and best interests of the child victim or child witness.

(c)(i) ~~(e)~~ Pursuant to section 29-1912, the defendant described in the video recording videotape may petition the district court in the county where the alleged offense took place or where the custodian of the video recording videotape resides for an order requiring the custodian of the video recording to provide a physical copy to the defendant or the defendant's attorney. Such order shall include a protective order prohibiting further distribution of the video recording without a court order releasing to the defendant a copy of the videotape.

(ii) Upon obtaining the copy of the video recording pursuant to subdivision (2)(c)(i) of this section, the defendant or the defendant's

attorney may request that the recording be transcribed by filing a motion with the court identifying the court reporter or transcriber and the address or location where the transcription will occur. Upon receipt of such request, the court shall enter an order authorizing the distribution of a copy of the video recording to such reporter or transcriber and requiring the copy of the video recording be returned by the reporter or transcriber upon completion of the transcription. Such order may include a protective order related to the distribution of the video recording or information contained in the video recording, including an order that identifying information of the child victim or child witness be redacted from the transcript prepared pursuant to this subsection. Upon return of such copy, the defendant or the defendant's attorney shall certify to the court and the parties that such copy has been returned.

(iii) After obtaining the copy of the video recording pursuant to subdivision (2)(c)(i) of this section, the defendant or the defendant's attorney may file a motion with the court requesting permission to release such copy to an expert or investigator. If the defendant or the defendant's attorney believes that including the name or identifying information of such expert or investigator will prejudice the defendant, the court shall permit the defendant or the defendant's attorney to include such information in the form of a written statement to be inspected by the court alone. The statement shall be sealed and preserved in the records of the court. Upon granting such motion, the court shall enter an order authorizing the distribution of a copy of the video recording to such expert or investigator and requiring the copy of the video recording be returned by the expert or investigator upon the completion of services of the expert or investigator. The order shall not include the name or identifying information of the expert or investigator. Such order may include a protective order related to the distribution of the video recording or information contained in the video recording. Upon return of such copy, the defendant or the defendant's attorney shall certify to the court and the parties that such copy has been returned. Such certification shall not include the name or identifying information of the expert or the investigator.

(d) Any person who releases or uses a video recording videotape except as provided in this section shall be guilty of a Class I misdemeanor.

Sec. 9. Section 43-247.02, Reissue Revised Statutes of Nebraska, is amended to read:

43-247.02 (1) Notwithstanding any other provision of Nebraska law, on and after October 1, 2013, a juvenile court shall not:

(a) Place any juvenile adjudicated or pending adjudication under subdivision (1), (2), (3)(b), or (4) of section 43-247 with the Department of Health and Human Services or the Office of Juvenile Services, other than as allowed under subsection (2) or (3) of this section;

(b) Commit any juvenile adjudicated or pending adjudication under subdivision (1), (2), (3)(b), or (4) of section 43-247 to the care and custody of the Department of Health and Human Services or the Office of Juvenile Services, other than as allowed under subsection (2) or (3) of this section;

(c) Require the Department of Health and Human Services or the Office of Juvenile Services to supervise any juvenile adjudicated or pending adjudication under subdivision (1), (2), (3)(b), or (4) of section 43-247, other than as allowed under subsection (2) or (3) of this section; or

(d) Require the Department of Health and Human Services or the Office of Juvenile Services to provide, arrange for, or pay for any services for any juvenile adjudicated or pending adjudication under subdivision (1), (2), (3)(b), or (4) of section 43-247, or for any party to cases under those subdivisions, other than as allowed under subsection (2) or (3) of this section.

(2) Notwithstanding any other provision of Nebraska law, on and after July 1, 2013, a juvenile court shall not commit a juvenile to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center except as part of an order of intensive supervised probation under subsection (1) subdivision (1)(b)(ii) of section 43-286.

(3) Nothing in this section shall be construed to limit the authority or duties of the Department of Health and Human Services in relation to juveniles adjudicated under subdivision (1), (2), (3)(b), or (4) of section 43-247 who were committed to the care and custody of the Department of Health and Human Services prior to October 1, 2013, to the Office of Juvenile Services for community-based services prior to October 1, 2013, or to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013. The care and custody of such juveniles with the Department of Health and Human Services or the Office of Juvenile Services shall continue in accordance with the Nebraska Juvenile Code and the Juvenile Services Act as such acts existed on January 1, 2013, until:

(a) The juvenile reaches the age of majority;

(b) The juvenile is no longer under the care and custody of the department pursuant to a court order or for any other reason, a guardian other than the department is appointed for the juvenile, or the juvenile is adopted;

(c) The juvenile is discharged pursuant to section 43-412, as such section existed on January 1, 2013; or

(d) A juvenile court terminates its jurisdiction of the juvenile.

Sec. 10. Section 43-286, Revised Statutes Supplement, 2019, is amended to read:

43-286 (1) When any juvenile is adjudicated to be a juvenile described in subdivision (1), (2), or (4) of section 43-247:

~~(a)(i) This subdivision applies until October 1, 2013. The court may~~

~~continue the dispositional portion of the hearing, from time to time upon such terms and conditions as the court may prescribe, including an order of restitution of any property stolen or damaged or an order requiring the juvenile to participate in community service programs, if such order is in the interest of the juvenile's reformation or rehabilitation, and, subject to the further order of the court, may:~~

~~(A) Place the juvenile on probation subject to the supervision of a probation officer;~~

~~(B) Permit the juvenile to remain in his or her own home or be placed in a suitable family home, subject to the supervision of the probation officer; or~~

~~(C) Cause the juvenile to be placed in a suitable family home or institution, subject to the supervision of the probation officer. If the court has committed the juvenile to the care and custody of the Department of Health and Human Services, the department shall pay the costs of the suitable family home or institution which are not otherwise paid by the juvenile's parents.~~

~~Under subdivision (1)(a)(i) of this section, upon a determination by the court that there are no parental, private, or other public funds available for the care, custody, and maintenance of a juvenile, the court may order a reasonable sum for the care, custody, and maintenance of the juvenile to be paid out of a fund which shall be appropriated annually by the county where the petition is filed until a suitable provision may be made for the juvenile without such payment.~~

~~(a) (ii) This subdivision applies beginning October 1, 2013. The court may continue the dispositional portion of the hearing, from time to time upon such terms and conditions as the court may prescribe, including an order of restitution of any property stolen or damaged or an order requiring the juvenile to participate in restorative justice programs or community service programs, if such order is in the interest of the juvenile's reformation or rehabilitation, and, subject to the further order of the court, may:~~

~~(i) (A) Place the juvenile on probation subject to the supervision of a probation officer; or~~

~~(ii) (B) Permit the juvenile to remain in his or her own home or be placed in a suitable family home or institution, subject to the supervision of the probation officer;~~

~~(b)(i) This subdivision applies to all juveniles committed to the Office of Juvenile Services prior to July 1, 2013. The court may commit such juvenile to the Office of Juvenile Services, but a juvenile under the age of fourteen years shall not be placed at the Youth Rehabilitation and Treatment Center-Geneva or the Youth Rehabilitation and Treatment Center-Kearney unless he or she has violated the terms of probation or has committed an additional offense and the court finds that the interests of the juvenile and the welfare of the community demand his or her commitment. This minimum age provision shall not apply if the act in question is murder or manslaughter.~~

~~(ii) This subdivision applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013.~~

~~(b) When it is alleged that the juvenile has exhausted all levels of probation supervision and options for community-based services and section 43-251.01 has been satisfied, a motion for commitment to a youth rehabilitation and treatment center may be filed and proceedings held as follows:~~

~~(i) (A) The motion shall set forth specific factual allegations that support the motion and a copy of such motion shall be served on all persons required to be served by sections 43-262 to 43-267; and~~

~~(ii) The Office of Juvenile Services shall be served with a copy of such motion and shall be a party to the case for all matters related to the juvenile's commitment to, placement with, or discharge from the Office of Juvenile Services; and~~

~~(iii) (B) The juvenile shall be entitled to a hearing before the court to determine the validity of the allegations. At such hearing the burden is upon the state by a preponderance of the evidence to show that:~~

~~(A) (I) All levels of probation supervision have been exhausted;~~

~~(B) (II) All options for community-based services have been exhausted; and~~

~~(C) (III) Placement at a youth rehabilitation and treatment center is a matter of immediate and urgent necessity for the protection of the juvenile or the person or property of another or if it appears that such juvenile is likely to flee the jurisdiction of the court; -~~

~~(c) After the hearing, the court may, as a condition of an order of intensive supervised probation, commit such juvenile to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center operated in compliance with state law as a condition of an order of intensive supervised probation. Upon commitment by the court to the Office of Juvenile Services, the court shall immediately notify the Office of Juvenile Services of the commitment. Intensive supervised probation for purposes of this subdivision means that the Office of Juvenile Services shall be responsible for the care and custody of the juvenile until the Office of Juvenile Services discharges the juvenile from commitment to the Office of Juvenile Services. Upon discharge of the juvenile, the court shall hold a review hearing on the conditions of probation and enter any order allowed under subdivision (1)(a) of this section; -~~

~~(d) The Office of Juvenile Services shall notify those required to be served by sections 43-262 to 43-267, all interested parties, and the committing court of the pending discharge of a juvenile from the youth rehabilitation and treatment center sixty days prior to discharge and again in every case not less~~

than thirty days prior to discharge. Upon notice of pending discharge by the Office of Juvenile Services, the court shall set a continued disposition hearing in anticipation of reentry. The Office of Juvenile Services shall work in collaboration with the Office of Probation Administration in developing an individualized reentry plan for the juvenile as provided in section 43-425. The Office of Juvenile Services shall provide a copy of the individualized reentry plan to the juvenile, the juvenile's attorney, and the county attorney or city attorney prior to the continued disposition hearing. At the continued disposition hearing, the court shall review and approve or modify the individualized reentry plan, place the juvenile under probation supervision, and enter any other order allowed by law. No hearing is required if all interested parties stipulate to the individualized reentry plan by signed motion. In such a case, the court shall approve the conditions of probation, approve the individualized reentry plan, and place the juvenile under probation supervision; ~~and -~~

~~(e) The Office of Juvenile Services is responsible for transportation of the juvenile to and from the youth rehabilitation and treatment center. The Office of Juvenile Services may contract for such services. A plan for a juvenile's transport to return to the community shall be a part of the individualized reentry plan. The Office of Juvenile Services may approve family to provide such transport when specified in the individualized reentry plan. -~~

~~(c) Beginning July 1, 2013, and until October 1, 2013, the court may commit such juvenile to the Office of Juvenile Services for community supervision.~~

(2) When any juvenile is found by the court to be a juvenile described in subdivision (3)(b) of section 43-247, the court may enter such order as it is empowered to enter under subdivision (1)(a) of this section ~~or until October 1, 2013, enter an order committing or placing the juvenile to the care and custody of the Department of Health and Human Services.~~

(3) When any juvenile is adjudicated to be a juvenile described in subdivision (1), (2), (3)(b), or (4) of section 43-247, the court may order the juvenile to be assessed for referral to participate in a restorative justice program. Factors that the judge may consider for such referral include, but are not limited to: The juvenile's age, intellectual capacity, and living environment; the ages of others who were part of the offense; the age and capacity of the victim; and the nature of the case.

(4) When a juvenile is placed on probation and a probation officer has reasonable cause to believe that such juvenile has committed a violation of a condition of his or her probation, the probation officer shall take appropriate measures as provided in section 43-286.01.

(5)(a) When a juvenile is placed on probation or under the supervision of the court and it is alleged that the juvenile is again a juvenile described in subdivision (1), (2), (3)(b), or (4) of section 43-247, a petition may be filed and the same procedure followed and rights given at a hearing on the original petition. If an adjudication is made that the allegations of the petition are true, the court may make any disposition authorized by this section for such adjudications and the county attorney may file a motion to revoke the juvenile's probation.

(b) When a juvenile is placed on probation or under the supervision of the court for conduct under subdivision (1), (2), (3)(b), or (4) of section 43-247 and it is alleged that the juvenile has violated a term of probation or supervision or that the juvenile has violated an order of the court, a motion to revoke probation or supervision or to change the disposition may be filed and proceedings held as follows:

(i) The motion shall set forth specific factual allegations of the alleged violations and a copy of such motion shall be served on all persons required to be served by sections 43-262 to 43-267;

(ii) The juvenile shall be entitled to a hearing before the court to determine the validity of the allegations. At such hearing the juvenile shall be entitled to those rights relating to counsel provided by section 43-272 and those rights relating to detention provided by sections 43-254 to 43-256. The juvenile shall also be entitled to speak and present documents, witnesses, or other evidence on his or her own behalf. He or she may confront persons who have given adverse information concerning the alleged violations, may cross-examine such persons, and may show that he or she did not violate the conditions of his or her probation or supervision or an order of the court or, if he or she did, that mitigating circumstances suggest that the violation does not warrant revocation of probation or supervision or a change of disposition. The hearing shall be held within a reasonable time after the juvenile is taken into custody;

(iii) The hearing shall be conducted in an informal manner and shall be flexible enough to consider evidence, including letters, affidavits, and other material, that would not be admissible in an adversarial criminal trial;

(iv) The juvenile shall not be confined, detained, or otherwise significantly deprived of his or her liberty pursuant to the filing of a motion described in this section unless the requirements of subdivision (5) of section 43-251.01 and section 43-260.01 have been met. In all cases when the requirements of subdivision (5) of section 43-251.01 and section 43-260.01 have been met and the juvenile is confined, detained, or otherwise significantly deprived of his or her liberty as a result of his or her alleged violation of probation, supervision, or a court order, the juvenile shall be given a preliminary hearing. If, as a result of such preliminary hearing, probable

cause is found to exist, the juvenile shall be entitled to a hearing before the court in accordance with this subsection;

(v) If the juvenile is found by the court to have violated the terms of his or her probation or supervision or an order of the court, the court may modify the terms and conditions of the probation, supervision, or other court order, extend the period of probation, supervision, or other court order, or enter any order of disposition that could have been made at the time the original order was entered; and

(vi) In cases when the court revokes probation, supervision, or other court order, it shall enter a written statement as to the evidence relied on and the reasons for revocation.

(6) Costs incurred on behalf of a juvenile under this section shall be paid as provided in section 43-290.01.

(7) When any juvenile is adjudicated to be a juvenile described in subdivision (4) of section 43-247, the juvenile court shall within thirty days of adjudication transmit to the Director of Motor Vehicles an abstract of the court record of adjudication.

Sec. 11. Section 43-2,108.01, Revised Statutes Supplement, 2019, is amended to read:

43-2,108.01 (1) Sections 43-2,108.01 to 43-2,108.05 apply only to persons who were under the age of eighteen years when the offense took place and, after being taken into custody, arrested, cited in lieu of arrest, or referred for prosecution without citation, the county attorney or city attorney:

(a) Declined to file a juvenile petition or criminal complaint;

(b) Offered juvenile pretrial diversion, mediation, or restorative justice to the juvenile under the Nebraska Juvenile Code;

(c) Filed a juvenile court petition describing the juvenile as a juvenile described in subdivision (1), (2), (3)(b), or (4) of section 43-247;

(d) Filed a criminal complaint in county court against the juvenile under state statute or city or village ordinance for misdemeanor or infraction possession of marijuana or misdemeanor or infraction possession of drug paraphernalia;

(e) Filed a criminal complaint in county court against the juvenile for any other misdemeanor or infraction under state statute or city or village ordinance, other than for a traffic offense, when all offenses in the case are waiveable offenses; or

(f) Filed a criminal complaint in county or district court for a felony offense under state law or a city or village ordinance that was subsequently transferred to juvenile court for ongoing jurisdiction.

(2) The changes made by Laws 2019, LB354, to the relief set forth in sections 43-2,108.03 to 43-2,108.05 shall apply to all persons described in this section, as amended by Laws 2019, LB354, and this legislative bill, for offenses occurring prior to, on, or after September 1, 2019.

Sec. 12. Section 43-407, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-407 (1) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013. The Office of Juvenile Services shall design and make available programs and treatment services through the Youth Rehabilitation and Treatment Center Kearney and Youth Rehabilitation and Treatment Center Geneva. The programs and treatment services shall be based upon the individual or family evaluation process and treatment plan. The treatment plan shall be developed within fourteen days after admission. If a juvenile placed at the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the juvenile may be transferred to a program or facility if the treatment and security needs of the juvenile can be met. The assessment process shall include involvement of both private and public sector behavioral health providers. The selection of the treatment venue for each juvenile shall include individualized case planning and incorporate the goals of the juvenile justice system pursuant to section 43-402. Juveniles committed to the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva who are transferred to alternative settings for treatment remain committed to the Department of Health and Human Services and the Office of Juvenile Services until discharged from such custody. Programs and treatment services shall address:~~

~~(a) Behavioral impairments, severe emotional disturbances, sex offender behaviors, and other mental health or psychiatric disorders;~~

~~(b) Drug and alcohol addiction;~~

~~(c) Health and medical needs;~~

~~(d) Education, special education, and related services;~~

~~(e) Individual, group, and family counseling services as appropriate with any treatment plan related to subdivisions (a) through (d) of this subsection. Services shall also be made available for juveniles who have been physically or sexually abused;~~

~~(f) A case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community. This process shall follow individualized planning which shall begin at intake and evaluation. Structured programming shall be scheduled for all juveniles. This programming shall include a strong academic program as well as classes in health education, living skills, vocational training, behavior management and modification, money management, family and parent~~

~~responsibilities, substance abuse awareness, physical education, job skills training, and job placement assistance. Participation shall be required of all juveniles if such programming is determined to be age and developmentally appropriate. The goal of such structured programming shall be to provide the academic and life skills necessary for a juvenile to successfully return to his or her home and community upon release; and~~

~~(g) The design and delivery of treatment programs through the youth rehabilitation and treatment centers as well as any licensing or certification requirements, and the office shall follow the requirements as stated within Title XIX and Title IV-E of the federal Social Security Act, as such act existed on May 25, 2007, the Special Education Act, or other funding guidelines as appropriate. It is the intent of the Legislature that these funding sources shall be utilized to support service needs of eligible juveniles.~~

~~(1) (2) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013. The Office of Juvenile Services shall design and make available programs and treatment services through youth rehabilitation and treatment centers the Youth Rehabilitation and Treatment Center-Kearney and Youth Rehabilitation and Treatment Center-Geneva. The programs and treatment services shall be based upon the individual or family evaluation process and treatment plan. The treatment plan shall be developed within fourteen days after admission and provided to the committing court and interested parties. The court may, on its own motion or upon the motion of an interested party, set a hearing to review the treatment plan.~~

~~(2) A juvenile may be committed by a court to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center operated and utilized in compliance with state law pursuant to a hearing described in subdivision (1)(b)(iii) of section 43-286. The office shall not change a juvenile's placement except as provided in this section. If a juvenile placed at a youth rehabilitation and treatment center the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the Office of Juvenile Services may arrange for such treatment to be provided at the Hastings Regional Center or may transition the juvenile to another inpatient or subacute residential treatment facility licensed as a treatment facility in the State of Nebraska and shall provide notice of the change in placement pursuant to subsection (3) of this section. Except in a case requiring emergency admission to an inpatient facility, the juvenile shall not be discharged by the Office of Juvenile Services until the juvenile has been returned to the court for a review of his or her conditions of probation and the juvenile has been transitioned to the clinically appropriate level of care. Programs and treatment services shall address:~~

~~(a) Behavioral impairments, severe emotional disturbances, sex offender behaviors, and other mental health or psychiatric disorders;~~

~~(b) Drug and alcohol addiction;~~

~~(c) Health and medical needs;~~

~~(d) Education, special education, and related services;~~

~~(e) Individual, group, and family counseling services as appropriate with any treatment plan related to subdivisions (a) through (d) of this subsection. Services shall also be made available for juveniles who have been physically or sexually abused;~~

~~(f) A case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community. This process shall follow individualized planning which shall begin at intake and evaluation. Structured programming shall be scheduled for all juveniles. This programming shall include a strong academic program as well as classes in health education, living skills, vocational training, behavior management and modification, money management, family and parent responsibilities, substance abuse awareness, physical education, job skills training, and job placement assistance. Participation shall be required of all juveniles if such programming is determined to be age and developmentally appropriate. The goal of such structured programming shall be to provide the academic and life skills necessary for a juvenile to successfully return to his or her home and community upon release; and~~

~~(g) The design and delivery of treatment programs through the youth rehabilitation and treatment centers as well as any licensing or certification requirements, and the office shall follow the requirements as stated within Title XIX and Title IV-E of the federal Social Security Act, as such act existed on January 1, 2013, the Special Education Act, or other funding guidelines as appropriate. It is the intent of the Legislature that these funding sources shall be utilized to support service needs of eligible juveniles.~~

~~(3) When the Office of Juvenile Services has arranged for treatment of a juvenile as provided in subsection (2) of this section, the office shall file a report and notice of placement change with the court and shall send copies of the notice to all interested parties, including any parent or guardian of the juvenile, at least seven days before the placement of the juvenile is changed from the order of the committing court. The court, on its own motion or upon the filing of an objection to the change by an interested party, may order a hearing to review such change in placement and may order the change be stayed until the completion of the hearing.~~

~~(4)(a) (3)(a) The Office of Juvenile Services shall begin implementing evidence-based practices, policies, and procedures by January 15, 2016, as~~

determined by the office. Thereafter, on November 1 of each year, the office shall electronically submit to the Governor, the Legislature, and the Chief Justice of the Supreme Court, a comprehensive report on its efforts to implement evidence-based practices. ~~The report to the Legislature shall be by electronic transmission.~~ The report may be attached to preexisting reporting duties. The report shall include at a minimum:

(i) The percentage of juveniles being supervised in accordance with evidence-based practices;

(ii) The percentage of state funds expended by each respective department for programs that are evidence-based, and a list of all programs which are evidence-based;

(iii) Specification of supervision policies, procedures, programs, and practices that were created, modified, or eliminated; and

(iv) Recommendations of the office for any additional collaboration with other state, regional, or local public agencies, private entities, or faith-based and community organizations.

(b) Each report and executive summary shall be available to the general public on the web site of the office.

(c) The Executive Board of the Legislative Council may request the Consortium for Crime and Justice Research and Juvenile Justice Institute at the University of Nebraska at Omaha to review, study, and make policy recommendations on the reports assigned by the executive board.

Sec. 13. Section 43-408, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-408 (1)(a) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013, and to all juveniles committed to the Office of Juvenile Services for community supervision prior to October 1, 2013. Whenever any juvenile is committed to the Office of Juvenile Services, to any facility operated by the Office of Juvenile Services, or to the custody of the Administrator of the Office of Juvenile Services, a superintendent of a facility, or an administrator of a program, the juvenile is deemed committed to the Office of Juvenile Services. Juveniles committed to the Office of Juvenile Services shall also be considered committed to the care and custody of the Department of Health and Human Services for the purpose of obtaining health care and treatment services.~~

~~(b) The committing court shall order the initial level of treatment for a juvenile committed to the Office of Juvenile Services. Prior to determining the initial level of treatment for a juvenile, the court may solicit a recommendation regarding the initial level of treatment from the Office of Juvenile Services. Under this subsection, the committing court shall not order a specific placement for a juvenile. The court shall continue to maintain jurisdiction over any juvenile committed to the Office of Juvenile Services until such time that the juvenile is discharged from the Office of Juvenile Services. The court shall conduct review hearings every six months, or at the request of the juvenile, for any juvenile committed to the Office of Juvenile Services who is placed outside his or her home, except for a juvenile residing at a youth rehabilitation and treatment center. The court shall determine whether an out-of-home placement made by the Office of Juvenile Services is in the best interests of the juvenile, with due consideration being given by the court to public safety. If the court determines that the out-of-home placement is not in the best interests of the juvenile, the court may order other treatment services for the juvenile.~~

~~(c) After the initial level of treatment is ordered by the committing court, the Office of Juvenile Services shall provide treatment services which conform to the court's level of treatment determination. Within thirty days after making an actual placement, the Office of Juvenile Services shall provide the committing court with written notification of where the juvenile has been placed. At least once every six months thereafter, until the juvenile is discharged from the care and custody of the Office of Juvenile Services, the office shall provide the committing court with written notification of the juvenile's actual placement and the level of treatment that the juvenile is receiving.~~

~~(d) For transfer hearings, the burden of proof to justify the transfer is on the Office of Juvenile Services, the standard of proof is clear and convincing evidence, and the strict rules of evidence do not apply. Transfers of juveniles from one place of treatment to another are subject to section 43-251.01 and to the following:~~

~~(i) Except as provided in subdivision (d)(ii) of this subsection, if the Office of Juvenile Services proposes to transfer the juvenile from a less restrictive to a more restrictive place of treatment, a plan outlining the proposed change and the reasons for the proposed change shall be presented to the court which committed the juvenile. Such change shall occur only after a hearing and a finding by the committing court that the change is in the best interests of the juvenile, with due consideration being given by the court to public safety. At the hearing, the juvenile has the right to be represented by counsel;~~

~~(ii) The Office of Juvenile Services may make an immediate temporary change without prior approval by the committing court only if the juvenile is in a harmful or dangerous situation, is suffering a medical emergency, is exhibiting behavior which warrants temporary removal, or has been placed in a non-state-owned facility and such facility has requested that the juvenile be removed. Approval of the committing court shall be sought within fifteen days~~

of making an immediate temporary change, at which time a hearing shall occur before the court. The court shall determine whether it is in the best interests of the juvenile to remain in the new place of treatment, with due consideration being given by the court to public safety. At the hearing, the juvenile has the right to be represented by counsel; and

~~(iii) If the proposed change seeks to transfer the juvenile from a more restrictive to a less restrictive place of treatment or to transfer the juvenile from the juvenile's current place of treatment to another which has the same level of restriction as the current place of treatment, the Office of Juvenile Services shall notify the juvenile, the juvenile's parents, custodian, or legal guardian, the committing court, the county attorney, the counsel for the juvenile, and the guardian ad litem of the proposed change. The juvenile has fifteen days after the date of the notice to request an administrative hearing with the Office of Juvenile Services, at which time the Office of Juvenile Services shall determine whether it is in the best interests of the juvenile for the proposed change to occur, with due consideration being given by the office to public safety. The juvenile may be represented by counsel at the juvenile's own expense. If the juvenile is aggrieved by the administrative decision of the Office of Juvenile Services, the juvenile may appeal that decision to the committing court within fifteen days after the Office of Juvenile Services' decision. At the hearing before the committing court, the juvenile has the right to be represented by counsel.~~

~~(e) If a juvenile is placed in detention after the initial level of treatment is determined by the committing court, the committing court shall hold a hearing every fourteen days to review the status of the juvenile. Placement of a juvenile in detention shall not be considered as a treatment service.~~

~~(f) The committing court's review of a change of place of treatment pursuant to this subsection does not apply to parole revocation hearings.~~

~~(1) (2)(a) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013. Whenever any juvenile is committed to the Office of Juvenile Services, the juvenile shall also be considered committed to the care and custody of the Department of Health and Human Services for the purpose of obtaining health care and treatment services.~~

~~(2) (b) The committing court may shall order placement at a youth rehabilitation and treatment center for a juvenile committed to the Office of Juvenile Services following a commitment hearing pursuant to subdivision (1)(b) (iii) of section 43-286. The court shall continue to maintain jurisdiction over any juvenile committed to the Office of Juvenile Services, and the office shall provide the court and parties of record with the initial treatment plan and monthly updates regarding the progress of the juvenile for the purpose of reviewing the juvenile's probation upon discharge from the care and custody of the Office of Juvenile Services.~~

~~(3) In addition to the hearings set forth in section 43-285, during a juvenile's term of commitment, any party may file a motion for commitment review to bring the case before the court for consideration of the juvenile's commitment to a youth rehabilitation and treatment center. A hearing shall be scheduled no later than thirty days after the filing of such motion. No later than five days prior to the hearing, the office shall provide information to the parties regarding the juvenile's individualized treatment plan and progress. A representative of the office or facility shall be physically present at the hearing to provide information to the court unless the court allows the representative to appear telephonically or by video. The juvenile and the juvenile's parent or guardian shall have the right to be physically present at the hearing. The court may enter such orders regarding the juvenile's care and treatment as are necessary and in the best interests of the juvenile, including an order for early discharge from commitment when appropriate. In entering an order for early discharge from commitment to intensive supervised probation in the community, the court shall consider to what extent:~~

~~(a) The juvenile has completed the goals of the juvenile's individualized treatment plan or received maximum benefit from institutional treatment;~~

~~(b) The juvenile would benefit from continued services under community supervision;~~

~~(c) The juvenile can function in a community setting with appropriate supports; and~~

~~(d) There is reason to believe that the juvenile will not commit further violations of law and will comply with the terms of intensive supervised probation.~~

~~(4) Each juvenile committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center shall also be entitled to an annual review of such commitment and placement for as long as the juvenile remains so committed and placed. At an annual review hearing, the court shall consider the factors described in subsection (3) of this section to assess the juvenile's progress and determine whether commitment remains in the best interests of the juvenile.~~

~~(5) (c) If a juvenile is placed in detention while awaiting placement at a youth rehabilitation and treatment center and the placement has not occurred within fourteen days, the committing court shall hold a hearing every fourteen days to review the status of the juvenile. Placement of a juvenile in detention shall not be considered a treatment service.~~

Sec. 14. Section 83-108.04, Reissue Revised Statutes of Nebraska, is

amended to read:

~~83-108.04 (1) In addition to the institutions established by law, the Department of Health and Human Services may maintain or use the following facilities for the care of children in its legal custody who have been adjudged to be as described in subdivision (1), (2), (3)(b), or (4) of section 43-247: (a) Receiving homes to be used for the temporary care of children; (b) foster homes; (c) residential child-caring agencies as defined in section 71-1926; and (d) other facilities and services, including forestry or conservation camps for the training and treatment of children.~~

~~(1) (2) The Department of Health and Human Services also may use other public facilities or contract for the use of private facilities for the care and treatment of children in its legal custody who have been adjudged to be as described in subdivision (3)(a) of section 43-247. Placement of children in private or public facilities not under its jurisdiction shall not terminate the legal custody of the department. No state funds may be paid for care of a child in the home of a parent.~~

~~(2) For children committed to the Office of Juvenile Services, the Department of Health and Human Services may use other public facilities operated by the Department of Health and Human Services for the care and treatment of such children or may contract for the use of space in another facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law.~~

Sec. 15. Section 83-901, Reissue Revised Statutes of Nebraska, is amended to read:

83-901 The purpose of sections 49-617, 68-621, 72-249, 72-1302 to 72-1304, 81-101, 81-102, 81-1021, 83-101.08, 83-107.01, 83-108, ~~83-108.04~~, 83-112, 83-135, 83-139, 83-140, 83-144, 83-145, 83-147 to 83-150, 83-153 to 83-156, 83-170 to 83-173, 83-186, 83-188, 83-443, and 83-901 to 83-916 is to establish an agency of state government for the custody, study, care, discipline, training, and treatment of persons in the correctional and detention institutions and for the study, training, and treatment of persons under the supervision of other correctional services of the state so that they may be prepared for lawful community living. Correctional services shall be so diversified in program and personnel as to facilitate individualization of treatment.

Sec. 16. Original sections 28-377, 28-378, 28-716, 28-719, 28-726, 28-728, 28-730, 29-1926, 43-247.02, 43-407, 43-408, 83-108.04, and 83-901, Reissue Revised Statutes of Nebraska, and sections 43-286 and 43-2,108.01, Revised Statutes Supplement, 2019, are repealed.

APPENDIX 12

DHHS OPERATIONAL
MEMORANDUM

SECURE JUVENILE
TRANSPORTATION

APRIL 2, 2020

Youth Rehabilitation & Treatment Center – Kearney
OPERATIONAL MEMORANDUM**NUMBER****303.3.6****SUBJECT****SECURE JUVENILE TRANSPORTATION****PAGE NUMBER****1 OF 6****Purpose**

The purpose of this Operational Memorandum (OM) is to establish procedures for the use of restraints during the transportation of juveniles that ensure the safety of the juvenile, staff, and public.

General

Integration of juveniles back into their communities is essential to their successful transition following the completion of their programs. To that end, restraints are generally not used when transporting juveniles involved in community activities, off-campus activities, transportation to and from furloughs, etc. **However, there are instances where the safety of the juvenile, staff, and public are paramount, and transportation in restraints is deemed advisable. In all instances when restraints are used while transporting juveniles, the least restrictive restraint available will be used that will allow for preservation of safety and security while still maintaining the dignity of the juvenile. Transporting staff have access to this OM and receive training in the proper application of restraints prior to any secure transport. (4-JCF-2A-16-2)**

Definitions

Secure Juvenile Transportation – The use of mechanical restraints while transporting a juvenile via a motorized vehicle.

Mechanical Restraints – Identified as the following: hard hand restraints (handcuffs), leather hand restraints, soft leg restraints, or transport belt.

Procedure**I. Coordination of Transportation**

- A. The Youth Security Supervisor (YSS) department shall coordinate transportation of youth.
- B. The duties of the YSS department shall include:
 - 1. Designating qualified staff to transport juveniles.
 - 2. Granting permission for the use of restraints when transporting YRTC-Kearney juveniles.
 - 3. Determining what mechanical restraints may be used during transport.
 - 4. Maintaining documentation of instances when restraints are used while YRTC-Kearney staff are transporting juveniles.

**Youth Rehabilitation & Treatment Center – Kearney
OPERATIONAL MEMORANDUM****NUMBER
303.3.6****SUBJECT
SECURE JUVENILE TRANSPORTATION****PAGE NUMBER
2 OF 6****II. Use of Restraints During Transport**

- A. Mechanical restraints will always be used in transporting YRTC juveniles under the following conditions (routine use):
1. Juveniles who have escaped from the YRTC-Kearney and are being returned to the facility.
 2. Juveniles who are in room confinement and need to be transported off-campus, i.e. dental or medical appointment.
 3. Juveniles who are formally charged with escape and are attending court hearings.
 4. Juveniles who are a danger to themselves or others as a result of suicidal or aggressive behaviors that require the juvenile to be transferred from the YRTC.
- B. Mechanical restraints may be used in transporting a juvenile if, in the opinion of YRTC-Kearney staff, the safety or good order of the juvenile, staff, facility or public may be compromised.
1. Except in routine use or emergency situations, prior approval for the use of restraints during transport must be received from the Transportation Coordinator.
 - a. It is the transporting staff's responsibility to contact the Transportation Coordinator for permission to use restraints during transport

III. Security Mandates (Also see Operational Memorandum 303.1.5d "Security and Control –Juvenile Supervision.")

- A. Mechanical restraints will be applied according to procedure and will be periodically checked during transport to ensure no undue restriction is occurring and the juvenile is comfortable.
- B. One male staff and one other staff member will always be utilized when transporting a restrained juvenile.
- C. Details of the secure transport of a juvenile, i.e. departure time and route, are on a need to know basis.

Youth Rehabilitation & Treatment Center – Kearney
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1. Parents/guardians of a juvenile are notified when a juvenile is transferred; however, in order to avoid possible interference with the transport, details regarding specifics of the transport should not be given to family members.
 - D. The juvenile and the vehicle used for transport will be searched prior to transport.
 - E. Seat belts will be utilized during transport by all staff and juveniles, and door locks will be engaged.
 - F. When transporting a restrained juvenile, one staff member will sit in the back driver's side seat, and the juvenile will sit in the back passenger's side seat.
 - G. When a secured juvenile is using a restroom, the security of the juvenile and others will be closely monitored in an unobtrusive manner, while still maintaining the dignity of the juvenile.
 1. To avoid unnecessary stops, a juvenile will be provided the opportunity to use the restroom prior to transport.
 2. Partial removal of restraints may be necessary to facilitate a juvenile's use of the restroom.
 - a. In this instance, restraints should never be completely removed.
 - H. In the event an emergency occurs while transporting a secured juvenile, i.e. juvenile is acting out, accident, escape, transporting staff will act in accordance with established procedures and their training
 1. If assistance is needed, using the handheld radio or cell phone, staff will immediately call 911 for emergency assistance.
 2. The facility administration will be notified as soon as possible.
- IV. Security Equipment
- A. Transporting Vehicles
 1. The YRTC-Kearney will maintain vehicles for use in the transport of secured juvenile.
 - a. Vehicles used to transport a juvenile will be equipped with an "escape kit" for use in emergencies.

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- b. An annual safety inspection of all vehicles is conducted by qualified individuals and in accordance to state statutes for any vehicle that is owned, leased, or used in the operation of the facility. (4-JCF-2A-16)
- c. Safety repairs are completed immediately. Vehicles are not used again until repairs are made. (4-JCF-2A-16-1)

B. Communication Equipment

- 1. Transporting staff will check out a YRTC-K cell phone for their use
- 2. When appropriate, transporting staff will have a YRTC-K handheld radio

C. Restraint Equipment

- 1. Transporting staff will check out and have on their person, the following restraint equipment:
 - a. Handcuffs
 - b. Soft leg restraints
 - c. Transport belt

V. Documentation**A. When transporting a secured juvenile, staff will carry the following documentation:**

- 1. State of Nebraska Identification Card
- 2. Valid Driver's License
- 3. Where appropriate, verification that the juvenile is under YRTC-Kearney custody, i.e. committing court order, intake summary

B. The YSS department will provide written documentation of the secure transport:

- 1. The report will include the following information:
 - a. Name of juvenile
 - b. Transporting staff
 - c. Date/time of transport
 - d. Type of restraints used
 - e. Routine use of restraints or permission granted for use of restraints

Youth Rehabilitation & Treatment Center – Kearney
OPERATIONAL MEMORANDUM

NUMBER
303.3.6

SUBJECT
SECURE JUVENILE TRANSPORTATION

PAGE NUMBER
5 OF 6

- 2. The YSS office will keep a record of all instances where YRTC-Kearney staff transported a juvenile in restraints
- 3. Any incidents occurring while transporting a juvenile, i.e. escape, accidents, physical intervention, will be documented in accordance with procedures found in Operational Memorandum 303.1.6 "Security and Control" and 303.2.5 "Physical Intervention and Use of Mechanical Restraints"

VI. Training

- A. The Training Coordinator will ensure that training on the transport of a secured juvenile, including the application and use of mechanical restraints, is a part of the annual mandatory training for staff
- B. All staff will have completed training on the transportation of a secured juvenile prior to assuming transport duties

APPLICABLE ACA STANDARD: 4-JCF-2A-16, 4-JCF-2A-16-1, 4-JCF-2A-16-2

 4/14/20

 Paul Gordon,
 Facility Administrator

 4/15/2020

 Mark LaBouchardiere,
 Director of Facilities

- Revised: April 2, 2020
- Revised: March 16, 2017
- Revised: November 12, 2014
- Revised: May 20, 2013
- Revised: December 5, 2012

Summary of Revisions

- April 2, 2020
- OM 303.6 was reviewed and updated to reflect current policies and procedures
 - Deleted Trevor Spiegel added Paul Gordon to Administrator signature line
 - Deleted "Trevor Spiegel Director of OJS services, added Mark LaBouchardiere Director of Facilities

Youth Rehabilitation & Treatment Center – Kearney
OPERATIONAL MEMORANDUM

NUMBER

303.3.6

SUBJECT

SECURE JUVENILE TRANSPORTATION

PAGE NUMBER

6 OF 6

- Deleted Summary of revisions prior to 2015

March 16, 2017

- Changed Facility Administrator signature line to Trevor Spiegel
- Changed Office of Juvenile Services Administrator signature line to Mark LaBouchardiere
- Changed Logo to reflect new DHHS Logo
- Deleted Summary of Revisions prior to 2012
- Reformatted, reorganized, and revised entire OM to reflect current YRTC-K procedures

APPENDIX 13

DHHS YRTC BRIEFING

SEPT. 18, 2020

Youth Treatment System Briefing

to the Legislative Oversight Committee

September 18, 2020

Pete Ricketts, Governor
State of Nebraska

Dannette R. Smith, CEO
Department of Health & Human Services

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Helping People Live Better Lives.

Agenda

- I. Goals of the Youth Treatment System**
- II. How Did We Get Here?**
- III. Potential for Hastings as a YRTC**
- IV. Male Chemical Dependency Program Transition**
- V. Nebraska Youth Rehabilitation & Treatment System**
- VI. 2020 Legislation Implementation Roadmap**
- VII. Support from the Special Oversight Committee**
- VIII. Next Steps**

Helping People Live Better Lives.

Goals of the Youth Treatment System

- Help youth develop skills to be successful and productive in their communities
- Provide quality education and clinical services
- Implement a system of programming and services to meet youths' individual needs
- Operate gender- and culturally-appropriate programming
 - Identify separate space for female youth in YRTC system

Goals of the Youth Treatment System

	Current Treatment Location	Constraints	Future Treatment Location
Youth Rehabilitation & Treatment System			
Males, core & re-entry	Kearney		Kearney
Females, core group	Kearney	Must move from Kearney by July 2021	Hastings (proposed)
Females, re-entry	Geneva	<ul style="list-style-type: none"> • Difficulty maintaining staff • Difficulty recruiting clinical support 	Hastings (proposed)
Males & Females, high acuity	Lincoln leased space		Lincoln leased space
Chemical Dependency, males	Hastings	<ul style="list-style-type: none"> • Aging building • Continually declining census • Utilization of new buildings for programming 	Whitehall/Lincoln
Youth who Sexually Harm, males	Whitehall/Lincoln		Whitehall/Lincoln

How Did We Get Here?

Youth facility highlights 2019-2020

February 2019	<ul style="list-style-type: none"> • CEO Smith's tenure begins 		
Spring 2019	<ul style="list-style-type: none"> • Opportunities for improvement at Kearney and Geneva emerge 	Spring 2020	<ul style="list-style-type: none"> • Facilities address COVID-19 health emergency • DHHS leadership team begins assessing best use of facility resources
Summer 2019	<ul style="list-style-type: none"> • Stakeholder discussions commence • Female youth relocate to Kearney • Executive Medical Director hired • Treatment services enhanced 	Summer 2020	<ul style="list-style-type: none"> • Hastings transition plan proposed July 15
Fall 2019	<ul style="list-style-type: none"> • YRTC business plan is released • Lincoln facility for high-acuity youth introduced • Unified education plan developed 	Fall 2020	<ul style="list-style-type: none"> • Male youth Chemical Dependency program to transfer in October • MYSI leads YRTC transformation
Winter 2020	<ul style="list-style-type: none"> • System begins serving youth: Kearney as hub, Lincoln for high-acuity, Geneva for female re-entry • NDE begins intensive work with YRTC system • Collaboration with Juvenile Probation for appropriate discharge planning 		

How Did We Get Here?

Geneva crisis & transition 2019

June	<ul style="list-style-type: none">• CEO & General Counsel visits campus: fragile environment, aged facilities• CEO begins cadence meetings with managers• Interim leadership support initiated
July	<ul style="list-style-type: none">• CEO makes frequent visits to campus• First YRTC system stakeholder meeting convened
August	<ul style="list-style-type: none">• Female youth moved to Kearney out of concern for safety of residents and staff
October	<ul style="list-style-type: none">• YRTC business plan released• Plan for LaFlesche improvements and re-entry program outlined
Nov – Dec	<ul style="list-style-type: none">• Intensive recruitment and hiring plan implemented

How Did We Get Here?

Re-entry program opens February 2020

- Using refurbished Geneva LaFlesche building, this was an opportunity to explore sustainability of programming
- Construction and improvement costs = ~\$400,000
- Re-entry program has experienced significant difficulty recruiting and maintaining sufficient direct care and clinical staff

Geneva Re-entry Program

Females in re-entry program in 2020	15
Average days in program	45
Re-commitments (as of 9/15/2020)	0

How Did We Get Here?

Census Females	6/30/2018	6/30/2019	6/30/2020	9/17/20
YRTC Kearney (F)	n/a	n/a	13	12
YRTC Geneva (F)	26	42	5	0
YRTC Lincoln (F)	n/a	n/a	3	4

Avg Length of Stay 18/19-19/20*
~300 days

Length of Stay Goal
180-270 days

YRTC Female Youth Stats SFY19/20

18 Admissions

Admissions by Race

1. White/Non-Hispanic, 67%
2. Black/Non-Hispanic, 22%
3. American Indian, 11%

Top Home Counties

1. Lancaster, 50%
2. Douglas 22%

Top Offenses

1. Theft, 4 charges
2. 3rd degree assault, 2 charges
3. Resisting arrest, 2 charges

*Across all YRTC programs/campuses

How Did We Get Here?

Geneva Today

- Re-entry program has been a success, no recommitments from program
- Currently zero girls are in re-entry stage
- Should all YRTC females move to Hastings, reduction in force will be implemented
 - HR will work with employees to explore other opportunities
- Medicaid eligibility team: 23 current positions, up to 20 positions added
- 16 former YRTC-Geneva teammates have transitioned to the Medicaid team

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Potential for Hastings as a YRTC

Hastings Regional Center Chronology: Highlights

1887	City donates 160 acres for state asylum
1889-1999	Hastings campus evolves over the decades, including adult inpatient psychiatric, adult inpatient alcohol treatment, minimum security prison; becomes Regional Center in 1971
2000	Adult alcohol and drug treatment program closes
2001	Substance abuse program for juvenile offenders expanded
2003	Governor Johanns proposes closure of HRC and NRC
2004	Juvenile chemical dependency program expanded to 40 beds
2006	Privately-operated juvenile sex offender program opens (concurrent with juvenile chemical dependency program)
2007	Adult residential and outpatient services ended
2008	Adolescent psychiatric services ended
2013-2015	Renovation of Building 3 authorized, home of juvenile chemical dependency program
2014	DHHS is required to prepare program plan for proposed 200-bed treatment center for correctional-system involved adults
2016	In lieu of renovation of Building 3, DHHS issues program statement for construction of new facilities and demolition of decommissioned buildings (~\$8 million)
Ongoing	Demolition of campus Buildings 7, 8 and 15

Potential for Hastings as a YRTC

2020 Planning Activities

January	Through legislation and hearings, legislature and stakeholders encourage DHHS to move YRTC females from Kearney campus
February 6	Youth Care System Future State Planning meeting: Convened by DHHS
March 2	DHHS Executive Team visit to Hastings: CEO Smith, Dr. Janine Fromm, Emily Dodson
March 10	DHHS Executive Team facility planning meeting: CEO Smith, Dr. Janine Fromm, Dustin Zabokrtsky
April 27	DHHS Executive team visit to Hastings: CEO Smith, Dr. Janine Fromm
June 19	DHHS Executive team visit to Hastings: CEO Smith, Dr. Janine Fromm
May 15	DHHS Facility Team visioning meeting: CEO Smith, Dr. Janine Fromm, Sheri Dawson, Mark LaBouchardiere, Marj Colburn, Sara Thomas, Camella Jacobe, Heather Leschinsky
May 20	DHHS Executive team visit to Whitehall: CEO Smith, Dr. Janine Fromm
June 19	DHHS Executive team visit to Hastings: CEO Smith, Dr. Janine Fromm
July 14	CEO Smith call to Hastings Mayor Corey Stutte
July 15 & 16	Transition plan proposed

Potential for Hastings as a YRTC

2020 Planning Activities, continued

July 21	CEO Smith meets with Mayor Corey Stutte; impromptu meeting with community stakeholders
August 4	Hastings community stakeholder meeting and tour: Convened by DHHS Future stakeholder meetings discussed, but to date no meetings have been scheduled

Community Committees (tentative)	
Advisory Committee	Chairs + CEO Smith, Dr. Janine Fromm, Mark LaBouchardiere, Marj Colburn
Law Enforcement	Chair: Donna Fegler Daiss, county attorney
Community Engagement	Chair: Ted Schroeder, city council
Campus Planning	Chairs: Mayor Corey Stutte & Mikki Shafer, chamber president

Potential for Hastings as a YRTC

Initial observations and impressions of Hastings resources

- Stable staff with clinical expertise
- New cottages with individual rooms and homelike setting
 - Ability to group youth with similar treatment needs
 - Campus also includes church/gym, school/cafeteria, administrative building
- Capacity to recruit and hire qualified staff

Hastings Campus Team	
ACTIVITY SPECIALIST	1
ACTIVITY SUPERVISOR	1
ADMINISTRATIVE ASSISTANT I	1
ADMINISTRATIVE NURSE (NEW)	1
CHEMICAL DEPENDENCY TREATMENT SPECIALIST	1
CUSTODIAN/HOUSEKEEPER	2
DHHS PROGRAM MANAGER II	1
FACILITY OPERATING OFFICER II	1
FOOD SERVICE COOK	5
FOOD SERVICE MANAGER	1
HEALTH INFORMATION TECHNICIAN	2
HUMAN SERVICES TREATMENT SPECIALIST II	1
MENTAL HEALTH PRACTITIONER I	2
MENTAL HEALTH PRACTITIONER II	1
PERSONNEL OFFICER	1
PSYCHOLOGIST/LICENSED	1
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REGISTERED NURSE (NEW)	1
SAFETY COORDINATOR	1
SOCIAL WORKER II	1
STAFF ASSISTANT I	2
SUPPLY SUPERVISOR	1
SUPPLY WORKER II	1
TEACHER (SCATA CONTRACT)	5
YOUTH COUNSELOR I	1
YOUTH SECURITY SPECIALIST II	27
YOUTH SECURITY SUPERVISOR	10
	74

- Youth security specialists: 13.5 years avg. tenure
- Youth security supervisors: 11.4 years avg. tenure

Helping People Live Better Lives.

Potential for Hastings as a YRTC

Can new Hasting facilities be used for a different purpose?

- We acknowledge the original appropriation indicated intent for facilities to be used in a specific way
- We propose to again repurpose funding to meet current needs
 - Continue to use facilities to serve youth in state custody

Should the new facilities be used for YRTC females?

- Enables DHHS to meet obligations in the best interest of all youth
- Yes – this would **maximize utilization of taxpayer dollars** and repurpose existing DHHS resources
 - Transfer of chemical dependency program to Whitehall maximizes that campus as well
 - Improvements to new buildings – hardening walls, raising ceilings, filming windows – necessary for use as juvenile treatment building of any kind (~\$200,000)

Male Chemical Dependency Program Transition

HRC CD census & demographics

	SFY17-18	SFY18-19	SYF19-20		9/17/2020
Avg Census	20	13	13	Current Census	8
Avg Length of Stay (days)	87	88	86		
Re-admissions	10	9	9		
Top 3 Admitting Counties	Lancaster Douglas Hall	Douglas Lancaster Hall	Lancaster Hall Douglas		

CD = Chemical Dependency

Male Chemical Dependency Program Transition

Whitehall campus transition

- Improvements to cottages #1 and #2
 - Paint touch-up
 - Asbestos tile abatement
 - New lighting
 - New carpeting, vinyl floors
- State Building Division is covering costs (~\$35,000)
 - Two additional cottages available, similar improvements required (~\$35,000)

Shared staffing but separate programs

- Chemical Dependency program and youth who sexually harm program will be completely separate
 - Separate cottages
 - Separate dining
 - Separate education and classrooms
 - Separate recreation schedules

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Male Chemical Dependency Program Transition

2020 Hastings/Whitehall Staff Transition & Training Highlights

September 14	The HRC Youth Security Supervisors (YSS) will travel to the Whitehall campus to train the Whitehall YSS staff
September 16	Whitehall staff will be at HRC to attend team meetings. Whitehall staff present will include the Program Director, LADC therapist, Social Worker, LMHP therapist, HSTS staff, and the Whitehall Facility Administrator
September 17	Available YSSIIIs from Whitehall will travel to HRC to shadow HRC staff
September 21	HRC staff will provide training to Whitehall staff for the special needs of the youth that will be arriving from HRC
September 23	All HRC supervisors will travel to Whitehall to continue shadowing and training of Whitehall staff
September 24-25	HRC Activity Supervisor and T-Rec staff will provide group and activity training to Whitehall activity and T-Rec staff. This will occur at HRC
September 28-30	The Whitehall Facility Administrator will be present at the HRC campus to continue preparations for the move
October 1	All HRC youth will transition to Whitehall campus

Male Chemical Dependency Program Transition

Youth transition

- Prior to October 1, 2020
 - Letter to parents
 - Letter to judges, with notification to Probation
- October 1, 2020
 - Youth transfer to Whitehall in state vehicles, accompanied by staff
 - Whitehall welcome packets
 - Youth will call parents
- Whitehall facility administrator will remain onsite through the first weekend

Leadership support

- Frequent campus visits by Mark LaBouchardiere (interim facility administrator effective 10/1) and Dr. Janine Fromm
- Mark and HR Director Roshelle Campbell meet with all Hastings teammates – September 24 & 25, 2020
- Hiring a Human Resources Business Partner dedicated to Kearney, Hastings & Geneva

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Male Chemical Dependency Program Transition

Whitehall campus: YSH / CD census & capacity

	SFY17-18	SFY18-19	SYF19-20		9/17/2020		
YSH Avg Census	13	13	9	YSH Current Census	7	YSH Potential Capacity	16
CD Avg Census	20	13	13	CD Current Census	8	CD Potential Capacity	16

YSH = Youth who Sexually Harm
 CD = Chemical Dependency

Nebraska Youth Rehabilitation & Treatment System

Guiding Principles

Multi-disciplinary team planning and execution of among state agencies

Strength-based programming that promotes adolescent brain development and positive human development

Adoption of small-group care model core elements – cohort consistency, relationships, homelike living spaces, self-care and shared responsibilities of shared spaces

Appropriate aftercare and re-entry are essential to case planning and successful transitioning back to the community

Academic achievement and engagement are critical elements for case planning and successful re-entry – core curriculum, life skills, emotional intelligence and career skills

Engaging families as partners early and throughout the continuum of care

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Nebraska Youth Rehabilitation & Treatment System

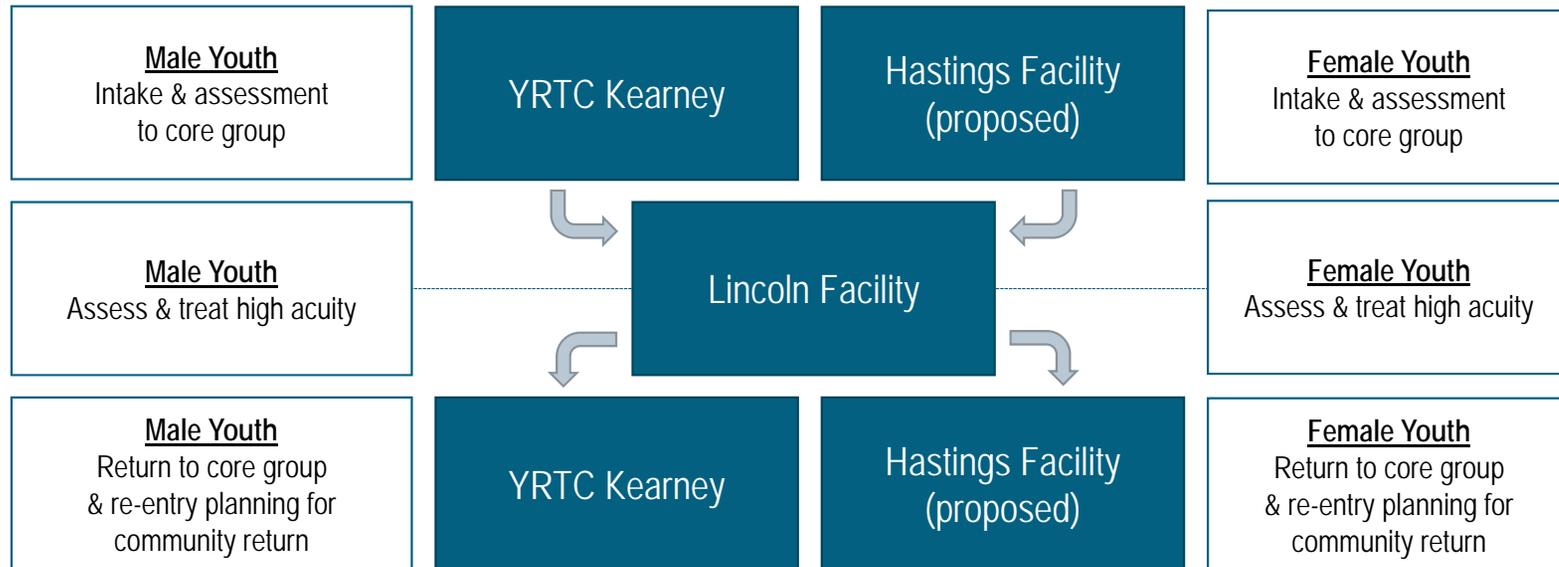
Treatment model

1. Enhanced clinical services: individualized therapy, family therapy, nursing support, psychiatric support with medication management
 - Supplement with Chemical Dependency services to address co-occurring disorders exhibited by majority of YRTC youth
 - Re-evaluate the Phase program
2. Integrated education: academic and credit recovery for diploma achievement, career pathways, project-based learning
3. Programming for engagement: appropriate activities, on- and off-campus, to develop each youth's life skills, trade skills, interpersonal skills and self-worth
4. Re-entry planning: preparing youth to return home, through partnership with families, community supports and Juvenile Probation

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Nebraska Youth Rehabilitation & Treatment System

March 2021 - Proposed



Nebraska Youth Rehabilitation & Treatment System

Missouri Youth Services Institute

MYSI employs a therapeutic group treatment approach, utilizing components of positive youth development and cognitive behavioral therapy to help youth make positive and long-lasting changes

- Year-long engagement started in August 2020, ~\$576,000
- Initial focus on Kearney
- Will work closely with Hastings team to prepare for potential female program transfer

Fundamentals of the MYSI approach

Small, non-institutional facilities close to home	Integrated treatment & education
Integrated treatment	Families & communities as partners in treatment
Individual care within a group treatment model	Support from transition through aftercare
Safety through supervision, structure & relationships	

Nebraska Youth Rehabilitation & Treatment System

Lincoln highlights

- Intensive, individualized treatment environment for high-acuity youth
- Treatment plans developed by board certified behavior analysts (BCBAs)
- Dedicated child and adolescent psychiatrist and nursing staff

Helping People Live Better Lives.

Nebraska Youth Rehabilitation & Treatment System

Census Males	6/30/2018	6/30/2019	6/30/2020	9/17/20
YRTC Kearney (M)	84	70	53	38
YRTC Lincoln (M)	n/a	n/a	6	4

YRTC Male Youth Stats SFY19/20

97 Admissions

Admissions by Race

1. White/Non-Hispanic, 41%
2. Black/Non-Hispanic, 32%
3. Other/Hispanic, 21%
4. American Indian, 4%

Top Home Counties

1. Lancaster County, 40%
2. Douglas, 25%
3. Hall, 7%
4. Scotts Bluff 2%

Top Offenses

1. Theft, 19 charges
2. 3rd degree assault, 11 charges
3. Burglary, 8 charges
4. Operation of motor vehicle to avoid arrest, 5 charges

Support from the Special Oversight Committee

Recommendations from 2013 Children's Commission Report

- Create an intensive, highly structured **treatment facility in most appropriate community** with programming designed specifically for high-risk juvenile law violators
- Require the YRTC's to provide **evidence-based, trauma-informed treatment** for behavioral health disorders, mental health disorders, and chemical dependencies to include appropriate medication assisted treatment
- Develop a **decision matrix to establish YRTC entrance criteria** that takes into account appropriate screening and assessment scores, seriousness of the crime, and the need for more intense interventions because of previous intervention failure

Next Steps

1. Continue dialogue on the best interest of children and families
2. Begin meeting with statewide stakeholders to develop **5-year operations plan**; Casey Family Programs will facilitate meetings
3. Invite committee to tour Kearney campus
4. Engage Hastings stakeholders in **community transition planning**; meeting tentatively set for September 23, 2020 at 1 pm
5. **Clinical consultants at Whitehall** begin providing onsite case consultation and mentoring to ensure appropriate transition of programs*
6. Continue DHHS **executive team visits** to youth campuses

*Consulting costs

- CD consultant: **\$10,800** for first four weeks, part-time as needed through the fall
- YSH consultant: **\$200 per week** for case consultation and mentoring

APPENDIX 14

DHHS YRTC BRIEFING

OCT. 23, 2020

Youth Treatment System Briefing

to the Legislative Oversight Committee

Dannette R. Smith, CEO
Department of Health & Human Services

Larry Kahl
Chief Operating Officer

Janine Fromm, MD
Executive Medical Officer

Mark LaBouchardiere
Office of Juvenile Services

October 23, 2020

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Goals of the Youth Treatment System

- Help youth develop skills to be successful and productive in their communities
- Provide quality education and clinical services
- Implement a system of programming and services to meet youths' individual needs
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 - Identify separate space for female youth in YRTC system

Goals of the Youth Treatment System

	Current Treatment Location	Constraints	Future Treatment Location
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Females, core group	Kearney	Must move from Kearney by July 2021	Hastings (proposed)
Females, re-entry	Geneva	<ul style="list-style-type: none"> • Difficulty maintaining staff • Difficulty recruiting clinical support 	Hastings (proposed)
Males & Females, high acuity	Lincoln leased space		Lincoln leased space
Chemical Dependency, Males	Whitehall/Lincoln		Whitehall/Lincoln
Youth who Sexually Harm, Males	Whitehall/Lincoln		Whitehall/Lincoln

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Goals of the Youth Treatment System

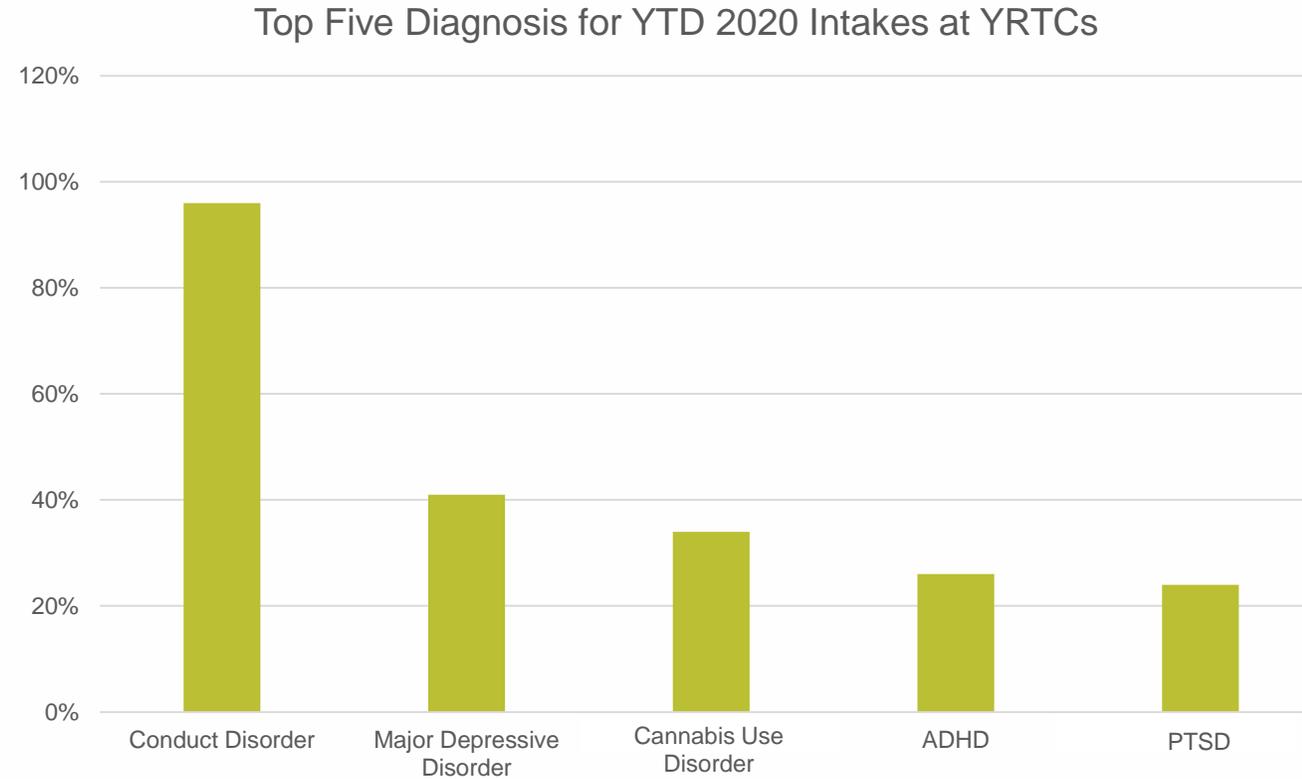
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- Using refurbished Geneva LaFlesche building, this was an opportunity to explore sustainability of programming
- Construction and improvement costs = ~\$400,000
- Re-entry program has experienced significant difficulty recruiting and maintaining sufficient direct care and clinical staff

Geneva Re-entry Program	
Females in re-entry program in 2020	15
Average days in program	45
Re-commitments (as of 10/19/2020)	1

YRTC Top Admission Diagnoses

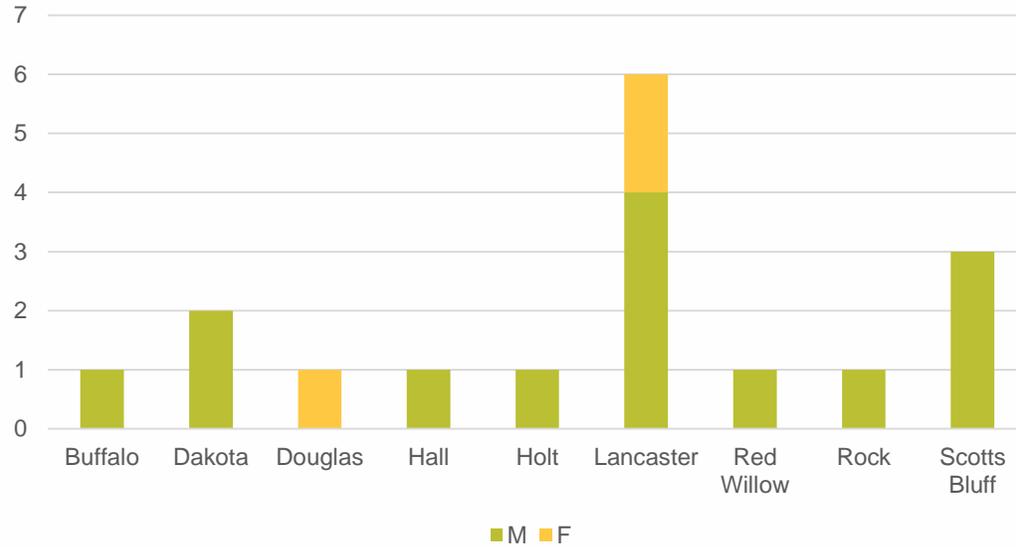
Of all 2020 youth intakes....



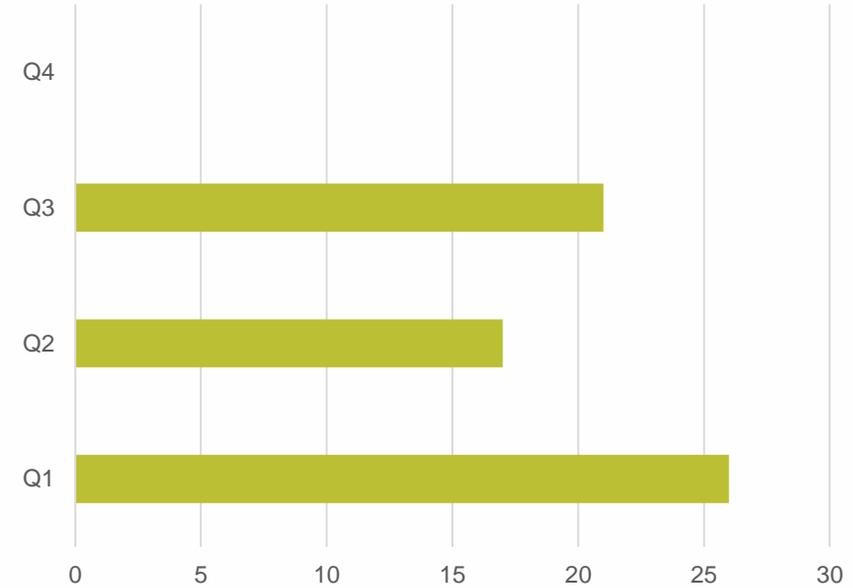
YRTC Data

Census

YRTC Males and Females by County
Snapshot for
September and October 2020



YRTC Quarterly Admissions 2020



YRTC COVID-19 Update

- We have had 12 positive cases in youth at the Kearney campus. There are currently no positive COVID case within our facilities. There have been no serious illnesses or hospital admissions.
- As the pandemic began to impact Nebraska, our facility has taken proactive measures to help reduce the spread of the virus. We instituted daily temperature checks of residents and staff in March and limited in person visitation by offering virtual visits. These measures have contributed greatly to mitigating the spread of COVID-19.
- The necessary areas in the facility have been sanitized regularly and all staff and youth will continue to be monitored for symptoms, including a daily temperature check. If we determine that further actions in the emergency plan need to be implemented, we will advise you.
- We have been diligent in exercising precautionary preparedness and are quick to isolate and enhance cleaning as needed.
- Several staff have been tested to date and we are following our policy on quarantining for staff.

YRTC Data

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Avg Length of Stay 18/19-19/20*
299 days (18/19), 332 days (19/20)
Length of Stay Goal
180-270 days

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*Across all YRTC programs/campuses



Helping People Live Better Lives.

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*Across all YRTC programs/campuses

Hastings: History of change

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Helping People Live Better Lives.

Hastings Campus Team

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ACTIVITY SUPERVISOR	1
ADMINISTRATIVE ASSISTANT I	1
ADMINISTRATIVE NURSE (NEW)	1
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CUSTODIAN/HOUSEKEEPER	2
DHHS PROGRAM MANAGER II	1
FACILITY OPERATING OFFICER II	1
FOOD SERVICE COOK	5
FOOD SERVICE MANAGER	1
HEALTH INFORMATION TECHNICIAN	2
HUMAN SERVICES TREATMENT SPECIALIST II	1
MENTAL HEALTH PRACTITIONER I	2
MENTAL HEALTH PRACTITIONER II	1
PERSONNEL OFFICER	1
PSYCHOLOGIST/LICENSED	1
RECREATION SPECIALIST	1
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SOCIAL WORKER II	1
STAFF ASSISTANT I	2
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SUPPLY WORKER II	1
TEACHER (SCATA CONTRACT)	5
YOUTH COUNSELOR I	1
YOUTH SECURITY SPECIALIST II	27
YOUTH SECURITY SUPERVISOR	10
	74

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- Youth security supervisors: 11.4 years avg. tenure

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- We acknowledge the original appropriation indicated intent for facilities to be used in a specific way
- We propose to again repurpose funding to meet current needs
 - We continue to use facilities to serve youth in state custody

Should the new facilities be used for YRTC females?

- Enables DHHS to meet obligations in the best interest of **all** youth
- Yes – this would **maximize utilization of taxpayer dollars** and repurpose existing DHHS resources
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 - Improvements to new buildings – hardening walls, raising ceilings, filming windows – necessary for use as juvenile treatment building of any kind (~\$200,000)

Male Chemical Dependency Program Transition

Whitehall campus: YSH / CD census & capacity

	SFY17-18	SFY18-19	SYF19-20		10/19/20		
YSH Avg Census	13	13	9	YSH Current Census	7	YSH Potential Capacity	16
CD Avg Census	20	13	13	CD Current Census	8	CD Potential Capacity	16

YSH = Youth who Sexually Harm

CD = Chemical Dependency

Male Chemical Dependency Program Transition

Whitehall campus transition

- Improvements to cottages #1 and #2
 - Paint touch-up
 - Asbestos tile abatement
 - New lighting
 - New carpeting, vinyl floors
- State Building Division is covering costs (~\$35,000)
 - Two additional cottages, #5 and #6 available, similar improvements required (~\$35,000)

Shared staffing but separate programs

- Chemical Dependency program and youth who sexually harm program will be completely separate
 - Separate cottages
 - Separate dining
 - Separate education and classrooms
 - Separate recreation schedules
 - Staff actively training
 - Consultant on site to assist with transition

Male Chemical Dependency Program Transition

2020 Hastings/Whitehall Staff Transition & Training Highlights

September 14	The HRC Youth Security Supervisors (YSS) traveled to the Whitehall campus to train the Whitehall YSS staff.
September 16	Whitehall staff at HRC attended team meetings. Whitehall staff present included the program director, LADC therapist, social worker, LMHP therapist, HSTS staff, and the Whitehall Facility Administrator.
September 17	Available YSSIs from Whitehall traveled to HRC to shadow HRC staff.
September 21	HRC staff provided training to Whitehall staff for the special needs of the youth from HRC.
September 23	All HRC supervisors traveled to Whitehall to continue shadowing and training of Whitehall staff.
September 24-25	HRC activity supervisor and T-Rec staff provided group and activity training to Whitehall activity and T-Rec staff. This occurred at HRC.
September 28-30	The Whitehall facility administrator presented at the HRC campus during preparations for the move
October 5	All HRC youth have transitioned to Whitehall campus, began school, and are responding well to the new environment.

Male Chemical Dependency Program Transition

Youth transition

Prior to October 1, 2020

- Letter to parents
- Letter to judges, with notification to Probation

On October 1, 2020

- Youth transfer to Whitehall in state vehicles, accompanied by staff
- Whitehall welcome packets
- Youth call parents
- Whitehall facility administrator remained onsite through the first weekend.
- Hired Jerome Barry, LLC, LMHP, LADC as a consultant on Sept.14.
- Whitehall has a full complement of clinical providers including psychiatrists, psychologists, MDs and dentists.

Male Chemical Dependency Program Transition

Leadership support

- CEO Smith, COO Kahl and Chief of Staff Emily Dodson met with Hastings City Council and administration on September 23.
- Frequent campus visits by Mark LaBouchardiere (interim facility administrator effective October 1) and Dr. Janine Fromm
- Mark LaBouchardiere and HR Director Roshelle Campbell met with all Hastings teammates on September 24 & 25
- Email sent on October 9 to Hastings community partners.
- Calls to Hastings city government liaison Ted Schroeder on October 2, October 5 and October 9.
- Hiring a human resources business partner dedicated to Kearney, Hastings & Geneva

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Nebraska Youth Rehabilitation & Treatment System

Guiding Principles

Multi-disciplinary team planning and execution of among state agencies

Strengthening Chemical Dependency programming across all facilities.

Adoption of small-group care model core elements – cohort consistency, relationships, homelike living spaces, self-care and shared responsibilities of shared spaces

Appropriate aftercare and re-entry are essential to case planning and successful transitioning back to the community

Academic achievement and engagement are critical elements for case planning and successful re-entry – core curriculum, life skills, emotional intelligence and career skills
Nebraska Department of Education began onsite consultation February 24, 2020.

Integrated education: academic and credit recovery for diploma achievement, career pathways, project-based learning

Engaging families as partners early and throughout the continuum of care

Nebraska Youth Rehabilitation & Treatment System

Treatment model

1. Enhanced clinical services: individualized therapy, family therapy, nursing support, psychiatric support with medication management
 - Supplement with chemical dependency services to address co-occurring disorders exhibited by majority of YRTC youth
 - Re-evaluate the Phase program
2. Educational Services: Academic achievement and engagement are critical elements for successful re-entry. They include core curriculum, life skills, emotional intelligence and career skills.
3. Programming for engagement: appropriate activities, on- and off-campus, to develop each youth's life skills, trade skills, interpersonal skills and self-worth
4. Re-entry planning: preparing youth to return home, through partnership with families, community supports and juvenile probation

Nebraska Youth Rehabilitation & Treatment System

Missouri Youth Services Institute

MYSI employs a therapeutic group treatment approach, utilizing components of positive youth development and cognitive behavioral therapy to help youth make positive and long-lasting changes

- Year-long engagement started in August 2020, ~\$576,000
- Initial focus on Kearney
- Will work closely with Hastings team to prepare for potential female program transfer

Fundamentals of the MYSI approach

Small, non-institutional facilities close to home	Integrated treatment & education
Integrated treatment	Families & communities as partners in treatment
Individual care within a group treatment model	Support from transition through aftercare
Safety through supervision, structure & relationships	

YRTC Focus: Missouri Youth Services Institute

All YRTCs are stable, yet undergoing a dynamic transformation and preparing to meet the needs of youth in our state for years to come. There are three key areas of focus at this time for the YRTCs: clinical, education, and programming/facilities addressed by the following initiatives:

- Utilization of contracted services through the Missouri Youth Services Institute (MYSI)
- Nebraska Department of Education providing enhanced educational services to allow youth to progress toward graduation
- Create a therapeutic milieu / environment utilizing both group and individual treatment
- Continuum of services allows for meeting the needs of youth as they progress through a system of care

Support from the Special Oversight Committee

Recommendations from 2013 Children's Commission Report

- Create an intensive, highly structured **treatment facility in most appropriate community** with programming designed specifically for high-risk juvenile law violators
- Require the YRTC's to provide **evidence-based, trauma-informed treatment** for behavioral health disorders, mental health disorders, and chemical dependencies to include appropriate medication assisted treatment
- Develop a **decision matrix to establish YRTC entrance criteria** that takes into account appropriate screening and assessment scores, seriousness of the crime, and the need for more intense interventions because of previous intervention failure

Next Steps

1. Continue dialogue on the best interest of children and families.
2. Begin meeting with statewide stakeholders to develop 5-year operations plan; exploring options for the University of Nebraska-Lincoln College of Business Administration to facilitate meetings.
3. Schedule a time for committee to tour the Kearney campus.
4. Continue to engage Hastings stakeholders in community transition planning. COO is in frequent contact with our Hastings liaison.
5. Continue DHHS executive team visits to youth campuses.

NEBRASKA

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Questions?

NEBRASKA

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APPENDIX 15
YRTC KEARNEY
CAPACITY/ORGANIZATIONAL
CHART

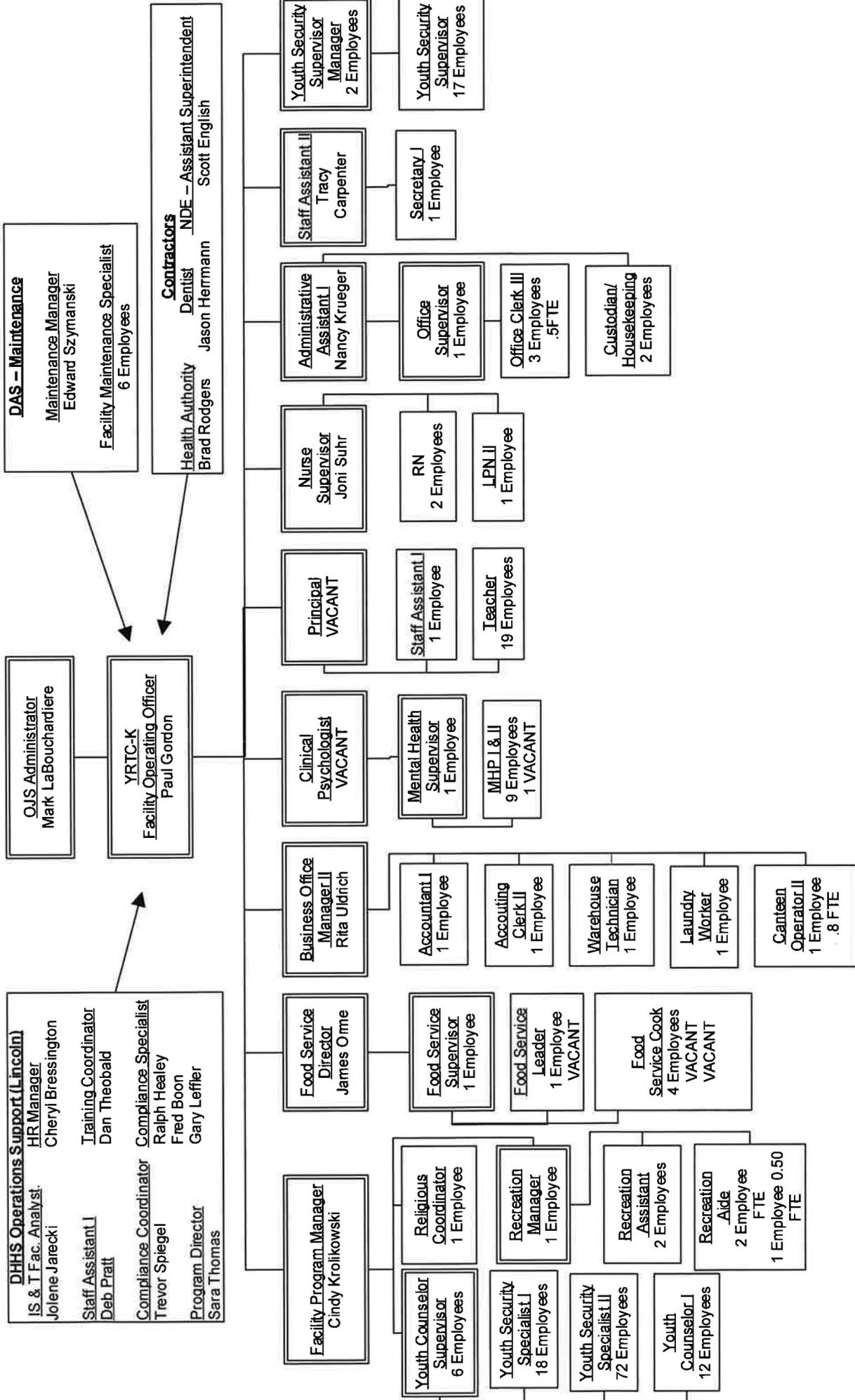
YRTC-Kearney

Capacity of Facility- 170

Organizational chart- see attached

Youth admitted to the facility:

2019/2020 - 126



APPENDIX 16

SLIP LAW

LB1188 (2020)

LEGISLATIVE BILL 1188

Approved by the Governor August 06, 2020

Introduced by Howard, 9; Murman, 38; Walz, 15.

A BILL FOR AN ACT relating to juveniles; to amend sections 43-401, 43-403, 43-404, 43-405, 43-406, 43-407, 43-408, 43-410, 43-417, 43-420, 43-425, 83-108.04, and 83-113, Reissue Revised Statutes of Nebraska, and sections 79-703, 83-107.01, and 83-108, Revised Statutes Cumulative Supplement, 2018; to provide, change, and eliminate definitions; to eliminate obsolete provisions; to provide and change duties for the Office of Juvenile Services and the Department of Health and Human Services; to change provisions relating to treatment of juveniles; to prohibit denial of in-person visitation and communication as a sanction; to create the position of and provide duties for the superintendent of institutional schools; to change provisions relating to accreditation standards; to provide requirements for gender separation at youth rehabilitation and treatment centers; to change provisions relating to Department of Health and Human Services facilities; to harmonize provisions; to repeal the original sections; and to outright repeal sections 43-414, 43-415, 43-416, 43-418, 43-419, 43-421, 43-422, 43-423, 43-4002, and 83-101, Reissue Revised Statutes of Nebraska.

Be it enacted by the people of the State of Nebraska,

Section 1. Section 43-401, Reissue Revised Statutes of Nebraska, is amended to read:

43-401 Sections 43-401 to 43-425 and section 12 of this act 43-424 shall be known and may be cited as the Health and Human Services, Office of Juvenile Services Act.

Sec. 2. Section 43-403, Reissue Revised Statutes of Nebraska, is amended to read:

43-403 For purposes of the Health and Human Services, Office of Juvenile Services Act:

(1) Aftercare means the control, supervision, and care exercised over juveniles who have been discharged from commitment ~~paroled~~;

(2) Committed means an order by a court committing a juvenile to the care and custody of the Office of Juvenile Services for treatment at a youth rehabilitation and treatment center identified in the court order;

(3) Community supervision means the control, supervision, and care exercised over juveniles ~~committed to the Office of Juvenile Services~~ when a commitment to the level of treatment of a youth rehabilitation and treatment center has not been ordered by the court;

(4) Evaluation means assessment of the juvenile's social, physical, psychological, and educational development and needs, including a recommendation as to an appropriate treatment plan; and

(5) Parole means a conditional release of a juvenile from a youth ~~rehabilitation and treatment center to aftercare or transferred to Nebraska for parole supervision by way of interstate compact~~;

(6) ~~Placed for evaluation means a placement with the Office of Juvenile Services or the Department of Health and Human Services for purposes of an evaluation of the juvenile; and~~

(5) (7) Treatment means the type of supervision, care, confinement, and rehabilitative services provided for the juvenile at a youth rehabilitation and treatment center operated by the Office of Juvenile Services.

Sec. 3. Section 43-404, Reissue Revised Statutes of Nebraska, is amended to read:

43-404 (1) ~~This subsection applies until July 1, 2014. There is created within the Department of Health and Human Services the Office of Juvenile Services. The office shall have oversight and control of state juvenile correctional facilities and programs other than the secure youth confinement facility which is under the control of the Department of Correctional Services. The Administrator of the Office of Juvenile Services shall be appointed by the chief executive officer of the department or his or her designee and shall be responsible for the administration of the facilities and programs of the office. The department may contract with a state agency or private provider to operate any facilities and programs of the Office of Juvenile Services.~~

(2) ~~This subsection applies beginning July 1, 2014. There is created within the Department of Health and Human Services the Office of Juvenile Services. The office shall have oversight and control of the youth rehabilitation and treatment centers. The Administrator of the Office of Juvenile Services shall be appointed by the chief executive officer of the department or his or her designee and shall be responsible for the administration of the facilities and programs of the office. The department may subcontract contract with a state agency or private provider to provide services related to the operate any facilities and programs of the Office of Juvenile Services.~~

Sec. 4. Section 43-405, Reissue Revised Statutes of Nebraska, is amended to read:

43-405 The administrative duties of the Office of Juvenile Services are to:

(1) Manage, establish policies for, and administer the office, including all facilities and programs operated by the office or provided through the office by contract with a provider;

(2) Supervise employees of the office, including employees of the facilities and programs operated by the office;

(3) Have separate budgeting procedures and develop and report budget information separately from the Department of Health and Human Services;

(4) Adopt and promulgate rules and regulations for the levels of treatment and for management, control, screening, treatment, rehabilitation, transfer, discharge, and evaluation until October 1, 2013, and parole until July 1, 2014, of juveniles placed with or committed to the Office of Juvenile Services;

(5) Ensure that statistical information concerning juveniles placed with or committed to facilities or programs of the office is collected, developed, and maintained for purposes of research and the development of treatment programs;

(6) Monitor commitments, placements, and evaluations at facilities and programs operated by the office or through contracts with providers and submit electronically an annual report of its findings to the Legislature. ~~For 2012, 2013, and 2014, the office shall also provide an electronic copy of the report to the Health and Human Services Committee of the Legislature on or before September 15. The report shall include an assessment of the administrative costs of operating the facilities, the cost of programming, and the savings realized through reductions in commitments, placements, and evaluations, and information regarding the collaboration required by section 83-101;~~

(7) Coordinate the programs and services of the juvenile justice system with other governmental agencies and political subdivisions;

(8) Coordinate educational, vocational, and social counseling for juveniles committed to the office; and

~~(9) Until July 1, 2014, coordinate community-based services for juveniles and their families;~~

~~(10) Until July 1, 2014, supervise and coordinate juvenile parole and aftercare services; and~~

~~(9) (11)~~ Exercise all powers and perform all duties necessary to carry out its responsibilities under the Health and Human Services, Office of Juvenile Services Act.

Sec. 5. Section 43-406, Reissue Revised Statutes of Nebraska, is amended to read:

43-406 The Office of Juvenile Services shall utilize:

(1) Evidence-based and validated risk Risk and needs assessment instruments for use in determining the individualized level of treatment plan for each the juvenile committed to the office;

(2) A case classification process to include levels of treatment defined by rules and regulations and case management standards for each level of treatment. ~~The process shall provide for a balance of accountability, public safety, and treatment;~~

~~(3) Case management for all juveniles committed to the office; and~~

~~(4) Until July 1, 2014, a purchase-of-care system which will facilitate the development of a statewide community-based array of care with the involvement of the private sector and the local public sector. Care services may be purchased from private providers to provide a wider diversity of services. This system shall include accessing existing Title IV-E funds of the federal Social Security Act, as amended, medicaid funds, and other funding sources to support eligible community-based services. Such services developed and purchased shall include, but not be limited to, evaluation services. Services shall be offered and delivered on a regional basis;~~

~~(5) Until October 1, 2013, community-based evaluation programs, supplemented by one or more residential evaluation programs. A residential evaluation program shall be provided in a county containing a city of the metropolitan class. Community-based evaluation services shall replace the residential evaluation services available at the Youth Diagnostic and Rehabilitation Center by December 31, 1999; and~~

~~(4) (6)~~ A management information system. The system shall be a unified, interdepartmental client information system which supports the management function as well as the service function.

Sec. 6. Section 43-407, Reissue Revised Statutes of Nebraska, is amended to read:

43-407 ~~(1) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013. The Office of Juvenile Services shall design and make available programs and treatment services through the Youth Rehabilitation and Treatment Center-Kearney and Youth Rehabilitation and Treatment Center-Geneva. The programs and treatment services shall be based upon the individual or family evaluation process and treatment plan. The treatment plan shall be developed within fourteen days after admission. If a juvenile placed at the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the juvenile may be transferred to a program or facility if the treatment and security needs of the juvenile can be met. The assessment process shall include involvement of both private and public sector behavioral health providers. The selection of the treatment venue for each juvenile shall include~~

~~individualized case planning and incorporate the goals of the juvenile justice system pursuant to section 43-402. Juveniles committed to the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva who are transferred to alternative settings for treatment remain committed to the Department of Health and Human Services and the Office of Juvenile Services until discharged from such custody. Programs and treatment services shall address:~~

~~(a) Behavioral impairments, severe emotional disturbances, sex offender behaviors, and other mental health or psychiatric disorders;~~

~~(b) Drug and alcohol addiction;~~

~~(c) Health and medical needs;~~

~~(d) Education, special education, and related services;~~

~~(e) Individual, group, and family counseling services as appropriate with any treatment plan related to subdivisions (a) through (d) of this subsection. Services shall also be made available for juveniles who have been physically or sexually abused;~~

~~(f) A case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community. This process shall follow individualized planning which shall begin at intake and evaluation. Structured programming shall be scheduled for all juveniles. This programming shall include a strong academic program as well as classes in health education, living skills, vocational training, behavior management and modification, money management, family and parent responsibilities, substance abuse awareness, physical education, job skills training, and job placement assistance. Participation shall be required of all juveniles if such programming is determined to be age and developmentally appropriate. The goal of such structured programming shall be to provide the academic and life skills necessary for a juvenile to successfully return to his or her home and community upon release; and~~

~~(g) The design and delivery of treatment programs through the youth rehabilitation and treatment centers as well as any licensing or certification requirements, and the office shall follow the requirements as stated within Title XIX and Title IV-E of the federal Social Security Act, as such act existed on May 25, 2007, the Special Education Act, or other funding guidelines as appropriate. It is the intent of the Legislature that these funding sources shall be utilized to support service needs of eligible juveniles.~~

~~(1) (2) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013. The Office of Juvenile Services shall design and make available programs and treatment services through youth rehabilitation and treatment centers the Youth Rehabilitation and Treatment Center-Kearney and Youth Rehabilitation and Treatment Center-Geneva. The programs and treatment services shall be evidence-based and based upon the individual or family evaluation process using evidence-based, validated risk and needs assessments to create an individualized and treatment plan. The treatment plan shall be developed within fourteen days after admission. If a juvenile placed at a youth rehabilitation and treatment center the Youth Rehabilitation and Treatment Center-Kearney or Youth Rehabilitation and Treatment Center-Geneva is assessed as needing inpatient or subacute substance abuse or behavioral health residential treatment, the Office of Juvenile Services may arrange for such treatment to be provided at the Hastings Regional Center or may transition the juvenile to another inpatient or subacute residential treatment facility licensed as a treatment facility in the State of Nebraska. Except in a case requiring emergency admission to an inpatient facility, the juvenile shall not be discharged by the Office of Juvenile Services until the juvenile has been returned to the court for a review of his or her conditions of probation and the juvenile has been transitioned to the clinically appropriate level of care. Programs and treatment services shall address:~~

~~(a) Behavioral impairments, severe emotional disturbances, sex offender behaviors, and other mental health or psychiatric disorders;~~

~~(b) Drug and alcohol addiction;~~

~~(c) Health and medical needs;~~

~~(d) Education, special education, and related services;~~

~~(e) Individual, group, and family counseling services as appropriate with any treatment plan related to subdivisions (a) through (d) of this subsection. Services shall also be made available for juveniles who have been physically or sexually abused;~~

~~(f) A case management and coordination process, designed to assure appropriate reintegration of the juvenile to his or her family, school, and community. This process shall follow individualized planning which shall begin at intake and evaluation. Structured programming shall be scheduled for all juveniles. This programming shall include a strong academic program as well as classes in health education, living skills, vocational training, behavior management and modification, money management, family and parent responsibilities, substance abuse awareness, physical education, job skills training, and job placement assistance. Participation shall be required of all juveniles if such programming is determined to be age and developmentally appropriate. The goal of such structured programming shall be to provide the academic and life skills necessary for a juvenile to successfully return to his or her home and community upon release; and~~

~~(g) The design and delivery of treatment programs through the youth rehabilitation and treatment centers as well as any licensing or certification requirements, and the office shall follow the requirements as stated within~~

Title XIX and Title IV-E of the federal Social Security Act, as such act existed on January 1, ~~2020~~ 2013, the Special Education Act, or other funding guidelines as appropriate. It is the intent of the Legislature that these funding sources shall be utilized to support service needs of eligible juveniles.

~~(2)(a) (3)(a) The Office of Juvenile Services shall provide evidence-based services and operate the youth rehabilitation and treatment centers in accordance with evidence-based policies, practices, and procedures begin implementing evidence-based practices, policies, and procedures by January 15, 2016, as determined by the office. On December 15 Thereafter, on November 1 of each year, the office shall electronically submit to the Governor, the Legislature, and the Chief Justice of the Supreme Court, a comprehensive report of the on its efforts to implement evidence-based services, policies, practices, and procedures by which such centers operate, and efforts the office has taken to ensure fidelity to evidence-based models. The report to the Legislature shall be by electronic transmission. The report may be attached to preexisting reporting duties. The report shall include at a minimum:~~

~~(i) The percentage of juveniles being supervised in accordance with evidence-based practices;~~

~~(ii) The percentage of state funds expended by each respective department for programs that are evidence-based, and a list of all programs which are evidence-based;~~

~~(iii) Specification of supervision policies, procedures, programs, and practices that were created, modified, or eliminated; and~~

~~(iv) Recommendations of the office for any additional collaboration with other state, regional, or local public agencies, private entities, or faith-based and community organizations.~~

~~(b) Each report and executive summary shall be available to the general public on the web site of the office.~~

~~(c) The Executive Board of the Legislative Council may request the Consortium for Crime and Justice Research and Juvenile Justice Institute at the University of Nebraska at Omaha to review, study, and make policy recommendations on the reports assigned by the executive board.~~

Sec. 7. Section 43-408, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-408 (1)(a) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013, and to all juveniles committed to the Office of Juvenile Services for community supervision prior to October 1, 2013. Whenever any juvenile is committed to the Office of Juvenile Services, to any facility operated by the Office of Juvenile Services, or to the custody of the Administrator of the Office of Juvenile Services, a superintendent of a facility, or an administrator of a program, the juvenile is deemed committed to the Office of Juvenile Services. Juveniles committed to the Office of Juvenile Services shall also be considered committed to the care and custody of the Department of Health and Human Services for the purpose of obtaining health care and treatment services.~~

~~(b) The committing court shall order the initial level of treatment for a juvenile committed to the Office of Juvenile Services. Prior to determining the initial level of treatment for a juvenile, the court may solicit a recommendation regarding the initial level of treatment from the Office of Juvenile Services. Under this subsection, the committing court shall not order a specific placement for a juvenile. The court shall continue to maintain jurisdiction over any juvenile committed to the Office of Juvenile Services until such time that the juvenile is discharged from the Office of Juvenile Services. The court shall conduct review hearings every six months, or at the request of the juvenile, for any juvenile committed to the Office of Juvenile Services who is placed outside his or her home, except for a juvenile residing at a youth rehabilitation and treatment center. The court shall determine whether an out-of-home placement made by the Office of Juvenile Services is in the best interests of the juvenile, with due consideration being given by the court to public safety. If the court determines that the out-of-home placement is not in the best interests of the juvenile, the court may order other treatment services for the juvenile.~~

~~(c) After the initial level of treatment is ordered by the committing court, the Office of Juvenile Services shall provide treatment services which conform to the court's level of treatment determination. Within thirty days after making an actual placement, the Office of Juvenile Services shall provide the committing court with written notification of where the juvenile has been placed. At least once every six months thereafter, until the juvenile is discharged from the care and custody of the Office of Juvenile Services, the office shall provide the committing court with written notification of the juvenile's actual placement and the level of treatment that the juvenile is receiving.~~

~~(d) For transfer hearings, the burden of proof to justify the transfer is on the Office of Juvenile Services, the standard of proof is clear and convincing evidence, and the strict rules of evidence do not apply. Transfers of juveniles from one place of treatment to another are subject to section 43-251.01 and to the following:~~

~~(i) Except as provided in subdivision (d)(ii) of this subsection, if the Office of Juvenile Services proposes to transfer the juvenile from a less restrictive to a more restrictive place of treatment, a plan outlining the proposed change and the reasons for the proposed change shall be presented to~~

~~the court which committed the juvenile. Such change shall occur only after a hearing and a finding by the committing court that the change is in the best interests of the juvenile, with due consideration being given by the court to public safety. At the hearing, the juvenile has the right to be represented by counsel;~~

~~(ii) The Office of Juvenile Services may make an immediate temporary change without prior approval by the committing court only if the juvenile is in a harmful or dangerous situation, is suffering a medical emergency, is exhibiting behavior which warrants temporary removal, or has been placed in a non-state-owned facility and such facility has requested that the juvenile be removed. Approval of the committing court shall be sought within fifteen days of making an immediate temporary change, at which time a hearing shall occur before the court. The court shall determine whether it is in the best interests of the juvenile to remain in the new place of treatment, with due consideration being given by the court to public safety. At the hearing, the juvenile has the right to be represented by counsel; and~~

~~(iii) If the proposed change seeks to transfer the juvenile from a more restrictive to a less restrictive place of treatment or to transfer the juvenile from the juvenile's current place of treatment to another which has the same level of restriction as the current place of treatment, the Office of Juvenile Services shall notify the juvenile, the juvenile's parents, custodian, or legal guardian, the committing court, the county attorney, the counsel for the juvenile, and the guardian ad litem of the proposed change. The juvenile has fifteen days after the date of the notice to request an administrative hearing with the Office of Juvenile Services, at which time the Office of Juvenile Services shall determine whether it is in the best interests of the juvenile for the proposed change to occur, with due consideration being given by the office to public safety. The juvenile may be represented by counsel at the juvenile's own expense. If the juvenile is aggrieved by the administrative decision of the Office of Juvenile Services, the juvenile may appeal that decision to the committing court within fifteen days after the Office of Juvenile Services' decision. At the hearing before the committing court, the juvenile has the right to be represented by counsel.~~

~~(e) If a juvenile is placed in detention after the initial level of treatment is determined by the committing court, the committing court shall hold a hearing every fourteen days to review the status of the juvenile. Placement of a juvenile in detention shall not be considered as a treatment service.~~

~~(f) The committing court's review of a change of place of treatment pursuant to this subsection does not apply to parole revocation hearings.~~

~~(1) (2)(a) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013. Whenever any juvenile is committed to the Office of Juvenile Services, the juvenile shall also be considered committed to the care and custody of the Department of Health and Human Services for the purpose of obtaining health care and treatment services.~~

~~(2) (b) The committing court shall order placement at a youth rehabilitation and treatment center for a juvenile committed to the Office of Juvenile Services. The court shall continue to maintain jurisdiction over any juvenile committed to the Office of Juvenile Services for the purpose of reviewing the juvenile's probation upon discharge from the care and custody of the Office of Juvenile Services.~~

~~(3) (c) If a juvenile is placed in detention while awaiting placement at a youth rehabilitation and treatment center and the placement has not occurred within fourteen days, the committing court shall hold a hearing every fourteen days to review the status of the juvenile. Placement of a juvenile in detention shall not be considered a treatment service.~~

Sec. 8. Section 43-410, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-410 (1) This subsection applies until July 1, 2014. Any peace officer, juvenile parole officer, or direct care staff member of the Office of Juvenile Services has the authority to apprehend and detain a juvenile who has absconded or is attempting to abscond from a placement for evaluation or commitment to the Office of Juvenile Services and shall cause the juvenile to be returned to the facility or program or an appropriate juvenile detention facility or staff secure juvenile facility. For purposes of this subsection, direct care staff member means any staff member charged with the day-to-day care and supervision of juveniles housed at a facility or program operated directly by the office or security staff who has received training in apprehension techniques and procedures.~~

~~(1) (2)(a) This subsection applies beginning July 1, 2014. Any peace officer or direct care staff member of the Office of Juvenile Services has the authority to apprehend and detain a juvenile who has absconded or is attempting to abscond from commitment to the Office of Juvenile Services and shall cause the juvenile to be returned to the youth rehabilitation and treatment center or an appropriate juvenile detention facility or staff secure juvenile facility.~~

~~(2) (b) For purposes of this section subsection, direct care staff member means any staff member charged with the day-to-day care and supervision of juveniles at a youth rehabilitation and treatment center or security staff who has received training in apprehension techniques and procedures.~~

Sec. 9. Section 43-417, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-417 (1) This subsection applies to all juveniles committed to the~~

~~Office of Juvenile Services for placement at a youth rehabilitation and treatment center prior to July 1, 2013. In administering juvenile parole, the Office of Juvenile Services shall consider whether (a) the juvenile has completed the goals of his or her individual treatment plan or received maximum benefit from institutional treatment, (b) the juvenile would benefit from continued services under community supervision, (c) the juvenile can function in a community setting, (d) there is reason to believe that the juvenile will not commit further violations of law, and (e) there is reason to believe that the juvenile will comply with the conditions of parole.~~

~~(2) This subsection applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013. In determining whether to discharge a juvenile from a youth rehabilitation and treatment center, the Office of Juvenile Services shall consider whether (1) (a) the juvenile has completed the goals of his or her individualized individual treatment plan or received maximum benefit from institutional treatment, (2) (b) the juvenile would benefit from continued services under community supervision, (3) (c) the juvenile can function in a community setting, (4) (d) there is reason to believe that the juvenile will not commit further violations of law, and (5) (e) there is reason to believe that the juvenile will comply with the conditions of probation.~~

Sec. 10. Section 43-420, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-420 (1) This subsection applies until July 1, 2013. Any hearing required or permitted for juveniles in the custody of the Office of Juvenile Services, except a preliminary parole revocation hearing, shall be conducted by a hearing officer who is an attorney licensed to practice law in the State of Nebraska and may be an employee of the Department of Health and Human Services or an attorney who is an independent contractor. If the hearing officer is an employee of the department, he or she shall not be assigned to any duties requiring him or her to give ongoing legal advice to any person employed by or who is a contractor with the office.~~

~~(2) This subsection applies beginning July 1, 2013. Any hearing required or permitted for juveniles in the custody of the Office of Juvenile Services shall be conducted by a hearing officer who is an attorney licensed to practice law in the State of Nebraska and may be an employee of the Department of Health and Human Services or an attorney who is an independent contractor. If the hearing officer is an employee of the department, he or she shall not be assigned to any duties requiring him or her to give ongoing legal advice to any person employed by or who is a contractor with the office.~~

Sec. 11. Section 43-425, Reissue Revised Statutes of Nebraska, is amended to read:

~~43-425 (1) The Community and Family Reentry Process is hereby created. This process is created in order to reduce recidivism and promote safe and effective reentry for the juvenile and his or her family to the community from the juvenile justice system. This process applies to all juveniles committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center on or after July 1, 2013.~~

~~(2) While a juvenile is committed to a youth rehabilitation and treatment center, family team meetings shall be conducted in person or via videoconferencing at least once per month with the juvenile's support system to discuss the juvenile's transition back to the community. A juvenile's support system should be made up of any of the following: The juvenile himself or herself, any immediate family members or guardians, informal and formal supports, the juvenile's guardian ad litem appointed by the court, the juvenile's probation officer, Office of Juvenile Services personnel employed by the facility, and any additional personnel as appropriate. Once developed, individualized reentry plans should be discussed at the family team meetings with the juvenile and other members of the juvenile's support system and shall include discussions on the juvenile's placement after leaving the facility. The probation officer and the Office of Juvenile Services personnel should discuss progress and needs of the juvenile and should help the juvenile follow his or her individual reentry plan to help with his or her transition back to the community.~~

~~(3) Within sixty days prior to discharge from a youth rehabilitation and treatment center, or as soon as possible if the juvenile's remaining time at the youth rehabilitation and treatment center is less than sixty days, an evidence-based risk screening and needs assessment should be conducted on the juvenile in order to determine the juvenile's risk of reoffending and the juvenile's individual needs upon reentering the community.~~

~~(4) Individualized reentry plans shall be developed with input from the juvenile and his or her support system in conjunction with a risk assessment process. Individualized reentry plans shall be finalized thirty days prior to the juvenile leaving the youth rehabilitation and treatment center or as soon as possible if the juvenile's remaining time at the center is less than thirty days. Individualized reentry plans should include specifics about the juvenile's placement upon return to the community, an education transition plan, a treatment plan with any necessary appointments being set prior to the juvenile leaving the center, and any other formal and informal supports for the juvenile and his or her family. The district probation officer and Office of Juvenile Services personnel shall review the individualized reentry plan and the expected outcomes as a result of the plan with the juvenile and his or her support system within thirty days prior to the juvenile's discharge from the center.~~

(5) The probation officer shall have contact with the juvenile and the juvenile's support system within forty-eight hours after the juvenile returns to the community and continue to assist the juvenile and the juvenile's support system in implementing and following the individualized reentry plan and monitoring the juvenile's risk through ongoing assessment updates.

(6) The Office of Probation Administration shall:

(a) ~~Establish~~ establish an evidence-based reentry process that utilizes risk assessment to determine the juvenile's supervision level upon return to the community;

(b) ~~Establish~~ They shall establish supervision strategies based on risk levels of the juvenile and supervise accordingly, with ongoing reassessment to assist in determining eligibility for release from probation;

(c) ~~Develop~~ The Office of Probation Administration shall develop a formal matrix of graduated sanctions to be utilized prior to requesting the county attorney to file for probation revocation; and

(d) ~~Provide~~ The Office of Probation Administration shall provide training to its workers on risk-based supervision strategies, motivational interviewing, family engagement, community-based resources, and other evidence-based reentry strategies.

Sec. 12. In-person visitation and other forms of communication, including telephone calls and electronic communication, with a juvenile's relatives, including, but not limited to, parents, guardians, grandparents, siblings, and children, shall not be limited or prohibited as a consequence or sanction.

Sec. 13. The Department of Health and Human Services shall have the authority to direct all daily maintenance, minor repairs, custodial duties, and operations of a public building under the administration of the Department of Health and Human Services where a juvenile resides who is committed to the Office of Juvenile Services for placement at a youth rehabilitation and treatment center.

Sec. 14. (1) On or before December 1, 2020, the Department of Health and Human Services shall establish the position of superintendent of institutional schools to administer the education programs in state institutions under the supervision of the department that house juveniles and shall hire an individual meeting the qualifications required under section 79-801 to fill such position.

(2) The superintendent of institutional schools shall report directly to the chief executive officer of the Department of Health and Human Services.

(3) The superintendent of institutional schools shall report annually to the State Board of Education as a requirement for accreditation pursuant to section 79-703 of the education programs in state institutions under the supervision of the Department of Health and Human Services that house juveniles.

(4) Whenever a vacancy arises in the position of superintendent of institutional schools, the Department of Health and Human Services shall expediently hire another individual meeting the qualifications required under section 79-801 to fill such position.

Sec. 15. Section 79-703, Revised Statutes Cumulative Supplement, 2018, is amended to read:

79-703 (1) To ensure both equality of opportunity and quality of programs offered, all public schools in the state shall be required to meet quality and performance-based approval or accreditation standards as prescribed by the State Board of Education. The board shall establish a core curriculum standard, which shall include multicultural education and vocational education courses, for all public schools in the state. Accreditation and approval standards shall be designed to assure effective schooling and quality of instructional programs regardless of school size, wealth, or geographic location. Accreditation standards for school districts that are members of a learning community shall include participation in the community achievement plan for the learning community as approved by the board. Accreditation standards for education programs in state institutions under the supervision of the Department of Health and Human Services that house juveniles shall include an annual report to the State Board of Education by the superintendent of institutional schools. The board shall recognize and encourage the maximum use of cooperative programs and may provide for approval or accreditation of programs on a cooperative basis, including the sharing of administrative and instructional staff, between school districts for the purpose of meeting the approval and accreditation requirements established pursuant to this section and section 79-318.

(2) The Commissioner of Education shall appoint an accreditation committee which shall be representative of the educational institutions and agencies of the state and shall include as a member the director of admissions of the University of Nebraska.

(3) The accreditation committee shall be responsible for: (a) Recommending appropriate standards and policies with respect to the accreditation and classification of schools; and (b) making recommendations annually to the commissioner relative to the accreditation and classification of individual schools. No school shall be considered for accreditation status which has not first fulfilled all requirements for an approved school.

(4) ~~All By school year 1993-94 all~~ public schools in the state, including, but not limited to, schools operated by school districts and education programs in state institutions under the supervision of the Department of Health and Human Services that house juveniles, shall be accredited.

(5) It is the intent of the Legislature that all public school students shall have access to all educational services required of accredited schools. Such services may be provided through cooperative programs or alternative

methods of delivery.

Sec. 16. Section 83-107.01, Revised Statutes Cumulative Supplement, 2018, is amended to read:

83-107.01 (1) The official names of the state institutions under the supervision of the Department of Health and Human Services shall be as follows: (a) (1) Beatrice State Developmental Center, (b) (2) Lincoln Regional Center, (c) (3) Norfolk Regional Center, (d) (4) Hastings Regional Center, (e) (5) Youth Rehabilitation and Treatment Center-Kearney, and (f) (6) Youth Rehabilitation and Treatment Center-Geneva.

(2)(a) This subsection applies beginning July 1, 2021.

(b) Except as provided in subdivision (2)(e) of this section, so long as the department operates the Youth Rehabilitation and Treatment Center-Kearney, such institution shall be used for the treatment of boys only.

(c) Except as provided in subdivision (2)(e) of this section, so long as the department operates the Youth Rehabilitation and Treatment Center-Geneva, such institution shall be used for the treatment of girls only.

(d) For any other facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law, the department shall ensure safe and appropriate gender separation.

(e) In the event of an emergency, the department may use either the Youth Rehabilitation and Treatment Center-Kearney or the Youth Rehabilitation and Treatment Center-Geneva for the treatment of juveniles of both genders for up to seven days. During any such use the department shall ensure safe and appropriate gender separation.

(f) For purposes of this section, emergency means a public health emergency or a situation including fire, flood, tornado, natural disaster, or damage to the institution that renders an institution uninhabitable. Emergency does not include inadequate staffing.

Sec. 17. Section 83-108, Revised Statutes Cumulative Supplement, 2018, is amended to read:

83-108 The Department of Health and Human Services shall have oversight and general control of the Beatrice State Developmental Center, the hospitals for the mentally ill, such skilled nursing care and intermediate care facilities as may be established by the department, any facility operated and utilized as a youth rehabilitation and treatment center in compliance with state law facilities and programs operated by the Office of Juvenile Services, and all charitable institutions.

Sec. 18. Section 83-108.04, Reissue Revised Statutes of Nebraska, is amended to read:

83-108.04 (1) ~~In addition to the institutions established by law, the Department of Health and Human Services may maintain or use the following facilities for the care of children in its legal custody who have been adjudged to be as described in subdivision (1), (2), (3)(b), or (4) of section 43-247: (a) Receiving homes to be used for the temporary care of children; (b) foster homes; (c) residential child-caring agencies as defined in section 71-1926; and (d) other facilities and services, including forestry or conservation camps for the training and treatment of children.~~

(2) ~~The Department of Health and Human Services also may use other public facilities or contract for the use of private facilities for the care and treatment of children in its legal custody. Placement of children in private or public facilities not under its jurisdiction shall not terminate the legal custody of the department. No state funds may be paid for care of a child in the home of a parent.~~

Sec. 19. Section 83-113, Reissue Revised Statutes of Nebraska, is amended to read:

83-113 The Department of Health and Human Services may examine any of the officers, attendants, guards, and other employees and make such inquiries as will determine their fitness for their respective duties and shall investigate and report to the Governor any abuses or wrongs alleged to exist in the institution. The department shall also electronically submit any such report to the Health and Human Services Committee of the Legislature.

Sec. 20. Original sections 43-401, 43-403, 43-404, 43-405, 43-406, 43-407, 43-408, 43-410, 43-417, 43-420, 43-425, 83-108.04, and 83-113, Reissue Revised Statutes of Nebraska, and sections 79-703, 83-107.01, and 83-108, Revised Statutes Cumulative Supplement, 2018, are repealed.

Sec. 21. The following sections are outright repealed: Sections 43-414, 43-415, 43-416, 43-418, 43-419, 43-421, 43-422, 43-423, 43-4002, and 83-101, Reissue Revised Statutes of Nebraska.

APPENDIX 17
DHHS QUARTERLY
ROOM CONFINEMENT
REPORT
OCT. 15, 2020

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

October 15, 2020

Patrick O'Donnell, Clerk of the Legislature
State Capitol, Room 2018
P.O. Box 94604
Lincoln, NE 68509

Dear Mr. O'Donnell,

Nebraska Statute 83-4,134.01 requires Nebraska's juvenile facilities to report quarterly to the Legislature within two weeks after the end of each quarter, information regarding the use of room confinement in Nebraska's juvenile facilities.

Attached, please find a letter certifying that the Whitehall Psychiatric Residential Treatment Facility and the Hastings Juvenile Chemical Dependency Program did not utilize room confinement for the first quarter of fiscal year 2020/2021.

The Youth Rehabilitation and Treatment Center-Geneva (YRTC-G), has also re-opened as a re-entry program for female youth. Youth were admitted to this facility on February 18, 2020. The YRTC-G has not utilized room confinement for any youth during the first quarter of fiscal year 2020/2021. A letter is attached certifying that no confinement was used during this timeframe.

Also attached is the room confinement usage data for both the Youth Rehabilitation and Treatment Center at Kearney and the DHHS Office of Juvenile Services (DHHS OJS) Lincoln facility for the first quarter of fiscal year 2020/2021. DHHS, through the restructuring of the YRTC system, has now established the DHHS OJS Lincoln Facility. Youth were admitted to this facility on February 18, 2020.

The Youth Rehabilitation and Treatment Center system continues to use room confinement as a behavioral management tool for the high risk youth in our care. Efforts are continually being made to ensure that youth are only in confinement for the shortest amount of time possible to ensure their safety and the safety of the other youth and staff around them.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark LaBouchardiere".

Mark LaBouchardiere
Office of Juvenile Services Administrator
Department of Health and Human Services

Attachment

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

October 15, 2020

Patrick O'Donnell, Clerk of the Legislature
State Capitol, Room 2018
P.O. Box 94604
Lincoln, NE 68509

Mr. O'Donnell,

Nebraska Statute 83-4,134.01 requires Nebraska's juvenile facilities to report quarterly to the Legislature and the Office of the Inspector General within two weeks after the end of each quarter, information regarding the use of room confinement in Nebraska's juvenile facilities.

The Youth Rehabilitation and Treatment Center (YRTC) - Geneva has re-opened as a re-entry program for female youth who will be returning to the community and have met their treatment goals at the main YRTC-Kearney campus. The YRTC-Geneva has not utilized room confinement during the first quarter of fiscal year 2020/2021, encompassing the time frame from July 1, 2020 to September 30, 2020.

Sincerely,

A handwritten signature in blue ink, appearing to read "Mark LaBouchardiere".

Mark LaBouchardiere
Office of Juvenile Services Administrator
Department of Health and Human Services



October 15, 2020

Patrick O'Donnell, Clerk of the Legislature
State Capitol, Room 2018
P.O. Box 94604
Lincoln, NE 68509

Mr. O'Donnell,

Nebraska Statute 83-4,134.01 requires Nebraska's juvenile facilities to report quarterly to the Legislature and the Office of the Inspector General within two weeks after the end of each quarter, information regarding the use of room confinement in Nebraska's juvenile facilities.

As you are aware, the Hastings Juvenile Chemical Dependency Program and the Whitehall Psychiatric Residential Treatment Facility do not use room confinement for any juvenile in our care.

Respectfully, the Hastings Juvenile Chemical Dependency Program submits the following information for usage of room confinement for the first quarter of fiscal year 2020/2021.

- July 1, 2020 to September 30, 2020: No room confinement was used.

The Whitehall Psychiatric Residential Treatment Facility submits the following information for usage of room confinement for the first quarter of fiscal year 2020/2021.

- A July 1, 2020 to September 30, 2020: No room confinement was used.

While the child care license in which the Hastings Juvenile Chemical Dependency Program and the Whitehall Psychiatric Treatment Facility is authorized to provide services allows for the use of room confinement, both facilities have elected to not use this as an option for behavioral management for our youth and as such does not allow this practice in our policies or procedures. The facility staff have elected and will continue to use behavioral management techniques with youth that aid in their de-escalation without the use of room confinement but still provide the safest environment for our youth and staff.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark LaBouchardiere".

Mark LaBouchardiere
Office of Juvenile Services Administrator
Department of Health and Human Services

APPENDIX 18
YRTC-GENEVA
CAPACITY/ORGANIZATIONAL
CHART

YRTC-Geneva

Capacity of Facility- 18

Organizational chart- see attached

Youth admitted to the facility:

FY 19/20 (Only when Geneva was open) – 4 Youth

February 18, 2020 – September 9, 2020 – 3 Youth

APPENDIX 19

HASTINGS REGIONAL CENTER CAPACITY/ORGANIZATIONAL CHART

Hastings- CD

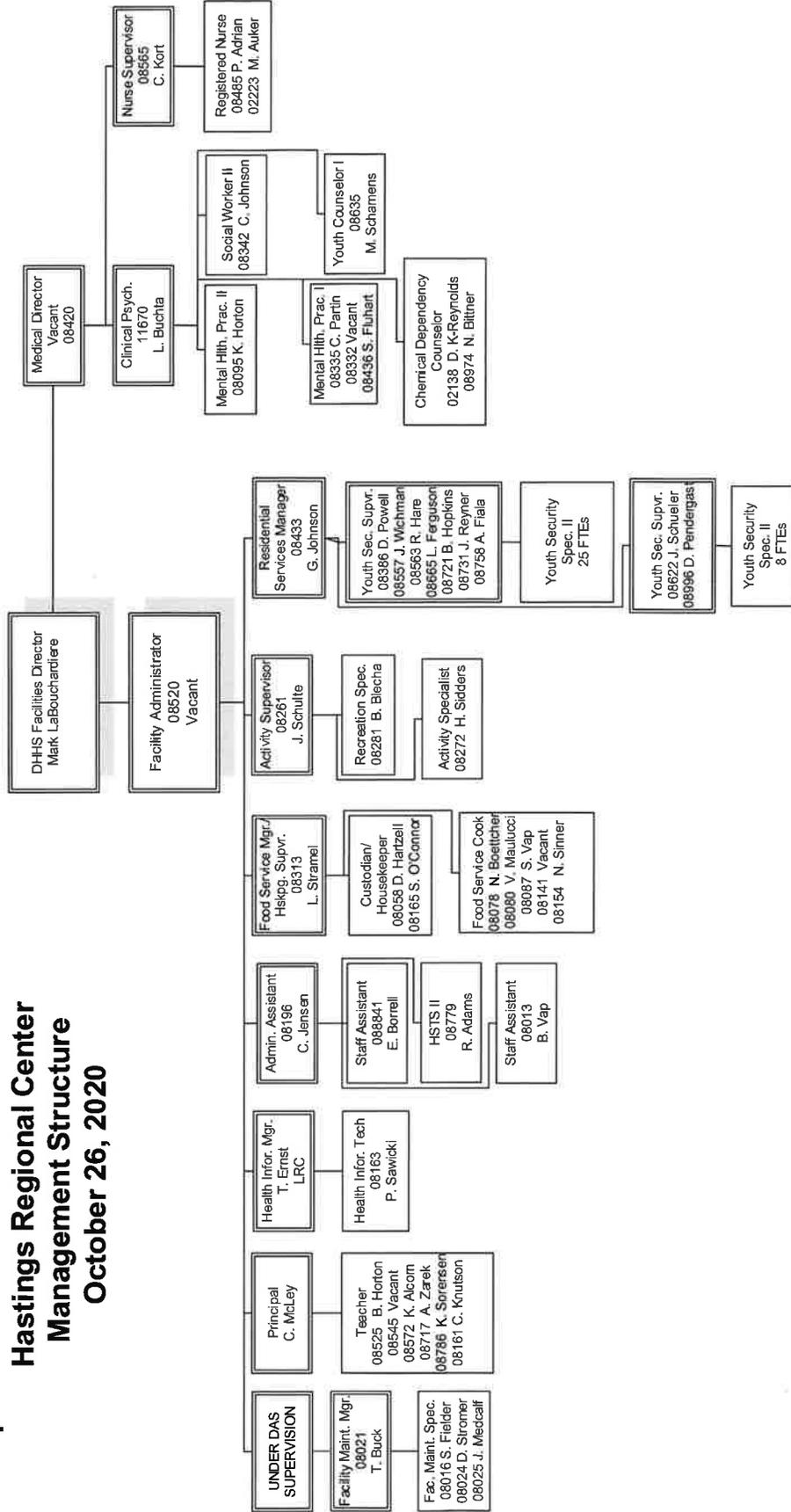
Capacity of Facility- 24

Organizational chart- see attached

Youth admitted to the facility:

2019/2020 – 56

Department of Health & Human Services Hastings Regional Center Management Structure October 26, 2020



APPENDIX 20

SLIP LAWS

LB198 (2013)

LB660 (2015)

LB330 (2017)

LB 198

LB 198

1 and Treatment Center-Kearney to provide physical and visual
 2 separation between the secure care housing unit and the orientation
 3 housing unit.

4 Sec. 11. AGENCY NO. 25 - DEPARTMENT OF HEALTH AND HUMAN
 5 SERVICES

6 Program No. 919 - Hastings Regional Center Building No. 3
 7 Renovation

	FY2013-14	FY2014-15	FUTURE
8 GENERAL FUND	-0-	3,321,000	1,986,000
10 NEBRASKA CAPITAL	2,211,000	789,000	-0-
11 CONSTRUCTION FUND			
12 PROGRAM TOTAL	2,211,000	4,110,000	1,986,000

13 The Department of Health and Human Services is hereby
 14 authorized to renovate Building No. 3 at the Hastings Regional Center
 15 to house the chemical dependency program serving adolescent males in
 16 state custody.

17 There is included in the appropriations to this program
 18 an estimated \$3,097,000 to demolish buildings at the Hastings
 19 Regional Center determined by the Vacant Building and Excess Land
 20 Committee to be vacant as defined in section 72-811.

21 Sec. 12. AGENCY NO. 27 - DEPARTMENT OF ROADS

22 Program No. 901 - Facility Improvements

	FY2013-14	FY2014-15	FUTURE
23 CASH FUND	5,000,000	5,000,000	-0-

1 Sec. 8. AGENCY NO. 17 – DEPARTMENT OF AERONAUTICS

2 Program No. 917 - Capital Construction Projects

	FY2015-16	FY2016-17	FUTURE
4 CASH FUND	30,000	-0-	-0-
5 PROGRAM TOTAL	30,000	-0-	-0-

6 The Department of Aeronautics is hereby authorized to demolish the
7 current Scribner State Airfield manager's residence.

8 Sec. 9. AGENCY NO. 25 – DEPARTMENT OF HEALTH AND HUMAN SERVICES

9 Program No. 919 - Hastings Regional Center Building No. 3 Renovation

	FY2015-16	FY2016-17	FUTURE
11 GENERAL FUND	4,883,000	-0-	-0-
12 NEBRASKA CAPITAL			
13 CONSTRUCTION FUND	-0-	-0-	-0-
14 PROGRAM TOTAL	4,883,000	-0-	-0-

15 The Department of Health and Human Services is hereby authorized to
16 renovate Building No. 3 at the Hastings Regional Center to house the
17 chemical dependency program serving adolescent males in state custody.

18 There is included in the appropriations to this program an estimated
19 \$2,897,000 to demolish buildings at the Hastings Regional Center
20 determined by the Vacant Building and Excess Land Committee to be vacant
21 as defined in section 72-811 contingent on the actions pursuant to the
22 program statement provided for in subsection (2) of section 83-305.05.

23 Sec. 10. AGENCY NO. 25 – DEPARTMENT OF HEALTH AND HUMAN SERVICES

24 Program No. 923 - Assisted Living to Skilled Nursing Conversion

	FY2015-16	FY2016-17	FUTURE
26 GENERAL FUND	1,361,800	-0-	-0-
27 PROGRAM TOTAL	1,361,800	-0-	-0-

28 The Department of Health and Human Services is hereby authorized to
29 convert Assisted Living licensed rooms to Skilled Nursing rooms at the
30 Western Nebraska Veterans' Home.

31 Sec. 11. AGENCY NO. 27 – DEPARTMENT OF ROADS

1 Sec. 8. AGENCY NO. 25 – DEPARTMENT OF HEALTH AND HUMAN SERVICES

2 Program No. 919 - Chemical Dependency Program

3 The unexpended General Fund and Nebraska Capital Construction Fund
4 appropriation balances existing on June 30, 2017, are hereby
5 reappropriated.

6 The Department of Health and Human Services is hereby authorized to
7 repurpose reappropriated funds originally appropriated to this program
8 for the renovation of Building 3 at the Hastings Regional Center. Such
9 reappropriated funds shall be used to construct a facility at the
10 Hastings Regional Center to house the chemical dependency program for
11 males in state custody.

12 There is included in the reappropriated fund balances in this
13 program an estimated \$2,897,000 to demolish buildings at the Hastings
14 Regional Center determined by the Vacant Building and Excess Land
15 Committee to be vacant as defined in section 72-811.

16 Sec. 9. AGENCY NO. 27 – DEPARTMENT OF ROADS

17 Program No. 901 - Facility Improvements

	FY2017-18	FY2018-19	FUTURE
18			
19 CASH FUND	5,000,000	-0-	-0-
20 PROGRAM TOTAL	5,000,000	-0-	-0-

21 The Department of Roads is hereby authorized to prepare program
22 statements on and design and build the following projects:

- 23 New maintenance facility – Aurora
- 24 Office/shop/equipment storage building – Sidney
- 25 Facility improvements, small projects – Statewide

26 Sec. 10. AGENCY NO. 31 – MILITARY DEPARTMENT

27 Program No. 925 - Federal Construction Projects

	FY2017-18	FY2018-19	FUTURE
28			
29 FEDERAL FUND est.	595,000	2,015,000	-0-
30 PROGRAM TOTAL	595,000	2,015,000	-0-

31 The Military Department is hereby authorized to engage in various

APPENDIX 21
YRTC-LINCOLN
CAPACITY/ORGANIZATIONAL
CHART

YRTC-Lincoln

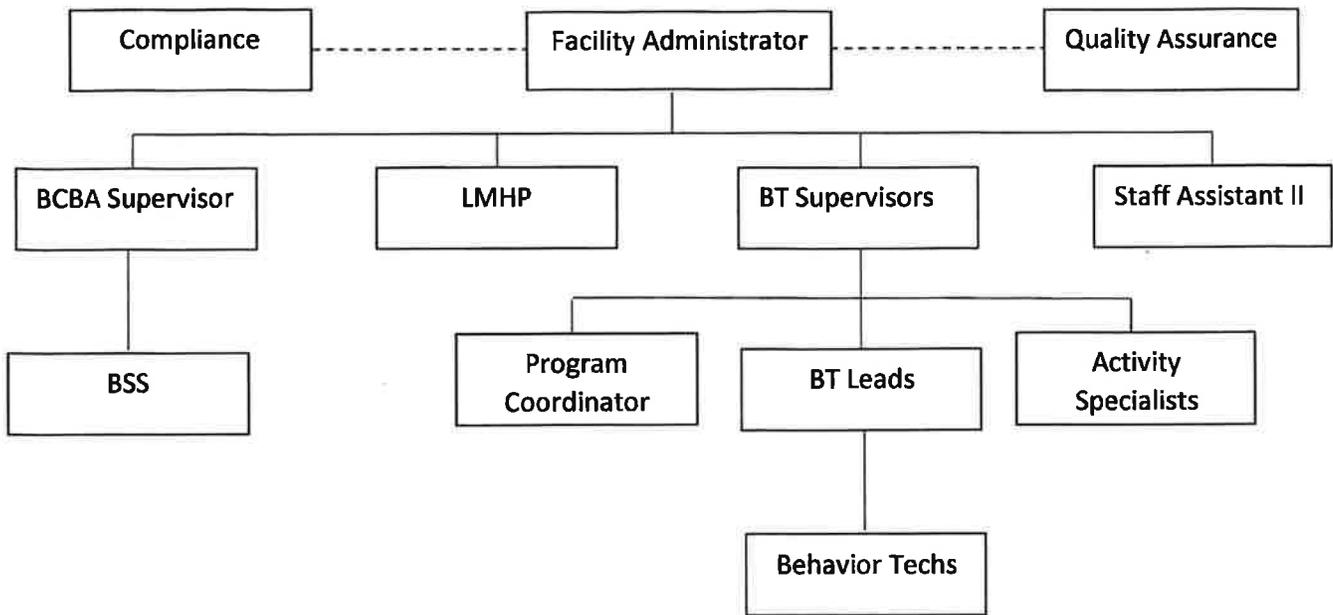
Capacity of Facility- 20

Organizational chart- see attached

Youth admitted to the facility:

Since (opening date of facility) Feb. 2020- 15

Lincoln Facility - YRTC



APPENDIX 22

WHITEHALL PRTF
CAPACITY/ORGANIZATIONAL
CHART

Whitehall- SD

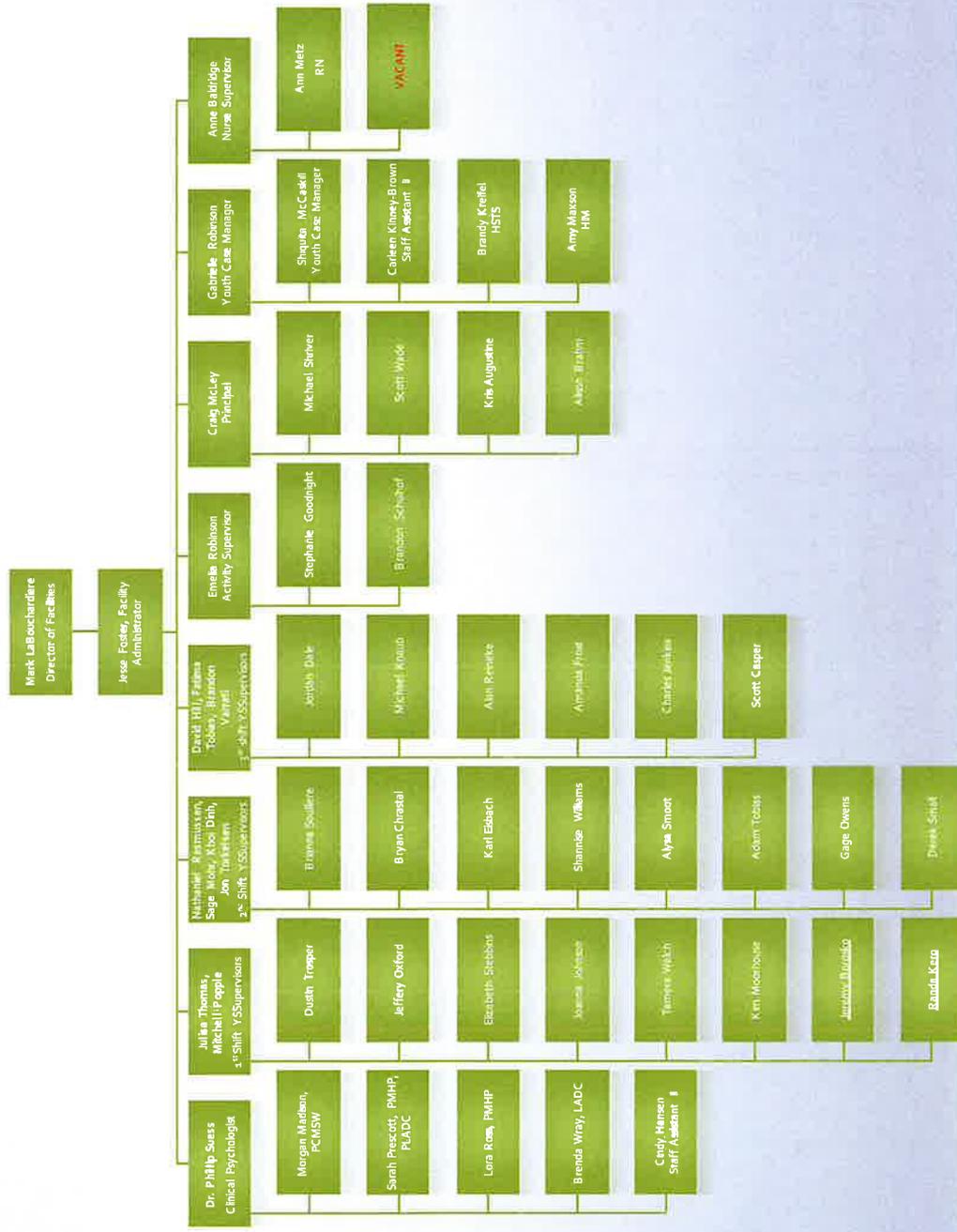
Capacity of Facility- 24

Organizational chart- see attached

Youth admitted to the facility:

2019/2020 – 23

Organization Chart Whitehall



APPENDIX 23

IG JENNIFER CARTER

EMAIL

RE: WHITEHALL CAMPUS

SEPT. 17, 2020

Notes from Inspector General Visit to Whitehall

Prepared by Jennifer Carter

9.15.20

I arrived at 8:30 and Dr. Jesse Foster took me on a tour of the campus. Dr. Foster was very informative and helpful.

General Impressions of the Campus

The grounds of the Whitehall campus are nice and well kept. There is a good deal of green space. The cottages are clean. However, they are over 50 years old and run down.

General Campus Set Up

See Map

There are four identical cottages at Whitehall. Each can sleep up to 8 youth, although only two are used for living spaces at the moment and the other two cottages are used for programming and administration. The cottages are:

- The Warner House cottage which is used as living quarters for the SO program.
- The Community Life cottage which was being used as living quarters for the SO program for the highest level youth (those who have completed the program and are ready to transition out) and the intake youth who have just arrived at the facility. As noted below, this will be used by the Juvenile Chemical Dependency Program.
- The Family Life building which holds some programming space and a library that the SO program uses.
- The Knight House cottage which is used as the Administration building. The therapists and social workers office here and see youth for treatment. This is also where the youth eat lunch and dinner.

There is a fifth building, the Morton School, used for Education. Whitehall also has use of a gym in the Department of Corrections Training Center Building.

Living Spaces

- In the cottages there is a kitchen where the youth prepare their breakfast of cereal, hot cereal, toast, etc.
- The kitchen looks out onto a room with a long table where they eat.
- There is a common room/recreation area with couches and a tv.
- The bedrooms are large if sparse. There is a mattress on a wooden platform, a wooden desk with a chair, a closet, and a waste basket that must be touching two walls at all times.
- Youth are allowed to wear their own clothes but are limited in the number of items. There are regular searches of the rooms.
- You need a key to get into each room. But it opens from the inside so youth can leave the room freely. There is a chime when a door opens.

Plan for the Buildings if Juvenile Chemical Dependency Program is moved to Whitehall (Assumes a census of no more than 8 youth in each program)

The following is the plan for use of the buildings, if the Juvenile Chemical Dependency Program (JC DP or SA youth) is moved to the Whitehall campus:

- The SO program youth will live in the Warner House. Previously, the SO youth were split between two cottages, partly for programming purposes as noted above, and partly because there was always a census over 8. Under the new plan, all levels of SO youth will be in one building. At this time there are only 8 youth in the program.
- The Juvenile Chemical Dependency Program youth or Substance Abuse Treatment (SA) youth will be living in the Community Life cottage right next to the SO cottage. This can also fit up to 8 youth.
 - This cottage was chosen specifically because it is not adjacent to the street (the Warner House is between it and Leighton Ave). According to Dr. Foster, Hastings staff explained that sometimes persons will drive by and try to throw packages of cigarettes or drugs to youth in the SA program, so it is helpful if the building is not too accessible to the street.
 - Dr. Foster mentioned that they also believed it would help with youth who try to run from the program since the access to the street is not as direct. However, the Community Life cottage is just one building in from the street and is right next to an internal drive on the campus.
- The Family Life cottage currently houses the library for the SO youth. That space will be used for programming for the SA program.
 - I would need to follow up with Dr. Foster regarding the library and if the SO youth would still be able to use that space when the SA programming is not using it.
- The Knight Building will remain an Administration Building.

Meals

- Youth eat their meals in the Administration Building (Knight House). There is a kitchen there from which to serve the meals, but the meals are prepared at the Lincoln Regional Center and brought over at lunch and dinner.
- There are two rooms in the Knight House that each have a table that can accommodate about 8 to 12 people. The meals are served in the main room through a window from the kitchen.
- To maintain separation between the SO and SA youth, the plan is to have the SO youth enter the building at noon, get their trays, go through the food line, and go into a room adjacent to the main dining room/kitchen area. An accordion door will be closed between the SO dining room and the main dining room/kitchen area.
- At 12:10, the SA youth will enter the building, get their trays, go through the line, and sit at the table in that main dining room/kitchen area.
- At 12:40, the SA youth will go back to the Morton School.
- At 12:50 the SO youth will exit the building. Many will go back to their cottage for afternoon meds. Then they will return to the school.

Education

- The SO and SA youth will go to school in the same building, the Morton School.
- The school day is a full day, from 8:00-2:45. Treatment programming for the youth begins about 3:15.
- The SO and SA programs will use different doors to enter the school.
- The SA youth will have a slightly smaller area. I was not able to see the main room (there was a youth needing that space when I was there). Dr. Foster explained there would be room for six computers in that main room and then two other computers would be placed in the vestibule/first room you enter of the building. There will be 2 teachers for the 8 youth.
- There is a metal door that will be closed and locked between the SA school space and the SO school space.
- On the other side of that door is a long hallway that leads to the larger room with computers that is used by the SO youth currently.
- Dr. Foster explained that the SO youth would remain in the larger space because they are usually in treatment for nine months while the SA youth are usually only in the program for up to 90 days.
- If either program's census increased above 8, the school may need to be moved. Dr. Foster stated that there was another building that could be used. (I believe this might be the building currently used for training.) The offices in that space would be moved and approximately 16 youth could be served on either side of that building.

Ability to Flex Up for an Increase in Census

Historical Census

- According to OJS data, in 2019, the census at the SO program at Whitehall was usually between 11-16 youth and even as it reduced in late 2019, it was never lower than 10. The numbers have gone down to 8 since the pandemic. This was confirmed by Dr. Foster who noted the Whitehall program generally had a census between 14-16 youth.
- In 2019 the JCDP or SA program had between 11 and 19 youth. The number has been lower since the pandemic.

The Plan to Flex Up

- Each of the four cottages - including those now used for programming and administration - are identical and each have 8 rooms that can be used as bedrooms.
- According to Dr. Foster they have the beds and linens.
- If they needed to add youth in either program, the first building they would repurpose is the Family Life building which currently houses the library and is meant to be used for the SA programming.
 - I need to follow up to ask where the programming would take place if the Family Life building becomes living quarters.
 - I also need to confirm if the 8 bedrooms in this space are currently unused and open.

- The fourth cottage that could be used is the Knight House which is fully occupied by Administration so the administrative offices would have to move. As I understood it, the administrative offices would be spread out among the other buildings.
- As noted, if the census increased, the school would also need to be relocated and additional computers purchased.
- The nursing staff may also need to be consolidated into one office in one building to serve both programs.

Staffing

- Dr. Foster stated that since the plan was announced Whitehall has hired 6 new supervisors for a total of 9 supervisors on campus.
- There were three direct care staff positions that were opened after being subject to a hiring freeze.
- I am following up to see if the new employees have training in SA or SO or any specialized training for these specialized programs.

Observations and Questions

- While Dr. Foster and the staff seem prepared to have the JCDP at the Whitehall campus, it is clear that moving that program to Whitehall will require a good deal of work arounds.
- Spaces that are currently being used by the SO program will be turned over to the SA program.
- There will have to be careful coordination between the programs as they move around the campus.
- The biggest concern is the workarounds that will be necessary if and when the census for the programs grow even slightly or reach their pre-pandemic levels.
- The cottages that could be used for housing should the census increase are already being used, at least partially, for other purposes.
 - If Whitehall has to flex up it is not clear where the SO or SA programming will take place.
 - If both programs reached their pre-pandemic levels, the administrative offices, including the therapists and social workers, could be spread throughout the campus.
 - The training building will have to be taken over for education.
- There is a lot that would have to be done to even find and rework the space if both programs reached pre-pandemic levels.

APPENDIX 24
**MISSOURI YOUTH
SERVICES INSTITUTE
INFORMATIONAL PAMPHLET
OCT. 23, 2020**



MISSOURI
YOUTH
SERVICES
INSTITUTE



Photo courtesy of "Like Any Other Kid".

THE MISSOURI YOUTH SERVICES INSTITUTE (MYSI)
APPROACH FOR
POSITIVE JUVENILE
JUSTICE SYSTEM OUTCOMES

The Missouri Youth Services Institute (MYSI) Approach for Positive Juvenile Justice System Outcomes

THE MYSI APPROACH

The Missouri Youth Services Institute (MYSI) employs a therapeutic group treatment approach, which utilizes components of positive youth development and cognitive behavioral therapy to help youth make positive and long-lasting changes. These therapeutic components are delivered to youth in a fully integrated treatment team approach where social-emotional competencies are learned and practiced.

The therapeutic process utilized by MYSI addresses two issues directly related to youth in juvenile justice systems. First is the cognitive therapies that are needed to address the adolescent's faulty beliefs and thinking errors which lead to impulsive and harmful choices. By examining their beliefs in a safe and supportive environment young people learn how their behavior impacts others. Through problem solving skills and reflective thinking, they learn to make healthier choices and relationship decisions.

The second issue relates to the cycle of abuse and trauma commonly referred to the “trauma outcome process”. Once again in a safe and supportive environment as the staff and group discuss these issues they often find common ground and understanding of how they and others were impacted by these experiences. The focus is on the strengths developed to survive and recognize triggers, contain reactions and resolve their traumatic experiences to the best of their ability. This process becomes empowering by developing coping skills and an improvement in their ability to trust and form healthier relationships.

The MYSI approach is based on the award-winning Missouri Approach where youth stay together in small groups with the same staff and are treated in a humane and nurturing environment. The MYSI Approach establishes an organizational structure with clear lines of authority that empower and enhance accountability throughout the organization—from the director to the direct care staff—for effective implementation of the program. The therapeutic group approach is designed to keep youth safe and secure during their rehabilitative process and to reduce the number of youth that recidivate.

Cover Photo:

Mark D. Steward, Founder and Director of Missouri Youth Services Institute, speaks with a resident at a youth facility

MYSI Beliefs and PHILOSOPHY



A "line of body" depicting a youth's injuries, wounds and trauma

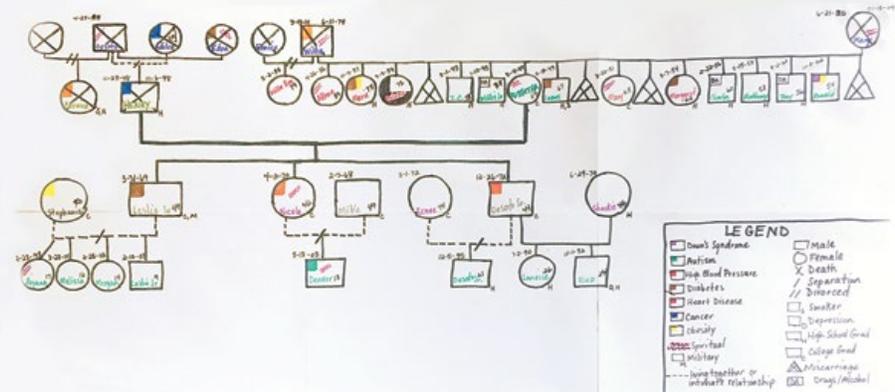
- 1. The most effective way for treatment to occur is through the group process.** The positive peer group process allows youth to critically examine their past, present and future while they are in a safe, caring environment, with competency-based learning, led by well-trained staff.
- 2. Each person is special and unique. Treatment needs to be individualized.** Youth spend time evaluating their respective qualities. Activities are structured in order to enhance this evaluation both by self and the group members. As a result, youth see their own value as well as the value of others.
- 3. Safety and structure are the foundations for development.** Youth need to know that staff cares enough about them to expect them to succeed. Staff reinforce this belief through high and positive expectations for youth and the willingness to provide safety and enforce structure.
- 4. It is difficult to change.** People tend to be naturally resistant to change and may even resist when the alternatives seem more positive and healthy. Youth must be guided to try new behaviors, succeed, and possibly fail before actual change occurs. Significant practice and support must occur before integration of new behaviors can be accomplished.
- 5. All people desire to do well and succeed.** Even the most resistant youth hunger for approval and acceptance. In particular, the youth in many juvenile programs have spent a number of years camouflaging this desire. Programs and services are structured in a manner that taps into this universal need.
- 6. All people have needs.** Everyone has fears, insecurities and basic needs including safety, attention and belonging. People need others to help meet these needs. Programs and services are expected to meet these needs and assist youth in learning to meet these needs on their own. Therapeutic groups are designed to illustrate the need for others by providing opportunities for youth to help others and to be helped by them.
- 7. Emotions are not to be judged.** Feelings are not right or wrong. Often, youth coming into a program have poor communication skills and are unable to distinguish between their thoughts and emotions. They often feel very little control over their behavior, and view feelings as controlling factors in their lives. Programs and services teach youth that emotions are a very important part of them but not the controlling agent.

The following beliefs serve as a basis for treatment programming within the MYSI Approach:

The MYSI approach is based on the belief that in order for youth to truly achieve long-lasting change and avoid re-offending, they must go through a process of self-exploration and a change process that addresses their history and family dynamics, and how those elements have influenced their present situation.

8. People are a combination of their past and present.

Youth have learned through a wide variety of experiences before they enter the agency. Often, their perceived negative behavior could have been a very natural response to their particular situation or family system. Additionally, a youth's reactions to a given situation are frequently based on perceptions from a much earlier stage of life and their experience at that time. Investigation of these perceptions may facilitate the change process.



A "genogram" depicting the history of an individual's biological and familial history

9. **All behavior has a purpose.** Even the most delinquent behavior is goal directed. It is either a conscious or unconscious (aware or unaware) attempt to get needs met. Our treatment approach is designed to help youth meet those needs by helping them investigate and understand their behavior and its effects, and to explore healthier alternatives.

10. **People need a sense of self-worth.** Improved self-esteem is an important aspect of the therapeutic process for youth. To maximize the opportunity for youth to be successful in our programs, as well as on the streets, we must take every opportunity to enhance the youth's self-esteem.

11. **Effective juvenile justice must be a balanced approach.** Effective juvenile justice systems should balance public safety, prevention and treatment. Treatment should be a seamless continuum of care from time of commitment to discharge in which youths' needs are met in a safe, structured environment with well-trained, caring staff who help them identify and address their issues.

12. **Human dignity is a basic value.** Human dignity goes beyond the basics of honor or respect to the essence of being human. It is reacting to the human dimension of every person. Human dignity is accorded to a person in as much as he or she is a person.

DIGNIFIED & UNDIGNIFIED BEHAVIOR	
DIGNITY	LACK OF DIGNITY
Trust	Humiliation
Listening	Scorn
Dialogue	Condescension
Empathy	Ignoring
A good word	Shouting
Consideration	Undermining other's confidence
Offering assistance	Blaming
Decency	Moralizing

FUNDAMENTALS

of the MYSI Approach

1. **Small, Non-Institutional Facilities Close to Home**

- Groups of 10-12 youth stay together with the same staff team at the same facility throughout the treatment process.
- The system may be divided by regions, with small, residential programs and different levels of care.
- The regions should try to ensure youth are no more than two hours from home.
- Facilities are designed to resemble home with comfortable “dayrooms,” shared, open sleeping dorms and walls adorned with artwork, motivational slogans and other appropriate items.



A Missouri style dormitory, which provides a homelike environment for supporting a therapeutic group process

2. **Integrated Treatment: Treating the Whole Person**

- Youth participate in a highly structured daily schedule focused on building healthy peer-to-peer and adult-to-youth relationships.
- Youth explore and develop self-awareness, insight, skills and leadership as they work on resolving core issues and attaining behavioral change.
- Predictable daily group meetings such as group circles and treatment activities keep youth involved in the group process.
- Youth are provided with educational and recreational opportunities, and encouraged to develop leadership skills.
- The program supports regular engagement with family and the community.

3. **Individual Care Within a Group Treatment Model**

- Small groups of 10-12 youth stay together at all times throughout the program (sleeping, eating, school, group meetings, chores, etc.)
- Groups check in regularly and meet daily for formal group treatment.
- Each youth has an individualized treatment team (group leader, service coordinator, one-on-one staff, teachers, etc.) that meets weekly to assess each youth's progress through stages of development and readiness for release.

4. **Safety through Supervision, Structure and Relationships**

- Staff members are educated, culturally diverse and committed to helping youth make positive and lasting changes.
- Constant, active supervision of youth by staff (24/7 “eyes-on, ears-on supervision”) provides a secure, safe environment.
- The highly structured program schedule, including group meetings, school and activities, fosters responsibility and keeps youth engaged in the process.
- Appropriate, caring relationships between staff and youth encourage interpersonal accountability.

The principles on which the MYSI approach are founded address the whole person as a strategy for long term success - rather than punitive measures alone, which only offer short term results if any at all.

5. Integrated Treatment and Education

- Education is highly valued and supported within the treatment plan.
- Youth attend most of their general education classes together with their respective groups on a daily basis, with exceptions for special education and GED, college and vocational education courses, which youth may attend individually or with other groups.
- Youth specialists or on-line staff for each group provide support to teachers in the classroom and monitor the individual needs and progress of youth.
- Teachers and other classroom staff are members of each youth's individual treatment team.



In the MYSI approach, the education experience is a crucial part of the overall treatment plan

6. Families and Communities as Partners in Treatment

- Families are engaged in treatment as soon as a youth enters into a program.
- The program provides time for regular family visiting hours and communication each week.
- Family therapy is provided to help families and youth work through issues.
- Families are considered integral partners in planning for the youth's release and transition home.

7. Support from Transition through Aftercare

- One case manager (service coordinator) is assigned to each youth at intake and monitors the youth's progress from entry to transition home.
- An individualized service plan (ISP) guides the youth's progress during placement.
- Transitional planning begins at entry, intensifies prior to release and continues through aftercare.
- The period of aftercare depends on each youth's individual plan and needs.

PROGRAM PRINCIPLES

Move beyond traditional correctional models

Develop new approaches from best practices

Create safe environments

Help youth realize positive and lasting changes

Improve staff effectiveness and enhance skills

Facilitate youth skills and personal growth

Reduce recidivism and critical incidents

Involve families and communities

Utilize evidence-based systems to get results

Implementation COMPONENTS

Implementing the MYSI approach requires a significant commitment throughout a system to helping youth make positive, long-lasting changes. Facilitating small group interactions and processes, and promoting healthy, productive relationships and interactions are at the center of MYSI's group therapeutic approach and must be administered by caring, well-trained staff members. Additionally, facilities must be conducive to facilitating successful treatment programs. The following core components are critical for implementation:

Organizational Structure/Staffing Requirements

- Operationalizing the MYSI approach requires a unit management organizational structure. Unit management is assigning a specific treatment team of staff to work only with one group of youth. This structure enables the staff to consistently work with the same group of youth and develop therapeutic relationships with their respective group.

Group Therapeutic Treatment

- Effective group engagement and facilitation allows staff to create an atmosphere where youth are encouraged and supported to explore the roots of their past and current behaviors, develop and test new behaviors, practice healthy interactions, build relationships, and use the here and now to heal old wounds. Under this approach, it is imperative that staff provides enough structure and boundaries to ensure a safe and trusting group environment to increase the likelihood of success on any given task.



A facilitated group session is a key part of providing rehabilitation

Facility Environment

- MYSI standards recommend a facility size to accommodate four groups with a total of 40-48 youth. This size is ideal, but in many cases, the facility size is significantly increased because of the existing, available facility. The facility should have living units that resemble dorms versus individual cells. Additionally, it should have a more open layout to better facilitate awareness supervision and group interaction. Additional facility standards to facilitate the group treatment process and ensure youth safety are also necessary.



A Missouri style dorm room



A correctional dorm room

The MYSI PROCESS

MYSI initiates the following process in response to a potential client's inquiry regarding assistance. The purpose is to determine the interest, needs and resources of an organization and inform the potential design and implementation of the organizational change process.

Pre-Assessment Phase

Our team meets with organizational leaders to identify *interest, issues, strengths and challenges* and discuss the basics of the MYSI approach.

Site Visit:

We visit the site to evaluate the programs, assess the facilities and conduct interviews with staff and youth.

Leadership Overview:

Our team presents an in-depth overview of the MYSI approach and facilitates discussion regarding implementation implications.

Assessment of System

The MYSI team outlines key components and conducts ongoing assessments initially and throughout the transformation process with the following areas of focus: organizational vision, mission and beliefs, leadership capacity responsiveness, accountability and communication, safety factors, organizational structure, staffing patterns and dynamics, training, treatment program, physical plant, integration of services, data and community engagement.

Implementation Plan

Based on the assessment process, we engage the organization's leadership and designated staff in a strategic planning process to outline the implementation of the new approach.

The process includes addressing critical factors such as

- Identification of a start-up group
- Developing policies to reflect the new approach
- Training leadership and staff
- Coaching at various levels of the organization to help move a system from theory to practice.

The coaching component is an integral part of the change process and incorporates hands-on assistance, on-site observation and modeling to frontline staff, as well as ongoing consultation, feedback and recommendations to various levels of management.



Dr. Pili Robinson, MYSI Director of Consulting Services, has made supporting youth his life's work

History of MYSI and the Missouri Approach

Nearly four decades ago, Missouri made dramatic changes to its juvenile justice system. The state moved from a correctional approach plagued with physical and emotional abuse, violence, suicides and escapes, to a rehabilitative, therapeutic group approach that produced positive outcomes for both the system and youth.

The new program utilized a peer approach guided by trained staff that worked with groups of youth in smaller, regionally based facilities that treated youth closer to home and encouraged family involvement. It emphasized rehabilitation, treatment and education to equip youth with skills and accountability to make internal, long-lasting changes. The drastic reduction in escapes and violence combined with significant improvements in education and recidivism had a dramatic and positive impact on both the system and the outcomes for youth.

During the past four decades, Missouri has utilized this same basic approach with gradual improvements along the way. Its evidence-based results are exceptional, unbiased and nonpartisan. For years, Missouri outcomes show lower recidivism rates, higher educational achievements and safer facilities.

MYSI Director and founder Mark Steward was one of the first counselors for the pilot program in 1970 that helped set Missouri on the course for positive change. He served as Director of the Division of Youth Services for 17 years, where he played an integral role in the development, implementation and improvement of the Missouri juvenile justice system, known nationally as The Missouri Approach. He launched MYSI following his retirement in 2005 to assist jurisdictions across the nation interested in implementing a therapeutic group treatment approach. He and his team of seasoned staff members have decades of experience in youth services—and specifically with the Missouri Approach.



Mark D. Steward, Founder and Director of Missouri Youth Services Institute

“For anyone honestly seeking to transform their juvenile justice system from a correctional model to a positive youth development model, there is no group better than MYSI to help effect that change. MYSI staff truly understood the dynamics of making the kind of huge cultural change in an entrenched system.



They handled their technical assistance/training/coaching role with great skill and sensitivity. We would have come nowhere near as far as we did in our reform efforts without MYSI.”

- Vincent N. Schiraldi

- Senior research fellow, Harvard Kennedy school of government, program in criminal justice policy and management.
- NYC- Commissioner, New York City Department of Probation (2010-2015)
- DC - Director, Department of Youth Rehabilitation Services (2005-2009)

About the MISSOURI YOUTH SERVICES INSTITUTE (MYSI)

MYSI is a nonprofit organization created to assist juvenile justice systems across the country with reform efforts. Our team is uniquely positioned to help jurisdictions move from a traditional correctional model toward a rehabilitative, therapeutic approach with significantly better outcomes.

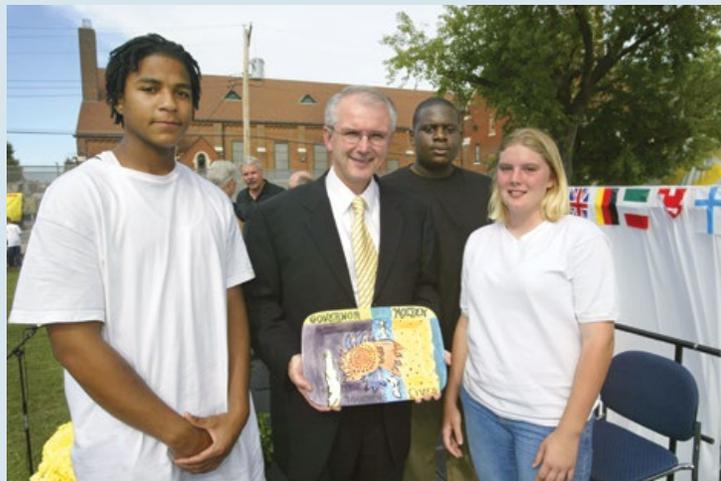
MYSI is the only juvenile justice consulting group in the country that provides in-depth, customized services based on years of experience with the successful Missouri Approach, resulting in comprehensive and systemic changes to juvenile justice systems. Our dynamic team offers unmatched experience, knowledge and dedication to our clients. We work with state, local and private entities to implement juvenile justice programs that produce positive, long-term results



MYSI Team

“Our youth reflect who we are and what our future will become. During my term as Governor I often attended events sponsored by the Missouri Division of Youth Services. One such event was the multi-cultural event in St. Louis, Mo. Another very special event occurred when Lori and I invited 50 young Missourians and their staff to the Governor’s Mansion to celebrate the holiday season. We believed then, as we do now, that our juvenile justice system will shape their future and ours.”

- Bob Holden
Governor of Missouri, 2001-2005



Governor Bob Holden attends a multi-cultural event in St. Louis

Evidence-Based Practice for SUCCESSFUL Outcomes

Performance measures in the Missouri Division of Youth Services (Missouri Approach) clearly indicate the MYSI/Missouri approach works.

Safer Facilities for Youth & Staff:

- ✓ **Youth** are **4 ½ times less likely to be assaulted** in Missouri's system than in other systems
- ✓ **Staff** members are **13 times less likely to be assaulted** than in other systems
- ✓ **Isolation** is used **200 times less** in Missouri than in other systems

(Source: Research by Dick Mendel (2009) comparing Missouri Division of Youth Services with youth correctional programs participating in the Performance Based Standards Process.)

Lower Recidivism Rates:

7% of youth released from Missouri's Division of Youth Services are either recommitted to the juvenile justice system or incarcerated in Missouri's prisons three years after discharge *compared to* rates from **20-70%** in other states.



Higher Educational Achievements:

95% of youth earn high school credits *compared to* **50%** nationally

30% of youth earn a GED or high school diploma *compared to*

87% of youth improved in reading and math *compared to* **72%** nationally



21% nationally

MYSI CLIENTS

MYSI has assisted the following jurisdictions in various capacities:

- Louisiana
- New Mexico
- New York State and New York City
- Washington, DC
- San Francisco, CA
- Santa Clara County, CA
- Cayman Islands
- Virginia

Additionally, through a grant from the Annie E. Casey Foundation, MYSI has facilitated tours to Missouri's Division of Youth Services facilities and provided written materials, publications and guidance to more than 25 states across the nation.



MYSI COMMITMENT

When an organization is committed to meaningful reform of its juvenile justice system, MYSI is here to help—every step of the way. Our team provides comprehensive, customized consulting services to help take our clients through the entire change process from initial interest and assessment to planning and implementation to education and training to staff considerations to ongoing feedback and monitoring.



MYSI trainer, Charles Galbreath, provides training to staff in New York City's Administration for Children's Services.

MYSI consultants work side by side with facility staff to train, coach and model the MYSI approach. They work with facility administrators and mid-management to help establish oversight of the therapeutic group treatment process. Our staff don't just come in and give a training course and leave, but are on the ground daily, weekly and monthly to help implement the MYSI Approach.

Our coaching service incorporates hands-on assistance, on-site observation and modeling to frontline staff, as well as ongoing consultation, feedback and recommendations to various levels of management. Our team members help our clients work through issues one day at a time to help ensure success.

But, our commitment goes deeper by integrating a unique coaching component into the change process.

JUVENILE JUSTICE REFORM: *Making the “Missouri Model” an American Model*

The state of Missouri has created a juvenile justice system that has proved so successful over the last thirty years it's known as the “Missouri Miracle.” A number of practices combine to make Missouri's system unique: It's primarily made up of small facilities, generally designed for between ten and thirty youths, located at sites throughout the state that keep young people close to their own homes. These facilities don't look like jails with traditional cells; there are only eight isolation rooms in the entire state, which are seldom used and only for emergency situations. They feature a highly trained and educated staff working in teams with small groups of youths. Youths are treated with respect and dignity, and instead of more traditional correctional approaches, the system uses a rehabilitative and therapeutic model that works towards teaching the young people to make positive, lasting changes in their behavior. The result has been some of the best outcomes in the nation: fewer than 8% of the youths in the Missouri system return again after their release, and fewer than 8% go on to adult prison. One-third of the youths return to their communities with a high school diploma or GED, and another 50% successfully return to school.

Missouri's results have been so positive that Mark Steward, the visionary former director of the Missouri Division of Youth Services, founded the Missouri Youth Services Institute (MYSI) to help other jurisdictions across the country do what Missouri has done...The Missouri model is already being studied and replicated successfully in other cities and states including Washington, D.C.; San Jose, California; New Mexico; and Louisiana.

One of the most persistent roadblocks to juvenile justice reform across the country is resistance to change. Too many officials cling to the belief that citizens think existing punitive juvenile systems with facilities

and cultures that resemble adult prisons are “where these kids deserve to be.” But when you ask people whether they want young people who have gone through the juvenile justice system to come out better or worse at the end, the answer is clear. They understand that abusive and punitive approaches often lead youths to the adult criminal system. New York State's abusive youth prisons have an 89 percent recidivism rate for boys and cost \$210,000 a youth – a one-year equivalent of 4 years at Harvard – to produce an adult criminal.

Statistics already show Missouri is one of the few states achieving this goal. We need a system that returns young people to the community prepared to succeed and become productive adults to serve as a model for the entire nation. We don't need systems that do further harm and return youths, most of them nonviolent offenders, back to their communities hopeless, angry, and unprepared to succeed in life.

By Marian Wright Edelman

President of the Children's Defense Fund and its Action Council



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MISSOURI
YOUTH
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APPENDIX 25

“DATA TELLS HOW VIRGINIA’S
YOUTH JUSTICE SYSTEM IS HEADED
TOWARD A BETTER FUTURE”

CAROL ABRAMS

JDAICONNECT, FEB. 2019

AND

MISSOURI YOUTH SERVICES
INSTITUTE PRE-ASSESSMENT
REPORT

JDAIconnect: Data Tells How Virginia's Youth Justice System is Headed Toward a Better Future

Posted by [Carol Abrams](#) Feb 8, 2019

A growing number of states are moving their juvenile justice systems away from the youth prison model and toward a continuum of community-based programs.

One such state — Virginia — has successfully cut its juvenile correctional facility population in half after just five years, according to [a new report](#) issued by the Virginia Department of Juvenile Justice (DJJ).

The state's five-pronged reform strategy, which the Annie E. Casey Foundation has supported with technical expertise, has realized some clear gains. These include:

Reducing state facility populations: The average daily population in Virginia's juvenile correctional centers has dropped 54% over three years (going from 466 youth in 2015 to 216 youth in 2018). Youth in Virginia were being held in confinement for relatively long lengths of stay compared to youth confined in other states, according to a Casey Foundation analysis. As a result, DJJ adopted new length-of-stay guidelines, which sharply reduced the duration of confinement in most cases and shortened the average length of stay from 14 months to just 8 months.

Reinvesting in better alternatives: Instead of incarcerating youth in institutions, DJJ created alternatives, including shorter-stay residential centers and a continuum of nonresidential programs and services across the state. Virginia is funding these new options with cost savings recovered from the closing of a 258-bed correctional center and a 40-bed reception and diagnostic center. Thanks, in part, to these moves, nearly half of youth released from state custody in 2018 never spent time in a state correctional facility.

Reforming correctional treatment: [Working with experts, including the Missouri Youth Services Institute](#), Virginia revamped its approach to youth who remained in correctional custody. The positive outcomes that followed include:

- *A dramatic drop in the use of isolation and restraints.* Since 2015, the number of incidents resulting in isolation has fallen by 88%. At the same time, the number of incidents resulting in more than two days of isolation fell by about 99% (from 522 to just 7 incidents).
- *Improved safety.* DJJ workers' compensation claims have dropped 58% in the past three years. In addition, the number of reported incidents (fights, assaults, staff use of force) fell by 25% at the 284-bed Bon Air Juvenile Correctional Center just one year after the state adopted its new treatment model across the facility.
- *Better education outcomes.* Working with consultants, DJJ moved to upgrade its educational programs, including its college, career, technical and special education offerings. As a result, the share of individuals passing exams, graduating high school or earning a GED has risen sharply over the last two years.
- *Stronger family connections.* In 2018, youth in state custody received nearly 6,000 family visits — a 90% increase over the prior year.

Replacing obsolete facilities: When the Foundation began working with Virginia in 2014, both of the state's large institutions had more than 200 beds and resembled adult prisons. While efforts to replace

these facilities have encountered some resistance, Virginia's state legislature approved funding in early 2018 for a new 60-bed facility.

Sustaining progress: Due to work culture improvements and expedited hiring processes, the proportion of unfilled staff positions at DJJ fell from 24% in 2016 to just 11% in 2018.

Today, the DJJ's transformation continues. The department's "long-term expectation of a decrease in recidivism rates has not yet been achieved," according to the report, which notes that "additional time is necessary for its changes to become permanent fixtures of Virginia's juvenile justice system."

Casey Senior Associate [Tom Woods](#), who is leading the engagement with Virginia, offers his perspective: "We have seen the changes up close and — from our vantage point — thanks to bipartisan support in the legislature and from two governors, strong leadership throughout DJJ, and remarkable dedication from front line staff, Virginia's youth justice system is headed toward a better future."

This blog first appeared on [aecf.org](#)

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<https://www.aecf.org/blog/momentum-builds-in-states-to-end-the-youth-prison-model>

55 Views Tags: data blog



[Anthony Celestine](#) in response to [Jenna Easton](#) on page 2

Feb 19, 2019 4:34 PM

Jenna!

All is good on my end. Attempting to live my best life in 2019.



[Jenna Easton](#) in response to [Anthony Celestine](#) on page 2

Feb 19, 2019 3:58 PM

Thanks, Tony! Hope all is well in your world!!



[Anthony Celestine](#)

Feb 18, 2019 3:30 PM

Great work! Thanks for sharing these great accomplishments.



[Jenna Easton](#)

Feb 8, 2019 3:54 PM

Great work happening in VA! Many thanks to AECF for all of the guidance & support!

**Pre-Assessment by the Missouri Youth Services Institute of the
Nebraska Department of Health and Human Services, Office of Juvenile Services
April 13, 2020**

On March 3, 2020 the Missouri Youth Services Institute (MYSI) entered a contractual relationship with the Nebraska Department of Health and Human Services (DHHS) to conduct an assessment of the Office of Juvenile Services (OJS) Youth Rehabilitation Treatment Centers (YRTC).

A MYSI assessment team was scheduled to visit the Kearney and Geneva YRTCs the last week of March. However, after the COVID-19 began, a decision was mutually made to do a Pre-Assessment of DHHS, OJS and the Kearney YRTC by conducting telephone interviews with key staff and state stakeholders.

A MYSI assessment team of Mark D. Steward, Director of MYSI; Jim Davis, MYSI Senior Consultant and Ken Ellis, Director of MYSI Training, began the interviews on March 25 through April 9 with at least two of the MYSI team members interviewing the following DHHS staff: Paul Gordon, Facility Administrator at Kearney; Chris Hellerich, Unit Manager, Dickson Unit; Dan Theobald, Training Coordinator; Rich Morse, Recreation Manager; Scott English Director/Assistant Superintendent, Nebraska Department of Education; Levi Hadley, Unit Manager, Vulnerable Youth/DMH Youth; Cindy Krolikowski, Facility Manager for Females at Kearney; and Mark LaBouchardiere, DHHS Residential Director (*several attempts were made to interview Mr. LaBouchardiere, but he was unavailable at all of the scheduled times.*)

In addition to these interviews, Mark Steward interviewed the following Key State Stakeholders:

Jim Blue, Executive Director for Cedars; Jeanne Brandner, Deputy Probation Administrator; Judge Michael Burns, 10th Judicial County Court, which includes Juvenile Jurisdiction in the court; Aubrey Mancusco, Executive Director for Voices for Children; and Judge Daniels, who we will also try to interview later.

Prior to the Pre-Assessment interviews, the MYSI team reviewed several documents that had previously been developed by DHHS and shared with us by Dustin Zabokrtsky, Executive Strategic Advisor for the CEO of DHHS, Dannette R. Smith. These documents included an overview of the Youth Treatment Program at the different YRTCs; the Nebraska Youth Care System and YRTC Future State Planning, February 2020; the Nebraska Children's Commission for Juvenile Services (OJJ) Committee from December, 2013 and the Youth Rehabilitation and Treatment Centers' Business Plan from October, 2019. We also received other data and reports on assaults, recidivism, elopements and length of stay. There were also numerous discussions of the DHHS/OJ's issues with Dustin Zabokrtsky, who was extremely helpful in facilitating this process.

Summary of Interviews with DHHS and Kearney YRTC Staff

All of the participants we interviewed appeared to be very forthright and candid in their assessments and everyone expressed a desire to be a part of any initiative that will improve the atmosphere and functioning of the facility, provide meaningful services to youth, and increase the morale and effectiveness of all staff working together.

The participants spoke openly about the challenges and opportunities they are facing and what can be done to assist YRTC in moving forward in its implementation of the goals and objectives developed in alliance with the agency's strategic planning and vision. When asked what is the best thing about working at YRTC, the response typically and consistently given was the relationships and camaraderie they have developed over a period of time with their co-workers and participating in the success of the youth that they have had an opportunity to influence. However, most of the participants, who are some of the system's most tenured staff, seem to acknowledge that newer staff have not had the same level of team bonding and commitment experiences that they had when they were new to YRTC. In addition, everyone appears to welcome any processes and structures that can recreate that sense of "team" culture for the newer employees. They believe the absence of this culture has had a negative impact within their YRTC system. Their thoughts, regarding their staff teams, also mirror their wishes about recreating a smaller group process experience for the youth, both of which are in alignment with MYSI principles.

In contrast, the challenges and stressful part about working at YRTC has been the impact of working with a tremendous shortage of staff in the units, which has had an impact on the quality of services that can be delivered to the youth. The lack of consistency affects the staff working with the youth in delivering and supporting the appropriate services.

When asked what they believe contributes to the vacancies, three general responses were offered: (1) new hires are sometimes ill-prepared and naïve about the needs of the youth they are expected to work with and later realize the challenges that the youth present appear to be beyond their means to work successfully with them; (2) because of staff shortages, a large number of staff are being held over beyond their 8-hr shift for mandatory overtime which has led to compassion fatigue and burn-out; (3) new staff are being trained and mentored by a staff member who may only have 3-4 months of job or unit experience themselves.

Currently, there are five housing units on campus. The female population is placed in a unit originally designed for the more vulnerable population in the building, designated as Morton, where the youth reside in individual bedrooms. The male youth are housed in two separate buildings that are divided into two sides that mirror each other, i.e., Bryant & Creighton, and Lincoln & Washington. Each of those four units have the capacity to hold up to 25 youth on each side and the youth sleep in a one-room open dormitory type setting. In addition, there is a secure unit, designated as Dickson, which houses youth temporarily who have had recent escapes or attempts to escape, or who have exhibited extreme aggression and assaultive behaviors. It was originally designed to be a temporary "cool-down" space but strategic mandates from facility leadership to return the youth back to their housing units had to be implemented to prevent youth from getting lost or stuck there for longer periods than necessary. It accommodates both males and females in separate living areas.

The facility operates under PREA minimum standards of a staff-to-youth ratio of 1:8. However, at full staff employment and availability, there would typically be a staff team of 15 direct-care Youth Program Staff (YPS) assigned to each unit, with a coverage schedule that would allow for three (3) staff on the morning 6am – 2pm shift; three (3) staff on the evening 2pm – 10pm shift; and two (2) staff for the overnight, 10pm – 6am shift. In addition, there are staff assigned as

Youth Security Staff (YSS) that provide supportive functions to the facility to help maintain safety and security but actual numbers of those positions that are available each day was not obtained. Finally, a unit supervisor, and multiple case managers are assigned to each youth within a unit.

Previously, all residents attended school on campus in a traditional public-school setting. However, because of several assaultive incidents and egregious behaviors, and because of the system's response to the social distancing mandates of the COVID-19 directives, currently all classes are being held within each housing unit where teachers are conducting classes in the unit. Ironically, after speaking with the new Education Superintendent, this has created an opportunity for better overall school day management as it mirrors a movement back to a smaller group model of consistency that both teachers and staff are somewhat familiar with, which can potentially foster more unit staff engagement and follow-up in support of the youth in their educational goals. A small group model where unit youth stay together throughout the day at school, mealtimes, recreational periods, and evening programming, is a pillar and cornerstone of the MYSI approach and subsequently this shift is more in alignment with our typical recommendations.

The shift in program design, from a small group culture of care, responsibility and accountability for each other, to a more individualized Phase rewards program, has produced some shared concerns from the participants interviewed. They all acknowledged the shortcomings of the old Positive Peer Culture model (PPC) but all universally recognize that some of the core values and social responsibilities learned within that program was also lost in the shift to the individual Phase system. Staff from systems that once heralded the old PPC program often refer to its merits when it was used correctly as a fantastic program. However, the reason many systems moved away from that model was because of the inconsistent misuse of the program where the actions of one member resulted in a punishment or consequence for the entire group, including innocent or compliant members. The MYSI approach has been successful in bridging the gap between group social responsibility and individual motivations and could be a valuable asset to the YRTC program should we enter into a partnership with DHHS to collaborate on programmatic improvements.

Goals Identified: Increase Unit Team Ownership, Buy-in, Accountability & Stabilization

All the concerns shared by staff is typical of any system in transition with normal anxiety and apprehensions regarding the unknowns. YRTC has been caring for and providing services to youth and families in the state of Nebraska for 141 years, since 1879. It's mission, to help youth live better lives through effective services, [and] affording youth the opportunity to become law-abiding citizens, appears to be a value shared by all interviewed. However, they each have acknowledged that in the day-to-day practices, it has been difficult to operationalize it due to staff vacancies, call-outs, fatigue from mandated overtime, and an inexperienced work force with reportedly 90% of the staff having fewer than six months to one year of experience. The stated strength of the program is that staff have an inherent genuine desire and concern to help troubled youth but need additional training, skills, coaching and mentoring from veteran staff and leadership to be effective in their job.

Summary of Interviews with State Key Stakeholders

The interviews with key stakeholders in Nebraska were extremely helpful in ascertaining valuable information regarding the historical perspective of DHHS/YRTC past performance, mission, vision and issues. Most all the key stakeholders stated that the YRTCs have seen a revolving door of key staff in OJS with programmatic changes made on a regular basis. They felt that there had been some good programs in the YRTC, but most have changed with new administrators in the past, which has caused high turnover and low staff morale.

Again, most of these stakeholders felt that there had been a lot of good plans put in place, but not a lot of follow through had occurred to implement the recommendations. They also felt that the rehabilitational “culture” that was present in the past had been replaced by more of a “correctional” culture. This includes the antiquated correctional physical environment that exists in the YRTCs which has not been conducive to a “youth friendly” treatment facility. The Kearney YRTC specifically, which has a barracks type sleeping arrangement, is not conducive to a safe therapeutic environment.

Some of the stakeholders mentioned that the YRTC needed more positive peer interaction with youth empowered to take responsibility for creating a well-functioning unit. They also indicated that because of high turnover and difficulty in recruiting the right kind of staff that many of the staff are afraid of the youth in the units.

From the private providers’ perspective, they would like to see DHHS put more funding into the communities to provide community-based services to many of youth, other than those youth with the most serious offenses. They felt that the Kearney YRTC should be reserved for only these youth with serious offenses and the dangerous assaultive youth. They felt that Medicaid should be expanded to provide funding for these community-based programs. One of those interviewed took this a step further and recommended that Kearney YRTC be utilized for only the serious youth and be a secure “correctional” environment. They thought the youth should get rehabilitative treatment but done so in a more secure and correctional environment.

The information from the judiciary was that it was a little “muddy” in terms of roles and responsibilities between DHHS and Juvenile Probation. Also, about ten years ago, legislation was passed reducing the Mental Health facilities to serve youth. There are now vacant buildings in Hasting and Norfolk that could possibly be rehabbed to serve youth to reduce the population at Kearney YRTC.

Almost all of the stakeholders thought the facilities and programs in OJS should be more regional and separated into secure, moderate, low and community based. Some of the youth that would not need to be placed in a secure care setting should be contracted out with the community private providers.

Most of the advocates felt that the females in YRTC used to receive more appropriate care and programs geared toward their specific needs. Several thought that the Geneva YRTC was not a very good option for the transition program because there were not a lot of services and job opportunities for the young women. There also is a thought it would be good to look for other programmatic options in the community near the larger commitment areas of Omaha and

Lincoln. We discussed how the Missouri Juvenile System places all of its female population into group homes, state park facilities, separate dorms on larger campuses and even on college campuses.

Overall, the key stakeholders were very open, helpful and receptive to helping DHHS move forward with implementing a new and improved service delivery system for the youth in Nebraska.

Recommendations

Please find our recommendations for DHHS/OJS in regard to the Kearney YRTC. Prior to implementing whichever recommendations, you deem fit, we would highly recommend several items to review.

First, because of the COVID-19 Virus, we would recommend significantly reducing the population at Kearney YRTC by releasing the appropriate non-violent, non-aggressive youth, both male and female. Additionally, review the other youth which are within 60-90 days of release to see if they can be released as well. Also, ask the courts to put a temporary hold on new youth to be admitted to the YRTC unless they pose a significant threat to the safety in their community.

There are probably some staff in the agency at the YRTCs who may not be doing their job in the best manner. However, we would recommend that most of these staff remain on board until replacements are found as to not create a void in any of these essential positions.

At times like these, where critical incidents are up and turnover is high, it is better to have as much consistency as possible with SAFETY FIRST. After the COVID-19 crisis is over, then it would be the appropriate time to review key positions and begin looking at implementing the following recommendations.

I. Immediate Strategic Actions to Address Staff Vacancies and Absences

- Over-fill the budgeted direct care positions by 30%
- Whenever new staff are hired during a period of staff shortages, existing staff tend to “call-out” more because they feel it’s their turn to get some relief. As a result, the system is always running behind in reaction. By over-filling the budgeted positions, the facility will be able to absorb this dynamic until the system stabilizes.
- Once adequate staff are in place and proper supervision is aligned, some existing staff may have to be supervised differently and possibly remanded and redirected to raise their performance standards. For these staff, sometimes their performance can go unchecked because supervisors do not feel they have adequate replacement resources to effectively supervise and hold them accountable for their performance.
- The extra money on the front-end spent to overfill positions will balance out against the money currently spent in mandated overtime, call outs, worker’s comp, and various other leaves of absences. Once the system has restored safety,

stability and additional training and mentoring (both in the classroom and on the units), it will be able to readjust and stay within budget.

II. **Leadership Retreat** - Workshop inclusive of key supervisors and personnel from campus partners including clinicians, case managers, trainers, recreation officer and substance abuse coordinators, etc.

- Re-visit mission and vision and get input from participants regarding their assessment of practices that elevates and supports the mission and vision in their unit/teams, as well as opportunities to close the gap in practices that may impede its advancement. MYSI's 4-Ps (Purpose, big Picture, People, Plan).
 - Re-visit Purpose, Mission and Vision
 - Discuss system's change as it relates to the big Picture of integrating services for youth and families throughout YRTC to expand staff awareness that they are a part of a larger system not operating in isolation.
 - Discuss and get input how change and practices impact People (youth and families, unit-staff, leadership, community partners, etc., which can add value and respect for the many roles and responsibilities each bring to the table).
 - Plan – getting input and buy-in increases when staff are engaged in strategic planning as opposed to the perception that plans are often implemented by leadership without getting input from direct care staff.
- This is an opportunity for unit-supervisors to get recharged and thereby lead their teams during this transitional period with enthusiasm and purpose.

III. **Unit-Management Workshop/Training** – training workshops that create opportunities for unit staff to bond, build team cohesion, formulate agreements among each other regarding best practices and increase buy-in/ownership. (listed below in section VI).

- Opportunity for direct care staff in units to have formal input and team discussions around best practices, consistency in supervision, concerns in overall unit functioning and opportunities to enhance programming and services for their kids.
- When direct care staff are connected to their youth treatment plans, their mentoring relationships become more meaningful and focused around the successful completion of identified goals for their kids as opposed to just providing custodial supervision.
- Opportunity for team building, goal setting, and development of strategic plans for program enhancements that all have input into and investment in accomplishing its goals.

- Opportunity for the staff teams to get refresher training in areas identified as needed or helpful from the Leadership Retreat.

IV. Campus Implementation Team of “Champions” – representatives determined out of the Leadership Retreat who are coaches, supporters, mentors.

- Opportunity for the system to sustain momentum whereby support and ownership for outcomes are managed by this peer unit.
- Used as a resource for feedback, ongoing program development and implementation, and potential adjustments needed in program structure and integration.
- Can be used as a resource for ongoing evaluation and assessment for items/needs identified in the “MYSI assessment tool.”

V. Unit-Team Meetings – structured communication that keeps everyone informed, invested and committed to the goals identified for their unit. Schedule must support maximum participation.

- It provides an opportunity for the staff team to assess group dynamics and culture, individual youth progress, stay abreast of issues pertaining to the youth and families, stay proactive and make sure everyone is aware of and working toward the same goals.
- It also provides peer support where staff feel less like they are working on an island by themselves but have opportunities to share effective practices in managing the unit. This can have a positive impact against staff burnout and foster retention.
- It also provides an opportunity to insure that there is one common voice and message that each staff team member is communicating to the youth and provide a mechanism for youth to get feedback and support related to their progress in their treatment program and movement toward readiness for community re-entry.

VI. MYSI Should Provide YRTC Training Overview:

Day 1 – Structure and Therapeutic - Elements of Effective Programs

This MYSI overview session helps participants understand how the therapeutic process occurs with youth through mentoring relationships with staff. It details the differences between a historical, correctional approach in managing behaviors to a therapeutic relational-based approach and allows staff to come to a clear understanding of the impact of both approaches within the staff team that they are a part of and for the youth they serve. The latter part of this workshop empowers participants to take part in the design of their “optimal system of care” that serves young people and their families through a

“magic wand activity” that looks within their own staff team or unit-managed based structure to determine what elements listed are currently operational and which elements can be achieved without additional external resources. The team will then prioritize the list into smaller achievable goals with time frames developed to monitor progress and achievement.

This training also focuses on youth and staff safety through the facility and unit structure. These structures include facility schedule, roles of staff, team development, intact teams, and facilitated groups processes. In addition, staff balancing safety and therapeutic needs of youth through developing rapport, setting expectations, and being required to provide constant Eyes on, Ears on, & Engaged supervision.

Day 2 – Beliefs and Philosophies and Trauma Informed Care

In this session participants will take an in-depth look at how organizational beliefs and philosophies guide all aspects of their work and how their unexamined personal beliefs and bias may come into conflict with the agency’s mission and goals. This workshop is critical in helping staff “operationalize” the values and beliefs behind your agency’s commitment to helping young people begin a pathway to successful reintegration back into their communities. Staff are encouraged to examine their personal beliefs and biases and share within their team to help establish a common baseline of organizational beliefs that they then support and hold each other accountable to operationalize those values into their daily practices. Staff are then encouraged to explore how to teach and incorporate these values into the daily counseling and mentoring work with the youth to create a positive and supportive youth peer culture.

Day 3 – Systems Thinking & Strategic Interventions

This session is an introduction to System’s Thinking. The goal of this session is to help participants recognize the impact of various systems on the youth, families, themselves and their staff teams. The session also emphasizes the importance of family involvement in programs and youth’s treatment plans. Finally, this session will allow participants to examine the impact of their staff team operating as a system and its potential impact on the youth. Participants typically find the “balancing-the-needs” discussion which provides a strategic lens to look through in managing organizational conflicts and opposing agendas particularly helpful.

Day 4 – Problems vs. Symptoms

This session continues to build upon the previous days' concepts and teaches participants to assess and understand youth behavior by looking at the factors that cause, influence, or lead youth to get their needs met in sometimes unhealthy ways. The session explores the emotional, environmental and cognitive aspects that influences behavior. It also focuses on how to intervene with youth to shape (or re-shape) behavior and help them make better choices. Role plays are an integral part of this session with staff. Once staff have assisted youth in understanding what "unmet needs" their behaviors are attempting to meet, staff can then support the youth in utilizing more adaptive coping skills. Staff will then apply the concepts in looking at the group dynamics of their individual staff teams.

Day 5 – Assessing and Developing Groups and Teams

This session looks at the stages of group (and staff team) development and how unit supervisors can coach and support their staff team through the identified stages. Participants learn to identify and facilitate the development of healthy teams and create a group culture that fosters safety, ownership, support and healthy connections with others. It also looks at the role leadership plays in the professional development of healthy staff teams within the MYSI Approach.

Following this training, MYSI also provides ongoing on-site coaching support to operationalize the principles and concepts taught in training into the everyday cottage milieu and practices in the unit.

We appreciate the opportunity to conduct this pre-assessment process and look forward to doing an on-site assessment with additional staff interviews as well as with the youth too. It would also be beneficial at some point during this initial process to involve some of your key stakeholders to get additional input from them.

We look forward to assisting with Nebraska DHHS in the future. Please don't hesitate to contact me if you need any additional information or have questions.

Respectfully submitted,

Mark D. Steward, Director
Missouri Youth Services Institute

APPENDIX 26

DHHS RESPONSES TO
OVERSIGHT COMMITTEE
QUESTIONS
AND YRTC STAFFING
SPREADSHEETS

DEC. 7, 2020

Follow-up questions and answers from tour and hearing in Lincoln on October 23rd, 2020

During the tour of Whitehall, one of the senators asked how the youths were transported. The DHHS packet indicates they were transferred in state vehicles accompanied by staff. It was also asked if they were shackled. Were they?

LB 1140 requires DHHS to develop policies and procedures regarding the transportation of YRTC youth - this policy has been developed and is what was followed throughout youth transportation between Hastings and Whitehall. None of the youth were in restraints during their transport from Hastings to Whitehall. However, in regards to the YRTC, attached is our policy for youth transportation. Please keep in mind that there is a difference between a YRTC youth and a Whitehall youth, as Whitehall youth fall under PRTF and child care licensing guidelines while YRTC youth do not.

For additional information please see attached form "Secure Juvenile Transportation".

There were also a lot of questions regarding staffing at the facilities, specifically the Geneva facility. How many staff were at Geneva when it was fully staffed?

- 1) 24 Filled
- 2) 41 Vacant

Since the first of January 42 staff left YRTC Geneva. Where did they go?

*23 took other positions within DHHS, and
19 left state government.
In total, since the first of January – 20 YRTC Geneva staff joined the MLTC Team at Geneva.*

How many staff have left Geneva since September?

*Since September, 6 staff left YRTCG,
Two accepted positions with the MLTC Team in Geneva in October.
One joined the MLTC Omaha Team as an AD Waiver Service Coordinator
The others three left DHHS*

For additional information please see attached form "Staffing-Facilities"

How many staff (and their positions) are currently being transported between Geneva and Kearney? I counted 66 - is that correct? Are they being bused?

*8 Youth Security Specialists are transported between Geneva and Kearney
1.5 Teacher positions to YRTC Kearney
One Teacher divides her time between Lincoln and Kearney
1.5 Teacher positions to Lincoln Youth program
NOTE There are ten YSSII on staff – however two are unable to participate*

All staff are provided State vehicles to travel to Kearney so they do not have to utilize their own vehicles.

For more information about staffing please see attached form “YF Plan HR”

The DHHS package of information shows there are 74 teammates at the Hastings Campus. In the packet provided in September, page 9 states "Should all YRTC females move to Hastings, reduction in force will be implemented." Do we know what kind of reduction?

The reduction in force is related to Geneva campus – not Hastings.

How many staff in all facilities total and a breakdown of numbers in each facility (including Whitehall)

Staffing Report

	<i>Staffing Need</i>	<i>Filled</i>
<i>Whitehall</i>	<i>53</i>	<i>50</i>
<i>Geneva MLTC</i>	<i>27</i>	<i>15 – Note the report has 17, but two staff transferred this week to</i>
<i>Kearney</i>	<i>221.5</i>	<i>161</i>
<i>Hastings</i>	<i>81</i>	<i>62</i>
<i>Lincoln</i>	<i>98</i>	<i>56</i>

For more information please see attached “Staffing-Facilities”

Capacity of each facility for youth?

Since the phase "system" is being eliminated at the YRTC's (i.e. phase four, ready for discharge) - what now will be the criteria for discharge?

This is still in progress and we are working in collaboration with the Missouri Youth Services Consultants to assess the programming needs and discharge criteria.

Do you have an organizational chart for the leadership in each facility? I didn't get all of the names of the individuals who helped with the tours.

Please see attached Capacity and Org Chart for Hastings, Kearney, Geneva, Lincoln and Whitehall

How many kids go through the program in a year?

Please see attached Capacity and Org Chart for Hastings, Kearney, Geneva, Lincoln and Whitehall

How many staff are working at Whitehall?

Approximately 50 staff. Please see attached "Staffing-Facilities"

Why with 4 girls at stage 4 in Kearney aren't they being moved to Geneva like the original plan instead of forcing the staff from Geneva to spend four hours on the road every day?

Please see attached document "YF HR Plan".

Originally Geneva was staffed with 75 positions for 57 beds, now DHHS is proposing 74 positions in Hastings for 24 beds, how do they justify increasing the expense per bed by a factor of 2.5 over Geneva, and this does not even factor in the additional cost of the new Lincoln YRTC, the added cost of the Whitehall renovation, and the over half a million dollars spent for MYSC consulting?

Please see attached document "YF HR Plan".

I would like to see a top to bottom accounting of what the state has spent since the girls were moved to Kearney

The only additional spending has been for the two classroom trailers. Attached are the two lease agreements with Williams Scotsman for the two modular trailers. The lease term for both is 24 months. We are paying \$1,966.98 per month for each modular, which is the \$1,946.00 shown on the lease agreement plus \$20.98 for property tax recovery. Additional costs for installation and tear down were \$17,267.19 for the first modular, and \$17,071.99 for the second modular installed. Total costs for the first modular are \$63,971.19 and \$63,775.99 for the second one. In addition, there is about \$500 cost for each for the property tax recovery fees.

Please see attached document "William Scotsman"

DHHS / Senator Arch meeting December 7th, 2021 at 10am

Questions sent to DHHS by Lisa Johns:

1. During the Hastings tour on Sept. 18th, did Facility Administrator Grant Johnson give the tour or was it somebody else?

Grant Johnson and Mark LaBouchardiere conducted the tour. Grant Johnson is not the Facility Administrator but is the Safety Coordinator.

2. Did Larry Kahl join the committee members on the tour of Whitehall?

Yes, Mr. Kahl was present on the tour of Whitehall with the committee members.

3. What is the actual capacity of each facility currently (not potential)

YRTC-Kearney 170

YRTC-Geneva 18

Lincoln Youth Facility 20

Hastings 20

Whitehall 16

4. When FULLY staffed, how many staff positions are there in each facility?

See attached "Staffing-facilities".

5. How many staff positions are currently filled in each facility?

See attached "Staffing-facilities".

6. What is the turnover of staff for each facility in the last 12 months? (Arch)

See attached "YF Turnover".

7. You have confirmed that staff goes through trauma-informed training. What other training is provided? (i.e. conflict de-escalation techniques, teenage brain development, implicit bias training, diversity and cultural awareness, etc (see 79-2704(1)).

See attached "YRTC-K training requirements".

In addition, at the Lincoln Youth Facility, the following training is being offered:

Registered Behavior Technician (RBT) training which is completed through Relias is a 40 hour training. Those being trained move through modules and take the exam at their own pace so it could be completed before the 40 hours.

Trauma Affect Regulation: Guide for Education & Therapy (TARGET) training is provided to the Behavior Technicians (BT) and Behavior Technician Leads (BTL) and comprises of 6 hours of training. Licensed mental health clinicians who actually lead the TARGET groups have to attend a week of training.

The Board Certified Behavior Analyst Supervisor (BCBA Supervisor) also trains the BT's BTL's for an estimated (depending on questions/discussion) 3 hours for items specific to the facility that is not covered by the Relias training. New staff are then monitored and possibly

retrained, periodically, over the first few weeks if they need additional help. Ongoing training for improvement/changes in data collection is determined by the BCBA Supervisor. Future plans encompass providing TARGET training to the YRTC staff.

8. What kind of service/counseling is available to staff that experiences workplace trauma?

State employees are offered the Employee Assistance Program (EAP) services. Information on their services can be found at: <https://das.nebraska.gov/Benefits/Active/eap.html>

9. How many staff (and their positions) are currently being transported between Geneva and Kearney? How are they being transported?

8 Youth Security Specialist II (YSSII) are transported between Geneva and Kearney

1.5 Teacher positions to YRTC-Kearney

One Teacher divides her time between Kearney and Lincoln

1.5 Teacher positions to Lincoln Youth Facility

NOTE: There are ten YSSII on staff – however two are unable to participate.

All staff are provided State vehicles to travel to Kearney so they do not have to utilize their own vehicles.

For more information about staffing, see attached form “YF Plan HR”.

10. Why with 4 girls at stage 4 in Kearney aren't they being moved to Geneva like the original plan instead of forcing the staff from Geneva to spend four hours on the road every day? (Brandt)

See attached “YF HR Plan”.

11. Originally Geneva was staffed with 75 positions for 57 beds, now DHHS is proposing 74 positions in Hastings for 24 beds, how do they justify increasing the expense per bed by a factor of 2.5 over Geneva, and this does not even factor in the additional cost of the new Lincoln YRTC, the added cost of the Whitehall renovation, and the over half a million dollars spend for MYSC consulting (Brandt).

See attached “YF HR Plan”.

12. DHHS material indicates there are 74 teammates at the Hastings Campus. The packet of information provided in September states "Should all YRTC females move to Hastings, reduction in force will be implemented." Do we know what kind of reduction?

The reduction in force is related to Geneva campus – not Hastings.

13. With respect to the Hastings staff, how many have committed to stay on should the campus become a YRTC for girls instead of the PRTF for boys chemical dependency? Could staffing become a problem at Hastings as well?

To our knowledge, all staff are committed to stay on should the campus become a YRTC for girls. Our Missouri Youth Services Institute (MYSI) consultants have been heavily concentrating on training and coaching for the Hastings staff and have conducted several onsite hands-on training with the entire Hastings staff which has greatly made Hastings staff more comfortable. Historically, Hastings has had some of the lowest vacancy rates in comparison to any other DHHS 24 hour care facility and we feel confident it will remain that way with the enhanced supports and training that have been put in place.

14. DHHS material indicates 16 YRTC-Geneva staff have transitioned to the Medicaid eligibility team - is this number still correct?

In total, since the first of January – 20 YRTC Geneva staff joined the MLTC Team at Geneva.

15. Since the phase "system" is being eliminated at the YRTC's (i.e. phase four, ready for discharge) - what now will be the criteria for discharge? (Arch).

This is still in progress and we are working in collaboration with the Missouri Youth Services Institute (MYSI) consultants to assess the programming needs and discharge criteria.

APPENDIX 27
YRTC-KEARNEY
REQUIRED TRAINING
INFORMATION
DHHS

YRTC-Kearney Required Training

ALL YRTC-KEARNEY EMPLOYEE MANDATORY TRAINING

- Communicable Diseases Prevention
 - Safety Procedures
- First Aid, CPR, AED (every 2 years)
- Handle with Care
 - Use of Force
- Security and Control
 - Supervision of Juveniles
 - Key Control
 - Fire Procedures
 - Control of Flammable, Toxic and Caustic Materials
 - Search and Seizure
 - Rules of Evidence
- YRTC-K Policies and Procedures
- Emergency Procedures-Material Safety Data Sheets, Tornado procedures, fire, inclement weather conditions and hostage situations
- Juvenile Rules and Regulations
- Policies and Procedures
 - Workplace Harassment
 - Rights of Juveniles
- PREA
- Specialized Training for improved job performance.

Individual departments conduct or attend specialized training throughout the year.

Additional Mandatory Training for Specific Job Classifications

**ADMINISTRATOR, FACILITY OPERATING OFFICER, BUSINESS MANAGER,
COMPLIANCE , MENTAL HEALTH SUPERVISOR, NURSE SUPERVISOR,
PSYCHOLOGIST, FOOD SERVICE MANAGER, RECREATION MANAGER,
RELIGIOUS COORDINATOR, SCHOOL PRINCIPAL,**
(40 hours minimum)

- Specialized Training for job function

CLERICAL SUPPORT, RECEPTIONISTS/SWITCHBOARD OPERATOR

(16 hours minimum)

Specialized Training for job function

**SUPPORT EMPLOYEES, CUSTODIANS, FOOD SERVICE STAFF, LAUNDRY STAFF,
and WAREHOUSE STAFF (40 hours minimum)**

- Specialized Training for job function

**ALL MENTAL HEALTH DEPARTMENT STAFF, TEACHERS, RECREATION STAFF,
AND REGISTERED AND LICENSED PRACTICAL NURSES (40 hours minimum)**

- Communications Skills-Motivational Interviewing
- Cultural Lifestyles and Awareness
- Recognizing Critical Behavior
 - Suicide Intervention/Prevention
- Trauma Informed Care
 - Sexual Abuse/Assault
- Interpersonal Relations
- Juvenile Program Training
- Documentation and Report Writing
- Specialized Training for job function
- Adolescent Development
- Compassion Fatigue

**YOUTH CASE MANAGERS, YOUTH SECURITY SUPERVISORS, and YOUTH
PROGRAM SPECIALISTS (40 hours minimum)**

- Communications Skills-Motivational Interviewing
- Medication Aide
- Cultural Lifestyles and Awareness
- Recognizing Critical Behavior
 - Suicide Intervention/Prevention
- Trauma Informed Care
 - Sexual Abuse/Assault
- Interpersonal Relations
- Juvenile Program Training
- Documentation and Report Writing
- Specialized Training for job function
- Adolescent Development
- Compassion Fatigue

APPENDIX 28

YRTC-KEARNEY
CLASSROOM TRAILER
CONTRACT
JAN. 30, 2020



Williams Scotsman, Inc.
 5105 North Oliver Street
 Fremont, NE 68025-7807

Your Williams Scotsman Representative
 Greg Hedrick
 Phone: (402)727-1226 Ext. 47317
 Fax: 402-727-7630
 Email: gjhedric@willscot.com
 Toll Free: 800-782-1500

Contract Number: 1185419
Revision: 3
Date: December 02, 2019

Lease Agreement

Lessee: 22554207
 State of NE Department of Health & Human
 301 CENTENNIAL MALL S
 LINCOLN, Nebraska, 68508-2529

Contact:
 Dana Smith
 301 CENTENNIAL MALL S
 LINCOLN, NE, 68508-2529
 Phone: 402-471-7575
 Fax: +1.402.471.9449

Ship To Address:
 2802 30th Ave
 KEARNEY, NE, 68845

Delivery Date(on or about):
 2/12/2020

E-mail: dana.crawford-smilh@nebraska.gov

Rental Pricing Per Month	Quantity	Price	Extended
72 x 24 Classroom (68x24 Box) Unit Number: CPX-109561	1	\$1,399.00	\$1,399.00
Prem OSHA Step & Canopy	2	\$60.00	\$120.00
General Liability CL - Allen Insurance	1	\$38.00	\$38.00
Property Damage Waiver (11/12)	2	\$70.00	\$140.00
ADA/IBC Ramp -w/ switchback	1	\$249.00	\$249.00
Minimum Lease Term: 24 Months			
		Total Monthly Building Charges:	\$1,399.00
		Other Monthly Charges:	\$547.00
		Total Rental Charges Per Month:	\$1,946.00

Delivery & Installation	Quantity	Price	Extended
Skirting Removal - Vinyl LF	184	\$3.65	\$669.76
Ramp - Delivery & Installation	1	\$562.50	\$562.50
Ramp - Knockdown & Return	1	\$500.00	\$500.00
Tiedowns into dirt	14	\$36.12	\$505.82
Block and Level	1	\$6,519.79	\$6,519.79
Delivery Freight	2	\$678.57	\$1,357.14
Teardown	1	\$4,220.00	\$4,220.00
Return Freight	2	\$678.57	\$1,357.14
Vinyl skirting	184	\$8.56	\$1,575.04
		Total Delivery & Installation Charges:	\$17,267.19

Final Return Charges*	Due On Final Invoice*:	\$0.00
Total Charges Including (24) Month Rental, Delivery, Installation & Return**:		\$63,971.19

Summary of Charges		
Model: CL7224	QUANTITY: 1	Total Charges for (1) Building(s): \$63,971.19



Williams Scotsman, Inc.
5105 North Oliver Street
Fremont, NE 68025-7807

Your Williams Scotsman Representative
Greg Hodrick
Phone: (402)727-1226 Ext. 47317
Fax: 402-727-7630
Email: gjhedric@willscot.com
Toll Free: 800-782-1500

Contract Number: 1185419
Revision: 3
Date: December 02, 2019

INSURANCE REQUIREMENTS ADDENDUM

QTY	PRODUCT	EQUIPMENT VALUE/BUILDING	DEDUCTIBLE PER UNIT
1	CL7224	\$0.00	\$4000.00

Lessee: State of NE Department of Health & Human

Pursuant to Section 13 of the Williams Scotsman Lease Agreement and its Terms and Conditions ("Agreement"), a Lessee is obligated to provide insurance to Williams Scotsman, Inc. ("Lessor") with the following insurance coverage:

- Commercial General Liability Insurance:** policy of combined bodily injury and property damage insurance insuring Lessee and Lessor against any liability arising out of the use, maintenance, or possession of the Equipment. Such insurance shall be in an amount not less than \$1,000,000 per occurrence, naming the Lessor as Additional Insured and Loss Payee.
- Commercial Property Insurance:** covering all losses or damage, in an amount equal to 100% of the Equipment Value set forth in the Lease providing protection against perils included within the classification and special extended perils (all "risk" insurance), naming the Lessor as Additional Insured and Loss Payee.

By signing below, the Lessee agrees to the terms and conditions stated herein. All other general Terms and Conditions of the Agreement shall remain the same and in full force and effect. Each party is hereby authorized to accept and rely upon a facsimile or electronic signature of the other party on this Addendum. Any such signature shall be treated as an original signature for all purposes.

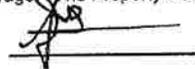
Commercial General Liability Insurance

Lessee elects to participate in the Commercial General Liability Insurance Program, whereby Lessee will receive insurance coverage through American Southern Insurance Company ("Insurer") and administered by Allen Insurance Group ("Agent"). The Lessee acknowledges and agrees that the policy issued by the Insurer is a third party liability policy that covers those amounts that Lessee is legally obligated to pay due to bodily injury and property damage arising from the proper use and occupancy of Equipment leased from Williams Scotsman up to the policy limits. Coverage is subject to underwriting and specific terms and conditions set forth in the policy. An outline of cover is available upon request. By signing below, Lessee understands and agrees that the Lessor is not providing the insurance coverage and serves only as a billing agent for the Insurer and its Agent; and, accordingly, it assumes no liability therefore.

Signature of Lessee:  Print Name: MARK LABOUCHARDIERE Date: 1/30/2020

Damage Waiver Program

Lessee elects to participate in the Lessor's Damage Waiver Program. Lessee understands and agrees that under this program, the Lessor waives, for a fee, Lessee's obligation to carry Commercial Property Insurance and Lessee's liability to Lessor for repair or replacement of the modular units leased from Williams Scotsman resulting from loss or damage as specified in Section 12 of the Lease. Lessee remains liable to Williams Scotsman for the amount of the damage deductible per unit of equipment noted above. Please refer to the Agreement for specific details on coverage, exclusions and restrictions on coverage. The Property Damage Waiver is not and shall not constitute a contract for insurance.

Signature of Lessee:  Print Name: MARK LABOUCHARDIERE Date: 1/30/2020

Please return this signed document with the signed lease agreement



Williams Scotsman, Inc.
 5105 North Oliver Street
 Fremont, NE 68025-7807

Your Williams Scotsman Representative
 Greg Hedrick
 Phone: (402)727-1226 Ext. 47317
 Fax: 402-727-7630
 Email: gjhedric@willscot.com
 Toll Free: 800-782-1500

Contract Number: 1185419
 Revision: 3
 Date: December 02, 2019

Clarifications

*Final Return Charges are estimated and will be charged at Lessor's market rate at time of return for any Lease Term greater than twelve (12) months. **All prices exclude applicable taxes. All Lessees and Leases are subject to credit review. In addition to the stated prices, customer shall pay any local, state or provincial, federal and/or personal property tax or fees related to the equipment identified above ("Equipment"), its value or its use. Lessee acknowledges that upon delivery of the Equipment, this Agreement may be updated with the actual serial number(s), delivery date(s), lock serial number(s), etc, if necessary and Lessee will be supplied a copy of the updated information. Prices exclude taxes, licenses, permit fees, utility connection charges, site preparation and permitting which is the sole responsibility of Lessee, unless otherwise expressly agreed by Lessor in writing. Lessee is responsible for locating and marking underground utilities prior to delivery and compliance with all applicable code requirements unless otherwise expressly agreed by the Lessor in writing. Price assumes a level site with clear access. Lessee must notify Lessor prior to delivery or return of any potentially hazardous conditions or other site conditions that may otherwise affect delivery, installation, dismantling or return of any Equipment. Failure to notify Lessor of such conditions will result in additional charges, as applicable. Physical Damage & Commercial Liability insurance coverage is required beginning on the date of delivery. Lessor is not responsible for changes required by code or building inspectors. Pricing is valid for thirty (30) days.

Please note the following important billing terms:

- In addition to the first month rental and initial charges, last month rent for building, other monthly rentals/service (excluding last month for General Liability Insurance and Property Damage Waivers), will be billed on the initial invoice. Any amounts prepaid to Williams Scotsman will be credited on the final invoice.
- Invoices are due on receipt, with a twenty (20) day grace period. Interest will be applied to all past due amounts.
- Invoices are due on receipt, with a twenty (20) day grace period. Late fees will be applied to all past due amounts.
- Williams Scotsman preferred method of payment is ACH. Payments made by check are subject to a Paper Check Fee, charged on the next invoice following payment by check.
- Williams Scotsman preferred method of invoicing is via electronic transmission. Customers are encouraged to provide an email address or use BillTrust. Invoices sent standard mail are subject to a paper invoice fee, charged on the following invoice.

Lessor hereby agrees to lease to Lessee and Lessee hereby agrees to lease from Lessor Modular Equipment and Value Added Products (as such items are defined in Lessor's General Terms & Conditions) selected by Lessee as set forth in this Agreement. All such items leased by the Lessee for purposes of this Lease shall be referred to collectively as the "Equipment". By its signature below, Lessee hereby acknowledges that it has read and agrees to be bound by the Lessor's General Terms & Conditions (09-01-19) located on Lessor's internet site (<https://www.willscot.com/About/terms-conditions>) in their entirety, which are incorporated herein by reference and agrees to lease the Equipment from Lessor subject to the terms therein. Although Lessor will provide Lessee with a copy of the General Terms & Conditions upon written request, Lessee should print copies of this Agreement and General Terms & Conditions for recordkeeping purposes. Each party is authorized to accept and rely upon a facsimile signature, digital, or electronic signatures of the other party on this Agreement. Any such signature will be treated as an original signature for all purposes and shall be fully binding. The undersigned represent that they have the express authority of the respective party they represent to enter into and execute this Agreement and bind the respective party thereby.

However, notwithstanding anything herein to the contrary, Lessor and Lessee agree to the following Additional Terms. To the extent the Additional Terms conflict with any terms in the Williams Scotsman Lease Agreement, including Lessor's General Terms & Conditions (09-01-19), the Additional Terms shall prevail:

1. Payment shall be made by Lessee to Lessor in accordance with the Prompt Payment Act (Neb. Rev. Stat. 81-2401 to 81-2408).
2. This Lease Agreement shall be governed by and interpreted under Nebraska law, and all legal actions arising out of or related to this Lease Agreement shall be filed and conducted exclusively in a state or federal court in Nebraska. Lessee retains all rights to a trial by jury of any claim arising in connection with this Lease Agreement.
3. Nothing in this Lease Agreement shall constitute a waiver of sovereign immunity under any applicable law.
4. Any obligations owed by Lessee under Section 12 of Lessor's General Terms & Conditions (09-01-19) shall be subject to any applicable law.

Invoicing Options (select one)

Paperless Invoicing Option
 Williams Scotsman prefers electronic invoicing, an efficient, convenient and environmentally friendly process. To avoid fees, provide us with the proper email address for your invoices.

A/P Email: dana.crawford-smith@nebraska.gov
 A/P Email on File: _____

Standard Mail Option
 Customer prefers to receive paper invoice via mail. Fees may apply. Invoices will be mailed to:

301 Centennial Mall S
 Lincoln NE 68508

Enter a new billing address: _____

Signatures

Lessee: State of NE Department of Health & Human

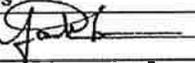
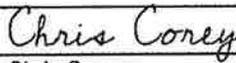
Lessor: Williams Scotsman, Inc.



Williams Scotsman, Inc.
5105 North Oliver Street
Fremont, NE 68025-7807

Your Williams Scotsman Representative
Greg Hedrick
Phone: (402)727-1226 Ext. 47317
Fax: 402-727-7630
Email: gjhedric@willscot.com
Toll Free: 800-782-1500

Contract Number: 1185419
Revision: 3
Date: December 02, 2019

Signatures	
Signature: 	Signature: 
Print Name: MARK LACHAPELIERE	Print Name: Chris Corey
Title: FACILITIES DIRECTOR	Title: Legal Contracts Analyst
Date: 1/30/2020	Date: 1/29/2020
PO#	

PLEASE RETURN SIGNED AGREEMENT TO: OMALeases@willscot.com



Williams Scotsman, Inc.
 5105 North Oliver Street
 Fremont, NE 68025-7807

Your Williams Scotsman Representative
 Greg Hedrick
 Phone: (402)727-1226 Ext. 47317
 Fax: 402-727-7630
 Email: gjhedric@willscot.com
 Toll Free: 800-782-1500

Contract Number: 1239497
Revision: 1
Date: March 12, 2020

Lease Agreement

Lessee: 22554207
 State of NE Department of Health & Human
 301 CENTENNIAL MALL S
 LINCOLN, Nebraska, 68508-2529

Contact:
 Dana Smith
 301 CENTENNIAL MALL S
 LINCOLN, NE, 68508-2529
 Phone: 402-471-7575
 Fax: +1.402.471.9449

Ship To Address:
 2802 30th Ave
 KEARNEY, NE, 68845

Delivery Date(on or about):
 4/2/2020

E-mail: dana.crawford-smith@nebraska.gov

Rental Pricing Per Month	Quantity	Price	Extended
74 x 24 Classroom (70x24 Box) Unit Number:	1	\$1,399.00	\$1,399.00
Prem OSHA Slep & Canopy	2	\$60.00	\$120.00
General Liability CL - Allen Insurance	1	\$38.00	\$38.00
Property Damage Waiver (11/12)	2	\$70.00	\$140.00
ADA/IBC Ramp -w/ switchback	1	\$249.00	\$249.00
Minimum Lease Term: 24 Months			
		Total Monthly Building Charges:	\$1,399.00
		Subtotal of Other Monthly Charges:	\$647.00
		Total Rental Charges Per Month:	\$1,946.00

Delivery & Installation	Quantity	Price	Extended
Skirting Removal - Vinyl LF	168	\$3.65	\$611.52
Ramp - Delivery & Installation	1	\$562.50	\$562.50
Ramp - Knockdown & Return	1	\$500.00	\$500.00
Tiedowns into dirt	14	\$36.12	\$505.82
Block and Level	1	\$6,519.79	\$6,519.79
Delivery Freight	2	\$678.57	\$1,357.14
Teardown	1	\$4,220.00	\$4,220.00
Return Freight	2	\$678.57	\$1,357.14
Vinyl skirting	168	\$8.56	\$1,438.08
		Total Delivery & Installation Charges:	\$17,071.99

Final Return Charges*	Due On Final Invoice*
	\$0.00
Total Charges Including (24) Month Rental, Delivery, Installation & Return**:	\$63,775.99

Summary of Charges		
Model: CL7424	QUANTITY: 1	Total Charges for (1) Building(s): \$63,775.99



Williams Scotsman, Inc.
 5105 North Oliver Street
 Fremont, NE 68025-7807

Your Williams Scotsman Representative
 Greg Hedrick
 Phone: (402)727-1226 Ext. 47317
 Fax: 402-727-7630
 Email: gjhedric@willscot.com
 Toll Free: 800-782-1500

Contract Number: 1239497
Revision: 1
Date: March 12, 2020

INSURANCE REQUIREMENTS ADDENDUM			
QTY	PRODUCT	EQUIPMENT VALUE/BUILDING	DEDUCTIBLE PER UNIT
1	CL7424	\$0.00	\$4000.00

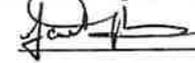
Lessee: State of NE Department of Health & Human

Pursuant to Section 13 of the Williams Scotsman Lease Agreement and its Terms and Conditions ("Agreement"), a Lessee is obligated to provide insurance to Williams Scotsman, Inc. ("Lessor") with the following insurance coverage:

- Commercial General Liability Insurance:** policy of combined bodily injury and property damage insurance insuring Lessee and Lessor against any liability arising out of the use, maintenance, or possession of the Equipment. Such insurance shall be in an amount not less than \$1,000,000 per occurrence, naming the Lessor as Additional Insured and Loss Payee.
- Commercial Property Insurance:** covering all losses or damage, in an amount equal to 100% of the Equipment Value set forth in the Lease providing protection against perils included within the classification and special extended perils (all "risk" insurance), naming the Lessor as Additional Insured and Loss Payee.

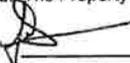
Commercial General Liability Insurance

Lessee elects to participate in the Commercial General Liability Insurance Program, whereby Lessee will receive insurance coverage through American Southern Insurance Company ("Insurer") and administered by Allen Insurance Group ("Agent"). The Lessee acknowledges and agrees that the policy issued by the Insurer is a third party liability policy that covers those amounts that Lessee is legally obligated to pay due to bodily insurance and property damage arising from the proper use and occupancy of Equipment leased from Williams Scotsman up to the policy limits. Coverage is subject to underwriting and specific terms and conditions set forth in the policy. An outline of cover is available upon request. By signing below, Lessee understands and agrees that the Lessor is not providing the insurance coverage and serves only as a billing agent for the Insurer and its Agent; and, accordingly, it assumes no liability therefore.

Signature of Lessee:  Print Name: MARIE LABOUCHAROENNE Date: 3/19/2020

Damage Waiver Program

Lessee elects to participate in the Lessor's Damage Waiver Program. Lessee understands and agrees that under this program, the Lessor waives, for a fee, Lessee's obligation to carry Commercial Property Insurance and Lessee's liability to Lessor for repair or replacement of the modular units leased from Williams Scotsman resulting from loss or damage as specified in Section 12 of the Lease. Lessee remains liable to Williams Scotsman for the amount of the damage deductible per unit of equipment noted above. Please refer to the Agreement for specific details on coverage, exclusions and restrictions on coverage. The Property Damage Waiver is not and shall not constitute a contract for insurance.

Signature of Lessee:  Print Name: MARIE LABOUCHAROENNE Date: 3/19/2020

Please return this signed document with the signed lease agreement



Williams Scotsman, Inc.
 5105 North Oliver Street
 Fremont, NE 68025-7807

Your Williams Scotsman Representative
 Greg Hedrick
 Phone: (402)727-1226 Ext. 47317
 Fax: 402-727-7630
 Email: gjhedric@willscot.com
 Toll Free: 800-782-1500

Contract Number: 1238497
 Revision: 1
 Date: March 12, 2020

Clarifications

*Final Return Charges are estimated and will be charged at Lessor's market rate at time of return for any Lease Term greater than twelve (12) months. **All prices exclude applicable taxes. All Lessees and Leases are subject to credit review. In addition to the stated prices, customer shall pay any local, state or provincial, federal and/or personal property tax or fees related to the equipment identified above ("Equipment"), its value or its use. Lessee acknowledges that upon delivery of the Equipment, this Agreement may be updated with the actual serial number(s), delivery date(s), lock serial number(s), etc, if necessary and Lessee will be supplied a copy of the updated information. Prices exclude taxes, licenses, permit fees, utility connection charges, site preparation and permitting which is the sole responsibility of Lessee, unless otherwise expressly agreed by Lessor in writing. Lessee is responsible for locating and marking underground utilities prior to delivery and compliance with all applicable code requirements unless otherwise expressly agreed by the Lessor in writing. Price assumes a level site with clear access. Lessee must notify Lessor prior to delivery or return of any potentially hazardous conditions or other site conditions that may otherwise affect delivery, installation, dismantling or return of any Equipment. Failure to notify Lessor of such conditions will result in additional charges, as applicable. Physical Damage & Commercial Liability insurance coverage is required beginning on the date of delivery. Lessor is not responsible for changes required by code or building inspectors. Pricing is valid for thirty (30) days.

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- Invoices are due on receipt, with a twenty (20) day grace period. Interest will be applied to all past due amounts.
- Invoices are due on receipt, with a twenty (20) day grace period. Late fees will be applied to all past due amounts.
- Williams Scotsman preferred method of payment is ACH. Payments made by check are subject to a Paper Check Fee, charged on the next invoice following payment by check.
- Williams Scotsman preferred method of invoicing is via electronic transmission. Customers are encouraged to provide an email address or use BillTrust. Invoices sent standard mail are subject to a paper invoice fee, charged on the following invoice.

Lessor hereby agrees to lease to Lessee and Lessee hereby agrees to lease from Lessor Modular Equipment and Value Added Products (as such items are in Lessor's General Terms & Conditions) selected by Lessee as set forth in this Agreement. All such items leased by the Lessee for purposes of this Lease to be referred to collectively as the "Equipment". By its signature below, Lessee hereby acknowledges that it has read and agrees to be bound by the Lessor's General Terms & Conditions (09/01/2019; Revised 09/01/2019) in their entirety, which are incorporated herein by reference and agrees to lease the Equipment Lessor subject to the terms therein. Although Lessor will provide Lessee with a copy of the General Terms & Conditions upon written request, Lessee should print copies of this Agreement and General Terms & Conditions for recordkeeping purposes. Each party is authorized to accept and rely upon a facsimile signature, digital, or electronic signatures of the other party on this Agreement. Any such signature will be treated as an original signature for all purposes; shall be fully binding. The undersigned represent that they have the express authority of the respective party they represent to enter into and execute this Agreement and bind the respective party thereby.

Invoicing Options (select one)

Paperless Invoicing Option
 Williams Scotsman prefers electronic invoicing, an efficient, convenient and environmentally friendly process. To avoid fees, provide us with the proper email address for your invoices.

A/P Email: dana.crawford-smith@nebraska.gov
 A/P Email on File: _____

Standard Mail Option
 Customer prefers to receive paper invoice via mail. Fees may apply. Invoices will be mailed to:

301 CENTENNIAL MALL S
 LINCOLN Nebraska 68508-2529

Enter a new billing address: _____

Signatures

Lessee::	State of NE Department of Health & Human	Lessor:	Williams Scotsman, Inc.
Signature:		Signature:	Chris Corey
Print Name:	MARC VANDUCHYNNE	Print Name:	Chris Corey
Title:	FACILITIES DIRECTOR	Title:	Legal Contracts Analyst
Date:	3/19/2020	Date:	3/25/2020
PO#			



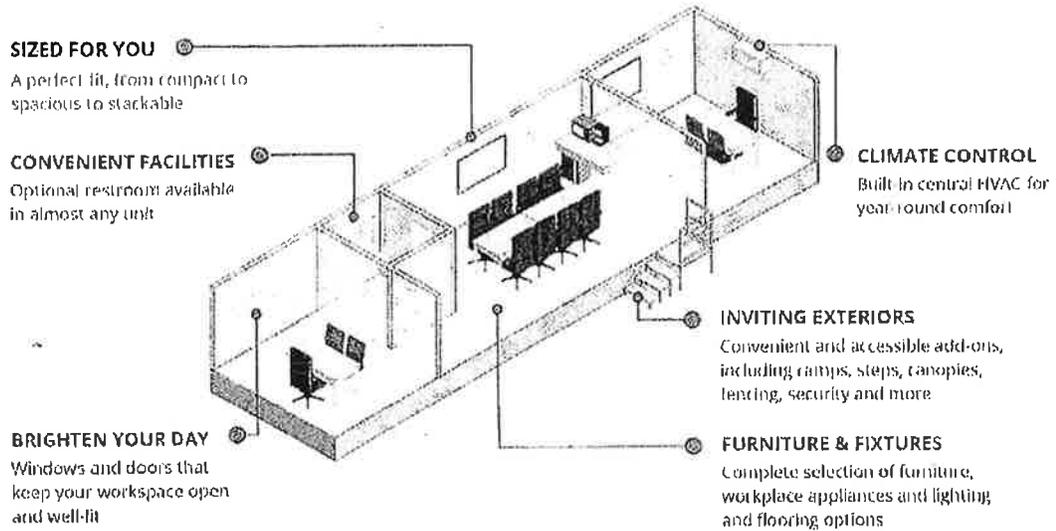
Williams Scotsman, Inc.
 5105 North Olliver Street
 Fremont, NE 68025-7807

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 Toll Free: 800-782-1500

Contract Number: 1239497
Revision: 1
Date: March 12, 2020

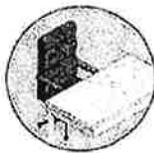
WILLIAMS SCOTSMAN: THE FULLY STREAMLINED SPACE SOLUTION

When it's time to be productive on a project, you need temporary space that's as ready as you are. Our modular solutions are complete to the last detail, so you can forget about building logistics and focus on the job at hand. One call to Williams Scotsman and you're ready to work.

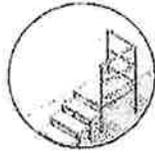


READY-TO-WORK OPTIONS

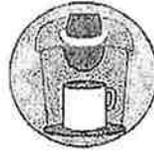
Our in-house selection of amenities not only outfits your space for comfort, security and productivity - it also eliminates extra work for you.



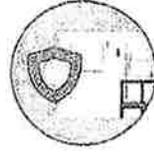
FURNITURE



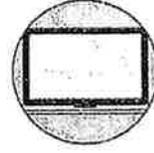
EXTERIORS



APPLIANCES



COVERAGE



TECH SOLUTIONS

APPENDIX 29

JUVENILE SERVICES DIVISION
FY2019 DETAILED ANALYSIS
REPORT



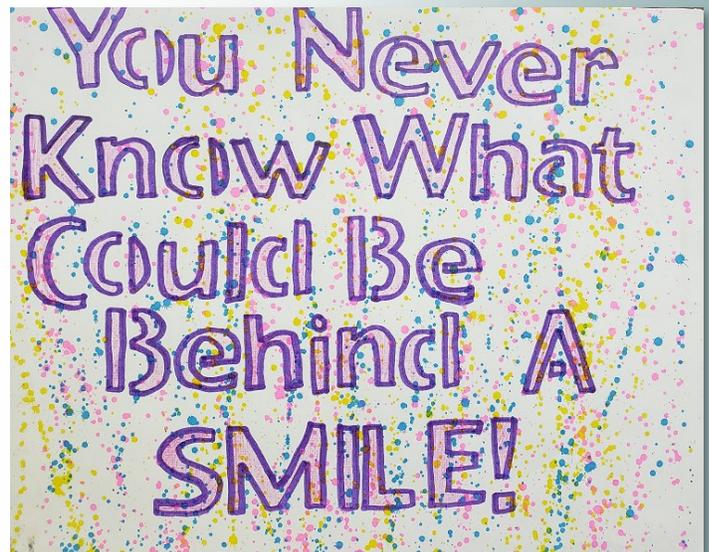
STATE OF
NEBRASKA
JUDICIAL BRANCH

Administrative Office
of the Courts & Probation

Juvenile Services Division

Fiscal Year 2019

Detailed Analysis



Artwork created by youth on probation

JUVENILE SERVICES DIVISION

DETAILED ANALYSIS



STATE OF
NEBRASKA
JUDICIAL BRANCH
Administrative Office
of the Courts & Probation

Fiscal Year 2019

It is an exciting time in juvenile justice! Many national experts have recently published materials that synthesize research and translate the application of essential components for probation success. While Nebraska continues our Juvenile Justice Reform Initiative, our focus includes a renewed emphasis on relationships with youth and families; enhanced skill building; cognitive programming and rehabilitative services; taking advantage of opportunities for graduated response to minor behaviors; and embracing our provider partners and community organizations. As we propel forward, it is important to consider new research that points toward improved success for youth under supervision. Critical next steps must include system collaboration to enhance Nebraska’s efforts to divert low risk youth and those who don’t pose a serious community safety risk from court involvement. This reduction of youth who come to the attention of the court would provide an opportunity to reduce the caseload size for juvenile probation officers. These smaller caseloads would allow officers time to build strong relationship and more effectively target high risk behaviors for youth under their supervision. I look forward to another year as national leaders continuing in our efforts of transforming juvenile justice practices.



Sincerely,

Jeanne K. Brandner

Deputy Administrator, Juvenile Services Division

Juvenile Probation Outcomes

The goal of juvenile probation in Nebraska is to prevent juveniles from returning to the juvenile justice system or entering the adult criminal justice system by:

- Engaging juveniles and their families in the court process;
- Eliminating barriers to accessing effective treatment and services; and
- Partnering with educational and community stakeholders.

DETAILED ANALYSIS STRUCTURE

Initial Entry Stages of the Juvenile Justice System:

Intake	Offense	Investigation/Assessment	Disposition
--------	---------	--------------------------	-------------

Total Youth Served within the Juvenile Justice System:

Total Active Population	Case Management / Graduated Response	Home-based Services	Out-of-Home Placement	Discharge / Recidivism
-------------------------	--------------------------------------	---------------------	-----------------------	------------------------

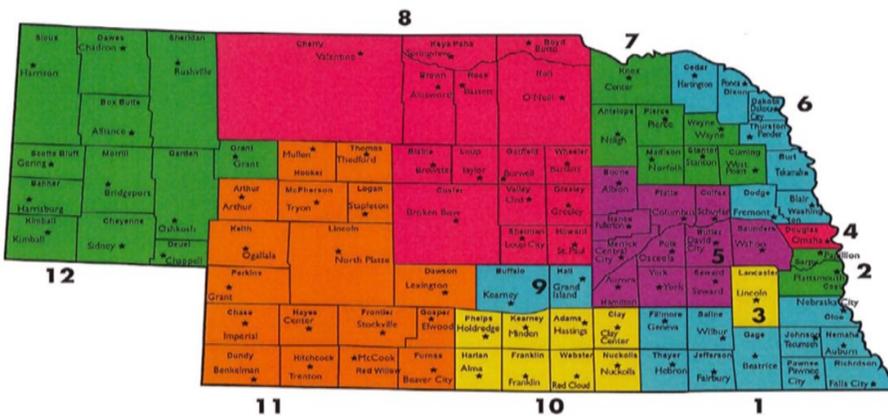
Juvenile Services Division Detailed Analysis

Fiscal Year 2019

"We, the leaders in community corrections, juvenile and restorative justice, are unified in our dedication to delivering a system of seamless services which are founded on evidence-based practices and valued by Nebraska's communities, victims, offenders and courts. We create constructive change through rehabilitation, collaboration, and partnership in order to enhance safe communities.

- Nebraska State Probation Mission

Map of Nebraska Probation Districts



Artwork created by youth on probation

Table of Contents

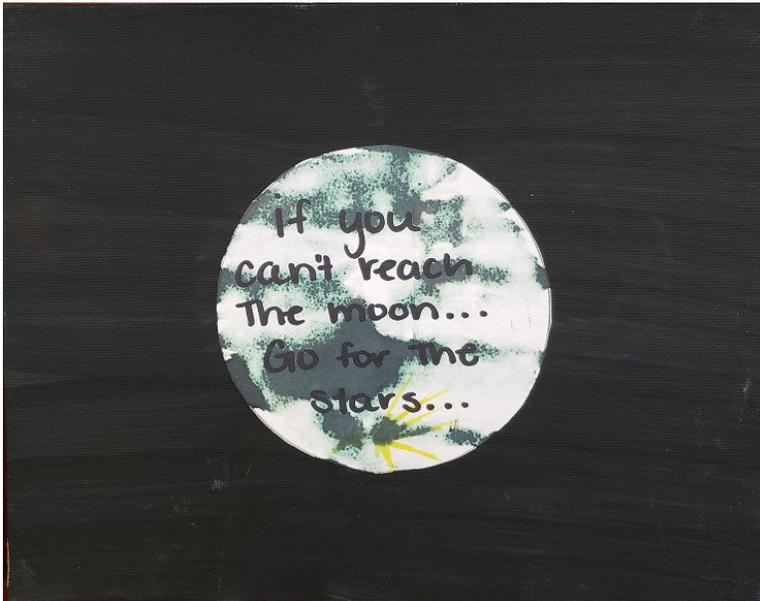
5	Intake
6	Offenses
7	Investigations and Assessments
9	Disposition
11	Total Active Population
12	Case Management
14	Graduated Response
15	Out-of-Home Placement
18	Discharge and Recidivism

Fiscal Year 2019

Initial Entry Stages of the Juvenile Justice System

NEBRASKA PROBATION VISION

Be a nationally recognized leader in the field of justice
committed to excellence and safe communities.

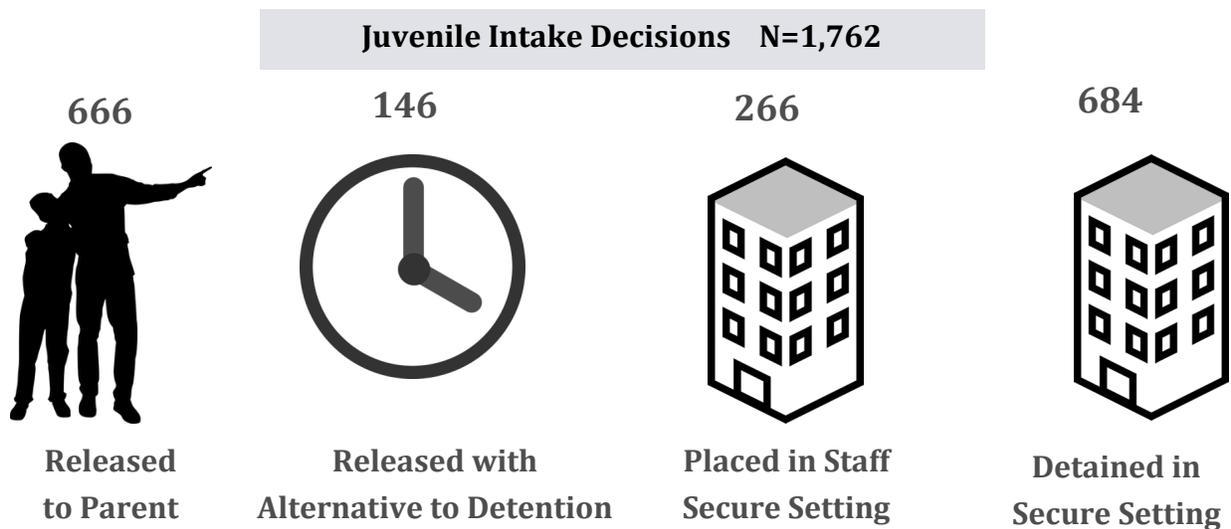


Artwork created by
youth on probation

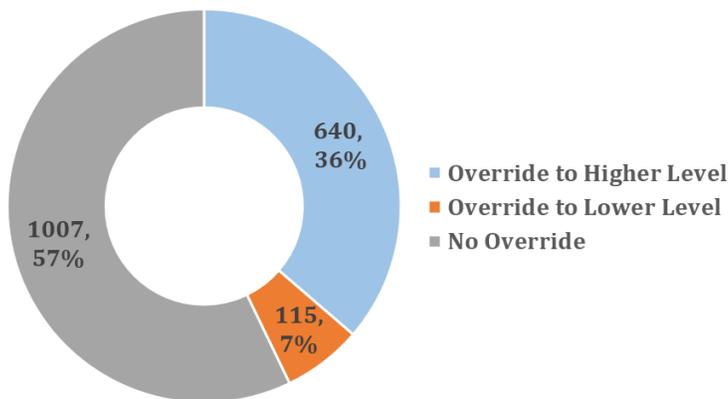
Initial Entry Stages of the Juvenile Justice System

Juvenile Intakes

Nebraska State Statutes § 43-250 & 43-260 authorize Probation to manage the juvenile intake function. Public safety and accountability are the primary goal of the juvenile intake process. This is accomplished through a standardized risk assessment tool that is administered when law enforcement contacts Probation for the purpose of determining an intake decision. The detention screening instrument examines the youth's risk of reoffending or failing to appear for a subsequent court hearing. Juvenile intake is designed to identify and offer appropriate services which are the least intrusive and least restrictive for the youth and their family, and to balance the youth's best interest and safety of the community.



Juvenile Intake Tool Override Decisions



Overrides occur when there are special circumstances that a probation officer considers to authorize a higher or lower intervention than recommended by the intake tool. Overrides are utilized to ensure community safety while utilizing the least restrictive options available and must be approved by a supervisor.

Juvenile Justice Reform: Positive Progress

Reception Center Pilot in Lancaster County

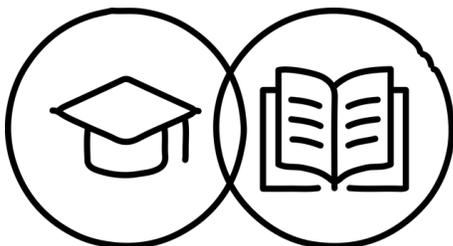
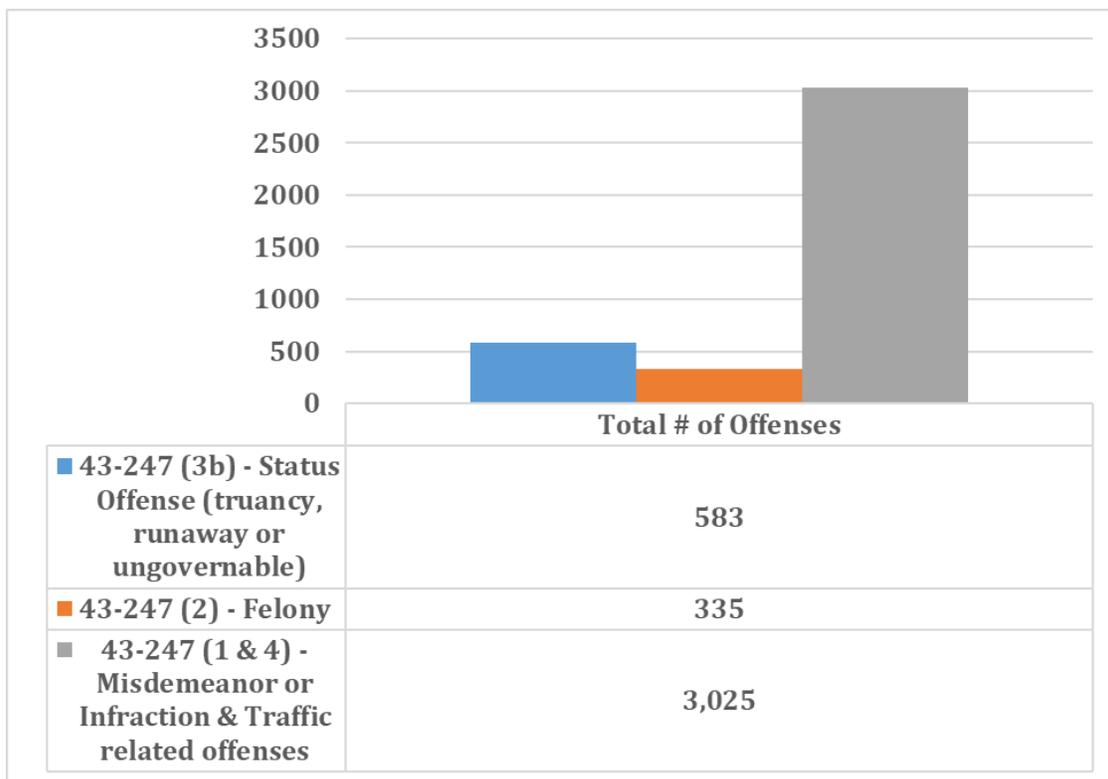
As supported by the Annie E. Casey Foundation, a Reception Center was piloted in Lancaster County. The Reception Center is a program that provides a short term, safe and neutral area for law enforcement, probation officers, youth, families, and other necessary stakeholders to assess the need for detention, detention alternatives or other community-based services through an intake. Currently, the pilot has allowed for over 40 youth to receive an intake interview at the reception center and in a safe and neutral environment.

Initial Entry Stages of the Juvenile Justice System

Offenses

The Administrative Office of the Courts and Probation is responsible for youth who are subject to supervision by a probation officer and have been adjudicated under one or more of the following subdivisions of Nebraska Revised Statute § 43-247 (1), (2), (3b) and (4). Each subdivision refers to the type of act that brought the youth before the court, and the chart below identifies the percentage of youth who were adjudicated under each category. Youth may be adjudicated for multiple offenses which are represented in the data below. The majority of youth placed on probation are adjudicated under subdivision (1) for offenses which would be considered a misdemeanor or infraction.

Offenses Resulting in Being Placed on Probation N=3,943



Of the 583 status offenses in fiscal year 2019, 93% were for habitual truancy.

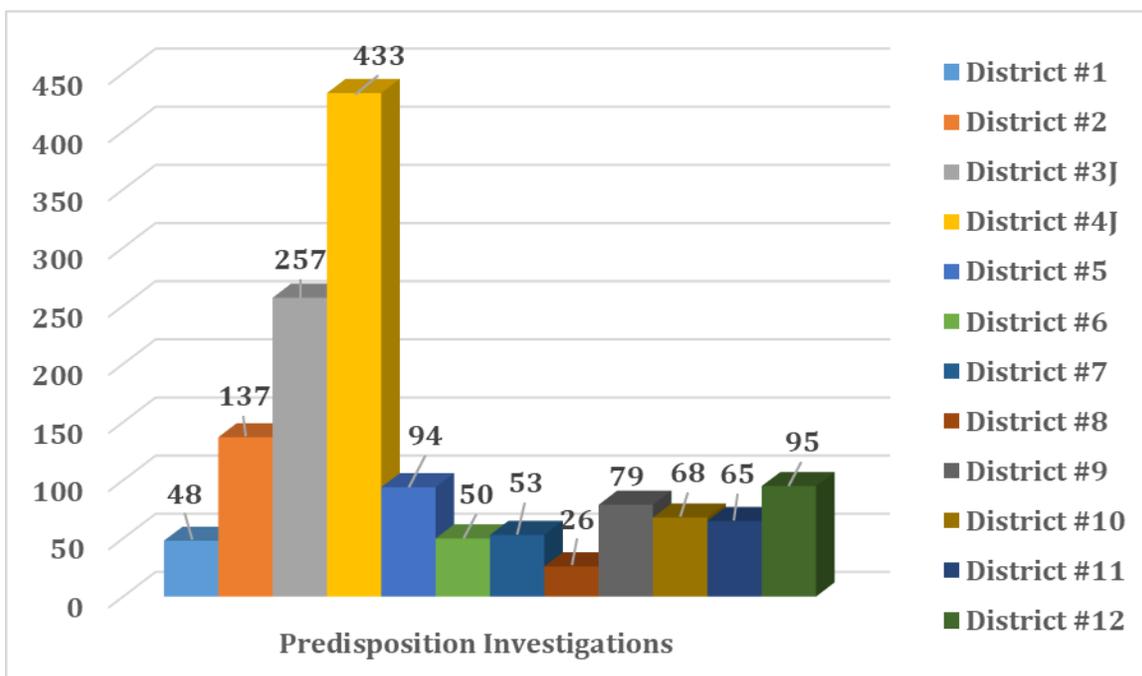
Initial Entry Stages of the Juvenile Justice System

Youth Investigations and Assessed Risk Level

Investigations

Probation utilizes a validated risk assessment, as well as screening instruments and evaluations, to assist in the completion of a comprehensive predisposition investigation. The investigation assists the court in identifying probation conditions that can target the youth's risk and needs, as well as the services that will be most effective in reducing the juvenile's risk for continued delinquent behaviors.

Predisposition Investigations Completed by District N=1,405



Juvenile Justice Reform: Positive Progress

Streamlining the Predisposition Investigation (PDI)

One essential role of a probation officer is to complete a comprehensive investigation including dispositional recommendations. The PDI has recently been streamlined to focus on strengths, risk to recidivate, needs and responsivity, and also clarifies the recommendations to ensure delivery of a more succinct and focused report. This was accomplished by reviewing multiple PDI reports from other jurisdictions and receiving feedback from Nebraska judiciary. The final report format has been approved and will be trained statewide.

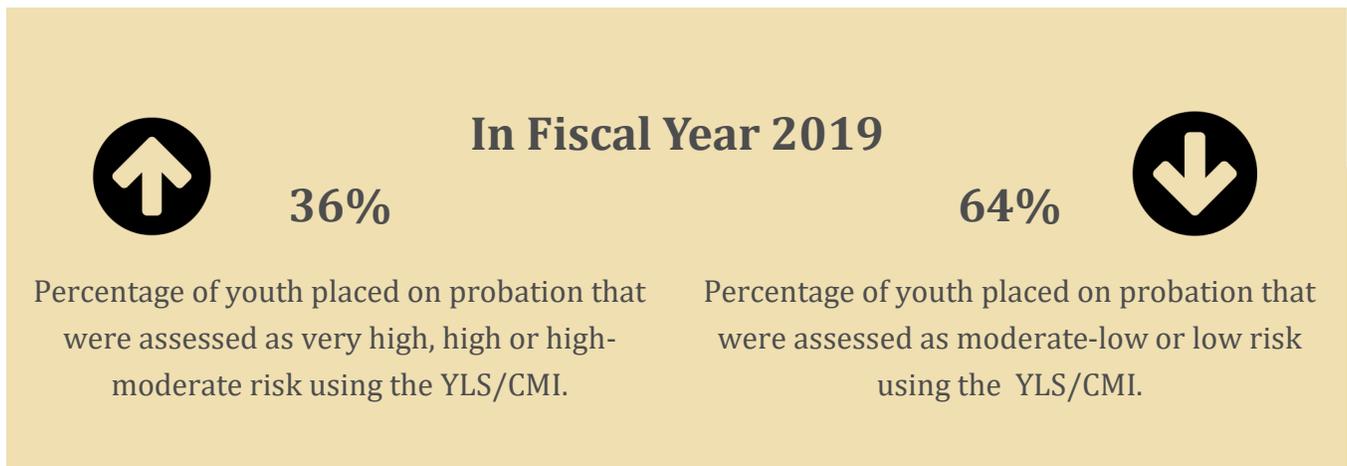


Initial Entry Stages of the Juvenile Justice System

Youth Investigations and Assessed Risk Level

Assessing Risk Level

Probation staff utilize the Youth Level of Service/Case Management Inventory (YLS/CMI) validated risk assessment to analyze a youth's propensity to continue unlawful behaviors. The YLS/CMI considers eight criminogenic needs; these include: prior and current offenses/dispositions; family circumstances/parenting; education/employment; peer relations; substance abuse; leisure/recreation; personality/behavior; and attitudes/orientation.



The Big 4 Criminogenic Needs and the Driver

Although there are eight criminogenic needs that the YLS/CMI identifies, research has shown that four of these impact behavior change and risk reduction more significantly. They are referred to as the "BIG 4." The BIG 4 includes family circumstances/parenting, peer relations, personality/behavior and attitudes/orientation. Finding the single most influential need or "Driver" is essential to risk reduction as not all criminogenic needs influence behavior equally. To enhance skills, all investigation and specialized probation officers were trained on how to identify the "Driver" over the past fiscal year and to use the Case Plans or Success Plans targeted for each individual youth. Over the next fiscal year data will be gathered which will focus on the driver and skill-training to enhance behavior change.



The Iceberg = Driver

Although some things are apparent above the surface, what's lurking below is larger and more significant.

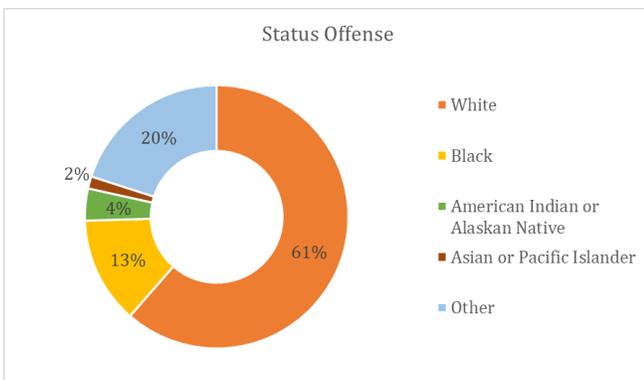
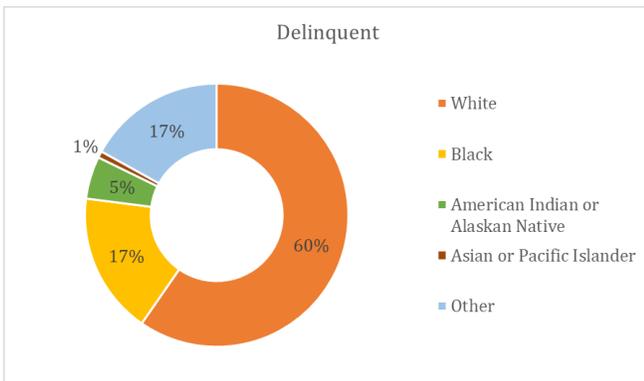
Initial Entry Stages of the Juvenile Justice System

Disposition Population and Demographics for Fiscal Year 2019

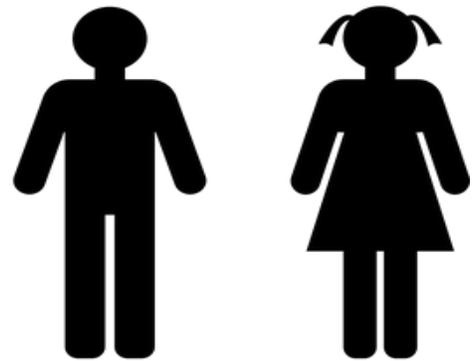
The demographic information below reflects youth placed on probation for delinquent and status related acts. There were 2,397 youth placed on probation during fiscal year 2019. A status youth comes before the court for non-delinquent behaviors such as habitual truancy, running away from home, or other behaviors a parent is not able to control. Beginning July 1, 2017, youth who are ten years and under at the time a traffic, infraction, status, misdemeanor or felony act is committed are no longer eligible for juvenile court jurisdiction.

Youth Placed on Probation by Age			
Age of Youth	Delinquent	Status	Total
11	2	2	4
12	44	13	58
13	117	21	138
14	225	68	293
15	393	93	486
16	453	151	604
17	495	169	664
18	134	17	151
Total	1,863	534	2,397

Probationers by Race



Probationer by Male/Female



1,352 Delinquent & 300 Status
 511 Delinquent & 234 Status

Probationers by Ethnicity	Delinquent	Status
Hispanic Origin	476	141
Not of Hispanic Origin	1,387	393
Total	1,863	534

Fiscal Year 2019

Total Youth Served within the Juvenile Justice System



Artwork created by youth on probation

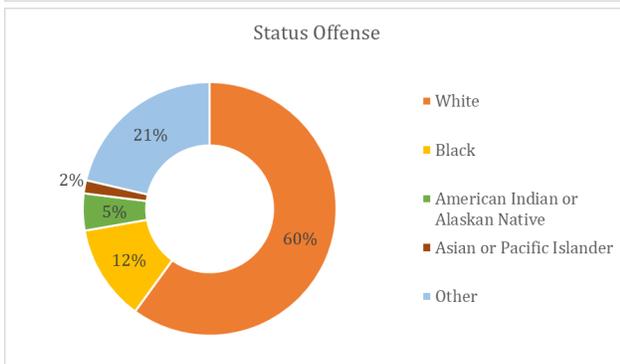
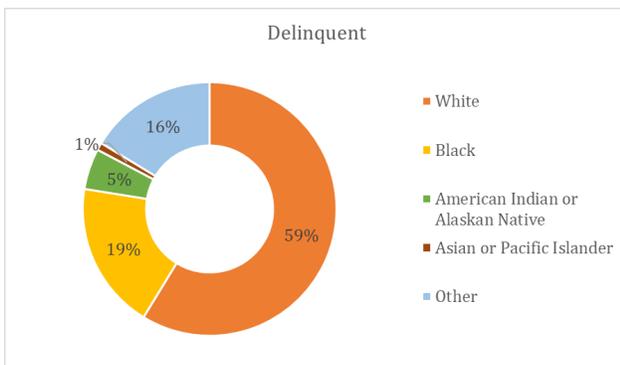
Total Youth Served within the Juvenile Justice System

Total Active Population Demographics

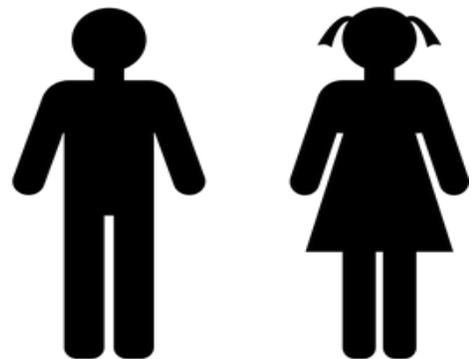
In this section of the report, all data will represent the total population of youth served on probation which includes youth already on probation from the previous year. There were 4,623 youth served during fiscal year 2019. Below is demographic data for the population of youth served by probation separated by delinquent and status related offenses. As previously noted, a status youth comes before the court for non-delinquent behaviors such as habitual truancy and running away behaviors.

Total Youth Served by Age			
Age of Youth	Delinquent	Status	Total
11	15	5	20
12	79	26	105
13	241	58	299
14	410	110	520
15	669	182	851
16	859	277	1,136
17	947	237	1,184
18	448	60	508
Total	3,668	955	4,623

Total Youth Served by Race



Total Youth Served by Male/Female



**2,636 Delinquent
&
510 Status**

**1,032 Delinquent
&
445 Status**

Ethnicity	Delinquent	Status
Hispanic Origin	905	262
Not of Hispanic Origin	2,763	693
Total	3,668	955

Total Youth Served within the Juvenile Justice System

Case Management

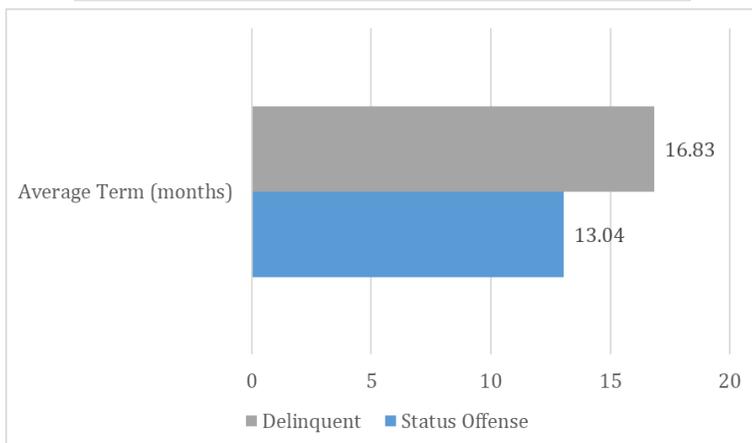
Youth in the juvenile justice system receive individualized supervision and services which are core to effective case management. Probation officers that supervise youth are highly skilled and provide many interventions including cognitive restructuring groups, motivational interviewing and field visits. Therefore, dosage and service duration are key, focusing on the *right service*, at the *right time*, for the *right youth* is imperative to creating individualized case plans for youth on probation.

Juvenile Justice Home-Based Initiative

The expansion of Home-based services in Nebraska kicked off April of 2017. Since that time, two evidence informed services have been expanded. These services are Multi-systemic Therapy (MST) and the Boys Town Ecological In-Home Family Treatment (EIHFT). In this fiscal year, the number of families served and services accessed increased when EIHFT was replicated in Judicial District 12, which includes Scotts Bluff County.



Length of Time on Probation Discharged Fiscal Year 2019



Juvenile Justice Reform: Positive Progress

Nebraska Aggression Replacement Training (NE-ART)

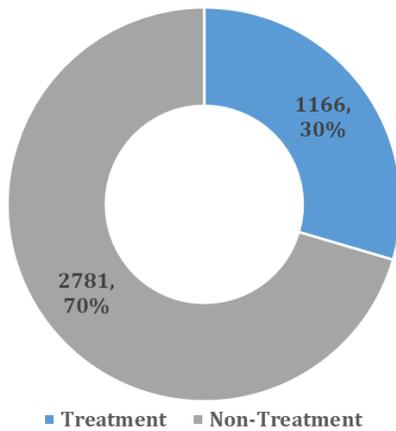
In April of 2019, two international facilitators trained the PEACE-ART curriculum—a cognitive restructuring group—to Specialized Probation Officers and Youth Rehabilitation and Treatment Center (YRTC) staff. The training focuses on three components: Social Skills, Anger/Self Control Chain, and Moral Reasoning/Empathy and are taught through repetition, incentivizing and skill practice. This curriculum is the only of its kind that has been researched specifically on adolescents and has shown a 33% reduction in recidivism when facilitated with fidelity.

Total Youth Served within the Juvenile Justice System

Case Management—Financial Assistance

Probation staff work with registered service providers statewide to ensure youth have access to quality behavioral health and non-clinical supportive services. Financial assistance is available to ensure youth can access services. With targeted services, supervision outcomes can improve the youth’s risk of recidivism is reduced. Treatment services may include: substance use treatment (out-patient or residential), counseling, medication management and mental health treatment. Non-treatment services may include: educational tutoring, electronic monitoring, tracker, shelter care, foster care and transportation.

Service Type per Youth Receiving Financial Assistance



Juvenile Justice Reform: Positive Progress Oral Fluid Testing for Substance Use Pilot

Traditional methods of substance use testing, although an essential tool for behavior change, has challenges specific to youth. Therefore, an “oral fluid” pilot was utilized to ensure it was more youth-centered and less intrusive, resulting in an assessment for possible statewide expansion.

In Fiscal Year 2019

- ◆ Of the youth served by probation, 1,166 accessed financial assistance for treatment services.
- ◆ Of the youth served by probation, 2,781 accessed financial assistance for non-treatment services.

Service provision for youth funded by alternative streams is not represented (i.e. Medicaid, Private Insurance, etc.). Youth may appear in both treatment and non-treatment counts. Detention is not included.

Average Annual Cost of Probation per Youth

	Overall Average per Youth	Monthly Average per Youth
In-Home/Community-Based Services	\$ 4,154.93	\$ 346.24
Out-of-Home Services	\$ 21,312.60	\$ 1,776.05

*For fiscal year 2019, the average daily cost for supervising a youth was \$24.43 (includes personnel and operating expenses). Services funded by Probation are tracked through vouchers.

Total Youth Served within the Juvenile Justice System

Graduated Response

Research continues to build evidence supporting the creation of age appropriate graduated responses for youth in the juvenile justice system. Due to this, Nebraska Revised Statute § 43-286.01 was enhanced in 2017 to support the creation of a standardized matrix for youth incentives and sanctions. This is essential as we know working with youth to change behavior can take time and have multiple differing responses. If youth are unable to change their behavior and continue to violate the court order, an alleged probation violation can be submitted to the court.

Motion to Revoke Probation: per youth court case

District/Violation Type	Law	Technical
1	35	23
2	31	33
3J	55	166
4J	117	290
5	31	11
6	53	48
7	82	69
8	8	10
9	105	19
10	50	15
11	81	26
12	55	21
Total	703	731

TECHNICAL OR LAW VIOLATION

Q. What is the difference between a technical violation and a Law violation?

A technical violation is when a youth violates a court condition or a part of their probation terms. For example, a youth has a positive drug or alcohol test, misses scheduled treatment, or is truant from school.

A law violation means that the youth obtained a new delinquent offense while on probation (i.e. shoplifting, theft, assault, etc.).

Juvenile Justice Reform: Positive Progress

Robert F. Kennedy (RFK) Resource Center for Juvenile Justice Technical Assistance

In March 2019, after completion of the Probation System Review in Lancaster County, intensive technical assistance began to assist in the implementation of five prioritized recommendations. The reform effort priorities are:

1. Family engagement
2. Positive youth development
3. Probation order reform
4. Detention utilization
5. Case closure processes

The five items above have workgroups which will lead implementation of the recommendations, as well as to create a workgroup purpose statement, identify desired outcomes and create supporting data to show progress. Additionally, the technical assistance includes national expert support focused on implementation science, data capacity, trauma (screening and provider access) and probation order reform.



Total Youth Served within the Juvenile Justice System

Out-of-Home Placement Demographics

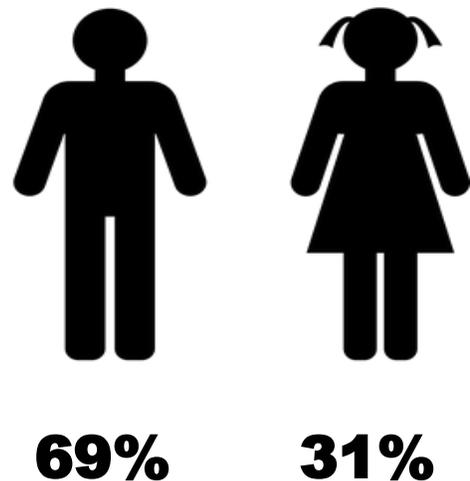
The Juvenile Justice Reform Initiative prioritizes the reduction of youth in out-of-home placements. Efforts continue to enhance and expand access to home-based services which will reduce the number of youth in placements. With this priority, there are still times when an out-of-home placement is needed to provide for community safety and treatment services. These out-of-home placements include congregate care (treatment and non-treatment), foster care, detention alternatives, detention, runaway, youth residential treatment centers and jail. In fiscal year 2019, 1,980 total youth were served in an out-of-home placement for one day or more.

Age at Out-of-Home Admission

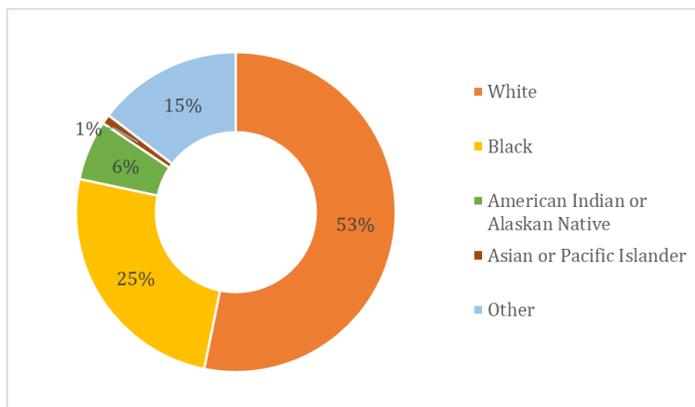
Placed on Probation by Age	
Age of Youth	Total
11	8
12	42
13	135
14	238
15	393
16	483
17	477
18	204
Total	1,980

Out-of-Home Placement by Ethnicity	Total
Hispanic Origin	436
Not of Hispanic Origin	1,544
Total	1,980

Out-of-Home Placement by Male/Female



Out-of-Home Placement by Race

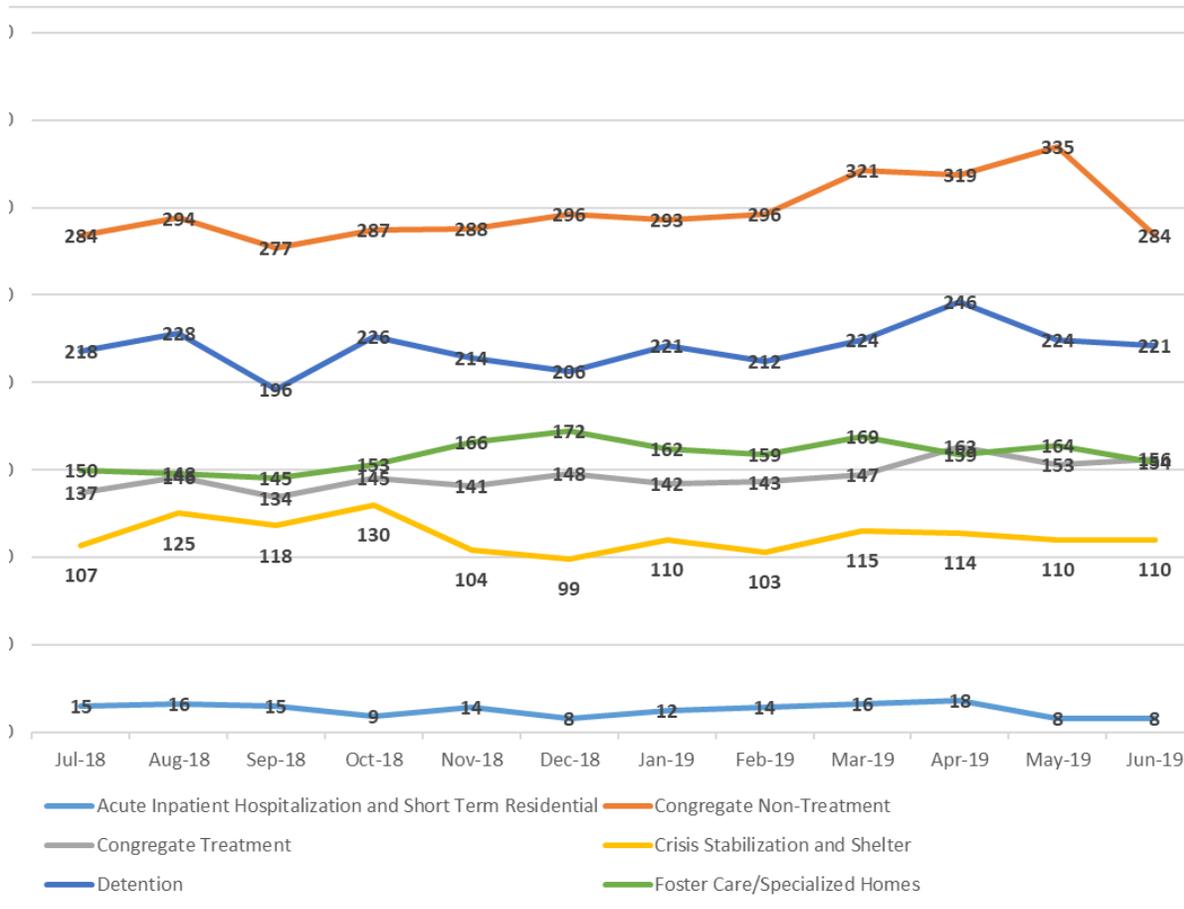


Total Youth Served within the Juvenile Justice System

Out-of-Home Placement

When a youth is placed out-of-home for one day or more, the probation officer works immediately with the placement staff, youth and family to develop a plan for the youth to transition back to their home and local community. This is especially important when a youth is placed out-of-state for services.

Total Number of Youth in Out-of-Home Placement per Month



Congregate: Treatment includes: psychiatric residential treatment facilities, and treatment group homes; **Non-Treatment** includes: group homes (A, B and developmental disability), maternity group homes (parenting and non-parenting), and independent living

Foster Care: Developmental disability, extended family home, professional foster care, emergency foster care, foster care, relative/kinship and respite

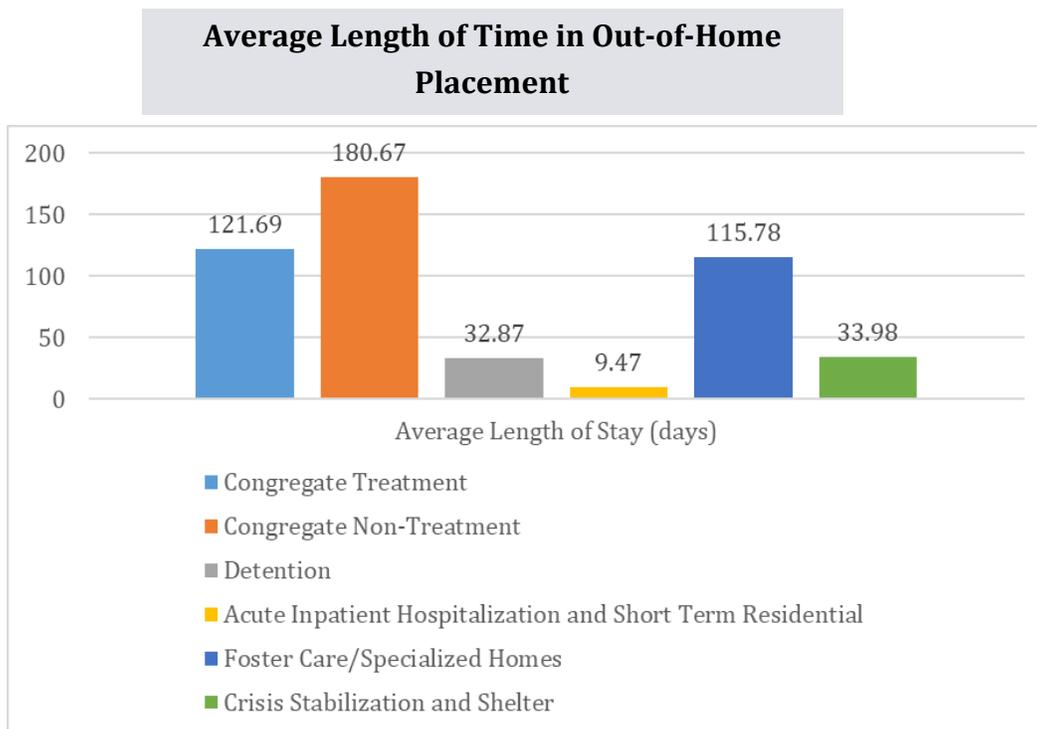
Detention: secure and staff secure

In fiscal year 2019, of youth placed out-of-home, 179 youth or 9% were placed in treatment or non-treatment congregated care out of the state of Nebraska.

Total Youth Served within the Juvenile Justice System

Out-of-Home Placement

When a youth is placed out-of-home, each service has an identified “average length of time” detailed in the *Juvenile Services Guide*. This “average length of time” reflects the optimal time the service has shown evidence to achieve the service outcomes with the overarching goal of behavior change and risk reduction. Additionally, research demonstrates that short-term placements such as detention should focus on immediate community safety risks and have shown to increase risk if utilized for low risk youth and for long periods of time.



Juvenile Justice Reform: Positive Progress

Youth and Families in Need Receive Support

When a youth is placed out of their family home, it is essential the youth has personal items for that transition. Families are not always able to provide luggage for youth and their belongings end up being brought to the placement in a trash bag. The Juvenile Division began providing duffel bags for youth to carry items they need at the placement and to support families who are not able to provide luggage for their youth.

20%

of youth are detained
for 5 days or less.



Total Youth Served within the Juvenile Justice System

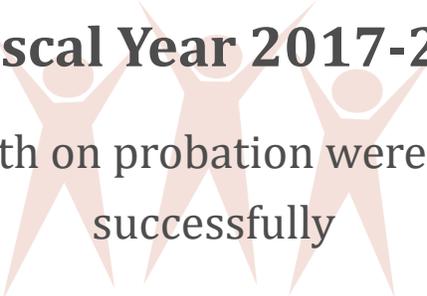
Discharge from Probation

When a youth is placed on probation, it is key that a skilled probation officer work closely with the youth to ensure all court ordered probation conditions are successfully completed. This should result in a reduction of the youth's risk and a change in those behaviors that brought the youth before the court. Once a youth has completed his or her probation conditions, a judge releases the youth from probation supervision. A youth may be discharged from probation successfully or unsuccessfully or probation may be revoked. A basic measure of success for juvenile probation is the number of youth that successfully complete probation.

In fiscal year 2019, 3,372 juvenile court cases were discharged from probation (153 youth were released for an "other" discharge option). Examples include district override or adjudication transfer.

In Fiscal Year 2017-2018

73% of youth on probation were discharged successfully



District/Discharge Type	Successful Discharges	Unsuccessful/Revoked Discharges
1	104	56
2	220	44
3J	228	96
4J	491	223
5	217	46
6	164	45
7	152	48
8	49	6
9	257	82
10	81	46
11	238	103
12	163	60
Total	2,364	855

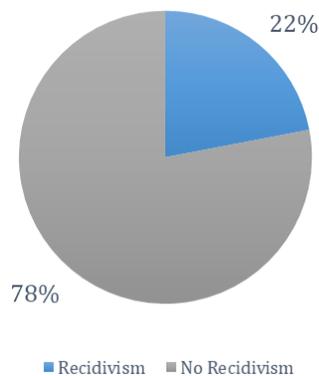
In fiscal year 2019, 4% of the youth discharged reached the age of majority.

Total Youth Served within the Juvenile Justice System

Recidivism

Recidivism is nationally supported as a way to measure impact of the juvenile justice system. Over the past few years, since implementing the Juvenile Justice Reform Initiative, the Administrative Office of the Courts and Probation has been measuring recidivism for youth who are placed on probation. Additionally, the Supreme Court created a standard definition for recidivism which is documented below. It is essential to note that there is not a national standard definition for recidivism, however experts suggest using a consistent definition over time to determine impact.

Recidivism Rates for Youth Successfully Discharged from Probation



Recidivism for youth successfully discharged from probation reduced by 2% as compared to last fiscal year.

Nebraska Supreme Court Recidivism Definition

For the purpose of accurately assessing post-program recidivism across justice programs, Nebraska State Probation and Nebraska Problem-Solving Courts shall utilize the following uniform definitions of recidivism for all adults and juveniles within their respective programs.

(A) Adults:

As applied to adults, recidivism shall mean a final conviction of a Class I or II misdemeanor, a Class IV felony or above, or a Class W misdemeanor based on a violation of state law or an ordinance of any city or village enacted in conformance with state law, within 3 years of being successfully released.

(B) Juveniles:

(1) As applied to juveniles, recidivism shall mean that within 1 year of being successfully released from a probation or problem-solving court program the juvenile has:

(a) an adjudication pursuant to Neb. Rev. Stat. § 43-247(1) or (2).

(b) for a juvenile 14 years or older, a final conviction for a Class W misdemeanor based on a violation of state traffic laws or ordinances of any city or village enacted in conformance with state law; or

(c) a prosecution and final conviction as an adult for any crimes set forth in subsection (A) above.

(2) For juveniles that age out of the juvenile system within 1 year of program exit and who did not recidivate post-program as juveniles, the adult definition of post-program recidivism, including any drug-related or alcohol-related conviction, shall apply.



STATE OF
NEBRASKA
JUDICIAL BRANCH

Administrative Office
of the Courts & Probation

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**Administrative Office of the
Courts and Probation**

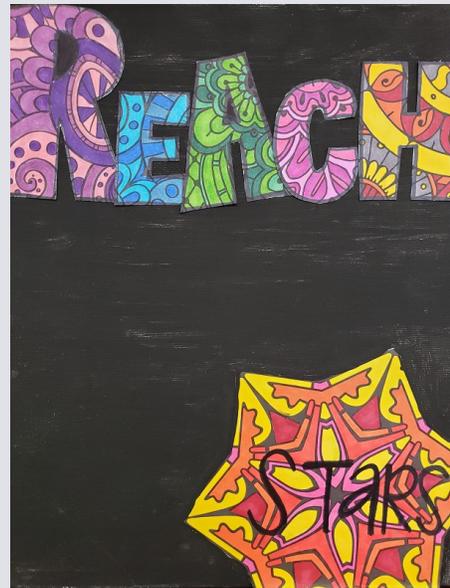
Juvenile Services Division

521 S 14th Street
5th Floor
Lincoln, NE 68508

(402)471-4816

Visit us on the web at:

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juvenile-services](http://www.supremecourt.nebraska.gov/10824/juvenile-services) (ctrl + click)



Artwork created by
youth on probation

APPENDIX 30

DHHS/NE DEPT. OF EDUCATION

INTERAGENCY AGREEMENT

MARCH 6, 2020

INTERAGENCY AGREEMENT**BETWEEN****THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
AND****THE NEBRASKA DEPARTMENT OF EDUCATION**

This interagency agreement, including any addenda and attachments (collectively, "Agreement") is entered into by and between the Nebraska Department of Health and Human Services (DHHS), and The Nebraska Department of Education ("Agency").

AUTHORITY: This agreement is authorized by Neb. Rev. Stat. § 13-807, which provides in relevant part that "any one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking which at least one of the public agencies entering into the contract is authorized by law to perform." DHHS - Office of Juvenile Services has the legal authority for the oversight and control of the youth rehabilitation and treatment centers (see Neb. Rev. Stat. § 43-404).

PURPOSE: The purpose of this Agreement is to formalize collaboration between the Department of Health and Human Services and the Nebraska Department of Education and to authorize the Nebraska Department of Education to oversee and administer the schools and education programs provided by the DHHS facility-based schools. This collaboration applies to the schools and education programs operated by the Youth Rehabilitation and Treatment Centers (YRTC), the Hastings Regional Center JCDP, the Lincoln Regional Center - Whitehall Campus, and any additional facility-based schools DHHS may operate during the term of this agreement.

FUNDING: This Agreement involves state funds.

HIPAA: This Contract involves the sharing of or access to Protected Health Information and includes a Business Associate Agreement (Addendum A) for compliance with the Health Insurance Portability and Accountability Act (HIPAA).

1. DURATION

- 1.1. **TERM.** This Agreement is in effect from the later of March 1, 2020 or the date this Agreement is signed by the parties, whichever is later, through August 31, 2020.
- 1.2. **TERMINATION.** This Agreement may be terminated, in whole or in part, at any time upon mutual written consent, or by either party for any reason upon submission of written notice to the other party at least thirty (30) days prior to the effective date of termination. Either party may also terminate the Agreement to the extent otherwise provided herein. Upon either termination or expiration of this Agreement, the Parties shall confer as to the disposal of any real or personal property involved in the Agreement, and agree, in writing as to the manner of method of disposal.

2. PAYMENT TERMS AND STRUCTURE

- 2.1. **TOTAL PAYMENT.** DHHS shall pay Agency a total amount not to exceed \$500000 (Five hundred thousand dollars) for the work performed under this Agreement.
- 2.2. **PAYMENT STRUCTURE.** Payment shall be structured as follows.
 - 2.2.1. Upon execution of this agreement, DHHS will advance Agency the first month of expenses to fund initial costs associated with this agreement, per the budget included in Attachment 1;
 - 2.2.2. Agency will submit an invoice after 30 days, and each 30 days thereafter. The first month's expenses will be offset by initial advance to Agency;
 - 2.2.3. DHHS will have 30 days to review each submitted invoice and approve reimbursement of all reasonable costs that are consistent with the budget in Attachment 1.

2.2.4. Costs will be reimbursed to Agency no later than 45 days after receipt of an invoice containing sufficient detail to support payment.

- 2.3. BUDGET ADJUSTMENTS. Agency will have the discretion to transfer funds between individual cost categories, provided the cumulative result of such transfers during the term of this Contract does not exceed the total cap of his agreement. Any transfers that would cumulatively result in the Agency exceeding this cap must have prior written approval from DHHS

3. RESPONSIBILITIES

- 3.1. DHHS shall do the following:

- 3.1.1. Grant Agency the authority in conjunction with the DHHS Chief Executive Officer or designee for the administrative oversight of the DHHS facility-based schools and education programs approved or accredited under the NDE's regulations for such schools and programs.
- 3.1.2. Provide Agency with full access to the DHHS facility-based Schools, the Schools' staffs, the facilities, academic information, financial information, personnel records, and any other requested information in a timely manner.
- 3.1.3. Transfer to Agency the day-to-day supervisory responsibility for the DHHS staff identified in programs covered by this agreement. All existing DHHS employees at the schools, and such employees' successors or replacements in the same positions, shall remain employees of DHHS and subject to DHHS employment bargaining agreements, personnel rules and policies & procedures, etc., as applicable. DHHS and Agency will collaborate with each other to address personnel concerns and recommendations for further action.
- 3.1.4. Perform the following functions after collaboration and consultation with Agency with respect to the DHHS positions in the schools:
- 3.1.4.1. Make changes in the HR systems;
- 3.1.4.2. Provide Agency with information on performance evaluation completions;
- 3.1.4.3. Make any necessary changes in employee computer systems and enter data into personnel files regarding discipline actions;
- 3.1.4.4. Provide payroll services; and
- 3.1.4.5. Work collaboratively with Agency for the recruitment and selection of any DHHS positions in the facility-based schools
- 3.1.5. Provide access and authorities for budget and contract databases and spending decisions made in collaboration with DHHS.
- 3.1.6. Provide Agency with information related to the therapeutic and clinical treatment needs of youth attending the facility-based schools, so that such information can be used to determine the individual student's educational needs.

- 3.2. Agency shall do the following:

- 3.2.1. Appoint a Director of Schools who will report directly to the Commissioner of Education. The Director will hold the credentials required to serve as a public school superintendent in the State of Nebraska, per NDE Rules (92 NAC 21 and 24).
- 3.2.1.1. The Director may appoint and contract with an Assistant Director to oversee the day-to-day operations of the Schools. The Assistant Director will hold, at a minimum, the credentials required to serve as a public school principal in an elementary or secondary school in the State of Nebraska, per NDE Rules (92 NAC 21 and 24).
- 3.2.1.2. The Director may appoint and contract with additional individuals or entities to fulfill the terms of this agreement, subject to Agency approval and the availability of funding for such hirings.
- 3.2.1.2.1. Agency agrees to conduct background checks on any individuals that will be working in the facility-based schools. These background checks will include, at a minimum, a check of the Nebraska Child Abuse and Neglect Central Registry, the Nebraska Sex Offender Registry and the sex offender registry of any state where the individual has resided in the

- past five (5) years, if such registry is not closed, and a criminal background check.
- 3.2.1.2.2. If, upon completion of the background checks, the Agency plans to utilize the individual in the facility-based school, Agency will alert DHHS of any listings on a child abuse registry, sex offender registry or criminal conviction, excluding minor traffic offenses identified in the completed background checks.
 - 3.2.1.2.3. Agency will make a good faith effort to learn whether any individual who will have contact with children in the DHHS facility-based schools has any prior incidents of sexual harassment. If Agency becomes aware of any such incidents, Agency will notify DHHS as promptly as possible, but no later than three (3) days from when the Agency becomes aware of the incident.
 - 3.2.1.2.4. Should the facility-based schools require additional background checks for purposes of compliance with the Prison Rape Elimination Act (PREA) or any other law, Agency agrees to require any appointed individuals working in the facility to consent to DHHS conducting the additional background checks. If the individual will not consent, Agency agrees the individual will no longer be used for work in the facility-based school.
- 3.2.1.3. The Director, or her or his designee, will consult with the DHHS CEO or designee, the DHHS Director of Facilities, the DHHS Administrator for the Office of Juvenile Services, and other appropriate DHHS leadership and staff to operate the Schools as a functional administrative unit within the operations of the DHHS facilities.
 - 3.2.1.4. The Director, or her or his designee, will supervise the principals and other personnel at each of the YRTC Schools and other personnel appointed to fulfill the terms of this agreement.
- 3.2.2. Enter into written contracts with entities or individuals appointed by Agency as employees or independent contractors under this agreement (including the Director of Schools), or appointed by the Director of Schools on behalf of Agency. The purpose of the contracts must be to fulfill requirements related to Agency's internal regulations related to contract and hiring processes, as well as the Agency's standard procedures for reviewing and approving such contracts.
 - 3.2.3. Require the Assistant Director or Principal of each school, or his or her designee, to participate in DHHS leadership huddle meetings and other DHHS leadership team meetings;
 - 3.2.4. Require the Director or his or her designee to work collaboratively with DHHS to:
 - 3.2.4.1. comply with the rules and regulations of the Agency for the operation of the Schools within the DHHS facilities;
 - 3.2.4.2. implement daily schedules at each of the Schools that fulfill the minimum requirements of the NDE rules and regulations, while meeting the needs of individual students;
 - 3.2.4.3. implement high-quality educational curricula across all Schools;
 - 3.2.4.4. implement a viable staffing plan;
 - 3.2.4.5. implement a valid performance evaluation system for all of the Schools' staff;
 - 3.2.4.6. identify the specific educational needs of each student, including but not limited to the areas of assessment, language supports (e.g., English learner needs), and special education services;
 - 3.2.4.7. determine the suitability of facilities for the education of students within each facility, and make decisions as to the facilities and locations where the education of students will take place;
 - 3.2.4.8. diagnose issues that negatively affect student achievement in the Schools, design and implement strategies to address such issues through the special purpose agreement, and develop measurable indicators of progress;

- 3.2.4.9. make recommendations to the Commissioner of Education on a long-term plan for revisions to the rules and regulations that govern the DHHS facility-based education schools and programs; and
 - 3.2.4.10. perform any other duties mutually agreed upon in collaboration between DHHS and the Agency.
 - 3.2.5. Require the Director or his or her designee to work collaboratively with DHHS to develop, revise and implement the special purpose agreement between DHHS and Agency for the YRTC schools and to collaboratively consider the following components when revising the special purpose agreement:
 - 3.2.5.1. a plan for the long-term programmatic structures for behavioral and mental health services and supports to be integrated within the Schools;
 - 3.2.5.2. a plan for the long-term student educational transition plans;
 - 3.2.5.3. a plan for the long-term student activity and athletic programs offered through the Schools; and
 - 3.2.5.4. the possible inclusion of a governing board and superintendent.
 - 3.2.6. Agree that the Director or his or her designee will communicate with the CEO of DHHS or his or her designee regarding information on all educational offerings at the facility-based schools, and allow both agencies access to the curricula for all education courses and programs;
 - 3.2.7. Continually communicate with DHHS regarding any personnel matters and immediately notify DHHS of any anticipated or requested change in DHHS personnel;
 - 3.2.8. Agree that Agency will not use or disclose employment-related information or records of DHHS personnel other than as necessary to fulfill the terms of this Agreement, or as required by law. Agency further agrees to implement and maintain appropriate administrative, physical, and technical safeguards to prevent unauthorized access to, use, or disclosure of such information or records.
 - 3.2.9. Agree that the Commissioner of Agency or his or her designee will meet with the CEO of DHHS or his or her designee to discuss the progress of the terms of this agreement thirty days after execution of this agreement and every thirty days thereafter; and
 - 3.2.10. Provide the CEO of DHHS or his or her designee with the following items in accordance with the timeline and costs included in Attachment 1:
 - 3.2.10.1. A written recommendation on the educational model DHHS should utilize in each of its facility-based schools;
 - 3.2.10.2. A written recommendation for the organizational structure of the facility-based schools, including recommendations on the types of positions, the number of employees to serve in each position at each facility and the necessary leadership structure; and
 - 3.2.10.3. A written implementation plan for how DHHS can achieve both the organizational structure and educational model recommended by Agency.
- 3.3. *Best Efforts.* The parties shall use their best efforts to accomplish their respective responsibilities in a timely and efficient manner. The failure of one party to perform its responsibilities shall not relieve the other party of its responsibilities.

4. WRITTEN AGREEMENT

- 4.1. *Amendment.* This Agreement may be modified only by written amendment, executed by both parties. No alteration or variation of the terms and conditions of this Agreement shall be valid unless made in writing and signed by the Parties.
- 4.2. *Integration.* This written Agreement constitutes the entire agreement between the Parties, and any prior or contemporaneous representations, promises, or statements by the Parties, which are not incorporated herein, shall not serve to vary or contradict the terms set forth in this Agreement.
- 4.3. *Severability.* Should any part, term or provision of this Agreement be determined to be invalid, the remainder of this Agreement shall not be affected, and the same shall continue in full force and effect.
- 4.4. *Survival.* All provisions hereof that by their nature are to be performed or complied with following the expiration or termination of this Agreement, shall survive the expiration or termination of this Agreement.

5. COMPLIANCE WITH LAW

- 5.1. *Civil Rights and Equal Opportunity Employment.* The Parties shall comply with all applicable local, state and federal law regarding civil rights, including but not limited to, Title VI of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000d et seq.; the Rehabilitation Act of 1973, 29 U.S.C. §§ 794 et seq.; the Americans with Disabilities Act of 1990 (“ADA”), 42 U.S.C. §§ 12101 et seq.; the Age Discrimination in Employment Act, 29 U.S.C. §§ 621 et seq.; the Age Discrimination Act of 1975, 42 U.S.C. §§ 6101 et seq.; and the Nebraska Fair Employment Practice Act, Neb. Rev. Stat. §§ 48-1101 to 48-1125.
- 5.2. The Parties shall comply with all other applicable federal, state, county and municipal laws, ordinances, and rules and regulations in the performance of this Agreement. This may include, but is not limited to, confidentiality requirements for the particular information being accessed or the data being shared, as may be more fully set forth herein.

6. INDEPENDENT AGENCIES

- 6.1. DHHS and the Agency are independent agencies within the State of Nebraska. This Agreement shall not create an employer-employee relationship between the Parties or between any of the employees of one party with the other party. The Agreement does not create a business partnership or joint venture under Nebraska law, or any joint entity as set forth in the Interlocal Cooperation Act, Neb. Rev. Stat. §§ 13-801 et seq.

7. LIABILITY

- 7.1. Nothing in this Agreement shall be construed as an indemnification by one party or the other for liabilities of a party or third parties for property loss or damage or death or personal injury arising out of and during the performance of this Agreement. Any liabilities or claims for property loss or damages or for death or personal injury by a party or its agents, employees, contractors or assigns or by third persons shall be determined according to applicable law.
- 7.2. Nothing in this Agreement shall relieve either party of any obligation or responsibility imposed upon it by law.

8. RECORDS

- 8.1. The parties agree to provide reasonable access to each other’s records and personnel, as necessary, to ensure compliance with any funding requirements, or to provide records for any federal or state oversight authority.
- 8.2. The parties shall maintain all records related to this Agreement as consistent with any applicable record retention schedules, or any other retention requirement mandated by law.

9. ADDENDA

- A. DHHS HIPAA Business Associate Agreement Provisions

10. ATTACHMENTS

- 1. Agency’s budget

11. NOTICES

- 11.1. Notices shall be in writing and shall be effective upon mailing. All written notices shall be sent to the following addresses:

FOR DHHS:
 Lucas Atkinson
 Nebraska Department of Health and
 Human Services
 301 Centennial Mall South

FOR AGENCY:
 Ryan Foor
 The Nebraska Department of Education

Lucas.Atkinson@nebraska.gov

402-471-6090

Lincoln, NE 68509-5026

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Ryan.foor@nebraska.gov

11.2. Either party may change the individual to be notified under this section via letter sent by U.S. Mail, postage prepaid, or via email.

IN WITNESS THEREOF, the parties have duly executed this Agreement hereto, and that the individual signing below has authority to legally bind the party to this Agreement.

FOR DHHS:

DocuSigned by:

Dannette R. Smith

Dannette R. Smith

Chief Executive Officer
Department of Health and Human Services
Operations

DATE: 3/6/2020 | 15:36:17 CST

FOR AGENCY:

DocuSigned by:

Matthew Blomstedt

Matthew Blomstedt

Commissioner of Education
The Nebraska Department of Education

DATE: 3/6/2020 | 15:29:02 CST

ADDENDUM A

BUSINESS ASSOCIATE AGREEMENT PROVISIONS

1. **BUSINESS ASSOCIATE.** "Business Associate" shall generally have the same meaning as the term "business associate" at 45 CFR § 160.103, and in reference to the party in this Agreement, shall mean Agency.
2. **COVERED ENTITY.** "Covered Entity" shall generally have the same meaning as the term "covered entity" at 45 CFR § 160.103, and in reference to the party to this Agreement, shall mean DHHS.
3. **HIPAA RULES.** "HIPAA Rules" shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.
4. **OTHER TERMS.** The following terms shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Protected Health Information, and Use.
5. **THE AGENCY** shall do the following:
 - 5.1. Not use or disclose Protected Health Information other than as permitted or required by this Agreement or as required by law. Agency may use Protected Health Information for the purposes of managing its internal business processes relating to its functions and performance under this Agreement. Use or disclosure must be consistent with DHHS' minimum necessary policies and procedures.
 - 5.2. Implement and maintain appropriate administrative, physical, and technical safeguards to prevent access to and the unauthorized use and disclosure of Protected Health Information. Comply with Subpart C of 45 CFR Part 164 with respect to electronic Protected Health Information, to prevent use or disclosure of Protected Health Information other than as provided for in this Agreement and assess potential risks and vulnerabilities to the individual health data in its care and custody and develop, implement, and maintain reasonable security measures.
 - 5.3. To the extent Agency is to carry out one or more of the DHHS' obligations under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to DHHS in the performance of such obligations. Agency may not use or disclosure Protected Health Information in a manner that would violate Subpart E of 45 CFR Part 164 if done by DHHS.
 - 5.4. In accordance with 45 CFR §§ 164.502(E)(1)(ii) and 164.308(b)(2), if applicable, ensure that any agents and subcontractors that create, receive, maintain, or transmit Protected Health Information

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- received from DHHS, or created by or received from the Agency on behalf of DHHS, agree in writing to the same restrictions, conditions, and requirements relating to the confidentiality, care, custody, and minimum use of Protected Health Information that apply to the Agency with respect to such information.
- 5.5. Obtain reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies the Agency of any instances of which it is aware that the confidentiality of the information has been breached.
 - 5.6. Within fifteen (15) days:
 - 5.6.1. Make available Protected Health Information to DHHS as necessary to satisfy DHHS' obligations under 45 CFR § 164.524;
 - 5.6.2. Make any amendment(s) to Protected Health Information as directed or agreed to by DHHS pursuant to 45 CFR § 164.526, or take other measures as necessary to satisfy DHHS' obligations under 45 CFR § 164.526;
 - 5.6.3. Maintain and make available the information required to provide an accounting of disclosures to DHHS as necessary to satisfy DHHS' obligations under 45 CFR § 164.528.
 - 5.7. Make its internal practices, books, and records relating to the use and disclosure of Protected Health Information received from, or created or received by the Agency on behalf of the DHHS available to the Secretary for purposes of determining compliance with the HIPAA rules. Agency shall provide DHHS with copies of the information it has made available to the Secretary.
 - 5.8. Report to DHHS within fifteen (15) days, any unauthorized use or disclosure of Protected Health Information made in violation of this Agreement, or the HIPAA rules, including any security incident that may put electronic Protected Health Information at risk. Agency shall, as instructed by DHHS, take immediate steps to mitigate any harmful effect of such unauthorized disclosure of Protected Health Information pursuant to the conditions of this Agreement through the preparation and completion of a written Corrective Action Plan subject to the review and approval by DHHS. The Agency shall report any breach to the individuals affected and to the Secretary as required by the HIPAA rules.
6. TERMINATION.
- 6.1. DHHS may immediately terminate this Agreement and any and all associated contracts if DHHS determines that the Agency has violated a material term of this Agreement.
 - 6.2. Within thirty (30) days of expiration or termination of this Agreement, or as agreed, unless Agency requests and DHHS authorizes a longer period of time, Agency shall return or at the written direction of DHHS destroy all Protected Health Information received from DHHS (or created or received by Agency on behalf of DHHS) that Agency still maintains in any form and retain no copies of such Protected Health Information. Agency shall provide a written certification to DHHS that all such Protected Health Information has been returned or destroyed (if so instructed), whichever is deemed appropriate. If such return or destruction is determined by the DHHS be infeasible, Agency shall use such Protected Health Information only for purposes that makes such return or destruction infeasible and the provisions of this Agreement shall survive with respect to such Protected Health Information.
 - 6.3. The obligations of the Agency under the Termination Section shall survive the termination of this Agreement.

Attachment 1
Agency Budget

All requested reimbursement for the travel and work expenses of the Director, Assistant Director, and additional positions referred to in this budget (Attachment 1) will be invoiced by the Agency to DHHS using the rates and scope and requirements of the Nebraska Department of Administrative Services (DAS) State Accounting Manual.

Deliverables/Services	Notes	Est. Hours (if applicable)	Annual rate	Total est. for term of agreement (6 mos.)	Monthly est.	Est. completion date
DIRECTOR SERVICES						8/31/2020
<i>Director Personal Services</i>						
Salary	Agreed to \$70,000		150,000.00	70,000.00	11,666.67	
Retirement			0.10	6,914.46	1,152.41	
Health insurance			26,555.00	13,277.50	2,212.92	
FICA			0.08	5,355.00	892.50	
Life insurance			12.00	6.00	1.00	
Employee assistance program			13.00	6.50	1.08	
Workers comp			0.01	700.00	116.67	
			<i>Sub-total</i>	<i>96,259.46</i>	<i>16,043.24</i>	
<i>Director Operating Expense</i>						
Cell phone			1,000.00	500.00	83.33	
Supplies			275.00	137.50	22.92	
Other operating expenses			250.00	125.00	20.83	
			<i>Sub-total</i>	<i>762.50</i>	<i>127.08</i>	
<i>Director Travel</i>						
Board/lodging			2,575.00	1,287.50	214.58	
Commercial travel			2,210.00	1,105.00	184.17	
State owned transportation			3,315.00	1,657.50	276.25	
Personal mileage			715.00	357.50	59.58	
Miscellaneous travel			165.00	82.50	13.75	
			<i>Sub-total</i>	<i>4,490.00</i>	<i>748.33</i>	
<i>Director Office Equipment</i>						
Data Processing Hardware/Software			0.00	0.00	0.00	
			<i>Sub-total</i>	<i>0.00</i>	<i>0.00</i>	

	DIRECTOR SERVICES TOTAL	101,511.96	16,918.66	
ASSISTANT DIRECTOR SERVICES				8/31/2020
<i>Assistant Director Personal Services</i>				
Salary	125,000.00	62,500.00	10,416.67	
Retirement	0.10	6,173.63	1,028.94	
Health insurance	26,555.00	13,277.50	2,212.92	
FICA	0.08	4,781.25	796.88	
Life insurance	12.00	6.00	1.00	
Employee assistance program	13.00	6.50	1.08	
Workers comp	0.01	625.00	104.17	
	<i>Sub-total</i>	<i>87,369.88</i>	<i>14,561.65</i>	
<i>Assistant Director Operating Expense</i>				
Cell phone	1,000.00	500.00	83.33	
Supplies	275.00	137.50	22.92	
Other operating expenses	250.00	125.00	20.83	
	<i>Sub-total</i>	<i>762.50</i>	<i>127.08</i>	
<i>Assistant Director Travel</i>				
Board/lodging	2,575.00	1,287.50	214.58	
Commercial travel	2,210.00	1,105.00	184.17	
State owned transportation	3,315.00	1,657.50	276.25	
Personal mileage	715.00	357.50	59.58	
Miscellaneous travel	165.00	82.50	13.75	
	<i>Sub-total</i>	<i>4,490.00</i>	<i>748.33</i>	
<i>Assistant Director Office Equipment</i>				
Data Processing Hardware/Software	3,500.00	1,750.00	291.67	
	<i>Sub-total</i>	<i>1,750.00</i>	<i>291.67</i>	
	ASSISTANT DIRECTOR SERVICES TOTAL	94,372.38	15,728.73	
ADDITIONAL POSITION 1 SERVICES				8/31/2020
<i>Additional Position 1 Personal Services</i>				
Salary	100,000.00	50,000.00	8,333.33	
Retirement	0.10	4,938.90	823.15	
Health insurance	26,555.00	13,277.50	2,212.92	
FICA	0.08	3,825.00	637.50	
Life insurance	12.00	6.00	1.00	

Employee assistance program	13.00	6.50	1.08
Workers comp	0.01	500.00	83.33
	<i>Sub-total</i>	<i>72,553.90</i>	<i>12,092.32</i>
<i>Additional Position 1 Operating Expense</i>			
Cell phone	1,000.00	500.00	83.33
Supplies	275.00	137.50	22.92
Other operating expenses	250.00	125.00	20.83
	<i>Sub-total</i>	<i>762.50</i>	<i>127.08</i>
<i>Additional Position 1 Travel</i>			
Board/lodging	2,575.00	1,287.50	214.58
Commercial travel	2,210.00	1,105.00	184.17
State owned transportation	3,315.00	1,657.50	276.25
Personal mileage	715.00	357.50	59.58
Miscellaneous travel	165.00	82.50	13.75
	<i>Sub-total</i>	<i>4,490.00</i>	<i>748.33</i>
<i>Additional Position 1 Office Equipment</i>			
Data Processing Hardware/Software	3,500.00	1,750.00	291.67
	<i>Sub-total</i>	<i>1,750.00</i>	<i>291.67</i>
	ADDITIONAL POSITION 1 SERVICES TOTAL	79,556.40	13,259.40
ADDITIONAL POSITION 2 SERVICES			
<i>Additional Position 2 Personal Services</i>			
Salary	100,000.00	50,000.00	8,333.33
Retirement	0.10	4,938.90	823.15
Health insurance	26,555.00	13,277.50	2,212.92
FICA	0.08	3,825.00	637.50
Life insurance	12.00	6.00	1.00
Employee assistance program	13.00	6.50	1.08
Workers comp	0.01	500.00	83.33
	<i>Sub-total</i>	<i>72,553.90</i>	<i>12,092.32</i>
<i>Additional Position 2 Operating Expense</i>			
Cell phone	1,000.00	500.00	83.33
Supplies	275.00	137.50	22.92
Other operating expenses	250.00	125.00	20.83
	<i>Sub-total</i>	<i>762.50</i>	<i>127.08</i>

8/31/2020

Additional Position 2 Travel				
Board/lodging		2,575.00	1,287.50	214.58
Commercial travel		2,210.00	1,105.00	184.17
State owned transportation		3,315.00	1,657.50	276.25
Personal mileage		715.00	357.50	59.58
Miscellaneous travel		165.00	82.50	13.75
		<i>Sub-total</i>	<i>4,490.00</i>	<i>748.33</i>

Additional Position 2 Office Equipment				
Data Processing Hardware/Software		3,500.00	1,750.00	291.67
		<i>Sub-total</i>	<i>1,750.00</i>	<i>291.67</i>

ADDITIONAL POSITION 2 SERVICES TOTAL 79,556.40 13,259.40

TECHNICAL ASSISTANCE SERVICES PROVIDED 3/8/2020

Technical Assistance Provided by the NDE (February 18, 2020 to March 7, 2020)				
Daily Rate	14 days	400.00	5,600.00	933.33
Lodging		96.00	1,344.00	224.00
Meals		55.00	770.00	128.33
Mileage		100.00	1,400.00	233.33
Other expenses		50.00	700.00	116.67
		TECHNICAL ASSISTANCE SERVICES PROVIDED TOTAL	9,814.00	1,635.67

ADDITIONAL STAFF DEVELOPMENT SERVICES 8/31/2020

External staff development contract services	Est. 10 days	5,000.00	25,000.00	4,166.67
		ADDITIONAL STAFF DEVELOPMENT SERVICES TOTAL	25,000.00	4,166.67

DELIVERABLE 1 - Develop a model for the DHHS education system 7/31/2020

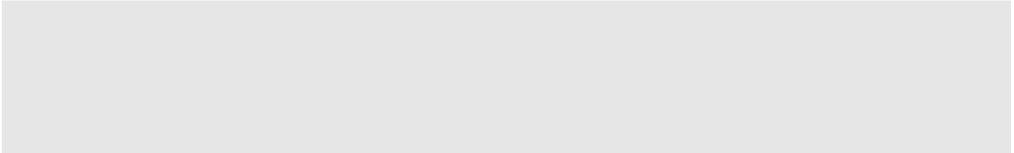
Literature review on education in juvenile justice systems	50	100.00	5,000.00	833.33
Policy scan on best practices in juvenile justice education	20	100.00	2,000.00	333.33
Consult meetings with NDE and DHHS staff	40	100.00	4,000.00	666.67
Writing and editing of report	40	100.00	4,000.00	666.67
		DELIVERABLE 1 TOTAL	15,000.00	2,500.00

DELIVERABLE 2 - Develop an organization structure, including a staffing plan, for the DHHS education system 7/31/2020

Analysis of current structure	80	100.00	8,000.00	1,333.33
Policy scan on structures in other states	12	100.00	1,200.00	200.00

Consult meetings with NDE and DHHS staff	60	100.00	6,000.00	1,000.00
Design of structure	10	100.00	1,000.00	166.67
Writing and editing of report	50	100.00	5,000.00	833.33
DELIVERABLE 2 TOTAL			21,200.00	3,533.33

DELIVERABLE 3 - Develop an implementation plan for the education system model, organization structure, and staffing plan



7/31/2020

Literature review on implementation science	20	100.00	2,000.00	333.33
Consult meetings with NDE and DHHS staff	40	100.00	4,000.00	666.67
Writing and editing of report	45	100.00	4,500.00	750.00
DELIVERABLE 3 TOTAL			10,500.00	1,750.00



			SUB-TOTAL OF DELIVERABLES AND SERVICES	436,511.14	72,751.86
Indirect (administrative) costs		0.13		56,746.45	9,457.74
			GRAND TOTAL	493,257.58	82,209.60

Note: The personal services retirement rate is budgeted for the teacher retirement program.

APPENDIX 31

WRITTEN TESTIMONY OF
COMMISSIONER MATTHEW
BLOMSTEDT, NE DEPT. OF
EDUCATION

OCT. 23, 2020

AND

CONSULTATION REPORT
BY LYNETTE TANNIS

AND

OTHER INFORMATION FROM
NE DEPT. OF EDUCATION



NEBRASKA

DEPARTMENT OF EDUCATION

Youth Rehabilitation and Treatment Center Special Oversight Committee Hearing
Nebraska Legislature
October 23, 2020; 1:30pm

Outline of Comments
Matthew L. Blomstedt, Ph.D.
Commissioner of Education

Juvenile Justice Education National Perspective (see handout)

- Mix of approaches & responsibilities
- Most states struggle
- Better outcomes where there is a clear public accountability
- Most states have a combination of responsible parties
- Credit recovery and accumulation as well as career/vocational and post-secondary opportunities

Structure of the Nebraska System for Systems Involved Youth

- Multiple responsible partners but lack of clear “responsibilities”
- Some of the problem is in the system that is structured in law
- Some of the problem is in the lack of clear understanding at key transition points in the system
- For example, educational responsibilities for students that are mobile in the system
 - Wards, foster, probation, courts, school districts, community, educational decision, etc.
 - Special Education is both unclear and difficult to administer

YRTC/Corrections Youth Education

- NDE role prior to March 6 agreement with DHHS
 - Annual “accreditation/approval”
- NDE partnership role
 - Educational reform and capacity building
 - Specific efforts to improve educational structure within YRTC and DHHS other treatment programs
 - Research & development for improving educational and vocational outcomes
 - System recommendations
- NDE regulatory oversight (Several applicable rules/regulations)

(continued)

Commissioner of Education Recommendations

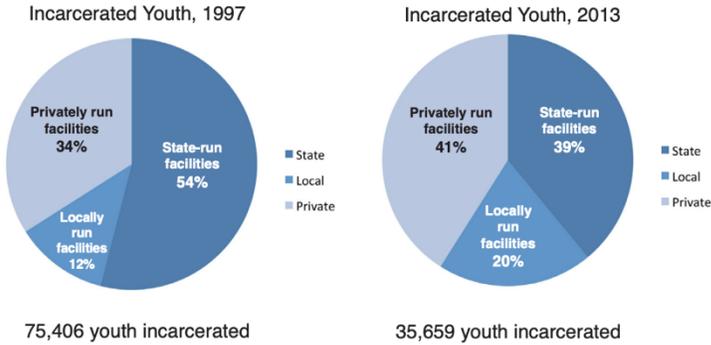
1. Refine a structured state responsibility for education of systems involved youth
 - Special education
 - Educational outcomes/oversight – Clarify partner roles
 - Education “system” within DHHS
2. Build an education system within DHHS and Corrections
3. Ensure a consistent funding and educational resources model for all public and private partners in the system

Juvenile Justice Education

Prepared by Dr. Lynette N. Tannis for the Nebraska Department of Education
October 23, 2020

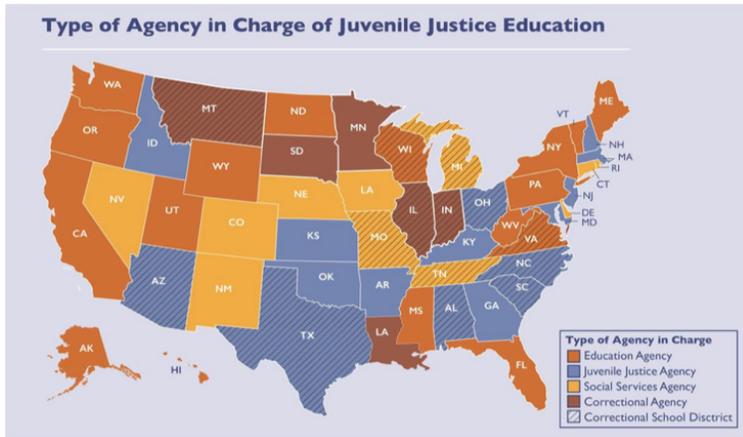
Juvenile Justice Facilities

The United States currently has 1,510 juvenile facilities nationwide – 60% are publicly owned and 40% privately owned (for-profit and non- or not-for-profit).¹

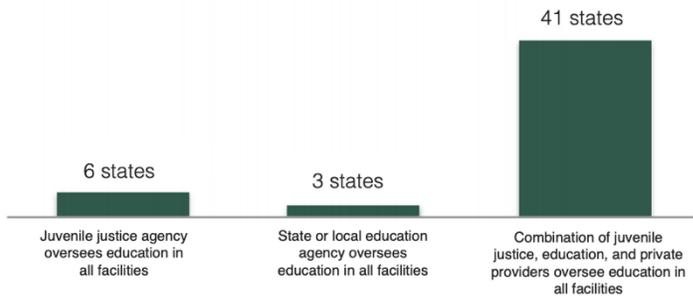


The Council of State Governments further disaggregated the entity responsible for state, local, and privately run juvenile facilities.²

Juvenile Justice Education



As noted in this map, there is also tremendous variability for what agency is responsible for juvenile justice education across the states.³



While the map above shows the responsible agency, it is important to note that only 3 states oversee the education programming in all its facilities via its local or state education agency.⁴

¹ Puzzanchera, C., Hockenberry, S., Sladky, T.J., and Kang, W. (2020). "Juvenile Residential Facility Census Databook."

² The Council of State Governments Justice Center, "Locked Out: Improving Educational and Vocational Outcomes for Incarcerated Youth" (New York: The Council of State Governments Justice Center, 2015).

³ Blomberg, T. (2007) as cited in *Just Learning*, Southern Education Foundation (2014).

⁴ The Council of State Governments Justice Center, "Locked Out: Improving Educational and Vocational Outcomes for Incarcerated Youth" (New York: The Council of State Governments Justice Center, 2015).

An [interactive map](#)⁵ highlights the amount of time dedicated for education programs in juvenile justice classrooms across the country, based on data reported to the Office for Civil Rights.

Provider Type	Number of Programs	Exemplary Programs	Transition	Service Delivery	Educational Resources	Contract Management	Overall Mean
Public School District	65	11	5.19	5.77	5.63	5.34	5.55
PNFP	68	5	5.42	5.42	5.48	5.34	5.45
PFP	15	1	4.38	4.74	4.71	3.80	4.61
Total/Average Score	148	17	5.21	5.51	5.47	5.18	5.41

A quality assurance review, facilitated within Florida’s facilities, revealed that “public education providers consistently scored higher than private [not-for profit [(PNFP) and for-profit (PFP)] providers.”⁶

Although these findings were specific to a review of Florida’s facilities, it is interesting to note that the Oregon Youth Authority’s (OYA) MacLauren Youth Correctional Facility, has an educational program provided by the Willamette Education Service District. The W.P. Lord High School, in partnership with OYA, provides a multitude of highly favorable educational offerings for their incarcerated learners:⁷

Education Programs



- High school courses
- GED
- High school diploma
- College
- Individualized Education Program (IEP) for special education services

Vocational Training and Work Experience



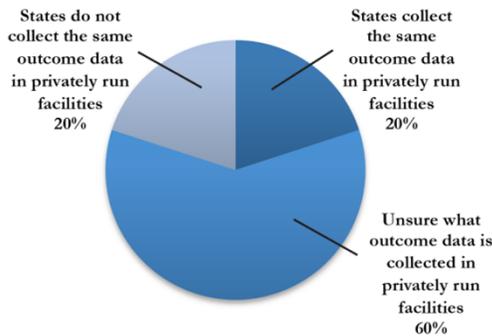
- Apprenticeship – Limited Building Maintenance Electrician (LBME)
- AutoCAD
- Barbing
- Cosmetology
- C-Tech Training: Audio/Video, Copper Wiring, Fiber Optics, Telecommunications
- Culinary Arts
- Customer Service
- Electrician’s Assistant Worker
- Forklift Operator Training
- Horticulture Gardening Training
- HVAC Assistant Worker
- Industrial Arts Teacher Assistant
- Industrial Arts Training
- Landscaping
- Laundry Worker
- Maintenance Training Program
- Maintenance Crew Worker
- National Institute for Occupational Safety and Health (NIOSH) Training
- Office Assistant Training
- Painter’s Assistant
- Plumber’s Assistant
- Prisoner FOODS Dog Training
- Pruning/Arbor Training
- Recycling Training
- Sewing Training
- Welding
- Welding Training
- Woodworking Production Worker
- Woodworking Training Program

Certificates and Licenses



- Advanced Career & Tech Education Certificate
- Advanced Machining Certificate
- Automotive Service Excellence (ASE) Certificate
- Barbering License
- Certified Recovery Mentor Certificate
- Custodial Certificate
- Food Handlers Card
- ProStart Certificate Level 1 and Level 2 (culinary arts)
- Forklift Operator Certificate
- Engineering and Design Certificate
- International Sports Sciences Association (ISSA) Certificate
- Intro to Career and Tech Education Certificate
- Intro to Machining Certificate
- International Sports Sciences Association (ISSA) Certificate
- Limited Building Maintenance Electrician (LBME) License
- National Institute for Occupational Safety and Health (NIOSH) Certificate
- Peer Mentor Certificate
- Recycling 101 Certificate
- Welding Certificate

Juvenile Justice Education Outcome Data



The Council of State Governments’ national juvenile justice survey revealed that 60% of states were not aware of private facilities’ outcome data.⁸

There is a need to provide quality assurance reviews and establish mechanisms to measure juvenile justice education outcome data for juvenile justice education programs located in facilities within each state.⁹ The data can inform further research, and can be used to improve education practices and programs, inform policy decisions, and serve as evidence for needed resources and accountability structures.

⁵ Education Week Research Center analysis of Office for Civil Rights Data, 2018. Data and Visualization: Alex Harwin and Sarah Sparks

⁶ Juvenile Justice Education Enhancement Program Annual Report, 2006, p. 25

⁷ <https://www.oregon.gov/oia/macLauren/Pages/education.aspx>

⁸ The Council of State Governments Justice Center, “Locked Out: Improving Educational and Vocational Outcomes for Incarcerated Youth” (New York: The Council of State Governments Justice Center, 2015).

⁹ Tannis, L. Educational Justice. National Association for Public Defense (2017).

LOCKED OUT: Improving Educational and Vocational Outcomes for Incarcerated Youth

INTRODUCTION

Policymakers across the political spectrum agree: all young people should have access to a high-quality public education. Within the past two decades, particular emphasis has been placed on ensuring that students receive instruction that prepares them for college and careers, and that schools are held accountable for realizing these goals.¹

There is perhaps no subset of young people whose need for a quality education is more acute—and whose situation makes them especially challenging to serve—than incarcerated youth. Of the more than 60,000 youth who are incarcerated on any given day in the United States, nearly 36,000 are committed to state custody,^{*} two-thirds of whom are youth of color. The majority of these youth are over-age and under-credited,[†] several grade levels behind their peers, more likely to have a disability than their peers,² and have been suspended multiple times and/or expelled from their local schools.³

In 1997, the majority of incarcerated youth were housed in state-run facilities; as of 2013, almost two-thirds of incarcerated youth were held in privately or locally run facilities. [See Figure 1] In most states, an array of state and local agencies and nonprofit and private organizations are responsible for overseeing and delivering educational and vocational services to incarcerated youth. As the proportion of youth incarcerated in privately or locally run facilities has grown, this has evolved into an increasingly complicated patchwork of government and nongovernment agencies. This shift means that any combination of state, local, nonprofit, and private entities now manage educational and vocational services for incarcerated youth. [See Figure 2]

Who are Incarcerated Youth?

Of the more than 60,000 youth incarcerated on a given day:

- Approximately 36,000 youth are committed to the custody of the state juvenile correctional agency as part of a court disposition[‡] and are typically incarcerated for 3 to 12 months. These youth can be placed in a facility run by the state, a range of nonprofit and for-profit organizations, or a local juvenile justice agency. These facilities include secure facilities as well as a range of non-secure facilities, such as residential treatment centers or group homes.
- Approximately 18,000 youth are incarcerated in primarily locally run detention facilities,[§] typically for fewer than 60 days, and most often because they are awaiting a court disposition.
- Nearly 6,000 youth are incarcerated in adult prisons and jails.⁴

Education Data on Incarcerated Youth

National educational data on incarcerated youth is limited. Studies that have been conducted show:⁵

- At least one in three incarcerated youth is identified as needing or already receiving special education services—a rate nearly four times higher than youth attending school in the community.
- More than half of incarcerated youth have reading and math skills significantly below their grade level and approximately 60 percent have repeated a grade.
- The majority of incarcerated youth were suspended and/or expelled from school, and many had dropped out of school all together before being incarcerated.⁶

* See “Easy Access to the Census of Juveniles in Residential Placement,” <http://www.ojdp.gov/ojstatbb/ezacjrp/>.

† An “over-age and under-credited” student is defined as one who is over the traditional school age for his or her grade level and lacks adequate credit hours for his or her grade level.

‡ Disposition is a phase of a delinquency proceeding similar to the “sentencing” phase of an adult trial.

§ Detention facilities provide short-term, temporary care in a physically restrictive environment for youth who are in custody pending court disposition, as well as for youth who have been adjudicated delinquent and await placement elsewhere or transfer to another jurisdiction.

In partnership with the Council of Juvenile Correctional Administrators (CJCA), The Council of State Governments (CSG) Justice Center surveyed state juvenile correctional agencies in all 50 states,* seeking answers to the following questions:

- What educational and vocational services are provided to incarcerated youth?
- What student outcome data are collected, analyzed, and reported?
- What is done to ensure that youth receive educational and vocational services after release from incarceration?

This issue brief highlights key findings from this survey. The brief also provides recommendations that local and state policymakers, along with advocates, can use to improve college and career readiness for youth involved in the juvenile justice system.† The brief also provides examples of how select states have translated these recommendations into policy and practice.

Figure 1. Incarcerated Youth Committed to State Custody by Facility Type⁷

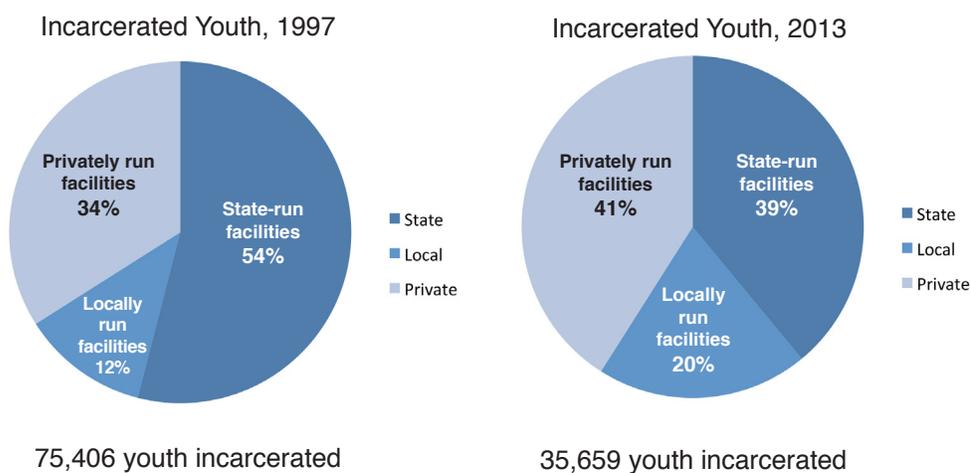
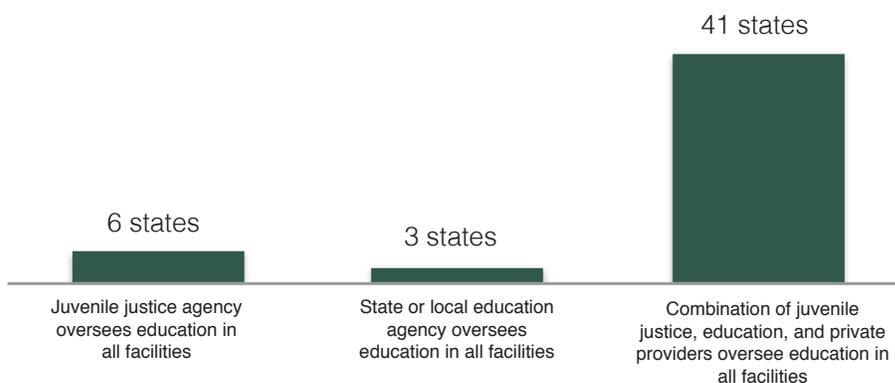


Figure 2. Entity Responsible for Delivery of Education in All Facilities



* Throughout this brief, we use the term “states” to refer to the survey responses provided by state juvenile correctional agencies. State education agencies also collect educational outcome data for incarcerated youth served under Title I Part D of the Elementary and Secondary Education Act, which may not be shared with the state juvenile correctional agency. For more information on Title I Part D, visit <http://www.neglected-delinquent.org/>.

† The recommendations provided in this brief draw heavily from the *School Discipline Consensus Report*. Those recommendations were developed through a consensus-driven process that involved hundreds of stakeholders from various fields. Read more at <https://csgjusticecenter.org/youth/school-discipline-consensus-report.org/>.

ABOUT THE SURVEY FINDINGS

In the spring of 2015, CJCA sent an electronic survey to all state juvenile correctional agencies. Agency administrators in all 50 states completed the survey, either by filling it out directly or assigning a designee to respond, such as a deputy administrator or director of education. The CSG Justice Center then provided each agency with a copy of its completed survey to verify responses and ensure accuracy.

The survey asked questions about the delivery of educational services and the collection of student outcome data for the nearly 36,000 incarcerated youth who are committed to state custody as part of a court disposition. These youth may be in a facility operated by the state, a local juvenile justice agency, or a nonprofit or for-profit organization. [See Box: Who Are Incarcerated Youth?]

The survey did not ask state agency administrators about the 18,000 youth who are not committed to the custody of the state but are incarcerated in detention facilities, which are typically administered by local juvenile justice agencies. Similarly, the survey did not inquire about the nearly 6,000 youth who are incarcerated in adult prisons and jails. Educational services are provided, however, to youth in both local detention facilities and adult prisons and jails. Findings and recommendations in this report, while not addressing youth in local detention facilities or adult prisons and jails, are applicable to youth in those settings.

U.S. Departments of Education and Justice's Correctional Education Guidance Package

In December 2014, the U.S. Departments of Education and Justice released [guiding principles](#) for providing high-quality education for youth incarcerated in secure facilities.⁸ While this survey was not organized around those guiding principles, it can be useful for states and the field to assess their status in adopting these principles, and also shed light on the challenges states are facing in doing so.

KEY FINDINGS AND RECOMMENDATIONS

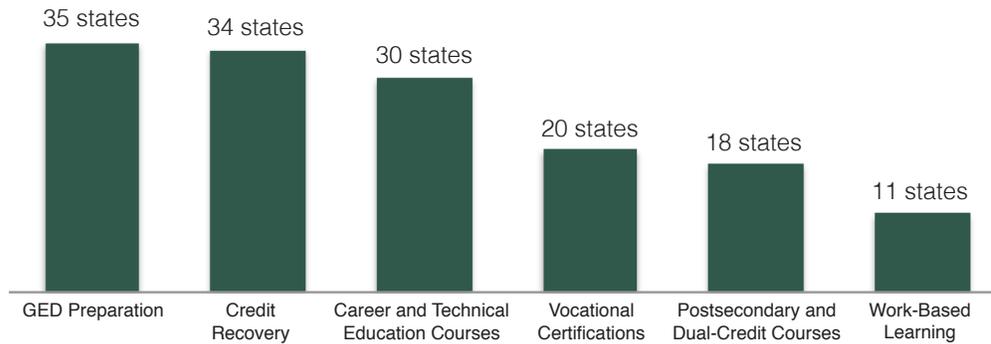
Educational and Vocational Services Provided to Incarcerated Youth

FINDING 1. Most incarcerated youth do not have access to the same educational and vocational services as their peers in the community, and they do not attend schools that have the same rigorous curriculum and student performance standards as traditional public schools.

In the community, youth have access to a variety of educational and vocational services to meet their diverse learning needs and goals, including traditional high schools and vocational schools, GED preparation programs, community colleges, and other postsecondary institutions. However, only 8 states (16 percent) report providing incarcerated youth with access to the same educational and vocational services that are available to youth in the community.

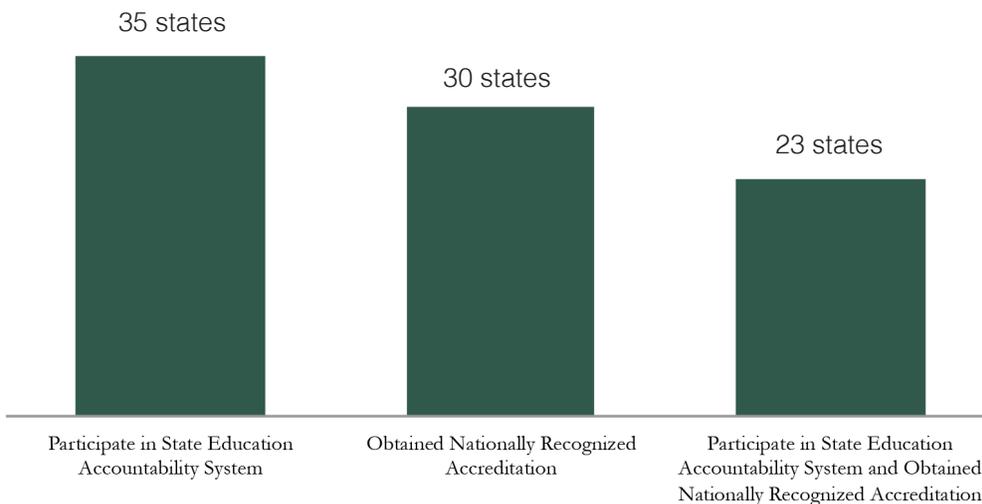
- 13 states (26 percent) provide incarcerated youth with access to the same types of educational services available to youth in the community, including credit recovery programs, GED preparation, and postsecondary courses.
- 9 states (18 percent) provide incarcerated youth with access to the same types of vocational services available to youth in the community, including work-based learning opportunities, career and technical education courses, and the opportunity to earn vocational certifications.

Figure 3. Educational and Vocational Services Available to All Incarcerated Youth



Additionally, while many states report including all facility schools in their state's education accountability system, a number of states are not holding facility schools and educators accountable for ensuring that the services provided to incarcerated youth adhere to state curricular standards and that students make academic progress and gain the skills necessary to enter the workforce. [See Figure 4]

Figure 4. Participation of All Facility Schools in Accountability and Accreditation Systems



More importantly, in states in which facility schools do participate in the state education accountability system, state leaders are not providing the oversight and support necessary to ensure that this participation actually results in improved student performance. Further, states are not ensuring that facility schools are meeting national education accreditation standards.

- 35 states (70 percent) require facility schools to participate in their state education accountability system.*
- In 20 states (39 percent), all facility schools do not meet national education accreditation standards.†

* State education accountability systems evaluate school performance based on student achievement metrics required under the federal No Child Left Behind Act or the state flexibility waivers granted to states by the U.S. Department of Education. (For more information on these waivers, see <http://www2.ed.gov/policy/elsec/guid/esea-flexibility/index.html>.) Accountability systems also provide a structure for supporting school and district improvement efforts. For more information, see [Education Commission of the States Accountability "Report Card" Database](#).

† Education accreditation agencies recognize schools that meet an acceptable set of quality standards. Adhering to national accreditation standards ensures consistency in the quality of educational and vocational services that are provided to all incarcerated youth.

Recommendations

1.1 Require all facility schools to provide incarcerated youth with access to the same educational and vocational services that are available in the community.

Educational and vocational services available to incarcerated youth should be similar to the services available to youth in the community, and based on students' individual needs. Further, all incarcerated youth should have access to the same educational and vocational services, regardless of the facility in which they are placed.

Within the same state, for example, youth placed in a facility run by a nonprofit organization and attending a school run by that organization should have the same opportunities to make academic progress and gain workforce development skills as youth placed in a state-run facility attending a school run by the state education agency. At a minimum, the following services should be available to all incarcerated youth:

- Credit recovery programs to accelerate progress for youth with few high school credits^{*}
- Middle/high school coursework and the opportunity to earn a high school diploma
- GED preparation programs and the opportunity to earn a GED
- Career and technical education courses
- Work-based learning experiences and the ability to earn a vocational certification or licensure, ideally in areas aligned with state/local employment needs
- Opportunity to pursue postsecondary coursework and earn a postsecondary degree

All facility schools must also comply with federal laws to ensure that students with disabilities have an Individualized Education Program (IEP),[†] that these IEPs are regularly reviewed, and that these students are provided with the supports to which they are entitled to help meet their academic and behavioral goals.[‡]

This standardization of services will ensure that the delivery of education is equitable and increase the likelihood that all incarcerated youth make progress toward college and career readiness upon release. While providing access to all of these services can be challenging given limited resources, particularly for smaller facilities, juvenile justice agencies can partner with local school districts, colleges, community-based service providers, and area businesses, as well as creatively utilize technology, to expand the breadth and depth of services.

1.2 Hold all facility schools accountable for student performance and meeting college- and career-readiness standards that are aligned with state requirements for traditional public schools.

Similar to traditional public schools, all facility schools should be held accountable for providing educational and vocational services aligned with rigorous curricular standards and for ensuring that students make academic progress.[‡] First, facility schools should provide youth with access to a rigorous curriculum aligned with state college- and career-readiness standards. The majority of states have adopted the Common Core State Standards,[§] and those states that have not are revising their curricular standards to ensure that all students are college and career ready. States should require facility schools to adopt the state's academic standards to ensure that

^{*} Credit recovery programs support students who are behind in school and need to earn additional credits to graduate from high school in a shorter period of time.

These programs are offered to students online, to provide flexibility in scheduling and support youth who are at varying levels.

[†] Individualized Education Programs (IEPs) are legal documents that outline the learning needs of an individual student with disabilities and the services that the school will provide to meet those needs.

[‡] Academic progress refers to gains students make on academic assessments and other academic indicators, as well as progress in gaining vocational and workforce skills.

[§] The Common Core State Standards are educational learning standards for grades K–12 in English language arts/literacy and mathematics, developed by state education chiefs and governors. For more information, see <http://www.corestandards.org/>. As of this publication date, 42 states have adopted the Common Core State Standards.

incarcerated youth are prepared to enter the workforce or continue their education upon release, and that credits transfer seamlessly if they transition back to their home school or another public school in the community.

Second, given incarcerated youths' varying lengths of stay in facilities and diverse educational levels, using the same performance measures to assess student progress as those used for traditional public schools may be impractical. Therefore, state policymakers should work with education and juvenile justice agencies to design an accountability system that is aligned with the state education accountability system for traditional public schools, while customized to incorporate realistic progress measures for incarcerated youth. As an example, since most incarcerated youth are released within a year, shorter-term pre- and post-tests should be used to evaluate academic progress for accountability purposes rather than the state's annual standardized assessments. Incarcerated youth, however, should still take part in state assessments, as many of these youth will return to public schools upon release.

Third, and perhaps most importantly, states must ensure that facility schools that fail to meet state performance targets face appropriate consequences. Similar to traditional public schools, the state should exert the authority to make changes to the structure and oversight of facility schools that fail to consistently meet student performance targets. The state should also legally empower the state education agency or another entity to direct the necessary supports to failing facility schools or implement corrective measures. These consequences and supports could include, for example, school reconstitution (the replacement of the education provider and all education staff), a change in school leadership, or providing additional professional development to educators.

1.3 Require all facility schools to receive nationally recognized accreditation for their education programs.

While many juvenile correctional facilities undergo an overall accreditation through organizations such as the American Correctional Association, this process does not include a detailed evaluation and certification of their educational services. State policymakers should require all facility schools to receive accreditation from one of the four regional, nationally recognized education accrediting commissions, which employ a comprehensive set of standards to evaluate a school's structure, curriculum and programming, staff qualifications, and management practices.¹⁰ Policymakers and agency leaders can have confidence that facility schools that meet these standards are best positioned to improve college and career readiness for incarcerated youth.

Oregon: Providing a Range of Educational and Vocational Services to Incarcerated Youth

The Oregon Youth Authority (OYA) and Oregon Department of Education (ODE) provide incarcerated youth with a range of educational and vocational services through in-person instruction and a variety of technological resources. Oversight of educational and vocational services in juvenile facilities is codified in an intergovernmental agreement. The ODE oversees educational services for youth up to age 21 who have not earned a GED or high school diploma, while the OYA provides educational and vocational services for any youth who has a GED or high school diploma. All schools within OYA facilities meet state educational standards for accreditation, and all educators meet the federal standards for being highly qualified.

Upon entry to a facility, youth are assessed to determine their educational level, and assessment results are used to develop individualized educational plans. Based on these plans, ODE contracts with local school or education service districts to provide a range of educational and vocational services, including:

- Online tutorial programming for youth to earn needed high school credits
- Dual-credit courses,* online college courses, and access to massive open online courses (MOOCs)

* Dual-credit coursework provides students with the ability to earn high school and college credits simultaneously.

- Work-based experience and vocational education courses as well as the opportunity for youth to earn professional certifications in a specific trade

The OYA and ODE also worked together to develop the Education Assessment and Monitoring Tool to evaluate the accessibility and quality of educational services and alignment with the principles outlined in the U.S. Departments of Education and Justice's correctional education guidance package.

Student Outcome Data Collected and Reported for Incarcerated Youth

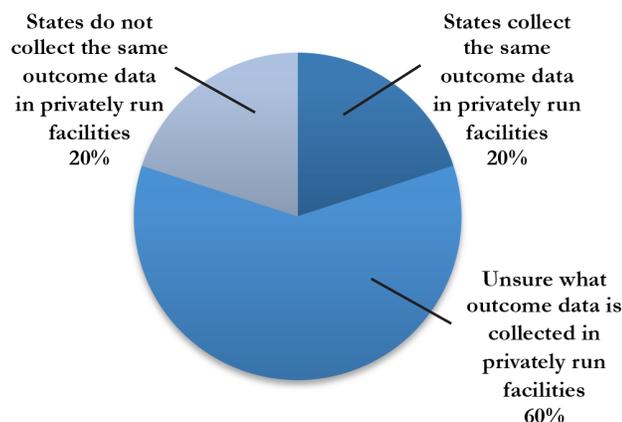
FINDING 2. Most states do not collect, track, and report student outcome data for incarcerated youth in all facility schools.

While state and federal policymakers have made the improved tracking of student outcomes and increased school and educator accountability a top education reform priority over the last few decades, this emphasis has not extended to schools that serve incarcerated youth. In most states, agencies track at least some student outcome data for youth in schools in state-run facilities:

- Almost all states collect data on high school credits (47 states) and high school diplomas earned (46 states) for youth in school in state-run facilities.
- The majority of states (40 states) collect data on improvements in reading and math assessments for these youth.
- Slightly more than half of states (33 states) collect data on job training or vocational certificates earned by youth in these facility schools.
- Around half of states collect data on postsecondary credits (27 states) and postsecondary degrees earned (18 states) for these youth.

Less than a quarter of all states, however, collect the same data for youth in privately run facilities, a population that now comprises more than 40 percent of all incarcerated youth. Sixty percent of states (30) report not even knowing what, if any, outcomes are tracked for youth who are incarcerated in privately run facilities, further demonstrating the challenges and inconsistencies that states face with multiple entities overseeing and delivering educational and vocational services to this population. [See Figure 5]

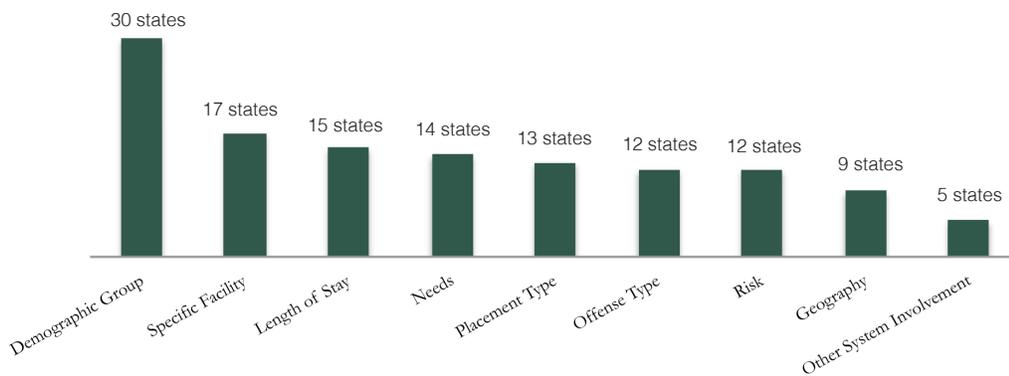
Figure 5. State Collection of Student Outcome Data for Incarcerated Youth in Privately Run Facilities Compared to State-Run Facilities



Even in those states where limited data on student outcomes for incarcerated youth is available, states are not analyzing, reporting, and using these data to hold educators, facility schools, and facility administrators accountable, or to inform school improvement planning. For example, states are not tracking how certain populations of youth are performing academically, if student outcomes vary significantly from one facility to the next, or if particular education providers are more successful than others in improving these outcomes. [See Figure 6]

- Only 17 states (34 percent) analyze the student outcome data they have by individual facilities to evaluate the performance of schools, education providers, and educators.
- Less than a third of states analyze outcome data by length of stay to ensure that students who are incarcerated for a significant length of time make progress towards earning an educational and/or vocational credential.*
- Only one-quarter of states analyze outcome data by student characteristics other than demographics to determine whether youth with specific service needs—such as youth with disabilities or youth involved in the child welfare system—are developing the academic and workforce development skills for a successful transition back to the community.

Figure 6. Student Outcome Data Analysis by Various Factors



Additionally, while outcome data for youth in traditional public schools is reported to federal, state, and local policymakers at least annually, the limited student outcome data that many states collect on incarcerated youth are not shared with these stakeholders in the same manner.

- About half of states share some outcome data on incarcerated youth with the state legislature and the governor.
- Two-thirds of states (33 states) share some data with the state education agency, yet only 46 percent (23 states) share some data with local education agencies.
- Only 12 states (24 percent) share some data with the judiciary.
- 18 states (36 percent) share some data with other state agencies that serve youth and the same number share some data with State Advisory Groups.†
- The majority of states share some data with facility treatment staff, but 18 states (36 percent) do not share these data to ensure that facility educators and treatment staff work together to coordinate and improve services for incarcerated youth.

* Under Title I Part D of the Elementary and Secondary Education Act, state education agencies collect educational outcome data on youth who are in facilities long-term, for those facilities that receive funding from this grant program.

† The Juvenile Justice and Delinquency Prevention Act (JJDP) provides for a State Advisory Group (SAG) that provides input into their state's use of JJDP funds and is responsible for supporting compliance with the core requirements of the JJDP and providing information about the act's requirements to state and local policymakers.

States are also not using the limited student outcome data they collect on incarcerated youth to hold facility schools and educators accountable for student performance or to inform system improvement efforts. [See Figure 7]

- 22 states (44 percent) use the student outcome data they have for incarcerated youth for accountability and corrective action purposes, and even fewer states (20) use these data to ensure that they are complying with state agency or legislative mandates.
- Slightly more than half of states (27) use outcome data to inform facility educators' professional development and only 15 states (30 percent) use these data to evaluate facility educators.

Figure 7. Use of Student Outcome Data



Recommendations

2.1 Track data on a minimum set of key student outcome indicators for incarcerated youth, and develop the infrastructure needed to collect and analyze these data.

State policymakers should establish a minimum set of outcomes to be tracked, disaggregated, and reported annually for all incarcerated youth. These outcomes should align with, if not duplicate, federal and state data collection requirements for traditional public schools, and include additional measures specifically relevant to this population. These measures should include:

- High school credit accumulation
- Improvement in math assessment scores and meeting proficiency targets
- Improvement in reading assessment scores and meeting proficiency targets
- Average daily attendance
- School discipline
- Education/vocational credential attainment and high school graduation rates

Most states will need to improve their capacity to electronically capture student outcome data for incarcerated youth in order to comply with these requirements. State juvenile justice agencies must create a unified electronic data system to collect outcome data across all facility schools. This data system should be integrated with the agency's case management system and also linked with the state's electronic education longitudinal data system to the extent possible.

2.2 Establish formal processes for reviewing student outcome data for incarcerated youth and use these data to evaluate and improve school performance.

State policymakers should require juvenile justice and education agencies to report annually to the legislature and the governor on student outcomes for incarcerated youth. These data should be presented as part of an annual report from the state juvenile correctional agency on juvenile recidivism rates and other youth outcomes, as well as part of the state education agency's school and district accountability reports. Reports should be available to the public in the same way that school report cards are published online annually by state education agencies for traditional public schools. Data should also be analyzed in these reports by various factors, including student demographics, facility type (state-run, privately run, or locally run), and education provider (juvenile justice agency, state or local education agency, or nonprofit or for-profit organization).

Policymakers should use these reports to evaluate facility schools' progress toward meeting annual student performance targets as part of the state's accountability plan for facility schools. Performance targets should be measurable and realistic based on a youth's length of stay in a facility. Examples of meaningful performance targets could include the percentage of students who are improving at a rate equal to one grade level per year or better in math or reading; the percentage of students who are earning high school credits similar to the rate at which credits are earned if youth were on track; and an average daily attendance for the facility school of 90 percent.

Finally, outcome data should also be shared internally with facility managers, facility treatment staff, and educators in order for facility staff and education providers to work together to develop cohesive school improvement plans. Student outcome data should be incorporated into educators' performance evaluations and inform the provision of ongoing professional development and training for all staff.

Florida: Developing Student Outcome Measures for Incarcerated Youth

Local school districts in Florida are responsible for the delivery of education in state-run juvenile justice facilities located in their counties. School districts directly provide 62 percent of residential juvenile justice programs' educational services, whereas 38 percent are contracted out to both nonprofit and for-profit educational providers. In 2014, Florida passed legislation that requires the Florida Department of Education (FLDOE) to work with the Florida Department of Juvenile Justice (FLDJJ), service providers, and local school districts to develop an accountability system specifically to evaluate all FLDJJ schools.¹¹ The law includes requirements related to the development of student performance measures; the need to tailor these measures to the unique circumstances of incarcerated youth; and provisions for how this system will be used to evaluate schools and guide improvement efforts. Once the system is implemented, the FLDOE and FLDJJ will be required to report progress annually to the state legislature and governor. Additionally, the law requires the identification of high- and poor-performing schools and the timeframes and resources that will be used for both improvement efforts or to reassign responsibility for service delivery.

Transitioning Incarcerated Youth to Educational/Vocational Settings Post Release

FINDING 3. Policies and practices employed in most states make it especially challenging for youth released from incarceration to make an effective transition to community-based educational or vocational settings.

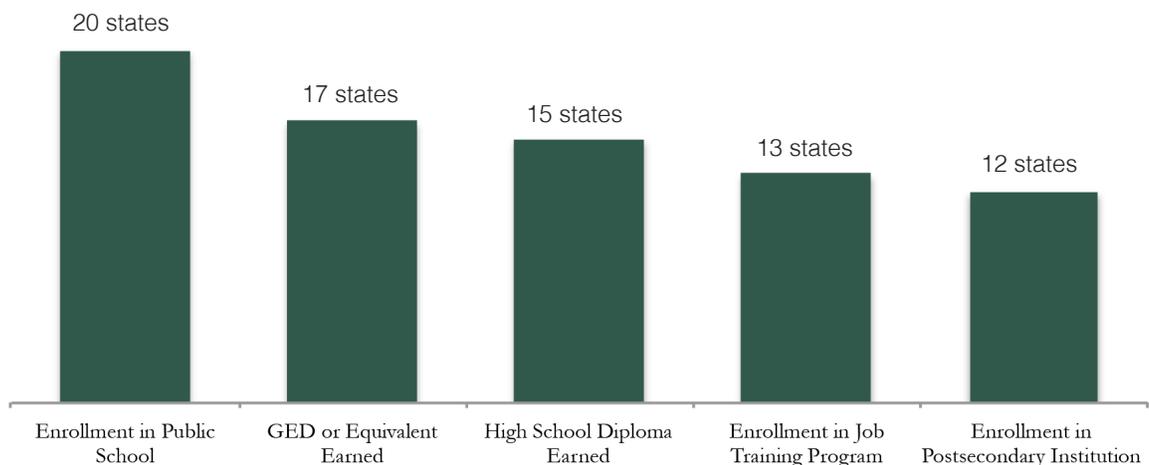
In order to improve the likelihood that incarcerated youth succeed in the community, they need to quickly reengage in an educational or vocational setting or secure gainful employment immediately upon release. States struggle, however, to support youth in making this transition.

- In nearly half of the states, no single government agency is responsible for ensuring that incarcerated youth transition successfully to an educational or vocational setting in the community upon release. Instead, these states leave it up to community-based organizations or parents/guardians to ensure youth are reenrolled. Only 11 states (22 percent) have a dedicated education transition liaison responsible for facilitating these transitions.
- In more than one-third of states, incarcerated youth are automatically reenrolled into an alternative educational setting—which often do not meet state curricular and performance standards and suffer from lower graduation rates than traditional public schools—rather than their home school or another appropriate educational or vocational setting.¹²

Many states also struggle to track student outcome data for youth after they are released from incarceration. [See Figure 8]

- Only 20 states (40 percent) collect data on whether youth are enrolled in a public school upon release and 12 states (24 percent) collect data on postsecondary enrollment.
- Even fewer states (17 states, or 34 percent) collect data on enrollment in GED programs or enrollment in job training programs (13 states, or 26 percent).
- Fewer than one-third of states track whether youth attain an educational or vocational credential within 6–12 months after release from incarceration.

Figure 8. States' Collection of Student Outcome Data for Incarcerated Youth Post Release



Recommendations

3.1 Designate a single agency to be responsible for ensuring youths' successful transition to a community-based educational or vocational setting after release from incarceration.

All incarcerated youth should be provided with the necessary guidance and supports from a state agency, or its official designee, to navigate their difficult transition back to the community. To support youth and their families in making these transitions, state policymakers should require the designation of specific state/local transition coordinators to facilitate these transitions. Transition coordinators should:

- Facilitate the quick transfer of educational records between the facility school and the youth's home school (or another educational setting) and ensure that all credits transfer;
- Inform youth and families about the options available for youth to continue their educational and vocational training, or to obtain employment;
- Work with youth and families to determine the most appropriate post-release educational/vocational setting; and
- Serve as a conduit between the juvenile justice and education systems, share information across agencies, and meet with staff in community schools where youth are reenrolling to share transitions plans and identify appropriate placements/services.

Additionally, to improve the transition process, state policymakers should require that juvenile justice and education agencies engage in the following practices:

- Juvenile justice and education agencies work together to develop a written educational transition plan for incarcerated youth at least 30 days prior to release, and establish timelines for how and when credits and student records will be transferred.
- At a minimum, a parent/guardian, classroom teacher, and school counselor are involved in the development of a youth's transition plan.
- Youth are reenrolled in an educational or vocational setting prior to release from a facility, and attend the school or program immediately upon release.
- Youth are reenrolled in their home school, while automatic placement in alternative education programs is restricted. In a limited number of cases, the youth's home school may not be the best option. Policy exceptions could include:
 - Victim and safety concerns in the home school
 - Transportation barriers
 - Family and student concerns about safety
 - Availability of educational and other services to meet students' needs

3.2 Require juvenile justice and education agencies to track and report on a minimum set of student outcomes for youth post release.

State policymakers should identify key outcome measures for youth after they are released from incarceration and specify what agency has primary responsibility for collecting and tracking these data, for how long, and how these outcomes will be reported and to whom. Key post-release outcomes that states should track include:

- High school credit accumulation
- Improvement in math assessment scores and meeting proficiency targets
- Improvement in reading assessment scores and meeting proficiency targets
- Enrollment in public school, GED program, job training program, or postsecondary institution
- Earning an educational or vocational diploma, certificate, or credential
- Securing and maintaining employment
- Enlistments in military service

State and local juvenile justice and education agencies (with involvement from courts, probation, and other important stakeholders) will need to establish formal collaboration mechanisms, such as information-sharing agreements, to collect these data. An interagency working group, comprising not only of education and juvenile justice agencies, but also the business community, institutions of higher education, and other youth-serving agencies, should meet at least quarterly to identify and address barriers to data collection as well as to review the outcome data that is collected. This working group should use these data to identify ways to collaborate to improve the transition process and related outcomes for incarcerated youth.

Massachusetts: Collaboration between Juvenile Justice and Education Agencies to Support Incarcerated Youth

The Massachusetts Department of Youth Services (DYS) contracts with nonprofit organizations to design, manage, and implement comprehensive educational and workforce development services for incarcerated youth in facilities and post release. Through a contract with one of these service providers, the Collaborative for Educational Services, DYS employs 11 Education and Career Counselors (ECCs) who are assigned to every post-adjudicated DYS student and help facilitate their successful transition to appropriate educational and vocational settings in the community. Specifically, ECCs perform the following duties:

- Work closely with DYS caseworkers, service provider staff, and district school staff to share information on students' educational strengths and needs;
- Prepare DYS school transcripts for youth and forward transcripts to the appropriate school district for determination of credits and grade placement;
- Coordinate timely record transfers between facility and community schools;
- Attend hearings regarding suspension or expulsion of youth from their local school; and
- Arrange financial support for students to enroll in postsecondary institutions.

Additionally, as part of the partnership between DYS and the Massachusetts Department of Elementary and Secondary Education (ESE), the agencies have access to a shared software system that manages student educational data, which helps the ECCs to individualize student planning and support the transition process.

CONCLUSION

The survey findings presented in this report demonstrate that many states are struggling to ensure that incarcerated youth are afforded access to the same educational and vocational services as their peers in the community. In most states, it is likely that policymakers and even state agency leaders lack the full picture of what educational and vocational services are available to incarcerated youth; who is responsible for the provision of these services; and what, if any, outcomes students are achieving. Thus, policymakers and juvenile justice and education agency leaders should use the findings and recommendations in this brief to further scrutinize how educational and vocational services are overseen and delivered to incarcerated youth in their state, how youth are supported in making a successful transition back to the community, and how student outcome data for incarcerated youth are collected, analyzed, reported, and used for improvement and accountability purposes.

ENDNOTES

1. One of the main provisions of the No Child Left Behind Act of 2001 (NCLB) ensures that schools are held accountable for student outcomes. As a result of this law and other federal policies that followed (such as the Elementary and Secondary Education Act [ESEA] flexibility waiver requests granted by the U.S. Department of Education), states and schools are required to focus their attention on meeting certain academic performance targets for all students and particular subgroups, and implement policies and practices to support this goal. To read more about the provisions included in NCLB related to accountability, see <http://www2.ed.gov/nclb/landing.jhtml?src=ln>. To read more about accountability as part of the ESEA flexibility waivers, see <http://www2.ed.gov/policy/elsec/guid/esea-flexibility/index.html>.
2. Joseph Gagnon and Brian Barber, "Characteristics of and Services Provided to Youth in Secure Care Facilities," *Behavioral Disorders* 36, no. 1 (2010): 7–19; Peter Leone, Sheri Meisel, and Will Drakeford, "Special Education Programs for Youth with Disabilities in Juvenile Corrections," *Journal of Correctional Education* 53, no. 2 (2002): 46–50; Mindee O’Cummings, Sarah Bardack, and Simon Gonsoulin, "The Importance of Literacy for Youth Involved in the Juvenile Justice System," The National Evaluation and Technical Assistance Center for the Education of Youth Who Are Neglected, Delinquent, or At Risk (2010).
3. Peter Leone and Lois Weinberg, "Addressing the Unmet Educational Needs of Children and Youth in the Juvenile Justice and Child Welfare Systems," Center for Juvenile Justice Reform, Georgetown Public Policy Institute (2012), <http://cjjr.georgetown.edu/pdfs/ed/edpaper.pdf>.
4. The Sentencing Project, "Trends in U.S. Corrections," (Washington, DC: The Sentencing Project, 2015), http://sentencingproject.org/doc/publications/inc_Trends_in_Corrections_Fact_sheet.pdf.
5. Leone and Weinberg, "Addressing the Unmet Educational Needs of Children and Youth in the Juvenile Justice and Child Welfare Systems" (2012); Andrea Sedlack and Karla McPherson, "Survey of Youth in Residential Placement: Youth’s Needs and Services," SYRP report (Rockville, MD: Westat, 2010); Mary Magee Quinn, Robert Rutherford, Peter E. Leone, David M. Osher, and Jeffrey M. Poirier, "Youth with Disabilities in Juvenile Corrections: A National Survey," *Council for Exceptional Children* 71, no. 3 (2005): 339–245.
6. Andrea Sedlack and Karla McPherson, "Survey of Youth in Residential Placement: Youth’s Needs and Services," SYRP report (Rockville, MD: Westat, 2010)
7. Melissa Sickmund, T.J. Sladky, Wei Kang, and Charles Puzanzchera, "Easy Access to the Census of Juveniles in Residential Placement" (2013), <http://www.ojdp.gov/ojstatbb/ezacjrp/>.
8. U.S. Department of Education and U.S. Department of Justice, "Guiding Principles for Providing High-Quality Education in Juvenile Justice Secure Care Settings" (2014), <http://www2.ed.gov/policy/gen/guid/correctional-education/guiding-principles.pdf>.
9. For more information, see the U.S. Department of Education’s letter regarding the Individuals with Disabilities Education Act for students with disabilities in correctional facilities, <http://www2.ed.gov/policy/gen/guid/correctional-education/idea-letter.pdf>.
10. For New England Commission standards, visit https://cis.neasc.org/sites/cis.neasc.org/files/downloads/Standards_and_Indicators/Standards_only_sa.pdf. For Middle States Commission standards, visit http://msa-cess.org/Customized/uploads/Accreditation/Standards%20for%20Accreditation-Schools%202010_.pdf. For Western Accrediting Commission for Schools, visit http://acswasc.org/about_criteria.htm#wascriteria. For AdvancED standards (a merger of the North Central Association Commission on Accreditation and School Improvement, the Southern Association of Colleges and Schools on Accreditation and School Improvement, and the Northwest Accreditation Commission), visit <http://www.advanc-ed.org/>. Additionally, the Correctional Education Association also has an accreditation service. See <http://www.ceanational.org/index.htm>.
11. Florida Senate Bill 850 is available at <https://www.flsenate.gov/Session/Bill/2014/0850/BillText/er/PDF>.
12. Hanley Chiang and Brian Gill, "Student Characteristics and Outcomes in Alternative and Neighborhood High Schools in Philadelphia," Mathematica Policy Research, Inc. (2010).

Suggested citation: The Council of State Governments Justice Center, “Locked Out: Improving Educational and Vocational Outcomes for Incarcerated Youth” (New York: The Council of State Governments Justice Center, 2015).

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The Council of State Governments (CSG) Justice Center is a national nonprofit organization that serves policymakers at the local, state, and federal levels from all branches of government. It provides practical, nonpartisan advice and consensus-driven strategies—informed by available evidence—to increase public safety and strengthen communities. For more about the CSG Justice Center, see csgjusticecenter.org.



The Office of Juvenile Justice and Delinquency Prevention (OJJDP), Office of Justice Programs, U.S. Department of Justice, supports states, local communities, and tribal jurisdictions in their efforts to develop and implement effective programs for juveniles. OJJDP strives to strengthen the juvenile justice system’s efforts to protect public safety, hold offenders accountable, and provide services that address the needs of youth and their families. OJJDP sponsors research, program, and training initiatives; develops priorities and goals and sets policies to guide federal juvenile justice issues; disseminates information about juvenile justice issues; and awards funds to states to support local programming. For more information, see ojjdp.gov.

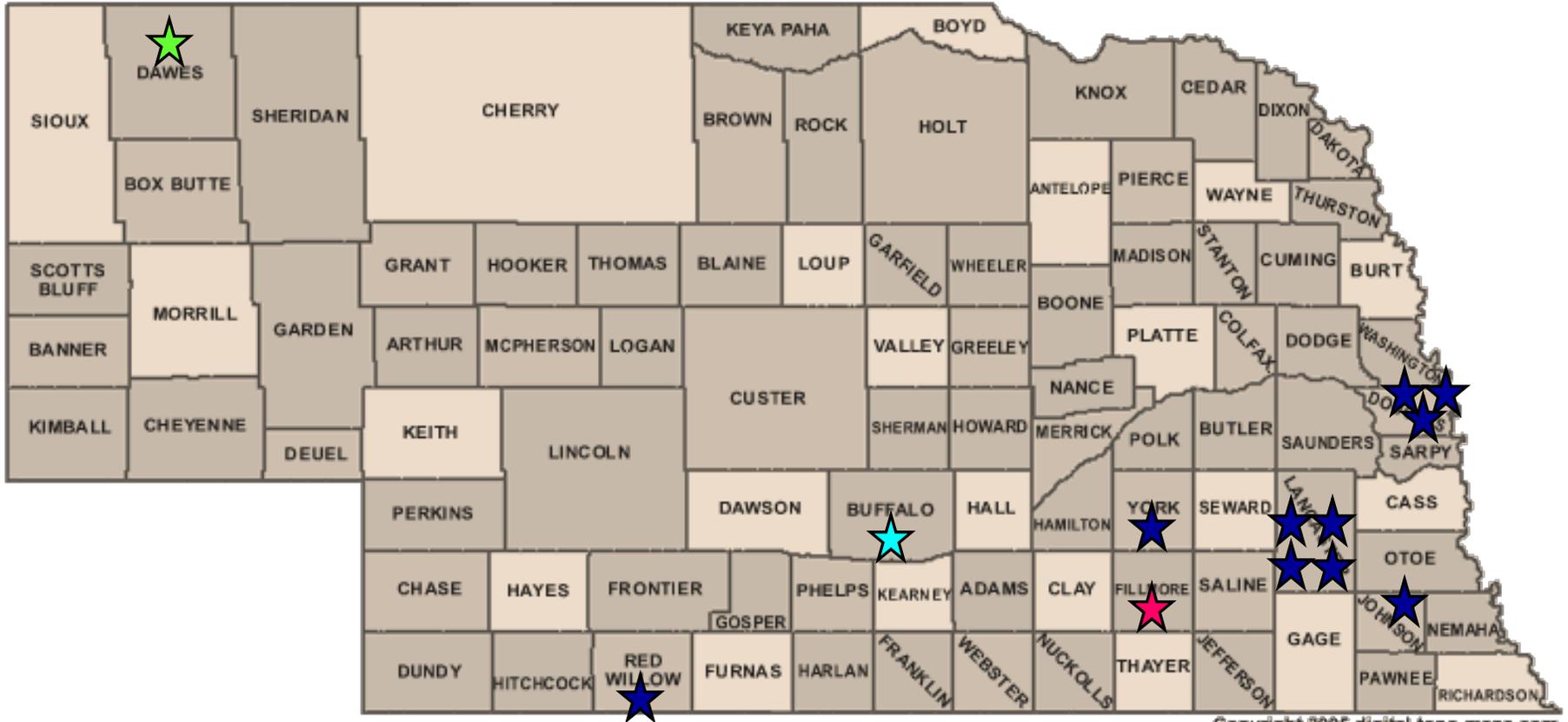


Established by the Second Chance Act, the National Reentry Resource Center (NRRC) provides education, training, and technical assistance to states, tribes, territories, local governments, community-based service providers, nonprofit organizations, and corrections institutions involved with prisoner reentry. The NRRC’s mission is to advance the reentry field by disseminating information to and from policymakers, practitioners, and researchers and by promoting evidence-based principles and best practices. The NRRC is administered by the U.S. Department of Justice’s Bureau of Justice Assistance and is a project of The Council of State Governments Justice Center, in cooperation with the Urban Institute, the National Association of Counties, the Association of State Correctional Administrators, the American Probation and Parole Association, and other key partner organizations. To learn more about the National Reentry Resource Center, please visit csgjusticecenter.org/nrrc.



Nebraska Department of Education

NEBRASKA'S ACCREDITED SPECIAL PURPOSE SCHOOLS



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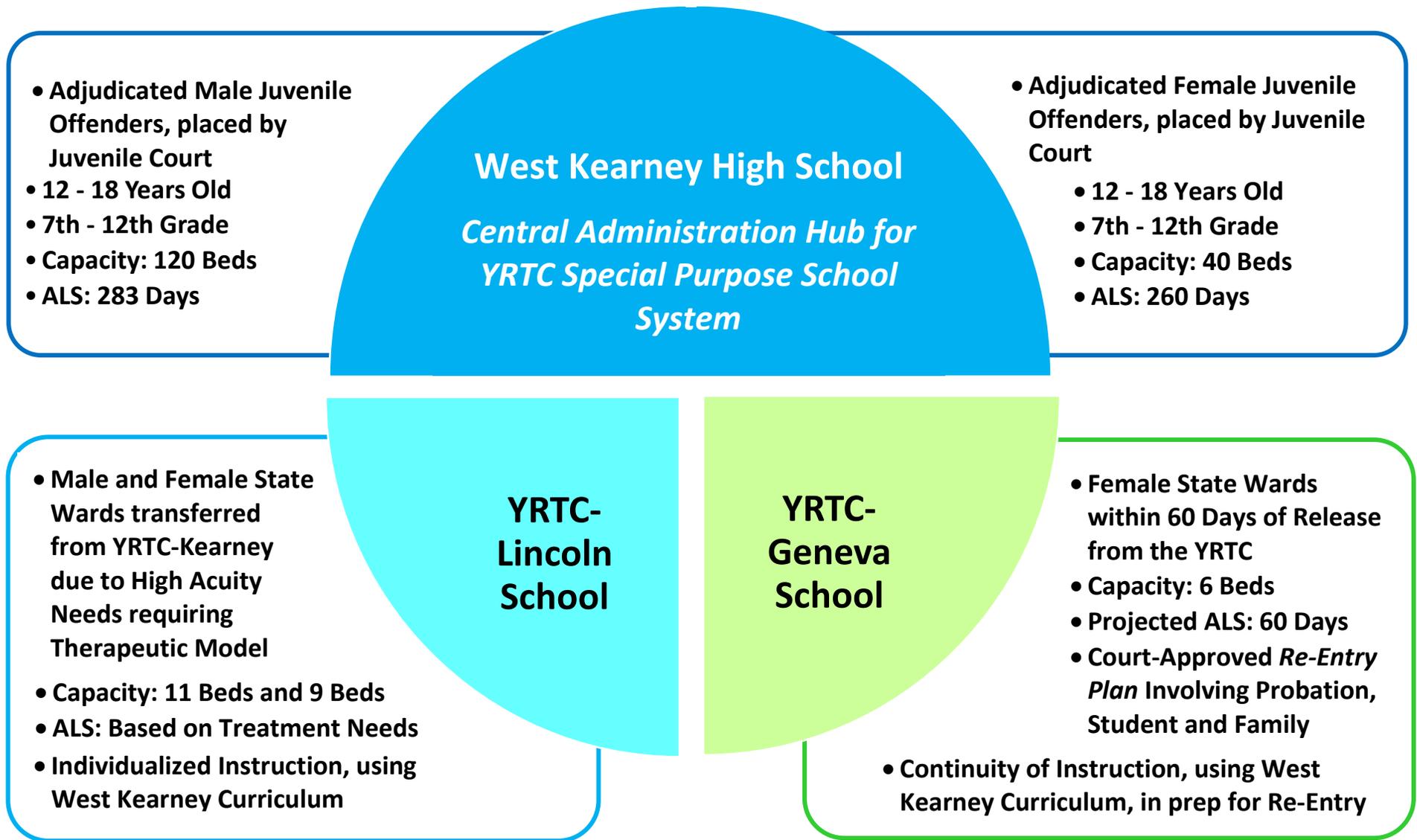
-  Geneva North School at Youth Rehabilitation and Treatment Center (YRTC) in Geneva, operated by Nebraska Dept. of Health and Human Services.
-  West Kearney High School at Youth Rehabilitation and Treatment Center (YRTC) in Kearney, Nebraska Dept. of Health and Human Services.
-  The Nebraska Department of Correctional Services (NDCS) operates a *Special Purpose School System*, with school sites in each of its prisons:
 - Lincoln Diagnostic and Evaluation Center
 - Nebraska Correctional Youth Facility (NCYF)
 - McCook Work Ethic Camp (DCS / State Probation)
 - Lincoln Community Corrections Center
 - Omaha Community Corrections Center
 - Tecumseh State Correctional Institution
 - Lincoln Correctional Center
 - Omaha Correctional Center
 - Nebraska Correctional Center for Women in York
 - Nebraska State Penitentiary
-  Pine Ridge Job Corps Center near Chadron is operated by U.S. Department of Labor and U.S. Department of Agriculture - Forest Service.



DATE: August 1, 2019

SOURCE: Nebraska Department of Education (NDE) – “Fostering Connections in Education” for Systems-Involved Students

2020-2021 CONSOLIDATED YRTC SPECIAL PURPOSE SCHOOL SYSTEM



DATE: December 16, 2019

SOURCE: Nebraska Department of Health and Human Services and Nebraska Department of Education – “Fostering Connections in Education” for Systems-Involved Students

2020 YRTC SPECIAL PURPOSE SCHOOLS

- Adjudicated Male Juvenile Offenders, placed by Juvenile Court
- 12 - 18 Years Old
- 7th - 12th Grade
- Capacity: 120 Beds
- ALS: 283 Days

**West
Kearney
High School**
*Located at
YRTC-Kearney*

**Geneva
North School**
*Re-Located to
YRTC-Kearney
in August,
2019*

- Adjudicated Female Juvenile Offenders, placed by Juvenile Court
 - 12 - 18 Years Old
 - 7th - 12th Grade
 - Capacity: 40 Beds
 - ALS: 260 Days

- Male and Female State Wards transferred from YRTC-Kearney due to High Acuity Needs requiring a Therapeutic Model
- Capacity: 11 Beds and 9 Beds
- ALS: Based on Treatment Needs
- Individualized Instruction, using West Kearney or Geneva North's Curriculum

**YRTC-Lincoln
School**
*Opening
January, 2020*

**YRTC-
Geneva
School**
*Opening
January, 2020*

- Female State Wards within 60 Days of Release from the YRTC
- Capacity: 6 Beds
- Projected ALS: 60 Days
- Court-Approved *Re-Entry Plan* Involving Probation Officer, Student and Family
- Continuity of Instruction, using Geneva North's Curriculum, in prep for Re-Entry



DATE: December 16, 2019

SOURCE: Nebraska Department of Health and Human Services and Nebraska Department of Education – “Fostering Connections in Education” for Systems-Involved Students

2019 YRTC SPECIAL PURPOSE SCHOOLS

- **Adjudicated Male Juvenile Offenders, placed by**
- **Juvenile Court**
- **12 - 18 Years Old**
- **7th - 12th Grade**
- **Capacity: 120 Beds**
- **ALS: 283 Days**

**West Kearney
High School**

**Located at
YRTC-Kearney**

**Geneva North
School**

**Re-Located to
YRTC-Kearney
in August, 2019**

- **Adjudicated Female Juvenile Offenders, placed by Juvenile Court**
- **12 - 18 Years Old**
- **7th - 12th Grade**
- **Capacity: 40 Beds**
- **ALS: 260 Days**



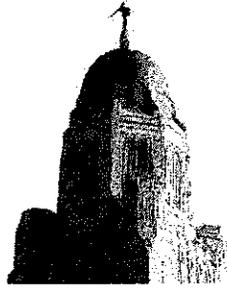
DATE: December 16, 2019

SOURCE: Nebraska Department of Health and Human Services and Nebraska Department of Education – “Fostering Connections in Education” for Systems-Involved Students

APPENDIX 32

WRITTEN TESTIMONY OF
IG FOR CHILD WELFARE
JENNIFER CARTER AND
OMBUDSMAN JULIE ROGERS
OCT. 23, 2020

JENNIFER A. CARTER
Inspector General



STATE OF NEBRASKA
OFFICE OF INSPECTOR GENERAL OF CHILD WELFARE
State Capitol, P.O. Box 94604
Lincoln, Nebraska 68509-4604

Testimony Before the YRTC Oversight Committee
October 23, 2020

Good afternoon, Chairman Arch and members of the YRTC Oversight Committee. My name is Jennifer Carter and I serve as the Inspector General of Nebraska Child Welfare. Thank you for inviting me to testify today.

The Office of Inspector General of Nebraska Child Welfare (OIG) provides accountability for Nebraska's child welfare and juvenile justice systems through independent investigations, identification of systemic issues, and recommendations for improvement.

Today I plan to provide a brief description of the work our office, along with the Ombudsman, has done regarding the YRTCs, observations from the last 14 months, and some suggested recommendations and thoughts for the committee's consideration.

The OIG and the Ombudsman's office have been investigating the events and circumstances that led to the collapse of the YRTC at Geneva in August 2019. That report is forthcoming.

However, since the initial crisis, the OIG in cooperation with the Ombudsman's office has been following and responding to the constant state of change and disruption within the YRTC system which has resulted in a multitude of complaints, allegations, and issues such as:

- A variety of issues related to the initial move of the female youth from Geneva to Kearney, including issues surrounding the sudden transfer of the girls to the Kearney YRTC which up until that point was a facility for **boys**; issues regarding the safety and adequacy of the living units; concerns and challenges with the bathrooms and a lack of privacy not only from each other but from staff, including male staff; getting the girls programming including assessment and therapy;
- Other challenges related to immediately serving both boys and girls on the same campus with no notice, including major changes in schedules for the boys and the girls; the efforts and policies surrounding separation and segregation between the girls and boys on the campus; rearrangement of family visitation schedules; multiple escapes from the facility and a serious assault;
- Major issues regarding the girls' education including lost hours, the purchase of two modular buildings to use for school, and then the consultation with and partnership with the Nebraska Department of Education;

- The effects of the major changes on the Geneva campus such as significant mold remediation work, the progress on the renovation of LaFlesche and the initial plans to move the girls back to the Geneva campus when the buildings were safe; the later reduction in force of all YRTC-Geneva employees; the change in purpose for the facility as a facility for females transitioning out of the YRTCs and the repurposing of the YRTC-Geneva High School into use as a Medicaid call center;
- The proposed October 2019 business plan which included the creation of a YRTC facility in Lincoln that is housed in a detention center and the noted change in the use and purpose of the Geneva campus;
- Multiple changes in leadership and roles at the YRTCs and Office of Juvenile Services;
- The effect on staffing across several facilities including confusion about the future of facilities and positions; the shifting of staff between facilities with attendant concerns about lack of training as non-YRTC staff were shifted to the YRTCs;
- The opening of the Lincoln facility, including a change in type of youth that were anticipated to be served there from youth with highest behavior needs to the youth with the highest mental health needs as well as the use of programming that is not evidence based within the juvenile justice community;
- COVID and the attendant challenges for the facilities;
- The second business plan released in July 2020 that proposed additional significant changes and disruptions in the YRTC system including the creation of a YRTC for girls at the Hastings Regional Center in the building which was built for the Chemical Dependency Program; the resulting dislocation of the Chemical Dependency program to the Whitehall campus in Lincoln; and the changes necessitated by having two separate programs for male youth on the Whitehall campus which require sight separation, the additional use of space, licensing changes, etc.
- The contract with the Missouri Youth Services Institute contract;
- The planned closure of the YRTC at Geneva; and
- How each shift in the plans affected YRTC staff and administrators as well as youth and families.

After working on all of these events and changes, our strong recommendation is that there should be no further disruptions in the system until a deliberate and thoughtful planning process is undertaken with significant and meaningful stakeholder input – a planning process that examines the system as a whole and reflects a long range plan for the juvenile justice system. Importantly, any creation of new facilities or moving of programs to new locations should only be done with such rigorous vetting and input.

The planning required under LB 1140 presents a critical opportunity to begin the process of long range planning that sets goals for the system and creates a detailed plan for how to reach those goals.

Over the last 14 months the Department has begun several initiatives and set forth two different plans for the YRTCs. Those plans were not vetted outside the Department with other stakeholders or those affected by their decisions. The broader system goal of the most recent plan is not clear. Is it a step toward a fundamental change in the YRTC system, for example, a move

toward a more regional system? Is the goal simply to move the female youth out of the Kearney facility?

The initiatives and changing plans have created a great deal of instability in the system. The breadth and frequency of the changes have made it hard for our office to evaluate each change and the effect those changes have on the youth. In addition, while the Department's business plans have identified intended outcomes, e.g., the creation of a facility in Lincoln or repurposing the Hastings Regional Center, the plans have not considered or detailed how to reach those outcomes. Further, there is no vision of how those stated outcomes relate to an end goal for the YRTC's and the youth served.

The result has been a system, including administrators and staff, that is constantly reacting and often having to react and plan on a short timeline.

To be clear, the administrators and staff that we have observed are working hard to create the best plans to implement the outcomes detailed in the business plans and are trying to take this opportunity to improve the system and make it more cohesive. Work is being done to create a more cohesive YRTC system in areas like education and mental health treatment. But much of the work is being done in reaction to these newly announced plans in an effort to execute on those ideas. The logistics necessary to meet these planned outcomes are significant and have an effect beyond the YRTC's.

For example, these plans have resulted in significant expenditures such as; the renovation of LaFlesche on the Geneva campus; the purchase of modular buildings required for the girl's education on the Kearney campus; the lease and renovation of the Lincoln facility and for necessary upgrades at that facility; the renovations at the Whitehall campus; and the renovations of the new building at the Hastings Regional Center. These expenditures are often made in reaction to the shifting plans. It appears that those expenditures have been made through existing appropriations since no additional funding was requested. It is unknown where specifically those funds came from and whether they have affected the original purpose and intent of the original appropriations.

Another example is the move of the Juvenile Chemical Dependency Program from Hastings to the Whitehall campus in Lincoln. I visited Whitehall in anticipation of the move and visited again, together with Jerall Moreland from the Ombudsman's office, after the move. Our observation is that the administration and staff are working hard to make it possible to serve both programs on that campus. However, issues remain. While the facility is well kept, it is over 50 years old and the facilities are run down. It is our understanding that the staffing plan meets the required 1:4 ratio for accreditation. But that staffing is based on the current census. In addition, having both programs on one campus requires sight separation between the two programs which involves a good deal of communication and movement of youth to accomplish that. As the census in these programs return to pre-pandemic levels, it is not clear what the staffing plan is to accommodate that. Housing both programs has already required the moving of offices and programming to create more living space in anticipation of the census growing again. Resources may be needed to ensure all of the buildings on campus can be utilized to the fullest extent to accommodate both of the programs. These are critical programs that need to be properly



resourced. This then is another example of how the lack of planning directly affects the legislative and appropriations process.

The instability and reactionary posture of the decision making is also having a profound effect on staff. We are hearing from staff that there is a good deal of confusion and speculation about whether their positions are stable or where they will be working. We continue to receive questions regarding the status of the Geneva campus. The short timeline for change has also affected staff. For example, as described to this Committee by DHHS during the visit to Hastings in September, the staff from the Hasting Regional Center was asked to work at Whitehall for four weeks during the transitioning of the Chemical Dependency Program. The trip between Hastings and Whitehall is a three-hour round trip. While the plan for the transition of the youth might have been a good one, that kind of change in the terms of employment is significant and particularly difficult on short notice especially if those employees have family or other obligations closer to home that would be affected by the long commute.

Also related to staffing, we remain unclear on the staffing plan for the Hastings Regional Center and whether a staffing analysis was done. We have requested information related to this and believe it is forthcoming.

We also remain concerned that the disruption to staff over the last year – the reduction in force at Geneva, then the rehiring of positions in Geneva, the upheaval for staff in Hastings and yet again in Geneva, as well as the cycling of new staff in and out of Kearney – has exacerbated the concerns the Department has consistently raised about the inability to staff these facilities.

Of course, all of this also has an effect on the youth. As just one example, it has been reported to us that there is confusion among the female youth about what the Geneva YRTC changes mean for youth who are entering Phase 4. Up until now, if a female youth at the YRTC-Kearney reached Phase 4, they would be transferred to the Geneva campus for transitioning home – an incentive to reach that level. Now they are unsure if their transition process is affected or delayed if they are no longer going to Geneva.

Many of the issues we are hearing about seem to arise from the challenges of communicating with those affected given the instability and changes in the system and the short timelines for planning.

It has been a year of significant and revolving change in our YRTC system. The OIG believes the system, its employees, and the youth it serves, would benefit from a pause in any major fundamental changes to the YRTC system. We hope, of course, that there are always continued efforts to improve the system and the care the youth receive. But there needs to be time to thoroughly vet and consider any significant structural changes to the system.

What is needed is more comprehensive planning, with input and buy in from stakeholders, that sets out the long term goal for the YRTC and juvenile justice system and includes a path forward to reach that goal so that those affected, the Legislature, the staff, community partners, etc., can properly prepare and work together to reach that goal.

Until that time, we would urge the Committee to ensure that the planning process under LB 1140 is robust or to facilitate additional planning time if necessary. We would also urge the Committee to explore ways to ensure that no further major changes are made to the system, such as the creation of other YRTCs, until such a planning process is undertaken to allow the system to stabilize while planning is done.

The OIG will continue to evaluate where the system is now and the effect of the latest plan on the facilities and the youth they serve. We are happy to work with the Oversight Committee in any way we can be helpful.

APPENDIX 33

WRITTEN TESTIMONY OF
MONIKA GROSS
EXECUTIVE DIRECTOR,
FOSTER CARE REVIEW OFFICE
OCT. 23, 2020



**Foster Care Review Office
Testimony to the YRTC Special Oversight Committee
October 23, 2020**

Senator Arch and members of the Special Oversight Committee. Thank you for inviting me to speak with you today. My name is Monika Gross. I am the Executive Director of the Foster Care Review Office (FCRO) and I am here to provide testimony regarding the youth who are committed to the Youth Rehabilitation and Treatment Centers. The Foster Care Review Office (or FCRO) is an independent state agency responsible for oversight of children/youth in out-of-home care as defined in the Nebraska statutes.

The FCRO meets its statutory duties in two different ways: at the individual case level and at the systems level. The individual case level reviews (approximately 4,200 reviews completed last fiscal year) are completed by 53 local volunteer boards that meet across the state (now virtually) and are facilitated by one of our 18 System Oversight Specialists and their supervisors. Our local boards make findings and submit written recommendations to the court and legal parties involved in the child's juvenile court case.

At the system level the FCRO analyzes the data we collect and submits reports and recommendations to the Legislature annually and quarterly. Our most recent Annual Report was submitted electronically to the Legislature on September 1, 2020 and is also available on our website, www.fcro.nebraska.gov.

The FCRO maintains an independent, statewide tracking system of all children/youth in out-of-home care. Data is reported to the FCRO on all children/youth in out-of-home care by the Courts (through its Justice system), by DHHS (through its NFOCUS system), by juvenile probation and by private agencies. Additional data is collected by our staff during the case file review process.

Cases of children in out-of-home care are typically reviewed every six months after a child has been in out-of-home care for at least six months. The FCRO's statutory authority to track and review children/youth who are placed in out-of-home care extends to youth who are placed out-of-home through the juvenile justice system, including youth committed to the YRTCs.

Our annual report which is mandated by statute, is a data-driven, factual analysis of the foster care system in Nebraska for the most recent state fiscal year. In addition, statute

mandates that the FCRO submit quarterly reports regarding specific issues facing the foster care system. The FCRO's March 2020 quarterly report contains a special study on youth placed at the YRTCs, and much of that data is replicated in our 2020 Annual Report.

I would like to share with you some of the data reported in the March 2020 quarterly report and the 2020 Annual Report dated September 1, 2020. Please be advised that the data I will be referencing is from the state fiscal year ending June 30, 2020. The average daily population of youth placed at a YRTC decreased last fiscal year from a high of 126 in July and August 2019 to just 88 in June 2020 (the most recent month on which the FCRO reported). This was mostly due to a decline in the number of boys beginning in March 2020, coinciding with the beginning of pandemic-related directed health measures. The girls' population declined from a high of 39 in June 2019 to a low of just 16 in November 2019, before increasing slightly over the next two months and then leveling off for the remainder of the fiscal year. Overall there was a 28% reduction in the average daily population over SFY2019-20.

Minority youth are disproportionately represented at the YRTCs. That means that white youth (boys and girls) are under-represented when compared with their representation in the population at large in Nebraska. Black, Hispanic, Native American, and youth of two or more races are over-represented at the YRTCs compared with the youth population at large in Nebraska (except for Hispanic girls, who are slightly under-represented.)

Nearly 63% of the girls and 42% of the boys at YRTCs have a history of removal from their homes due to abuse/neglect. In fact, girls at the YRTCs with a history of removal from their homes due to abuse/neglect have had an average of 19.1 different foster care placements during their lifetimes. The average age of girls at the YRTC's is 16, which means that these girls have had an average of 1.2 placements per year throughout their childhood. That means being under a different roof, with different caregivers, different rules, perhaps different schools, etc. The boys do not fare much better, averaging 13.3 lifetime placements.

The average lifetime days at a YRTC for youth who exited the YRTC in SFY2019-20 was 295 for boys and 311 for girls. So the girls' average stay is slightly longer than the boys'.

The FCRO conducts individual case reviews of youth at the YRTCs if they have been in out-of-home care for at least 6 months. We look at the safety and appropriateness of the YRTC placement. The placement appeared safe for 96% of the boys and 71% of the girls. We could not determine the safety of the placement for 28% of the girls, primarily due to lack of information available to our review specialists in the immediate aftermath of the transfer of girls from Geneva to Kearney in 2019.

We looked at the offenses that resulted in the youth being committed to the YRTC. 93% of the girls at a YRTC are there for a misdemeanor, while 56% of the boys are

there for misdemeanors. 44% of the boys had committed a felony, while only 7% of the girls had.

There is a complex relationship between mental health and juvenile justice involvement. Certain mental health conditions may increase a youth's risk for juvenile justice involvement, and involvement in the juvenile justice system can exacerbate existing mental health conditions. About 95% of the youth at the YRTCs have a mental health diagnosis. However, girls were much more likely to be prescribed psychotropic medications than boys. (86% vs. 44%).

The majority of boys and girls reviewed at the YRTCs were diagnosed with substance use issues.

We also looked at whether youth were exhibiting behaviors in the school setting that were disruptive to learning. 70% of the girls and 35% of the boys had documented behaviors that were disruptive to learning. This is significantly different compared to the 85% of Probation supervised youth who displayed normal behaviors in school.

Based on the data and case file reviews the FCRO made the following recommendations in its March 2020 quarterly special report:

Thoughtful consideration needs to be given to the following:

- Gender differences in youth's histories and past traumas that can result in different treatment needs.
- Gender disparities regarding which youth get moved between campuses and under what conditions.
- On-going racial and ethnic disparities.
- The need for purposeful initial and on-going assessments to help tailor individual plans that maximize the benefits youth experience from a YRTC commitment.
- The need for clarity on expectations regarding class attendance and documentation of school performance or educational needs that remain to be addressed.
- Adequacy of behavioral and mental health services and treatment, and ability to continue aftercare services (if necessary) when moved back into the youth's community.
- Ensuring the safety of every youth placed at a YRTC.

Given that youth average 11 months at the YRTCs, it is critical the academic program is responsive to the behavioral and mental health needs of the youth. That being said, if past traumas and current diagnoses are not properly addressed through programming and treatment, educational outcomes will continue to suffer for this population.

It is important as we go forward that we

- Ensure all assessments and individualized treatment plans appropriately account for past traumas due to abuse, neglect, and current mental health diagnoses.
- Ensure programs are age- and developmentally-appropriate, using the best research- or evidence-based approaches.
- Make or restore buildings to appropriate safety standards.
- Enable programming that ensures the safety of youth and the staff that care for them.
- Increase oversight and resources available for the education of the youth.

The FCRO will continue to monitor and report on YRTC's, including any positive changes that may occur as new proposals move forward.

If the Committee requires additional data and analysis from the FCRO, please let me know. We will be happy to share what we have. Thank you for the opportunity to testify today. I will gladly answer any questions.

YRTC YOUTH

YOUTH PLACED AT THE YOUTH REHABILITATION AND TREATMENT CENTERS

This section includes tracking and review data for youth placed at a Youth Rehabilitation and Treatment Center.

Data describe population trends, snapshot distributions, and data only available on youth the FCRO has reviewed.

The Youth Rehabilitation and Treatment Centers (YRTC) have undergone several changes during FY2019-20.

- From June 2019-July 2019, all boys were placed at the YRTC in Kearney and girls were placed at the YRTC in Geneva.
- In August 2019, the girls were moved to YRTC Kearney, and the facility served both boys and girls.¹
- In October 2019, NDHHS announced a three-facility YRTC program that includes placing both boys and girls at YRTC in Kearney, placing some girls close to transitioning home at YRTC in Geneva, and the creation of a new location and program at YRTC Lincoln for “both male and female youth with high behavioral acuity.”²

¹ NDHHS. August 2019. “Youth from Rehabilitation and Treatment Center in Geneva Relocating to Kearney.” Available at: <http://dhhs.ne.gov/Pages/Youth-from-Rehabilitation-and-Treatment-Center-in-Geneva-Relocating-to-Kearney.aspx>

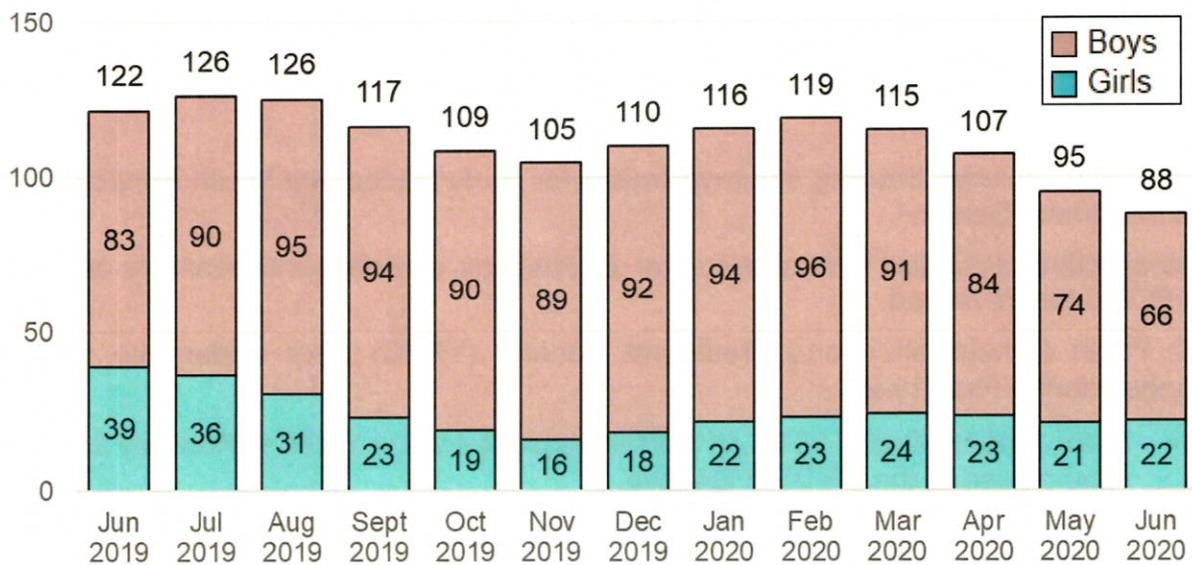
² NDHHS. October 2019. “DHHS Announces Development of Youth Rehabilitation and Treatment Center System.” Available at: <http://dhhs.ne.gov/Pages/DHHS-Announces-Development-of-Youth-Rehabilitation-and-Treatment-Center-System.aspx>

Entries into the YRTCs

TRENDS

Average Daily Population. As discussed in the FCRO March 2020 Quarterly report, the average daily population of girls placed at the YRTCs remained largely unchanged through the first 8 months of 2019, then declined dramatically after a series of incidents in August of 2019.³

Figure 80: Average Daily Population of Youth Placed at a YRTC, FY2019-20



While the girls' population declined in the last quarter of 2019 and remained steady thereafter, the population of boys placed at a YRTC was largely unchanged until the start of the COVID-19 global pandemic in March 2020. By June of 2020, the population of boys had declined by 19.9%, and girls by 43.6% compared to June of 2019 (Figure 81).

Figure 81: Percent Change in Average Daily Population of Youth Placed at a YRTC, June 2019 to June 2020.

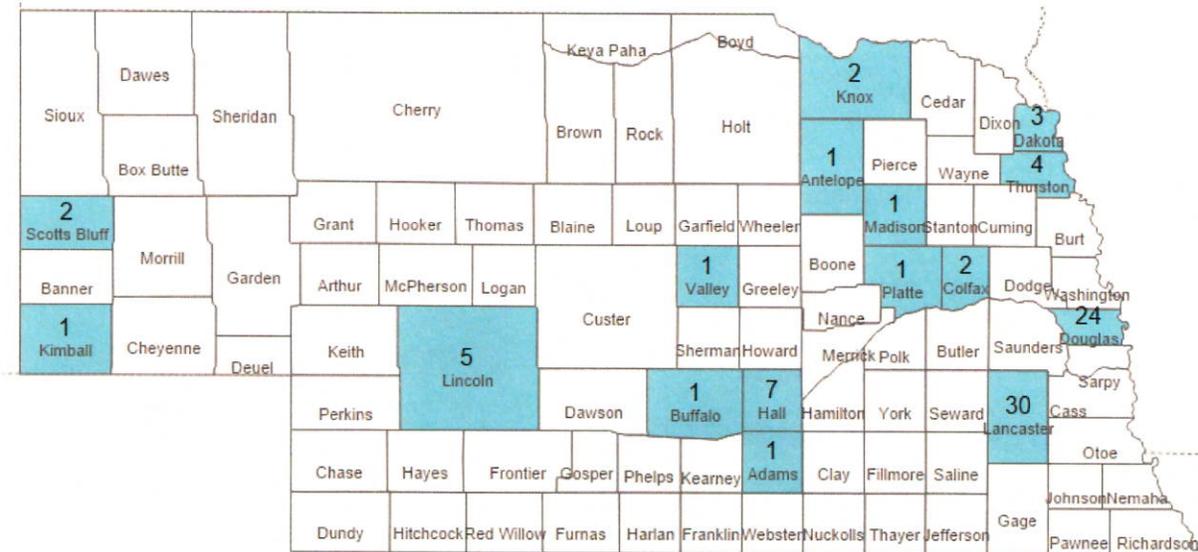
	June 2019	June 2020	% Change
Girls	39	22	-43.6%
Boys	83	66	-19.9%
State	122	88	-27.8%

³ FCRO. March 2020 Quarterly Report. Available at: <https://fcro.nebraska.gov/pdf/FCRO-Reports/2020-q1-quarterly-report.pdf>

DEMOGRAPHICS

County. By June 30, 2020, there were 86 youth placed at a YRTC. Figure 82 illustrates the county of court for each of the youth.

Figure 82: County of Court Jurisdiction for Probation Supervised Youth in Out-of-Home Care on 6/30/2020, n=86



Gender. On June 30, 2020, there were 63 boys and 23 girls placed at a YRTC. During fiscal year 2019-20, the FCRO conducted 55 reviews of boys placed at a YRTC and 21 reviews of girls placed at a YRTC.⁴ Due to significant differences in the past and current experiences for boys and girls who have been placed at a YRTC, most data in this section is presented by gender.

Age. By law, youth placed at a YRTC range in age from 14 to 18. On 6/30/2020, the median age of the girls was 16 and the median age of the boys was 17.

Race and Ethnicity. Minority youth are disproportionately represented at the YRTCs. As shown in Figure 83 and Figure 84, this is true for both girls and boys. In particular:

- 1.1% of Nebraska girls are America Indian, non-Hispanic, but 17.4% of the girls placed at YRTC on 6/30/2020 are American Indian, non-Hispanic. Additionally, multi-racial girls are overrepresented (8.7% of the YRTC girls, compared to 3.8% of Nebraska girls).

⁴ Of the 76 YRTC reviews, 50 were reviewed by FCRO Probation boards with a rehabilitation and community safety focus. The other 26 were dually-involved with the juvenile justice and child welfare system. Their reviews were conducted by FCRO child welfare boards, with a permanency, well-being, and parent rehabilitation focus. As a result, different questions were asked in the different types of reviews.

- Black, non-Hispanic boys are 5.9% of Nebraska boys, but 30.2% of the boys placed at YRTC on 6/30/2020.

Figure 83: Racial and Ethnic Background of Girls Placed at a YRTC on 6/30/2020, n=23

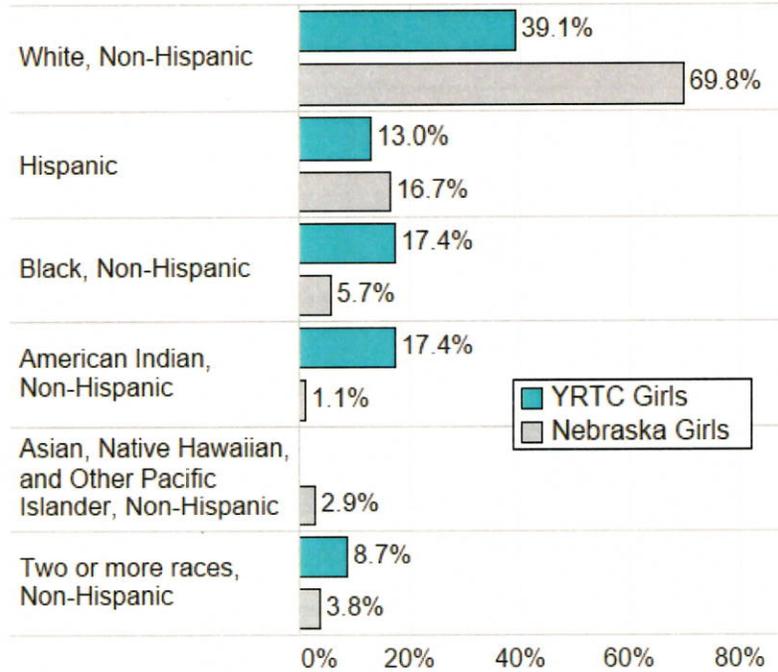
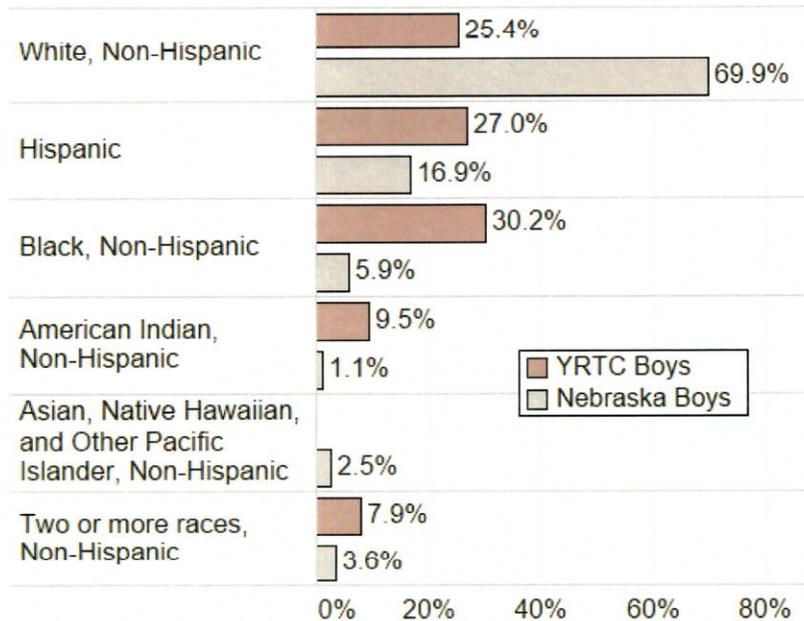


Figure 84: Racial and Ethnic Background of Boys Placed at a YRTC on 6/30/2020, n=63

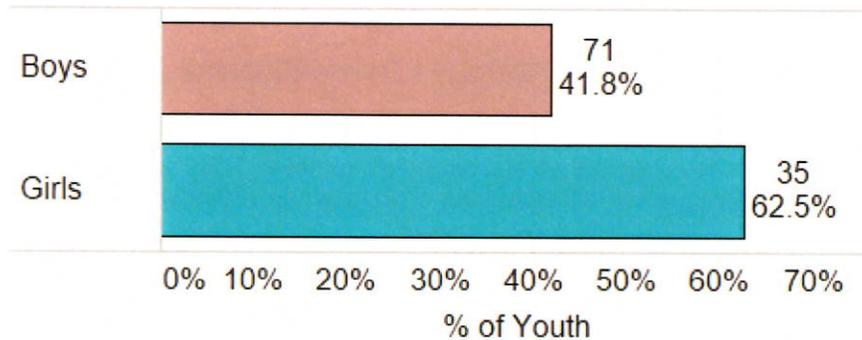


SYSTEM INVOLVEMENT

In total, 238 youth were placed at a YRTC during FY2019-20, 176 boys and 62 girls. The majority were placed at the YRTC through a Nebraska Juvenile Court proceeding (226), and the other 12 (6 boys and 6 girls) were placed at the YRTC through Tribal Courts.

Abuse/Neglect Removals. For more than 60% of the girls and 40% of the boys at YRTC during FY2019-20, entering the juvenile justice system was not their first encounter with the Nebraska foster care system. These youth had previous or current abuse/neglect related removals from the home.

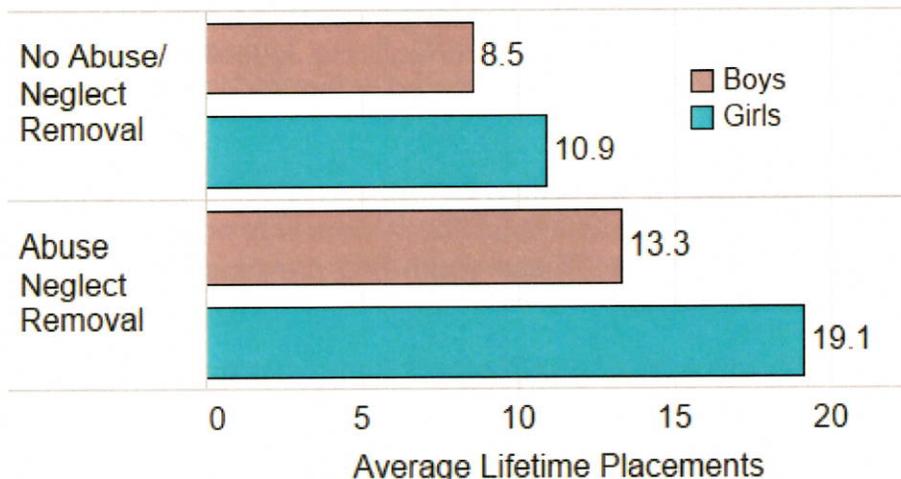
Figure 85: Youth with Abuse/Neglect Removals by Gender, n=226*



*For the 12 youth placed at the YRTC through Tribal Courts, the FCRO would not be able to assess if they ever had an abuse/neglect removal. They are excluded from this analysis. The percentages are calculated out of 56 girls and 170 boys.

Lifetime placements. Over the course of their time in out-of-home care, girls averaged more foster placements than boys (Figure 86). These differences are even more striking when abuse/neglect removals are taken into consideration. Girls with a history of abuse/neglect removals averaged 19.1 different foster care placements during their lifetime.

Figure 86: Average Lifetime Placements by Gender and Abuse/Neglect Removal(s), n=226*



*For the 12 youth placed at the YRTC through Tribal Courts, the FCRO would not be able to assess if they ever had an abuse/neglect removal. They are excluded from this analysis. The averages are calculated out of 56 girls and 170 boys.

There are a variety of reasons that a youth may change placements while in foster care. For children with abuse/neglect removals, a placement change may reflect a move to live with a relative or kin, or a move to a home that plans to provide permanency. For a youth in foster care through the juvenile justice system, a placement change could reflect a completion of a treatment program, or a reduction in the youth’s risk levels, and therefore a reduction in placement restrictiveness.

While some placement changes are overall positive moves towards finding a permanent home or completion of treatment goals, others occur because of provider requests, needs not being met in the current placement, a higher level of restrictiveness needed, or even allegations of abuse or neglect in the placement.

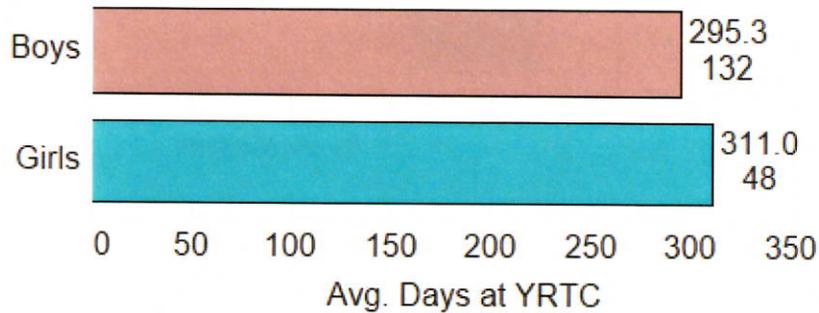
The number of placement moves experienced by the YRTC population – from a low of 8.5 for boys with no abuse/neglect removals to a high of 19.1 for girls with abuse/neglect removals – indicates that the population of youth at the YRTC have experienced several moves related to instability as opposed to permanency, treatment progress, or reduction of risk. Placement at a YRTC is contingent upon a lack of success in less restrictive placements.

A change in placement – even when it is necessary for the overall well-being of the youth – can be harmful and traumatic. Positive attachments to adults may be broken, and new relationships must be built. This process has the potential to lead to challenging behaviors from the youth, which may then become a threat to the current placement stability. Placement changes can result in educational disruptions, and research shows

that youth with juvenile justice system involvement typically have poorer educational outcomes than their peers.⁵

Of the 238 youth placed at a YRTC during FY2019-20, 180 have exited as of the writing of this report. These youth averaged 299.5 total days at a YRTC.⁶ As Figure 87 shows, the girls average 15 more days at a YRTC than boys.

Figure 87: Average Lifetime Days at YRTC by Gender for Youth who Exited in FY2019-20, n=180



This is 36 fewer days on average than the FCRO reported in the March 2020 Quarterly Report that examined exits during the 2019 calendar year. While the COVID-19 pandemic contributed to this change, it is likely this is not the only factor related to the change. The YRTC system is in the midst of substantial changes, including to the program, the educational structure, and even the physical locations.

Reviews of Youth at YRTCs

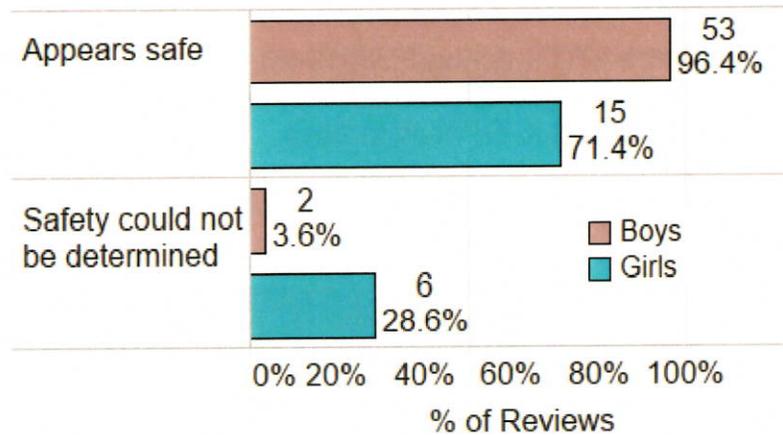
PLACEMENT SAFETY AND APPROPRIATENESS

Placement Safety. FCRO review boards were unable to determine safety for 8 of the youth who were placed at a YRTC during FY2019-20. This was due, in large part, to lack of information available, especially in the immediate aftermath of the transfer of girls from YRTC-Geneva to the Kearney campus.

⁵ Development Services Group, Inc. 2019. "Education for Youth Under Formal Supervision of the Juvenile Justice System." Literature Review. Washington, D.C.: Office of Juvenile Justice and Delinquency Prevention. <https://www.ojjdp.gov/mpg/litreviews/Education-for-Youth-in-the-Juvenile-Justice-System.pdf>

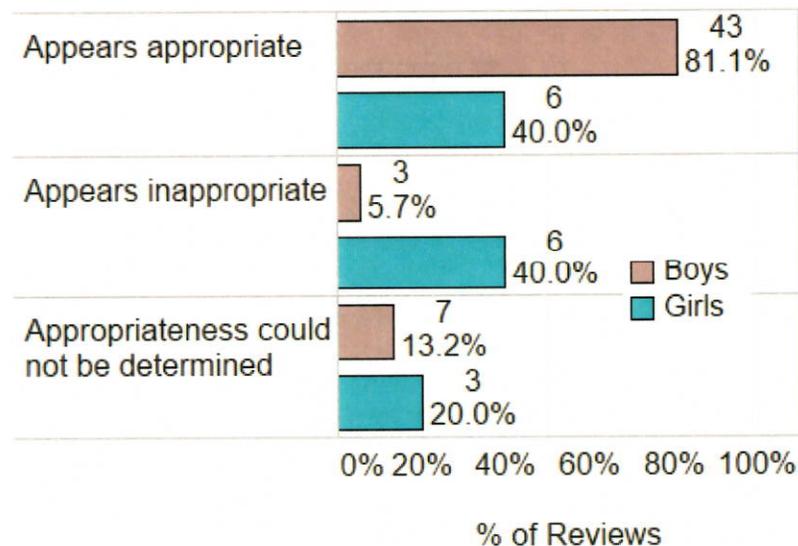
⁶ This is based on total days at a YRTC during their lifetime. This may have been through multiple juvenile court commitments to the YRTC, or a single commitment. It also excludes days where a youth may have been missing from the YRTC or placed in a short-term treatment center for acute needs.

Figure 88: Safety of YRTC Placement for Youth Reviewed FY2019-20, n=76⁷



Placement Appropriateness. A placement cannot be determined appropriate if it cannot be evaluated as safe. Of the 68 YRTC placements evaluated as safe, 81.1% of the boys, but only 40.0% of the girls were assessed as appropriate by FCRO review boards. A determination of inappropriate indicates that YRTC may not be the preferred setting for meeting the needs of the youth at the time of review.

Figure 89: Appropriateness of YRTC Placement for Youth Reviewed FY2019-20, n=68

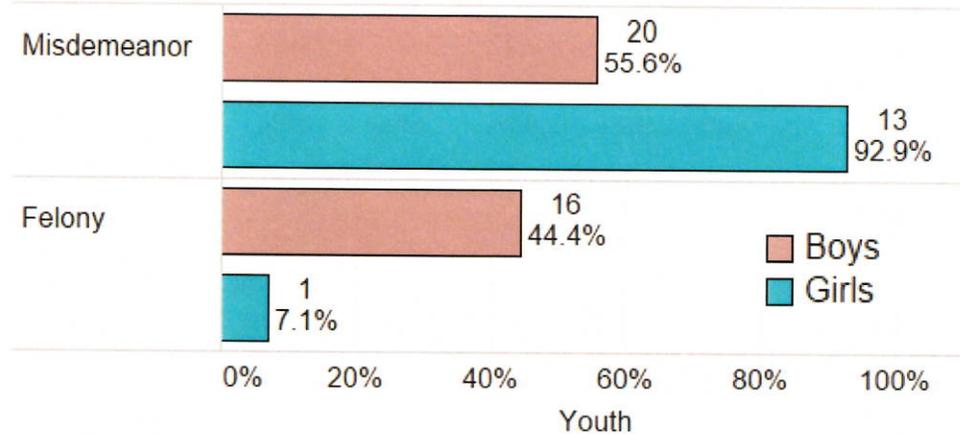


⁷ One youth was reviewed twice during his time at YRTC. Findings of safety and appropriateness are by review. All other data is by child.

OFFENSES

Offenses. Many people are surprised to learn that youth can be committed to the YRTC for other than felony charges. Figure 90 represents the most serious offense for youth placed at the YRTC (data is only available for the youth who received juvenile justice reviews). For over 90% of girls and more than half of the boys, the most serious offense is a misdemeanor.

Figure 90: Most Serious Offense of Juvenile Justice Reviewed Youth Placed at a YRTC Reviewed FY2019-20 by Gender, n=50



MENTAL AND BEHAVIORAL HEALTH

Mental Health. According to the federal Office of Juvenile Justice and Delinquency Prevention, nationally 70% of youth in the juvenile justice system have a diagnosable mental health condition.⁸ There is a complex relationship between mental health and juvenile justice involvement. Certain mental health conditions may increase a youth’s risk for juvenile justice involvement, and involvement in the juvenile justice system can intensify existing mental health issues. As shown in Figure 91, nearly all youth placed at a YRTC are diagnosed with a mental health condition.

⁸ Development Services Group, Inc. 2017. “Intersection between Mental Health and the Juvenile Justice System.” Literature review. Washington, D.C.: Office of Juvenile Justice and Delinquency Prevention. <https://www.ojjdp.gov/mpg/litreviews/Intersection-Mental-Health-Juvenile-Justice.pdf>

Figure 91: Mental Health Diagnosis for YRTC Youth Reviewed FY2019-20 by Gender, n=75

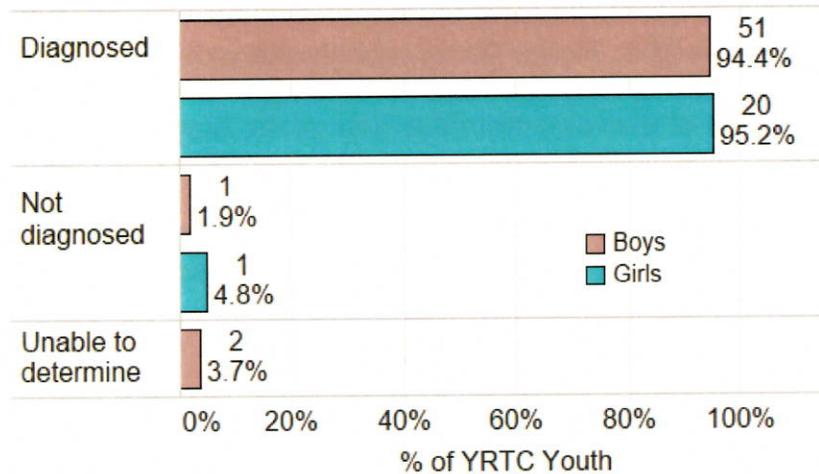
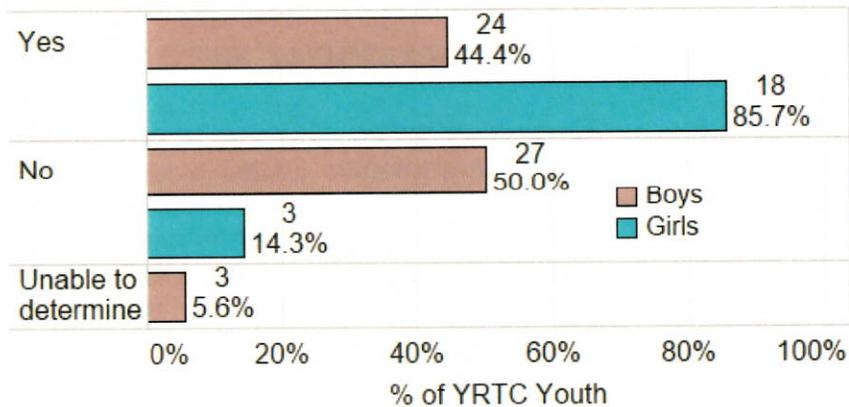


Figure 92 shows that boys and girls are prescribed psychotropic medications at very different frequencies.⁹ One hypothesis is that there may be differences in the mental health conditions between the boys and girls. Further research is needed to determine if this is true and, if so, how it impacts the youth’s service needs.

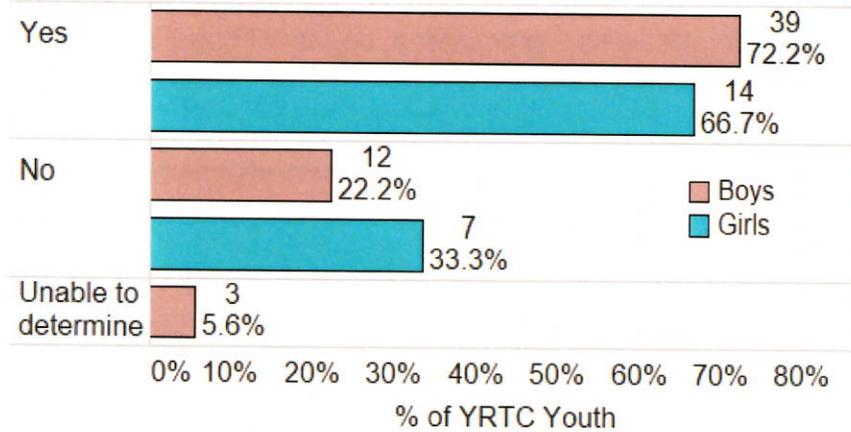
Figure 92: Current Psychotropic Prescription for YRTC Youth Reviewed FY2019-20 by Gender, n=75



⁹ See page 5 for definition of psychotropic medication.

Substance Use. The majority of reviewed boys (72.2%) and girls (66.7%) placed at a YRTC were diagnosed with substance use issues, as shown in Figure 93.

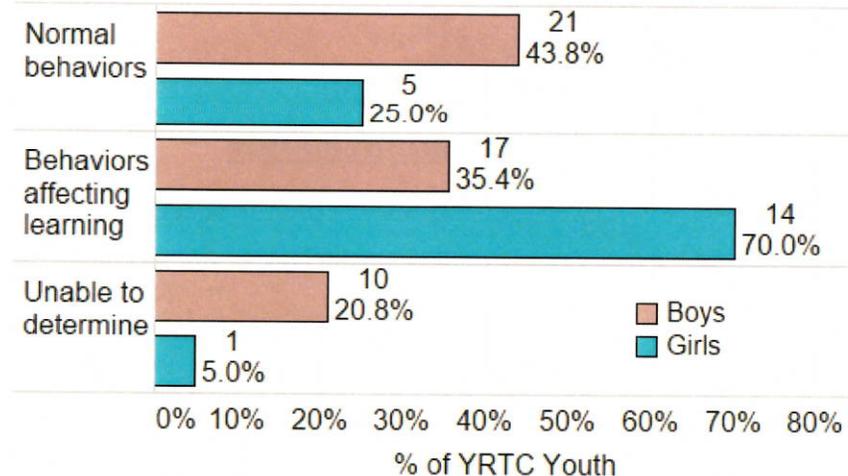
Figure 93: Substance Use Issues for YRTC Youth Reviewed FY2019-20 by Gender, n=75



EDUCATION

Behaviors at School. As shown in Figure 94, the girls were more likely than the boys to have behavioral concerns that regularly impacted learning.¹⁰ These behaviors cannot be untangled from mental health diagnosis and trauma resulting from abuse/neglect removals and multiple placement changes.

Figure 94: Whether Youth was Exhibiting Behaviors Disruptive to Learning for YRTC Youth Reviewed FY2019-20, n=68



¹⁰ This is a significantly different compared to the 84.7% of Probation supervised youth who displayed normal behaviors in school, see page 98.

ADDITIONAL INFORMATION IS AVAILABLE

The Foster Care Review Office is able to provide additional information on many of the topics in this Report. For example, much of data previously presented can be further divided by judicial district, NDHHS Service Area, county of court involved in the case, and various demographic measures.

If you are interested in more data on a particular topic, or would like a speaker to present on the data, please contact us with the specifics of your request at:

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