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SUPERIOR COURT OF CALIFORNIA  
CITY AND COUNTY OF ALAMEDA

MARGARET FARRELL,	)	Case No.: RGO3079344
	)	
Plaintiff,	)	INDIVIDUAL SITE VISIT REPORTS
	)	
vs.	)	
	)	
MATTHEW CATE,	)	
	)	
Defendant.	)	

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Since monitoring began in this case, the Office of the Special Master (“OSM”) and the *Farrell* experts have prepared individual site visit reports on DJJ’s compliance with remedial requirements. These reports provide the basis for the formal reports that have been filed with the Court. OSM, the experts, and the parties recently agreed that beginning with the 2009-2010 audit round, OSM would provide the Court with individual site visit reports in addition to regularly filed formal reports.

Pursuant to this agreement and to paragraphs 20 and 28 of the November 2004 Consent Decree, the special master submits five site visit reports that have been completed thus far. OSM will file additional reports as they are completed. The reports were circulated to the parties in draft form. The final versions reflect consideration of the parties’ comments.

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Attached are the following reports:

1. Aubra Fletcher and Donna Brorby, *Compliance with Mental Health Requirements: Preston Site Visit Report* (January 28, 2009);
2. Aubra Fletcher and Donna Brorby, *Compliance with Safety and Welfare Requirements: Central Office Site Visit Report* (January 28, 2009);
3. Donna Brorby and Zack Schwartz, *Compliance with Safety and Welfare Requirements: O.H. Close Site Visit Report* (January 28, 2010);
4. Zack Schwartz and Aubra Fletcher, *Compliance with Safety and Welfare Requirements: Chaderjian Site Visit Report* (January 28, 2010);
5. Donna Brorby and Aubra Fletcher, *Compliance with Mental Health Requirements: Ventura Site Visit Report* (January 28, 2010).

Dated: January 29, 2010

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Aubra Fletcher  
Office of the Special Master

**Compliance with Mental Health Requirements: Preston Site Visit Report**  
**January 28, 2009**  
**Aubra Fletcher and Donna Brorby**

The Mental Health Remedial Plan assigns monitoring of some requirements to the office of the special master (OSM). Donna Brorby and Aubra Fletcher visited DJJ's central office on October 26-27, 2009 to audit compliance with these requirements. The parties had the opportunity to provide comments on a draft of this report, and this final version reflects consideration of comments received.

We interviewed the facility's senior psychologist and four staff psychologists. We spoke briefly to a fifth psychologist and also interviewed relevant non-clinical staff. We reviewed documentation provided by central office and facility staff. Specific documents are cited where appropriate.

We selected ten youth from the 79 names on an August 12, 2009 mental health caseload list, by selecting every eighth name. We interviewed eight of the ten youth and reviewed certain case file contents for all ten. The eight interviewed youth represented six of Preston's ten living units.

**5.11:<sup>1</sup> Outpatient MH staffing consistent with MH Remedial Plan. Positions filled/assigned.**

The remedial plan staffing requirements have changed since OSM's May 2009 informal report for Preston.<sup>2</sup> The Court's July 2009 order requires the following staffing levels:

- 1 senior psychologist;
- 1 psychiatrist;
- 0.25 psychologists assigned to the intake unit;
- 0.25 psychologists assigned to the parole detainee unit;
- 1 psychologist for two high-risk core units;
- 1.5 psychologists for three low-risk core units;
- 0.5 psychologists assigned to the residential substance abuse treatment unit;
- 2 psychologists for two behavior treatment program units; and
- 2 office technicians.

Preston is compliant with these staffing requirements.<sup>3</sup>

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<sup>1</sup> This number and others throughout this report correspond to the line-item numbers in the Mental Health Remedial Plan's "Standards and Criteria" document.

<sup>2</sup> See Order, July 31, 2009.

<sup>3</sup> See document entitled "Psychologists, Programs, & Lodges," undated (provided October 26, 2009); statements of senior psychologist during site visit, October 26, 2009; statements of office technician during site visit, October 27, 2009; memorandum of Todd Irby to special master, et al., December 24, 2009 (providing comments on a draft of this report).

*Rating: Substantial compliance*

**5.20:** Collaborate with DMH [Department of Mental Health] to expedite transfers and facilitate transitions. DJJ periodically meets with DMH regarding transfers to DMH facilities and transitions back to DJJ. Written protocols describing DJJ's actions to expedite transfers and facilitate transitions as appropriate are in use. *This item is also monitored by the mental health experts.*

According to Preston's senior psychologist and DJJ's senior supervising psychiatrist, the only licensed beds to which Preston transfers patients are at Sierra Vista Hospital and the Correctional Treatment Center (CTC) at Stark. If a youth needed to be transferred to DMH, Preston would transfer him to the CTC, and the CTC would transfer him to DMH (but, see below for youth transferred to Sierra Vista and then to the intermediate care facility (ICF) operated by Metro State Hospital at SYCRCC). Preston's senior psychologist considers the CTC at Stark to be Preston's primary option for licensed bed care. He believes that the CTC will take youth with a history of violence that Sierra Vista will not take. This is consistent with other comments of DJJ's northern California clinicians in the past.

DJJ's "Trackable Mental Health List" shows 3 transfers from Preston to licensed bed care between January and September 2009. Preston sent one youth to Sierra Vista Hospital on January 30, 2009, and Sierra Vista Hospital sent him to the ICF at SYCRCC on February 9. Preston transferred two other youth to the CTC, on April 20, 2009 and May 15, 2009, respectively.

*Rating provided at the central office level only.*

**6.3:** If feasible, implement evidence-based model for family engagement. Appropriate family engagement model implemented (if feasible); **6.5:** If feasible, implement parent partner program. Appropriate parent partner program implemented (if feasible); **6.8:** If feasible, develop plan to continue Family Integrated Transitions and Family Justice Model.

**6.3 and 6.5:** Central office has drafted a project charter for compliance with these requirements.<sup>4</sup> See 6.8, below.

*Ratings provided at the central office level only.*

**6.8:** The project charter mentioned above

Central office is drafting a project charter that addresses family engagement.<sup>5</sup> It will include the Family Integrated Transitions requirement.<sup>6</sup> Also, interdisciplinary work groups at all facilities

<sup>4</sup> Statements of senior supervising psychiatrist during site visit, October 26, 2009.

<sup>5</sup> *Id.*

worked last year with Family Justice to improve family involvement.<sup>7</sup> Family Justice went out of business in October 2009, but DJJ is continuing its efforts based on its prior work with the organization. Preston staff have received the initial Family Justice program training.<sup>8</sup> Youth and family survey forms have been developed, and surveys at Preston are planned for the near future.<sup>9</sup> Facility and central office personnel are working together to generate ideas for enhancing family involvement.

Currently, family involvement at commitment includes one to two brief calls to the family by youth and non-clinical staff, and “as needed” contacts by psychiatrists to gain parental consent for youth medications.<sup>10</sup>

Preston does not currently use its videoconferencing equipment for family therapy or family visits. The facility possesses few speaker phones, which limits opportunities to talk with youth and family members together. A senior YCC on one of the interim BTP units described two treatment team meetings held with youth and their families together. He and the psychologist assigned to his unit consider these sessions, valuable and he intends to increase efforts to bring in other families. Another BTP psychologist also described contacts with families and youth together. DJJ’s senior supervising psychiatrist and Preston’s senior psychologist stated that they would work to incorporate family therapy, particularly on the BTP units.

DJJ’s lack of a unified system to track family contact prevented us from reporting on the frequency of contact between non-clinical staff and families. Aubra Fletcher reviewed the medical charts (unified health records, or “UHRs”) of ten youth on the mental health list. Her review sought documentation of family contact within one month of intake and documentation of clinician-family contact since January 1, 2009. Apart from psychiatrist phone contacts related to medication consent, only three other instances of clinician-family contact were documented over a total of ten months:

- Youth 5: In 2009 a psychologist facilitated the youth’s call to his mother in Georgia—through the youth’s parole agent—to discuss possible parole placements.
- Youth 7: In September 2009, a psychologist met with the youth, his parents, his case work specialist, his senior YCC, and his treatment team supervisor in the visiting hall for 60 minutes. The discussion related to the youth’s parole plans and other matters.
- Youth 10: This youth’s mental health evaluation form (2009) indicates that his mother spoke to the senior YCC regarding the youth’s therapy. The senior YCC referred the mother to the psychologist.

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<sup>6</sup> *Id.*

<sup>7</sup> Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 8. The remainder of this paragraph is based on this source.

<sup>8</sup> Statements of senior supervising psychiatrist and Preston senior psychologist during site visit, October 26, 2009.

<sup>9</sup> See statements of program manager during teleconference, October 28, 2009. The following sentence is also based on this source.

<sup>10</sup> *Id.*; statements of senior supervising psychiatrist and Preston senior psychologist during site visit, October 26, 2009.

Transfers of southern Californian youth to Preston in the wake of Stark's closure will render family involvement a greater challenge. The superintendent informed us that one of the chaplains is attempting to secure local hotel discounts for visiting families, and another staff member is seeking the use of local state houses for families' overnight lodging. The superintendent stated that Preston will also open visiting on the week days. Preston already sends some youth for temporary visits to SYCRCC so that they can more easily see their families.

*Rating provided at the central office level only.*

**6.10:** Fund ongoing training and attendance at national/regional conferences. Key mental health staff attend appropriate national and regional conferences.

DJJ's bargaining agreements make limited continuing education funds available to psychologists and psychiatrists.<sup>11</sup> DJJ allots psychologists \$200 a year and psychiatrists up to \$1000 a year. Psychologists are allotted five paid training days per year and psychiatrists, seven.<sup>12</sup>

*Rating provided at the central office level only.*

**8.1a5:** Youth informed of [policy] changes as appropriate. Information materials and/or briefing provided within 30 days of change in accessible formats.

In June 2008, DJJ's director of facilities instructed facility superintendents to archive "signature pages" signed by youth confirming that they were notified of designated new policies.<sup>13</sup>

Relevant mental health policies implemented in 2009 are SPAR (March 2009<sup>14</sup>), psychopharmacology (April 3, 2009<sup>15</sup>), and WIC § 1800 (June 1, 2009<sup>16</sup>).

Preston provided no documentation that youth were informed of changes to the SPAR policy. The earliest youth signature sheet for the psychopharmacology policy was dated July 22, 2009, and three units did not inform youth of this policy change until November 2009, the week following OSM's request for these documents. The earliest youth signature sheet for the WIC § 1800 policy was dated August 4, 2009, and the latest was dated November 2, 2009.

<sup>11</sup> See, e.g., statements of senior supervising psychiatrist during site visit, October 26, 2009.

<sup>12</sup> E-mail of chief psychiatrist to special master, October 29, 2009 (attaching document containing classifications and CME allotments).

<sup>13</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 8.

<sup>14</sup> See e-mail of Robert Rollins to Mark Blaser, et al., March 19, 2009.

<sup>15</sup> See DJJ, Institutions and Camps Manual, Section 6267.6 (Psychopharmacology), January 20, 2009, p. 2.

<sup>16</sup> See DJJ, Institutions and Camps Manual, Section 3320 ("Forensic Evaluation – Welfare and Institutions Code 1800/1800.5"), April 2, 2009, p. 2 (PoP #440, June 17, 2009).

Some signature sheets were undated; some clearly did not account for all youth; and the Fir unit provided no documentation that youth receive policy updates. The remaining units all use different forms, and only one unit provides a form that lists all youth whose signatures should appear. Without such a list, it is impossible to determine how many youth receive no formal information about policy changes.

*Rating provided at the central office level only.*

**11.1:** Implementation plan for offices and MH treatment rooms. Sufficient office space to exist so that all MH staff requiring offices have space and, where appropriate, that space is in, or adjacent to, the living unit. Sufficient space to exist so that no regular MH programs have to be canceled due to lack of space. Treatment space to be appropriate for treatment, providing a therapeutic milieu and areas for confidential conversations.

#### *Office space for mental health clinicians*

Most Preston living units lack adequate office space for clinicians. Redwood (BTP), Oak (BTP), and Sequoia (high-risk core) have office space for clinicians.<sup>17</sup> The psychologist assigned to Sequoia is also assigned to the nearby Arbor unit. The two psychologists assigned to Ironwood (high-risk core, formerly the SMP), Fir (low risk, gang-exiters, others), and Manzanita (low-risk core) have offices on Redwood rather than on the living units they serve. The three psychologists assigned to Buckeye (intake), Hawthorne (parole detainees), and Ponderosa (low-risk core) have offices in the “program center,” about a ten minute walk from Buckeye and Hawthorne. The Buckeye and Hawthorne psychologists’ offices are, however, near the “Receiving” section of the building, which new intakes and parole detainees frequent in their first days at Preston.

When psychologists deliver services on living units where they do not have offices, they compete for space used by other staff, and youth who see them must do so without visual privacy. Sometimes youth are transported to the program center to see psychologists in private offices, but this is not always possible.<sup>18</sup> The BTP psychologists value their offices on the BTP units, not only for their ease in seeing youth, but particularly for enabling them to work with staff to improve staff/youth interactions and the environment on the units.

Both of Preston’s psychiatrists have offices in the facility’s Outpatient Housing Unit.<sup>19</sup>

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<sup>17</sup> *Id.*; document entitled “Psychologists, Programs, & Lodges,” undated (provided October 26, 2009). The remainder of this paragraph is based on these sources.

<sup>18</sup> Statements of two staff psychologists during site visit, October 26-27, 2009.

<sup>19</sup> Statements of senior psychologist during site visit, October 26, 2009. The following paragraph is also based on this source.

Two golf carts are assigned to mental health personnel to facilitate clinicians' movement throughout the grounds. One of the carts is reserved for the duty psychologist assigned each day to address youths' self-harming behavior.

### *Treatment space*

Preston also lacks adequate program space. The availability of space that is conducive to confidentiality depends on the level of activity on the living units.<sup>20</sup> Clinicians generally hold group sessions in the living units' day rooms or outdoors. Suicide risk reduction interventions are now held on the Outpatient Housing Unit.

Two psychologists, when asked about space for groups, explained that certain senior YCCs on their units either failed to support or actively discouraged small group sessions, which made it more difficult to hold groups. One related numerous incidents in which non-clinical scheduling or staffing issues prevented him from convening uninterrupted group sessions with the youth. The other was deterred from engaging any YCC in groups he led.

*This item is not ratable at Preston.*

**6.7:** DJJ to provide training to all direct care staff in certain areas. New or reassigned staff are to be trained within ninety days of assignment to a living unit. All supervisory and management staff are required to complete the training as required by DJJ policy. Training areas: **6.7a:** DJJ IBTM (August 15, 2009). **6.7c:** Treatment plan development (August 15, 2009). **6.7d:** Motivational interviewing (per interim training schedule). **6.7e:** Normative culture (per interim training schedule). **6.7f:** Interactive journaling (per interim training schedule). **6.7g:** Other key treatment components (August 15, 2009).

**6.7a:** The IBTM has not yet been developed.

*Rating:* Non-compliance

**6.7c:** Orbis Partners is training DJJ staff in "ease planning."<sup>21</sup> As with the YASI-CA trainings, training has thus far focused on case work specialists.<sup>22</sup> DJJ has not provided updated training data for Preston as of this writing, though it has produced very useful training statistics for most other facilities. Central office staff have indicated that training statistics for Preston are forthcoming.<sup>23</sup>

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<sup>20</sup> *Id.*; statements of clinical staff during site visit, October 26-27, 2009. The remainder of this paragraph is based on these sources.

<sup>21</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 32.

<sup>22</sup> *See, e.g., id.*

<sup>23</sup> *See* e-mail of Maria Young-Ramirez to Aubra Fletcher, November 5, 2009.

The IBTM experts have recommended the discontinuation of the Orbis training,<sup>24</sup> for which reason OSM declines to assign a rating at this time.

*Rating:* Not rated

**6.7d:** Eight of Preston's ten psychologists (including the senior psychologist) have undergone motivational interviewing (MI) training.<sup>25</sup> As noted above, updated training statistics for non-clinicians are not yet available. Until new training data is provided, Preston's prior partial compliance rating remains.

OSM rates this item based solely on the number of staff who have attended MI trainings to date. This rating is not a reflection of the quality or efficacy of the training, and the mental health experts have not to date observed or evaluated MI training or implementation.

*Rating:* Partial compliance

**6.7e:** DJJ pursued a contract for normative peer culture training in 2009, resulting in a contract that Dr. Krisberg and the other IBTM experts now advise DJJ to cancel.<sup>26</sup> In light of Dr. Krisberg's recent recommendation that the normative culture requirement be removed from the remedial plan, OSM declines to rate this item at present.<sup>27</sup>

*Rating:* Not rated at this time

**6.7f:** This training has not yet begun.

*Rating:* Non-compliance

**6.7g:** Preston mental health clinicians have received training in Safe Crisis Management (5 of 10 psychologists), Orbis Partners' Cognitive Behavior Treatment Primer (2 of 10), and Understanding and Preventing Suicide (7 of 10).<sup>28</sup> As noted above, updated training statistics for non-clinicians are not yet available. Until new training data is provided, Preston's prior partial compliance rating remains.

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<sup>24</sup> Statements of Barry Krisberg and Eric Trupin during teleconference with special master, parties, and IBTM experts, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching recommendations).

<sup>25</sup> See document entitled "Fracking Log: PYCF MH Staff Trainings," undated (provided October 26, 2009).

<sup>26</sup> Statements of Barry Krisberg and Eric Trupin during teleconference with special master, parties, and IBTM experts, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching recommendations).

<sup>27</sup> See statements of Barry Krisberg during teleconference with special master, parties, and IBTM experts, October 26, 2009.

<sup>28</sup> See document entitled "Fracking Log: PYCF MH Staff Trainings," undated (provided October 26, 2009).

OSM assigns a rating for this item based solely on the number of staff who have attended trainings to date. This rating is not a reflection of the quality or efficacy of the trainings. Additionally, DJJ and the experts may select or substitute other treatment components once the IBTM description is finalized.

*Rating: Partial compliance*

**8.3.1:** *Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. Deadline is July 1, 2007. This item is also monitored by the mental health experts. 8.3.2a:* *By November 1, 2006, DJJ is required to facilitate family phone contact within 24 hours of youth arrival. 8.3.2b:* *By December 1, 2006, DJJ is required to facilitate ongoing family phone contact. 8.3.3:* *By March 1, 2007, DJJ must arrange for family visiting days at least four times per year. These items are monitored solely by the mental health experts who have requested that the OSM gather information for them.*

**8.3.1:** Central office has developed Community Assessment Reports (CARs) for statewide use.<sup>29</sup> OSM received a copy of the CAR policy and report form after the Preston site visit and awaits the judgment of the mental health experts.

The reports are completed by field parole agents designated by central office prior to the youth's arrival, then are provided to the facility at the time of intake.<sup>30</sup> The facility's case work specialist completes a "clinic report" which draws from the CAR, if received, and from information provided by the county of commitment; often the county information includes information about youths' families. Case work specialists often speak with youths' families at the time of intake to provide them general information and to obtain missing information, such as dates of birth and addresses.

In November 2009, OSM requested verification that a CAR is completed for each new intake and has not yet received it.

According to Dr. Arguello, the future mental health evaluation process will also include a family interaction component.

*Rating provided at the central office level only.*

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<sup>29</sup> Statements of program administrator during teleconference, October 28, 2009; statements of field parole staff during central office site visit (safety and welfare audit), November 2, 2009.

<sup>30</sup> Statements of program administrator during teleconference, October 28, 2009. The remainder of this paragraph is based on this source.

**8.3.2a:** OSM selected ten youth from Preston’s list of 79 youth who receive mental health services.<sup>31</sup> We interviewed eight of the youth.<sup>32</sup> We requested WIN-generated phone call records for each of the ten youths’ date of arrival. Records were provided for eight youth. The records for five of those eight youth confirmed that each had placed at least one phone call to family on the day he arrived at Preston. The records for the three remaining youth did not clearly establish their arrival dates, though each arrived at least one year ago.

Central office later provided documentation reflecting that 55 of 55 youth who arrived at a DJJ facility between August 1, 2009 and October 28, 2009 had the opportunity to make a phone call within one day of arrival.

*Rating provided at the central office level only.*

**8.3.2b:** State law requires DJJ to provide youth with ~~a~~ minimum of four telephone calls to his or her family per month.”<sup>33</sup> Though the measure by which OSM judges compliance is the more vaguely worded remedial standard (see above), the statutory provision is a useful yardstick.

OSM requested WIN phone logs for the same set of ten youth, for the period between September 1, 2009 and October 26, 2009. All ten youth had arrived at Preston prior to September 1, 2009. According to the documentation, only two of the ten youth had made or attempted an average of one call per week. One youth had only made one phone call in 7.5 weeks. Two had only made two phone calls during that time, and one had only made three calls.<sup>34</sup> Some calls were direct calls, and others were collect. WIN documents do not reflect whether youths’ families are able or unable to receive collect calls, but at least four of the eight interviewees’ families could not receive collect calls.

Inconsistent documentation practices among staff may account for some of the problem. For instance, of eight interviewed youth from five living units, six reported daily access to a telephone to make collect calls. Two youth whose phone logs each reflected four phone calls since September 1 stated that staff provide at least once-a-week opportunities to make direct calls and daily access to the pay phone.

Documentation practices alone do not explain the problem. Of the four identified youth whose families could not receive collect calls, one reported that he was allowed two direct calls per month; another reported that he was allowed one direct call per month; and a third reported that

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<sup>31</sup> See PYCF Mental Health Youth Master List, August 12, 2009.

<sup>32</sup> A staff member in charge of Redwood one evening resisted the special master’s request to hold a private interview with one youth; by the next day, we did not interview him because of time constraints and because we had gathered a good deal of information about him. A second youth was working when we wanted to interview him, though we did interview someone else from his housing unit.

<sup>33</sup> See WIC § 1712.1(b).

<sup>34</sup> The third youth stated in an interview that staff provide the opportunity to make a direct call once per month and collect calls four times per month. He added that some youth are allowed more than one collect call per week. His incentive level is A.

he had been allowed one direct call in two months. The fourth youth had been permitted to place only two calls since September 1, 2009, and he remembered the approximate dates of each. According to him, his assigned YCC has never provided him with a phone call, despite his repeated requests and the YCC's promises to do so. The WIN log confirmed that his assigned YCC had not provided him with any calls since September 1. The youth stated that the issue is straining their ability to work together. He added that as a disciplinary measure, staff are withholding his mail until mid-November. He further stated that on one occasion, his YCC refused to give him a chance to call home because he had received a disciplinary "check" over the weekend.<sup>35</sup>

Central office is developing a new policy regarding youth phone calls.<sup>36</sup> The policy will mandate a minimum of 4 collect calls per month per youth and only one direct call per month for youth whose families cannot receive collect calls.<sup>37</sup>

The remedial requirement is to facilitate ongoing telephone contact between youth and families. The mental health and safety and welfare plans emphasize the importance of family engagement. Substantial compliance requires taking all reasonable steps to support family telephone contact.

*Rating: Partial compliance*

**8.3.3:** According to the family visiting day schedule provided, Preston is not permitting youth on the Redwood and Oak units with opportunities to attend family visiting days.<sup>38</sup> All other units have quarterly days scheduled between October 2009 and April 2010.<sup>39</sup>

As OSM noted in a prior report, family visiting days that are open to all incentive levels are held less than once per quarter.<sup>40</sup>

Many interviewed youth spoke highly of Preston's family events. One youth was looking forward to an upcoming family night and enthusiastically described a family night six months earlier. The very impressive culinary arts instructor and her students at the FEAST, Preston's restaurant and culinary arts vocational program, have long volunteered to host the events.<sup>41</sup> This provides families and their youth to enjoy a visit over good food in a restaurant atmosphere. It

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<sup>35</sup> Such disciplinary measures are contrary to state law; WIC § 224.71(g) provides that DJJ youth have a right to "maintain frequent and continuing contact with parents [and other] family members[] through visits, telephone calls, and mail." WIC § 224.71(m) prohibits DJJ from depriving youth of contact with parents or guardians as a disciplinary measure. WIC § 1712.1(b) contains a similar provision.

<sup>36</sup> Statements of Judi Nahigian and Tammy McGuire during central office site visit (safety and welfare audit), November 3, 2009.

<sup>37</sup> Statements of Alicia Ginn during central office site visit (safety and welfare audit), November 3, 2009.

<sup>38</sup> See memorandum of superintendent to treatment team supervisors, et al., September 20, 2009.

<sup>39</sup> See *id.*

<sup>40</sup> See Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 18.

<sup>41</sup> See, e.g., statements of culinary arts instructor during site visit, October 27, 2009.

also provides the FEAST workers valuable experience serving large numbers of customers. Many of the staff from the housing unit are present and introduce themselves to families.<sup>42</sup>

Preston holds very good family events for youth. It needs to increase the frequency and ensure that all youth have quarterly opportunities to participate.

*Rating: Partial compliance*

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<sup>42</sup> Statements of one interviewed youth during site visit, October 26-27, 2009.

**Compliance with Safety and Welfare Requirements: Central Office Site Visit Report**  
**January 28, 2010**  
**Aubra Fletcher and Donna Brorby**

The Safety and Welfare Plan assigns monitoring of certain requirements to the office of the special master (OSM). Donna Brorby and Aubra Fletcher visited DJJ's central office on November 2-3, 2009 to audit compliance with these requirements. This report is based on staff interviews and multiple documents provided by DJJ. The parties had the opportunity to provide comments on a draft of this report, and this final version reflects consideration of comments received.

*2.1.4a: DJJ to install dedicated staff for policy development and policy maintenance by November 21, 2007. 2.1.4a: Master schedule completed for updating DJJ policy by January 15, 2007. 2.1.4a: Policies updated per schedule and TDOs issued as needed, on an ongoing basis.*

**2.1.4a (dedicated staff):** The remedial plan requires that DJJ's dedicated policy development staff and training curriculum writers be knowledgeable of contemporary standards of care and practice in juvenile correctional agencies."<sup>1</sup> DJJ's policy unit staff do not have knowledge of contemporary standards of care and practice in juvenile agencies; they are not, however, responsible for the content of policies.<sup>2</sup> Program area staff are responsible for substantive policy writing.<sup>3</sup> The OSM has not separately reviewed the process for the development of training curricula, but it appears that the training curricula for policies rely on the same source of expertise as the policies themselves. Budgetary restrictions prevent DJJ from sending program area staff to regional and national conferences for their education in contemporary standards of care and practice.<sup>4</sup>

The experts have found that some key policies do not fully reflect contemporary standards, e.g., DDMS, program credits, and use of force.<sup>5</sup>

*Rating: Partial compliance*<sup>6</sup>

**2.1.4a (master schedule):** DJJ has created a list of prioritized projects, including needed policies.<sup>7</sup> Though not all needed policies have been listed and prioritized, DJJ's current planning processes are sufficient to identify needed policies on an ongoing basis.

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<sup>1</sup> See Safety and Welfare Remedial Plan, p. 12.

<sup>2</sup> Eleventh Report of the Special Master (November 2009), p. 11.

<sup>3</sup> *Ibid.*

<sup>4</sup> Statements of Tammy McGuire during site visit, November 2, 2009.

<sup>5</sup> See, e.g., statements of Barry Krisberg and Eric Trupin during teleconference, December 17, 2008; e-mail of Barry Krisberg to Dorene Nylund, et al., January 8, 2009; Eleventh Report of the Special Master (November 2009), Appendix B (Status of Items with Modified Deadlines), p. 4.

<sup>6</sup> OSM previously deferred to the safety and welfare expert regarding the rating for this item. See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 3-4 [hereinafter OSM Monitors' Report, June 2009]. The expert has declined to provide a rating. See, e.g., e-mail of Barry Krisberg to Donna Brorby, September 10, 2009; e-mail of Barry Krisberg to Donna Brorby, September 14, 2009.

*Rating:* Substantial compliance

**2.1.4a (updated policies):** Central office has finalized a number of policies this year.<sup>8</sup> OSM will provide a rating for this item after monitoring policy implementation at the facilities.

*Rating:* Rating will be provided once the audit round is complete.

**2.1.4a:** *As appropriate, youth are to receive informational materials and/or briefing within 30 days of policy changes.*

As previously reported, central office has developed a system for informing youth of policy changes on a timely basis.<sup>9</sup> OSM monitors adherence to this system at the facility level.

Also, DJJ distributed the new Youth Rights Handbook to youth in all facilities in about June 2009.<sup>10</sup> As rules and procedures change, facility staff will be instructed to inform youth via large groups, and youth will receive written updates to insert in their handbooks.

*Rating:* Substantial compliance

**2.1.4b:** *Clear separation between juvenile and adult training to be established. Separate DJJ training process plan and tracking system in place by June 30, 2008.*

The safety and welfare plan describes a –clear separation between juvenile and adult training content and expectations.”<sup>11</sup>

DJJ provided a side-by-side comparison of training offered to peace officers destined for the adult prisons and training offered to future DJJ staff. DJJ also provided a schedule of the most recent academy, which ended in August 2009. A new academy was scheduled to begin in December 2009.<sup>12</sup> The special master’s office defers to the safety and welfare and mental health experts as to whether DJJ’s academy training reflects contemporary standards of care and practice.

DJJ does not have an automated system to track which staff need to receive which trainings, but central office staff are compiling these data.<sup>13</sup>

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<sup>7</sup> See Eleventh Report of the Special Master (November 2009), pp. 12-13. The following sentence is also based on this source.

<sup>8</sup> For a fuller discussion of the status of individual policies, see OSM Monitors’ Report, June 2009, pp. 4-7.

<sup>9</sup> See *id.*, pp. 9-10.

<sup>10</sup> Statements of Tammy McGuire during site visit, November 2, 2009. The following sentence is also based on this source.

<sup>11</sup> See Safety and Welfare Remedial Plan, p. 21.

<sup>12</sup> Statements of Tammy McGuire during site visit, November 2, 2009.

<sup>13</sup> *Id.*

*Rating:* Not rated at this time.

**2.1.5:** *A minimum of 18 trainers/quality assurance specialists to be filled/assigned by June 30, 2007.*

DJJ provided a document entitled *“Program Developers As of August 28, 2009.”* The list includes staff from various facilities and disciplines who perform the *“program developer”* duties as secondary assignments.<sup>14</sup>

One of the 18 staff on this list has retired, and two are on special assignment and do not currently serve in this capacity.<sup>15</sup> Two of the remaining 15 staff schedule trainings, so 13 spend time in the field observing the implementation of staff training and coaching staff to adhere to training.

Given the reduction in DJJ’s size since the remedial plan was drafted, the allocation of 13 staff to this purpose may be sufficient. However, unless and until the remedial plan language is modified, OSM measures compliance against the requirement as written.

*Rating:* Partial compliance

**2.2.3:** *Designate facility compliance monitors and schedule.*

DJJ provided a list of facilities’ compliance monitors as of September 21, 2009. DJJ has also shared the Office of Audits and Compliance (OAC) audit schedule for the remainder of the fiscal year.<sup>16</sup> OAC’s audits will address *“facility policies,”* the grievance system, time adds, special education, mental health organizational charts, conflict resolution teams, and the suicide prevention, assessment, and response policy. The *Farrell* Compliance Unit also conducts periodic facility audits, and its role may soon shift to focus on compliance with *Farrell*-related corrective action plans.<sup>17</sup>

*Rating provided at the facility level only.*

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<sup>14</sup> Statements of Judi Nahigian during site visit, November 2, 2009.

<sup>15</sup> Statements of Tami McKee-Sani during site visit, November 2, 2009. The following sentence is also based on this source.

<sup>16</sup> See e-mail of Doug Ugarkovich to Bernard Warner, et al., September 29, 2009 (attaching audit schedule). Unless otherwise noted, the remainder of this paragraph is based on this source.

<sup>17</sup> See, e.g., statements of John Blackwell during site visit, November 2, 2009; e-mail of John Blackwell to Judi Nahigian, et al., October 30, 2009; DJJ, *“Role of the Farrell Compliance Unit (draft),”* November 2, 2009; DJJ, *“Curt Monitor Audit Finding Corrective Action Plan Process,”* August 11, 2009.

**2.2.5: DJJ facilities to rewrite local directives and procedures as new policies are adopted, on an ongoing basis.**

Central office has begun tracking whether facilities are developing required local procedures, and compliance levels appear to be improving. As of June 2009, the policy unit had never received confirmation from the facilities that a local procedure was developed.<sup>18</sup> The policy unit developed a process for the facilities to provide their local procedures to central office, and by October 2009, some facilities began doing so, though some were unsigned and marked “draft.”

*Rating:* Substantial compliance

**2.2.6: DJJ to update and approve job descriptions by January 31, 2007.**

The Safety and Welfare Remedial Plan requires that DJJ update job descriptions “for all living unit and management staff at the treatment team leader [level] and above, incorporating duty requirements and performance measures consistent with agency policy.”<sup>19</sup>

DJJ has not updated job descriptions for any relevant position except for case managers.<sup>20</sup> DJJ is awaiting the development of the IBTM in order to align the descriptions with the new model.

*Rating:* Beginning compliance

**2.2.7: DJJ to produce annual reports that accurately reflect the status of reform and the state of DJJ. The first annual report is to be produced by August 30, 2007.**

A staff person at central office is working on the development of an annual report.<sup>21</sup> DJJ currently issues *Farrell* quarterly reports and other reports to the legislature.

*Rating:* Beginning compliance

**2.4.3: DJJ must ensure that each facility has a vocational specialist.**

The remedial plan requires each facility’s vocational specialist to “provide vocational and career counseling and coordination with parole and re-entry specialists.”<sup>22</sup>

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<sup>18</sup> Statements of Dolores Slaton during DJJ Court Compliance Task Force meeting, June 11, 2009. The following sentence is also based on this source. In November 2009, DJJ shared with OSM a tracking document maintained by the policy unit.

<sup>19</sup> See Safety and Welfare Remedial Plan, p. 21.

<sup>20</sup> Statements of Tammy McGuire during site visit, November 2, 2009. The following sentence is also based on this source.

<sup>21</sup> *Id.* The remainder of this paragraph is based on this source.

<sup>22</sup> See Safety and Welfare Remedial Plan, p. 22.

DJJ has revised the duty statement for its transition coordinator job classification, and the new duty statement came into effect in mid-2009.<sup>23</sup> Transition coordinators must —provide educational, academic and career tech vocational counseling and guidance; coordinate educational transition, re-entry services for students; conduct program effectiveness data collection; and perform other related responsibilities.”<sup>24</sup> The duty statement further specifies that these staff will:

- Ensure that each student’s assigned activities align with her or his educational and career/vocational plan;
- ~~Co~~ach students using activities and strategies which promote problem solving and life skills enhancement;”
- Engage multi-disciplinary resources within the facility, with field parole, and with the community;
- Finalize individual parole plans with treatment staff and the youth;
- Together with field parole, negotiate youth placements with local educational or vocational entities; and
- Together with field parole, ~~pr~~ovide follow-up contact with the student and parole.”<sup>25</sup>

The development of this duty statement is a very positive step. At the facility level, OSM will monitor youth access to these services.

*Ratings are provided at the facility level only.*

**3.5.1b:** *DJJ Research to assist with annual reports. Reports must accurately reflect the status of reform and the state of DJJ.*

As noted above, efforts to produce annual reports are in beginning stages. The new chief of DJJ research, Dr. Larry Carr, has not yet been involved in these efforts.<sup>26</sup>

*Rating:* Non-compliance

**3.3b:** *DJJ to create violence reduction committees to review and evaluate incidents of violence quarterly and to develop plans to reduce violence and use of force, by January 1, 2007. (This item is also monitored by the safety and welfare expert.)*

The remedial plan requires each facility’s violence reduction committee (VRC) to submit its violence reduction plan(s) to DJJ’s chief of security ~~for~~ review, monitoring and sharing of the most effective practices with other facilities.”<sup>27</sup>

<sup>23</sup> Statements of Tammy McGuire during Chaderjian site visit, November 13, 2009.

<sup>24</sup> DJJ, Duty Statement and Performance Standards: Transition Coordinator/Teacher,” undated (provided November 3, 2009).

<sup>25</sup> *See id.*, pp. 1-2.

<sup>26</sup> Statements of Tammy McGuire during site visit, November 2, 2009.

DJJ's Chief of Security, Jeff Plunkett, called for and received the facilities' violence reduction plans in 2007 and received them.<sup>28</sup> He has not reviewed the facilities' updated plans.<sup>29</sup> Mr. Plunkett does receive the minutes from each facility's violence reduction committees.<sup>30</sup> The formal sharing of best practices among facilities has focused on improving the format for recording meeting minutes.<sup>31</sup>

It would be appropriate for DJJ central office to evaluate the effectiveness and utility of VRCs and identify and share best practices.

*Ratings are provided at the facility level only.*

**3.4a:** *DJJ to qualify 18 staff as crisis management trainers by July 1, 2007.*

Eighteen staff were recertified as safe crisis management trainers in July 2009.<sup>32</sup>

*Rating:* Substantial compliance

**3.4b:** *Crisis management training for direct care staff at Stark and Preston. 3.4c:* *Crisis management training for remaining direct care staff. New staff are trained within 90 days of living unit assignment at all facilities.*

Safe crisis management training is now provided at the academy which peace officers attend prior to assignment at DJJ.<sup>33</sup> DJJ is compiling training statistics for existing peace officers and for other direct care staff; training statistics for three facilities are available, but they do not account for all direct care staff.<sup>34</sup> Available training data reflect that 27% of certain direct care staff have been trained at SYCRCC, 28% at Chaderjian, and 49% at O.H. Close.<sup>35</sup>

*Rating (3.4b):* Partial compliance

*Ratings for item 3.4c are provided at the facility level only.*

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<sup>27</sup> See Safety and Welfare Remedial Plan, pp. 24-25.

<sup>28</sup> Statements of Jeff Plunkett during site visit, November 2, 2009.

<sup>29</sup> *Id.* Some facilities update their plans monthly. Statements of Judi Nahigian during site visit, November 2, 2009.

<sup>30</sup> We were shown copies of facilities' recent VRC minutes, initialed and dated as received by Mr. Plunkett.

<sup>31</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 23; statements of Jeff Plunkett during site visit, November 2, 2009.

<sup>32</sup> See document entitled "SCM Instructor Recertification," undated (provided November 2, 2009).

<sup>33</sup> Statements of Judi Nahigian during site visit, November 2, 2009. We were also shown the August 2009 academy's training schedule.

<sup>34</sup> The Safe Crisis Management training statistics do not, for example, include any medical or mental health staff.

<sup>35</sup> See e-mail of Maria Young-Ramirez to Aubra Fletcher and Doug Ugarkovich, November 5, 2009 (attaching training statistics for three facilities).

**3.5:** *By January 1, 2007, DJJ to develop and use a database to track all incidences of violence and use of force. This item is also monitored by the Safety and Welfare expert. 3.6b:* *By April 1, 2007, DJJ to produce quarterly reports on selected PbS data elements.*

**3.5:** OSM previously reported that data-gathering practices vary across the state, and OSM urged central office to issue clearer guidance to the facilities.<sup>36</sup> According to Tammy McGuire, facility staff have access to the PbS glossary, and central office informs the facilities of any change in PbS definitions. More guidance is necessary, however, and should address data collection methods and sources. Central office should also specify whether and how facility data collection should differ between PbS data collection months (April and October) and other months.

DJJ has not conducted a formal, comprehensive audit of data reliability, as required by the plan.<sup>37</sup> Central office should examine whether existing automated systems can produce accurate data, and if not, how to improve them. At this time, there does not appear to be an accurate automated system, and DJJ facility staff rely upon manual systems to derive counts of incidents from overlapping data sources (behavior reports, use of force reports, and daily operations reports).<sup>38</sup>

Regarding the development of annual targets and action plans for each facility, a review of recent minutes from facilities' violence reduction committee meetings indicates that some facilities develop targets and plans and some do not.

*Rating:* Partial compliance

**3.6b:** The remedial plan specifies that the report format be approved by the safety and welfare expert.

*Rating:* OSM defers to the expert.

**3.8c:** *DJJ to provide training in strategies and procedures to safely integrate gangs and racial groups by July 1, 2008. The safety and welfare expert monitors the quality of the training.*

OSM defers all monitoring related to this item to the safety and welfare expert, at his request.<sup>39</sup>

*Ratings are provided at the facility level only.*

<sup>36</sup> See OSM Monitors' Report, June 2009, pp. 25-27.

<sup>37</sup> See statements of Tammy McGuire during site visit, November 2, 2009.

<sup>38</sup> OSM Monitors' Report, June 2009, pp. 25-27.

<sup>39</sup> See statements of Barry Krisberg to Aubra Fletcher during meeting, October 23, 2009.

**3.9a:** By July 1, 2008, DJJ to open sufficient Behavioral Treatment Programs (BTPs), in accordance with remedial plan provisions, for the projected 2008/09 demand.

OSM defers all monitoring related to this item to the safety and welfare expert, at his request.<sup>40</sup>

*Rating:* OSM defers to the expert.

**5.4a-g:** DJJ to hire or train trainers in (a) DJJ Integrated Behavior Treatment Model (IBTM), (b) risk/needs assessment, (c) treatment plan development, (d) motivational interviewing, (e) normative culture, (f) interactive journaling, and (g) other formal rehabilitation/treatment programs adopted by DJJ.

**5.4a:** The IBTM has not yet been developed.

*Rating:* Non-compliance

**5.4b:** As previously reported, DJJ hired Orbis Partners to provide this training.<sup>41</sup> The IBTM experts have recommended the discontinuation of some of the Orbis training.<sup>42</sup> They plan to work with Orbis Partners and DJJ to examine the usefulness of the CA-YASI and related training.<sup>43</sup>

*Rating:* Substantial compliance

**5.4c:** DJJ hired Orbis Partners to provide this training.<sup>44</sup> DJJ and the IBTM experts are reexamining the usefulness of the YASI-CA assessment tool.<sup>45</sup>

*Rating:* Substantial compliance

**5.4d:** DJJ contracted with the University of California San Diego to provide this training.<sup>46</sup>

OSM rates this item based solely on the fact that DJJ hired and trained trainers; this rating is not a reflection of the quality or efficacy of the training, and the mental health experts have not to date observed or evaluated MI training or implementation.

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<sup>40</sup> See *id.*

<sup>41</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 29.

<sup>42</sup> Statements of Barry Krisberg and Eric Trupin during teleconference, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching document entitled "Recommendations").

<sup>43</sup> See e-mail of Eric Trupin to Michael Brady, et al., November 4, 2009.

<sup>44</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 29.

<sup>45</sup> See, e.g., e-mail of Eric Trupin to Michael Brady, et al., November 4, 2009; statements of Barry Krisberg and Eric Trupin during teleconference, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching document entitled "Recommendations").

<sup>46</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 29.

*Rating:* Substantial compliance

**5.4e:** DJJ pursued a contract for normative peer culture training in 2009, resulting in a contract that Dr. Krisberg and the other IBTM experts have advised DJJ to cancel.<sup>47</sup>

In light of Dr. Krisberg's recent recommendation that the normative culture requirement be removed from the remedial plan, OSM declines to rate this item at present.<sup>48</sup>

*Rating:* Not rated

**5.4f:** DJJ has contracted with the Change Companies to provide training for trainers in interactive journaling.<sup>49</sup> The contract also includes assistance in the development of an Intensive Needs Interactive Journaling® Curriculum.

DJJ has drafted a project charter for implementation of interactive journaling training, and DJJ's directors approved the charter in March 2009. The charter does not include a detailed schedule but notes that DJJ must complete the project before the Change Companies contract expires in June 2010.

*Rating:* Beginning compliance

**5.4g:** DJJ continues to train staff in safe crisis management, crisis intervention and conflict resolution, and aggression replacement therapy.<sup>50</sup> Training is not complete, and DJJ may add or substitute other trainings once the IBTM description is finalized.

*Rating:* Partial compliance

**8.10.1:** *By September 20, 2008, DJJ to add all needed program space to O.H. Close, Preston, Ventura, Stark, and SYCRCC, such that no regular programs must be canceled due to lack of space. As a part of this requirement, sufficient classrooms must be located in or near BTPs in order to maintain a ratio of one teacher for every six students. 8.10.1: By September 30, 2008, DJJ to add all needed office space to the same five facilities, so that all living unit staff requiring offices have space in or adjacent to the living unit.*

DJJ has \$6.4 million in funds from fiscal year 2007-08 to spend on modular buildings.<sup>51</sup> As of January 2009, DJJ was awaiting facility closure decisions before allocating the funding to

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<sup>47</sup> See statements of Barry Krisberg and Eric Trupin during teleconference, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching document entitled —Recommendations”).

<sup>48</sup> See statements of Barry Krisberg during teleconference, October 26, 2009.

<sup>49</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 30. This paragraph and the following are based on this source.

<sup>50</sup> See, e.g., *id.*; DJJ Training Status Report, October 29, 2009.

<sup>51</sup> Statements of Mark Blaser during central office site visit, January 14, 2009; statements of John Blackwell during site visit, November 2, 2009 (based on communication with Mark Blaser).

specific sites.<sup>52</sup> DJJ announced the planned closure of Stark on August 27, 2009.<sup>53</sup> DJJ staff reported that a proposal for approval to spend the \$6.4 million would be submitted in November 2009.<sup>54</sup> The approval process takes about two months.<sup>55</sup>

*Ratings are provided at the facility level only.*

**6.6:** Program service day schedules for BTPs ensure structured activity based on evidence-based principles for at least 40% of waking hours. BTPs operate in accordance with these schedules.

Central office's July 2009 BTP program description includes a sample BTP schedule and states that facilities will document services provided within an electronic tracking system.<sup>56</sup>

*Rating:* OSM will provide a rating for central office once the audit round is complete.

**7.4:** DJJ to request legislative authority and funding for contract services, and issue RFP. The deadline for both requirements is July 1, 2006.

DJJ sought a contractor to provide residential services for females in 2006, 2007, and 2008.<sup>57</sup> The process did not result in the identification of qualified bidders.<sup>58</sup> In the meantime, the program for young women at the Ventura facility has improved.<sup>59</sup> DJJ intends to create an appropriate women's program there,<sup>60</sup> which Dr. Krisberg encourages "[w]hile not giving up altogether on the goal of moving the [young women] into smaller and better facilities that are closer to their homes."<sup>61</sup>

*Rating:* Substantial compliance

<sup>52</sup> Statements of Mark Blaser during central office site visit, January 14, 2009.

<sup>53</sup> See statements of Bernard Warner during teleconference, August 27, 2009.

<sup>54</sup> Statements of John Blackwell during site visit, November 2, 2009 (based on communication with Mark Blaser). The proposal will be guided by DJJ's quarterly "Physical Plant Improvement" report, dated June 2009 (provided as PoP #533, October 13, 2009.) *Id.*

<sup>55</sup> Statements of Mark Blaser during central office site visit, January 14, 2009.

<sup>56</sup> See BTP Charter Workgroup, "Behavior Treatment Program," July 15, 2009, pp. 22-25.

<sup>57</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 4; Barry Krisberg, draft 2009 formal report, September 2009, pp. 10-11.

<sup>58</sup> Barry Krisberg, draft 2009 formal report, September 2009, 2009 Formal Report, p. 11; statements of Bernard Warner during Case Management Conference, July 30, 2009.

<sup>59</sup> Statements of Barry Krisberg during Case Management Conference, July 30, 2009; Barry Krisberg, draft 2009 formal report, September 2009, p. 11.

<sup>60</sup> See, e.g., statements of Michael Brady and Karen Heintschel during Case Management Conference, July 30, 2009.

<sup>61</sup> Barry Krisberg, draft 2009 formal report, September 2009, pp. 13-14; see also statements of Barry Krisberg during Case Management Conference, July 30, 2009.

**8.1.2:** DJJ to fill or assign community/court liaison positions by December 1, 2006. These staff will perform functions as outlined in the Safety and Welfare Remedial Plan.

Six central office staff serve as community/court liaisons.<sup>62</sup>

*Rating:* Substantial compliance

**8.2.4:** By July 1, 2008, pending funding (which DJJ must request), DJJ will provide orientation at county detention facilities.

DJJ continues to track juvenile hall orientations given by its intake and court services staff. Provided documents indicate that 38 youth received orientation at five orientation sessions in three counties during the third quarter of 2009.<sup>63</sup> During the second quarter of 2009, 111 youth attended four orientation sessions in three counties.<sup>64</sup>

DJJ has asked all California counties to allow orientation sessions at their juvenile halls and provides orientations at counties that have accepted.<sup>65</sup>

*Rating:* Substantial compliance

**8.3.1:** Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. Deadline is July 1, 2007. This item is also monitored by the mental health experts. **8.3.2a:** By November 1, 2006, DJJ is required to facilitate family phone contact within 24 hours of youth arrival. **8.3.2b:** By December 1, 2006, DJJ is required to facilitate ongoing family phone contact. **8.3.3:** By March 1, 2007, DJJ must arrange for family visiting days at least four times per year.

**8.3.1:** Central office has developed Community Assessment Reports (CARs) for statewide use beginning July 1, 2009.<sup>66</sup> OSM received a copy of the CAR policy and report form and has provided it to the mental health experts for their feedback.

Field parole agents complete the CARs and provide them to the facility sometime after the youth's arrival at the facility.<sup>67</sup> The facility's case work specialist completes a "clinic report"

<sup>62</sup> See DJJ, "Intake and Court Services," October 30, 2009.

<sup>63</sup> Intake and Court Services, Juvenile Hall Orientation Log: Quarterly Contact July – October 2009, undated (provided November 2, 2009).

<sup>64</sup> Intake and Court Services, Juvenile Hall Orientation Log: Quarterly Contact April – June 2009, undated (provided November 2, 2009).

<sup>65</sup> Statements of Eleanor Silva during site visit, November 3, 2009.

<sup>66</sup> Statements of program administrator for Preston during teleconference, October 28, 2009; statements of field parole staff during site visit, November 2, 2009.

which draws from the CAR, if received, and from information provided by the county of commitment.<sup>68</sup>

During the site visit, OSM requested verification that a CAR is completed for each new intake but has not received any documentation.

The remedial plan requires that the CARs be based on contacts and interviews with parents as well as ~~close~~ relatives and community service providers.”<sup>69</sup> Field parole agents are only conducting family interviews.<sup>70</sup>

*Rating:* Deferred until all site visits complete and expert feedback obtained

**8.3.2a:** Provided documentation indicates that 55 of 55 youth who arrived at a DJJ facility between August 1, 2009 and October 28, 2009 had the opportunity to make a phone call within one day of arrival.

*Rating:* Substantial compliance

**8.3.2b:** Central office is developing a new youth phone call policy.<sup>71</sup> The policy will mandate a minimum of four collect calls per month per youth and only one direct call per month for youth whose families cannot receive collect calls.<sup>72</sup>

Failing to ensure more than one youth-family contact per month is not supportive of family connections.

*Ratings are provided at the facility level only.*

**8.4.2a:** Disciplinary fact-finding hearings to be held within 14 days, except as provided for in policy. **8.4.2b:** Disciplinary disposition hearings held within 7 days, except as provided for in policy.

DJJ provided very helpful, WIN-generated compliance data for the period between April 2009 and September 2009, broken down by month and facility. These data will inform facility-specific ratings throughout the audit round.

*Ratings are provided at the facility level only.*

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<sup>67</sup> Statements of field parole staff during site visit, November 2, 2009.

<sup>68</sup> Statements of program administrator for Preston during teleconference, October 28, 2009.

<sup>69</sup> See Safety and Welfare Remedial Plan, p. 70.

<sup>70</sup> Statements of field parole staff during site visit, November 2, 2009.

<sup>71</sup> Statements of Judi Nahigian and Tammy McGuire during site visit, November 3, 2009.

<sup>72</sup> Statements of Alicia Ginn during site visit, November 3, 2009.

**8.6.3a:** *DJJ's earn-back policy is to be revised to allow restoration of added time after six months.*

**8.6.3a:** DJJ revised its DDMS policy in order that fifty percent of disciplinary time adds may be earned back following six months—rather than one year—of good behavior.<sup>73</sup> OSM previously assigned a beginning compliance rating in part because this policy change is not retroactive.<sup>74</sup> OSM now understands the complex administrative difficulties that a retroactive rule change would entail.<sup>75</sup>

*Rating:* Substantial compliance

**8.6.4a:** *By March 31, 2007, DJJ is to simplify the description of the Ward Incentive Program (WIP) and create and distribute posters, flyers, and handouts to promote understanding and participation in the Program.*

In March 2009, DJJ revised its —pyramid” flyer depicting the incentive system and its requirements.<sup>76</sup> Central office re-issued this pyramid to the facilities in July 2009.<sup>77</sup> Central office issued a new list of youth incentives to facility superintendents in January 2009.<sup>78</sup>

DJJ also issues regular Youth Incentive Newsletters to youth and staff. The July 2009 newsletter features the photos of four youth winners of an incentive program flyer contest. It also describes recent events, depicts each site’s percentage of A-Level youth, and includes a calendar of upcoming incentive events.

DJJ expects to revisit its incentive program and system of sanctions following the finalization of the IBTM description.<sup>79</sup>

*Rating:* Substantial compliance

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<sup>73</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 42.

<sup>74</sup> *See id.*, pp. 42-43.

<sup>75</sup> Tammy McGuire explained these difficulties at length during our site visit, and it became clear that selection of an arbitrary date for the rule change would be inevitable. Many affected youths’ parole consideration dates passed prior to the rule change. Also, retroactivity would entail a laborious, partially manual review of every DJJ youth’s record.

<sup>76</sup> *Id.*, p. 45.

<sup>77</sup> Statements of Judi Nahigian during site visit, November 2, 2009.

<sup>78</sup> *See* memorandum of Sandra Youngen to superintendents, January 23, 2009 (attaching document entitled “Individual Youth Incentives”).

<sup>79</sup> Statements of Tammy McGuire during central office site visit, November 2, 2009.

**8.6.4b:** *DJJ to revise its policy to allow youth full program credit if youth not responsible for non-participation in assigned/required programs. The deadline was initially March 31, 2007. At DJJ's request, the court has reset the deadline to March 31, 2009.*

DJJ revised its program credits policy to conform to this requirement and distributed it to facilities for implementation on March 31, 2009.<sup>80</sup>

In November 2009, DJJ provided a list of all youth who did not earn the maximum possible program credits in case conferences held between September 14 and October 28, 2009.<sup>81</sup> This is a new, automated tracking document which central office staff intend to generate and review regularly.<sup>82</sup> For many youth, the document includes a brief explanation of the decision to withhold program credits. OSM identified five cases from the list that seemed to warrant further review by central office. DJJ reviewed the cases and awarded full program credits to four of the five youth.<sup>83</sup>

*Rating:* Substantial compliance

**8.6.4c:** *By March 31, 2007, DJJ must develop standards for awarding program credits for youth participation in restorative justice projects.*

The remedial plan requires DJJ to award program credits (time cuts) based on participation in restorative justice projects.<sup>84</sup> DJJ must develop non-discretionary standards for restorative justice program credits, based on types of restorative justice activities and/or the activities' duration.<sup>85</sup> DJJ's recently completed program credit policy does not comply with this requirement.<sup>86</sup> DJJ should re-visit this as a part of re-examining incentives in connection with development and implementation of the IBTM.

*Rating:* Non-compliance

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<sup>80</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 5.

<sup>81</sup> See DJJ, "Justification for Withholding Youth Program Credits: September 14 – October 28, 2009," October 29, 2009.

<sup>82</sup> Statements of Tammy McGuire during site visit, November 2, 2009.

<sup>83</sup> Memorandum of Van Kamberian to special master, et al., January 14, 2010, p. 1.

<sup>84</sup> See Safety and Welfare Remedial Plan, pp. 73-74.

<sup>85</sup> *Id.* ("For example, working x hours on a restorative justice project might be worth one program credit, participating in blood drive might be worth several credits, etc.").

<sup>86</sup> See Program Credits Policy (PoP #374, April 6, 2009), pp. 4-5.

**8.7.1a:** DJJ is to ensure that Education Services operates the facilities' law libraries by August 20, 2007. **8.7.1b:** Education Services is to track law library needs and conduct annual audits indicating that materials are up-to-date or ordered by June 30, 2010 (deadline reset from August 30, 2007). **8.7.1c:** Education Services is to control the law libraries' budget and manage purchases by June 30, 2010 (deadline reset from August 30, 2007). **8.7.3:** Needed law library materials must be purchased annually by August 30, 2007. **8.7.5:** DJJ is to replace print libraries with electronic or internet materials by June 30, 2010 (deadline reset from August 30, 2007).

**8.7.1a:** Education Services operates DJJ's law libraries.<sup>87</sup>

*Rating:* Substantial compliance

**8.7.1b:** The central office staff person responsible for law libraries will begin auditing facilities in February or March 2010.<sup>88</sup> A draft audit tool was provided.

*Rating:* Beginning compliance

**8.7.1c:** Education Services manages purchases but remains dependent on Juvenile Facilities to administer the budget.<sup>89</sup> DJJ has submitted a budget transfer request, which it expects to take effect in January 2010.

*Rating:* Partial compliance

**8.7.3:** DJJ purchased WestLaw law library materials on DVD in early 2009.<sup>90</sup> The WestLaw resources consist of the majority of items on the *Gilmore* list, which includes a variety of state and federal codes, digests, reporters, and secondary sources.<sup>91</sup> The DVDs do not include a Shepardizing (KeyCite) feature. As OSM previously noted, access to up-to-date legal information is the purpose of the law libraries and must be provided to all youth; a law library should allow researchers to ensure that information is current.

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<sup>87</sup> Statements of Tammy McGuire during site visit, November 3, 2009; *see also, e.g.*, statements of Susan Harrower during DJJ Court Compliance Task Force meetings, September 3, 2009 and September 24, 2009 (education team leader discussing administration of law libraries).

<sup>88</sup> *See* e-mail of Jim Cripe to Judi Nahigian, October 29, 2009.

<sup>89</sup> Statements of Tammy McGuire during site visit, November 3, 2009. The remainder of this paragraph is based on this source.

<sup>90</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 55; *see also* statements of Jim Cripe during DJJ Court Compliance Task Force meetings, April 30, 2009 and June 11, 2009.

<sup>91</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 56. The remainder of this paragraph is based on this source.

Since the OSM monitors' prior report, central office has instructed the law libraries to order certain —street law,” or legal self-help, resources.<sup>92</sup> The monitors previously observed that availability of these resources varied across the state, and many were out of date.<sup>93</sup>

*Rating:* Not rated until all site visits complete.

**8.7.5:** DJJ reports that it has transitioned to an electronic law library system well ahead of its projected June 30, 2010 completion date.<sup>94</sup> Software and hardware have been purchased and installed. Librarians have been trained.

*Ratings are provided at the facility level only.*

**8.8.2a:** *By June 30, 2007, DJJ must designate a religious coordinator to oversee mandated programs, policy, manual revisions, and training. S&W 8.8.2b-d:* *The religious coordinator is to monitor facilities for (b) provision of services/programs for various faiths, (c) youth access to services/programs/materials, and (d) documentation of services/programs in an automated tracking system.*

**8.8.2a:** Gregory Brewer coordinates religious services for DJJ.

*Rating:* Substantial compliance

**8.8.2b-d:** The remedial plan requires the religious coordinator to monitor the provision of services by conducting field visits and documentation review.<sup>95</sup> Mr. Brewer visited a few sites at the end of fiscal year 2008-2009, but budget problems since that time have prevented further visits.<sup>96</sup>

With remote access to facility WIN records, Mr. Brewer monitors whether scheduled religious services and programs occur, and whether youth have access to them. His tracking system is no longer fully automated because of limited server space, and his manual tracking is very time-consuming. IT staff are working with him to make slight improvements to his monitoring system, and these improvements will include the capacity for chaplains to document individual and family contacts in WIN.

Based on his tracking data, Mr. Brewer has formulated recommendations for improvement of the system statewide. He is also drafting a chaplain's handbook.

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<sup>92</sup> See statements of Jim Cripe during site visit, November 3, 2009; e-mail of Jim Cripe to Juel Blanchard, et al., May 12, 2009.

<sup>93</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 51.

<sup>94</sup> See *id.*, p. 54-55; statements of Susan Harrower during DJJ Court Compliance Task Force meetings, September 3, 2009 and September 24, 2009. The remainder of this paragraph is based on the latter source.

<sup>95</sup> See Safety and Welfare Remedial Plan, pp. 75-76.

<sup>96</sup> Statements of Gregory Brewer during site visit, November 2, 2009. Mr. Brewer showed us examples of his tracking system. Unless otherwise noted, the remainder of this section is based on these sources.

Central office also monitors youth grievances related to religious services and programs.<sup>97</sup> DJJ provided a series of written communications between Mr. Brewer and one facility's superintendent and chaplains regarding youth grievances about access to chaplains.

Mr. Brewer does not formally track youth access to religious materials. DJJ currently has no budget for providing religious materials to youth, but community volunteers often donate them.

*Ratings:* Ratings will be provided once all site visits are complete.

**8.8.2e-g:** *The religious coordinator is also responsible for (e) pursuit of state and federal grants, (f) DJJ representation at meetings and conferences, and (g) development of a chaplaincy internship program.*

**8.8.2e:** The safety and welfare expert confirmed in January 2009 that no grant opportunities for DJJ are available.<sup>98</sup> OSM thus declines to assign a compliance rating at this time.

*Rating:* Not rated

**8.8.2f:** The remedial plan requires the religious coordinator to attend conferences at the State Advisory Council on Institutional Religion (SACIR) and the Association of Chaplains in State Services (ACSS) and/or other state conferences as appropriate.<sup>99</sup> DJJ has consistently provided documentation of the religious coordinator's participation in these conferences since 2007.<sup>100</sup>

*Rating:* Substantial compliance

**8.8.2g:** DJJ has not developed a state-wide chaplaincy internship program, and no progress on this item has occurred since February 2008, when it was discussed at the DJJ Chaplains' Advisory Committee.<sup>101</sup>

*Rating:* Non-compliance

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<sup>97</sup> See, e.g., Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 57.

<sup>98</sup> See statements of Barry Krisberg during central office site visit, January 14, 2009.

<sup>99</sup> See Safety and Welfare Remedial Plan, p. 76.

<sup>100</sup> See, e.g., Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 62; document entitled "Draft: Notes of the SACIR Telephonic Board Meeting," October 22, 2009.

<sup>101</sup> Statements of Gregory Brewer during site visit, November 2, 2009; see also Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 63.

**8.10.3:** By July 1, 2007, DJJ is required to develop a proposal for a new facility that is consistent with the goals of the Remedial Plan. **8.10.4:** By September 1, 2006, DJJ to designate a project coordinator for master plans

**8.10.3:** DJJ recently provided a design document for a new facility.<sup>102</sup> A rating will be provided by the end of the audit round, based on feedback from the safety and welfare and mental health experts.

*Rating:* Deferred until expert feedback obtained

**8.10.4:** In November 2008, DJJ formally designated a project coordinator for DJJ's operational master plan and a project coordinator for DJJ's facility master plan.<sup>103</sup>

*Rating:* Substantial compliance<sup>104</sup>

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<sup>102</sup> See PoP #550, November 2, 2009.

<sup>103</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 63.

<sup>104</sup> OSM previously deferred to the safety and welfare expert regarding the rating for this item. *See id.* The expert has declined to provide a rating. *See, e.g.*, e-mail of Barry Krisberg to Donna Brorby, September 10, 2009; e-mail of Barry Krisberg to Donna Brorby, September 14, 2009. OSM now assigns a substantial compliance rating because the position is filled, though this rating does not reflect a judgment about whether the position should split into two secondary assignments, or whether the positions are adequately filled.

## Compliance Ratings

ACTION ITEM	Section/Item		Rating	Audit Method / Standard
<b>2.1 ADD CENTRAL OFFICE RESOURCES</b>				
Add/appoint Program Director	2.1	1	SC	Position filled / assigned
Add/appoint Farrell Project Director	2.1	2	SC	Position filled / assigned
Program development & implementation team	2.1	3a	SC	Teams in place
Temporary transition team	2.1	3b	SC	
Compliance team	2.1	3c	SC	
Dedicated staff for policy development / maintenance	2.1	4a	PC	
Master schedule completed for updating DJJ policy	2.1	4a	SC	Schedule in place
Policies updated per schedule. TDOs as needed	2.1	4a	NR	Farrell related policies updated per schedule
Youth informed of changes as appropriate	2.1	4a	SC	Information materials and/or briefing provided within 30 days of change
Clear separation between juvenile and adult training	2.1	4b	NR	Separate DJJ training process plan and tracking system in place
Trainers/quality assurance specialists (minimum 18)	2.1	5	PC	Positions filled / assigned
<b>2.2 CLARIFY LINES OF AUTHORITY / CREATE SYSTEM FOR AUDITING AND CORRECTIVE ACTION</b>				
Rewrite local directives & procedures as new policy is adopted	2.2	5	SC	Local directives and procedures in place (on going process)
Update job descriptions	2.2	6	BC	Official job descriptions approved
Produce annual reports	2.2	7	BC	Annual reports produced. Reports accurately reflect status of reform and state of DJJ
<b>2.3 IMPROVE MIS CAPABILITY</b>				
Complete WIN exchange	2.3	1	SC	Exchange operational
Contract for Performance-based Standards	2.3	3a	SC	Contract in place
Establish state-wide PbS Coordinator	2.3	3b	SC	Position filled / assigned
<b>2.5 RESEARCH</b>				
Assist with annual reports	2.5	1b	NC	Reports accurately reflect status of reform and state of DJJ
<b>3.0 REDUCE VIOLENCE AND FEAR</b>				
Qualify 18 staff in crisis management training	3	4a	SC	Trainers qualified

Crisis management training for direct care staff at two facilities	3	4b	PC	Direct care staff are trained. New staff are trained within 90 days of assignment to a living unit.
Develop and use databases to track violence and use of force	3	5	PC	System developed in consultation with S&W expert, plaintiff's counsel and Special Master that includes all PbS data elements relating to violence, injuries to youth and staff, and use of force. System is in place and operational. DJJ audits data reliability and data is determined to be reliable per appropriate statistical measures. Starting in July 2007 and subject to the S&W expert's approval, DJJ develops annual targets and action plans for each facility for reduction of violence, injuries, and use of force. Quarterly reports provided to S&W expert, plaintiff's counsel and Special Master for all facilities and all data elements. Report format approved by S&W expert.
Quarterly reports on selected PbS data elements	3	6b	NR	INCLUDED UNDER 3.5
Open sufficient BTPs for projected 2008/09 demand	3	9a	NR	BTPs are operational and staffed and sized according to the Remedial Plan
<b>5.0 LAY THE FOUNDATION FOR TREATMENT REFORM</b>				
DJJ Integrated Behavior Treatment Model	5	4a	NC	Trainer(s) hired/retained or existing staff trained as trainers
Risk / Needs Assessment	5	4b	SC	
Treatment Plan Development	5	4c	SC	
Motivational Interviewing	5	4d	SC	
Normative Culture	5	4e	NR	
Interactive Journaling	5	4f	BC	
Other programs adopted by DJJ	5	4g	PC	
<b>6.0 CONVERT FACILITIES TO REHABILITATIVE MODEL</b>				
Program Service Day schedule for BTPs	6	6	NR	Schedule ensures structured activity based on evidence-based principles for at least 40% of waking hours. BTPs operating in accordance with approved schedule.
<b>7.0 SYSTEM REFORM FOR FEMALES</b>				
Issue request for Letters of Interest for contract services	7	1	SC	COMPLETED
Request legislative authority and funding for contract services	7	4	SC	RFP issued
<b>8.1 ACCEPTANCE/REJECTION CRITERIA</b>				
Designate Community/Court Liaison staff	8.1	2	SC	Position filled / assigned
<b>8.2 ORIENTATION</b>				

Provide DJJ orientation at detention facilities (pending funding)	8.2	4	SC	Accurate and useful information about DJJ is provided to new commitments before they leave detention. This does not relieve DJJ of the requirement to provide information to youth on new/revised policies per 2.1 4a
<b>8.3 FAMILY INVOLVEMENT</b>				
Community assessment reports at commitment	8.3	1	NR	Monitored by MH Remedial Plan experts
Family phone contact facilitated w/in 24 hrs of commitment	8.3	2a	SC	
<b>8.4a DISCIPLINARY SYSTEM</b>				
<b>8.6 TIME ADDS</b>				
Earn-back policy revised to allow restoration after 6 months	8.6	3a	SC	Policy revised
Description of Ward Incentive Program simplified	8.6	4a	SC	Monitored with 8.4 7a
Full program credit if youth not responsible for non-participation	8.6	4b	SC	Policy revised
Point standards developed for restorative justice projects	8.6	4c	NC	Standards in place. Interview of youth indicate awareness of policy
<b>8.7 ACCESS TO COURTS AND LAW LIBRARY</b>				
Education Services operates law libraries	8.7	1a	SC	Budget, procurement, and operations assigned to Education Services. Written annual audits produced.
Education Services tracks needs and conducts annual audits	8.7	1b	BC	
Education Services controls budget and manages purchases	8.7	1c	PC	
Needed law library materials purchased annually	8.7	3	NR	Annual audits by Education Services indicates materials up-to-date or ordered
<b>8.8 ACCESS TO RELIGIOUS PROGRAMS AND FUNCTIONS</b>				
Religious Coordinator oversees mandated programs, policy, manual revisions, and training	8.8	2a	SC	Job description conforms to requirements of Remedial Plan. Position filled / assigned
Religious Coordinator monitors facilities for:				
Provision of services/programs for various faiths	8.8	2b	NR	Written documentation of monitoring produced upon request. Sufficient resources available to provide religious services to youth as required by law.
Youth access to services/programs/materials	8.8	2c	NR	
Documentation of services/programs in an automated tracking system	8.8	2d	NR	
Religious Coordinator responsible for:				
Pursuit of state and Federal grants	8.8	2e	NR	Grant applications submitted as appropriate
DJJ representation at meetings and conferences	8.8	2f	SC	Coordinator attends conferences of the State Advisory Council on Institutional Religion and Association of Chaplains in State Services and/or other state conferences as appropriate
Development of chaplaincy Internship Program	8.8	2g	NC	Internship program in place
<b>8.10 MASTER PLANNING</b>				

Proposal for prototypical facility	8.1	3	NR	Proposal for new facility developed that is consistent with the goals of the Remedial Plan
Designate project coordinator for master plans	8.10	4	SC	Position filled / assigned

**Compliance with Safety and Welfare Requirements: OH Close Site Visit Report**  
**January 28, 2010**  
**Donna Brorby and Zack Schwartz**

The Safety and Welfare Plan assigns monitoring of some requirements to the office of the special master (OSM). Donna Brorby and Zack Schwartz visited OH Close on November 5-6, 2009 to audit compliance with these requirements. This report is based on staff and youth interviews<sup>1</sup> and multiple “proofs of practice” provided by DJJ. Facility staff were extremely gracious and helpful during our visit, and provided comprehensive information.

*2.1.4a: As appropriate, youth are to receive information materials and/or briefing within 30 days of policy changes.*

Sign-in sheets show that information was provided to youth at all living units on changes to policies or rules regarding the law library, phone call rates, religious services, the program service day, receipt of packages, DDMS, program credits, and incentives.<sup>2</sup> The El Dorado living unit did not inform youth about changes to the DDMS, program credits, or program service day policies until six months after other living units had been briefed.<sup>3</sup> Interviewed youth generally were aware that policy changes were announced in large groups.<sup>4</sup>

*Rating:* Partial compliance

*2.2.3: DJJ to designate staff to act as facility compliance monitors and to develop internal compliance schedule for all operations.*

The assistant superintendent and a program administrator jointly act as facility compliance monitors.<sup>5</sup> The facility has a copy of this year’s schedule of internal audits and self-compliance.<sup>6</sup>

*Rating:* Substantial compliance.

*2.2.5: DJJ facilities to rewrite local directives and procedures as new policies are adopted, on an ongoing basis.*

OH Close provided local procedures on the program service day and use of electronic devices within the facility, as well as directives to staff about documenting weekly phone calls and

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<sup>1</sup> We interviewed a total of 13 youth. They were randomly selected from a roster of all youth at the facility.

<sup>2</sup> See “Youth Proof of Practice Binder” provided during site visit, November 5-6, 2009.

<sup>3</sup> *Id.* El Dorado was briefed in October. Other units were briefed in March.

<sup>4</sup> Statements of three youth interviewed during the site visit, November 5-6, 2009.

<sup>5</sup> Memorandum of assistant superintendent to head of *Farrell* compliance, October 6, 2009; memorandum of superintendent to all OH Close staff, August 2, 2009.

<sup>6</sup> Statements of program administrator during site visit, November 5-6, 2009; schedule provided during site visit.

restorative justice points, fire drill evacuations, and accommodating youth with disabilities during uses of force.<sup>7</sup> OSM defers to the relevant experts regarding the substance of these rules.

*Rating:* Substantial compliance

**2.3.3c:** *DJJ to fill/assign PbS site coordinators at each facility.*

The official PbS coordinator is the assistant superintendent.<sup>8</sup> PbS data collection and entry is performed by two AGPAs: one for use of force and one for all other issues.<sup>9</sup>

*Rating:* Substantial compliance

**2.4.1-5, 2.4.7-8:** *DJJ must ensure that each facility has a (1) program manager(s) responsible for high risk, low risk and re-entry programs, as needed; (2) volunteer services/positive incentives coordinator; (3) vocational specialist; (4) victim services/restitution specialist; (5) training officer; (7) work assignment coordinator and (8) facility administrators for operations programs and business services. 6.3 and 6.4a, b, c and d: Prior to the conversion of facilities to a rehabilitative model, DJJ must hire or assign (a) facility administrators of programs, (b) program managers (possible duplicate of 2.4.1) (c) volunteer/positive incentives coordinator (duplicate of 2.4.2), and (d) conflict resolution teams (where appropriate).*

These audit items require certain administrative and management positions at facilities in a generic way. The position titles need not align precisely with existing positions. The business rules control actual position titles and numbers.<sup>10</sup> OSM cannot identify facility administrators of programs and operations in the business rules and believes that these functions are covered by the superintendents and assistant superintendents.

**2.4.1 and 6.4.b:** OSM is uncertain how to interpret the requirements for program managers for high risk, low risk and re-entry programs as needed. We think that 2.4.1 and 6.4b duplicate one another, though 6.4b does not refer to high risk, low risk and re-entry programs or any other specific program. The business rules require facilities to have one program administrator for every four TTS/CWS's. O.H. Close has two program administrator positions, one of which is vacant according to the facilities organizational chart provided during the site visit.

*Rating:* Partial compliance

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<sup>7</sup> The facility also provided procedures for the Temporary Intervention Program (TIP); these are identical to those at Preston, and therefore do not appear to be local to OH Close.

<sup>8</sup> Statements of AGPA during site visit, November 5-6, 2009.

<sup>9</sup> *Id.*

<sup>10</sup> The business rules require: 1 YA Administrator/Asst. Superintendent per facility; 1 program administrator for every 4 TTS/CWS; 1 AGPA incentives/volunteer coordinator; 1 Assistant Principal Supervisor of Vocational Instruction; 1 PA-I victim services; 1 Lieutenant (training officer); 1 Business Manager; 1 conflict team of a PA-I and a YCC for the first 150 youth and one team for each 100 more youth.

**2.4.2:** The facility has a positive incentives and volunteer coordinator.<sup>11</sup>

*Rating:* Substantial compliance

**2.4.3:** Johanna Boss High School has a vocational specialist as of October 2009.<sup>12</sup> A memorandum states she will meet with vocational education teachers each month.<sup>13</sup> We did not see the organizational chart for the high school, so we did not check anything about vocational education at O.H. Close; we rely on the education experts to report any issues that go to education staffing and vocational education.

*Rating:* Substantial compliance

**2.4.4:** The facility has a victim services/restitution specialist.<sup>14</sup>

*Rating:* Substantial compliance

**2.4.5:** The facility has a training officer.<sup>15</sup> It is his primary assignment. He receives direction from central office about what types of staff require training on a given TDO (i.e., a policy) or *Farrell*-related training (i.e., a skill, such as motivational interviewing, rather than a policy). He consults sign-in sheets to see what individuals have been trained, and tracks this using an Excel spreadsheet. Central office staff separately reviews sign-in sheets to produce statistics on the percentage of staff that have been trained.<sup>16</sup>

*Rating:* Substantial compliance

**2.4.7:** The facility has a work assignment coordinator.<sup>17</sup>

*Rating:* Substantial compliance

**2.4.8:** The facility has an administrator for operations and business services.<sup>18</sup>

*Rating:* Substantial compliance

**6.3 & 6.4a:** The assistant superintendent is the facility administrator of programs.<sup>19</sup>

*Rating:* Substantial compliance

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<sup>11</sup> Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

<sup>12</sup> Memorandum by education management staff, October 22, 2009.

<sup>13</sup> *Id.*

<sup>14</sup> Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

<sup>15</sup> *Id.*; the remainder of this section is based on statements of the training officer during the site visit.

<sup>16</sup> See "Reform Related Training Statistics," October 29, 2009.

<sup>17</sup> Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

<sup>18</sup> *Id.*

<sup>19</sup> *Id.*

**6.4c:** OH Close’s conflict resolution team (CRT) has three members.<sup>20</sup> Although they work as a team, each has primary responsibility for two living units.<sup>21</sup> The CRT member assigned to Del Norte – currently the only high-risk dormitory in DJJ – is required to check in with living unit staff each morning and afternoon.<sup>22</sup> We interviewed one CRT member, who made the team’s conflict resolution role sound vital. Like the youth we interviewed, the CRT member described most of the incipient and actual violence as gang/race related. The CRT member we interviewed on the violence reduction committee and the assistant gang investigator. We did not systematically ask youth about the CRT and record their answers. One youth spoke highly of the CRT and especially the member we interviewed. One interviewed youth who had been at Close for some time had not heard of the CRT.

*Rating:* Substantial compliance

**3.3b:** *DJJ to create violence reduction committees to review and evaluate incidents of violence quarterly and to develop plans to reduce violence and use of force. (This item is also monitored by the safety and welfare expert.)*

The violence reduction committee (VRC) meets monthly and prepares quarterly reports for central office.<sup>23</sup> It consists primarily of administrative and living unit staff, but also includes representatives of education and mental health. Youth representatives attend part of the meeting. The VRC establishes violence reduction goals for each living unit (e.g. “reduce physical altercations by 20%”) which are updated every six months. We did not systematically ask youth about the VRC, but the few we asked knew of it and knew that each living unit had a representative on it. Two staff members on the VRC accurately described its purpose.<sup>24</sup>

The most recent quarterly report characterizes a range of activities as part of the facility’s violence reduction effort:

Violence reduction activities include weekly IMPACT ... groups, Victim Awareness groups, Project Choice, Health Living Program, Healthy Bodies/Healthy Minds, Pre-Parole, psychology intern counseling programs, monthly incentive Level A and B activities, quarterly Family Night, Conflict Resolution weekly groups for those youth assigned to general population living units, and monthly Gang Intelligence Coordinator meetings. El Dorado Hall implemented a new program called “Road to Success.” In addition, the mental health section is conducting small group sessions with our Superior court committed youth population. Fresno and Humboldt Halls assign peer mentors available for groups as needed. .... Living unit staff continue to have tournaments,

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<sup>20</sup> Memorandum of assistant superintendent to all OH Close staff, October 2, 2009.

<sup>21</sup> *Id.*

<sup>22</sup> Memorandum of assistant superintendent to CRT member, October 27, 2009.

<sup>23</sup> Unless otherwise noted, all statements in this section are based on the past three months of violence reduction committee minutes and the violence reduction quarterly report for the third quarter of 2009.

<sup>24</sup> Statements of program administrator and CRT member during site visit, November 5-6, 2009. Both staff members noted that the VRC’s goal was to bring together staff to examine trends in violence and use of force and develop systemic responses to them. One noted that administrators met weekly to review specific incidents of violence and force.

games, jigsaw puzzles, movies, barbecues and specialty foods throughout the week. Intramural sports programs will soon be implemented starting with flag football. Effective October 1, 2009, Crisis Prevention Plans will be developed for youth that have two (2) or more violence [sic] incidents in one month.<sup>25</sup>

We were initially confused by the references in VRC minutes to incentive and other positive activities. Staff and youth representatives think youth are motivated to avoid violence in order to be eligible for these activities. Several interviewed youth said that the level system motivates youth to avoid behavior that results in a level 3 DDMS case and assignment to level C.

Still, we think there is a lack of clarity system-wide as to what VRCs should be doing. It would be helpful if the VRCs identified reasons for violence and developed focused strategies to address those reasons. The Safety and Welfare expert could assist by studying this issue and providing suggestions on how to use the VRCs to respond to violence trends.

*Rating:* Defer to expert

**S&W 3.4b:** *DJJ to provide crisis management training for direct care staff at Stark and Preston.*  
**S&W 3.4c:** *DJJ to train staff at all remaining facilities in crisis management. The latter two items are also monitored by the Safety and Welfare expert.*

**3.4b:** This item applies only to Stark and Preston, not OH Close.

*Rating:* Not applicable

**3.4c:** Data compiled by central office show that half the staff at OH Close have completed Safe Crisis Management training, as of October 29, 2009.<sup>26</sup> No education staff have completed the training. Excluding education staff, 66% of staff have completed the training.

*Rating:* Partial compliance

**3.5:** *DJJ to develop and use a database to track all incidences of violence and use of force. This item is also monitored by the Safety and Welfare expert.* **3.6a:** *DJJ to implement a system to record the data elements collected for PbS Safety Outcome Measures 2, 3, 4, 11, and 12 for every day of the year. Safety Outcome Measure 2 refers to injuries to youths per 100 person-days. Measure 3 refers to injuries to staff per 100 staff-days. Measure 4 refers to injuries to youths by other youths per 100 person-days. Measure 11 refers to assaults on youth per 100 person-days. Measure 12 refers to assaults on staff per 100 person-days. This item is also monitored by the safety and welfare expert.* **3.6b:** *By April 1, 2007, DJJ to produce quarterly*

<sup>25</sup> Violence Reduction Quarterly Report, October 29, 2009, p. 1. Some of the focus on incentive activities is a response to concerns youth have raised at VRC meetings. Statements of program administrator and CRT member during site visit, November 5-6, 2009. For example, under the heading “violence reduction activities,” the August 2009 minutes notes that “the youth indicated they would like more table games, cards and movies. Puzzles have been purchased for some of the living units and these are very popular among the youth. They would also like to have sodas available on the living units.” Violence Reduction Committee minutes, August 7, 2009, p. 4.

<sup>26</sup> This paragraph is based on “Reform Related Training Statistics,” October 29, 2009.

*reports on selected PbS data elements.*

**3.5 and 3.6a:** An AGPA (“analyst”) is responsible for collecting data on violence and use of force for the Quarterly Statistical Report<sup>27</sup> (QSR) and for PbS.<sup>28</sup> In the past year, she indicated, DJJ has adopted a new data entry system for the QSRs. Rather than entering data into an Excel spreadsheet, and sending it to central office, she now enters it directly into the CDCR intranet. There have been no changes to PbS.

For incidents of violence, the analyst relies primarily on Daily Operations Reports (Daily Ops) and WIN’s DDMS section. She uses Daily Ops to find out what incidents to look for in WIN. In WIN, she can search by disciplinary code, which enables her to search for different kinds of youth violence. Daily Ops and DDMS thus act as cross-check for each other. The system is the same for counting incidents for every month of the year, but the analyst records additional details on the incidents for PbS during PbS data collection months (April and October).

For use of force, the analyst relies of UOF reports. Because each staff member that observes or participates in a use of force fills out a separate report, a single incident generates multiple UOF reports. The analyst links the reports to a single incident based on the date and time. She then creates a report for the force review committee that includes information on each incident.

For self-harm incidents, the analyst has a different procedure for PbS data collection months (April and October) than for the other ten months of the year. During PbS months, she looks for incidents in Daily Ops and reviews the medical department’s log of urgent and emergency care. In other months, a medical department employee supplies the number of incidents.

The facility and the responsible staff member are doing a very good job in the absence of sufficient central office guidance and management information systems that automate data collection. We will give substantial compliance ratings to facilities when central office provides a standard methodology for data collection that appears adequate to produce accurate data, and the facility complies with the methodology.

*Rating:* Partial compliance.

**3.8c:** *DJJ to provide training in strategies and procedures to safely integrate gangs and racial groups. The safety and welfare expert monitors the quality of the training.*

OSM defers all monitoring related to this item to the safety and welfare expert, at his request.<sup>29</sup>

*Rating:* Defer to expert

**3.9a:** *DJJ to open sufficient Behavioral Treatment Programs (BTPs), in accordance with*

<sup>27</sup> Formerly known as CompStat.

<sup>28</sup> This section is based on statements of the analyst during the site visit, November 5-6, 2009.

<sup>29</sup> See statements of Barry Krisberg to Aubra Fletcher during meeting, October 23, 2009.

*remedial plan provisions.*

OH Close plans to open a BTP units at Inyo in the near future, with capacity for 18 youth.<sup>30</sup> The treatment intervention program or TIP has been on Inyo, and we assume that Close will use BTP beds for the TIP also. Recreation space for the BTP has been completed, with a sun cover, basketball court, and handball court. Construction is expected to take three to four months, meaning that BTP will open in February at earliest. BTP training will take place in December.

*Rating provided at the central office level only.*

**4.1b, 6.7:** DJJ to provide training to all direct care staff in certain areas. New or reassigned staff are to be trained within ninety days of assignment to a living unit. All supervisory and management staff are required to complete the training as required by DJJ policy. Training areas: **6.7a:** DJJ IBTM. **4.1b:** Risk/needs tool. This item is a duplicate of item 6.7b, which is monitored by the safety and welfare expert. **6.7c:** Treatment plan development. **6.7d:** Motivational interviewing (per interim training schedule). **6.7e:** Normative culture (per interim training schedule). **6.7f:** Interactive journaling (per interim training schedule). **6.7g:** Other key treatment components.

All figures reported in this section are drawn from the “Reform Related Training Statistics” memorandum dated October 29, 2009.

**6.7a:** No training has been provided, since the IBTM has not yet been developed.

*Rating:* Non-compliance

**4.1b, 6.7c:** Training on risk/needs assessment and case management at OH Close has focused on case managers, casework specialists, and parole agents. Data compiled by central office indicates that 92% of staff that require training on risk/needs assessment have received training in Orbis’ Effective Casework 1, while 85% of staff that require training on case management have received training on Orbis’ Effective Casework 2.

*Rating:* Substantial compliance (both items)

**6.7d:** Data compiled by central office show that 121 of 200 staff at OH Close (61%) have attended a three-day training on motivational interviewing. Out of a group of 93 staff “whose work directly involves helping youth achieve behavior change,” 54 individuals (58%) have attended an additional two-day motivational interviewing training.

*Rating:* Partial compliance

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<sup>30</sup> This paragraph is based on statements of the assistant superintendent during the site visit and DJJ counsel’s response to an earlier draft of this report (attachment to letter of Van Kamberian to the special master, January 11, 2010).

**6.7e:** DJJ pursued a contract for normative peer culture training in 2009, resulting in a contract that Barry Krisberg and the other IBTM experts now advise DJJ to cancel.<sup>31</sup> DJJ has agreed to do so.<sup>32</sup> In light of Dr. Krisberg's recent recommendation that the normative culture requirement be suspended, if not removed from the remedial plan, OSM declines to rate this item at present.<sup>33</sup>

*Rating:* Not rated at this time

**6.7f:** This training has not yet begun.

*Rating:* Non-compliance

**6.7g:** A memo from central office groups lists suicide prevention, crisis intervention and conflict resolution, and group facilitation, along with motivational interviewing and safe crisis management, as courses that are that are "being provided to all direct care staff" to "provide staff with a common understanding and the skills necessary to create a safe environment."<sup>34</sup> Although the memo does not explicitly define "direct care staff," it indicates that approximately 200 staff at OH Close were to be trained in motivational interviewing and safe crisis management

Data compiled by central office indicates that OH Close currently retains:

- Twenty-six staff (approximately 13% of direct care staff) that have attended Understanding and Preventing Suicide training.
- Fifteen staff (approximately 8% of direct care staff) that have attended Crisis Intervention and Conflict Resolution training, including two instructors.
- Eighty-one staff (approximately 40% of direct care staff) that have attended Group Facilitation training, including four instructors.

In addition, OH Close currently retains:

- Thirty-seven staff (including one instructor) that have attended a Cognitive-Behavioral Skills Primer.
- Twenty staff that have attended Aggression Replacement Training, including six managers and 14 group facilitators.
- Five CounterPoint facilitators.

OSM assigns a rating for this item based solely on the number of staff who have attended trainings to date. This rating is not a reflection of the quality or efficacy of the trainings.

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<sup>31</sup> Statements of Barry Krisberg and Eric Trupin during teleconference with special master, parties, and IBTM experts, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching recommendations).

<sup>32</sup> Statements of DJJ staff, during teleconference with special master, parties, and IBTM experts, October 26, 2009.

<sup>33</sup> See statements of Barry Krisberg during teleconference with special master, parties, and IBTM experts, October 26, 2009.

<sup>34</sup> "Reform Related Training Statistics," October 29, 2009.

Additionally, DJJ and the experts may select yet other treatment components once the IBTM description is finalized.

*Rating:* Beginning compliance

**6.1a-c:** *DJJ is required to convert Chaderjian to a treatment facility. DJJ is required to convert all other facilities to the rehabilitative model. 6.1b (begin conversion) and 6.1c (complete conversion). Items 6.1a and 6.1c are also monitored by the safety and welfare and mental health experts.*

OSM defers to the safety and welfare and mental health experts regarding compliance with these requirements.

*Rating:* Defer to expert

**8.1.1:** *DJJ is required to add all needed program space to O.H. Close, Preston, Ventura, Stark, and SYCRCC, such that no regular programs must be canceled due to lack of space. As a part of this requirement, sufficient classrooms must be located in or near BTPs in order to maintain a ratio of one teacher for every six students.*

There are plans to install six modulars at OH Close, which will be used for both program and office space.<sup>35</sup> The will be configured to create three buildings with four group rooms and two offices, plus restrooms. The three buildings will be located between living unit buildings. Close has also expanded or is expanding the “annex” behind Humboldt. There are two case managers per living unit; one will use an office on the unit and one will use an office off the unit. The off-unit office makes confidential meetings with youth possible. The Fresno day room is being converted to BTP class rooms as well. The superintendent is certain that Close will have the program and office space it needs once the modulars are in use.

*Rating:* Beginning compliance

**8.1.1:** *DJJ to add all needed office space to the same five facilities, so that all living unit staff requiring offices have space in or adjacent to the living unit.*

See 8.1.1 above.

*Rating:* Beginning compliance

**6.6:** *DJJ to approve a program service day schedule for all BTPs. The schedules must ensure structured activity based on evidence-based principles for at least forty percent of waking hours.*

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<sup>35</sup> This paragraph is based on statements of the assistant superintendent during the site visit, November 5-6, 2009 and DJJ’s response to an earlier draft of this report (attachment to letter of Van Kamberian to the special master, January 11, 2010).

There is not yet a BTP at O.H. Close, and we got no information about the program service day for BTPs during our site visit.

*Rating: Not rated*

**8.3.1:** Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. This item is also monitored by the mental health experts. **8.3.2a:** DJJ is required to facilitate family phone contact within 24 hours of youth arrival. **8.3.2b:** DJJ is required to facilitate ongoing family phone contact. **8.3.3:** DJJ must arrange for family visiting days at least four times per year. These items are monitored solely by the mental health experts who have requested that the OSM gather information for them.

**8.3.1, 8.3.2a:** We interviewed four youth who arrived at O.H. Close in the last few months. Three had telephone calls with family the day they arrived; the fourth was offered the opportunity to call but he was angry and he refused the opportunity.

*Rating provided at the central office level only*

**8.3.2b:** We reviewed phone records from 9/1/09 through 11/5/09 for 13 randomly selected youth. According to those records, six youth were offered and/or made less than four calls per month. Out of 13 youth interviewed about telephone calls, seven stated that they spoke to their family once a week or more. Some but not all of these were able to use the pay phone to reach their families. Some were allowed weekly or more direct calls by the YCC on whose caseload they were. Of the remaining six, two were too recently arrived to have established a pattern, one said that access to phone calls depended on behavior, and three said their “caseload” gave them one direct call per month.

*Rating: Partial compliance.*

**8.3.3:** The facility provided documentation (fliers, notations in the incentive coordinator’s report, or notations in daily operations reports) that showed that all living units participated in four family visiting nights between October 2008 and October 2009.

*Rating: Substantial compliance*

**8.4.2a:** Disciplinary fact-finding hearings to be held within fourteen days, except as provided for in policy (e.g., youth out to court). **8.4.2b:** Disciplinary disposition hearings to be held within seven days, except as provided for in policy.

**8.4.2a:** The facility provided WIN data on fact-finding hearings from May to September 2009. During this time, 137 out of 139 of fact-finding hearings (99%) were held within 14 days.

*Rating:* Substantial compliance

**8.4.2b:** The facility provided WIN data on disposition conferences from May to September 2009. During this time, 275 out of 288 disposition conferences (95%) were held within 7 days.

*Rating:* Substantial compliance

**8.4.6b:** *Eligibility to restore time added is to be reviewed at youth case conferences.*

Staff from central office reviewed the past three months of case conferences for all youth at OH Close with PBD extensions.<sup>36</sup> Out of 98 youth, two were eligible for time restorations, and had time restored at the case conference.

*Rating:* Substantial compliance

**8.6.3a:** *DJJ's earn-back policy is to be revised to allow restoration of added time after six months.* **8.6.3b:** *DJJ policy is to be revised to require that restored months are rounded up rather than down.*

**8.6.3b:** The program credit policy has been revised.<sup>37</sup> We did not systematically ask youth about this issue. No issues regarding rounding up restored months were noted in youth interviews or grievance trend reports.

*Rating:* Substantial compliance

**8.5.1:** *All facilities will make grievance forms available to youth without assistance in all units.*  
**8.5.2:** *All facilities will install a lock box for grievances in all living units.* **8.5.3:** *In each facility, the grievance clerk will ensure an adequate supply of forms and will educate and assist grievants in the process.*

**8.5.1:** A monitor accompanied the grievance coordinator to each living unit, and observed that grievance forms are available in all living units in a shelf beneath the lockbox.

*Rating:* Substantial compliance

**8.5.2:** A monitor accompanied the grievance coordinator to each living unit, and observed that all open living units have a lockbox for grievance forms.

*Rating:* Substantial compliance

**8.5.3:** All living units have grievance clerks, and all but one – who was elected last week – have been trained.<sup>38</sup> In the past few months, some grievance clerks have been affected by restrictions

<sup>36</sup> Statements of Tammy McGuire during site visit.

<sup>37</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 42.

on movement due to swine flu quarantines and group disturbances. As a result, the grievance coordinator has been unable to meet with the clerks as a group each month. She has been meeting with the clerks individually instead. Interviewed youth included one grievance clerk, who stated that he met with the grievance coordinator about twice a week.

*Rating:* Substantial compliance

**8.5.4:** *A notice of receipt of grievance or allegation of misconduct will be provided to all grievants. 8.5.5a:* *Each facility grievance coordinator will prepare monthly reports.*

**8.5.4:** The facility has a system for generating receipts.<sup>39</sup> Each grievance is assigned a case number that is hand-written on the grievance. The grievance is scanned and saved in a computer, and a printed copy is returned to the youth. If youth do not receive a printed copy of the grievance, it means there has been a problem processing it.

*Rating:* Substantial compliance

**8.5.5a:** The facility provided examples of reports from April, August, and September that use the standard format adopted in April 2009.

*Rating:* Substantial compliance

**8.6.4a:** *DJJ is to simplify the description of the Ward Incentive Program (WIP) and create and distribute posters, flyers, and handouts to promote understanding and participation in the Program.*

Interviewed youth generally understood the “level system.” They knew what level they were, they could tell you about their ups and downs in the level system, they generally thought it was best to be A, and better to be B than C. Youth seemed spontaneously to mention the number of days that could be earned, as if that was what was most important to them.

The ward incentives coordinator was incentives coordinator when O.H. Close converted Butte Hall to be its incentive unit, which was a very attractively appointed and equipped activity space. Butte is no longer available to the incentives program; it is being brought into use as a living unit, which is a loss for the incentives program. For the next year or two, the incentive space will be in a section of the auditorium. It will have to be able to be packed up for when the auditorium is used for other things. The incentives coordinator is determined to make it work and it is clear that she will do what she can to make the space a special place for Level A activities. Long term, it is likely that the incentive program can have space in one of the modulars that are to be added at Close.

The incentives coordinator organizes Level A activities. Sometimes A level youth can bring a lower level friend, to motivate lower level youth to strive to be A level. She organizes some A

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<sup>38</sup> This paragraph is based on statements of the grievance coordinator during the site visit.

<sup>39</sup> This paragraph is based on statements of Tammy McGuire during the site visit.

and B level events. She helps with all positive incentive events, such as family nights for all youth. She goes to all family nights because she feels she should meet families as the incentive and volunteer coordinator. She tells families about the level system. Youth know she is the incentives coordinator and sometimes ask questions.

*Rating provided at the central office level only.*

**8.6.4b:** *DJJ to revise its policy to allow youth full program credit if youth not responsible for non-participation in assigned/required programs.*

In November 2009, DJJ provided a list of all youth who did not earn the maximum possible program credits in case conferences held between September 14 and October 28, 2009.<sup>40</sup> The list includes five youth from O.H. Close. The explanations do not indicate that youth were denied credits for non-participation in programs for which they were not responsible.

*Rating: Substantial compliance*

**8.6.4c:** *DJJ must develop standards for awarding program credits for youth participation in restorative justice projects.*

See fact gathering memo for 8.4.7b.

*Rating provided at the central office level only.*

**8.7.3:** *Needed law library materials must be purchased annually. 8.7.1b: Education Services is to track law library needs and conduct annual audits indicating that materials are up-to-date or ordered by June 30, 2010. 8.7.5: DJJ is to replace print libraries with electronic or internet materials by June 30, 2010.*

**8.7.3:** OH Close has switched to electronic libraries. In May 2009, the facility purchased six Nolo Press guidebooks, including the titles “U.S. Immigration Made Easy,” “How to Get a Green Card,” “Encyclopedia of Everyday Law,” “Guide to California Law,” “Criminal Law Handbook,” and “Legal Research.”<sup>41</sup>

*Rating provided at the central office level only.*

**8.7.1b:** OH Close plans to perform a self-assessment on this issue in December.<sup>42</sup> A central office education staff person is expected to visit the facility in January or February 2010.

*Rating provided at the central office level only.*

**8.7.5:** The facility has a functioning electronic law library.<sup>43</sup>

<sup>40</sup> See Aubra Fletcher and Donna Brorby, “Compliance with Safety and Welfare Requirements: Central Office Site Visit Report,” November 20, 2000, pp. 14-15.

<sup>41</sup> Intraoffice Requisition form NCYC09-0032059, May 12, 2009.

<sup>42</sup> Statements of program administrator during site visit, November 5-6, 2009.

*Rating: Substantial compliance*

**8.8.2b-d:** *The religious coordinator is to monitor facilities for (b) provision of services/programs for various faiths, (c) youth access to services/programs/materials, and (d) documentation of services/programs in an automated tracking system.*

**8.8.2 b, c, d:** We met one of the chaplains who described his work and that of other chaplains, including provision of services/programs of various faiths. Some youth spoke positively about the availability of the chaplains to them and of their participation in religious services and programs.

*Rating provided at the central office level only*

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<sup>43</sup> Statements of law librarian during site visit, November 5-6, 2009.

**Compliance with Safety and Welfare Requirements: Chaderjian Site Visit Report**  
**January 28, 2010**  
**Zack Schwartz and Aubra Fletcher**

The Safety and Welfare Plan assigns monitoring of some requirements to the office of the special master (OSM). Zack Schwartz and Aubra Fletcher visited Chaderjian on November 12-13, 2009 to audit compliance with these requirements. This report is based on youth and staff interviews and multiple “proofs of practice” provided by DJJ.

**2.1.4a:** *As appropriate, youth are to receive information materials and/or briefing within 30 days of policy changes.*

Living unit staff are required to complete sign-in sheets to show that they have informed youth of policy changes. The facility compliance monitor systematically tracks whether staff turn in these sheets, and reminds them when they are late.<sup>1</sup> Inspection of recent sign-in sheets showed that all living units informed youth of recent changes to the DDMS policy within 30 days. A partial compliance rating is assigned because in other cases – including changes to the grievance and program credits policies – one or more living units was a month or more late in informing youth.<sup>2</sup> Four out of five youth interviewed about policy changes stated that staff announce changes in large group meetings. Two of the five youth (one on Smith and one on Kern) said rules changed unpredictably.

*Rating: Partial compliance*

**2.2.3:** *DJJ to designate staff to act as facility compliance monitors and to develop internal compliance schedule for all operations.*

The facility has designated a compliance monitor.

*Rating: Substantial compliance*

**2.2.5:** *DJJ facilities to rewrite local directives and procedures as new policies are adopted, on an ongoing basis.*

The facility compliance monitor is responsible to ensure that local directives and procedures are adopted, and the local operations manual is located on the facility’s server.<sup>3</sup> The staff person responsible for writing the directive or procedure depends on the subject area.<sup>4</sup>

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<sup>1</sup> This remainder of this paragraph is based on statements of the facility compliance monitor during site visit, November 12-13, 2009 and sign-in sheet binders inspected during site visit.

<sup>2</sup> These policies included: restoration of DDMS time (Kern living unit, about three weeks late), sick call procedure for mental health requests (San Joaquin four months late, Feather two months late), grievance/staff misconduct (Feather two months late, McCloud one-and-a-half months late). The Feather living unit was also one to two months late in informing youth of changes to policies or procedures about program credits, visiting restrictions for minors, collect call rates, religious services, and contraband.

<sup>3</sup> Statements of superintendent during site visit, November 12, 2009.

Chaderjian provided the following local procedures:

- Cell phones, June 25, 2009;
- Youth property, July 7, 2009;
- Employee property, unsigned and undated;
- Youth searches, unsigned and undated;
- Contraband watch, August 19, 2009.

It is unclear at this time whether central office has required Chaderjian to develop any additional local directives this year. Central office has begun tracking facility development of required local procedures but is still refining its tracking and follow-up process.<sup>5</sup> DJJ will provide more comprehensive information once it has been compiled.

*Rating:* Deferred until further information provided.

**2.3.3c:** *DJJ to fill/assign PbS site coordinators at each facility.*

Chad's PbS coordinator had been on leave prior to our site visit, and O.H. Close's PbS coordinator had been filling in.

*Rating:* Substantial compliance

**2.4.1-5, 2.4.7-8:** *DJJ must ensure that each facility has a (1) program manager(s) responsible for high risk, low risk and re-entry programs, as needed; (2) volunteer services/positive incentives coordinator (duplicate of item 6.4b); (3) vocational specialist; (4) victim services/restitution specialist; (5) training officer; (7) work assignment coordinator and (8) facility administrators for operations programs and business services. 6.3 and 6.4a, c: Prior to the conversion of facilities to a rehabilitative model, DJJ must hire or assign (a) facility administrators of programs and program managers and (c) conflict resolution teams (where appropriate).*

These audit items require certain administrative and management positions at facilities in a generic way. The position titles need not align precisely with existing positions.

**2.4.1:** A program administrator oversees the facility's two core units, its SMP (now BTP), and its SBTP units.<sup>6</sup> A second program administrator, on temporary assignment from Preston, oversees the IBTP. A third program administrator (who is also the facility compliance monitor) oversees the remaining mental health living units.

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<sup>4</sup> Statements of assistant superintendent during site visit, November 12, 2009.

<sup>5</sup> Statements of Tammy McGuire via voice mail, December 8, 2009. The following sentence is also based on this source.

<sup>6</sup> Statements of superintendent during site visit, November 12, 2009; memorandum of superintendent to all NAC staff, August 26, 2009. The remainder of this paragraph is based on these sources.

No program administrator is specifically assigned to re-entry programs, for which reason a partial compliance rating is assigned.

*Rating:* Partial compliance

**2.4.2:** Chaderjian's current incentives and volunteer coordinator has had the job since 2009.<sup>7</sup> She works closely with a Chaderjian staff member that organizes facility sports tournaments and other recreational activities.<sup>8</sup> The incentives program is discussed in greater detail below (see item 8.6.4a).

In her capacity as volunteer coordinator, she is responsible for volunteer screening and background checks, procurement of volunteers' gate clearances, and training on suicide prevention, assessment, and response.<sup>9</sup> She hopes to expand the training component to develop formal orientations and manuals for Chad's volunteers. Facility volunteers include "foster grandparents," religious volunteers, Project IMPACT, and AA/NA volunteers.

*Rating:* Substantial compliance

**2.4.3:** The remedial plan requires each facility's vocational specialist to "provide vocational and career counseling and coordination with parole and re-entry specialists."<sup>10</sup>

DJJ recently updated its transition coordinator duty statement to align with the vocational specialist remedial requirement.<sup>11</sup> The new duty statement is currently in effect and is discussed in OSM's November 20, 2009 central office report.

Chaderjian's has a transition coordinator, and the job is a secondary assignment for her. Two teaching assistants also help prepare youth for their transition to the community by providing youth with resume assistance, necessary documents, community contacts, financial aid applications, vocational testing, and a "Self Advocacy Transition Plan."<sup>12</sup>

The transition coordinator attends a once-a-month "community transition meeting" with Stockton field parole.<sup>13</sup> These meetings focus on strengthening the linkage between Chaderjian and community service providers, and allow the transition coordinator to receive community feedback about ways to improve transition preparation within Chaderjian. The transition coordinator also brings field parole personnel into the facility when travel restrictions permit and maintains phone contact with some, more distant, parole agents.

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<sup>7</sup> Statements of incentives coordinator during site visit, November 12, 2009.

<sup>8</sup> Statements of assistant superintendent during site visit, November 12, 2009.

<sup>9</sup> Statements of Tanya Knight during site visit, November 12, 2009. The remainder of this paragraph is based on this source.

<sup>10</sup> See Safety and Welfare Remedial Plan, p. 22.

<sup>11</sup> Statements of Tammy McGuire during site visit, November 13, 2009; DJJ, Duty Statement and performance Standards: Transition Coordinator/Teacher, signed November 10, 2009.

<sup>12</sup> Statements of principal during site visit, November 12, 2009; statements of teaching assistant during site visit, November 13, 2009; see also DJJ, Transition Status, September 27, 2009.

<sup>13</sup> Statements of principal during teleconference, December 8, 2009. This and the following paragraph are based on this source.

The education remedial plan requires transition planning to begin at least 90 days prior to a youth's release or parole. Various factors make compliance with this requirement difficult, such as new legislation requiring DJJ to parole "maxed out" youth prior to their available confinement time date. Another difficulty with a 90-day time period is that some youths' parole dates move up dramatically and swiftly as a result of program credits and other time cuts. The principal hopes that once certain other duty statements are finalized, communication of internal parole staff with the transition coordinator and her assistants will improve.

Chaderjian offers formal and informal vocational education opportunities, including an auto repair shop, a warehousing program, forklift licensing, opportunities for youth to produce videos, and the outstanding Chad News Team.<sup>14</sup> Paid employment opportunities are discussed in greater detail below (see item 2.4.7).

*Rating:* Substantial compliance

**2.4.4:** The facility has a victim services and restitution specialist. She manages youth restitution payments and victim notification.<sup>15</sup>

She also coordinates community service projects. For example, a group of youth traveled to the state capitol in September to participate in a Day of Remembrance sponsored by the Sacramento Chapter of Parents of Murdered Children.<sup>16</sup> This holiday season the youth will adopt one or more low-income families and purchase gifts for their children. Staff, and possibly youth, will deliver the gifts to the families' homeless shelter. Youth sponsored one family last year, and this year Ms. Henne hopes to partner with O.H. Close on this project. As a part of another yearly project, youth respond to children's letters to Santa. Last year facility staff delivered the letters to youth at a local elementary school, and she hopes youth will be allowed to deliver the letters this year.

For the past few years, some youth accompany the gang information coordinator to a local elementary school for at-risk youth and speak to the children there in a sort of scared-straight program.

The victim services and restitution specialist also coordinates victims' week, Red Ribbon (drug awareness) week, the facility's victim's garden, and two other fundraising gardens.

*Rating:* Substantial compliance

**2.4.5:** Vicky Contreras is the facility's full-time training officer.<sup>17</sup>

*Rating:* Substantial compliance

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<sup>14</sup> See Chad's Latest News, vol. 1, issue 1, July 2009; Chad's Latest News, vol. 1, issue 2, August/September 2009.

<sup>15</sup> Statements of victim services and restitution specialist during site visit. Unless otherwise noted, the remainder of this section is based on this source.

<sup>16</sup> DJJ Today, vol. 1, issue 6, October/November 2009.

<sup>17</sup> Statements of facility compliance monitor during site visit, November 12, 2009.

**2.4.7:** The senior YCC for the facility's SMP/BTP also serves as the work coordinator.<sup>18</sup> He stated that every youth who is cleared for employment has a job. To obtain employment a youth must be on incentive level A or B and needs the approval of his treatment team, JJAC, the captain, and facility leadership. About three or four youth have Level 3 clearances, which allow them to work off-grounds. Currently about 100 youth are working, not including those in vocational classes. About half of these youth hold living unit jobs such as laundry duty, grievance clerk, and hall manager. The other half work facility jobs, including central kitchen work, central laundry, a grounds crew, and a Free Venture program.

Youth in the Free Venture program provided an eloquent and enthusiastic presentation of their work. These youth work for the Merit Corporation, a computer refurbishing and recycling company.<sup>19</sup> They receive, classify, track, and repair computers, printers, and other electronics. The youth earn \$8.00 per hour, of which 20% goes to a savings account for future use. The remainder is evenly split between payments for room and board, a restitution fund, a general victim services fund, and either a trust account or gifts to family. Seven Free Venture youth recently provided \$20,772 to four county victim witness organizations.<sup>20</sup> Currently, six youth work in Chaderjian's Free Venture Program. The program may expand to provide 30 to 40 positions, spread over two shifts.

*Rating:* Substantial compliance

**2.4.8:** A staff member oversees business services matters for both O.H. Close and Chad. Various facility managers share responsibility for operations.

*Rating:* Substantial compliance

**6.3 & 6.4a:** Program administrators are discussed above at item 2.4.1. All living units are overseen by supervising case work specialists or treatment team supervisors.<sup>21</sup>

*Rating:* Substantial compliance

**6.4c:** Two parole agents comprise the conflict resolution team (CRT).<sup>22</sup> A third parole agent will soon join the team.<sup>23</sup>

A CRT member meets with each youth within 10 days of his arrival.<sup>24</sup> Two CRT members excitedly described these initial meetings, in which they try to begin building relationships with the youth and discuss the facility's various opportunities with them.

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<sup>18</sup> The information contained in this paragraph is based on statements of the work coordinator during site visit, November 12, 2009.

<sup>19</sup> Unless otherwise noted, the information contained in this paragraph is based on a presentation by youth and their supervisor on November 13, 2009.

<sup>20</sup> Statements of staff during site visit, November 12, 2009; DJJ Today, vol. 1, issue 6, October/November 2009, p. 1.

<sup>21</sup> Memorandum of superintendent to all NAC staff, August 26, 2009.

<sup>22</sup> Statements of assistant superintendent during site visit, November 12, 2009.

<sup>23</sup> *Id.*; statements of Judi Nahigian and Tammy McGuire during SYCRCC site visit, December 11, 2009.

Mr. Phar and Mr. Miranda also stated that they participate in various programs in order to build relationships with all the youth. They attend IMPACT events, family nights, and other programs. They also stated that they work closely with the treatment teams and provide them extra conflict resolution support when needed.

In anticipation of upcoming transfers of youth from Stark to Chad, the facility recently sent a CRT member and the gang information coordinator to meet with Stark youth and staff.<sup>25</sup>

Violence reduction committee minutes reflect that at least two of the CRT members participate in committee meetings. Mr. Phar and Mr. Miranda provide the assistant superintendent with very detailed monthly reports of their activities and interactions with youth.

Training records were provided for Mr. Phar and Mr. Miranda. Both were trained in the use of force policy, motivational interviewing, effective communication, and crisis intervention and conflict resolution. One was trained in safe crisis management. Training records provided for 2008 did not reflect that the third CRT member was trained in any of these areas.

*Rating: Substantial compliance*

**3.3b:** *DJJ to create violence reduction committees to review and evaluate incidents of violence quarterly and to develop plans to reduce violence and use of force. (This item is also monitored by the safety and welfare expert.)*

Chaderjian's violence reduction committee (VRC) includes members from various disciplines and meets monthly.<sup>26</sup> Youth representatives participate in the meetings. Living units have written violence reduction goals and plans. OSM makes no findings about the substance of these goals or plans. We recommend that facility staff consult the safety and welfare expert about them.

Chaderjian's VRC has begun sharing ideas with O.H. Close and includes O.H. Close's gang information coordinator in some of its meetings.<sup>27</sup> In the past, O.H. Close brought staff from the adult side of CDCR to talk to the facility's adult commitments about what to expect and the effect of their behavior on future CDCR placements.<sup>28</sup> Chaderjian followed O.H. Close's lead and held a similar presentation for its adult commitments.

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<sup>24</sup> The information in this paragraph and the next is based on statements of two CRT members during the site visit, November 12, 2009.

<sup>25</sup> Statements of program administrator during site visit, November 12, 2009.

<sup>26</sup> This paragraph is based on the facility VRC's last two quarterly reports and its minutes from July through October 2009.

<sup>27</sup> Statements of assistant superintendent during site visit, November 12, 2009.

<sup>28</sup> Statements of superintendent during site visit, November 12, 2009; DJJ Today, vol. 1, issue 6, October/November 2009, p. 6. The following sentence is based on the former source.

A recent focus of the VRC has been the upcoming transfers of youth from Stark.<sup>29</sup> Reportedly, staff are interacting a great deal with youth to set a non-violent tone for the transition. According to the gang information coordinator, staff do not want to highlight the youths' gang affiliation and instead will make placement and other decisions on an individual basis.

*Rating:* Defer to expert

**3.4c:** DJJ to train staff at all remaining facilities in crisis management. The latter two items are also monitored by the Safety and Welfare expert.

DJJ has compiled training data for peace officers and for other, though not all, direct care staff.<sup>30</sup> Available training data reflect that 28% of certain direct care staff have been trained at Chaderjian.<sup>31</sup>

*Rating:* Partial compliance

**3.5:** DJJ to develop and use a database to track all incidences of violence and use of force. This item is also monitored by the Safety and Welfare expert. **3.6a:** DJJ to implement a system to record the data elements collected for PbS Safety Outcome Measures 2, 3, 4, 11, and 12 for every day of the year. Safety Outcome Measure 2 refers to injuries to youths per 100 person-days. Measure 3 refers to injuries to staff per 100 staff-days. Measure 4 refers to injuries to youths by other youths per 100 person-days. Measure 11 refers to assaults on youth per 100 person-days. Measure 12 refers to assaults on staff per 100 person-days. This item is also monitored by the safety and welfare expert. **3.6b:** DJJ to produce quarterly reports on selected PbS data elements.

**3.5, 3.6a:** Chaderjian's PbS coordinator had been on leave for three weeks prior to our site visit.<sup>32</sup> She was unavailable for interview during OSM's site visit. O.H. Close's PbS coordinator is collecting violence data.

The facility's use of force coordinator stated that she uses daily operations reports as her basic source for use of force data.<sup>33</sup> If necessary, she refers to DDMS records, use of force reports, serious incident reports, and the urgent/emergent log.

Violence Reduction Committee reports include data on the number of potentially violent incidents resolved without the use of force. The use of force coordinator explained that these

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<sup>29</sup> Statements of use of force coordinator and gang information coordinator during site visit, November 12, 2009. The following sentence is also based on these sources. The facility currently expects six southern youth to join its intensive treatment program (ITP) unit and 20 to join its three SBTP units; another 10 youth are expected to come to Chaderjian's core units. Statements of Erin Brock during site visit, November 12, 2009.

<sup>30</sup> See e-mail of DJJ staff to Aubra Fletcher and Doug Ugarkovich, November 5, 2009 (attaching training statistics for three facilities). The Safe Crisis Management training statistics do not, for example, include any medical or mental health staff.

<sup>31</sup> See *id.*

<sup>32</sup> This paragraph is based on statements of the superintendent during the site visit, November 12, 2009.

<sup>33</sup> This paragraph is based on statements of the use of force coordinator during the site visit, November 12, 2009.

figures reflect the number of times security staff respond to a call from living unit staff, but do not need to use force. Central office compliance staff indicated this was not an accurate measure of how often staff de-escalate conflicts. Living unit staff resolve many incidents without use of force and without calling security.

The facility and the responsible staff members are doing a very good job in the absence of sufficient central office guidance and management information systems that automate data collection. We will give substantial compliance ratings to facilities when central office provides a standard methodology for data collection that appears adequate to produce accurate data, and the facility complies with the methodology.

*Rating: Partial compliance*

**3.8c:** *DJJ to provide training in strategies and procedures to safely integrate gangs and racial groups. The safety and welfare expert monitors the quality of the training.*

OSM defers to the safety and welfare expert regarding this requirement, at his request.

*Rating: Not rated*

**3.9a:** *DJJ to open sufficient Behavioral Treatment Programs (BTPs), in accordance with remedial plan provisions.*

OSM defers to the safety and welfare expert regarding this requirement, at his request.

*Rating provided at the central office level only.*

**4.1b, 6.7:** *DJJ to provide training to all direct care staff in certain areas. New or reassigned staff are to be trained within ninety days of assignment to a living unit. All supervisory and management staff are required to complete the training as required by DJJ policy. Training areas: 6.7a: DJJ IBTM. 4.1b: Risk/needs tool. This item is a duplicate of item 6.7b, which is monitored by the safety and welfare expert. 6.7c: Treatment plan development. 6.7d: Motivational interviewing (per interim training schedule). 6.7e: Normative culture (per interim training schedule). 6.7f: Interactive journaling (per interim training schedule). 6.7g: Other key treatment components.*

**6.7a:** No training has been provided, since the IBTM has not yet been developed.

*Rating: Non-compliance*

**4.1b, 6.7c:** DJJ hired Orbis Partners to provide this training.<sup>34</sup> The IBTM experts have recommended the discontinuation of some of the Orbis training.<sup>35</sup> They plan to work with Orbis Partners and DJJ to examine the usefulness of the CA-YASI and related training.<sup>36</sup>

<sup>34</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 29.

Training on risk/needs assessment and case management at Chaderjian has focused on case managers, casework specialists, and parole agents. Data compiled by central office indicates that 71% of these staff have attended Orbis' Effective Casework 1 (risk/needs assessment), while 82% have received training on Orbis' Effective Casework 2 (case management).

*Rating:* Partial compliance (both items)

**6.7d:** As previously reported, DJJ contracted with the University of California San Diego to provide this training.<sup>37</sup> Less than half of Chaderjian's direct care staff have received motivational interviewing training, as of October 29, 2009.<sup>38</sup>

OSM rates this item based solely on the numbers of trained staff; this rating is not a reflection of the quality or efficacy of the training, and the mental health experts have not to date observed or evaluated MI training or implementation.

*Rating:* Partial compliance

**6.7e:** DJJ pursued a contract for normative peer culture training in 2009, resulting in a contract that Dr. Krisberg and the other IBTM experts now advise DJJ to cancel.<sup>39</sup> DJJ has agreed to do so.<sup>40</sup> In light of Dr. Krisberg's recent recommendation that the normative culture requirement be removed from the remedial plan, OSM declines to rate this item at present.<sup>41</sup>

*Rating:* Not rated at this time

**6.7f:** Interactive Journaling training has not begun at Chaderjian.

*Rating:* Non-compliance

**6.7g:** DJJ continues to train staff in safe crisis management, crisis intervention and conflict resolution, and aggression replacement therapy. Training is not complete, and DJJ may add additional trainings once the IBTM description is finalized.

A memo from central office lists suicide prevention, crisis intervention and conflict resolution, and group facilitation, along with motivational interviewing and safe crisis management, as courses that are that are "being provided to all direct care staff" to "provide staff with a common understanding and the skills necessary to create a safe environment."<sup>42</sup> Although the memo does

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<sup>35</sup> Statements of Barry Krisberg and Eric Trupin during teleconference, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching document entitled "Recommendations").

<sup>36</sup> See e-mail of Eric Trupin to Michael Brady, et al., November 4, 2009.

<sup>37</sup> See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 29.

<sup>38</sup> "Reform Related Training Statistics," October 29, 2009.

<sup>39</sup> See statements of Barry Krisberg and Eric Trupin during teleconference, October 26, 2009; e-mail of Eric Trupin to Michael Brady, et al., October 22, 2009 (attaching document entitled "Recommendations").

<sup>40</sup> See statements DJJ staff during teleconference, October 26, 2009.

<sup>41</sup> See statements of Barry Krisberg during teleconference, October 26, 2009.

<sup>42</sup> "Reform Related Training Statistics," October 29, 2009.

not explicitly define “direct care staff,” it indicates that between 335 and 344 staff at Chaderjian were to be trained in motivational interviewing and safe crisis management.

Data compiled by central office indicates that Chaderjian currently retains:

- Ninety-eight staff (approximately 29% of direct care staff) that have attended Understanding and Preventing Suicide training.
- Sixty-five staff (approximately 19% of direct care staff) that have attended Crisis Intervention and Conflict Resolution training, including four instructors
- Twenty-six staff (approximately 8% of direct care staff) that have attended Group Facilitation training, including four instructors.

In addition, Chaderjian retains:

- Thirty-seven staff, including two instructors, that have attended a Cognitive-Behavioral Skills Primer.
- Twenty-two staff that have attended Aggression Replacement Training, including 18 managers and four group facilitators.
- Three CounterPoint facilitators.

*Rating:* Partial compliance

**6.1a-c:** *DJJ is required to convert Chaderjian to a treatment facility. Also monitored by the safety and welfare and mental health experts.*

OSM defers to the safety and welfare and mental health experts regarding compliance with these requirements.

*Rating:* Defer to expert

**8.1.1:** *DJJ to add all needed program space to O.H. Close, Preston, Ventura, Stark, and SYCRCC, such that no regular programs must be canceled due to lack of space. As a part of this requirement, sufficient classrooms must be located in or near BTPs in order to maintain a ratio of one teacher for every six students.*

There are eight students and one teacher at the BTP.<sup>43</sup> Construction of one BTP classroom has been completed. Classroom space is also available in two of the ten modulars that opened at Chaderjian in 2009.<sup>44</sup> These resources have been sufficient to meet the needs of youth on the BTP.<sup>45</sup>

<sup>43</sup> Statements of principal during teleconference, December 8, 2009; attachments to letter of Van Kamberian to the special master, January 11, 2010 (commenting on an earlier draft of this report). The next sentence is also based on these sources.

<sup>44</sup> Eight modular buildings opened at Chaderjian in May 2009, and two additional modulars opened some time later. E-mail of facility compliance monitor to Aubra Fletcher, November 30, 2009. <sup>44</sup> Some of the modulars are

*This requirement is not rated at Chaderjian, per the Standards and Criteria.*

**8.1.1:** DJJ to add all needed office space to the same five facilities, so that all living unit staff requiring offices have space in or adjacent to the living unit.

See above. All new modular offices are wired for computer access. Because of limited phone line capacity throughout the facility, some modulars do not have working landlines. Staff without office landlines have been approved to use cellular phones in the facility.<sup>46</sup>

*This requirement is not rated at Chaderjian, per the Standards and Criteria.*

**8.3.1:** Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. This item is also monitored by the mental health experts. **8.3.2a:** DJJ is required to facilitate family phone contact within 24 hours of youth arrival. **8.3.2b:** DJJ is required to facilitate ongoing family phone contact. **8.3.3:** DJJ must arrange for family visiting days at least four times per year. These items are monitored solely by the mental health experts who have requested that the OSM gather information for them.

**8.3.1:** Central office developed Community Assessment Reports (CARs) for statewide use beginning July 1, 2009.<sup>47</sup> Field parole agents complete the CARs and provide them to the facility sometime after the youth's arrival at the facility.<sup>48</sup> The intake coordinator reviews all incoming youths' files and stated that parole has consistently provided community assessment reports for recently arrived youth.<sup>49</sup>

*Rating provided at the central office level only.*

**8.3.2b:** The facility compliance monitor has been conducting quarterly reviews of staff compliance with recent legislation related to youth phone access. He stated that some confusion among staff remains about whether and how to document phone call opportunities given to youth.

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designated for education use, mental health program use and "custody use." *Id.* Some of the space is used for offices, and some is used for programs. Statements of facility compliance monitor during site visit, November 12, 2009.

<sup>45</sup> Tom O'Rourke and Bob Gordon, CYA Remedial Plan Compliance Report: N.A. Chaderjian High School, November 16-17, 2009, p. 18 (noting that "the facility meets all instructional space requirements").

<sup>46</sup> Statements of superintendent during site visit, November 12, 2009.

<sup>47</sup> Statements of program administrator during teleconference, October 28, 2009; statements of field parole staff during site visit, November 2, 2009.

<sup>48</sup> Statements of field parole staff during site visit, November 2, 2009.

<sup>49</sup> Statements of intake coordinator during site visit, November 2, 2009.

Chaderjian provided phone records for 30 randomly chosen<sup>50</sup> youth, for the period between August 1, 2009 and October 31, 2009. The phone records show that most youth receive at least four completed phone calls per month, many of them direct calls.<sup>51</sup> Out of nine youth asked about phone contact with family, eight said they were able to call home once a week or more.

*Rating:* Substantial compliance

**8.3.3:** Thus far in 2009, Chaderjian has held five facility-wide family visiting events, in addition to regular weekend family visiting.<sup>52</sup> Only youth with visitors may attend.<sup>53</sup> As a result, a relatively small proportion of youth attend these events. On average, 21 youth attended each of the first four family events.<sup>54</sup> Only one of seven youth asked about family visiting events had been to one.

A June 2009 visiting event included an informational session about DDMS and program service day changes.<sup>55</sup> Staff also showed a film created by youth during victim awareness week, entitled “Shoes.” A special Father’s Day event for youth with children was also held in June. Youth chose children’s books to read to their children during the “Daddy and Me Reading Day” event.

In September 2009, the facility held a Family Information Day.<sup>56</sup> Staff were available to families in informational booths representing the foster grandparents program, food services, medical services, mental health, the family council, the youth with disabilities program, Project IMPACT, parole services, educational programs, and religious volunteers.<sup>57</sup> Staff provided a tour of a living unit, the victims’ garden, the school, gym, and canteen.<sup>58</sup>

All living units will also participate in holiday family events on November 18 and December 21.<sup>59</sup> Some living units have also held a mid-week family visiting night this year.<sup>60</sup>

*Rating:* Partial compliance

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<sup>50</sup> Statements of facility compliance monitor and staff during site visit, November 12-13, 2009.

<sup>51</sup> Out of the 90 „youth-months“ represented, 85 (94%) showed four or more calls made or attempted.

<sup>52</sup> N.A. Chaderjian, Youth Incentive Activity Reports, January-October 2009.

<sup>53</sup> Statements of various interviewed youth during site visit, November 12-13, 2009.

<sup>54</sup> N.A. Chaderjian, Youth Incentive Activity Reports, January-October 2009. Documentation does not indicate how many youth attended the fifth family event, which occurred on October 31<sup>st</sup>.

<sup>55</sup> DJJ, Youth Incentive News, vol. 1, issue 5, July 2009, p. 5. The remainder of this paragraph is based on this source.

<sup>56</sup> DJJ Today, vol. 1, issue 6, October/November 2009, p. 8.

<sup>57</sup> *Id.*; statements of superintendent during site visit, November 12, 2009.

<sup>58</sup> DJJ Today, vol. 1, issue 6, October/November 2009, p. 8.

<sup>59</sup> DJJ, N.A. Chaderjian 2009 Visitation Schedule, undated (provided November 13, 2009).

<sup>60</sup> *Id.*; N.A. Chaderjian, Youth Incentive Activity Reports, January-October 2009.

**8.4.2a:** *Disciplinary fact-finding hearings to be held within fourteen days, except as provided for in policy (e.g., youth out to court).* **8.4.2b:** *Disciplinary disposition hearings to be held within seven days, except as provided for in policy.*

**8.4.2a:** The acting DDMS Coordinator stated that she tracks compliance with DDMS timelines in WIN, with the help of an office technician. When timelines are missed, she sends staff reminders, and in cases of extreme delay due to staff negligence, a missed deadline results in dismissal of the case.<sup>61</sup> Reasons for missed deadlines include changing rules regarding mental health clinician involvement, furlough days, and high numbers of DDMS allegations. Facility leadership review compliance with DDMS timelines at weekly management meetings.<sup>62</sup>

The facility provided WIN data on fact-finding hearings from April to September 2009.<sup>63</sup> During this time, 182 of 196 (93%) of hearings were held within 14 days.

*Rating:* Substantial compliance

**8.4.2b:** See above. The facility provided data on disposition hearings from April to September 2009.<sup>64</sup> During this time, 265 of 394 (67%) of conferences were held within seven days.

*Rating:* Partial compliance

**8.4.6b:** *Eligibility to restore time added is to be reviewed at youth case conferences.*

Youth no longer must await annual review for their time restoration to become final.<sup>65</sup> The Juvenile Justice Administrative Committee (JJAC) meets three to four times per month and finalizes treatment team recommendations to restore time. The treatment team's recommendations are generally approved.

The facility provided records from 43 case conferences held throughout 2009.<sup>66</sup> Staff are documenting their review of restoration eligibility and discussions about eligibility with the youth. Three interviewed youth reported discussing time cuts at case conferences. A fourth youth had received a time restoration, but was not sure if he had to wait for his annual review to receive it.

*Rating:* Substantial compliance

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<sup>61</sup> Statements of acting DDMS coordinator during site visit, November 12, 2009. The following sentence is also based on this source.

<sup>62</sup> Statements of superintendent during site visit, November 12, 2009.

<sup>63</sup> N.A. Chaderjian Youth Correctional Facility, DDMS Disposition Conferences, Fact Finding Hearing Timeframes and DDMS PBD Extensions for Youth Receiving Mental Health Services: WIN Documentation [of] Compliance by Percentage, April –September 2009, p. 1.

<sup>64</sup> See *id.*

<sup>65</sup> Statements of facility compliance monitor during site visit, November 12, 2009. The remainder of this paragraph is based on this source.

<sup>66</sup> Staff provided a total of 50 records, but seven of these were dated in the future and thus disregarded by the monitors.

**8.6.3a:** DJJ's earn-back policy is to be revised to allow restoration of added time after six months. **8.6.3b:** DJJ policy is to be revised to require that restored months are rounded up rather than down.

**8.6.3a:** Based on a review of JJAC records, case conference records, and grievance trend reports, Chaderjian is compliant with this requirement.

*Rating provided at the central office level only.*

**8.6.3b:** Based on a review of JJAC records, case conference records, and grievance trend reports, Chaderjian is compliant with this requirement.

*Rating:* Substantial compliance

**8.5.1:** All facilities will make grievance forms available to youth without assistance in all units. **8.5.2:** All facilities will install a lock box for grievances in all living units. **8.5.3:** In each facility, the grievance clerk will ensure an adequate supply of forms and will educate and assist grievants in the process.

**8.5.1:** The monitors observed three day rooms (Kern, Sacramento, and Smith) and found that grievance forms are generally available to youth without assistance on all three units.

*Rating:* Substantial compliance

**8.5.2:** Three day rooms toured by the monitors were equipped with grievance lock boxes. The facility has two full-time grievance coordinators. Only they have keys to the lock boxes, though if both are absent, a designated "back-up" person can obtain a key.<sup>67</sup>

*Rating:* Substantial compliance

**8.5.3:** All living units currently employ grievance clerks.<sup>68</sup> Each clerk receives his duty statement, and the grievance coordinators hold monthly clerk meetings.<sup>69</sup> Clerks in restricted housing cannot attend, but the grievance coordinators meet with them regularly to gain their input and report on clerk meetings.<sup>70</sup> All eight youth interviewed about the grievance system knew who their grievance clerk was. One stated that his previous clerk knew DJJ policies well. Two of the eight youth could cite a positive experience with the grievance system.<sup>71</sup> Four of the eight youth had negative views about the grievance system.<sup>72</sup>

<sup>67</sup> Statements of grievance coordinator during site visit, November 12, 2009.

<sup>68</sup> Statements of grievance coordinators during site visit, November 12, 2009. The facility also provided signed grievance clerk duty statements for all living units.

<sup>69</sup> Statements of grievance coordinator during site visit, November 12, 2009.

<sup>70</sup> Statements of grievance coordinator during site visit, November 12, 2009.

<sup>71</sup> In early 2009, the youth filed a grievance stating that staff were putting him and others in their rooms too often. Staff changed this practice for a few days. The youth feels the grievance system "works but not totally." A second youth had resolved an issue about time credits through the grievance system.

One of the four that cited negative experiences was a grievance clerk, and felt he had been penalized for fulfilling his duties in that job. He had recently helped a group of youth write an emergency grievance about sexual harassment by a particular staff person on the unit. The youths asked to talk to the duty lieutenant. The duty lieutenant did not respond. The youths refused to go to their rooms to sleep until they saw him. Security arrived, spoke to the youths, and called the duty lieutenant. The grievance clerk received a Level 3 DDMS write-up for participating in the “disturbance.” He had been a Level A until that time, which was unusual for his living unit.

*Rating: Substantial compliance*

**8.5.4:** *A notice of receipt of grievance or allegation of misconduct will be provided to all grievants. 8.5.5a:* *Each facility grievance coordinator will prepare monthly reports.*

**8.5.4:** The grievance coordinators provide youth with a “receipt” in the form of a scanned copy of the grievance form with a case number written in the top right-hand corner.<sup>73</sup>

*Rating: Substantial compliance*

**8.5.5a:** The grievance coordinators provide monthly reports to the superintendent and to central office.<sup>74</sup>

*Rating: Substantial compliance*

**8.6.4a:** *DJJ is to simplify the description of the Ward Incentive Program (WIP) and create and distribute posters, flyers, and handouts to promote understanding and participation in the Program.*

DJJ continues to revise its “pyramid” flyer depicting the incentive system and its requirements.<sup>75</sup> The incentives coordinator has asked staff to post the pyramid in each living unit’s day room.<sup>76</sup> DJJ has also prepared a new information sheet for youth.<sup>77</sup>

Youth on the “Chad News Team” promote youth participation in the incentive program through their newsletter *Chad’s Latest News*.<sup>78</sup> The newsletter features staff and youth interviews and

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<sup>72</sup> One youth said that writing grievances makes you a staff target, citing the experience of a friend who was picked on by staff. A second youth cited examples of grievances about food and blankets that were refused. A third youth, although he had resolved an issue about time credits by writing a grievance, said he had seen staff throw away emergency grievances, and generally felt the system was arbitrary.

<sup>73</sup> Statements of grievance coordinator during site visit, November 12, 2009.

<sup>74</sup> Statements of various staff during site visit, November 12, 2009; *see also* statements of Maria Cisneros during central office site visit, November 3, 2009. OSM has seen examples of these reports.

<sup>75</sup> Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 45.

<sup>76</sup> Statements of staff during site visit, November, 12, 2009.

<sup>77</sup> *Id.*; *see also* DJJ, “Youth Incentive Program,” August 2009.

reports on current programs and events within the facility (and in the professional sports world). The Chad News Team provided extensive coverage of the facility's recent summer Olympics tournament and has also featured facility work programs, community service projects, and individual youth accomplishments.<sup>79</sup>

Chaderjian youth participated in a statewide contest to design a flyer promoting certain new incentives available to A-Level youth.<sup>80</sup> Two Chaderjian youth were among the contest's four winners, and their flyers will be posted on each living unit. Each winner won \$25 to use for canteen purchases.

The incentives coordinator provides training to staff on a regular basis, to increase their understanding of the incentive system.<sup>81</sup> Staff also have access to a manual devoted to the incentive system and automated tracking. The incentives coordinator also stated that she spends time on the living units and makes herself available to staff with questions about the program.

The incentive coordinator sends staff a report each month listing youth who are A-level eligible. Youth become eligible once they attain 80 "good program days" out of a 90-day period. Then, to become A Level, youth must submit an application packet, including a personal statement and a victim letter. Youth then attend a JJAC hearing, and JJAC decides whether to send the application to Sacramento for approval.

Since OSM's previous safety and welfare audit of Chaderjian in October 2008, the facility has opened an incentive room. The room recently moved to the vacant Owens living unit, where the superintendent expects it to remain indefinitely. The room is equipped with a pool table, foosball, video games, karaoke equipment, and board games. The incentive coordinator expects to receive futons in the near future.

The incentive coordinator, with assistance from other staff, organizes a variety of activities on a regular basis.<sup>82</sup> Activities this year have included an A-Level awards ceremony, A-Level birthday celebrations, and a "Music & Spoken Word Night," during which youth shared their poetry and songs. A-Level youth will enjoy a "Luau Celebration" in late November.<sup>83</sup> In January 2010, the facility will honor and reward its five youth who have been on A-Level for one year or more.<sup>84</sup> The facility also holds movie nights for A Level youth and the non-A-Level friend of their choice.<sup>85</sup> Chad held a summer youth Olympics from July 20 to August 3, 2009.<sup>86</sup> Living units competed against each other in thirteen events.

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<sup>78</sup> DJJ also issues a quarterly *Youth Incentive News* newsletter to staff and youth throughout the state. Staff and youth contribute to the newsletter. Articles feature facility events, incentive program changes, youth achievements, and schedules of upcoming events.

<sup>79</sup> See Chad's Latest News, vol. 1, issue 1, July 2009; Chad's Latest News, vol. 1, issue 2, August/September 2009.

<sup>80</sup> Statements of incentives coordinator during site visit, November 12, 2009; DJJ, Youth Incentive News, vol. 1, issue 1, July 2009, p. 2. The remainder of this paragraph is based on these sources.

<sup>81</sup> See statements of incentives coordinator during site visit, November 12, 2009. This and the following two paragraphs are based on this source.

<sup>82</sup> DJJ, Youth Incentive News, vol. 1, issue 4, April 2009, p. 9. The following sentence is also based on this source.

<sup>83</sup> DJJ Today, vol. 1, issue 6, October/November 2009, p. 10.

<sup>84</sup> Statements of incentives coordinator during site visit, November 12, 2009.

<sup>85</sup> Statements of incentives coordinator during site visit, November 13, 2009.

<sup>86</sup> DJJ, Youth Incentive News, vol. 1, issue 5, July 2009. The remainder of this paragraph is based on this source.

Ten youth were interviewed about the incentive system. They generally knew their incentive level and understood the relationship between the incentive and DDMS systems. They tended to describe greater concern with program credits than with the activities on the incentive unit.<sup>87</sup> Three youth described difficulties in obtaining approval of incentive level changes. Three youth said they did not aspire to reach a higher level because it gave staff added power over them.

*Rating provided at the central office level only.*

**8.6.4b:** DJJ to revise its policy to allow youth full program credit if youth not responsible for non-participation in assigned/required programs.

In November 2009, DJJ provided a list of all youth who did not earn the maximum possible program credits in case conferences held between September 14 and October 28, 2009.<sup>88</sup> Only two Chaderjian youth did not initially receive the maximum program credits during that time: one declined to accept the credits, and the other was given full credits after central office found that the justification for withholding them was questionable.<sup>89</sup>

*Rating: Substantial compliance*

**8.7.3:** Needed law library materials must be purchased annually. **8.7.1b:** Education Services is to track law library needs and conduct annual audits indicating that materials are up-to-date or ordered by June 30, 2010. **8.7.5:** DJJ is to replace print libraries with electronic or internet materials by June 30, 2010.

**8.7.3:** The librarian was not available on the dates of our site visit to demonstrate the new electronic legal research system. Legal self-help resources were largely out of date.

*Rating provided at the central office level only.*

**8.7.5:** The facility has received its WestLaw software, and the library's one public computer is equipped for electronic legal research. Because of the librarian's absence, the monitors were unable to observe the system's functionality but did view the software in use at a later site visit to SYCRCC. All sites possess the same software.

*Rating: Substantial compliance*

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<sup>87</sup> This may be because only one of the interviewed youth was on A Level.

<sup>88</sup> See DJJ, "Justification for Withholding Youth Program Credits: September 14 – October 28, 2009," October 29, 2009. Unless otherwise noted, the remainder of this paragraph is based on this source.

<sup>89</sup> See letter of Van Kamberian to the special master, January 11, 2010 and attachments.

**8.8.2b-d:** *The religious coordinator is to monitor facilities for (b) provision of services/programs for various faiths, (c) youth access to services/programs/materials, and (d) documentation of services/programs in an automated tracking system.*

**8.8.2b:** Chaderjian employs Protestant, Catholic, and Muslim chaplains.<sup>90</sup> It has a vacancy for a Native American chaplain. Volunteers serve its Jehovah's Witnesses. Staff have tried to contact volunteers to provide services to wiccans. A youth who identified as an Odinist – a type of pagan – said the facility would not recognize his religion or provide him with any materials.

*Rating provided at the central office level only.*

**8.8.2c:** The gang information coordinator stated that youth are not prevented from attending religious services and programs based on gang affiliation alone; restriction from group religious activities is based on behavior.<sup>91</sup> The Protestant chaplain stated that all youth can attend services off their living unit, with the exception of youth at Kern (until recently an SMP, now a BTP). Youth at Kern cannot attend services off the unit, and instead ask chaplains to visit the unit. A youth interviewed at Kern confirmed that this was the case.

*Rating provided at the central office level only.*

**8.8.2d:** Each chaplain sends a weekly schedule of services provided to the religious coordinator, which includes all services other than one-on-one consultation.<sup>92</sup> The religious coordinator checks it against WIN schedule of services to be provided.

*Rating provided at the central office level only*

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<sup>90</sup> This paragraph is based on statements of the Protestant chaplain during an interview on November 16, 2009.

<sup>91</sup> Statements of gang information coordinator during site visit, November 12, 2009.

<sup>92</sup> This paragraph is based on statements of the Protestant chaplain, November 16, 2009.

**Compliance with Mental Health Requirements: Ventura Site Visit Report**  
**January 28, 2010**  
**Donna Brorby and Aubra Fletcher**

The Mental Health Remedial Plan assigns monitoring of some requirements to the office of the special master (OSM). Donna Brorby and Aubra Fletcher visited Ventura on November 16-17, 2009 to audit compliance with these requirements. This report is based on ten youth interviews, staff interviews, and multiple “proofs of practice” provided by DJJ.<sup>1</sup> The parties had the opportunity to provide comments on a draft of this report, and this final version reflects consideration of comments received.

**5.5:** Appoint MH administrator at each facility w/ residential MH program [Chad, OH Close, Stark, SYCRCC, and Ventura]. Positions filled/assigned.

The acting assistant superintendent continues to work as the mental health administrator.<sup>2</sup> The MH administrator position remains her secondary assignment because the facility cannot fill it until it is actually vacant. Because she is still “acting” assistant superintendent, her mental health administrator position is not technically vacant. She remains in “acting” status because acting superintendent David Finley still technically occupies the assistant superintendent position. Sacramento has only recently begun vetting Mr. Finley for the permanent superintendent position.

*Rating:* Substantial compliance

**5.11:** Outpatient MH staffing consistent with MH Remedial Plan. *Partially superseded by July 31, 2009 Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules.*

The remedial plan staffing requirements have changed since OSM’s May 2009 informal report for Ventura.<sup>3</sup>

The Court’s July 2009 order requires one senior psychologist,<sup>4</sup> and the facility employs two senior psychologists. One oversees the residential mental health units, and the other oversees intake and core units.<sup>5</sup>

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<sup>1</sup> We interviewed select non-clinical staff, the facility’s chief psychologist, its two senior psychologists, and two staff psychologists. We selected ten youth from the 97 names on a November 16, 2009 mental health caseload list, by selecting every tenth name on the list. We asked to interview all ten selected youth, but some youth declined to participate. We randomly selected additional youth and interviewed a total of ten youth. The six interviewed young women represented all four female living units, and the four interviewed young men represented three of Ventura’s male living units.

<sup>2</sup> Statements of assistant superintendent during site visit, November 16, 2009. The remainder of this paragraph is based on this source.

<sup>3</sup> See Order, July 31, 2009.

<sup>4</sup> See *id.*, Exhibit A.

<sup>5</sup> Statements of chief psychologist during site visit, November 16, 2009.

The new staffing requirements mandate a single psychiatrist for the entire facility.<sup>6</sup> The facility currently employs two psychiatrists, one of whom was expected to retire at the end of 2009.<sup>7</sup> The facility's chief psychologist believes the reduction to one psychiatrist to be ill-advised.<sup>8</sup> Currently, psychiatrists conduct individual therapy and participate in weekly inter-disciplinary team meetings for the youth on residential MH units. The reduction to one psychiatrist will limit the psychiatrist's role to medication management only, and the sole psychiatrist may not have sufficient time to attend to all youth adequately. Also, the psychiatrist must remain on call at all times, which will be costly.

Other staffing requirements follow:<sup>9</sup>

Living unit	Required psychologist coverage	Required psych tech coverage
Alborado (female ITP)	1	1
Alta Vista (male low-risk core)	0.5	0
Buenaventura (female SCP)	1	1
CDC (male SCP)	1	1
CLC (male high-risk core)	0.5	0
Montecito (male low-risk core)	0.5	0
Mira Loma (female substance abuse treatment)	0.5	0
Mira Mar (female core)	0.5	0

Ventura is compliant with these staffing requirements. Ventura also has 4.5 psychology interns. The facility will lose this reportedly valuable and economical resource with DJJ's implementation of its new staffing model in about February 2010.

An unchanged remedial plan provision requires Ventura to have one mental health office technician per four clinicians.<sup>10</sup> Ventura employs only one office technician for its mental health department.<sup>11</sup> Under the new business rules, it will have nine clinicians.

*Rating:* Partial compliance

**5.14a:** Reduce ITPs and SCPs to no more than 30; **5.15a:** Reduce ITPs and SCPs to no more than 24.

**5.14a:** The ITP and SCP populations remain below 30.<sup>12</sup>

<sup>6</sup> See Order, July 31, 2009, Exhibit A.

<sup>7</sup> Statements of chief psychologist during site visit, November 17, 2009.

<sup>8</sup> See statements of chief psychologist during site visit, November 16, 2009. The remainder of this paragraph is based on this source.

<sup>9</sup> See Order, July 31, 2009, Exhibit A.

<sup>10</sup> See Mental Health Remedial Plan, p. 23, Standards and Criteria, item 5.11.

<sup>11</sup> Statements of senior psychologist during site visit, November 16, 2009.

<sup>12</sup> See Ventura Youth Correctional Facility, Daily Population Report, November 8, 2009 (female ITP at 16 youth; female SCP at 16 youth; male SCP at 23 youth); Administrative Summary for: VYCF, November 15, 2009 (female ITP at 18 youth; female SCP at 17 youth; male SCP at 23 youth).

*Rating:* Substantial compliance

**5.15a:** The ITP and SCP populations remain below 24.<sup>13</sup>

*Rating:* Substantial compliance

**5.16b:** Reduce size of MH units to level determined in conjunction with Consent Decree MH and S&W experts. Units reduced to specified population levels.

The experts have not specified a population level against which we can monitor. The safety and welfare expert states that he defers to the mental health experts.<sup>14</sup> The mental health experts inform us that they will evaluate the issue in 2010, after the IBTM is described and DBT is introduced.

*Rating:* Not rated

**6.3:** If feasible, implement evidence-based model for family engagement. Appropriate family engagement model implemented (if feasible); **6.5:** If feasible, implement parent partner program. Appropriate parent partner program implemented (if feasible); **6.8:** If feasible, develop plan to continue Family Integrated Transitions and Family Justice Model.

#### *Family Justice Model and DJJ's family engagement charter process*

Central office is drafting a project charter that addresses family engagement.<sup>15</sup> Also, interdisciplinary work groups at all facilities are continuing DJJ's prior work with Family Justice to improve family involvement.<sup>16</sup> The facilities have held youth and staff focus groups to develop youth and family surveys. DJJ has provided written materials describing Family Justice-related activities and plans, as well as a copy of the Family Engagement Initiative project charter. OSM has forwarded this information to the mental health experts.

Heading Ventura's family involvement efforts is a social worker who previously worked for Child Protective Services and who has a keen appreciation for the value of what she terms "family reunification."<sup>17</sup> She has proposed various initiatives to facility administration and to the central office family engagement charter group. Her proposals include the "Ventura Family Phone Tree" and the "Youth Passport."

<sup>13</sup> See Ventura Youth Correctional Facility, Daily Population Report, November 8, 2009; Administrative Summary for: VYCF, November 15, 2009.

<sup>14</sup> Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 6. The following sentence is also based on this source.

<sup>15</sup> Statements of senior supervising psychiatrist during site visit, October 26, 2009.

<sup>16</sup> Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 8. The following sentence is also based on this source.

<sup>17</sup> This and the following three paragraphs are based on statements of case work specialist during site visit, November 17, 2009.

The Family Phone Tree is an automated phone tree system with the capacity to send recorded messages to up to 99 subgroups (e.g., female youth families, male youth families, Spanish-speaking groups). The idea is to provide families with notice of events and other information. Facility administration has approved this measure.

The Youth Passport is a folder for the youth containing documents s/he needs on return to the community, such as a driver's license, a resume, certificates of achievement, etc. The youth will have access to it when s/he needs it, such as for parole hearings and when s/he leaves. Facility management has also approved this initiative.

Ventura also hopes to begin a foster grandparent program, according to the assistant superintendent. The young women's Kiwanis chapter will host a senior citizen lunch in December and hopes to find foster grandparent volunteers at that event.<sup>18</sup>

#### *Family Council events, community involvement, and family visiting*

Ventura's Family Council continues to be very active.<sup>19</sup> Ventura and its Family Council organized a family reunification event in April 2009 in which 250 family members toured the facility and met with staff from various disciplines.<sup>20</sup> Community members helped some families with transportation and lodging. Following the main event, some A-Level youth enjoyed a movie with their families.

The Family Council hosted a youth-family movie night in late July and another reunification event in mid-August.<sup>21</sup> A Thanksgiving meal for youth and families was scheduled for the Saturday following our November visit, and the facility is also planning a winter holiday event.<sup>22</sup> Only youth with visitors may attend family visiting events.<sup>23</sup> The facility's chaplains hold quarterly events for youth who have not received family visits within a certain period of time.<sup>24</sup>

Community members continue to help families visit their youth by providing gas cards and lodging.<sup>25</sup> The community also provides some of the books for Ventura's "storybook program," in which youth with children record themselves reading a children's book, and send the recording and book to the child.<sup>26</sup>

Family visiting events are also discussed at item S&W 8.3.3, below.

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<sup>18</sup> Statements of assistant superintendent during site visit, November 16, 2009.

<sup>19</sup> See statements of assistant superintendent during site visit, November 17, 2009.

<sup>20</sup> DJJ Today, vol. 1, issue 1, June 2009, p. 3. The remainder of this paragraph is based on this source.

<sup>21</sup> DJJ Today, vol. 1, issue 3, July 2009, p. 6.

<sup>22</sup> Statements of various staff during site visit, November 16-17, 2009.

<sup>23</sup> Statements of superintendent and various interviewed youth during site visit, November 16-17, 2009.

<sup>24</sup> Statements of assistant superintendent during site visit, November 17, 2009.

<sup>25</sup> *Id.*; see also OSM, Informal Report on OSM Site Visit to Ventura, February 2009, pp. 49-50.

<sup>26</sup> Statements of assistant superintendent during site visit, November 17, 2009.

### *Staff-family contact*

A case work specialist commonly contacts families when drafting the youth's intake "clinical summary" to give the family contact and other information, and to answer their questions.<sup>27</sup> A supervising case work specialist stated that most staff-family contact initiated by case work specialists, case managers, and parole agents occurs during visiting days and when facilitating youths' regular calls home.

Clinicians do not contact youth families at the time of intake.<sup>28</sup> Of the two interviewed staff psychologists, one does not hold family counseling sessions and prefers individual sessions. The other holds approximately 20-minute phone sessions with families and youth shortly before release, to discuss youth and family expectations. The latter psychologist also stated that s/he sometimes facilitates youth phone calls to families in times of crisis and debriefs with the youth after the calls.

No interviewed youth had participated in family counseling sessions with a clinician in the recent past. One young woman stated that she participated in family sessions years ago. Another young woman said that her clinician planned to initiate family counseling with her and her mother last year, but her mother passed away. Two other young women had been offered family counseling but had not participated. Another young woman and a young man stated that they had not been offered family counseling; the young woman indicated that she would be interested in sessions with her family.

*Ratings provided at the central office level only.*

**6.10:** Fund ongoing training and attendance at national/regional conferences. Key mental health staff attend appropriate national and regional conferences.

By contract, psychiatrists and psychologists are allotted certain time off for continuing education and some money to pay for registrations (but not travel costs). One clinician was approved to attend an out-of-state conference (American Psychological Association) last year, but the approval was cancelled due to state budget issues.<sup>29</sup> Clinicians say that they tend to pay out of pocket if they want to attend conferences because of the bureaucratic difficulties in obtaining CDCR funding.<sup>30</sup> The local CMO sometimes provides funding, but under the business rules Ventura will no longer have a local CMO.<sup>31</sup>

*Rating provided at the central office level only.*

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<sup>27</sup> Statements of case work specialist during site visit, November 17, 2009.

<sup>28</sup> Statements of senior psychologist during site visit, November 17, 2009.

<sup>29</sup> Statements of chief psychologist during site visit, November 16, 2009.

<sup>30</sup> See statements of two interviewed mental health clinicians during site visit, November 17, 2009.

<sup>31</sup> Statements of chief psychologist during site visit, November 16, 2009.

**8.1a5:** Youth informed of [policy] changes as appropriate. Information materials and/or briefing provided within 30 days of change in accessible formats.

Relevant mental health policies implemented in 2009 are SPAR (March 2009<sup>32</sup>), psychopharmacology (April 3, 2009<sup>33</sup>), and WIC § 1800 (June 1, 2009<sup>34</sup>). Ventura staff provided a binder of youth signature logs, signed during large group meetings in which policy changes were discussed. None of the signature logs indicated that SPAR, psychopharmacology, or WIC § 1800 changes were announced to youth.

Many interviewed youth reported that they have a copy of the Youth Rights Handbook, which most found helpful. However, the Youth Rights Handbook has limited coverage of medical and mental health care issues. It does inform youth of their right to care, their right to refuse medication, and how to request services. DJJ should develop a medical and mental health supplement to the handbook, with feedback from the relevant *Farrell* experts.

*Rating provided at the central office level only.*

**11.1:** Implementation plan for offices and MH treatment rooms. Sufficient office space to exist so that all MH staff requiring offices have space and, where appropriate, that space is in, or adjacent to, the living unit. Sufficient space to exist so that no regular MH programs have to be canceled due to lack of space. Treatment space to be appropriate for treatment, providing a therapeutic milieu and areas for confidential conversations.

### *Implementation plan*

The facility has still not received its needed modular buildings.<sup>35</sup> According to DJJ's June 2009 Quarterly Facility Report, Ventura needs 35 new modular buildings.<sup>36</sup> The superintendent expects to receive 17 modulars and stated that the process can take up to 18 months.

### *Office space*

All psychologists have offices on their assigned living units.<sup>37</sup> Each office is equipped for phone and computer access, though at least one psychologist must share a phone line with two other unit staff.<sup>38</sup> The psychiatrists each have an office in the outpatient housing unit and share an office on the female SCP unit.<sup>39</sup> Office space for case managers should be complete in the near future; youth rooms are being converted to office spaces gradually.<sup>40</sup>

<sup>32</sup> See e-mail of Robert Rollins to Mark Blaser, et al., March 19, 2009.

<sup>33</sup> See DJJ, Section # 6267.6, Institutions and Camps Manual (Psychopharmacology), January 20, 2009, p. 2.

<sup>34</sup> See DJJ, Institutions and Camps Manual, Section 3320, "Forensic Evaluation – Welfare and Institutions Code 1800/1800.5," April 2, 2009, p. 2 (PoP # 440, June 17, 2009).

<sup>35</sup> Statements of superintendent during site visit, November 16, 2009.

<sup>36</sup> See DJJ, Quarterly Facility Report, June 2009, p. 18 (provided as PoP #533, October 13, 2009).

<sup>37</sup> Statements of chief psychologist during site visit, November 17, 2009.

<sup>38</sup> *Id.*; statements of staff psychologist during site visit, November 17, 2009.

<sup>39</sup> Statements of chief psychologist during site visit, November 17, 2009.

<sup>40</sup> Statements of assistant superintendent during site visit, November 17, 2009.

### *Treatment space*

Residential mental health units have conference rooms or other designated space for treatment groups.<sup>41</sup> Core units lack confidential space for group meetings, which are often held in day rooms and kitchens.<sup>42</sup> Some groups are held in school area classrooms.<sup>43</sup>

*Rating: Partial compliance*

**6.1c:** [Complete conversion to a rehabilitative facility.]

OSM defers to the safety and welfare and mental health experts regarding compliance with this requirement.

**8.3.1:** Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. Deadline is July 1, 2007. This item is also monitored by the mental health experts. **8.3.2a:** By November 1, 2006, DJJ is required to facilitate family phone contact within 24 hours of youth arrival. **8.3.2b:** By December 1, 2006, DJJ is required to facilitate ongoing family phone contact. **8.3.3:** By March 1, 2007, DJJ must arrange for family visiting days at least four times per year. These items are monitored solely by the mental health experts who have requested that the OSM gather information for them.

**8.3.1:** Central office recently implemented the community assessment report (CAR) and procedure in July 2009, and field parole agents are to complete these reports shortly after youths' arrival to facilities.<sup>44</sup> A case work specialist assigned to intake stated that she had only seen one CAR as of November 17, 2009. Documentation indicates that Ventura received 98 new youth between July 1, 2009 and November 16, 2009.<sup>45</sup>

*Rating provided at the central office level only.*

**8.3.2a:** A case work specialist assigned to intake stated that either she or a youth's assigned counselor provides youth with their first phone call.

*Rating provided at the central office level only.*

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<sup>41</sup> Statements of chief psychologist and assistant superintendent during site visit, November 17, 2009.

<sup>42</sup> Statements of chief psychologist, two senior psychologists, and one staff psychologist during site visit, November 17, 2009.

<sup>43</sup> Statements of senior psychologist during site visit, November 17, 2009.

<sup>44</sup> See statements of field parole staff during central office site visit (safety and welfare audit), November 2, 2009.

<sup>45</sup> See VYCF, Intake: SRSQ date and time completed, November 16, 2009.

**8.3.2b:** Staff and youth consistently reported that youth are permitted at least one direct, 15-minute family telephone call every week. Some youth said that they make one or two direct phone calls each week and/or that youth could earn extra direct calls. Youth who can reach their families by collect calls have access to pay phones during unstructured program time. The WIN telephone records are relatively consistent with youth statements.

*Rating:* Substantial compliance

**8.3.3:** Ventura and its Family Council organized a family reunification event in April 2009 in which 250 family members toured the facility and met with staff from various disciplines.<sup>46</sup> Community members helped some families with transportation and lodging. Following the main event, some A-Level youth enjoyed a movie with their families.

The Family Council hosted a youth-family movie night in late July and another reunification event in mid-August.<sup>47</sup> A Thanksgiving meal for youth and families was scheduled for the Saturday following our November visit, and the facility is also planning a winter holiday event.<sup>48</sup>

Only youth with visitors are allowed to attend the family events,<sup>49</sup> for which reason OSM assigns a partial compliance rating. OSM recommends that Ventura follow other facilities' example and allow youth without visitors to participate in the special family event in some way.

*Rating:* Partial compliance

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<sup>46</sup> DJJ Today, vol. 1, issue 1, June 2009, p. 3. The remainder of this paragraph is based on this source.

<sup>47</sup> DJJ Today, vol. 1, issue 3, July 2009, p. 6.

<sup>48</sup> Statements of various personnel during site visit, November 16-17, 2009.

<sup>49</sup> Statements of superintendent during site visit, November 17, 2009; statements of various interviewed youth during site visit, November 16-17, 2009.