

SUPERIOR COURT OF CALIFORNIA
CITY AND COUNTY OF ALAMEDA

MARGARET FARRELL,)
) CASE NO. RG03079344
 Plaintiff,)
)
 vs.)
)
 MATTHEW CATE,)
)
 Defendant.)
 _____)

ELEVENTH REPORT OF SPECIAL MASTER

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I. INTRODUCTION

This report revisits the areas of organizational structure and management effectiveness, policy development and dissemination, contracting and accounting, information technology and personnel processes. It describes the status of the experts' work on the integrated behavior treatment model. It attaches a monitor's report on the mental health issues monitored by the office of the special master "SM".. It also attaches a summary of priorities designated by the experts in each remedial area and an update on the compliance status of certain requirements for which the Court reset deadlines this year.

The mental health experts provided their draft formal report to the special master and parties in late August 2009. DJJ did not provide comments on the experts' draft report until November 17, 2009. The special master expects to provide the Court with the experts' final report in December 2009. The safety and welfare expert submitted a draft report for comment in late September. He has finalized his report after receiving comments from the OSM and the parties, at the end of October 2009. His report will be attached to the next report of the special master, with accompanying reporting by the special master.

II. ORGANIZATIONAL STRUCTURE AND MANAGEMENT EFFECTIVENESS

The safety and welfare and mental health plans require DJJ to build the organizational capacity to manage the transformation required in this case.¹ DJJ was sorely lacking in organizational capacity in 2005 and 2006 when these key plans were

¹ See Safety and Welfare Remedial Plan, Section 2, pp. 12-16; Mental Health Remedial Plan, pp. 75.

written.² The safety and welfare plan requires that DJJ develop an appropriate organizational chart; fill key management positions; detail a high-level manager to direct the project of remedial plan compliance; and dedicate a substantial number of staff to planning, implementing, and monitoring new initiatives and programs.³ The mental health plan similarly requires increased and improved management capabilities and resources.⁴

A. Central Office Organization and Capacity

1. Organizational Chart and Structure

The safety and welfare plan articulates principles for organizational structure and requires organizational charts that align with those principles.⁵ At the time the plan was written in 2006, after the 2005 merger into CDCR, DJJ did not have a central office organizational chart.⁶ In April and October 2007, DJJ provided the special master and experts with an unofficial and incomplete central office chart. By February 2008, DJJ provided a relatively complete and adequate chart, which was signed and made official in May 2008. By doing so, DJJ came into compliance with the safety and welfare requirement that it create and maintain a central office organizational chart.

Since May 2008, DJJ has reorganized some central office staff, and its recent organizational charts reflect this.⁷ Several concerns previously raised by experts have

² See Seventh Report of the Special Master, pp. 4-5; Murray, et al., *Implementing Reform In California*, March 31, 2006, pp. 1, 19.

³ See Safety and Welfare Remedial Plan, Section 2, pp. 12-16.

⁴ See Mental Health Remedial Plan, p. 75.

⁵ See Safety and Welfare Remedial Plan, pp. 12-14.

⁶ See Seventh Report of the Special Master (April 2008), pp. 5-6. The information in the remainder of this paragraph is also based on this source. Facility organizational charts are discussed in OSM and expert reports that address the various relevant requirements.

⁷ See, e.g., See DJJ Quarterly Report (July 31, 2009), “Organizational Charts” section.

been resolved.⁸ DJJ is in compliance with the safety and welfare requirement that it maintain a central office organizational chart, though the experts and DJJ continue to discuss central office organization issues.⁹

2. Central Office Vacancies

There are 2 established positions for the central office that are currently vacant.¹⁰ This reflects a decrease both in central office authorized positions and in the number of central office staff employed since April 2008, when personnel tracking showed that 85 of 397.6 total authorized positions were vacant.¹¹ It also reflects a decrease since June 2009 when personnel tracking showed that there were 86 of 302 established positions vacant.¹² The special master draws no conclusions from the current proportion of vacancies because it is possible that a significant number of the established

⁸ Of issues previously raised by the experts, two relatively minor issues remain. First, instead of a single highest dental authority, the chart depicts three chief dentists. *See* Def't. Notice of Filing of Updated DJJ Organizational Charts, February 10, 2009, Exhibit A. This is not acceptable to the dental services expert. *See* e-mail of Dr. Don Sauter to Aundra Fletcher 1/2/2009's proposed staff model will resolve this issue if implemented. E-mail of Dr. Don Sauter to Aundra Fletcher, July 25, 2009. Second, the chart still does not depict necessary administrative and clerical support for mental health management. *See* Seventh Report of the Special Master (April 2008), p. 7; Def't. Notice of Filing of Updated DJJ Organizational Charts, February 10, 2009, Exhibit A. The medical experts have resolved their concerns related to the reporting relationship of the medical director to the program director; these concerns were noted in the Seventh Report of the Special Master (April 2008), p. 6. Given the decrease in the number of medical experts supporting the proposal to modify the relevant operational plan, *see* e-mail of Madeleine LaMarre to Rachel Stern, et al., May 5, 2009.

⁹ Recently, Dr. Schwartz again raised the issue of whether the sexual behavior treatment coordinator has authority sufficient to discharge her duties, and the education experts noted inaccuracies in a recent chart as it pertained to their area. *See* statements of Barbara Scott to the Honorable Court of Education Experts' meeting 1/2/2009 e-mail of Aundra Fletcher to Doug Ugarkovich, et al., September 10, 2009 attached to the title "Dashboard Responses by Education Experts).

¹⁰ This information is based on the contents of a raft of this report prepared over 2009 attributes to a 2009 "Position Reconciliation Report." Not all of the current positions will remain established, as not all of them are funded for this fiscal year. *Id.*

¹¹ *See* Seventh Report of the Special Master (April 2008), p. 8, p. 8 n.28.

¹² Statements of DJJ personnel operations support personnel staff during site visit, June 22, 2009.

positions can be eliminated.¹³ DJJ has a contract with Christopher Murray and Associates for an analysis of central office functions, staffing, and staffing needs.¹⁴

Most of the specific vacancy issues that the special master previously reported have been resolved. DJJ filled the superintendent of education position in September 2009.¹⁵ DJJ has staffed the medical records management position adequately.¹⁶ DJJ Chief Psychiatrist Ed Morales returned from military leave, which has made it possible for Dr. Arguello to serve as the full-time senior mental health administrator; Dr. Arguello oversees and directs implementation of the mental health plan.¹⁷ There are no vacancies among the mental health training team positions, though two positions required by the mental health plan were eliminated rather than filled.¹⁸ The special master has queried the experts, and none has identified critical issues of central office vacancies.¹⁹

¹³ For example, DJJ needs three or four capable managers reporting to the superintendent of education, responsible for curriculum, special education, vocational education, and student services, in the place of a greater number of education positions on the organization chart. State e-mails of To 'Ro r e to the special master, July 26, 2009. It needs substantially fewer central office positions related to safety and welfare than are currently authorized. E-mail of Barry Krisberg to special master, July 26, 2009. DJJ needs to reduce management dental staff from three chief dentists to one. *E.g.*, e-mail of Dr. Don Sauter to Aubra Fletcher, July 24, 2009.

¹⁴ Statements of DJJ operations support personnel management staff, July 23, 2009. As of July, the estimated date of completion for the central office study was October 2009. Statements of Christopher Murray, July 29, 2009. The special master unsuccessfully had pressed DJJ to authorize the central office analysis on the same schedule as the analysis of facility staffing.

¹⁵ Tenth Report of the Special Master (September 2009), p. 8.

¹⁶ See Seventh Report of the Special Master (March 2008), p. 10; Ninth Report of the Special Master (June 2009), pp. 4-5 and Appendix C (Goldenson/LaMarre Report), pp. 14-15.

¹⁷ Cf. Seventh Report of the Special Master (April 2008), p. 10 (Dr. Arguello served as chief psychiatrist as well). The special master has communicated with Drs. Morales and Arguello in their separate capacities since r Morales' return.

¹⁸ Statements of Chief Psychiatrist Ed Morales to the special master, August 13, 2009. The mental health plan (pp. 75-76) requires at least 3 licensed clinicians, an instructional designer, and an office technician. The current authorized and filled positions are two clinicians and an instructional designer. Statements of Chief Psychiatrist Ed Morales to the special master, August 13, 2009. If DJJ contends that the reduction in its population and number of facilities justifies this reduction in positions, it should proceed under the consent decree to seek to modify the plan. The special master has referred this issue to the mental health experts. See e-mail of Donna Brorby to Terry Lee and Eric Trupin, August 17, 2009.

¹⁹ See e-mail of special master to Farrell experts, July 26, 2009; e-mail of Barry Krisberg to the special master, 12 2009 state e-mails of To 'Ro r e during teleconference, July 26, 2009. The special master did not obtain updated information about the sufficiency of clerical support for health services.

3. Project Management

earl 2008's capacity to complete project of compliance with the remedial plans continued to be inadequate. Having missed many deadlines set by the safety and welfare and mental health plans, DJJ was unable to project when it would accomplish the tasks for which the deadlines had been missed.²⁰ Since that time, the project management capacity has markedly improved.

DJJ retained Delegata Corporation and Christopher Murray and Associates to identify the tasks required to comply with the remedial plans, to help project a schedule for the performance of those tasks, and to develop a system for tracking and reporting its progress toward compliance, among other things.²¹ As projects were defined and responsibilities divided, DJJ worked primarily with Delegata Corporation on project management issues.²² DJJ, in consultation with Delegata Corporation, continues to refine

According to personnel records reviewed by the special master on July 23, 2009, several health services support staff positions are vacant and a limited term training position remains unfilled.

²⁰ See, e.g., Seventh Report of the Special Master (April 2008), p. 12.

²¹ See *id.*, pp. 12-15; Order, October 27, 2008, pp. 11-12.

²² Statements of Christopher Murray to special master, July 16 and 29, 2009. Christopher Murray and Associates' prior projects were the development of a special master plan for the allocation of staff to a comprehensive staffing analysis and development of "essentials" to set staffing patterns for the future. *Id.*; see also Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 63, n.594. The staffing business rules were filed as a proposed modification of remedial plan staffing provisions on July 30, 2009. See Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules and Sealing of Staffing Model and Business Rules, July 31, 2009. Christopher Murray and Associates also consulted with DJJ on formatting and automating parts of its quarterly report, and on issues related to closures of facilities related to S.B. 81 population reductions. Statements of DJJ staff during meeting of parties, experts, and special master, August 2008; statements of Christopher Murray to the special master during teleconference, July 29, 2009.

and streamline its new project management system.²³ OSM is pleased to see an emphasis on simplification.²⁴

Under its new project management structure, DJJ categorizes *Farrell* compliance requirements as “tasks” “minor projects” and “chartered projects.”²⁵ DJJ is creating a master schedule of all tasks and minor projects, and the schedule will identify needed resources.²⁶ Projects of a certain complexity constitute a “project charter” which identifies project goals and needed resources.²⁷ The Administrative Project Review Board (APRB) chooses a team to draft the charter.²⁸ Once the charter writers present the draft charter to the APRB, it is presented to the directors of a project lead.²⁹ A project team forms and develops a project plan and a project schedule, with support from the project lead’s office.³⁰ The schedule must be approved by the APRB and

²³ Statements of Michael Brady during central office site visit, July 23, 2009; statements of Sandra Chamberlin and Tami McKee-Sani during central office site visit, June 22, 2009; *see also* “Reform Management Structure” *Version 2* release date project charter 2009 “Project Management Office Manual” *Version 2* release 2 charter 2009

²⁴ Some experts believe that a lot of staff time devoted to the mechanics of the project management processes, including time spent in large-group meetings, is necessary. *See, e.g.*, statements of Barry Krisberg, January 15, 2009; statements of Barbara Schwartz, March 10, 2009.

²⁵ Statements of Juan Carlos Arguello during central office site visit, February 18, 2009; *see also* Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), Attachment 7, Project schedule listing, *e.g.*, chartered projects and minor projects, undated (PoP #362, March 12, 2009).

²⁶ Statements of Dolores Slaton during central office site visit, June 22, 2009; statements of Sandra Chamberlin during DJJ Court Compliance Task Force meeting, September 10, 2009 (explaining that a first draft of the schedule exists but that the projected completion date has been delayed).

²⁷ An example of a project charter is attached to the Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), Attachment 4, Draft Project Charter: Comprehensive Classification System, February 25, 2009. *See also* *see also* *see also* “Site Reform Management Structure” training materials *see also* 200 pp 2-13. DJJ describes the project charter in its Glossary of Terms for Project Management “The purpose of the Project Charter is to achieve an agreement between management and the Project Leader regarding communicating project expectations. It authorizes the existence of the project and provides the Project Leader authority to apply organizational resources to the project activities.” *Id.*, p. 12.

²⁸ Statements of Tami McKee-Sani during central office site visit, June 22, 2009. The charter writers are chosen from the “Architecture Team” and project representatives. *Id.*

²⁹ *Id.*

³⁰ *Id.* OSM has not seen an example of a project plan, but sample project schedules are attached to the defendant’s Response to the court’s October 2, 2009 order and October 2, 2009 Exhibits M, R, T, U, V, and Z.

's directors³¹ Once approved, implementation of the schedule begins, and the project team is expected to meet regularly to track compliance.³² The project management office prepares a detailed risk assessment that identifies barriers to project completion and strategies to address those barriers.³³ The head of the APRB reports that she reviews the status of project milestones each week.³⁴

's the project management processes are coordinated across disciplines, at least in part by convening multi-disciplinary groups to discuss major project planning.³⁵ Project planners devote increased attention to identifying and mitigating barriers and delays.³⁶ DJJ more thoroughly plans and tracks its steps toward compliance in light of the findings of the Special Master's last report on project management issues.³⁷ DJJ employed its newly developed planning processes to propose modified deadlines for certain remedial requirements in November 2008.³⁸ Many of the requirements with reset deadlines have seen significant progress.³⁹ DJJ has also completed a number of policies that were lagging.⁴⁰

In late 2008 and early 2009, DJJ replaced its *Farrell* project manager and reorganized its central office reform and compliance teams under Chief of Court

³¹ Statements of Tami McKee-Sani during central office site visit, June 22, 2009.

³² *Id.* As of June 2009, these meetings were not occurring regularly. *Id.*

³³ See Appendix A, DJJ, Reform Development Phase Issue Logs.

³⁴ See statements of Tami McKee-Sani during central office site visit, June 22, 2009.

³⁵ Statements of staff and observations of OSM monitors during central office site visits, November 4, 2008 and June 22, 2009. As noted below, communication and coordination between IT and program area staff as a project are a result of the project management processes.

³⁶ See, e.g., Appendix A, DJJ, Reform Development Phase Issue Logs; see also "Site Reform Management Structure" training materials, December 2008.

³⁷ See Seventh Report of the Special Master (April 2008), p. 12.

³⁸ See Staff Response to the Court's October 2, 2008 Order, October 2, 2008, p.

³⁹ See generally Appendix B (Status of Items with Modified Deadlines); Ninth Report of the Special Master (June 2009), Appendix B (Status of Items with Modified Deadlines).

⁴⁰ See policies section, below.

Compliance Michael Brady.⁴¹ Mr. Brady reports directly to Chief Deputy Secretary Warner. The court compliance unit consists of about 40 members, including remedial area team leaders and supervisors, as well as representatives from information technology, policy, project management, and others.⁴² The unit meets weekly, and leadership from all DJJ facilities join via videoconference.⁴³ OSM monitors and some of the experts regularly participate in the meetings.⁴⁴ The operational structure of the court compliance unit differs somewhat from the arrangement envisioned in the safety and welfare plan, but effectively meets the plan's requirements.⁴⁵

The new leadership, organization, and increased staff resources directed at planning and tracking steps towards compliance are very positive steps. Central office staff, the special master, and multiple court-appointed experts have noted that the court compliance unit's problem-solving approach is a testament to Mr. Brady's position. These changes have resulted in improved identification of and response to obstacles to compliance.⁴⁶

4. DJJ Progress Reporting

The consent decree requires that the quarterly reports "rearrange the progress made, compliance with deadlines and actions taken in implementing this decree."⁴⁷ The quarterly reports include a "snapshot" that presents the most recent audit ratings in respect to "indicators" of compliance to the standards of *Farrell-*

⁴¹ See, e.g., statements of Bernard Warner during staff training, December 4, 2008.

⁴² See DJJ Quarterly Report, January-March 2009 "Operational Matters" section "Part 2" Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 3.

⁴³ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 3.

⁴⁴ *Id.*

⁴⁵ See *id.*, pp. 2-3, 11; Seventh Report of the Special Master (March 2008), pp. 15-16.

⁴⁶ The special master has brought a number of issues to Mr. Brady and his team, which they have succeeded in addressing quickly and appropriately. Most of the experts have mentioned to the special master that they have had similar experiences. See, e.g., Krisberg informal report on central office audit, April 2009. Several DJJ staff have expressed the same observation to the special master. Mr. Brady reports directly to the Chief Deputy Director. DJJ Quarterly Report, January-March 2009 "Operational Matters" section

⁴⁷ See Consent Decree at ¶¶ 32 and 25.

related policies under development, and certain outcome trends.⁴⁸ The quarterly report also depicts cumulative expert compliance ratings, by percentage of substantial compliance, partial compliance, and non-compliance ratings.⁴⁹ The special master's office spot-check reports' depiction of expert ratings as evidence for a significant error.⁵⁰ Generally, DJJ has increased the percentage of compliance ratings and decreased the percentage of noncompliance ratings, which demonstrates progress toward meeting enumerated individual requirements of the remedial plans. The cumulative ratings data do not constitute a definitive measure of how close DJJ is to achieving full compliance with its remedial plans, however, because of vast differences in the scope and importance of individual remedial plan requirements.⁵¹ That is, substantial compliance with 80% of the enumerated compliance items of a single *Farrell* plan does not necessarily indicate that 80% of the work is done.⁵²

related projects the special master asks experts to submit "proofs of practice" or "PoPs." These PoPs document the parties' actions and progress toward compliance with the remedial plans. DJJ now provides a great deal of requested information to all experts and monitors in connection with site visits. Through the combination of the quarterly reports,

⁴⁸ SM Plattiff's counsel also asks experts to provide feedback to assist in the development and content. *See, e.g.*, e-mails of Aubra Fletcher to parties, July 8, 2009, September 4, 2009, September 10, 2009; statements of Sara Norman during teleconference, September 8, 2009. OSM views the dashboard as a work in progress and finds the document increasingly useful as DJJ makes improvements.

⁴⁹ *See* DJJ Quarterly Report, June 30, 2009.

⁵⁰ The special master has spoken with the monitor of the court compliance with the reports on several occasions, in person and by telephone, and has been impressed by his effort and care in producing the cumulative summaries of expert findings. She also spoke to Chris Murray in 2008 when he worked with DJJ to partially automate the report.

⁵¹ Individual items rated in safety and welfare, for example, range from making grievance forms directly accessible to youth (8.5.1) to developing a treatment model (5.2) and completing conversion of a facility to the treatment model (6.1c). *See generally* Safety and Welfare Remedial Plan Standards and Criteria.

⁵² Also, because some plans have many more, and therefore more discrete, requirements designated for monitoring than other plans, and because some plans require greater changes than other plans, compliance with 80% of the enumerated items of one plan would not be equivalent to compliance with 80% of the enumerated requirements of another plan.

PoPs, and documents provided at site visits, DJJ is meeting the consent decree requirement for quarterly reporting.⁵³

Additional examples of the Special Master's methods for tracking and demonstrating progress include:

- Project schedules for "critical" projects⁵⁴ and information technology projects;⁵⁵
- "Solution Status" reports for certain projects⁵⁶
- Compliance assessment reports;⁵⁷ and
- Corrective action plans and corresponding compliance reports.⁵⁸

These documents assist DJJ in organizing to meet remedial plan requirements,⁵⁹ and they assist OSM in monitoring compliance.

B. Policy Development and Dissemination

Since the Special Master's last report on the Special Master's policy processes, DJJ has finalized and distributed a number of policies to its facilities. These include the disciplinary decision-making system (DDMS); use of force; program credits; suicide prevention, assessment, and response; forensic evaluations; and psychopharmacological treatment

⁵³ In the past DJJ included a summary of significant developments in each subject area in its quarterly reports. The Special Master's office will explore this practice to determine if it is in the best interests of the parties to reinstate this practice, as a part of meeting the quarterly reporting requirement to report on progress made, compliance with deadlines, and actions taken to comply with the consent decree and remedial plans.

⁵⁴ Sample project schedules are attached to Defendant's Response to the Court's Order 2-2008-0011 on November 21, 2008, Exhibits J, M, Q, R, T, U, V, and Z.

⁵⁵ See, e.g., Appendix C, Project Data Sheet: DDMS Mental Health Treatment Plan, June 16, 2009.

⁵⁶ See, e.g., Appendix D, Solution Status: Law Library (Electronic), November 2008.

⁵⁷ See, e.g., DJJ Farrell Compliance Unit, Executive Summary: SB 518, AB 1300 and Safety and Welfare Remedial Plan 8.3 Compliance Assessments, August 8, 2008 (PoP #221, August 21, 2008).

⁵⁸ See, e.g., DJJ, Education Audit of Lyle Egan High School: Corrective Action Plan, January 12, 2009 through January 14, 2009 (finalized in April 2009); statements of Michael Brady during Case Management Conference, July 9, 2009.

⁵⁹ See DJJ, Response to Draft 11th Special Master's Report provided November 17, 2009.

policies.⁶⁰ The completion and implementation of these policies represent important steps forward.⁶¹

The policy development process is as follows. Staff working in the relevant program area(s) send a draft policy to the policy unit.⁶² A policy analyst then reviews all related policies, researches relevant legal authorities, meets with the policy drafter, and formats the policy document. The analyst forwards a revised draft to the directors, chief deputy secretary, and counsel for review and comment. The executive policy review team has five days to review the policy. Counsel has fifteen days to complete its review. Once the policy analyst receives all comments, he or she convenes a case conference with all relevant directors, attorneys, and staff. Agreement is generally reached on the various comments at these case conferences, though occasionally policies undergo multiple rounds of review and comment. Once all comments are addressed, the chief deputy secretary signs the policy.

A signed policy is often not immediately implemented, though DJJ reports recent improvements in this regard. Program area staff prepare a labor negotiation tool as part of the policy drafting process.⁶³ After a policy is signed, the labor liaison office reviews and approves the negotiation tool and sends it to the Director's Office of Labor Relations. This office sends the tool to the appropriate staff office.

⁶⁰ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 4-7.

⁶¹ The experts expect evolution of the DDMS and use of force policies, for example, with the implementation of the IBTM. *E.g.*, statements of Eric Trupin and Arris Erri "etal ealt s it" to parties on 20 2009 statements of Arris Erri telep o eco fere ce it central office staff concerning DDMS policy, December 16, 2008; Terry Lee and Eric Trupin, Farrell Metal ealt Experts' 2009 Site Visit Summary [draft], provided August 19, 2009, pp. 6-7.

⁶² The policy may begin with the project charter or minor project process described above. Program staff are to send the draft policy simultaneously to the training unit to develop training curriculum for staff. Unless otherwise noted, the information contained in this and the following paragraph is based on statements of policy unit manager Dolores Slator to the SM's central office site visit on June 22, 2009.

⁶³ DJJ, Response to Draft 11th Special Master's Report provided to the Director 2009

of the policy's implementation.⁶⁴ Until recently, DJJ often delayed policy implementation pending labor negotiations. If the negotiations resulted in substantive changes to the policy, the iterative policy review process would sometimes begin anew.⁶⁵ Following the special master's successive orders, the Office of Labor Relations reached an agreement to allow *Farrell* policy implementation prior to the completion of labor negotiations.⁶⁶

Throughout the policy development process, the policy unit now maintains a policy "dashboard" designed to depict the policy's development schedule and status.⁶⁷ The dashboard tracks the status of new policies up to but not including the implementation phase.⁶⁸ Program area staff and internal compliance monitors are charged with tracking policy implementation.⁶⁹

The special master's recent report cites the lack of accurate prioritized list of needed policies as a barrier to efficient policy development and implementation.⁷⁰ In November 2008, as a part of its new project management process, DJJ compiled a coded list of all *Farrell* requirements.⁷¹ It has also created a list of prioritized projects that

⁶⁴ Statements of Michael Brady to Aubra Fletcher, February 20, 2009.

⁶⁵ Also, two policies were piloted, rewritten, and re-reviewed following their initial signing (suicide prevention, assessment and response policy and the program service day policy).

⁶⁶ DJJ, Response to Draft 11th Special Master's Report pro i e o e er 2009

⁶⁷ See DJJ, Farrell Policy Dashboard: As of 6/23/09 (filed with the Court on July 9, 2009). DJJ did not file an updated version of this document with its most recent dashboard, based on needed changes identified by SM a Plai tiff's co sel. See Deft. Notice of Filing Updated Key Indicators and Other Items to Assist the Court in Mo itori 's o plia ce it Re e ial Pla s Septe er 9 2009

⁶⁸ See DJJ, Policy Dashboard: Executive Summary [draft], provided September 3, 2009. Currently, of post-adoption events, the policy unit only tracks whether facilities adopt required local procedures. Statements of Dolores Slaton during central office site visit, June 22, 2009. The facilities reportedly are not adopting these procedures. *Id.*

⁶⁹ Respo se to raft t Special Master's Report pro i e o e er 2009

⁷⁰ See Seventh Report of the Special Master (April 2008), p. 20.

⁷¹ See Sei lit " itial al sis a Sorti of Re ire e ts" o e er 200

includes needed policies.⁷² Though not all needed policies have been listed and prioritized, the current planning processes are sufficient to identify needed policies on an ongoing basis.⁷³

III. BUSINESS SYSTEMS ISSUES

In late 2006, the Director of California's state-run youth and adult corrections systems established a "matrix" interface with the Board for Business Services including budgeting, accounting, contracting, information technology, and personnel management.⁷⁴ In 2007, the special master released a report on the office's inefficiencies including medical vacancies and contracting for necessary medical services, due to business systems issues.⁷⁵ By late 2006 and early 2007, it was apparent that the matrix was not working for DJJ, especially in the areas of contracting and personnel management.⁷⁶ CDCR finally took responsibility for addressing the issues in mid-2007, and the special master reported improvements by early 2008.⁷⁷ CDCR managers were improving CDCR business services functions generally, and the then-new DJJ operational support unit was

⁷² See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), Attachment 7 (Project schedule listing, e.g., chartered projects and minor projects, undated (PoP #362, March 12, 2009)).

⁷³ See statements of Dolores Slaton during central office site visit, June 22, 2009. DJJ produced a policies master table of contents in October 2008. Ninth Report of the Special Master (June 2009), Appendix B (Status of Items with Modified Deadlines), pp. 4-5. The master table of contents was meant to gather already-identified policies into one manual; the purpose of the table of contents was not to describe what policies needed to be updated. See statements of Dolores Slaton during central office site visit, June 22, 2009.

The seventh report also indicated that after becoming policy manager in January 2008, Dolores Slaton circulated a list of 90 *Farrell*-related policies to the directors soliciting their priorities for policy development related to their areas of responsibility. See Seventh Report of the Special Master (April 2008), p. 21. Ms. Slaton reports this year that this effort was abandoned because it was deemed inefficient. See statements of Dolores Slaton during central office site visit, June 22, 2009.

⁷⁴ See Fifth Report of the Special Master (October 2007), pp. 11-12.

⁷⁵ See Third Report of the Special Master (November 2006), pp. 14-15.

⁷⁶ See Fourth Report of the Special Master (June 2007), pp. 4-6, 20-21, Appendix C; Fifth Report of the Special Master (October 2007), pp. 11-15.

⁷⁷ See Seventh Report of the Special Master (March 2008), pp. 26-32.

developing an effective interface between DJJ and CDCR business services.⁷⁸ These efforts have largely proven successful, and it appears that business systems issues no longer present significant impediments to remedial plan compliance. They are a a ea le a Ra are a a i t e Yet 's ce tral office s o l e more diligent to ensure that it identifies and responds issues encountered by DJJ facilities, as discussed below.

A. Contracts

fter Y 's 200 er er it Ra t ro i -2007, DJJ had great difficulty entering into essential contracts, and this compromised its attempts to comply with the *Farrell* remedial plans.⁷⁹ The merger made DJJ dependent on a CDCR office to process large contracts requests; this office was overwhelmed and not functioning well even for the adult system.⁸⁰ DJJ and the CDCR contracts office did not have a functional relationship.⁸¹ Contract requests were not effectively tracked, and some were lost for indeterminate periods of time.⁸²

R fi all foc se o 's si ess iss es i i -200 a create 's operational support unit, staffing it with an experienced CDCR contracts manager, among

⁷⁸ *See id.*

⁷⁹ *See* Fourth Report of the Special Master (June 2007), pp. 4-6, 20-21, Appendix C; Fifth Report of the Special Master (October 2007), pp. 11-15; Seventh Report of the Special Master (March 2008), pp. 26-27.

⁸⁰ *Id.*; *see also* Order Re State Contracts and Contract Payments Relating To Service Providers For CDCR Inmate Patients, March 30, 2006, *Plata v. Schwarzenegger*, Civil Action No. C01-1351 THE, in the United States District Court for the Northern District of California.

⁸¹ *See* Fourth Report of the Special Master (June 2007), pp. 4-6, 20-21, Appendix C; Fifth Report of the Special Master (October 2007), pp. 11-15; Seventh Report of the Special Master (March 2008), pp. 26-27. The special master attended meetings of DJJ and CDCR contracts staff on June 13 and July 11, 2007, and former OSM monitor Cathleen Beltz attended such a meeting on August 15, 2007, during which CDCR and DJJ discussed systems for working better together. *See* Fourth Report of the Special Master (June 2007), Appendix C. This also is oc e te i o a ror a at lee elt 's otes of t ose eeti s and in e-mail from Katie Riley to Cathleen Beltz, August 14, 2007.

⁸² *See* Fourth Report of the Special Master (June 2007), p. 4 n.8; Seventh Report of the Special Master (March 2008), pp. 26-27. Contracts staff interviewed by monitor Zack Schwartz during an October 2008 Stockton site visit described their past difficulties with CDCR.

other things.⁸³ At the same time, it improved the function of its own contracts office. DJJ and CDCR managers developed better systems for tracking requests and exchanging information. They trained and instructed DJJ staff responsible for contracts requests. By early 2008, the contracting system seemed sufficiently functional for DJJ to enter into contracts as necessary for *Farrell* compliance. Delays with respect to one court-ordered contract and continuing workload issues for the CDCR contracts office caused the special master to review this issue again this year.

o siste t it t e special aster's fi i s i earl 200 R's si ess systems are functional and allow DJJ to enter into necessary contracts.⁸⁴ Key CDCR and DJJ contracts staff who correctly observed that the contracting system was not working for DJJ (or CDCR) in and before mid-2007 now observe that the system has improved.⁸⁵ An important and sustained change is that contracts requests are no longer lost.⁸⁶ The basic bureaucratic requirements have not altered: bids are generally required for contracts for more than five thousand dollars (\$5,000), Department of General Services (DGS) approval is required for contracts over seventy-five thousand dollars (\$75,000), and DJJ facilities require CDCR approval for contracts above fifty thousand dollars

⁸³ See Fifth Report of the Special Master (October 2007), pp. 12; Seventh Report of the Special Master (March 2008), pp. 26-29. The remainder of this paragraph is based on these sources.

⁸⁴ The special master interviewed several CDCR contracts staff on June 22, 2009, including Joseph Watkins, Contracts Manager, Juvenile Services, and Suzanne Livingston, Contracts Analyst. She interviewed CDCR contracts analyst Eric Zimmerman by telephone on July 29, 2009. On June 24, 2009, she interviewed the two relatively new DJJ operational support staff responsible for DJJ central office contract requests, Glen Padayachee, Business Services and Contracts Manager, and Nancy Cha, Contract Analyst, as well as Teri Dixon, Health Care Services Analyst. The CDCR and DJJ contracts staff were very consistent in their statements. The special master has had a few substantial contacts with Mr. Watkins, Mr. Zimmerman, and Ms. Dixon over the time she has been reporting on contracts issues, and finds them particularly credible. In addition, monitor Zack Schwartz interviewed a total of six contracts staff during site visits to the Stockton complex (October 21-22, 2008), Stark (January 26-27, 2009), and SYCRCC (March 17- 2009 T e special aster's fi i s a co cl sio s a o t 's a l i t to contract is based on these interviews, with particular reliance on the interviews of Watkins, Dixon, and Zimmerman.

⁸⁵ See *supra* note 84.

⁸⁶ *Id.*

(\$50,000).⁸⁷ State law requirements and other agency considerations are too numerous to
 es arie ere a t ese ca i pe e 's *Farrell* compliance efforts.⁸⁸ CDCR
 staff expect it to take six months to process a contract request that involves competitive
 bidding requirements, from the time it is received by the CDCR business services
 contracts office, and they plan accordingly.⁸⁹ Staff can generally anticipate contracting
 needs by more than six months.⁹⁰

's ce tral office a e a a a e fe er co tracts re ests ri t e past
 year than it made and managed two and three years ago.⁹¹ In part, this is because DJJ

⁸⁷ Statements of Joseph Watkins during central office site visit, July 29, 2009. As of November 1, 2009, DJJ facilities are required to operate under the same rules as DJJ central office, with contracts over five
 t o sa ollars 000 re ire to e processe t ro R's co tract ser ices it See DJJ,
 Response to Draft 11th Special Master's Report pro ie o e er 2009

⁸⁸ For example, the Office of Chief Information Officer (OCIO) blocked DJJ from contracting for the
 development of software to integrate the CA-YASI risks needs assessment data with WIN and other
 systems for two years in a row. Statements of Michael Brady during central office site visit, June 22, 2009.
 OCIO ruled that DJJ should use the risk needs assessment vendor and software that CDCR uses for the
 adult prison system. *Id.* is ot co pete t to select 's ris ee s assess e t tool

Also, DGS continues to require DJJ to follow competitive bidding rules for medical contracts, when it
 would make more sense for DJJ facilities to contract with local providers who are too small to make formal
 i s for 's si ess i e ise R's serio s effort i t e past ear to co i ce S to ai e
 competitive bidding for a health services contract was not successful. Statements of Teri Dixon, Health
 Care Services Analyst, June 24 2009 s explai e i t e special aster's fifth report (p. 14), DGS
 re o e R's ai er fro co petiti e i i for ealt ser ices contracts about five years ago after
 finding that CDCR had abused the waiver. According to some facility medical administrators and medical
 expert Madeleine LaMarre, bidding requirements limit potential contract providers to those who are willing
 and able to negotiate the bidding process, which eliminates small providers located near facilities that
 might be most readily available and provide more continuity of care.

⁸⁹ Statements of Joseph Watkins and Suzanne Livingston during central office site visit, June 22, 2009;
 statements of Teri Dixon during central office site visit, June 24, 2009; *see also* Seventh Report of the
 Special Master (March 2008), p. 29. Common contracts over five thousand dollars (\$5,000) involve
 requests for proposals, invitations for bids, or non-co petiti e i s "RFPs" " s" a " s"
 respectively). With RFPs, CDCR DJJ specifies its requirements, and the bidders make proposals for
 meeting the requirements. These are more complex and take more time than the contracts that are based on
 IVPs, which specify precisely what is to be supplied, and the bidders propose a contract price. For NCB
 contracts, DJJ must convince its control agency, DGS, that it meets a requirement for a waiver of
 competitive bidding. Service and expense contracts for \$5,000 or less do not require competitive bids.
 Statements of Joseph Watkins, October 2008 and June 22, 2009.

⁹⁰ Statements of Joseph Watkins and Suzanne Livingston during central office site visit, June 22, 2009;
 statements of Teri Dixon during central office site visit, June 24, 2009.

⁹¹ Statements of Joseph Watkins and Suzanne Livingston during central office site visit, June 22, 2009;
 statements of Teri Dixon, Glen Padayachee, and Nancy Cha during central office site visit, June 24, 2009;
 "DJJ Court Master Report Request (Detail) FY 2008/09 ONLY, AS OF 6/22/2009." T e follo i
 sentence is also based on these sources.

enters into multiple year contracts instead of one-year contracts where appropriate. It is also because the governor has ordered state agencies to limit contracts to those directly related to health and safety.⁹² CDCR tracks all DJJ pending and completed contracts requests.⁹³ DJJ's operations support staff mediate the state's relationship with the CDCR contracts office for central office contracts requests and track the budget and expenditures for central office contracts. Before November 1, 2009, they did not monitor or assist with state facilities' contracts.⁹⁴

CDCR is proceeding with the automation project it had begun by the time of the special master's March 2008 report on contracts issues.⁹⁵ The new system is partially implemented but not fully functional. It does not yet produce necessary reports or build contract documents automatically, and consequently CDCR contracts staff must double-enter contracts information in the old system and the new system.⁹⁶ Nonetheless, staff responsible for contracts report less frustration and stress than they reported in mid-2007

⁹² Statements of Glen Padayachee and Nancy Cha during central office site visit, June 24, 2009. Mr. Padayachee replaced David Hale, to whose expertise and role in addressing contracts issues the special master referred in her fifth (p. 12) and seventh (p. 29) reports. Mr. Padayachee and Ms. Cha are the sources for the remainder of this paragraph.

⁹³ The special master has previously reported the number and proportion of contract requests pending for more than 120 days, 23 of 68 (34 percent) in October 2007, and 36 of 82 (44 percent) in February 2008. See Fifth Report of the Special Master, p. 13; Seventh Report of the Special Master (April 2008), p. 28. The numbers are down this year, to six of 39 (15%). See "DJJ Court Master Report Request (Detail) FY 2009 - Year Ending 22 2009" Contract 5600000406, CTIS # DJJ.08094-0; statements of Joseph Watkins during central office site visit, June 22, 2009. Though a CDCR contracts manager once described a great deal of pressure on staff to complete contracts that had been pending in the contracts office for 120 days or more (Fifth Report of the Special Master, p. 13), the special master does not now consider 120 days an important benchmark. It appears that the smaller, simpler contract requests are completed in fewer than 120 days, and contracts requests requiring bids or justification for not taking bids commonly take more than 120 days to complete. Also, the special master and CDCR contracts office staff observed that a few "received contracts" dates in the June 22, 2009 tracking data were reset, making it appear that particular requests were processed more quickly than before.

⁹⁴ DJJ reports that the state's operations support staff facilitate contract requests as of November 1, 2009. DJJ, Response to Draft 11th Special Master's Report produced October 2009.

⁹⁵ Statements of Joseph Watkins during central office site visit, June 22, 2009.

⁹⁶ *Id.* according to Mr. Watkins, the project is MS P's first for a uniform state agency and thus involves a great deal of new, custom programming work.

and before, and they believe that the contracting process will improve once the new automated system is fully developed and implemented.⁹⁷

B. Personnel and Hiring

When the special master released a detailed report on the systems for personnel management in early 2007, DJJ had a high level of vacancies, and the same difficulty with the R “atrix” that interfered with contract processing also interfered with hiring.⁹⁸ DJJ was also unable at that time to produce an accurate list of authorized, established, filled, and vacant positions.⁹⁹

By October 2007, it appeared that the interface between DJJ and CDCR was working for purposes of the personnel function; DJJ had skilled and experienced personnel staff in its operational support unit to coordinate with CDCR Human Resources.¹⁰⁰ An operational support manager reported that DJJ had an accurate database for tracking and managing the process of filling vacancies system-wide.¹⁰¹ Vacancy rates were significantly lower than they had been in June 2007.¹⁰²

⁹⁷ See, e.g., statements of Joseph Watkins during central office site visit, June 22, 2009; statements of Teri Dixon during central office site visit, June 24, 2009.

⁹⁸ See Fourth Report of the Special Master (June 2007), pp. 9-10; Fifth Report of the Special Master (October 2007), pp. 7-8.

⁹⁹ See Fourth Report of the Special Master (June 2007), p. 10. A position that is either “authorized” or “at risk” must first be “established” in the R “atrix” list. Issuance of a “0” for to the R’s Budget Management Branch (BMB) unit. Statements of Denise Sims, Shannon Demarais, and Tamara Martinez-Long during central office site visit, July 23, 2009. This is a CDCR process to which CYA was not subjected before the merger. *Id.* The operational support unit facilitates the processing of “0s.” *Id.* DJJ facilities are able to hire without assigning all staff to established positions, which is one reason DJJ has repeatedly needed to reconcile positions. *Id.* Reconciliation compares staff on the actual payroll against authorized and established positions. *Id.*

¹⁰⁰ See Fifth Report of the Special Master (October 2007), p. 8. The interface is working smoothly at this time, both with the CDCR Budget Management Branch and CDCR Human Resources. Statements of operational support personnel management staff during central office site visit, July 23, 2009.

¹⁰¹ See Fifth Report of the Special Master (October 2007), pp. 8-9, 9 n.31, 10.

¹⁰² *Id.*, p. 9 n.33.

As of March 2008, the Department's personnel function.¹⁰³ DJJ still was not tracking the process of filling vacancies, which meant that it was not checking for bureaucratic delays to address. This was because S.B. 81-related population reductions shifted the Department's focus to facilitate closures, reassignments and layoffs rather than filling vacant positions.¹⁰⁴ The chief of operational support at that time reported that the Department's data base for personnel data was not the Department's alternative system that would facilitate the tracking of vacancies and hiring process delays.

As of June 2009, the Department's operational support staff had again engaged in a laborious process to reconcile positions, in order to provide accurate staffing information to Christopher Murray and Associates for its staffing study.¹⁰⁵ The need for reconciliation indicated that the Department's personnel data base tracking system continued to fail at tracking positions and vacancies. DJJ reports improved processes as of November.¹⁰⁶ This representation having been made several times before, the proof will be in the maintenance of an accurate database over time. A hopeful development is the recent acquisition of a dedicated position responsible for the reconciliation process.¹⁰⁷

Operational support staff still do not track the hiring process for persistent vacancies and bureaucratic delays.¹⁰⁸ There appear to be prolonged vacancies in some

¹⁰³ See Seventh Report of the Special Master (April 2008), pp. 33-35. These pages provide the factual basis for the remainder of this paragraph.

¹⁰⁴ The Department's personnel data base does still rely on a list of employees who cannot be reassigned. Statements of operational support personnel management during central office site visit, July 23, 2009 and during teleconference, July 26, 2009.

¹⁰⁵ Statements of operational support personnel management staff during site visit, July 23, 2009. This is the source for the following sentence, as well.

¹⁰⁶ See DJJ, Response to Draft 11th Special Master's Report prepared October 2009.

¹⁰⁷ *Id.*

¹⁰⁸ See statements of operational support personnel management staff during site visit, July 23, 2009.

facility positions.¹⁰⁹ There is evidence that previously reported difficulties with Live Scan persist,¹¹⁰ due at least in part to legally mandated wait-times.¹¹¹ California's current crisis has presented new problems in 2008 and 2009. DJJ, like other state agencies, is subject to a hiring freeze that makes it difficult to fill vacant positions on a "limited term" basis.¹¹² The processes for securing exemptions from the hiring freeze and the limited term requirement apparently move slowly, impeding the hiring of necessary personnel.¹¹³

The special master recognizes that the California budget crisis is an extraordinary circumstance and that some limited term positions may be needed in a system that has

¹⁰⁹ Based on statements of staff and documents provided to the OSM monitors, the following vacancies were unfilled at Stark as of January 27, 2009: 75 teacher/teaching assistants (out of 181 positions), 14 support staff/office technicians (out of 42 positions), 13 food services positions (30) (two living unit kitchens had been closed), 8 maintenance/plant operations positions (of 37), 7 (of 9) supervising case work specialists, 19 (of 27) case work specialists, 3 treatment team supervisors, 3 senior youth correctional counselors, 3 (of 7) senior psychologists, 3 psychiatrists, 3 psychiatric technicians, and 7 psychologists. Staff at SYCRCC provided vacancy data in March 2009; its vacancies were much fewer, but some had been unfilled for over a year, and a training officer position had been vacant for almost two years. In November 2009, the education experts reported delays in hiring to the special master. Statements of the education experts to Donna Brorby, November 18, 2009.

¹¹⁰ In March 2009, difficulties with the LiveScan process were delaying attempts to fill a disabilities coordinator vacancy. Statements of staff during DJJ Court Compliance Task Force meeting, March 12, 2009. A personnel specialist at Stark also described ongoing delays in the LiveScan process in January 2009.

¹¹¹ State law requires that when LiveScan fingerprints are taken at a "relaxation" site, the applicant must wait 30 days to request a resubmission of fingerprints. DJJ, Response to Draft 11th Special Master's Report, provided November 17, 2009. Another possible source of hiring delays may be DJJ facilities' loss of delegated testing authority in the 2005 merger with CDCR; there is a question whether the facilities' testing needs are adequately served by CDCR. See statements of personnel specialist during Stark site visit, January 26-27, 2009. Delegated testing authority would allow DJJ to schedule and administer many employment exams itself. Currently, personnel specialists at DJJ facilities must assign job candidates to testing slots on CDCR's testing schedule. CDCR does not designate sufficient slots to DJJ candidates and does not invite relevant DJJ staff to meetings regarding testing needs. If true, the result is delayed testing for DJJ job candidates, which reportedly causes facilities to lose prospective hires to the adult facilities. See *id.*

¹¹² Statements of operational support personnel management staff during meeting with the special master, July 23, 2009. With a limited term position, the incumbent will have no civil service rights with respect to the position at the end of the term unless the position is converted to a regular position. *Id.* There was a period during which DJJ was restricted to limited term hiring and the adult system was not, and this placed DJJ at a competitive disadvantage. Since that time, Secretary Cate has imposed the limited term restriction throughout CDCR. See DJJ, Response to Draft 11th Special Master's Report provided October 2009 (attachment); e-mail of Ugarkovich to the special master, September 2009.

¹¹³ See, e.g., statements of Norma Mori-Fong during SYCRCC site visit, March 17-18, 2009 (stating that the exemption approval process can take up to two months); statements of Miguel Cervantez during Stark site visit, January 26-27, 2009 (same); see also e-mail of Doug Ugarkovich to Donna Brorby, September 17, 2009 (forwarding e-mail in which an information technology manager cited the freeze exemption process and limited term exemption process for hiring delays).

been closing facilities and reducing positions.¹¹⁴ But, DJJ nevertheless needs to track vacancies and the process of filling them, and ensure that they are filled expeditiously.

C. Information Technology (IT)

In her seventh report, the special master found that the CDCR-Enterprise Information Systems Support's prior software applications appeared to be well-managed and effective.¹¹⁵ All positions were filled, and it was anticipated that three programming positions and a part-time clerical support position would be added for fiscal year 2008-2009.¹¹⁶ Since that time, the DJJ EIS group added four programmer positions and a manager position, though as of September 2009 it has four programmer vacancies.¹¹⁷ The Department of Finance has identified a need for an additional 1.5 professional positions.¹¹⁸

At the time of her seventh report, the special master was concerned that DJJ had not identified and prioritized its IT support needs.¹¹⁹ DJJ has since produced an exhaustive, prioritized list of pending IT projects¹²⁰ and a report on IT infrastructure needs and priorities.¹²¹ The IT Priority Board that formed in August 2007 continues to

¹¹⁴ The Murray and Associates staffing analysis conducted in 2008-2009 process the "essential" for DJJ staffing. *See, e.g.*, Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules and Sealing of Staffing Model and Business Rules, July 31, 2009. As discussed above, Murray and Associates are studying central office staffing now.

¹¹⁵ *See* Seventh Report of the Special Master, pp. 35, 37.

¹¹⁶ *See id.*, p. 37. The unit was comprised of nine staff programmers, four senior programmers, two managers, a senior information systems analyst (specialist) and a system software specialist II. *Id.*

¹¹⁷ E-mail of Pankaj Varshney to Rachel Stern, August 19, 2009. Current authorized positions include 3 managers/ supervisors, 5 senior programmer/information systems analysts, 1 system software specialist II, 10 staff programmer/information system analysts, and 3 associate programmer/information system analysts. *Id.*

¹¹⁸ *Id.*

¹¹⁹ *See* Seventh Report of the Special Master (April 2008), p. 38.

¹²⁰ *See* Appendix E, DJJ IT Priority Board, List of Pending IT Project Requests, undated (provided June 22, 2009).

¹²¹ Statements of Pankaj Varshney and Bob Eden during central office site visit, June 22, 2009. Chief information systems are in projects to local entities especially at SYCRCC and Ventura. *Id.*

meet regularly with CDCR-EIS regarding IT needs.¹²² For many, if not all, IT projects, the creates “Project Data Sheets” that identify goals, constraints, functional requirements, status, and issues of concern.¹²³ The technical assistance consists of available staff and funding.¹²⁴ And, the efforts to improve and maintain IT resources will be to incorporate plans for the transition from Exchange to the R’s Strategic Offender Management System (SMS) schedule to occur the beginning of 2012.¹²⁵

The WIN Exchange continues to operate at all sites, and each facility is assigned three technical assistance staff members.¹²⁶ WIN programmers continue to enhance WIN in tandem with the development of new DJJ policies.¹²⁷ The WIN programming team reports that the level of communication and coordination between IT and program area staff as improved as a result of the project area development processes.¹²⁸ The WIN programming team still consists of senior programmer Bob Eden, six full-time

¹²² See, e.g., *id.*; see also Seventh Report of the Special Master (April 2008), p. 38.

¹²³ A sample is attached as Appendix C, Project Data Sheet: DDMS Mental Health Treatment Plan, June 16, 2009.

¹²⁴ See statements of Pankaj Varshney and Bob Eden during central office site visit, June 22, 2009.

¹²⁵ Statements of Bob Eden and Pankaj Varshney during central office site visit, June 22, 2009; see also Press Release, California Department of Corrections and Rehabilitation, CDCR Strategic Offender Management System Project will Automate and Streamline Information Sharing, April 22, 2009, available at http://www.cdcr.ca.gov/News/2009_Press_Releases/April_22.html.

¹²⁶ Statements of Bob Eden during central office site visits, June 22, 2009. Various facility staff across the state continue to oversee the State’s SM OSMs’ safety and welfare auditing between October 2008 and March 2009.

¹²⁷ For example, recent policies such as the Disciplinary Decision-Making System (DDMS) and Suicide, Prevention, Assessment, and Response, will be accompanied by extensive changes and improvements to WIN functions.

¹²⁸ Statements of Bob Eden and Ken Sandoval during central office site visit, June 22, 2009. An IT representative participates on the Administrative Project Review Board that oversees the project charter process. Statements of Ken Sandoval during central office site visit, June 22, 2009. Additionally, the senior WIN programmer and a CDCR IT liaison participate in the weekly Court Compliance Task Force meetings. Statements of Bob Eden and Pankaj Varshney during central office site visit, June 22, 2009. OSM staff also participate in these meetings via teleconference and have observed the information sharing, problem solving, and other forms of collaboration between IT and program staff in various remedial areas.

WIN programmers, and one part-time retired annuitant programmer.¹²⁹ Two temporary pro rars' co tracts expire o st 0 2009 t Mr E e opes to ac ire a additional part-time retired annuitant next year.¹³⁰

The safety and welfare expert has highlighted three priorities for the further development of the WIN system: 1) develop a system to monitor youth participation and progress in various treatment options, 2) develop a routine system to audit the accuracy and completeness of the data in WIN, and 3) develop the capacity to integrate risk/needs assessment data in WIN.¹³¹ The third priority area reaches far beyond WIN programming. One aspect of the problem is that because risk/needs assessment screening data is not integrated into the WIN system,¹³² staff must enter much of the same youth data twice: once into WIN and once into the risk/needs assessment data system.¹³³ Other aspects of the risk/needs assessment data issue are more complicated.

As previously reported, DJJ contracted with Orbis Partners, Inc. (Orbis) in June 200 for t e e lo p e t of a ris ee s assess e ti str e t for 's o t population.¹³⁴ Orbis revised its Youth Assessment and Screening Inventory (YASI) to include additional items and named the revised version the California YASI (CA-YASI).¹³⁵ New staff were hired, trained, and have administered the CA-YASI to all DJJ

¹²⁹ Statements of Bob Eden during central office site visit, June 22, 2009.

¹³⁰ o f s are a ailable for t e exte sio of t e pro rars' co tract State e ts of o E e ri central office site visit, June 22, 2009.

¹³¹ See memorandum of Barry Krisberg to Donna Brorby, April 10, 2009, p. 3.

¹³² See, e.g., statements of Michael Brady during central office site visit, June 22, 2009; see also memorandum of Barry Krisberg to Donna Brorby, April 10, 2009, p. 3.

¹³³ Statements of Pankaj Varshney and Bob Eden during central office site visit, June 22, 2009.

¹³⁴ See Seventh Report of the Special Master (April 2008), Appendix E (DJJ, Standard Agreement, Number DJJ.06019, Orbis Partners, Inc., June 14, 2007).

¹³⁵ See, e.g. "Yo t s assess e ta Scree i e tor alifor ia" for 200 PoP 2 2 Septe er 5, 2008).

youth.¹³⁶ However, DJJ is dependent on its contractual relationship with Orbis to obtain individual and aggregate CA-YASI-generated youth data.¹³⁷ Another problem is a lack of integration of CA-YASI data with the WIN system. DJJ has sought funding for an application to integrate various screening and assessment tools with WIN and other systems.¹³⁸ This application is called the Juvenile Risk/Needs Assessment Management System (JRAMS) and would be built on the CA-YASI. CDCR submitted requests to the California Office of the Chief Information Officer (OCIO). The OCIO denied the request two years in a row because it deemed the proposed application fiscally redundant of an existing application within CDCR. DJJ plans to renew its request for funding, this time in order to integrate CA-YASI with the SOMS system scheduled to replace WIN in 2012.¹³⁹

The existing JRAMS application is an assessment tool called “COMPAS” (Correctional Offender Management and Profiling Alternative Sanctions), an automated database and analysis system centered on risk/needs assessment for adult prisoners.¹⁴⁰ The COMPAS instrument was developed by a vendor called Northpointe. This vendor also offers a juvenile risk/needs assessment instrument, which prompted the OCIO to reject DJJ’s JRAMS proposal.¹⁴¹ Apparently, neither COMPAS tool has been validated

¹³⁶ See, e.g., statements of Tammy McGuire during Case Management Conference, July 9, 2009.

¹³⁷ Statements of Michael Brady and Pankaj Varshney during central office site visit, June 22, 2009; DJJ, Response to Draft 11th Special Master’s Report provided October 2009.

¹³⁸ Unless otherwise noted, the information contained in this and the following paragraph is based on the statements of Michael Brady during central office site visit, June 22, 2009.

¹³⁹ See, e.g., DJJ, Response to Draft 11th Special Master’s Report, provided November 17, 2009; e-mail of Rachel Stern to Aubra Fletcher, et al., November 19, 2009.

¹⁴⁰ See David Farabee and Sheldon Zhang, “COMPAS Validation Study: First Annual Report” (October 31, 2007), p. 3, available at http://www.cdcr.ca.gov/Adult_Research_Branch/Research_Documents/COMPAS_Validation_Dec_2007.pdf; statements of Michael Brady during central office site visit, June 22, 2009.

¹⁴¹ See Appendix F, Project Data Sheet: JRAMS, June 18, 2009.

for several of the files attached to its electronic correspondence.¹⁴² At this time, the future role and method of risk/needs assessment is dependent on the outcome of the IBTM project.¹⁴³

IV. INTEGRATED BEHAVIOR TREATMENT MODEL

Under the stipulated order entered on July 2, 2009, the safety and welfare, mental health, and sexual behavior treatment experts are responsible for drafting the integrated behavior treatment model “IBTM” description, implementation plan, and manual, in regular consultation with the parties and the special master.¹⁴⁴ They have delegated the drafting to Drs. Henry Schmidt and Angela Wolf, as permitted by the July 2, 2009 order.¹⁴⁵ The experts filed an IBTM work plan on July 29, 2009 and bi-weekly progress reports since that time.¹⁴⁶ The experts provided an interim draft on November 9, 2009.¹⁴⁷ The July 2 order requires the experts to complete a detailed, written IBTM description within 90 days of providing the work plan, which falls on October 28, 2009.¹⁴⁸ However, the special master and the parties have agreed to extend the deadline until November 30, 2009 at the experts’ request.¹⁴⁹ The parties then will have thirty days to meet and confer with the experts and file objections, if any, to the experts’ description.¹⁵⁰

¹⁴² E-mail of Bernard Warner to special master, November 11, 2009.

¹⁴³ See, e.g., statements of the mental health and safety and welfare experts during meeting with the parties and special master, August 20, 2009. Regardless, DJJ/EIS plans to propose JRAMS to the OCIO again in the near future. See, e.g., statements of Pankaj Varshney during DJJ Court Compliance Task Force meeting, October 5, 2009.

¹⁴⁴ See Order Concerning Integrated Behavioral Treatment Model, July 2, 2009.

¹⁴⁵ Statements of the safety and welfare and mental health experts during meetings and teleconferences with the parties and special master, August 20, September 25, October 14, and October 26, 2009.

¹⁴⁶ See e-mail of Eric Trupin to Michaela et al. 1/29/2009 attached to “IBTM work plan.” The work plan and the progress reports through mid-October 2009 are attached as Appendix G.

¹⁴⁷ See e-mail of Eric Trupin to Mike Brady, et al., November 9, 2009.

¹⁴⁸ See Order Concerning Integrated Behavioral Treatment Model, July 2, 2009 at ¶ 2.

¹⁴⁹ See *id.* (permitting extension with approval of the special master and the parties). The parties, experts, and special master agreed to the November 30, 2009 deadline in teleconferences held on October 14 and 26, 2009.

¹⁵⁰ See Order Concerning Integrated Behavioral Treatment Model, July 2, 2009, at ¶ 4.

Drs. Schmidt and Wolf have spoken with many DJJ staff, visited some DJJ facilities, and requested and received substantial documentary information.¹⁵¹ They report that DJJ managers and staff at every level have consistently supported their efforts.¹⁵² DJJ repeatedly has offered to make staff available to Drs. Wolf and Schmidt, as an IBTM team under their lead.¹⁵³ The experts and parties discussed this arrangement in August 2009, but the experts concluded that a team would significantly slow the drafting process.¹⁵⁴ The experts and Drs. Wolf and Schmidt have stated their plan to form a DJJ IBTM implementation work group after finalizing the IBTM description; that they also intend to engage a broader group of DJJ staff in “to all” eeti s s c as the two they held on September 30 and October 14, 2009.¹⁵⁵ The experts, Drs. Schmidt and Wolf, the parties, and the special master agree that successful implementation of the IBTM will require an enthusiastic stakeholder group that believes in and has a sense of ownership of the IBTM to implement it successfully.¹⁵⁶

V. MENTAL HEALTH SERVICES

The Mental Health Re-evaluation Plan’s Standards and Criteria assist the office of certain requirements to the special master. The office of the special master conducted

¹⁵¹ Statements of Drs. Schmidt and Wolf during conferences, August 20, 2009 and September 25, 2009; *see also* Appendix G (biweekly progress reports).

¹⁵² *Id.*

¹⁵³ Statements of Bernie Warner and Michael Brady during conferences, August 20, 2009 and September 25, 2009; e-mail of Michael Brady to Terry Lee, et al., October 12, 2009. The Washington State JRA integrated treatment model program description was produced over a period of two years by an interdisciplinary JRA ITM committee led by Dr. Henry Schmidt. *See* Juvenile Rehabilitation Administration, Integrated Behavior Treatment Program Report (2002), pp. 4, 6-11, *available at* <http://www.dshs.wa.gov/jra/treatment/index.shtml#ITM>.

¹⁵⁴ *See* memorandum of Donna Brorby to participants in August 20, 2009 “Mental Health Summit” September 8, 2009, p. 2.

¹⁵⁵ Statements of Henry Schmidt, Angela Wolf, Barry Krisberg, and Eric Trupin during conferences, August 20 and September 25, 2009; *see also* Appendix G (October 9, 2009 and October 23, 2009 bi-weekly updates).

¹⁵⁶ *See* statements of Henry Schmidt, Angela Wolf, Barry Krisberg, and Eric Trupin during conferences, August 20, 2009 and September 25, 2009.

a round of site visits to monitor these items between October 2008 and May 2009. A report of their findings has been provided to the mental health experts and is attached as Appendix H.

VI. FARRELL EXPERTS' PRIORITIES

In August 2009, the *Farrell* experts identified priority areas for fiscal year 2009-2010 and provided this information to the parties.¹⁵⁷ Also in August, DJJ agreed to develop a timeline for compliance with the priority requirements.¹⁵⁸ The parties, experts, and the office of the special master (OSM) scheduled a September 29, 2009 meeting to discuss the timeline. DJJ has postponed this meeting as of Plaintiff's counsel or the experts with a proposed timeline.¹⁵⁹

VII. STATUS UPDATE ON RESET DEADLINES

February 20, 2009 and March 2, 2009 testimony reports proposed modifications of certain *Farrell* deadlines.¹⁶⁰ In June 2009, OSM reported on the status of items with reset deadlines that had passed as of December 31, 2008.¹⁶¹ Appendix B to this report summarizes the status of requirements with deadlines reset for dates between January 1 and June 30, 2009.

¹⁵⁷ See Appendix I (Experts' Priorities for Fiscal Year 2009-2010).

¹⁵⁸ Statements of Michael Brady during meeting of the experts, OSM, and the parties, August 21, 2009.

¹⁵⁹ DJJ has provided a draft timeline to OSM. See e-mail of Dorene Nylund to Aubra Fletcher, et al., September 2, 2009 "Propose critical Pat Priority Projects" dated prior to October 2009. As of November 11, 2009, this timeline was still a working draft, and DJJ had not shared it with the experts or Plaintiff's counsel. E-mail of Michael Brady to Aubra Fletcher and Donna Brorby, November 11, 2009.

¹⁶⁰ Order, February 20, 2009, at 2-3; Order, March 27, 2009, at 2.

¹⁶¹ See Ninth Report of the Special Master (June 2009), Appendix B (Status of Items with Modified Deadlines).

VIII. CONCLUSION

The special master respectfully submits this report.

Dated: November 20, 2009

Donna Brorby
Special Master



P0004 - Program Service Day (PSD)

#	Description of Issue	Impact to Project	Response Action	Action Plan	Action Taken (Historical Action Log)	Assign To	Due Date
I-1	PERSONNEL: Lack of Farrell Staffing	High	Escalate	Issue raised to APRB	Establish and fill vacant positions - Identification of personnel gaps has been accomplished	Shannon Desmarais	
I-2	ACADEMY: No Academy available through June 30, 2009	High	Escalate	Issue raised to APRB	Schedule Academy - Academy was cancelled? - Tried to personnel issue above (I-1)		
I-3	HEALTH CARE: HQs team representative Joan Reyes is unavailable to commit to attend meetings	High	Escalate	Issue raised to APRB	Need representative that is able to represent Health Care Services - Health Care Services has been notified, need response - Jean Reyes will be attending more due to slowdown in training schedules		
I-8	IT: Need participation of IT to formulate baseline for compliance & QA issues	High	Escalate	Request for exemption for travel	Request for exemption of travel currently being requested - Schedule development in progress; however, testing needs to occur at pilot site (Preston) - Alternatives: Pilot at HG Stark for schedule portion and/or teleconference for information. - Travel exemption was approved by Mr. Warner on 2/11/09. - Travel funding has not yet been guaranteed (2/25/09) - On 3/4/09, a travel advance was approved by CALATERS for the IT staff to travel (3/5/09)	Eric Umeda	



P0003 - Behavior Treatment Program

#	Description of Issue	Impact to Project	Response Action	Action Plan	Action Taken (Historical Action Log)	Assign To	Due Date
I-1	IT: Need HQ team member from IT to develop IT/WIN for BTP	High	Escalate	Issue raised to APRB			
I-2	PERSONNEL: Need HQ team member from Personnel to review staffing levels for BTP program	High	Escalate	Issue raised to APRB	Current member is no longer available; need replacement to address BTP needs. No date has been issued as to the official authorization of staffing level		
I-3	4/17/09 impact: Resource Contention re: Jimi & Ken's availability			TBD			
I-4	4/16/09 impact: Staff not trained on the YASI. Supervisors need to know how to put in.			Need to confirm staff is trained.	YASI training were directed to caseworkers and parole agents initially, and a tentative training will be provided by DRBIS Partners, Inc. in the future. No date has been set at this time.		
I-5	x/2009 impact: IT - Need HQ team member from IT to develop IT/WIN for BTP			Issue raised to APRB		APRB	

Aubra Fletcher

From: Aubra Fletcher
Sent: Friday, September 18, 2009 6:26 PM
To: BKrisberg@aol.com
Subject: Behavior contracts

Hi, Barry. I'm writing an attachment to the special master's 11th report, about requirements with reset deadlines that expired this year. I have some questions for you about item 8.6.2a ("Behavior contracts to earn back added time. Audit method/standard: Policy in place. Behavior contracts in use. Contracts are consistent with goals set forth in Remedial Plan. Some youth successfully restore time.")

As you know, DJJ rewrote its program credits policy to provide for these contracts, and implementation was scheduled for 3/31/09 (the reset deadline set by the Court).

Here's the information I have from your informal reports:

O.H. Close (January 2009?): SC—"OH[] Close works hard to reduce time adds and to allow youth to earn back lost time."

Chad (Feb. 2009): BC—"Staff are being train[ed] on this new policy and it is expected that it will be implemented in March 2009"

Stark (April 2009): NC—"Policy new and staff still need training on how best to do this."

Preston (May 2009): BC—"Training on this was just occurring during my site visit."

SR (June 2009): SC—no comment included

Ventura (June 2009): SC—no comment included

One question is about your comments that training was still needed or only just occurring at Stark and Preston in April and May. DJJ's PoP 374 (4/6/09) says staff training for the program credit policy was completed in February. But staff told you they were still being trained or had not yet been trained in April and May? Do you remember if you talked to many staff about it, I wonder if some might have been trained earlier, or if all staff were being trained as late as April and May.

Another question is about O.H. Close—we have on our calendar that you were there in January—is that right? Were they implementing the behavior contracts on their own before the policy was distributed to the facilities for implementation? I'd like to highlight that for the Court's attention if so—as an example of initiative and efficiency on the part of a DJJ facility.

My third question is about SR and Ventura, who got SC ratings based on audits after the policy was implemented—I want to provide the Court with some specific information about their compliance with the outcome measures specified in the standards and criteria (contracts in use, contracts consistent with plan goals, some youth restoring time)—how many youth were restoring time via these contracts? Were there any notable examples or best practices in terms of the content of these contracts, etc.? One of the plan's "goals" appears to be that contract conditions will require positive conduct, not just the absence of misconduct. Did you see any good examples of that—if so, does that indicate a positive shift in how staff view positive and negative incentives? Anything else of note?

Thanks.

Aubra

Aubra Fletcher
Office of the Special Master, *Farrell v. Cate*
605 Market Street, Ninth Floor
San Francisco, CA 94105
Phone: (415) 348-0853 x313
Fax: (415) 495-7204
afletcher@brorbylaw.com

Aubra Fletcher

From: Barry Krisberg [bkrisberg@aol.com]
Sent: Friday, September 18, 2009 7:32 PM
To: Aubra Fletcher
Cc: Michael K. Brady; snorman@prisonlaw.com
Subject: Re: Behavior contracts

This is a trivial and inconsequential issue. Not worth my time to deal with and I am amazed that the OSM spends time on this stuff.

Sent from my iPhone

On Sep 18, 2009, at 6:25 PM, "Aubra Fletcher" <afletcher@brorbylaw.com> wrote:

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As you know, DJJ rewrote its program credits policy to provide for these contracts, and implementation was scheduled for 3/31/09 (the reset deadline set by the Court).

Here's the information I have from your informal reports:

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From: Aubra Fletcher
Sent: Sunday, September 20, 2009 4:26 PM
To: Barry Krisberg
Cc: Michael K. Brady; snorman@prisonlaw.com
Subject: RE: Behavior contracts

Barry, I'm a little troubled by the tone of your email - as a non-expert, it is not obvious to me that the development of behavior contracts for kids to earn back added time is trivial and inconsequential. It would be more helpful for us to understand why you think it is not important, so that we're making informed decisions about how to use our time - and what best to report to the Court.

(I'm not sure why Mike and Sara are cc-ed, but now that they're in the conversation, I'm going ahead with the 'reply all.')

Aubra

Aubra Fletcher
Office of the Special Master, Farrell v. Cate
(415) 348-0853
afletcher@brorbylaw.com

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Sent: Fri 9/18/2009 7:31 PM
To: Aubra Fletcher
Cc: Michael K. Brady; snorman@prisonlaw.com
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> reset deadline set by the Court).
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Aubra Fletcher

From: Barry Krisberg [bkrisberg@aol.com]
Sent: Sunday, September 20, 2009 8:01 PM
To: Aubra Fletcher
Cc: Michael K. Brady; snorman@prisonlaw.com
Subject: Re: Behavior contracts

Let's start with why the OSM is so involved in the SW area -- I think that there are lots of other Farrell areas that might want or need your help more than me. I have never been shy in asking for help when I need it. An easy fix would be to ask the subject matter expert if a specific focus would be helpful I would have said no in this area and many others.

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Aubra Fletcher

From: Aubra Fletcher
Sent: Monday, September 21, 2009 12:00 PM
To: 'Barry Krisberg'
Cc: Michael K. Brady; snorman@prisonlaw.com
Subject: RE: Behavior contracts

My initial question was for a report about requirements with deadlines that were modified by the Court this year. We're describing the status of compliance with various reset deadline items, including the behavior contracts requirement and things like school classrooms for behavior management. The point of the report is to look at how well DJJ is setting realistic yet efficient deadlines. We are not singling out safety and welfare. I hope that context is helpful.

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(415) 348-0853
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Aubra Fletcher

From: Barry Krisberg [bkrisberg@aol.com]
Sent: Monday, September 21, 2009 1:30 PM
To: Aubra Fletcher
Subject: Re: Behavior contracts

A major issue to keep the reforms focused on priorities. Trying to track over 800 items ensures failure. You have priorities for last year and this--I would suggest the you look at these
Is anything in my area
Sent from my iPhone

On Sep 21, 2009, at 11:59 AM, "Aubra Fletcher" <afletcher@brorbylaw.com> wrote:

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Aubra Fletcher

From: Aubra Fletcher
Sent: Monday, September 21, 2009 3:04 PM
To: 'Barry Krisberg'
Subject: RE: Behavior contracts

Yes, we're doing that too with the priorities – those help us shape and focus the subject matter reports. This reset deadlines thing is an appendix, more than anything to our systems issues/"project management" reporting. I understand what you're saying about tracking 800+ items. It looks like your email got cut off in the middle of the last sentence – it looks like the beginning of a question – let me know.

Thanks.

Aubra

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Aubra Fletcher

From: Barry Krisberg [bkrisberg@aol.com]
Sent: Monday, September 21, 2009 3:35 PM
To: Aubra Fletcher
Subject: Re: Behavior contracts

I am very busy--suggest you work independently

Sent from my iPhone

On Sep 21, 2009, at 3:04 PM, "Aubra Fletcher" <afletcher@brorbylaw.com> wrote:

Yes, we're doing that too with the priorities-- those help us shape and focus the subject matter reports. This reset deadlines thing is an appendix, more than anything to our systems issues/"project management" reporting. I understand what you're saying about tracking 800+ items. It looks like your email got cut off in the middle of the last sentence -- it looks like the beginning of a question -- let me know.

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Appendix B
Status of Items with Modified Deadlines
Aubra Fletcher, *Farrell* Monitor
September 2009

The Court modified certain *Farrell* deadlines on February 20, 2009 and March 27, 2009.¹

The Ninth Report of the Special Master attached a summary of the status of items with reset deadlines that expired in 2008.² This report summarizes the status of requirements with deadlines reset for dates between January 1 and June 30, 2009. This summary does not include those requirements for which no new deadlines have been set but which DJJ represented would be complete by June 30, 2009.³

A. Education: Behavior Management (Standards and Criteria items 3.33, 3.34, and 3.35)

DJJ is generally compliant with items 3.33, 3.34, and 3.35. The remedial plan requires “a structured positive behavior management system in each classroom or service provider area consistent with adopted treatment modalities to be implemented with training by December 2005.”⁴ The revised deadline for this item is March 31, 2009.⁵ The education experts audited all DJJ facilities between October 2008 and May 2009 and rated five of six DJJ facilities substantially compliant with this requirement.⁶ The sixth facility, SYCRCC, received a partial

¹ See Order, February 20, 2009, at 2-3; Order, March 27, 2009, at 2.

² See Ninth Report of the Special Master (June 2009), Appendix B (Status of Items with Modified Deadlines).

³ See Deft. Response to the Court’s October 27, 2008 Order, November 21, 2008, Exhs. D–I. DJJ recently provided a report on compliance with these requirements, parts of which are difficult to decipher. See DJJ Quarterly Report (July 31, 2009), section entitled “Master Status List of Items Due to be Completed by June 30, 2009,” p. 1. For example, DJJ classifies the “overall status” of every listed education requirement as “[c]omplete” while simultaneously indicating that several items are still “[i]n [p]rogress” at two or more facilities. The document also indicates that some of these requirements, though “overall” “[c]omplete,” are not “on [t]rack for [c]ompletion by June 30.”

⁴ See Education Remedial Plan, p. 30. DJJ must develop policy and procedures to guide this behavior management system. Education Remedial Plan Standards and Criteria, p. 7, item 3.33.

⁵ Order, February 20, 2009, at 2.

⁶ See Tenth Report of the Special Master (September 2009), Appendix A (O’Rourke and Gordon Report), Attachment, p. 2.

compliance rating based on the living units’ consistent failure to issue disciplinary behavior reports for refusals to attend school.⁷

The remedial plan also requires each high school to operate “an alternative behavior management classroom for early intervention short-term placements” in response to behavior problems at school.⁸ These classrooms are known as Alternative Behavior Learning Environments, or “ABLE classrooms.”⁹ As a part of this requirement, DJJ must train staff in the operation of the ABLE classrooms.¹⁰ The compliance deadline is March 31, 2009.¹¹ All but one site are substantially compliant with this requirement, and all sites have trained staff on the operation of these classrooms.¹² The experts have recommended that DJJ systematically track the operation of all sites’ ABLE classrooms against the guidelines.¹³

B. Safety and Welfare and Mental Health: Program Service Day (Standards and Criteria Items S&W 6.2a, 6.2b, 6.2c, and 6.6; MH 5.18)

The Safety and Welfare Remedial Plan requires DJJ to develop and implement a statewide “program service day” scheduling system that will “minimize conflicts while ensuring that youth receive necessary treatment/rehabilitation services and are constructively active during most of their waking hours.”¹⁴ The schedule must include “coverage by every discipline” during

⁷ See *ibid.*; Robert Gordon and Tom O’Rourke, SYCRCC Remedial Plan Site Compliance Report, May 2009, p. 9.

⁸ See Education Remedial Plan, p. 30; Education Remedial Plan Standards and Criteria, p. 7, item 3.34.

⁹ See, e.g., Tenth Report of the Special Master (September 2009), Appendix A (O’Rourke and Gordon Report), p. 6.

¹⁰ Education Remedial Plan Standards and Criteria, p. 7, item 3.35.

¹¹ Order, February 20, 2009, at 2.

¹² See Tenth Report of the Special Master (September 2009), Appendix A (O’Rourke and Gordon Report), Attachment: California Remedial Site Compliance Report, p. 2. The experts found that the Stark facility was not operating its ABLE classroom according to all established guidelines in May 2009. See Tenth Report of the Special Master (September 2009), p. 7 (citing expert findings); Tom O’Rourke and Bob Gordon, Lyle Egan High School Corrective Action Plan Summary, May 18, 2009, pp. 2-3. An internal audit in June 2009 found that Stark was compliant with the previously unenforced guidelines. DJJ, Response to Draft 11th Special Master’s Report, provided November, 17, 2009.

¹³ See Tenth Report of the Special Master (September 2009), p. 7 (citing expert findings); Tom O’Rourke and Bob Gordon, Lyle Egan High School Corrective Action Plan Summary, May 18, 2009, pp. 2-3; statements of education experts during meeting with DJJ, June 2, 2009.

¹⁴ See Safety and Welfare Remedial Plan, pp. 44-45.

some evening and weekend hours.¹⁵ The court reset deadlines for all program service day requirements to March 31, 2009.¹⁶ The special master described the numerous ongoing problems in DJJ's design and implementation of the program service day in her September 2009 report.¹⁷

The remedial plan also requires DJJ to develop a program service day schedule for its Behavior Treatment Programs (BTPs) by December 15, 2006 and to implement the schedule on a staggered basis between January 1, 2007 and July 1, 2008.¹⁸ The Court reset these deadlines to March 31, 2009.¹⁹ As of September 2009, DJJ has not opened any BTPs, though it has produced a preliminary design and implementation plan for these units.²⁰ A central office program workgroup drafted a recommended program service day schedule for the BTPs in August 2008²¹ and an updated model schedule in July 2009.²² OSM will report more extensively on the BTP program service day schedules in the coming audit round.

C. Safety and Welfare: Use of Force Policy (Standards and Criteria Items 3.2a and 3.2b)

The remedial plan requires DJJ to revise its use of force policy by August 1, 2007²³ and train staff on the new policy by April 1, 2008.²⁴ The Court reset these deadlines to March 31,

¹⁵ *Id.*, p. 45.

¹⁶ Order, February 20, 2009, at 2.

¹⁷ See Tenth Report of the Special Master (September 2009), pp. 9-14; *contra* DJJ Quarterly Report (July 31, 2009), section entitled "Revised Deadlines for Select Standards & Criteria and Remedial Plans," p. 1, and section entitled "Master Status List of Items Due to be Completed by June 30, 2009," p. 2 (reporting that compliance efforts were in their "[f]inal [s]teps" and that the "overall status" of these requirements was "[c]omplete").

¹⁸ See Safety and Welfare Remedial Plan Standards and Criteria, item 6.6.

¹⁹ Order, February 20, 2009, at 2.

²⁰ See, e.g., Ninth Report of the Special Master (June 2009), Appendix D (Schwartz/Fletcher Report), pp. 37-38.

²¹ See draft Behavior Treatment Program Operations Guide, August 7, 2008, pp. 9-11.

²² See BTP Charter Workgroup, "Behavior Treatment Program," July 15, 2009, pp. 22-25.

²³ See Safety and Welfare Remedial Plan Standards and Criteria, item 3.2a.

²⁴ See *id.*, item 3.2b.

2009.²⁵ The revised policy must embody a prevention strategy to reduce violence and the use of force, one that is based on “a continuum of interventions [and] a use of force review model.”²⁶

DJJ revised its policy to conform more closely to the safety and welfare and mental health remedial plans²⁷ and reports that facilities implemented the policy on April 15, 2009.²⁸ The safety and welfare expert has characterized DJJ’s revised policy as a step toward compliance²⁹ and describes the policy as “an improvement” though it “still fails to meet the standard of supporting the conversion of DJJ to a model treatment model.”³⁰ The mental health experts also describe the policy as an “improvement”³¹ but add that it remains “more appropriate for an adult prison.”³² The new policy “still concentrates on administrative and logistical steps for using force, without emphasizing preventative or less intrusive measures.”³³

Some DJJ staff continue to use force inappropriately. The safety and welfare expert has stated that “DJJ needs to work to reduce the use of force in instances involving „controlled UOF” and circumstances in which the force is used by staff to respond to „defiance and failure to follow staff instructions.”³⁴ The mental health experts note that “[y]outh on the mental health caseload are disproportionately involved in use of force incidents, including chemical agents. In addition, chemical agents are sometimes used in response to youth self-harm, rather than an

²⁵ Order, February 20, 2009, at 2.

²⁶ Safety and Welfare Remedial Plan, p. 23.

²⁷ See Crisis Prevention and Management: Use of Force policy, Section #2080, Institutions and Camps Manual, February 6, 2009 (PoP #388, April 20, 2009).

²⁸ See, e.g., memorandum of Sandra Youngen and Doug McKeever to superintendents, et al., April 13, 2009 (PoP #388, April 20, 2009).

²⁹ See, e.g., memorandum of Barry Krisberg to the special master, September 26, 2008, p. 1 (“This draft contains some good thinking about definitions of roles and responsibilities It is encouraging to see more attention than previously to how to avoid the use of force whenever possible.”).

³⁰ Memorandum of Barry Krisberg to Donna Brorby, April 10, 2009, p. 6 [hereinafter Krisberg, Informal Report: Central Office (summary)].

³¹ See Terry Lee and Eric Trupin, Farrell Mental Health Experts’ 2008-2009 Site Visit Summary [draft], provided August 19, 2009, pp. 6-7.

³² *Id.*, p. 17 (assigning a BC rating to item 3.2a).

³³ *Id.*, p. 6.

³⁴ Krisberg, Informal Report: Central Office (summary), p. 6.

effective treatment program for self-harm behavior.”³⁵ The disabilities expert recently informed the Court that use of force remains “excessive” and that there is no documentation that staff provide accommodations to youth with disabilities when using force.³⁶

D. Safety and Welfare: Disciplinary Decision Making System (DDMS) (Standards and Criteria Item 8.4 (selected sub-items))

The Court reset the deadline for many DDMS requirements from March 31, 2007 to March 31, 2009.³⁷ The safety and welfare expert has found DJJ to be in substantial compliance with items 8.4.1b and 8.4.1d, which relate to training for disciplinary system coordinators.³⁸ Dr. Krisberg reports that all facilities’ disciplinary coordinators “have received training as new hires or refresher training.”³⁹ The remedial plan requires that this training be competency-based,⁴⁰ and the expert’s reports do not comment on compliance with this aspect of the requirement.⁴¹

Items 8.4.2a and 8.4.2b set timelines for disciplinary fact-finding hearings and disposition hearings, respectively.⁴² DJJ’s director of facilities instructed staff to abide by this remedial

³⁵ See Terry Lee and Eric Trupin, Farrell Mental Health Experts’ 2008-2009 Site Visit Summary [draft], provided August 19, 2009, pp. 6-7. These statements are based on data compiled by the special master’s office.

³⁶ Statements of Logan Hopper during Case Management Conference, September 17, 2009. The expert’s interviews of facility staff reflected potential problems in the new policy’s implementation. *Id.*

³⁷ Order, February 20, 2009, at 2.

³⁸ See Barry Krisberg, Headquarters - Implementation of Safety and Welfare Remedial Plan, provided March 13, 2009, p. 24 [hereinafter Krisberg, Informal Report: Central Office (grid)]; Barry Krisberg, OH CLOSE - Implementation of Safety and Welfare Remedial Plan – Checklist, provided May 12, 2009, p. 16 [hereinafter Krisberg, Informal Report: O.H. Close]; Barry Krisberg, Facilities - Implementation of Safety and Welfare Remedial Plan – Checklist, provided May 9, 2009, p. 17 [hereinafter Krisberg, Informal Report: Chaderjian]; Barry Krisberg, Implementation of Safety and Welfare Remedial Plan – HGS Checklist, provided April 15, 2009, p. 17 [hereinafter Krisberg, Informal Report: Stark]; Barry Krisberg, PRESTON Facilities - Implementation of Safety and Welfare Remedial Plan – Checklist, provided May 29, 2009, p. 17 [hereinafter Krisberg, Informal Report: Preston]; Barry Krisberg, SCYRCC [sic] 2009- Implementation of Safety and Welfare Remedial Plan – Checklist, provided July 16, 2009, p. 16 [hereinafter Krisberg, Informal Report: SYCRCC]; Barry Krisberg, VENTURA 2009 - Implementation of Safety and Welfare Remedial Plan – Checklist, provided July 16, 2009, p. 17 [hereinafter Krisberg, Informal Report: Ventura].

³⁹ See Krisberg, Informal Report: Central Office (summary), p. 12.

⁴⁰ See Safety and Welfare Plan, p. 70; Safety and Welfare Plan Standards and Criteria, item 8.4.1d.

⁴¹ See *ibid.*; Krisberg, Informal Report: Central Office (grid).

⁴² See Safety and Welfare Standards and Criteria, items 8.4.2a (fact-finding hearings to be held within 14 days), 8.4.2b (disposition hearings to be held within seven days).

requirement effective December 10, 2008,⁴³ though O.H. Close had already begun enforcing these time frames.⁴⁴ OSM monitors visited only Ventura, Stark, and SYCRCC after the implementation date; Ventura and Stark were substantially compliant with this requirement, and SYCRCC was partially compliant.⁴⁵ The director of facilities also instructed staff to institute a Level 1 appeals process, pursuant to audit item 8.4.4.⁴⁶ The safety and welfare expert began his audit round after the effective date and found three of DJJ's six facilities to be in substantial compliance.⁴⁷

Item 8.4.6a requires DJJ to enhance opportunities to earn back disciplinary time-adds.⁴⁸ This requirement is to be monitored together with item 8.6.3a, which requires DJJ to allow earn-backs after six months of good behavior rather than one year.⁴⁹ The standards and criteria assign monitoring of 8.4.6a to the safety and welfare expert and monitoring of 8.6.3a to the special master. In March 2009, the safety and welfare expert reported that DJJ was substantially compliant with requirement 8.4.6a.⁵⁰ His report did not disclose the factual basis for this finding. In June 2009, OSM assigned a "beginning compliance" rating for item 8.6.3a, because the policy had not been implemented as of the close of OSM's audit round in mid-March 2009.⁵¹ DJJ

⁴³ Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 41.

⁴⁴ See Informal OSM Site Visit Report, December 2008, p. 25.

⁴⁵ Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 41.

⁴⁶ See *id.*, Attachment 8.

⁴⁷ Dr. Krisberg assigned a partial compliance rating to O.H. Close and beginning compliance ratings to Chaderjian and Preston. See Krisberg, Informal Report: O.H. Close, p. 16; Krisberg, Informal Report: Chaderjian, p. 17; Krisberg, Informal Report: Stark, p. 17; Krisberg, Informal Report: Preston, p. 17; Krisberg, Informal Report: SYCRCC, p. 16; Krisberg, Informal Report: Ventura, p. 17.

⁴⁸ See Safety and Welfare Remedial Plan Standards and Criteria, item 8.4.6a; Safety and Welfare Remedial Plan, p. 71.

⁴⁹ See Safety and Welfare Remedial Plan Standards and Criteria, items 8.4.6a, 8.6.3a.

⁵⁰ See Krisberg, Informal Report: Central Office (grid), p. 24.

⁵¹ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 41-42. This rating was also based on the policy's non-retroactivity; however, OSM now understands the complex administrative difficulties that a retroactive rule change would entail. See statements of Tammy McGuire during central office site visit, November 3, 2009.

trained its facility staff on the new policy in February 2009⁵² and reports that it was implemented in early April 2009.⁵³ OSM is monitoring policy implementation in the next audit round.

Standards and Criteria item 8.4.6b requires DJJ staff to review youths' eligibility for restoration of time-adds during case conferences.⁵⁴ DJJ's new DDMS policy requires staff to review eligibility for restoration of added time at each case conference, if not sooner.⁵⁵ This policy had not been implemented as of the end of the monitors' audit round in mid-March 2009.⁵⁶ OSM found inconsistent practices across DJJ's six facilities.⁵⁷ The monitors will assess the implementation of this policy during their 2009-2010 audits.

E. Safety and Welfare: Time Adds (Standards and Criteria Items 8.6.2a-c, 8.6.4b)

The Court reset the deadline for requirements 8.6.2a-c and 8.6.4b from March 31, 2007 to March 31, 2009.⁵⁸ Items 8.6.2a and 8.6.2b require DJJ to allow youth, following the imposition of a disciplinary time-add, to enter into a "behavior contract" to earn back the added time.⁵⁹ The contracts should be relatively short and must include conditions "based on successful improvement in specific behaviors tailored to the youth's developmental stage, abilities, and behavioral issues."⁶⁰

DJJ incorporated behavior contracts in its revised program credit policy and instructed facilities to implement the policy on March 31, 2009.⁶¹ This date fell in the middle of the safety

⁵² Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 42-43.

⁵³ *Id.*, pp. 42-43, 43 n.396 ("Confusion about the implementation date ensued, and some staff thought it had been changed to April 4, 2009 The implementation of changes in WIN's DDMS functions did not occur until April 6, 2009.")

⁵⁴ See Safety and Welfare Standards and Criteria, item 8.6.2b.

⁵⁵ Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 41-42.

⁵⁶ *Ibid.*

⁵⁷ *Ibid.*

⁵⁸ Order, February 20, 2009, at 2.

⁵⁹ See Safety and Welfare Standards and Criteria, item 8.6.2a; Safety and Welfare Remedial Plan, p. 72.

⁶⁰ Safety and Welfare Remedial Plan, p. 72.

⁶¹ See, e.g., memorandum of Sandra Youngen and Doug McKeever to superintendents, et al., March 27, 2009 (PoP #374, April 6, 2009) (attaching copy of program credits policy).

and welfare expert's audit round. The expert assigned O.H. Close a substantial compliance rating based on his site visit in January 2009, prior to the implementation date.⁶² However, O.H. Close was not at that time using behavior contracts,⁶³ and OSM was unable to determine the basis for the expert's substantial compliance rating.⁶⁴ Chaderjian received a beginning compliance because the expert's visit coincided with pre-implementation training.⁶⁵ DJJ reports that staff training was complete in February 2009, in advance of the March 31, 2009 implementation date.⁶⁶ It is unclear whether training was in fact complete in February; the safety and welfare expert commented that Stark staff "still need[ed] training" as of April 2009,⁶⁷ and assigned Preston a beginning compliance rating because training "was just occurring" there in May 2009.⁶⁸ Dr. Krisberg assigned substantial compliance ratings to Ventura and SYCRCC based on site visits in June 2009, without indicating the basis for these ratings.⁶⁹ OSM is unable to reach a factual conclusion regarding the status of compliance at O.H. Close, Stark, Ventura, and SYCRCC.

Item 8.6.2b requires that an appropriate range of behavior contract time periods be specified by policy.⁷⁰ DJJ finalized a new program credit policy in March 2009,⁷¹ and the safety and welfare expert has approved its provisions relating to time periods.⁷²

⁶² See Krisberg, Informal Report: O.H. Close, p. 19.

⁶³ Statements of Yvette Marc-Aurele and Judi Nahigian during central office site visit, September 23, 2009.

⁶⁴ See Krisberg, Informal Report: O.H. Close, p. 19 (commenting only that "OH[] Close works hard to reduce time adds and to allow youth to earn back lost time."); Attachment 1, e-mail of Aubra Fletcher to Barry Krisberg, September 18, 2009, 6:26 p.m. and e-mails of Barry Krisberg to Aubra Fletcher, et al., September 18, 2009, 7:31 p.m. and September 21, 2009, 3:35 p.m.

⁶⁵ See Krisberg, Informal Report: Chaderjian, p. 20; memorandum of Sandra Youngen and Doug McKeever to superintendents, et al., March 27, 2009.

⁶⁶ See memorandum of Sandra Youngen and Doug McKeever to superintendents, et al., March 27, 2009 (PoP # 374, April 6, 2009).

⁶⁷ See Krisberg, Informal Report: Stark, p. 20 ("Policy new and staff still need training on how best to do this").

⁶⁸ See Krisberg, Informal Report: Preston, p. 20.

⁶⁹ See Krisberg, Informal Report: Ventura, p. 20; Krisberg, Informal Report: SYCRCC, p. 18.

⁷⁰ See Safety and Welfare Standards and Criteria, item 8.6.2b; Safety and Welfare Remedial Plan, p. 72.

⁷¹ See, e.g., memorandum of Sandra Youngen and Doug McKeever to superintendents, et al., March 27, 2009 (PoP #374, April 6, 2009).

Item 8.6.2c requires staff to coach youth to help them comply with their behavior contracts⁷³ “[w]henever possible.”⁷⁴ DJJ also asked the Court to reset the deadline for item 8.6.2c to March 31, 2009,⁷⁵ despite having informed the Court that it did not expect to complete this requirement prior to the end of fiscal year 2008-2009.⁷⁶ As he did for item 8.6.2a, the safety and welfare expert assigned substantial compliance ratings to three facilities,⁷⁷ beginning compliance ratings to two facilities,⁷⁸ and a non-compliance rating to one facility.⁷⁹ OSM draws no factual conclusions regarding DJJ’s compliance with this requirement.

DJJ must award full program credit when youth are not responsible for their non-participation in required programs, according to item 8.6.4b.⁸⁰ DJJ’s revised program credits policy instructs staff to comply with this mandate.⁸¹ The OSM completed its audit round prior to the policy’s scheduled implementation date. Though DJJ’s December 2008 report concluded that no time adds were imposed based on inadequate access to programs, DJJ did not retain the underlying evidence and analysis, and the monitors are unable to credit the conclusions.⁸² OSM will continue to monitor this requirement in the coming audit round. DJJ reports that it has

⁷² Krisberg, Informal Report: Central Office (grid) (rating this item SC); Krisberg, Informal Report: Central Office (summary), p. 14; statements of Barry Krisberg to Donna Brorby, September 8, 2009.

⁷³ See Safety and Welfare Standards and Criteria, item 8.6.2c.

⁷⁴ Safety and Welfare Remedial Plan, p. 72.

⁷⁵ See Proposed Order, February 20, 2009, p. 2.

⁷⁶ See Deft. Response to the Court’s October 27, 2008 Order, November 21, 2008, Exh. H, p. 8.

⁷⁷ See Krisberg, Informal Report: O.H. Close, p. 19 (“Cultur[e] of OHC is very supportive of youth success”); Krisberg, Informal Report: Ventura, p. 20 (providing rating without comment); Krisberg, Informal Report: SYCRCC, p. 19 (providing rating without comment).

⁷⁸ See Krisberg, Informal Report: Chaderjian, p. 20 (“[I]mplementation planned for March 2009. Staff at Chad were receiving training on the day of my site visit.”); Krisberg, Informal Report: Preston, p. 20 (“Training is just getting started”).

⁷⁹ See Krisberg, Informal Report: Stark, p. 20 (“As noted above HGS needs to improve positive and supportive interactions between staff and youth”).

⁸⁰ See Safety and Welfare Standards and Criteria, item 8.6.4b; Safety and Welfare Remedial Plan, p. 74 (“DJJ will provide full program credit when failure to participate in school, work, or treatment occurs through no fault of the youth.”).

⁸¹ Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 46.

⁸² *Ibid.*

improved mechanisms to document compliance with this item, in response to OSM's request in early 2009.⁸³

F. Mental Health: Suicide Prevention, Assessment and Response (SPAR) policy (Consent Decree, Section II, Interim Measures, Item 7c)

The Consent Decree required DJJ to develop and implement interim measures to address youths' self-harm behavior by December 15, 2004.⁸⁴ The Court reset this deadline to February 23, 2009.⁸⁵ The mental health experts approved the policy as an incremental improvement over past practices but have recommended that DJJ simplify the policy and procedures in their next iteration.⁸⁶

DJJ's central office instructed facilities to implement the policy on March 19, 2009.⁸⁷ Because DJJ distributed the policy to the facilities near the end of the mental health audit round, the experts had the opportunity to observe its implementation only at Stark and SYCRCC but did not do so in any systematic way.⁸⁸ This policy will be discussed in greater detail in the next special master's report.

G. Mental Health: Outpatient Staffing (Standards and Criteria Item 5.11)

The Court reset the deadline for this item from July 1, 2007 to March 27, 2009.⁸⁹ Compliance with this remedial requirement, and changes to the requirement itself, are discussed

⁸³ See, e.g., statements of Tammy McGuire during central office site visit, September 23, 2009.

⁸⁴ See Consent Decree ¶ 7.c.

⁸⁵ Order, February 20, 2009, at 2.

⁸⁶ See, e.g., Terry Lee and Eric Trupin, Farrell Mental Health Experts' 2008-2009 Site Visit Summary [draft], provided August 19, 2009, p. 4.

⁸⁷ See e-mail of Robert Rollins to DJJ facility staff, et al., March 19, 2009 (officially disseminating the SPAR policy to all institutions).

⁸⁸ See Terry Lee and Eric Trupin, untitled site report for Heman G. Stark, undated (provided September 25, 2009), p. 10 (reporting on policy training and content only); Terry Lee and Eric Trupin, untitled site report for SYCRCC, undated (provided September 25, 2009), p. 12 (reporting on staff training and the experience of one youth), p. 15 (reporting on lack of adequate system to track self-harm incidents).

⁸⁹ Order, February 20, 2009, at 2.

in detail in the attached mental health monitors' report. OSM has assigned a partial compliance rating based on an inadequate number of office technicians.

The Court approved changes to the remedial plan staffing requirements in July 2009,⁹⁰ and the monitors have not yet had the opportunity to verify compliance with the new requirements.

⁹⁰ See Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules and Sealing of Staffing Model and Business Rules, July 31, 2009.

Project Data Sheet

Version 1.4

5225-71 - WIN Farrell Project - DDMS Mental Health Treatment Plan

Date: June 16, 2009

Rank 7 EIS #57 A

Project EPM ID:	5225-71
Project Sponsor:	Bernard Warner
Project Manager:	Pankaj Varshney
Start Date:	4/1/09
Est. End Date:	9/1/09
Updated By:	Bob Eden

Project (Task) Objective Statement

Every behavior report on "Mental Health Youth" will have verified Mental Health section oversight. WIN will give Mental Health clinicians the ability to bring up a list of DDMS cases needing oversight. Clinicians will make an initial determination of if one case or group of cases will need a mental health referral and subsequent mental health evaluations to address the behavior indicated in the behavior report allegation. Mental health referrals and MH evaluations will be tied to the DDMS for auditing.

Project Tradeoff Matrix

	Not Flexible	Somewhat Flexible	Most Flexible
Resources	X		
Schedule	X		
Scope	X		

Budget

Funding Source:	N/A-In House
Expended to Date:	N/A
Project Budget:	N/A

Deliverables

1. Business Requirements Documentation
2. Design, JAD Sessions/ Prototyping
3. WIN User documentation provided to trainers
4. User acceptance test cases and user acceptance test results
5. Field deployment and customer acceptance

Major Milestones

Milestone	Planned	Actual
Analysis and Requirements Gathering	05/11/09	
Design Documentation Completed	06/26/09	
Development Completed	08/11/09	
User Acceptance Testing	09/02/09	
Completion of Customer Testing	09/25/09	
Implementation Complete	09/30/09	

Dependencies/Constraints

1. None

Project Core Team Members

Team Member	Role
Bob Eden	Supervisor/Programmer
Jeff Stutzman	Programmer
SMEs	Dr Laura Ponzini, Louise Allen, Dr Arguello

Customer Benefits

1. Aligning automation to new policy changes
2. This information feeds the overall mental health tracking system.
- 3.

Functional Requirements

1. Develop calendar for scheduling of treatment groups and work slots in designated areas of the institution
 2. Develop system to maintain room availability for Treatment and Education enrollments
 3. Using existing WIN features, i.e., School Attendance, Appointments, and new Small and Large group attendance, summarize Youth services rendered from start to end of day.
- Develop reports as per Tami McKee-San.

Issues/Concerns/Risks

1. The deadline for automation implementation will be 2 months later than the expected due date

Solution Status

Solution ID & Name: SL-0105

Law Library (Electronic)

Status Information as of: November, 2008

11/5/08- Requested a quote to update paper law books from Thompson West.
11/6/08- Received quote from Thompson West on update of law materials.
11/6/08- Requested information from Reform as to whether they have an FSR allowing the purchase of IT materials (education and facilities do not have an FSR for such purchases).
11/7/08- Received answer from reform that they have an FSR for technology purchases.

Proof of Practice Log:

POP ID & Description	Provided By	Date	Comments
NO? Law Library Access Memo (Principals)	Jim Cripe	10/30/08	Copy passed from A. Salvador to Doug U. for POP

Other Deliverables Log:

Deliverable Name	Provided By	Date	Comments

Status Information as of: October, 2008

10/30/08: Updates per meeting w/Jim Cripe

Printed copy:

Print copy of Law Library is updated up until 12/31/07.

Memorandum on LAW LIBRARY ACCESS sent out to all Principals. This outlines procedures for the use and access of the law library (October 8, 2008).

Printed & Electronic copy:

It was determined that there is no need for a new policy but only a change in procedures (see memo dated October 8, 2008) for the paper law library.

Electronic copy:

Potential EIS issues regarding implementation of Law Library.

Budget has not been transferred yet to Education (see below).

Gilmore list: awaiting opinion from legal as to what is needed for CYA law library

Issue: Decision to decide whether to update printed media, or to work on the electronic solution for law library instead (due to budgetary constraints of \$150,000, this issue has been raised to Director of Programs – Exec Staff).

10/23-e-mailed legal (Katie Riley) for an update on the Gilmore list. Received answer that it is with her supervisor (Brenda Lewis) for review.

10/31 E-mailed legal (Katie Riley) for status on Gilmore list. Received answer that more issues about Gilmore list have come up and a new contact name (Rachel) for future updates.

Status Information as of: September, 2008

9/09/08: E-mailed Katie Riley requesting update on Gilmore List materials for Law Library.

9/08/08: Drafted memo on Law Library Access, Forwarded draft memo to Facilities for input.

9/05/08: Currently working on policy to access the Law Library.

8/27/08: Working on standardized access memo.

Solution Status

8/14/08 Sent request to Katie Riley for information on additional legal companies to request a 3rd bid

8/11/08 Received information in mail from Academy Computer Services (3rd bid) that they only carry hardware, no software.

8/7/08 Contacted Loislaw for a quote on Electronic Law Library package.

7/23/08 Emailed 3rd contractor for Law Library bid.

7/22/08: Library materials are now out of date as of December, 2007. To keep them updated DJJ would have to expend funds above and beyond what has been budgeted.

Issue: Decision to decide whether to update printed media, or to work on the electronic solution for law library instead (due to budgetary constraints of \$150,000, this issue has been raised to Director of Programs - Exec Staff).

Monthly ESR Status Report Wording - September, 2008

ESR report on hold - re-evaluation use of alternative reporting. 9/12/08

Monthly ESR Status Report Wording - August, 2008

Current Month Milestones or Significant Activities:

Milestone/Deliverable: Access to (Hardcopy) Law Library:

Stakeholders Contacted (yes/no): yes

Target Date: 6/30/2020 Remedial plan date: 10/01/2007

Completion Date: 07/03/3008

Person Responsible: Jim Cripe

Comments: Emails and telephone calls by all principals to Education Headquarters on July 3, 2008 confirmed all school sites have law books and Nobel (Nolo) Press self-help editions available on shelves in the facility's hardcopy library and signs posted to notify youth of the law library resources and their location.

Upcoming Milestone Status (next 6 months): Progress to Date

Milestone/Deliverable: Access to (Hardcopy) Law Library:

Stakeholders Contacted (yes/no): yes

Target Date: 8/30/2020

On Schedule (yes/no): yes

Person Responsible: Jim Cripe

Comments: DJJ management is currently working to address the fiscal and potential security issues. Legal is in the process of approving an approved list of law library materials. Education and EIS continue to investigate electronic law library solutions.

Monthly ESR Status Report Wording - July, 2008

In Progress

Solution Status

Remedial Plan requires that funding for library is within the Education budget. Currently education maintains and purchases material for the libraries, but the budget and funding for the Law Library materials have been provided by Institution & Camps/Facilities.

A request to transfer funds from the Facility Index budget into the Education Services budget has been submitted to CDCR. The budget transfer is planned to be accomplished by August 2008. On June 11, 2008, Facilities sent a memo to the Budget Management Office requesting the funds (\$150,000) be transferred to Education Services for the management of the Electronic Law Library. Facilities and Education Services are awaiting approval.

Staff met with Electronic Information Services (EIS) and DJJ Legal on June 18, 2008 to discuss the options of purchasing an electronic version of the law resources such as Westlaw and LexisNexis. Education Services has requested DJJ Legal identify exactly what law library materials are mandated and to evaluate appropriateness of the Gilmore collection for DJJ youth. DJJ Legal will be providing a recommended list of law materials to be ordered. Education Services will recommend on electronic solution once all vendors have had the opportunity to present their respective products and services. The result of these efforts will determine final costs.

No solution will be purchased without the approval of EIS.

Barriers to Completion

Internet security issues.

Next Steps

Recommendation and approval of law books needed for library.

Meeting with EIS on the software and hardware recommendations for the electronic law library solution.

Quarterly Status Report Wording - July, 2008

Actual wording of Quarterly report

- **Access to Electronic Law Library** (*Safety and Welfare Standards and Criteria, Items 8.7.1b, 8.7.1c, 8.7.2, 8.7.5, 8.7.5a, 8.7.7*)

DJJ Education is awaiting approval of a memo sent on June 11, 2008, to the CDCR Budget Management Office requesting that \$150,000 be transferred from the Facilities budget to the Education budget for the management of the electronic law library. Due to year-end fiscal management constraints, the project timeframe of completion of the budget transfer is August 2008.

Solution Status

DJJ is reviewing its budget to determine if there is sufficient funding to both keep the hardcopy library up-to-date and purchase an electronic law library system. DJJ management is currently working to address this issue.

Education staff met with representatives from LexisNexis on July 7, 2008 and with Westlaw on July 8, 2008. Multiple electronic communication solutions were discussed, including DVD stand-alone, server-based over the Wide Area Network (WAN), or the internet. By July 20, 2008 both LexisNexis and Westlaw submitted quotes which included amounts for various solution options.

Seeking a three-quote option Education staff had also invited Academy Computer Services, Inc., to present their electronic law library solutions. When they did not respond to their original invitation, Education sent a second request but, to date, has not received a response.

DJJ is reviewing and updating the list of materials needed in its law libraries. Once DJJ finalizes a list of law materials, Education will be able to finalize their electronic law library cost estimates. Education will continue to research possible electronic solutions and once all vendors have had the opportunity to present their respective products and services will submit a recommendation for EIS review.

As some of the electronic library software accesses legal information through the internet, downloading of a CD, or utilizing a portable hard drive, the potential for unauthorized access to the internet by youth continues to pose security issues. DJJ will be working with the IT security staff within EIS to ensure the recommended electronic library solution meets CDCR-DJJ security and access criteria and is not labor intensive to maintain. EIS will evaluate suggested electronic law library solutions to ensure all security issues are addressed and resolved. No solution will be purchased without the approval of EIS. Once an electronic law library solution is identified which meets Legal, cost, EIS, and IT Security criteria, a recommendation will be submitted for Executive review and approval.

Significant Accomplishments: Students at all youth correctional facilities have Law Library access. All school sites at open facilities will have unannotated law books or Nolo self-help materials available and on the shelves by June 30, 2008. If materials are located in a secure area, school sites must post a sign to notify youth of the available resource and its location.

In Progress: A request to transfer funds from the Facility Index budget into the Education Services budget has been submitted to CDCR. Due to year-end closing of financial books, the budget transfer is planned to be accomplished by August 2008. On June 11, 2008, Facilities sent a memo to the Budget Management Office requesting the funds (\$150,000) be transferred to Education Services for the management of the Electronic Law Library. Facilities and Education Services are awaiting approval.

Staff met with Electronic Information Services (EIS) and DJJ Legal on June 18, 2008 to discuss the options of purchasing an electronic version of the law resources such as Westlaw and LexisNexis. On July 7 and 8, 2008, representatives from LexisNexis and Westlaw met with Education Services staff to discuss electronic law library solutions. Multiple solutions were discussed (i.e., DVD stand alone, Server Based over a wide area network, Internet). Both LexisNexis and Westlaw will provide quotes (due by July 18, 2008) for the various solutions. Education Services staff has contacted Academy Computer Services, Inc., and has invited them to present their electronic law library solutions. Education Services is awaiting their reply.

Education Services has requested DJJ Legal identify exactly what law library materials are mandated and to evaluate appropriateness of the Gilmore collection for DJJ youth. DJJ Legal will be providing a recommended list of law materials to be ordered. Education Services will continue to research possible e-solutions. Education Services will recommend an electronic solution once all vendors have had the opportunity to present their respective products and services. The result of these efforts will determine final costs.

Solution Status

Some of the E-Library software accesses legal information through the Internet, downloading of a CD or utilizing a portable hard drive. DJJ will be working with IT Security to ensure that the solution for the E-library meets Departmental security and access criteria for DJJ. The potential unauthorized access to the Internet by wards continues to pose security issues. EIS will evaluate suggested electronic law library solution to ensure all security issues are addressed and resolved. No solution will be purchased without the approval of EIS.

Status and Information reported in Deadlines Document – April, 2008

2.1 Access to Courts and Law Library

Current Deadline Date: Varies
(see detail below) Revised Deadline Date: 12/31/2010
Planned Relief Date: 12/31/2012

Standards & Criteria Item(s)

Audit Tool - Safety and Welfare - Item 8.7 (except 8.7.6a, 8.7.8)

- Education Services operates law libraries 30-Aug-07
- Education Services tracks needs and conducts annual audits 30-Aug-07
- Education Services controls budget and manages purchases 30-Aug-07
- Youthful Offenders Rights Handbook/Orientation revised to address issues raised by Expert's Report, Summer 2007 15-Mar-09
- Needed law library materials purchased annually 30-Aug-07
- Automated tracking system re law library access/help 1-Aug-07
- Print libraries replaced with electronic or internet materials 30-Aug-07
- Written policy & procedures for access to courts and library 1-Oct-07
- Compliance measures for monitoring access to courts 1-Oct-07
- Staff trained on access to courts and law library 1-Oct-07

Dependency: This task may be significantly shorter if a software tool (or CD version) for accessing the law library electronically is chosen and implemented which: 1) does not require new IT development, and 2) provides pre-written training materials that can be used to deliver the training (it would reduce that component), and 3) maintains IT security integrity. Access to Courts is covered in the Safety & Welfare section.

Law Library materials have been purchased and are available at all facilities. Access to Law Library is currently tracked manually. Education Services provides annual training for Law Librarians. Additionally, Sacramento County Library provides supplemental training which occurred in April 2007. Training for 2008 is being scheduled.

5.17 Access to Court

Current Deadline Date: 10/1/2007 Revised Deadline Date: 5/12/2008
Planned Relief Date: 6/30/2010

Standards & Criteria Item

S & W Audit Tool Items 8.7.5a (part), 8.7.7 (part)

- Written policy & procedures for access to courts and library
- Staff trained on access to courts and law library

Dependency: This is also closely related to items for Access to a Law Library – that component is addressed within this document under the Education section. This partial context item relates only to the Access to Courts portion of the listed items.

The Wards Right Handbook is currently being revised. The policy and the policy lesson plan has been completed. Training will be conducted in April 2008. The Youth Lesson Plan needs to be developed.

Status Report as of April 2008 (Original PAIS reported status)

The Law Library (access to courts) material is housed in the facility school library. The Law Library is open

Solution Status

for ward use for at least 30 hours per week. The school Librarian provides assistance. In the Safety and Welfare Remedial Plan it states that Education Services Branch will assume full responsibility for the operations of DJJ law libraries including the budget, track the need for updated/current materials, and conduct annual audits of access and materials compliance.

Per Education Services Branch Manual, section 4560: There shall be law library at each school to meet the Department's obligation to provide ward access to legal reference books, legal forms and updated institution and Department manuals.

Law Library materials are purchased by Institutions and Camps budget, not with Education Services funding.

Currently, Law Library use is not tracked electronically on WIN.

Education Services provides annual training for Law Librarians.

Currently, Law Library materials are accessed via print, not electronically.

Risk(s): Risk is an uncertain event or condition that when it occurs may have a positive or negative effect upon the project's objective(s).

Providing funding to Education Services for purchase of materials, funding must be adequate.

Funding provided to Education Services must be adequate to purchase technology (hardware and software) for electronic access of material initially and for annual updates.

Issue(s): An Issue is an event or condition that has occurred and which has a negative effect upon the project's objective(s).

Request to EIS for WIN team to create tool to access use.

Quarterly Status Report Wording - April, 2008

No report

Monthly ESR Status Report Wording - June, 2008

Remedial Plan requires that funding for library is within the Education budget. Currently education maintains and purchases material for the libraries, but the budget and funding for the Law Library materials have been provided by Institution & Camps/Facilities.

A request to transfer funds from the Facility Index budget into the Education budget has been submitted to CDCR. Due to year end closing of financial books the budget transfer is planned to be accomplished by 08/2008. DJJ will continue with current resources while processing requests for fiscal resources through standard CDCR and state processes.

Staff met with EIS and Legal on 06/18/2008 to discuss the options of purchasing electronic version of the law resources such as Westlaw and Lexis Nexis

A vendor presentation is scheduled for 07/08/2008 and 07/10/2008 to review the products and services for the law libraries.

Additionally, a meeting with CDCR to explore options to utilize existing subscription services is scheduled for 07/2008.

All students have access to the Law Library at all facilities. Law Library materials are current.

Barriers to Completion: Internet security issues.

Next Steps: Meeting to be scheduled with e-library book vendors. Meet with CDCR regarding law library subscriptions

OJJ IT Priority Board
List of Pending IT Project Requests

OJJ Director's Recommendations

Highest Priority Items (11)			
Rank	EIS #	Program Area	Description
1	5	Farrell Reform	Automate Community Assessment Report (CAR) - JRAMS
	11	Farrell Reform	Implementation of Juvenile Assessment Work Station (JAWS) - JRAMS
	82	Mental Health	MAYSI II - JRAMS
3	2	Parole	Field Information System (FIS Redesign) - Work in progress
5	14	Farrell Reform	Sex Offender Tracking in WIN (Farrell v. Hickman) - Work in progress
	59	Health Care	Sexual Behavior Treatment, changes to the SORD system - Work in progress
6	60	Health Care	SPAN/WIN migration and interface - Work in progress
	57	Mental Health	DDMS Mental Health Treatment Plan - Work in progress
			Mental Health Referral - Work in progress
			Mental Health Tracking for additional data - Work in progress
7	69	Intake & Court Services	Intake admission and reject process - Work in progress
Remaining High Priority Items (7)			
	48	Facilities & Programs	Youth Sexual Misconduct DONE 12/08
	50	Facilities & Programs	TD/SMP modifications DONE 1/09
	51	Facilities & Programs	Alternative Program SRR TD, Admin LD, Limited Program and Intervention DONE 1/09
	71	WDC	WDC implementation (Farrell v. Hickman) DONE
	73	Health Care	WDC screening by three separate sections DONE
	74	Institutions and Camps	Special Case Conference tracking # 85
	77	Farrell Reform	SW Reporting Program Daily services tracking and reporting - Work in progress FOR TOP9
Completed Items			
4/1/2009 (8)			
	10	Farrell Reform	RMCS Modifications - Completed
2	3	Parole	IT system to comply with the LH lawsuit requirements - Completed
	44	Facilities & Programs	Use of Force (Farrell v. Hickman) - Completed
	45	Facilities & Programs	New grievance feature set (Farrell v. Hickman) - Completed
	46	Facilities & Programs	New staff misconduct tracking (Farrell v. Hickman) - Completed
	47	Facilities & Programs	Disciplinary Decision Making System (DDMS) - Farrell v. Hickman - Completed
4	29	Education	Attendance tracking I - Changes (Farrell v. Hickman & CIS) - Completed
	72	Health Care	SRR details, suicide treatment plan, additional report - Completed
5/1/2009 (2)			
	30	Education	Attendance tracking II- Reports, new and changes to existing (Farrell v. Hickman & CIS) - Completed
	65	Health Care	Upgrade CIPS - Completed

DJI IT Priority Board
List of Pending IT Project Requests

Rank	EIS #	Program Area	Description
Medium Priority Items (2)			
	62	Institutions and Camps	Work order system needs repair
	66	Institutions and Camps	CPA inventory system defects
Low Priority items (12)			
	4	Parole	Add Pharmacology benefit form to YODA
	8	Victim's Services	Modification to YOVR remittance letter
	32	Education	Modify CSIS export to reflect enrollment date of grad year for returning youth
	43	Facilities & Programs	Comstat and PBS reporting
	53	Health Care	Update SPAN to align with changes to Mental Health programs
	54	Health Care	Create a final version of Medical Billing Validation System
	56	Health Care	Create application that helps pharmacists comply with CURES requirements
	64	Institutions and Camps	Unit 6 pay calculations
	65	Institutions and Camps	Training server requires more stable environment
	67	Institutions and Camps	SIR reporting not up to date
	70	Ward Trust	Revisions to Victims Restitution
	76	Institutions and Camps	Electronic mail tracking
Canceled/completed/non-DJI Items (41)			
	6	Parole	Assistance with data access Spring Finance Letter
	7	Victim's Rights	YOVR over collection process
	9	Parole Board	Develop AmeriCorps website
	12	Farrell	Work Teams
	13	Farrell	Deploy WIN Exchange
	15	Research	YOVR data in response to lawsuit (revoke and violation data)
	16	Research	Add non 707b discharge status for return to county
	17	Research	Monthly report comparing OBITS and WIN living unit and Resp. location data
	18	Research	New version by Board Member
	19	Research	Modifications to BD-PANEL-TYPE
	20	Research	CI number check
	21	Research	Extract for research
	22	Research	New flag for Board Order file
	23	Research	Counts program message
	24	Research	Compare OBITS/WIN Resp. LOC&LU
	25	DTS	Upgrade to Oracle 11g R2
	26	DTS	Upgrade to Predict 4.5.2
	27	DTS	Upgrade to Natural 4.2.3
	28	DTS	Upgrade to ADABAS 8
	33	EIS	Convert ward list to Natural
	34	EIS	Convert reconciliation/counts to Natural
	35	EIS	Convert scaled records to Natural
	36	EIS	Convert salary savings to Natural
	37	DTS	File maintenance
	38	FIS	YODA resolution must be increased to accommodate increase in size in OBITS
	39	FIS	Ongoing WIN maintenance
	40	EIS	Oracle support issue
	41	EIS Server Team	Migrate all Mac based servers to pc platform
	42	Facilities & Programs	Revisions to daily ops original requirements
	49	Facilities & Programs	Mandated services update
	51	Facilities & Programs	Alternative program SRR, TD, admin ID, limited program and intervention
	52	Farrell Project	Database to collect audit and compliance data
	58	Health Care	SORD forms require modification due to change in treatment locations
	61	HQ Accounting	Agency 110 for FY 06/07
	63	Institutions and Camps	PO form requires adjustment
	68	Institutions and Camps	Add 707b tracking capacity
	75	Institutions and Camps	Notification of canceled visits
	78	Facilities & Programs	Seniority computation project
	79	Research	Create Megan's law process
	80	Research	Create DNA process
	81	Research	IJAC form changes (Board Orders)
	1	Parole	YODA parole status bug fix

DJJ IT Priority Board
List of Pending IT Project Requests

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83		Education	Changes/additions to WIN for reporting data to the California Department of Education (CDE)
84		Safety and Welfare Rem	Modification to Juvenile Justice Administrative Committee (JJAC) Review form
85		Safety and Welfare Rem	Modification to case conference tab to include more information on program credits and ODM5 restoration as well as quick reports
86		Safety and Welfare Rem	Addition of fields for religious tracking as well as quick reports
87		Safety and Welfare Rem	Addition of fields for youth orientation and receipt of youth rights handbook
88		Safety and Welfare Rem	Addition of behavior contracts as well as a quick report
89		Wards with Disabilities	Wards with Disabilities (WDP) Status Report
90		Safety and Welfare Rem	WIN Quick Reports/Query Reports

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Project Data Sheet

JRAMS

Version 10.0

Date: June 18, 2009

RANK 1 EIS # 5, 11, 82

Project EPM ID:	
Project Sponsor:	Bernard Warner
Project Manager:	Amy Seidlitz
Start Date:	11/15/2008
Est. End Date:	2/1/2011
Updated By:	Ed Lacroix

Project Objective Statement

Develop a centralized system which houses the assessment and reassessment information related risks and needs of all youths under DJJ jurisdiction, along with an objective method to utilize the assessment/reassessment information in a comprehensive manner for classification, placement, treatment prioritization and case planning.

Project Tradeoff Matrix

	Not Flexible	Somewhat Flexible	Most Flexible
Resources	X		
Schedule	X		
Scope	X		

Budget

Funding Source:	Program Redirected Funds
Expended to Date:	N/A
Project Budget:	N/A

Deliverables

1. Project Management Documentation
2. System Requirements/Design Specification
3. Application Development and Maintenance
4. Implementation
5. Test Plan and Test Scripts
6. Technical Documentation and Training Material
7. 3 year Maintenance and Support

Major Milestones

Milestone	Planned	Actual
Issue Request for Proposals	1/1/2009	
Contract Award	4/1/2010	
Development Completed	11/1/2010	
User Acceptance	12/30/2010	
Training Completed	1/15/2011	
System Implementation	2/1/2011	
PIER Review	2/1/2012	

NOTE: ORB Service with YASI is currently being used as an interim solution for this project. Discussions with Dr. J.C. Arguella indicated current manual use of MAYS II complies with the Farrell Reform.

Dependencies/Constraints

1. OCIO Approval
2. Filling of Vacancies and new positions
3. Continued and ongoing funding
4. HIPPA Compliance

Project Core Team Members

Team Member	Role
Ed Lacroix	Technical Project Manager
Ed Wiebe	Senior Programmer
Sirisha Gulapali	Staff Programmer

Customer Benefits

1. Replacement of Temporary YASI system
2. Compliance with Farrell Reform
3. Centralized assessment system

Functional Requirements

1. The solution must allow DJJ staff to input assessments and reassessments throughout the state and throughout each youth's jurisdiction.
2. The solution must allow for the most recent assessment/reassessment to be available for update.
3. The solution must also allow DJJ staff to capture classification, placement, treatment prioritization and case planning data throughout the state.
4. The classification and placement data should include assessment/reassessment and treatment results, demographic information, policy and legal requirements into a set of objective entrance and exit criteria.
5. The JRAMS solution must enable entrance and exit criteria for each unit type to be entered, which is tied to assessment and reassessment results.
6. The JRAMS system must allow for reports to show how often overrides occur, and for what reasons.
7. The solution must automatically establish a case file in the automated system for new youths.
8. The solution must allow for reports to be run on a routine basis to determine which youth meet criteria for ... (See FSR for complete requirements)

Issues/Concerns/Risks

1. JRAMS closely resembles the COMPASS system being used by Adult programs and continues to be questioned why the COMPASS Youth Assessment can't be used which would be an SPR to the existing ARNET project and create standardization of IT systems within CDCR.
2. Although internal redirection of funds will be used, funding must be continuing and ongoing.
3. Required EIS positions established for this project must be filled prior to moving forward. There are no positions available for redirection other than those identified.
4. Identified redirected positions are vacant with delays in hiring.
5. Existing ORBIS contract has time limitations that will result in loss of data.
6. Court mandate does not specify an IT solution nor does it specify a date for compliance.
7. Inability to fill vacancies slated for project redirection due to budget restraints has occurred. No staff available other than analysis and project management.

Project Data Sheet

JRAMS

Version 10.0

Date: June 18, 2009

RANK 1 EIS # 5, 11, 82

Progress update

1. FSR denied by the Office of the Chief Information Officer (OCIO).
2. Evaluation of North Pointe Compass solution for juveniles scheduled to comply with OCIO recommendations as a possible integrated solution.
3. Detailed explanation of why COMPAS Youth Assessment can't be used must be accomplished before OCIO will consider approving an FSR.
4. 6/9/09 - Joint discussions regarding COMPAS evaluation produced no reportable statement that it could not be used. Investigation on the continuing use of the ORBIS YASI system with the ability to secure and access our data for in-house reporting is being conducted.

IBTM WORKPLAN

PROJECT ELEMENT	ACTION STEPS	TARGET	STATUS
Administrative	<ol style="list-style-type: none"> 1. Identify admin support 2. Obtain office space for HS/AW 3. Obtain passwords for DJJ sharepoint 4. Assess videoconferencing capabilities 5. Identify editing/formatting assistance 	<ol style="list-style-type: none"> 1. Aug 7, 2009 2. Aug 7, 2009 3. Aug 7, 2009 4. Aug 7, 2009 5. Sept 18, 2009 	<ol style="list-style-type: none"> 1. requested 2. requested 3. requested
Compilation of Materials for Review	<ol style="list-style-type: none"> 1. Request materials from JRA. 2. Identify policy expert to assist Wolf and Schmidt 3. DJJ staff produce and review relevant court stipulations and agreements and provide the following <ol style="list-style-type: none"> a. Bullet-list documenting DJJ tasks to be accomplished b. Rationale for tasks c. Highlighting of contradictory agreements, if any 4. Collect DJJ curricula and trainings 5. Identify professional accreditations / government mandates that DJJ has received or plans to pursue (e.g., NCCHC, PbS) 6. Identify other materials to be consulted during writing process <ol style="list-style-type: none"> a. Assessments used or recommended in DJJ b. outside experts c. articles/chapters/texts to review 7. Review materials 	<ol style="list-style-type: none"> 1. Aug 7, 2009 2. Aug 7, 2009 3. Aug 14, 2009 4. Aug 14, 2009 5. Aug 7, 2009 6. Sept 18, 2009 7. Sept 18, 2009 	<ol style="list-style-type: none"> 1. requested 2. requested
Training	<ol style="list-style-type: none"> 1. Participate in DJJ trainings <ol style="list-style-type: none"> a. MI b. Cog B Primer c. TBA 	<ol style="list-style-type: none"> 1. Sept 25, 2009 	
Site visits	<ol style="list-style-type: none"> 1. Identify goals and objectives 	<ol style="list-style-type: none"> 1. Aug 21, 2009 	

	<ol style="list-style-type: none"> 2. Create a site visit form to standardize site visit data collection 3. Identify locations, make requests of local administrators 4. Conduct site visits <ol style="list-style-type: none"> a. interview youth b. interview staff c. review local protocols and practices 	<ol style="list-style-type: none"> 2. Aug 21, 2009 3. Aug 21, 2009 4. Sept 30, 2009 	
Compile Supportive Curricula	<ol style="list-style-type: none"> 1. ART 2. MI 3. Drug treatment 4. Sex Offense Behavior 5. Gang youth 6. Female youth 7. Mental Health Youth? 8. Other special populations 	<ol style="list-style-type: none"> 1. Aug 21,2009 2. Aug 21,2009 3. Aug 21,2009 4. Aug 21,2009 5. Aug 21,2009 6. Aug 21,2009 7. Aug 21,2009 8. Aug 21,2009 	
Compile policies related to treatment model or implementation	<ol style="list-style-type: none"> 1. Discipline (Add on / length of stay) 2. Gangs 3. Health care 4. Grievance 5. Transfer 6. PREA 	<ol style="list-style-type: none"> 1. Aug 28, 2009 2. Aug 28, 2009 3. Aug 28, 2009 4. Aug 28, 2009 5. Aug 28, 2009 6. Aug 28, 2009 	
Write IBTM	<ol style="list-style-type: none"> 1. Identify reference and source material 2. Agree on the objectives of IBTM description 3. Draft chapters <ol style="list-style-type: none"> a. "What works" b. Describe DJJ population c. Logic model and theory of behavior change d. Organization change theory - strategy for deal with violence immediately e. Treatment philosophy f. Functions of comprehensive treatment g. Behavior management - reinforcement systems 	<ol style="list-style-type: none"> 1. On going 2. Aug 21, 2009 <ol style="list-style-type: none"> a. Sept 3, 2009 b. Sept 3, 2009 c. Sept 3, 2009 d. Sept 3, 2009 e. Sept 3, 2009 f. Sept 3, 2009 g. Sept 25, 2009 h. Sept 25, 2009 	

	<ul style="list-style-type: none"> - milieu definitions h. Define how IBTM meets principles i. Assessment j. Classification k. Special populations <ul style="list-style-type: none"> - Gangs - Sex offense behaviors - Chem dependency - Mental health - Young clients - Females - Cognitively impaired - Cultural issues l. Family involvement and participation m. Treatment fidelity/Quality improvement n. Training o. Reentry p. Information sharing and data management 4. Approval by experts 5. Editing formatting 	<ul style="list-style-type: none"> i. Sept 25, 2009 j. Sept 25, 2009 k. Oct 2, 2009 l. Oct 2, 2009 m. Oct 9, 2009 n. Oct 9, 2009 o. Oct 9, 2009 p. Oct 9, 2009 4. On going 5. Oct 30, 2009 	
Implementation	<ol style="list-style-type: none"> 1. Identify Implementation workgroup members 2. Meet with workgroup <ol style="list-style-type: none"> a. Train workgroup members b. Train stakeholders c. Identify key leaders d. Meet with key leaders 3. Pilot <ol style="list-style-type: none"> a. Develop new curricula e. Select site f. Identify staff to be trained g. Develop training strategies h. Develop training schedule i. Establish outcomes j. Develop fidelity measures 3. Roll out strategy for addition sites 4. Communication strategy 	<ol style="list-style-type: none"> 1. Nov, 2009 2. Dec, 2009-Jan, 2010 <ol style="list-style-type: none"> a. Jan, 2010 b. Jan, 2010 c. Jan, 2010 d. Feb-Mar, 2010 3. May-Aug, 2010 <ol style="list-style-type: none"> a. Apr-Jun, 2010 b. Jun, 2010 c. Jun,2010 d. Jun-Jul 2010 e. Jul 2010 f. Jun-Jul 2010 g. Jul-Sep 2010 	

	<ul style="list-style-type: none">a. Managementb. Line staffc. Unionsd. Public		
Manual		To be determined	To be determined

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady
From: H. Schmidt, A. Wolf
Re: Bi-weekly update on IBTM progress
Date: July 17, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation recently reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz. Under the stipulation, the proposed timeline allows for the workplan to be completed by July 31, 2009 and the IBTM description and implementation plan to be completed by October 31, 2009. If necessary, additional time to complete these tasks may be requested by *Farrell* experts.

The workplan is on track to be completed by July 31st. Drs. Schmidt and Wolf have conferred with Drs. Krisberg and Trupin to hear their expectations and establish key elements of the IBTM. A draft of the workplan and accompanying timeline has been developed and circulated among the experts. Materials to be collected from Washington's JRA have been identified and requested. Also, discussions are currently being held on the role of workgroup in the development of the IBTM.

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M.

Brady

From: Farrell experts

Re: Bi-weekly update on IBTM progress

Date: August 16, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation recently reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

To date, progress on the IBTM is in line with the timeline established via the workplan. During the first two weeks of the stipulated work period (August 1-October 30, 2009), the following has been accomplished:

- Review feedback and comments on workplan, submitted July 31, 2009.
- With assistance from DJJ staff, Drs. Wolf and Schmidt obtained office space at DJJ, established a work schedule for the duration of the work period, and identified administrative support.
- Court stipulations, agreements, a schedule of DJJ trainings and related curricula were requested.

OSM Memorandum

IBTM

April 27, 2009

- In order to create a background file of materials on Washington State's Integrated Treatment Model, documents from JRA are being identified and procured.
- Planning and preparation for travel by Drs. Wolf and Schmidt occurred; they will begin work locally on August 15.

NEXT STEPS

- Establish office presence in Sacramento.
- Attend and present IBTM Work Plan at DJJ Mental Health conference on August 20, 2009.
- Meet with Experts at NCCD, Oakland, to agree on the objectives of IBTM description.
- Identify goals and objectives of site visits, develop standardized form, identify sites to request visitation.
- Compile DJJ training curricula (current).
- Compile DJJ policies (current), and identify resources to assist Drs. Wolf and Schmidt.
- Begin to outline document.
- Begin to identify stakeholders for discussions during work period.
- Literature and other reference materials will be collected on an on-going basis.

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady

From: Farrell experts

Re: Bi-weekly update on IBTM progress

Date: August 17-28, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation recently reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

Progress toward the goals established by workplan for the weeks of August 17th – 28th is outlined below:

- *Goal:* Establish office presence in Sacramento

Progress: Work space, computers, and technical assistance have been provided by DJJ. Two full days of meetings were held with DJJ stakeholders

- *Goal:* Attend and present IBTM Workplan at DJJ Mental Health summit on August 20, 2009. (Per special request. Not identified by the workplan).

Progress. Summit was attended. It was concluded that the model will be based on J's implementation of DBT augmented to address the specific needs of DJJ's population. After much discussion, it was determined that the timeline limits Drs. Wolf and Schmidt's ability to educate DJJ staff on the proposed model during the writing stage. However, DJJ will allow Drs. Wolf and Schmidt access to a cadre of knowledgeable staff on an as needed basis. Drs. Wolf and Schmidt are to continue to work directly toward preparation of the document, with the

original deadline of October 30, 2009 intact. They will keep the *Farrell* parties apprised of progress made.

- *Goal:* Meet with Experts at NCCD, Oakland, to agree on the objectives of IBTM description.

Progress: Drs. Wolf and Schmidt met with Drs. Lee, Krisberg, and Trupin to discuss the goals and parameters of the IBTM description. The IBTM description is to be a broad overview of the model, including an outline of the principles, treatment and program interventions that will provide the basis for consistent policies, supportive curricula and trainings.

- *Goal:* Identify goals and objectives of site visits, develop standardized form, identify sites to request visitation.

Progress: Goals of site visit were identified with input from experts and DJJ staff. A structured format to guide information gathering was discouraged, with recommendations made to simply get to sites to view the physical structure, and talk with staff and youth. There is also encouragement to discuss the model with staff, as requested. Site visits are to occur ASAP. Site visits to facilities in the south are tentatively scheduled for the week of September 21, 2009.

- *Goal:* Compile DJJ training curricula.

Progress: On-going. Given the volume of materials, these curricula may be referred to when addressing specific questions. It is unlikely that they will all be able to be thoroughly reviewed; that task may be deferred until the 'implementation' phase of the project or, if prioritized, may require adjustment of the description deadline.

- *Goal:* Compile DJJ policies (current), and identify resources to assist Drs. Wolf and Schmidt.

Progress: Doreen Nylund has been identified as the initial contact person for DJJ and will facilitate the involvement of knowledgeable individuals to answer questions, provide resources and assistance.

- *Goal:* Begin to outline document.

Progress: A draft of the IBTM description outline was begun.

Wolf and Schmidt

IBTM

August 28, 2009

- *Goal:* Begin to identify stakeholders for discussions during work period.

Progress: A list of names is currently being compiled with input from the *Farrell* experts and DJJ staff.

- *Goal:* Literature and other reference materials will be collected on an on-going basis.

Progress: On-going

NEXT STEPS

- Continue compilation of literature and other reference materials
- Continue to gather and review DJJ's curriculums, trainings, and policies
- Complete draft outline of IBTM
- Confirm plans for site visits to facilities
- Review ORBIS draft
- Submit requests for DJJ population data
- Outline gender-responsive principles
- Outline principles of desired peer and organizational culture

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady

From: Farrell experts

Re: Bi-weekly update on IBTM progress

Date: August 29-Sept 11, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

Progress toward the goals established by workplan for the weeks of August 29th – September 11th is outlined below:

- *Goal:* Continue compilation of literature and other reference materials
Progress: On-going. Current research on promising and/or best practices are being collected to inform the IBTM development.
- *Goal:* Continue to gather and review DJJ's curriculums, trainings, and policies
Progress: Additional materials continue to be identified through conversations with DJJ staff and site visits.
- *Goal:* Complete draft outline of IBTM
Progress: The development of the draft outline was delayed to better identify and reflect the concerns and goals of DJJ staff and stakeholders as gathered through site visits and time spent in headquarters. Additionally, source documents such as the Safety and Welfare Plan have been reevaluated for incorporation. As stakeholders are consulted and source materials are

reviewed, the shape of the draft outline continues to evolve. It is anticipated that the draft outline will be submitted to experts by September 18th.

- *Goal:* Confirm plans for site visits to facilities

Progress: Based on strong recommendations from DJJ staff as well as the experts, the proposed timeline was amended to re-prioritize site visits. Site visits were conducted in the northern facilities including OH Close, Chad, and Preston. Site visits for the southern facilities have been scheduled: Ventura will be visited on September 21st and Southern Reception will be visited on September 22nd. Staff at DJJ have been very helpful and accommodating thus far. Site visits to northern facilities were scheduled with little notice and access was granted to all requested units and programs. DJJ facility staff members have been welcoming, candid in conversation, and appear interested in supporting the development of the model.

Stakeholders interviewed to date (please excuse spelling errors):

Experts:	Barrie Krisberg	Eric Trupin
	Terry Lee	Barbara Schwartz
Administration:	Bernie Warner	Sandra Youngen
	Mike Brady	Doug McKeever
	Dorene Nylund	
	Ed Morales	Juan Carlos Arguello
	Karen Heintschel	Rosa Rosalis
	Jim Telander	Henry Lum
	Amy Seidlitz	Riann Giovacchini
Superintendents:	Mike Minor	Tim Mahoney
Assistant Superintendents:	Erin Brock	Tony Lucero
Facility Managers:	Elaine Stenowski	(Others, below)
Local Clinical Staff:	Terry (?@ Preston)	Derek Washington
Unit Staff and youth:	OH Close: Nearly all units on campus, variety of staff from Seniors to line staff	
	Chad: (IBTP, MH tx, open unit) spoke to unit managers, line staff	
	Preston: (BTP, Sub Use Tx) attended BTP staff meeting and spoke with all staff present (including conflict resolution team); spoke with IMPACT leaders	

- *Goal:* Review ORBIS draft

Progress: ORBIS draft was reviewed along with other possible source documents. Sections of this draft and other materials are being identified for possible incorporation into the IBTM.

- *Goal:* Submit requests for DJJ population data

Progress: Requests for DJJ have been submitted. Preliminary data has received on gangs and education level. These requests will be refined based on available data points and relevance to points in the IBTM report being written.

- *Goal:* Outline gender-responsive principles

Progress: A preliminary list of gender-responsive principles has been identified.

- *Goal:* Outline principles of desired peer and organizational culture

Progress: Based on recommendations from the Safety and Welfare expert, development of principles on peer and organizational culture has been postponed to incorporate information gathered from remaining site visits, particularly Southern Reception Center. The overview of Normative Community Training and Curriculum produced by the North American Family Institute has been reviewed, with sections identified for possible inclusion in the IBTM report.

NEXT STEPS

- Continue compilation of literature and other reference materials
- Continue to gather and review additional DJJ's curriculums, trainings, and policies as identified
- Complete draft outline of IBTM
- Conduct site visits to Venture and Southern Reception Center
- Examine DJJ population data and refine requests
- Draft the following section:
 - "What works"
 - DJJ population
 - Logic model and theory of behavior change
 - Principles of IBTM

- Behavior management
- Schedule an information-sharing meeting with identified DJJ stakeholders, to share information about the models discussed in the Safety and Welfare plan and information about current DJJ structure and strengths. Meeting ideally to occur in the last week of September, with stakeholders as available.

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady

From: Farrell experts

Re: Bi-weekly update on IBTM progress

Date: September 12-Sept 25, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

Progress toward the goals established by workplan for the weeks of September 12th – September 25th is outlined below:

- *Goal:* Continue compilation of literature and other reference materials

Progress: On-going. Current research on promising and/or best practices are being collected to inform and support the IBTM development.

- *Goal:* Continue to gather and review DJJ's curriculums, trainings, and policies

Progress: Additional materials continue to be identified and reviewed through conversations with DJJ staff and site visits. These materials are extensive and a thorough review of all curriculums, trainings, and policies is not possible given the proposed deadlines. Materials particularly relevant to the IBTM description are being reviewed to inform specific sections of the draft outline. Also, it should be noted that when DJJ staff refer specific articles, every attempt is made to review these materials in a timely fashion.

The Safety and Welfare and Mental Health Remedial Plans have been thoroughly reviewed. Further, a significant amount of time has been spent reviewing J's ITM and supporting documents. Components specifically outlined in the Safety and Welfare and Mental Health plans are being identified and integrated into a comprehensive treatment approach.

- *Goal:* Draft outline of IBTM

Progress: Did not meet internal deadline of September 18th for submission to Experts. Discussed key components with Experts and agreed on general direction. HS and AW continue to develop and refine drafts as they discuss the project and review documents. Outline completion is current top priority.

- *Goal:* Conduct site visits to South facilities

Progress: Conducted day-long site visits to Southern Reception and Ventura facilities. Received guided tours to all areas of the campuses including the schools, health care facilities, intake units, core and specialized units. Met with many stakeholders including:

- Facility superintendents and assistants
- School principals and assistants
- Chief Medical Officer (Ventura)
- Psychologists and Social Workers (Senior Caseworkers)
- Parole staff
- YCCs
- Youth

Also had the opportunity to sit in on groups, observe schooling, view conditions in facilities and areas for programming, and observe interactions between staff and youth. Facility staff have been universally welcoming and forthcoming with assistance. Understanding of the IBTM varies across individuals in facilities. However, there is a willingness to participate in implementation discussion. In all sites the following topics were addressed:

- The intervention model currently being used in the facility
- Trainings offered and training support/follow-up

- Support and resources provided for implementation
- Supervision expectations and experiences

A site visit to Stark was not conducted because Stark is scheduled for closure for DJJ youth. However, several DJJ staff have suggested that Stark be included in order to incorporate impressions of youth and staff into the development of the model. A site visit will be scheduled for October.

- *Goal:* Examine DJJ population data and refine requests

Progress: Mental health data has been received. Responses to data requests have been timely.

- *Goal:* Draft sections of IBTM Report

Progress: The sections identified to complete and submit to experts have not been completed as intended. Writing is occurring in tandem with the creation of an outline; the outline is the current top priority.

- *Goal:* Schedule an information-sharing meeting with identified DJJ stakeholders, to share information about the models discussed in the Safety and Welfare plan and information about current DJJ structure and strengths.

Progress: A video/teleconference has been scheduled for September 30th 8:30 -10:30am.

Invitations were extended to the following stakeholders:

<p>Experts and Legal Figures: Barry Krisberg Eric Trupin Terry Lee Barbara Schwartz Sarah Norman Don Spector Donna Brorby</p> <p>Superintendents: Cassandra Stansbury</p>	<p>Central Office: Bernie Warner Mike Brady Doug McKeever Sandra Youngen Ed Morales Steve Lesh Larry Miranda Mark Blazer (?) Tammy McGuire Juan Carlos Arguello</p>
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Mike Minor Dave Finlay Tim Mahoney Elberta Mock Field Representatives: Elaine Stenowski (Preston) Geri Freeland (South, Psychologists) Tony Lucero (Assist Sup at OH Close) Cynthia Brown (Ventura) Ted and William Jones (SRC) Chief Medical Officer, Ventura Jennifer Heatherton (Stark) Michelle Lee (Stark)	Yvette (last name?) – former Sup, OH Close Jim Telander (Trainer) Henry Lum Karen Heinschel (Gender-responsive) Jay Aguas Heather Bowlds Additional stakeholders to be identified by DJJ headquarters and facility staff Union rep YCC and YCO line staff Representative from parole Representatives from education Others as nominated by DJJ leadership
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Additional tasks:

Under purview of experts, I led the first 'bi-weekly update' conference call agreed to in the mental health summit. The call was organized by Donna Brorby and conducted with parties on September 25th. Agenda and topics of discussion included: an update on IBTM progress, next steps, and discussion of impressions from tours of the facilities. Specific questions concerning what is currently known or anticipated regarding the model were fielded. Reviews by those in attendance at the end of the call were positive.

NEXT STEPS

- Informational meeting with DJJ stakeholders regarding the IBTM direction and goals scheduled for September 30th.
- Submit outline to Experts to review and incorporate feedback
- Progress on draft model description
- Site visit to Stark

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady

From: Farrell Experts

Re: Bi-weekly update on IBTM progress

Date: September 26 – October 9, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

Progress toward the goals for the weeks of September 26th – September October 9th is outlined below:

- *Goal:* Informational meeting with DJJ stakeholders regarding the IBTM project (description, direction and goals) was scheduled for September 30th. (Meetings hereafter referred to as 'Town Hall Meetings,' to distinguish them from other stakeholder IBTM meetings.) This was described as the first in a series of meetings to be held with this stakeholder group, with the intent of selecting some individuals to work on a future implementation workgroup.
- *Progress:* The Town Hall meeting with DJJ stakeholders took place as scheduled. Drs. Wolf and Schmidt facilitated a discussion of a case history and behavioral chain with representatives from DJJ which included superintendents and assistants, case managers, psychologists, line staff, educators, and representatives from headquarters and court compliance. A case study provided the opportunity to discuss common, broad elements of treatment, and illustrated that DJJ staff are familiar with (or already implementing) treatment

components that will likely be included in the IBTM. Feedback was solicited from DJJ staff and has thus far been positive. To ensure that Drs. Wolf and Schmidt are responsive to the questions and concerns of DJJ staff, input from key DJJ staff has been solicited regarding the content of the next stakeholder meeting. Suggestions for the next meeting have been varied.

- *Goals:* Review literature related to treatment of juvenile-justice-involved youth; Submit outline to experts to review and incorporate feedback

Progress: A significant amount of information, literature, curriculums, and trainings were reviewed to inform the draft of the outline, and ultimately, the IBTM description. Review of materials will continue to be on-going. A draft of the outline was submitted to the experts on October 5th. The outline reflected a description of the IBTM intended to be accessible to DJJ staff and stakeholders, as well as parents of system involved youth. Principles and elements guiding the development of the IBTM are taken directly from the Safety and Welfare and Mental Health Remedial Plans. Feedback and guidance from the experts will be incorporated throughout the draft of the IBTM.

- *Goal:* Stark site visit
- *Progress:* Several DJJ staff suggested that Stark be conducted in order to incorporate impressions of youth and staff into the development of the model. A site visit has been scheduled for October 15th.

NEXT STEPS

- Progress on draft model description- This task will be the priority for the month of October as every effort is being made to meet the October 30th deadline.
- Review support materials for description of IBTM
- Site visit to Stark
- Update conference call with *Farrell* parties October 14th

Wolf and Schmidt

IBTM

August 28, 2009

- Town Hall meeting on October 14th 10-12am. DJJ stakeholders have been invited from all facilities. The discussion will focus on the five functions of treatment. As the model is currently being written, it should be noted that the goal of the Town Hall meetings is not to present the model itself; rather the goal of the Town Hall is to have conversations on components of the model that will likely be included, engage DJJ staff, and be accessible for questions.

Memorandum

To: D. Brorby, S. Norman, D. Specter, W. Kwong, V. Kamberian, T. Irby, R. Stern, M. Brady

From: Farrell Experts

Re: Bi-weekly update on IBTM progress

Date: October 10 – October 23, 2009

The safety and welfare plan requires a detailed description of the Integrated Behavior Treatment Model (IBTM) and an accompanying manual to be used at DJJ. The stipulation reached by plaintiff's attorneys, DJJ attorneys, and *Farrell* experts requires the description of the IBTM, implementation plan, and a manual be completed by Drs. Wolf and Schmidt under the supervision of Drs. Krisberg, Trupin, Lee, and Schwartz.

Progress toward the goals for the weeks of October 10th –October 23rd is outlined below:

- *Goal:* Review support materials for description of IBTM
- *Progress:* Review of publications, curriculums, and related remedial plans continues to be on-going during the development of the IBTM. During this period the sex behavior program plan was received and reviewed.
- *Goal:* Update conference call with *Farrell* parties October 14th

Progress: The update conference call occurred as scheduled. Experts informed *Farrell* parties that an extension is required to complete the draft of the IBTM. Drs. Wolf and Schmidt will provide a draft for review by the Experts no later than November 15th. In order to meet this deadline, the Experts have requested that Drs. Wolf and Schmidt prioritize writing the model description over other activities such as the site visit to Stark and Town Hall meetings. These activities will resume after draft of the IBTM is

completed. Additionally, in this conference call it was decided that DJJ would provide the Experts with a list of IBTM related contracts for review.

- *Goal:* Site visit to Stark

Progress: Site visit was cancelled by the Experts in order to permit focus on development of IBTM description.

- *Goal:* Conduct Town Hall meeting on October 14th 10-12am.

Progress: This Town Hall discussion focused on the five functions of treatment. The five functions of treatment will be a component of the IBTM. Drs. Wolf and Schmidt led a discussion with representatives from all facilities and headquarters. The feedback from the Town Hall meeting has been positive. Town Hall meetings have made progress towards the expert's goals of engaging DJJ staff and allowing participants to become familiar with each other. These meetings have also been helpful towards identifying specific DJJ staff to invite to the implementation planning team. The next Town Hall meeting will occur after the distribution of the IBTM description.

- *Goal:* Review DJJ contracts for alignment with IBTM

Progress: A list of DJJ contracts related to the IBTM was review by the Experts. The Experts made recommendations regarding the continuation of each of the contracts based on their alignment with the IBTM. This information has been shared with *Farrell* parties. In order to be responsive to DJJ's request for a discussion, the Experts suggested that these recommendations be discussed during the next IBTM update conference call scheduled for Monday, October 26th.

NEXT STEPS

- Complete the IBTM description
- Update conference call with Farrell parties Monday, October 26th.

Appendix H
Mental Health Remedial Plan Audit Items: Report of Findings, September 2009
Monitors Zack Schwartz and Aubra Fletcher

The mental health remedial plan assigns monitoring of certain items to the office of the special master (OSM). From October 2008 to June 2009, the special master and/or her staff visited all DJJ facilities and central office to monitor compliance with these items. Informal reports were submitted to the parties following each audit. This report summarizes the results of those site visits. Where necessary, we have also drawn on information from other contacts with DJJ.

4.2a: Establish policy/process to receive & share MH info with counties: consultation with local governmental entities.

The remedial plan requires DJJ to establish a process to receive and share youths' behavioral and assessment information with counties.¹ In establishing such a process, DJJ must consult with local government entities.² OSM monitors whether such consultation has taken place. The mental health experts separately monitor whether DJJ has adopted an appropriate policy or process.³

In December 2007, OSM reported that this consultation had not taken place.⁴ In November 2008, DJJ did not include this consultation among the standards and criteria items that it expected to complete by June 30, 2009.⁵ In the meantime, DJJ parole representatives meet with local county officials about general information-sharing issues.⁶ When mental health issues arise in these meetings, parole personnel approach MH staff regarding the issue and reportedly relay information to the counties.⁷ In late 2008, this led to the creation of a new form to share MH information with the counties.⁸ DJJ has also adopted a more detailed form for counties to fill out at intake to DJJ.⁹

Rating: Beginning compliance

¹ Mental Health Remedial Plan, p. 19.

² Mental Health Remedial Plan Standards and Criteria, items 4.2a-b.

³ *See id.*, item 4.2b.

⁴ *See* Sixth Report of the Special Master (January 2008), Appendix A, Attachment 2, p. 1.

⁵ *See* Deft. Response to Court Order, October 27, 2008, Attachment 1, p. 1. DJJ has provided a log of contacts between intake and court liaison staff and county officials from August 2006 to May 2008. *See* Intake and Court Liaison Contact Log (PoP #197, July 25, 2008). The log includes contacts ranging from attending juvenile hall orientations to testifying at commitment hearings. It is not clear whether any of the contacts were aimed at producing a process to receive and share mental health information with the counties.

⁶ Statements of Juan Carlos Arguello and Louise Allen during central office site visit, February 18, 2009.

⁷ *Id.*

⁸ *Id.*; letter of Todd Irby to special master, July 24, 2009 (attaching Summary of Mental Care Form).

⁹ *Compare* letter of Todd Irby to special master, July 24, 2009 (attaching Mental Health Intake Assessment, DJJ Form 1.205, revised September 2008) *with* Mental Health Assessment, YA form 1.205, revised January 2003 (provided as PoP #68, November 13, 2007).

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

Chaderjian: At the time of OSM's visit to Chaderjian, its mental health administrator was licensed clinical social worker Rick Flynn.¹⁰

Rating: Substantial compliance

O.H. Close: There were no residential mental health programs at O.H. Close at the time of the October 2008 site visit.

Rating: Not applicable

Stark: Jennifer Hetherington, a licensed clinical social worker, oversees all residential mental health treatment units, including the ITP, IBTP, SBTP, and SCP units.¹¹

Rating: Substantial compliance

SYCRCC: Program Administrator Howard Hamel oversees the ITP,¹² and Program Administrator Norma Fong-Mori oversees the SBTP.¹³

Rating: Substantial compliance

Ventura: The former program administrator for mental health, Cynthia Brown, is now acting assistant superintendent.¹⁴ As of September 2009, Ms. Brown continued to attend mental health program-related meetings, monitor mental health program issues, visit units, and participate in mental health personnel hiring. Ms. Brown is assisted by two licensed clinical social workers in overseeing the mental health units.

Rating: Substantial compliance

¹⁰ See statements of Rick Flynn during Chaderjian site visit, October 17, 2008. Mr. Flynn has since begun working with central office's court compliance team. Statements of Mike Brady during experts' meeting, August 21, 2009. This transfer occurred after the completion of the audit round.

¹¹ Statements of staff during Stark site visit, April 29-30, 2009; DJJ comments on Stark site visit report, August 24, 2009.

¹² Statements of senior psychologists during SYCRCC site visit, December 9-10, 2008.

¹³ *Id.*

¹⁴ This paragraph is based on statements of assistant superintendent Cynthia Brown and superintendent David Finley during OSM's Ventura site visit, December 1-3, 2008 and on e-mails of Cynthia Brown to Zack Schwartz, September 16, 2009.

5.7: Established centralized Mental Health Review Team / review protocol: Centralized Mental Health Review Team reviews MH placement referrals and determines if youth meets admission criteria. Placements consistent with criteria. HQ coordinates use of MH beds. *This item is also monitored by MH experts.*¹⁵

The remedial plan requires that a centralized team review recommendations for placement in inpatient or residential mental health programs and recommendations for changes in levels of care.¹⁶ The team is to determine whether referrals to residential mental health programs are consistent with entrance criteria and whether recommended placements are appropriate.¹⁷

Currently, the “Special Program Assessment Needs” (SPAN) process is used to determine level of care placements for youth with mental health needs.¹⁸ At the direction of Chief Psychiatrist Ed Morales, all SPANs are reviewed by supervising psychologists or one of three designated reviewers. If the reports do not meet professional standards, the reviewer returns them to the evaluating psychologist.

This remedial requirement also mandates that youth placements be consistent with the decisions of the centralized review team.¹⁹ During this audit round the monitors learned that at Ventura mental health clinicians’ decisions regarding placement were overridden by non-clinical concerns.²⁰ In order to maintain roughly equal population numbers across living units, non-clinical personnel prevented the transfer of young women from residential mental health units to the general population, despite psychologists’ determinations that such transfers were clinically indicated.²¹ The experts have reminded DJJ that “[c]linical decisions need to take a primary role in determining when youth are to be transferred from mental health treatment units, and should not be compromised by population management.”²²

Rating: Partial compliance

¹⁵ The experts did not report on compliance with this requirement during their audit round.

¹⁶ See Mental Health Remedial Plan, p. 43.

¹⁷ *Id.*, p. 28.

¹⁸ The remainder of this paragraph is based on statements of Juan Carlos Arguello and Louise Allen during central office site visit, February 18, 2009, and on subsequent correspondence with Ed Morales and Ji Hong Kim.

¹⁹ See Mental Health Remedial Plan, p. 28.

²⁰ Statements of various staff and management during Ventura site visit, December 2-3, 2008.

²¹ See Terry Lee and Eric Trupin, Farrell Mental Health Experts’ Headquarters Site Visit, January 8-9, 2009, p. 24 (“[A]ccording to MH staff at Ventura, a woman that had made progress on the ITP could not move to a core unit because of “population management” concerns—that is, a policy of keeping the population of various cottages roughly equal. When she learned she would remain on the ITP, she became demoralized and participated less in treatment.” Mental health treatment team members reported that they have little input into which core treatment unit youth will be transferred to, and spent time in team meetings discussing how to manage which facility youth will be transferred.”).

²² *Ibid.*

5.11: Outpatient MH staffing consistent with MH Remedial Plan. Positions filled/assigned.

The original remedial plan requirements for outpatient staffing ratios are as follows:

- 1 Psychiatrist per 200 youth
- 1 Psychologist per 76 youth on core treatment units
- 1 Psychologist per 24 youth on BTPs
- 1 Senior Psychologist per 7 Psychologists (minimum 1 per facility)
- 1 Office Technician per 4 clinicians²³

The Court's July 31, 2009 order modified these requirements:²⁴

- 1 Psychiatrist per facility
- 0.5 Psychologists per core treatment or BTP unit
- 1 Senior Psychologist per 7 Psychologists
- 1 Office Technician per 4 clinicians

The table below compares staffing levels at the time of the audits to the staffing requirements then in effect. Population data are drawn from Administrative Summaries collected on-site.²⁵ Staffing data are drawn from statements of facility staff and/or documentation provided.

Outpatient Staffing Levels at Time of Audits										
Facility	Population		Psychiatrists		Psychologists		Senior Psychologists		Office Technicians	
	core	BTP	Required	Staffed	Required	Staffed	Required	Staffed	Required	Staffed
Chaderjian	136	0	0.7	1*	1.8	4*	1	1*	1.25	2*
OH Close	137	0	0.7	1	1.8	3	1	? ²⁶	1	2*
Preston	280	26	1.5	2	4.8	6	1	1	2	1*
Stark	265	0	1.3	1	3.5	4	1	3*	1.25	0
SYCRCC	166	0	0.8	1	2.2	4	1	2	1.25	1*
Ventura	<165	0	<0.8	1.5	<2.2	4	1	2	1.4	1*

* = *Staff serve residential as well as outpatient youth/staff*

²³ See Mental Health Remedial Plan, p. 23.

²⁴ See Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules and Sealing of Staffing Model and Business Rules, July 31, 2009.

²⁵ Figures on the population of Ventura's residential mental health units were not available as we wrote this report. We estimated the number of clinicians that would be needed if the entire population lived in core treatment units. Given that the facility had more than enough clinicians for this situation, it also had enough clinicians to serve only the youth on its core treatment units.

²⁶ OSM lacks information about this position at O.H. Close, and mental health positions were not included on DJJ's February 2009 organizational charts filed with the Court. Aubra Fletcher has e-mailed mental health team leader Louise Allen for more information, on September 24, 2009.

In general, facilities were at or above required outpatient clinician staffing levels, but deficient in office technicians (OTs) assigned to outpatient staff. The workload for OTs is actually higher than the above table suggests, since they also serve clinicians assigned to residential mental health units. As a result, clinicians may be assigned excessive clerical work.²⁷

Rating: Substantial compliance (O.H. Close, Chaderjian); partial compliance (Preston, Stark, SYCRCC, Ventura)

5.14a: Reduce ITPs and SCPs to no more than 30; **5.14b:** Reduce IBTPs to no more than 20 (exclusive of mentor youth); **5.15a:** Reduce ITPs and SCPs to no more than 24; **5.15b:** Reduce IBTPs to no more than 16 (exclusive of mentor youth).

At the time of the audits, all ITPs and SCPs housed no more than 24 youth, and all IBTPs housed no more than 16 youth. As of the second quarter of 2009, all residential mental health units remained below the population limits.

Pop. of Residential MH Units at Time of Audits				
Facility	Date	ITP	SCP	IBTP
Chaderjian	10/7/08	19, 19	24, 24	13
OH Close	n/a	n/a	n/a	n/a
Preston	n/a	n/a	n/a	n/a
Stark	4/29/09	13	23	16
SYCRCC	12/9/08	21	n/a	n/a
Ventura	12/1/08	13	17, 20	n/a

n/a = facility does not contain unit type
Source: Daily Administrative Summaries

Average Population of Residential Mental Health Units, 2nd Quarter 2009									
Facility	ITPs			SCPs			IBTPs		
	#	Population		#	Population		#	Population	
		Total	Per Unit		Total	Per Unit		Total	Per Unit
Chaderjian	2	30	15	2	39	19.5	1	14	14
OH Close	0	n/a	n/a	1	20	20	0	n/a	n/a
Preston	0	n/a	n/a	0	n/a	n/a	0	n/a	n/a
Stark	1	14	14	1	20	20	1	14	14
SYCRCC	1	18	18	0	n/a	n/a	0	n/a	n/a
Ventura	1	16	16	2	40	20	0	n/a	n/a

n/a = facility does not contain unit type
Source: QSR Second Quarter 2009

Rating (5.14a- b, 5.15a-b): Substantial compliance (all facilities)

²⁷ See statements of psychologist during Preston site visit, May 28, 2009.

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.²⁸ The mental health experts inform us that they will evaluate the issue in 2010, after the IBTM is described and dialectical behavior therapy is introduced.²⁹

Rating: Not rated

5.20: Collaborate with DMH 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 MH experts.*

DJJ has documented 78 contacts with DMH between June 1, 2008 and June 30, 2009.³⁰ The vast majority concern referrals and transportation of specific youth to DMH facilities.³¹ In mid-2008, the two agencies exchanged a series of e-mails regarding drafts of a Memorandum of Understanding (MOU) governing admission of DJJ youth to DMH hospitals, which was signed on July 23, 2009.³² Finally, during this period, DJJ met with DMH personnel for more general discussions twice, once in October 2008 and once in January 2009.³³

There is nothing in the documentation submitted that indicates that DJJ and DMH have a vital relationship directed at serving DJJ's needs. For example, there is no indication that DJJ has explored whether DMH might meet its needs for licensed beds for females or northern California males. Also, the MOU for DJJ's access to state hospital beds excludes all youth with any sex offenses from Metro State Hospital (the hospital used by DJJ in southern California), which appears to be a blanket reaction in disregard of the interests of DJJ youth.

Rating: Partial compliance

²⁸ See e-mail of Barry Krisberg to the special master, September 22, 2009.

²⁹ See e-mail of Terry Lee to the special master, September 23, 2009.

³⁰ Letter of Todd Irby to special master, July 24, 2009 (attaching document entitled "Contacts with DMH to Expedite Transfers and Facilitate Transitions").

³¹ *Id.* A typical example is an e-mail documented as "referral letter to NSH [Napa State Hospital] re. JT [a youth's initials]," followed five weeks later by an e-mail regarding "transport of JT from DJJ to NSH." See *id.*

³² *Id.*

³³ *Id.*; see also DJJ Quarterly Report, January 31, 2009, p. 156 (referencing "quarterly" meetings).

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: DJJ began work on these requirements this year.³⁴ DJJ began drafting a “project charter” which encompasses the family engagement model and parent partner program in early 2009.³⁵ As of September 2009, a work group assigned to “develop the statewide model for family involvement, including a vision and a plan for family involvement throughout [DJJ’s] treatment continuum,” was in the “information-gathering stages.”³⁶ The work group plans to integrate its work with the development of the integrated behavior treatment model (IBTM).³⁷

Rating (for both items): Non-compliance

6.8: DJJ has taken no steps to implement Family Integrated Transitions.³⁸

DJJ piloted the Family Justice Model at O.H. Close last year.³⁹ As of early April 2009, DJJ staff were working with Family Justice to set a schedule for expanding the model statewide. As of September 2009, interdisciplinary work groups at all remaining DJJ facilities are working with Family Justice to improve family involvement.⁴⁰ The facilities thus far have held youth and staff focus groups “to prime . . . data collection tools, surveys and interview protocols,” which will be used to survey families and youth in October or November 2009. The facilities’ Family Councils will hold focus groups with families prior to the surveys. DJJ reports that once it receives family and youth feedback, it will focus on strategies to enhance family involvement.

DJJ also intends to expand the model to field parole.⁴¹ As of April 2009, DJJ and Family Justice planned to begin implementation in parole via regional trainings.⁴² These trainings were held in September 2009.⁴³

Unfortunately, Family Justice will go out of business in October 2009.⁴⁴ Before its closure, Family Justice will provide DJJ with a training-for-trainers session to “provide the participants

³⁴ See, e.g., Deft. Response to Court’s October 27, 2008 Order, Attachment I, p. 4 (indicating that DJJ had not begun work on this requirement and did not expect to attain substantial compliance by the end of fiscal year 2008-2009); statements of Amy Seidlitz to Aubra Fletcher, March 25, 2009; PoP #362, March 12, 2009.

³⁵ See statements of Amy Seidlitz to Aubra Fletcher, March 25, 2009.

³⁶ E-mail of Rosalinda Rosalez to Aubra Fletcher and Tammy McGuire, September 21, 2009.

³⁷ *Id.*

³⁸ Statements of Juan Carlos Arguello during central office site visit, February 18, 2009.

³⁹ Statements of Yvette Marc-Aurele during O.H. Close site visit, October 16, 2008.

⁴⁰ E-mail of Rosalinda Rosalez to Aubra Fletcher and Tammy McGuire, September 21, 2009. Information contained in the remainder of this paragraph is also based on this source.

⁴¹ E-mail of Rosalinda Rosalez to Aubra Fletcher, April 8, 2009.

⁴² *Id.*

⁴³ E-mail of Rosalinda Rosalez to Aubra Fletcher and Tammy McGuire, September 21, 2009.

⁴⁴ *Id.* The information in the remainder of this paragraph is based on this source.

with their full complement of tools.” DJJ intends to continue the work it has begun despite Family Justice’s closure.

Rating: Beginning compliance

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

Prior to the last monitors’ report, DJJ provided documentation of mental health staff attendance at conferences in 2006 and the first half of 2007, mainly in California but also out-of-state.⁴⁵ DJJ has not provided similar documents on conference participation since mid-2007.⁴⁶

Pursuant to labor contracts, DJJ allots psychologists up to \$200 a year and psychiatrists up to \$1000 a year for continuing education.⁴⁷ The contract for psychiatrists allots them seven work days that can be used for conference attendance.⁴⁸ The CMO may increase this allotment on a case-by-case basis, but interviewed staff at various facilities could not remember when this last occurred. For out-of-state conferences, the training allotment can be used only for registration fees, not for travel.

General fund dollars are theoretically available for some travel expenses. Since mid-2008, state budget issues have led CDCR to issue intermittent restrictions, which have affected conference attendance by DJJ mental health staff.⁴⁹ In mid-to-late 2008, and again in early 2009, funding for travel was frozen entirely.⁵⁰ Facility mental health staff report that during 2008, central office regularly denied requests to use general funds to travel to conferences.⁵¹ As a result of these pressures, conference attendance has been sparse, as clinicians must use their own funds to travel.⁵²

Bureaucratic impediments prevent some staff from attending conferences, even when staff are willing to pay their own travel expenses. State law requires that staff submit out-of-state travel requests one year in advance.⁵³ Due to inability to secure approval, only one mental health staff

⁴⁵ See Mental Health Training Log (PoP #27, June 2, 2007); Sixth Report of the Special Master (January 2008), Appendix A, Attachment 2, pp. 4-5.

⁴⁶ DJJ’s director of programs stated in October 2008 that he would provide such information to the mental health experts and OSM. See statements of Doug McKeever during Chaderjian site visit exit interview, October 17, 2008. The information was not provided.

⁴⁷ E.g., Statements of Ed Morales during teleconference with the special master, September 22, 2009.

⁴⁸ *Id.*

⁴⁹ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher report), p. 31.

⁵⁰ *Ibid.*

⁵¹ Statements of facility mental health staff during O.H. Close and Chaderjian site visits, October 16-17, 2008; statements of four psychologists during Ventura site visit, December 1-3, 2008.

⁵² Statements of facility mental health staff during O.H. Close and Chaderjian site visits, October 16-17, 2008.

⁵³ DJJ, Response to Draft 11th Special Master’s Report, provided November 17, 2009; see also statements of Juan Carlos Arguello and Ed Morales during O.H. Close and Chaderjian site visits, October 16-17, 2008; statements of Juan Carlos Arguello during central office site visit, February 18, 2009; statements of Doug McKeever during teleconference with the special master, September 24, 2009.

person at central office attended a conference in 2008.⁵⁴ In early 2009, the acting SBTP coordinator had difficulty gaining approval to attend an out-of-state conference highly recommended by Dr. Barbara Schwartz.⁵⁵ High-level DJJ management creatively intervened to make her attendance possible.⁵⁶

Rating: Beginning compliance

7.1: Pay parity with comparable CDCR adult operations MH staff: DJJ produces documentation confirming pay parity. Pay differentials used as appropriate.

As OSM has previously reported, DJJ achieved pay parity with CDCR in the spring of 2007.⁵⁷

Rating: Substantial compliance

7.2: Work with Office of Workforce Planning, re: participate in job fairs and recruitment events.
7.3: Participate in job fairs and recruitment events.

In its November 21, 2008 submission to the court, DJJ indicated that compliance with these two requirements was “in progress,” and that they expected to achieve substantial compliance by June 30, 2009.⁵⁸ DJJ has not provided documentation of participation in recruitment fairs since June 2007.⁵⁹

Currently, work force reduction is a greater concern than is the need to hire additional mental health personnel.⁶⁰ OSM therefore declines to assign ratings to these items at this time.

Rating (both items): Not rated

⁵⁴ Statements of Juan Carlos Arguello and Louise Allen during central office site visit, February 18, 2009.

⁵⁵ See, e.g., statements of Mike Brady to special master in early 2009.

⁵⁶ *Id.*

⁵⁷ See Sixth Report of the Special Master (January 2008), Appendix A, Attachment 2, p. 5.

⁵⁸ See Def. Response to Court’s October 27, 2008 Order, Attachment I, p. 5.

⁵⁹ PoP #19, June 4, 2007 (e-mails and notes re recruitment events).

⁶⁰ See, e.g., statements of Juan Carlos Arguello during central office site visit, February 18, 2009.

S&W 6.1a-c: DJJ is required to convert Chaderjian to a treatment facility by April 2007. **6.1b** (begin conversion) and **6.1c** (complete conversion): Stark was due to begin conversion to a rehabilitative model January 1, 2007 and to complete the conversion by July 1, 2007. Preston was to begin conversion by July 1, 2007 and complete conversion by January 1, 2008. A fourth facility was to have completed conversion by July 2008, and a fifth was to begin the process in the same month. 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.

7.5a: Establish training schedule – IBTM.

Progress on this item depends on development of a treatment model (IBTM). We have elsewhere reported on the history of this issue through June 2009.⁶¹ In July 2009, the parties agreed that the mental health, safety and welfare, and sexual behavior treatment experts would direct drafting of the IBTM description.⁶²

Rating: Non-compliance⁶³

7.5b2: Establish training schedule – interventions for high-frequency disorders. Reasonable schedule in place.

In order to comply with this requirement, DJJ must first “identify interventions for high frequency disorders” and select “annualized evidence-based interventions.”⁶⁴ The mental health experts report that DJJ is not compliant with this requirement.⁶⁵

Rating: Non-compliance

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

DJJ’s process for informing youth of policy changes applies to all policy changes, whether safety and welfare-related or mental health-related.⁶⁶ The process requires facility staff to post

⁶¹ See Ninth Report of the Special Master (June 2009), pp. 8-18.

⁶² See Order Concerning Integrated Behavior Treatment Model, July 2, 2009.

⁶³ The mental health experts have assigned a “beginning compliance” rating to this item; however, OSM notes that the compliance definitions in the Standards and Criteria permits a BC rating when “training materials prepared and approved but training not started.” No IBTM training materials have been prepared or approved.

⁶⁴ Mental Health Remedial Plan Standards and Criteria, item 7.5b1.

⁶⁵ See Terry Lee and Eric Trupin, Farrell Mental Health Experts’ 2008-2009 Site Visit Summary [draft], provided August 19, 2009, p. 23.

announcements on dayroom walls, hold a large group to inform youth of changes and allow for questions, and have youth sign a form to document their presence at the session. The sign-in sheets are to be maintained in a central location. Facility compliance with all steps of the process varies, as reported in OSM's safety and welfare facility reports.

Rating: Partial compliance

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.

The monitors reported on office and program space in their June 2009 safety and welfare report.⁶⁷ The discussion below should be read in conjunction with that report.

Implementation plan

As of March 2009, DJJ had assessed space needs at all facilities based on June 2010 population projections.⁶⁸ According to Facilities staff, significant attention was given to mental health programs in every assessment.⁶⁹ Mental health representatives have also participated in facilities planning committees.⁷⁰

Because it was still unknown which facility would be closed and when, DJJ did not invest in correcting all space needs.⁷¹ On August 27, 2009, DJJ announced the plan to close Stark.⁷² During the next audit round, OSM will monitor DJJ's response to space needs now that a closure decision has been reached.

Office space for mental health clinicians

As reported in June 2009, not all mental health clinicians enjoy adequate office space,⁷³ though the office and treatment space that stood vacant for a year at SYCRCC is now in use.⁷⁴ Clinician offices are not consistently in or adjacent to living units.⁷⁵

⁶⁶ See e-mail of Dr. Juan Carlos Arguello to Aubra Fletcher, March 19, 2009; e-mail of Joan Loucraft to Aubra Fletcher, March 19, 2009. Unless otherwise noted, the remainder of this paragraph is based on these sources.

⁶⁷ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 33-37.

⁶⁸ E-mail of Tammy McGuire to Aubra Fletcher, March 23, 2009.

⁶⁹ See e-mail of Tammy McGuire to Aubra Fletcher, March 23, 2009.

⁷⁰ See, e.g., DJJ, Response to Draft 11th Special Master's Report, provided November 17, 2009.

⁷¹ See e-mail of Tammy McGuire to Aubra Fletcher, March 23, 2009; statements of Mark Blaser to Barry Krisberg during central office site visit, January 15, 2009.

⁷² See statements of Bernard Warner during teleconference, August 27, 2009.

⁷³ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 36-37.

⁷⁴ E-mail of Erin Peel to Aubra Fletcher, July 16, 2009; see also Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 24-26.

Treatment space

Staff at most facilities cited insufficient and inadequate space in which to hold group and individual sessions.⁷⁶ Regarding the provision of a therapeutic milieu, Dr. Krisberg and Chief Deputy Secretary Warner have agreed that DJJ's facilities are inadequate to support a treatment program.⁷⁷ The primary obstacle is the state government's failure to commit to build new facilities,⁷⁸ though DJJ estimates that even with approved funding, the process of constructing new facilities would take four to five years.⁷⁹ DJJ currently plans to install 75 new modular buildings across the state.⁸⁰

Rating (all facilities): Partial compliance

11.2: Include MH issues in Juvenile Justice Operational Master Plan and DJJ Facilities Master Plan.

The mental health and safety and welfare plans require the development of a juvenile justice operational plan (to coordinate and improve the state's entire juvenile justice system, including county and state systems, parole, and community services)⁸¹ and a facilities master plan (a systematic description and quantification of future facility needs based on a projection of future demand, demographics, projected program needs, and the geographical distribution of commitments").⁸² DJJ must ensure that mental health issues are taken into account" in the development of these plans.⁸³

Juvenile justice operational plan

The mental health remedial plan states: "Among other things, [the juvenile justice operational plan] may lead to alternative strategies for dealing with some of the youth historically committed

⁷⁵ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 36-37; statements of staff during Stark site visit, April 29-30, 2009; statements of staff during SYCRCC site visit, December 9-10, 2008; statements of staff during Preston site visit, May 28, 2009.

⁷⁶ See, e.g., Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 33-34.

⁷⁷ Statements of Barry Krisberg during Case Management Conference, July 30, 2009 (also describing DJJ's physical plant as an "oppressive environment"); see also statements of Bernard Warner during Case Management Conference, July 30, 2009; Mental Health Remedial Plan, p. 72 (describing DJJ facilities as "generally non-therapeutic environments").

⁷⁸ Statements of Barry Krisberg during Case Management Conference, July 30, 2009.

⁷⁹ Statements of Bernard Warner during Case Management Conference, July 30, 2009.

⁸⁰ *Id.* The Mental Health Remedial Plan requires much more than the "interim" installation of modular buildings. See Mental Health Remedial Plan, p. 72; Safety and Welfare Remedial Plan, pp. 68-69. The plan requires the construction of "[r]eplacement [f]acilities" that will "provide a secure and private setting for treatment and an adequate number of mental health treatment rooms for individual, family and group psychotherapy." See Mental Health Remedial Plan, p. 73.

⁸¹ See *ibid.*; Safety and Welfare Remedial Plan, pp. 67-68.

⁸² See Safety and Welfare Remedial Plan, p. 68; Mental Health Remedial Plan, p. 73.

⁸³ Mental Health Remedial Plan, p. 73.

to DJJ. Since the prevalence of mental illness is so high in the committed population, any alternative strategy must also address mental health issues.”⁸⁴

DJJ representatives were a part of the State Commission on Juvenile Justice, which issued a “Juvenile Justice Operational Master Plan” in January 2009.⁸⁵ This document’s references to mental health issues consist of listing existing mental health programs and describing counties’ need for additional resources.⁸⁶ In terms of future planning, the document simply lists “[r]esidential mental health treatment” as one of various “Examples of Options on the Juvenile Justice Continuum.”⁸⁷

Rating: Non-compliance

Facilities master plan

DJJ has not completed its facilities master plan, though staff have indicated that the draft plan “includes the program needs for all youth projected over a 15 year period,” including “mental health youth.”⁸⁸ DJJ has not shared a draft of its facilities master plan with the special master or the mental health experts.

Rating: Non-compliance

12.1: Add or appoint senior administrator for plan implementation: Position filled/assigned.

Juan Carlos Arguello is the senior administrator for plan implementation.

Rating: Substantial compliance

⁸⁴ See *id.*, p. 72.

⁸⁵ Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 63. The Plan is available at

http://www.cdcr.ca.gov/Divisions_Boards/State_Commission_on_Juvenile_Justice/docs/JJOMP_Final_Report.pdf.

⁸⁶ See State Commission on Juvenile Justice, Operational Master Plan, January 2009, pp. 13-15 (describing counties’ needs for “secure treatment facilities” and their stopgap efforts to address these needs), p. 45 (depicting “Frequency of State Committed Non-707(b) Youth Receiving Local [outpatient and inpatient mental health] Services By County Size”), p. 52 (Programs with a “Mental Health Focus” make up 11 percent of reporting counties’ “Intensive Supervision Programs.”), p. 53 (Seventy-one percent of juvenile halls have “Mental Health Services” programs.), p. 54 (Forty-seven percent of camps and ranches have “Mental Health Services” programs.), p. 55 (Twenty-six percent of camps and ranches have “Special Population[]” programs for “mentally ill youth, and 9 percent of aftercare and reentry programs have a mental health focus.), p. 56 (describing DJJ’s current mental health programs).

⁸⁷ See *id.*, p. 36.

⁸⁸ E-mail of Tammy McGuire to Aubra Fletcher, March 23, 2009 (citing input from Mark Blaser); see also Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), p. 64.

12.2: Add or appoint four clinicians/MH administrators to reform team: Positions filled/assigned.

The central office staff who are designing and implementing reform are organized in a somewhat different fashion than that laid out in the remedial plans. Two senior mental health clinicians are a part of the Court Compliance Task Force (Dr. Juan Carlos Arguello and LCSW Rick Flynn), and two senior mental health clinicians are among DJJ's reform trainers (Drs. Telander and White).

Rating: Substantial compliance

12.3: Develop MH training team (3 clinicians + support): Positions filled/assigned.

The remedial plan requires a mental health training team comprised of at least three licensed clinicians, an instructional designer, and an office technician.⁸⁹ DJJ has reduced the mental health team by two positions, and the current team consists of two clinicians and an instructional designer.⁹⁰ This and other proposed central office staff reductions will be discussed by the parties and experts in conjunction with the Christopher Murray and Associates' study of central office staffing.

The monitors note that questions have been raised about the quality and usefulness of the training team's work. In its October 2008 quarterly report, DJJ provided a list of 16 training curricula developed by the Mental Health Training Team.⁹¹ None of these trainings had been implemented as of April 2009.⁹² Four of the training curricula are missing; DJJ staff believe that

⁸⁹ See Mental Health Remedial Plan, pp. 75-76.

⁹⁰ Statements of Chief Psychiatrist Ed Morales to the special master, August 13, 2009.

⁹¹ See DJJ Quarterly Report (October 2008), p. 185. Below are the developed training materials (asterisks indicate missing curricula):

- Cognitive Behavioral Therapy Introduction and Techniques
- Criminal Street Gangs
- Post Traumatic Stress Syndrome in a Sexual Behavior Treatment Program
- Managing Stress After Traumatic Events
- Mental Health Disorders, Signs and Symptoms
- Pharmacotherapy for Sex Offenders
- *Self-Care and Avoiding Secondary Trauma
- Tattoos of Hate Groups and Gangs
- *Treatment Needs of youth with Sex Behavior Problems (SBTP)
- Introduction to Mental Health Training Team
- Psychopharmacology Treatment Guidelines for Staff (Psychopharmacology Policy)
- *Admission to Acute Care Facilities – Criteria and Process
- Dialectic Behavioral Therapy Introduction
- Understanding Personality Disorders
- Suicide Awareness
- *Traumatic Event Clinical Management Guidelines

⁹² E-mail of Juan Carlos Arguello to Aubra Fletcher, April 7, 2009.

a former training team member may have taken these with him when he left DJJ.⁹³ The other 12 curricula have been made available to the relevant experts for their review.⁹⁴ Dr. Barbara Schwartz has stated to OSM that the post-traumatic stress training for SBTP staff and the pharmacotherapy for sex offenders training are inadequate and should not be used.⁹⁵

Rating: Beginning compliance

S&W 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).

The monitors assigned ratings to these items in their June 2009 safety and welfare report.⁹⁶

S&W 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.

Central office has developed Community Assessment Reports (CARs) for statewide use beginning July 1, 2009.⁹⁷ OSM recently 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.⁹⁸ The facility's case work specialist is to complete a "clinic report" based on the CAR and on information provided by the county of commitment.⁹⁹

The remedial plan requires that the CAR process include contacts and interviews with parents as well as "close relatives and community service providers."¹⁰⁰ Field parole agents are only conducting family interviews.¹⁰¹

⁹³ E-mail of Juan Carlos Arguello to Aubra Fletcher, March 19, 2009.

⁹⁴ See e-mail of Aubra Fletcher to Eric Trupin, Terry Lee, Barbara Schwartz, Barry Krisberg, Madie LaMarre, Joe Goldenson, and Logan Hopper, March 20, 2009.

⁹⁵ See e-mail of Dr. Barbara Schwartz to Aubra Fletcher, April 7, 2009.

⁹⁶ See Ninth Report of the Special Master (June 2009), Appendix D (Schwartz and Fletcher Report), pp. 31-33.

⁹⁷ Statements of Elaine Struffenegger during teleconference, October 28, 2009; statements of Michelle Lewis during central office site visit, November 2, 2009.

⁹⁸ Statements of Michelle Lewis during central office site visit, November 2, 2009.

⁹⁹ Statements of Elaine Struffenegger during teleconference, October 28, 2009.

¹⁰⁰ See Safety and Welfare Remedial Plan, p. 70.

¹⁰¹ Statements of Michelle Lewis during central office site visit, November 2, 2009.

OSM will assign a rating to this item at the conclusion of the 2009-2010 audit round, based on audit findings and expert feedback.

Rating: Not rated at this time

S&W 8.3.2a: Family phone contact facilitated within 24 hours of commitment. Each youth is provided the opportunity to contact family members by telephone within 24 hours after commitment.

Most facilities were substantially compliant with this requirement during the monitors' audit round. Documentation provided following the audit round indicated that 55 of 55 youth who arrived between August 1, 2009 and October 28, 2009 had the opportunity to make a phone call within one day of arrival.

Rating: Substantial compliance

S&W 8.3.2b: Ongoing family phone contact facilitated. Each youth is provided the opportunity to contact family members by telephone on a regular basis throughout his/her stay in DJJ facilities.

Chaderjian: DJJ audited Chaderjian's family contact practices in February 2008. Parole agents reported that youth are permitted one phone call per week.¹⁰² Most living units designated phone usage days and times according to the YCC's caseload schedule. Youth may also "purchase" additional phone calls via the youth incentive program. B-Level youth may purchase an additional four calls a month. A-Level youth have unlimited phone privileges, according to some staff, and more limited phone access according to other staff. DJJ's self-audit found that youth "regularly exceed mandated telephone calls without using Ward Incentive Program points." The self-audit report added: "Confusion was expressed at all levels in regards to whether weekly mandated phone calls were to be direct calls from office telephones or collect calls from youth access telephones located in the dayrooms."

At a site visit in late October 2008, OSM monitors observed continued confusion among youth and staff at the facility. Two youth living on the ITP stated that direct calls are made only by request, with the approval of the TTS or casework specialist. Another youth on the ITP stated that only collect calls are allowed, but that youth access to the pay phone was virtually unrestricted. A youth on the SMP stated that whether the call is direct or collect depends on the youth's assigned YCC. One of the facility's grievance coordinators stated that she was unclear about the phone call policy and that she received grievances about phone access. She reported having asked for clarification of the policy regarding direct phone calls, but continued to receive

¹⁰² DJJ, N.A. Chaderjian Youth Correctional Facility SB 518, AB 1300, and Safety and Welfare Remedial Plan Item 8.3 Compliance Assessment, March 13, 2008, pp. 13-15. The remainder of this paragraph is based on this source.

unclear information. The information provided to her was not in writing, and she had been unable to obtain a copy of the written policy, despite repeated requests.

Rating: Partial compliance

O.H. Close: The facility's family orientation packet states that youth receive four phone calls per month, and that A Level youth receive unlimited calls. In its last two self-audits, the facility rated itself as ~~partially compliant~~ with the four calls per month requirement.¹⁰³ Both audits state that the area ~~will~~ be readdressed with staff. It may be that some wards may not be using all available telephone calls."

During a visit in August 2009, eighteen youth from a variety of living units were asked open-ended questions about how they kept in touch with their families.¹⁰⁴ Sixteen mentioned phone calls, either collect or direct. Youth whose families accept collect calls report that they can (and often do) call home as frequently as every day. Routine calls are limited to 15 minutes. Youth who cannot call their family collect have limited telephone contact with their families, depending upon the youth and the youth's assigned YCC.

Rating: Partial compliance

Preston: Youth are not consistently allowed weekly direct calls to family. A total of nine youth were interviewed about phone calls during site visits in February and May 2009. The youth were drawn from a cross-section of living units, including the pilot BTPs, a low-risk unit, an intake unit, and the substance abuse treatment unit. Only two of the nine youth, both housed on a low-risk living unit, reported receiving direct calls at least once a week.

Access to direct calls, and to a lesser extent pay phones, depends on the whims of staff rather than clear rules. Interviewees variously reported that access to phone calls depended on one's behavior, incentive level, relationship to staff, or the personality of one's assigned YCC.

Rating: Partial compliance

Stark: Youth often receive fewer than one direct call to family per week. Thirteen youth were interviewed regarding access to direct calls in January 2009. Three said they could make direct calls at least once a week. Four reported problems obtaining direct calls to family.¹⁰⁵ The

¹⁰³ See DJJ, "O.H. Close Youth Correctional Facility SB 518, AB 1300, and Safety and Welfare Remedial Plan Item 8.3 Compliance Assessment," February 8, 2008. The following sentence is also based on this source.

¹⁰⁴ Notes on this visit were sent to the parties by Zack Schwartz on August 24, 2009. The remainder of this paragraph is based on this source.

¹⁰⁵ Three youth, two from the I/J incentive unit and one from a high-risk unit, said staff frequently denied their requests to make direct calls, despite the fact that their families could not accept collect calls. One of them reported receiving only two direct calls in the past three months. Another stated that he had received only four direct calls since arriving at Stark in March 2007. The fourth youth that reported problems with direct calls and could not call his parents at all because they lived in Mexico. Instead, he called an aunt in San Diego and asked her to pass along messages.

remaining six either provided ambiguous information or did not call family direct.¹⁰⁶ Another youth's case notes indicate that staff disciplined him by denying access to phone calls,¹⁰⁷ possibly in violation of California law.¹⁰⁸

Collect calls are generally available, although they may require the permission of staff. One youth stated that collect calls are only available with permission from his assigned YCC or from "nice" staff. A second said collect calls required a written request. A third said there was a sign-up sheet for collect calls. In the special master and monitors' experience, many youths' families cannot accept collect calls.

Rating: Partial compliance

SYCRCC: Youth at all living units are allowed to call family direct at least once a week. During the December 2008 site visit, six youth were interviewed on the SBTP and stated that free calls were allowed once a week. During the same site visit, four youth were interviewed on the ITP and stated that they may make at least one free call once a week. In March 2009, twelve of twelve interviewed youth said they were allowed at least one free phone call per week. Two of the twelve said they were allowed more than one free call per week. Youth also noted that the Catholic and Protestant chaplains let them make direct calls whenever they came to their office.

The length of calls varies from five minutes to a half-hour, depending on the staff member on duty. Youth on the SBTP unit reported that some staff allow only five minutes and some allow longer. Youth at the ITP unit reported that calls last from about 10 to 30 minutes, depending on various circumstances. One youth in the core treatment units reported that calls could be as short as five minutes; a second said they could be as long as 30 minutes.

Pay phones are accessible at any time. All ten youth interviewed on the SBTP and ITP units stated that collect calls are generally available to youth. Only one of ten core treatment youth interviewed about pay phones reported problems obtaining access to them. The remainder stated either that they could use pay phones whenever they chose or that their families did not accept collect calls.

Rating: Substantial compliance

Ventura: Youth are able to call family at least once per week. During a site visit in December 2008, assistant superintendent Cynthia Brown stated that youth receive one call per week, plus

¹⁰⁶ One youth stated he did not call family because when he did, his YCC sat in the room with him listening.

¹⁰⁷ E-mail of Doug Ugarkovich to special master, June 25, 2009 (attaching counseling/casework notes dated April 17, 2009) ("met with [name]. We discussed the consequences of bad behavior. They were told that one of the consequences for poor behavior given by myself would be no brown calls for at least a week.") and May 12, 2009 ("Six out of seven wards on my caseload, including [name], were on TD due to their alleged involvement in a group disturbance/multiple fights on 5/10/09 When I approached [name]'s door, he appeared sullen and withdrawn. He did not initiate a discussion about the incident, nor did he express any particular concerns/requests. I informed him that he would not be receiving a 'brown' [direct] call this week . . .").

¹⁰⁸ Under WIC § 224.71(m), youth may not be deprived of "contact with parents" as a disciplinary measure.

incentive calls. According to her, youth generally make collect calls but may request direct calls. During the same visit, eleven youth were interviewed regarding access to phone calls. A majority stated that they were able to make direct calls to family once a week. The majority also stated that their families cannot afford to pay for collect calls.

Youth with children receive one additional direct call per week. A flyer posted on one of the living units stated that youth who have children are allowed an additional call each week. Two youth said they were allowed two direct calls per week: one to contact family, and one to contact children.

Posted fliers indicate that pay phone access depends on incentive level, although it is not clear whether this rule is uniformly applied. A young woman stated that A-Level youth on her unit are allowed more collect calls than are youth on other incentive levels. One young man reported that because he is C-Level, his pay phone access is restricted to four collect calls per week. However, three other youth on the same unit stated that all youth have unlimited access to pay phones.

Some youth reported difficulties due to restrictions as to when or how often they could call family. One youth reported that his family is not reachable by phone at the time of day and day of week on which he is allowed a direct call. A youth on a different living unit stated that his YCC is flexible when such time conflicts arise. A young woman, who had not seen her five-year-old daughter for almost three years, stated that her weekly direct calls were limited to five to ten minutes each.

Rating: Substantial compliance

S&W 8.3.3: Family visiting days occur at least four times a year at each facility.

In May 2008, the director of facilities notified superintendents that they were required to organize family visiting days.¹⁰⁹ The visiting days must be open to youth on all incentive levels. Participation by youth on “alternative programs” is at the discretion of the superintendent. The director did not specify whether superintendents may impose a blanket restriction on participation of such youth, or whether this discretion must be exercised on an individual basis. DJJ forwarded a revised visiting policy to labor on August 25, 2009.¹¹⁰ The revised policy will require quarterly family visiting days.¹¹¹

Central office currently tracks family visiting days through quarterly reports on incentive activities.¹¹² The reports list the number of special family events open to all incentive levels held at each facility during the quarter, as well as the number of youth who participated. Because

¹⁰⁹ See memorandum of Sandra Youngen to superintendents re “Family Visiting Days,” May 19, 2008. Unless otherwise noted, the remainder of this paragraph is based on this source.

¹¹⁰ DJJ, Policy Dashboard [draft], provided September 3, 2009.

¹¹¹ E-mails of Tammy McGuire to Aubra Fletcher, March 20 and 26, 2009.

¹¹² The source for this and the following paragraph is the “quarterly youth incentive activity report” for October to December 2008 (PoP #348, February 11, 2009).

facilities vary in the way they organize family days—some hold them for individual living units, while others group living units or hold one event for everyone—it is difficult to determine from the chart whether a given facility offered all youth an opportunity for a family visiting day during the quarter.

During the last quarter of 2008, the total number of youth who participated in family days was less than half the number of youth in the system.

Chaderjian: Based on schedules published in DJJ’s newsletter, it appears that family visiting days are held every quarter.¹¹³ However, youth interviews and published rates of attendance suggest the visiting days are not open to all youth. Three youth interviewed on the ITP in October 2008 stated that they had never attended a family visiting day. During the same quarter, only 20 youth from the facility attended a family visiting day.¹¹⁴

Rating: Partial compliance

O.H. Close: Family nights are now held monthly in order to ensure that each youth may attend one per quarter.¹¹⁵ Youth of all incentive levels attend, even if no family members come. Psychologists are encouraged to attend. Facility management have discussed the possibility of making funds available to families to travel to O.H. Close. Because O.H. Close is the primary DJJ institution for youth under eighteen, younger youth from southern California often are assigned to live there. Youth interviews and data from the PbS climate survey suggest that distance from families is a barrier to family contact for many youth at the facility.¹¹⁶

Rating: Substantial compliance

Preston: Family visiting events are generally held by living unit.¹¹⁷ Family members visit the living unit, meet staff, hear presentations, and visit the culinary arts program’s café.¹¹⁸ In addition, the facility holds family days that are only open to A-level youth approximately once a quarter.¹¹⁹ Family visiting days that are open to all incentive levels are, however, held less than once per quarter, resulting in a partial compliance rating for this item.¹²⁰

¹¹³ See “DJJ Today,” vol. 1, issues 1-4 (PoPs #443, 457, 469, 492, June to August 2009).

¹¹⁴ “Quarterly youth incentive activity report” for October to December 2008 (PoP #348, February 11, 2009).

¹¹⁵ This and the following three sentences are based on statements of the superintendent and chief psychologist during the October 16, 2008 site visit.

¹¹⁶ In the PbS youth climate survey administered in April 2008, 29% of youth surveyed at O.H. Close said they had not received visits from their families. Of those who had received visits, 47% said their family visited less than once per month. The most common reasons cited for infrequent or no visits were distance and lack of transportation. During interviews conducted at the facility on August 6, 2009, four out of 18 youth reported that geographic separation impeded family contact. One of them, although otherwise positive about life at O.H. Close, said he would rather be at juvenile hall to be closer to his family.

¹¹⁷ Schedule of family visiting days provided during site visit, May 28, 2009.

¹¹⁸ Statements of facility staff during site visit, May 28, 2009.

¹¹⁹ Schedule of family visiting days provided during site visit, May 28, 2009.

¹²⁰ A schedule of past and future family visiting days was provided during the site visit on May 28, 2009. The schedule covered May 2008 to August 2009. During this time, two visiting days were held at the Manzanita unit,

Rating: Partial compliance

Stark: Family visiting events are generally held by living unit.¹²¹ Schedules show that during the first quarter of 2009, a number of living units did not have family visiting nights: the substance abuse units (M/N), several high-risk living units (F, W/X) and the SMP (K/L). The sex behavior treatment (A, G) and incentive living units (I/J) held two family nights during this quarter.

Rating: Partial compliance

SYCRCC: Family visiting days are held four times a year.¹²² Some living units also hold their own family nights, and the facility holds periodic “Daddy and Me” events for some youth with children.¹²³ Treatment team staff are encouraged to attend.¹²⁴ Youth on all incentive levels may attend, regardless of whether they have visitors.¹²⁵ However, youth at SYCRCC awaiting placement elsewhere at DJJ are excluded from these events, resulting in a partial compliance rating for this item.¹²⁶

Rating: Partial compliance

Ventura: Family visiting days are held four times a year.¹²⁷ All may attend, regardless of incentive level, except for youth who do not have visitors. Ventura also holds annual visiting days for youth with children. Community volunteers fund family members’ transportation to the facility for these events. Separately, community volunteers fund family visits for youth who have not received visitors in a certain period of time. The facility has been flexible about allowing weekday visits for these youth.

Rating: Partial compliance

two at Fir, three at units that house recently-arrived youth at different times (Ponderosa, Cedar, Buckeye), two at units that housed youth in the culinary program (Ponderosa, Buckeye), one at Evergreen, one at Arbor, and one at Ironwood and Sequoia. Thus, no units were provided four to five visiting days during this period, as they would be if visiting days were quarterly. Youth interviews confirmed the lack of quarterly family events.

¹²¹ Incentive Activities Reports, November 2008 through March 2009. The special master reviewed these documents during a site visit to central office on June 24, 2009.

¹²² Family visiting days occurred in August and November 2008. E-mail from the incentives coordinator to all staff, received during site visit, December 9-10, 2008. Visiting days were scheduled for February, May, and August 2009. Youth incentive activities schedule, received during site visit, December 9-10, 2008.

¹²³ Statements of five youth interviewed during site visit, December 9-10, 2008. In the last quarter of 2008, the facility held three special family events in addition to the quarterly visiting day. Quarterly Youth Incentive Activity Report (PoP #348, February 11, 2009).

¹²⁴ E-mail from the incentives coordinator to all staff, received during site visit, December 9-10, 2008.

¹²⁵ Statements of five youth interviewed during site visit, December 9-10, 2008.

¹²⁶ A youth interviewed during the December 2008 site visit stated that youth on intake units who are not expected to remain at SYCRCC do not attend visiting days. Fliers for the February 2009 visiting day confirmed the youth’s statements, as they mentioned four living units at SYCRCC, but excluded the two intake units.

¹²⁷ This paragraph synthesizes statements of the chief psychologist, assistant superintendent, various youth, various YCCs and supervising case work specialists, a case work specialist, the superintendent, and a member of a community volunteer organization during the December 1-3, 2008 site visit.

Mental Health: OSM Audit Findings

2008-2009

ACTION ITEM	Section / Item		Ratings							Audit Method / Standard	
			C.O.	OHC	NAC	VYCF	SR	HGS	PYCF		
4.0 SCREENING AND ASSESSMENT											
Establish policy/process to receive & share MH info with counties	4	2									
Consultation with local governmental entities	4	2a	BC								Consultation takes place
5.0 LEVELS OF CARE AND PROGRAMMING											
Appoint MH administrator at each facility w/ residential MH program	5	5		NA	SC	SC	SC	SC			Positions filled / assigned
Adopt and implement formal criteria for each level of care	5	6									
Establish centralized Mental Health Review Team / review protocol	5	7	PC								Centralized Mental Health Review Team reviews MH placement referrals and determines if youth meets admission criteria. Placements consistent with criteria. HQ coordinates use of MH beds.
Outpatient MH staffing consistent with MH Remedial Plan	5	11		SC	SC	PC	PC	PC	PC		Positions filled / assigned
Reduce size of mental health treatment units	5	14									
Reduce ITPs and SCPs to no more than 30	5	14a		SC	SC	SC	SC	SC			Program population at or below specified standard
Reduce IBTPs to no more than 20 (exclusive of mentor youth)	5	14b			SC						Program population at or below specified standard
Further reduce size of mental health treatment units	5	15									
Reduce ITPs and SCPs to no more than 24	5	15a		SC	SC	SC	SC	SC			Program population at or below specified standard in all ITPs and SCPs
Reduce IBTPs to no more than 16 (exclusive of mentor youth)	5	15b			SC			SC			Program population at or below specified standard in all IBTPs
Reduce size of MH units to level determined in conjunction with Consent Decree MH and S&W experts	5	16									
Units reduced to specified population levels	5	16b		NR	NR	NR	NR	NR			Program populations at or below specified standard

Collaborate with DMH to expedite transfers and facilitate transitions	5	20	PC		DJJ periodically meets with DMH regarding transfers to DMH facilities and transitions back to DJJ. Written protocols exist describing DJJ's actions to expedite transfers and facilitate transitions as appropriate.
6.0 EVIDENCE BASED TREATMENT					
If feasible, implement evidence based model for family engagement	6	3	NC		Appropriate family engagement model implemented (if feasible)
If feasible, implement parent partner program	6	5	NC		Appropriate parent partner program implemented (if feasible)
If feasible, develop plan to continue FIT and Family Justice Model	6	8	BC		If feasible, appropriate implementation plan and schedules adopted; programs implemented in accordance with plan.
Fund ongoing training and attendance at nat'l/regional conferences	6	10	BC		Key mental health staff attend appropriate national and regional conferences
7.0 STAFF QUALIFICATIONS AND TRAINING					
Pay parity with comparable CDCR adult operations MH staff	7	1	SC		DJJ produces documentation confirming pay parity. Pay differentials used as appropriate.
Work with Office of Workforce Planning, re: participate in job fairs and recruitment events	7	2	NR		DJJ produces documentation of ongoing work with Office of Workforce Planning (e.g. minutes of meetings, agreements, plans, etc.)
Participate in job fairs and recruitment events	7	3	NR		Appropriate DJJ mental health staff attend job fairs and recruitment events
Implement Integrated Behavior Treatment Model	7	4			

Convert facilities to rehabilitative model	S&W 6.1			NR	NR	NR	NR	NR	NR	Youth are in living units no larger than those specified in the MH Remedial Plan. Living units are staffed at levels equal to, or greater than, staffing standards specified in the MH Remedial Plan or as mutually agreed to by the parties. Program delivered consistent with program design.
Establish training schedule - IBTM	7	5a								
Establish training schedule	7	5a	NC							Reasonable schedule in place
Establish training schedule - evidence based treatments	7	5b								
Establish training schedule	7	5b2	NC							Reasonable schedule in place
8.0 POLICIES AND PROCEDURES										
Develop comprehensive set of essential MH policies and procedures in consultation with Consent Decree MH experts	8	1a								
Youth informed of changes as appropriate	8	1a5	PC							Information materials and/or briefing provided within 30 days of change in accessible formats.
11.0 FACILITIES										
Implementation plan for offices and MH treatment rooms	11	1		PC	PC	PC	PC	PC		Sufficient office space exists so that all MH staff requiring offices have space and, where appropriate, that space is in, or adjacent to, the living unit. Sufficient space exists so that no regular MH programs have to be canceled due to lack of space. Treatment space is appropriate for treatment, providing a therapeutic milieu and areas for confidential conversations.
Include MH issues in DJJ Facilities Master Plan and Juvenile Justice Operational Master Plan	11	2	NC							Size of future treatment units guided by national standards or recommendations of national experts. Operational Master Plan includes strategies for serving youth with mental health issues.

12.0 IMPLEMENTATION OF THE MENTAL HEALTH PLAN										
Add or appoint senior administrator for plan implementation	12	1	SC						Position filled / assigned	
Add or appoint four clinicians/MH administrators to reform team	12	2	SC						Positions filled / assigned	
Develop MH training team (3 clinicians + support)	12	3	BC						Positions filled / assigned	
Safety & Welfare - 6.0 CONVERT FACILITIES TO REHABILITATIVE MODEL										
Convert Chaderjian to special treatment facility	6	1a			NR				All living units at Chaderjian, with the exception of parole detainee and reception units, are staffed and operated as special treatment units.	
Convert facilities to rehabilitative model	6	1b								
Complete conversion of facilities to rehabilitative model	6	1c		NR		NR	NR	NR	NR	Youth are in living units no larger than those specified in the S&W and MH Remedial Plans. Living units are staffed at levels equal to, or greater than, staffing standards specified in the Remedial Plans or as mutually agreed to by the parties. Program delivered consistent with program design.
Complete training	6	7								
DJJ Integrated Behavior Treatment Model	6	7a		NC	NC	NC	NC	NC	NC	DJJ policy specifies training requirements for all staff. Direct care staff are trained in all aspects of the treatment model within 90 days of assignment to a living unit. All supervisory and management staff complete training on the treatment model as required by DJJ policy.
Treatment plan development	6	7c		NR	NR	NR	NR	NR	NR	
Motivational Interviewing	6	7d		PC	PC	PC	PC	PC	PC	
Normative Culture	6	7e		NC	NC	NC	NC	NC	NC	
Interactive Journaling	6	7f		NC	NC	NC	NC	NC	NC	
Other key treatment components	6	7g		PC	PC	PC	PC	PC	PC	
Safety & Welfare - 8.3 FAMILY INVOLVEMENT										
Intake process includes documentation of family interviews and assessment.	8.3	1	NR						Written report at intake documents contacts and interviews with parents, close relatives and	

										community service providers during intake process for each youth. The reports include measures to assess family background, strengths, and functioning.
Family phone contact facilitated w/in 24 hrs of commitment	8.3	2a	SC							Each youth is provided the opportunity to contact family members by telephone within 24 hours after commitment.
Ongoing family phone contact facilitated	8.3	2b		PC	PC	SC	SC	PC	PC	Each youth is provided the opportunity to contact family members by telephone on a regular basis throughout his or her stay in DJJ facilities.
Family visiting days organized	8.3	3		SC	PC	PC	PC	PC	PC	Family visiting days occur at least four times a year at each facility.

Appendix I

Experts' Priorities for Fiscal Year 2009-2010

In August 2009, the *Farrell* experts identified priorities areas for fiscal year 2009-2010 and provided this information to the parties.¹ The priorities are listed by subject area below.

A. Education Priorities

1. Restructure and fill vacant leadership positions as noted on the DJJ organizational chart.
2. Provide access to a 240-minute school day to all eligible students.
3. Increase vocational enrollment.
4. Provide more access for all youth to the GED program.
5. Provide a full and meaningful school day for restricted units.
6. Adjust to downsizing, evaluate and re-compute all educational staff allocations. (Teacher mandated ratios are 1/12 for regular education, 1/10 for special education and 1/5 for restricted units.)
7. Establish a reliable interface between the WIN system and special education data-collection systems.
8. Monitor the development and implementation of the special education program.
9. Assure that IEP progress benchmarks and transition plans are completed and reviewed as required under IDEA.²

B. Health Care Services Priorities

Dental

1. Finalize the draft dental policies and standard operating procedures.
2. Bring the new dental record format and folders on-line.
3. Develop meaningful and properly tracked dental QAMP studies.
4. Streamline administrative procedures and reduce meetings in preparation for reduced dental staffing specified in the new DJJ Business Rules.

¹ See, e.g., memorandum of Zack Schwartz and *Farrell* experts to parties, August 31, 2009.

² The experts made the following changes to their 2008-2009 list of priority areas: the experts removed priority 8 (fill Superintendent of Education position) and 9 (fill vacant central office education positions); the experts added priorities 4 and 8 (see above). See Ninth Report of the Special Master (June 2009), Appendix A (Experts' Priorities for Fiscal Year 2008-2009).

5. Add the DJJ Chief Dentist to the organizational chart, reporting to the Chief Medical Officer of DJJ.
6. Develop a QAMP study on infection control procedures to track compliance with state and federal regulations and guidelines.³

Medical

1. Develop and implement standardized nursing protocols and related training program.
2. Develop and implement standardized health record manual that contains policies and procedures and related health record and ancillary forms. Provide training to the field.
3. Develop and implement the standards and compliance program, consistent with the Health Care Remedial Plan.
4. Conduct a study to compare the results of internal peer review with the experts' peer review results. Address any discrepancies.
5. Provide ongoing, interactive training to primary care clinicians regarding management of chronic diseases.
6. Adjust staffing to appropriate levels, in consultation with the medical experts and based on Chris Murray's staffing analysis.
7. Develop a complete set of health care policies that address all NCHC Juvenile Health Care standards. Review and revise initial policies.
8. Develop and implement a structured and standardized orientation manual for facility health care staff.
9. Resolve the discrepancies, in consultation with the medical experts, between the Health Care Services Table of Organization and the Health Care Remedial Plan.⁴

C. Mental Health Priorities

1. Improve management and treatment of self-harming youth. Over this next year, train all staff and implement DBT on two mental health units for pilot. Train additional MH clinicians in preparation for system-wide dissemination. Evaluate Suicide Prevention,

³ The dental expert did not identify priorities for fiscal year 2008-2009. *See id.*

⁴ These priorities are identical to those identified by the experts in fiscal year 2008-2009. *See id.*

Assessment, and Response policy; modify and streamline policy and procedures as indicated.

2. Develop and train staff on the IBTM. Although some of the *Farrell* experts are now tasked with writing the IBTM; DJJ will, in collaboration with the *Farrell* experts, need to implement the IBTM.
3. Reduce use of force and DDMS (disciplinary) sanctions in response to behavior related to mental illness. This will eventually be part of the IBTM.
4. Increase integration of all DJJ staff efforts in support of youth rehabilitation.
5. Improve psychopharmacologic practice, including empirically supported prescribing practice, informed consent and psychiatric peer review/quality management.
6. Implement policies, practices and treatments that increase family engagement and involvement in treatment.
7. Ensure appropriate access to licensed bed care for all youth who need it, including males in the north and females; and adequate quality of care on the licensed mental health beds.
8. Improve the quality and accuracy of mental health management data on self-injurious behavior.
9. When Stark closes, ensure that the mental health treatment is not compromised in the youths' new settings.
10. Acquire or develop a mental health monitoring system in order to analyze efficacy of treatment interventions and the treatment needs of the DJJ population.
11. Continue to analyze the efficacy of intake screening and assessment instruments, and modify procedures accordingly.⁵

D. Safety and Welfare Priorities

1. Complete the design, implementation plan, and manual for the IBTM.
2. Design and implement a successful comprehensive gang control strategy.
3. Implement appropriate gender-responsive programs.
4. Reduce the rates of violence and use of force in all DJJ facilities.

⁵ The experts made the following changes to their 2008-2009 list of priority areas: the experts edited priorities related to self-harming youth (1), IBTM (2), integration of staff efforts (4), psychopharmacology (5), and licensed beds (7). The experts added priority areas related to the closure of Stark (9). The experts removed priorities related to the potential closure of Ventura and to staffing patterns. *See id.*

5. Establish a realistic plan for the closure of current DJJ facilities and their replacement.
6. Successfully pilot and refine the BTP model.⁶

E. Sexual Behavior Treatment Program (SBTP) Priorities

1. Finalize program guide.
2. Simultaneously, develop SBTP curriculum.
3. Complete a mental health policy on confidentiality and informed consent that addresses the SBTP.
4. Finalize revision of remedial plan.
5. Revise audit tool.
6. Produce a meaningful organizational chart.
7. Improve relations between clinical and nonclinical staff.
8. Implement full comprehensive assessment.
9. Mandate treatment hours.
10. Train staff in new curriculum.
11. Ensure that facility staff assigned to SBTP units are assigned based on skills and preference; staff who prefer not to work with SBTP youth should not be assigned to these units.⁷

F. Youth with Disabilities Program Priorities

1. Develop a system to document the provision of accommodations afforded to wards with disabilities in implementing security procedures, including use of force, searches and property, and in providing alternatives to use of force, as described on pages 40-44 of the WDP remedial plan.

⁶ The expert made the following changes to his 2008-2009 list of priority areas: the expert edited the priorities related to IBTM (1), gender-responsive programs (3), master planning (5), and BTPs (6). The expert added priorities related to gangs (2) and violence and force (4). The expert removed priorities related to the disciplinary decision-making system and the incentive program. *See id.*

⁷ The expert made the following changes to her 2008-2009 list of priority areas: the expert edited the priorities related to curriculum (2), organizational chart (6), assessment (8), and treatment hours (9). The expert added priorities 1, 4, 5, and 7. The expert removed priorities related to filling the SBTP coordinator position, resource groups, and charting treatment and progress. *See id.*

2. Establish policies to assure that placement of wards with disabilities into restrictive programs is not based either directly or indirectly on a ward's physical or mental disability, or on manifestations of that disability.
3. In consultation with the disabilities expert, the CYA will conduct a study regarding the need for a residential program for wards with certain developmental disabilities. The study will commence within 6 months from the date that the Disabilities Remedial Plan is filed with the court. The CYA shall develop a screening tool to assess the current ward population in order to identify any developmentally disabled wards who may not have been previously identified. The CYA shall complete this assessment by December 2006. As part of the clinic screening and assessment process, all wards shall be screened at the reception centers, and as indicated, throughout their stay in the Department, to determine whether they have a developmental disability which may make them eligible under criteria set forth in the ADA and/or may make them eligible to receive services from a Regional Center.
4. Within 12 months of the court approval of the plan, all staff will receive training, prepared with the assistance of an outside disability advocacy organization or consultant, and in consultation with the disability expert in sensitivity, awareness, harassment. This training will be provided to all staff on an annual basis.
5. Efforts to identify wards with disabilities within youth correctional facilities shall be continuous, and shall include self-referrals, staff-referrals, facility ADA screening and assessment, and special case conferences. A ward may make a self-referral requesting an accommodation for a documented or perceived impairment through an assigned PA, Casework Specialist, or by completing the Referral for Sick Call (RSC) form.
6. A ward may make a self-referral for an accommodation for a documented or perceived impairment through an Education Advisor by completing the Self-Referral to the School Consultation Team (SCT) form. Assigned Casework Specialists shall use a Referral to School Consultation Team (SCT) form to refer a ward to an educational professional to verify the existence of a learning impairment that may limit a major life activity.
7. The principal shall ensure that wards with disabilities enrolled in educational programs have equal access to educational programs, services, and activities.

8. For each special program or activity, evaluate eligibility criteria to assure that wards with disabilities are not excluded when they can perform the essential functions of the activity.⁸

⁸ The expert made the following changes to his 2008-2009 list of priority areas: the expert added priority 1 and removed former priority 1 (system to document disabilities and reasonable accommodations), 5 (self-referrals), and 10 (fill vacant WDP coordinator positions). *See id.*