



Quarterly Report

Farrell vs. Tilton

California Department of
Corrections and Rehabilitation
Division of Juvenile Justice

January 2008

Table of Contents

Table of Contents	i
Introduction	ii
Remedial Plans	
Education Services (ED)	1
ED Services Plan Matrix Tracking Document	6
Sexual Behavior Treatment Program (SBTP)	9
SB Plan Matrix Tracking Document	12
Wards with Disabilities Program (WDP)	19
WD Plan Matrix Tracking Document	22
Health Care Services (HC)	26
HC Services Plan Matrix Tracking Document	31
Safety and Welfare (S&W)	33
S&W Plan Matrix Tracking Document	36
Mental Health (MH)	59
MH Plan Matrix Tracking Document	62
Appendices	
Appendix 1: Completed Items by Remedial Plan	81
Appendix 2: DJJ Physical Barrier Removal Report dated December 31, 2007	101



Introduction

California Department of Corrections and Rehabilitation
Division of Juvenile Justice

QUARTERLY REPORT
***FARRELL* IMPLEMENTATION STATUS**

TO: SPECIAL MASTER AND PLAINTIFF'S COUNSEL

Report Number: 2007-3

Introduction

Background

In compliance with the *Farrell vs. Tilton* Consent Decree, the California Department of Corrections and Rehabilitation, Division of Juvenile Justice (Division) DJJ is providing the Plaintiff's Counsel and the Court-appointed Special Master with quarterly progress reports. The Quarterly Progress Reports summarize the status of efforts in implementing the commitments defined within the Consent Decree, six remedial plans, and the Standards and Criteria documents filed with the court.

Each Remedial Plan section consists of the following:

- Audit Results
- Upcoming Scheduled Audits
- Narrative that highlights significant accomplishments and items in progress
- Matrix Tracking Document

Reporting Quarter Accomplishments

The Division has made strides in the areas of workforce development, hiring, and improvements in administrative operations. This report indicates activities that have been completed during this quarter. In previous status reports included historical record of completed items. This Report reflects items accomplished for this quarter. Some of the significant accomplishments this reporting quarter include:

Creating Capacity for Change

Organizational changes and enhancements have improved administrative functions as a result of the creation of the Operational Support Unit to help support *Farrell* implementation. The Division has established and staffed an internal compliance monitoring unit within the Administration and Operations Branch in accordance with Safety and Welfare Plan, section 2.1.3c. Additionally, Doug McKeever was announced as Director of Programs and is fulfilling the duties as required in the Safety and Welfare Plan section 2.1.1.

Staff Training

Staff training to develop the knowledge and skills to implement best practices and innovative programming as required in the Safety and Welfare, Mental Health, Health Care and Wards with Disabilities Plans has been a major focus during the reporting quarter. Some examples include:

- JKM Training, Inc. certified eighteen staff as Safe Crisis Management Trainers. Training for direct care staff began between April and August 2007 through the end of this quarter, they have trained two hundred and eleven (211) staff from all eight youth correctional facilities in Safe Crisis Management.
- Lisa Boesky, PhD of G&G Consultants, LLC. provided training to 52 staff from Mental Health Units on Understanding and Preventing Suicide. This training will continue through this fiscal year.
- Disability Awareness Training and Staff Assistant Training were provided at Dewitt Nelson and Preston Youth Correctional Facilities this quarter.
- Barry Glick, PhD provided an executive overview to 166 DJJ managers and certified 24 DJJ staff on Aggression Replacement Therapy (ART) as ART group facilitators.
- Lisa Boesky began training mental health staff in “Understanding and Preventing Suicide” and “Identifying and Managing Youth with Mental Health Disorders.” This training will be scheduled through the end of the fiscal year.
- Health care policy training was provided by the Health Care Services Director of Nursing and the Deputy Director of Facilities. Training participants included Health Care Services supervisors, Chief Medical Officers, nursing supervisors, and facility custody management, such as Assistant Superintendents, Majors, and Captains.
- Nursing Skills Competency Testing began in October 2007, and has been completed at the Northern California Youth Correctional Center, Preston YCF, Heman G. Stark YCF, and Southern Youth Correctional Reception Center-Clinic.
- Attendance Coordinators, Schedulers, and Registrars Training was provided to education staff on October 18, 2007. The training topics included: accuracy of data, team work, Ward Information Network, transcript evaluation, transcript credit information, and adopted course titles.
- Four Executive Summits were held for 160 DJJ Managers on Motivational Interviewing (MI) through a contract with UC San Diego. Staff training will begin in January. MI will be a foundational skill provided to all direct care staff.

Farrell Compliance

The following reflects the progress made during this reporting quarter, in both external audits and the DJJ internal compliance areas.

- The court-appointed health care experts successfully completed field testing of the Health Care Services Standards and Criteria, finalized the document in collaboration with DJJ Health Care Administrators, and filed the audit tool with the Court on December 6, 2007.
- Three *Farrell* Education audits were conducted at OH Close, DeWitt Nelson and N.A. Chaderjian Youth Correctional Facilities.
- Three *Farrell* Wards with Disabilities audits were conducted at DeWitt Nelson, Preston and Ventura Youth Correctional Facilities.
- Two *Farrell* Health Care Services audits were conducted at Heman G. Stark and Ventura Youth Correctional Facilities.
- Two *Farrell* Safety & Welfare audits were conducted; one by the Safety & Welfare Expert at the El Paso de Robles Youth Correctional Facility (YCF) and one by the Office of the Special Master at DJJ Headquarters.
- One *Farrell* Mental Health audit conducted at Headquarters.

Policy Development

- DJJ has streamlined the policy development process, resulting in eight policies distributed over the last quarter and several policies in final draft such as:
 - Protocol for Handling Disagreements between Facility and Health Care Staff, signed in December 2007. This protocol was developed for resolution of disputes related to the exercise of clinical and professional judgment. (Item 3.3 in MH Remedial Plan).
 - Suicide Prevention Assessment and Response (SPAR) policy which addresses the management of potentially self-harming youth was effective on December 18, 2007. The SPAR policy fully meets contemporary standards and incorporates provisions for staff training, quality improvement and forms for implementation. Training and a pilot test will be completed prior to full implementation, anticipated for April 2008. (8.1 Consent Decree)
 - Table of Contents for Mental Health Policies was developed in November 2007, and will serve as an outline for mental health policy development and implementation.
 - Youth with Disabilities Emergency Announcement Protocol, signed on November 27, 2007.

- Peer Review Policy used to guide the internal compliance and quality management structure, signed on November 28, 2007.
- Ward Grievance Policy, signed on October 1, 2007. (SW 8.5)
- Staff Misconduct Policy, signed on October 1, 2007.
- Use of Force policy draft is near completion. The projected date for completion is March 2008. (SW 3.2)
- Working with the Sexual Behavior Treatment Program court-appointed expert, a final draft of the Forensic Evaluation Policy, which provides guidance on pursuing extended confinement of a mental health ward who poses a public safety risk if released (Welfare and Institutions Code sections 1800 and 1800.5), was completed in December, 2007, in collaboration with the Office of the Special Master. Once training is developed and final review completed, the policy will be signed.
- Program Service Day Schedule Policy – A draft policy is being developed.

Contracting

Contracting processes have improved significantly. Contracts for the Court-Appointed Experts are valid through June 30, 2008. During this reporting period, four of the nine contracts were renewed. The other five contracts are in the final stages of renewal. All *Farrell* contracts are anticipated to be in place well in advance of the end of the fiscal year. The contracting process was made more efficient by extending the term of the contracts from one year to three years, making annual renewals unnecessary.

Information Technology

The Division continues working with the Enterprise Information Systems (EIS) to develop an information technology (IT) plan to meet the IT requirements within the Remedial Plans. An IT Priority Board of DJJ Executive Management and EIS staff was established and met in October and November 2007, to examine IT projects and prioritize current and future technology needs. The Wards Information Network (WIN) Exchange is in the final stages of development. Training will be occurring within the next eight weeks and the WIN Exchange is scheduled to be deployed Division-wide in April 2008.

Performance-based Standards (PbS) has completed its candidacy phase and is awaiting certification.

Appendix

Section I of the appendix is the “Completed Items by Remedial Plan” taken from the matrix section of the various plans. Section II is the “DJJ Physical Barrier Removal Report.”



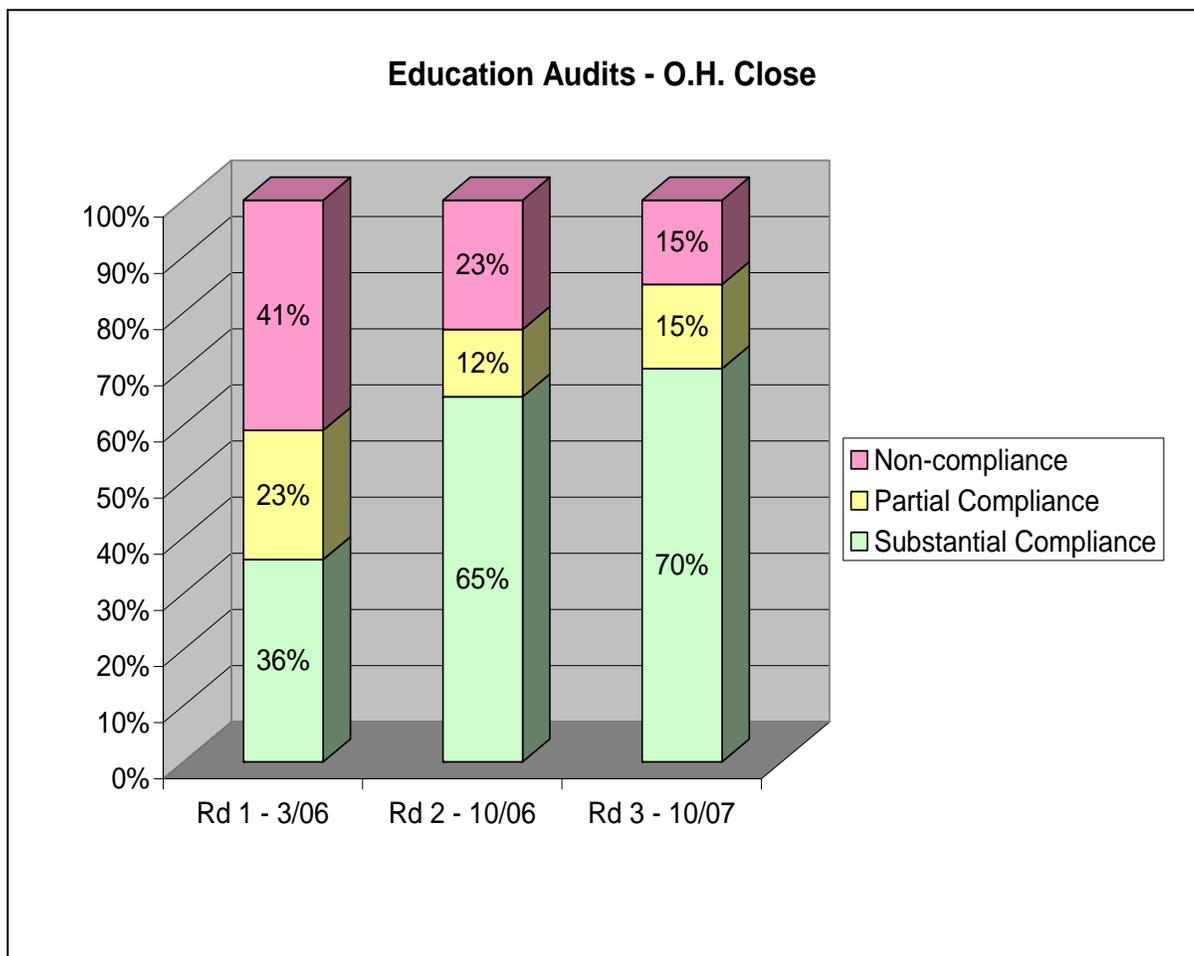
Education Services Remedial Plan

Education Services Remedial Plan

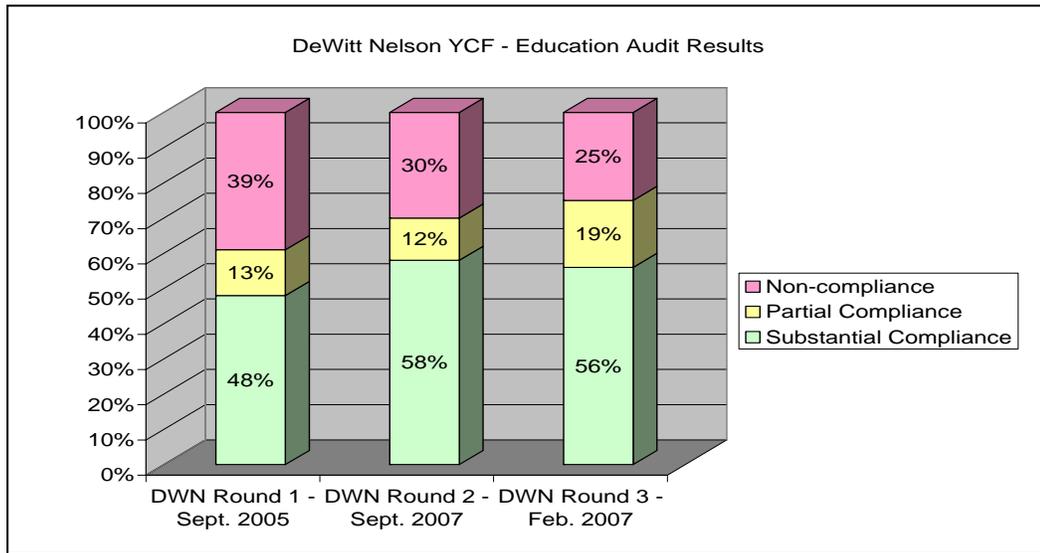
The Education Services Remedial Plan was filed with the court on March 1, 2005. This report provides the status of significant efforts in implementing the commitments DJJ has made.

I. Education Audit Results

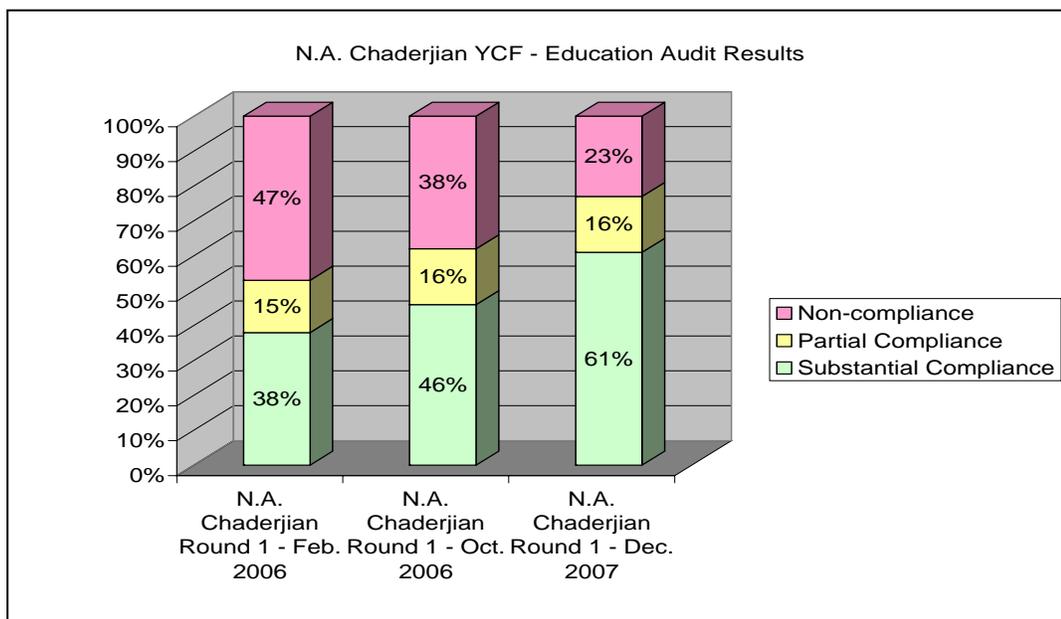
- DJJ received *Farrell* Education Experts audit reports for O.H. Close, DeWitt Nelson, and N.A. Chaderjian Youth Correctional Facilities in December 2007.
- An analysis of the Education audit results for the O.H. Close YCF revealed that the facility is currently in 70% Substantial Compliance, 15% Partial Compliance, and 15% Non-compliance. The Education Experts identified 11 Action Items in Substantial Compliance for two consecutive audits. Therefore, the Experts have ceased monitoring those items. DJJ will continue to monitor and maintain the substantial compliance level for each of these items.



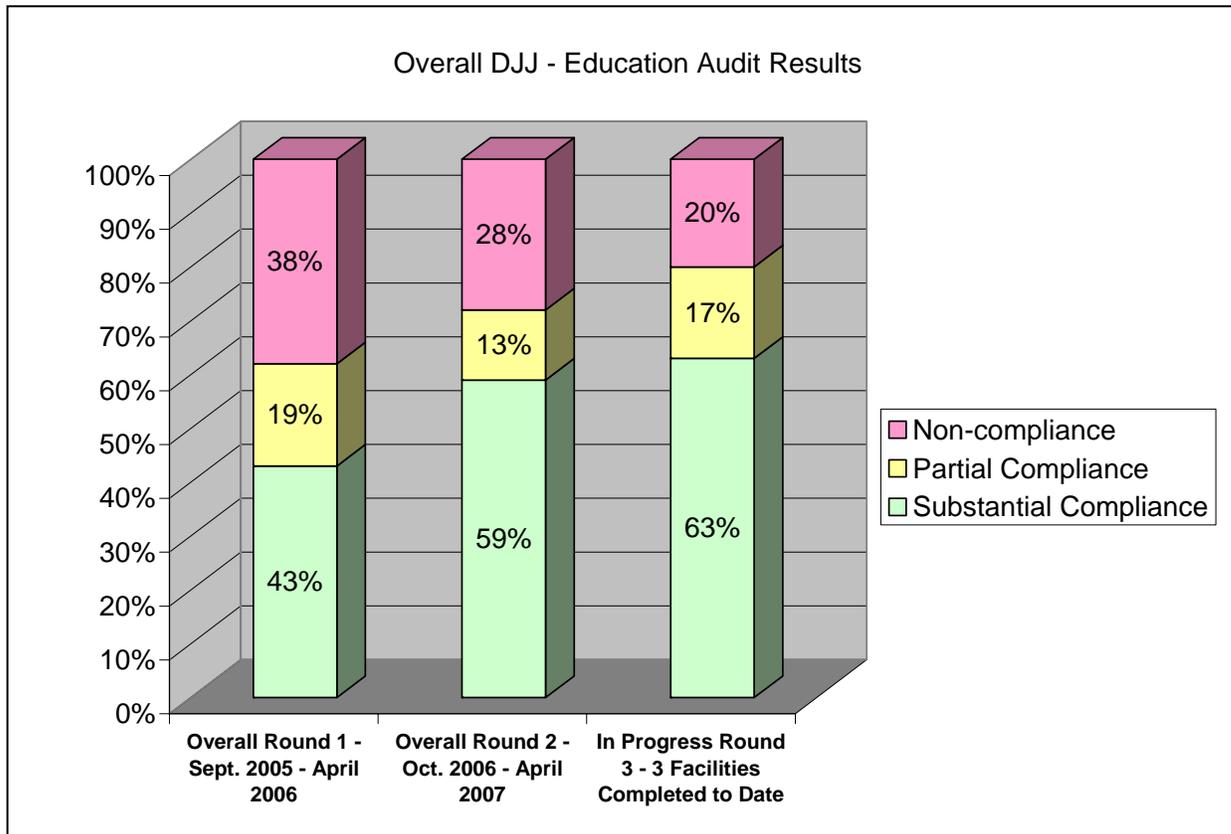
- An analysis of the recent Education audit results for the DeWitt Nelson YCF reveals that DeWitt Nelson is currently in 56% Substantial Compliance, 19% Partial Compliance, and 25% Non-compliance. The Education Experts have identified 11 Action Items that have been in Substantial Compliance for two consecutive audits. Therefore, the Experts have ceased monitoring those items. DJJ will continue to monitor and maintain the substantial compliance level for each of these items.



- N.A. Chaderjian YCF Education Audit Results - An analysis of the recent audit results for the N.A. Chaderjian YCF revealed that the facility is currently in 61% Substantial Compliance, 16% Partial Compliance, and 23% Non-compliance. The Education Experts have identified 11 Action Items that have been in Substantial Compliance for two consecutive audits. Therefore, the Experts have ceased monitoring those items. DJJ will continue to monitor and maintain the substantial compliance level for each of these items.



- Overall *Farrell* Education Compliance Percentage – A “round” of monitoring usually refers to one year’s worth of monitoring where each facility is audited at a minimum of once that year. For the first round of the *Farrell* Education audits beginning in September 2005, and ending in April 2006, DJJ was in 43% Substantial Compliance. That percentage increased to 59% for the next year’s round of audits. Currently, the *Farrell* Education Experts are in the middle of their third year/round of monitoring and DJJ has received three completed audits. The overall Substantial Compliance percentage for those three reports is 63%.



II. Upcoming Scheduled Audits

- *Farrell* Education Audits scheduled for next quarter:
 - January 7-9, 2008: Ventura YCF
 - January 10-11, 2008: Southern Youth Correctional Reception Center-Clinic
 - February 25-27, 2008: Preston YCF
 - March 10-12, 2008: Heman G. Stark YCF

III. Significant Accomplishments

- California High School Exit Examination (CAHSEE) - The CAHSEE was administered to all of the 950 qualified students in October 2007, (426 in English-Language Arts and 524 in Mathematics).
- Career Technical Education (CTE) Certification - Tracking processes were reviewed and revised to more accurately and completely reflect the skills learned by youth completing CTE Certification. CTE Certification is reviewed monthly through data contained in the Principal's Monthly Report. During this quarter, 384 students earned certificates.
- EdTechProfile Project – The EdTechProfile is a California Department of Education State Educational Technology Service (SETS) project that provides educational administrators with tools that guide their decisions about how to integrate technology into classroom instruction and how to create and evaluate effective teacher technology training programs. During this quarter 17 staff members completed the EdTechProfiles course.
- Aztec Learning Software Training – Aztec Learning Software is a complete electronic conceptual learning system. A total of eight Mentor Teachers were trained on October 10–11, 2007, on the use of the Aztec software. A total of 12 Mentor Teachers were trained on the Aztec Learning Essentials and Ready for Work Series December 12-13, 2007.
- Aztec Learning Software Server Support – Servers were installed on December 7, 2007, to supplement the current course needs as well as provide supplementary technology software for K-12 academic programs, GED and other test preparation assistance.
- Attendance Coordinators, Schedulers, and Registrars Training – On October 18, 2007, 31 education staff were trained on accuracy of data, team work, the Ward Information Network (WIN), transcript evaluation, transcript credit information, adopted course titles, and memos.
- Vocational Education Opportunities – The instructor for the Culinary Arts program at James A. Wieden High School was hired in November 2007.
- Quarterly Monitoring of Special Education Files – All youth correctional facility schools were monitored to ensure compliance with Special Education mandates, standards, and criteria in November and December 2007.
- Parent and District Stakeholders Committee Meetings- The December 7, 2007, meeting provided a forum to discuss the approval of the Special Education Annual Budget Service Plan, review the emphasis on Academic Classes and Vocational Education classes, provide individual school updates by parent representatives, and plan future activities. There were five Parent Representatives from Mary B. Perry High School, Johanna Boss High School and Chaderjian High School.

- A draft Program Service Day schedule was provided to Education, Mental Health and Sex Behavior Treatment Program Experts, DJJ received favorable comments and is moving forward with implementation plans.

IV. Items in Progress

- School Consultation Team (SCT) Committee/Process - All sites received SCT training in 2007. All sites will receive additional training in 2008.
- An Implementation Plan for Program Service Day - The Program Service Day schedule integrating education, treatment and facility operations to ensure access and full participation of youth in treatment, education, health, mental health, special education and other services is being developed.
- Alternative Behavior Learning Environment (ABLE) Class – The Education Remedial Plan requires that within each high school there shall be an alternative behavior management classroom for early intervention short-term placement due to classroom or service area behavior problems. ABLE, a model addressing these requirements was implemented at Joanna Boss High School on April 9, 2007. ABLE is scheduled to be implemented at all DJJ YCF schools no later than January 2008.
- Global Classrooms/Distance Learning – Distance Learning (DL) is available at all DJJ schools but is not fully implemented, as additional IT-related issues are being addressed.
- DJJ met with Education Experts and discussed the Ward Incentive Program. The experts said this program can satisfy the requirement of “a positive behavior management system”. DJJ is providing further details to the experts for review and auditing purposes.

CDCR- DIVISION OF JUVENILE JUSTICE EDUCATION SERVICES MATRIX TRACKING DOCUMENT

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Remediate Deficient Student Access/Attendance All facility superintendents and high school principals will present to the Director and his/her Executive Team their collaborative plan to remediate deficient student access and/or student attendance</p>	April 2005		The Superintendent of Education is working with the Director of Facilities to remediate deficient student access/attendance issues. The COMPSTAT report is being utilized to provide the attendance data monthly and quarterly. A multidisciplinary group is working to update the attendance codes, develop, and provide training for all staff statewide. Principals were directed to develop site-level MOUs that include the Superintendent's signatures. Two of the eight sites have MOUs on file. On Oct 18, 2007, training for attendance coordinators was conducted on student attendance record keeping.	
<p>"Program Service Day" An Inter-Branch workgroup selected by the Director will implement a "program service day" model that includes all components of ward services (education, treatment, medical, etc.)</p>	June 2005		A draft Program Service Day schedule along with Standards was developed by the Programs Workgroup in December 2007. The draft was presented to the Education, Mental Health, and Sexual Behavior Treatment Program experts who were pleased with the draft. The draft is currently under executive review.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Schedule for "Program Service Day" Each facility management team will identify a program service day schedule that allows time for all treatment and educational programs, medical services, training and routine maintenance needs that will be met during the work day/week without loss of mandatory time.</p>	June 2005	<p>Review/input of facilities, treatment, education and review by Labor Unions Finalize PSD policy Implementation plan</p>	<p>Progress is dependent upon Program Service Day approval. Each facility will be required to implement a schedule that includes all components of a youth's day (including: education, treatment, medical, etc.). The Program Service Day includes standards and a schedule to allow for all mandated services and minimum requirements of each plan regarding youth services to be implemented.</p>	
<p>Distance Learning Format (Use of On-Line Courses) Pilot Program Fully implement Pilot Program at the NA Chaderjian High School</p>	June 2005	<p>Develop a Scope document. Research the feasibility of ordering Digital Video Recorders with this package.</p>	<p>Scope document was completed in April 2007. T1 lines have been installed; however, they have not all been configured. Classes are operational everyday at Jack B. Clarke High School at the Southern Youth Correctional Reception Center and Clinic and at Johanna Boss High School at the O.H. Close Youth Correctional Facility (YCF). The other schools have network problems due to insufficient bandwidth.</p>	
<p>Student/Ward Attendance Tracking System and WIN Database Integrate the Student/Ward Accountability Tracking system into the current WIN database.</p>	July 2005	<p>Conduct meetings with the EIS and WIN programmers to outline continued attendance needs: Identify needs, develop plan to integrate the Student/Ward Accountability Tracking system into the current WIN database, integrate Student/Ward Accountability Tracking system into the current WIN database, test, address issues, train staff, and implement.</p>	<p>Student/Ward Attendance Tracking System has been integrated into WIN at all sites; however, not all reports are accessible in the WIN as of yet. The Attendance Coordinators have been trained on both the old system (SWAT) and the new system (WIN) and are utilizing both systems for tracking until the WIN is fully operational.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Access and Attendance in Education Programs/Performance Expectations I&C's Deputy Director and the Superintendent of Education will review statutes, regulations, policies, Student/Ward Attendance Tracking system data and practices relating to access and attendance in education programs and develop per expectations.</p>	<p>July 2005</p>		<p>Draft Performance Expectations were developed based upon review of statutes, regulations, and policies, Student/Ward Attendance Tracking system data and practices. Full adoption of the Performance Expectations is pending final review and signatures.</p>	
<p>Department-Wide Training for Staff Working In Restricted Settings Conduct Department-wide training including those working in restricted settings.</p>	<p>December 2005</p>	<p>Assess training needs, develop training plan, meet with OTPD, identify priorities, develop Department wide trainings for staff, and implement training.</p>	<p>The Training Needs Assessment was completed. CDCR-Office of Training and Professional Development continues to work with Chico State and DJJ on the "roll-out" of training for the total reform effort. Treatment and custody staff are currently receiving training on topics surrounding special education. Specialized training is standard for all special education staff. There is no specialized training for staff that works in restricted settings.</p>	
<p>Automated Library System Install an automated library system at each high school that will provide tracking and easy access to library materials.</p>	<p>June 2006</p>	<p>Order the system, complete required paperwork for purchasing, distribute to schools, install at schools, and train each school on the library system, implement, and follow up with schools that have not installed system, order additional software for remaining school.</p>	<p>The needed paperwork for purchasing system software has been completed and sent to Enterprise Information Systems (EIS). Four of the eight high schools have an automated library system. All schools are upgrading and are in process of ordering "Alexandria" system. Out of the 8 schools: 4 have Alexandria operational; 3 have Alexandria but the installation is not complete; 1 remaining school does not have Alexandria.</p>	



Sexual Behavior Treatment Program Remedial Plan

Sexual Behavior Treatment Program Remedial Plan

The Sex Behavior Treatment Program (SBTP) Remedial Plan was filed with the court May 16, 2005. This report will provide an update on DJJ's progress certain portions of this plan from the date it was filed.

I. SBTP Audit Results

- No SBTP audit reports were received during this reporting period.

II. Upcoming Scheduled SBTP Audits

- *Farrell* SBTP Audits Scheduled for next quarter:
 - February 21, 2008: O.H. Close YCF and N.A. Chaderjian YCF

III. Significant Accomplishments

- Healthy Living Outpatient Curriculum - Dr. Henry Cellini, SBTP Consultant, delivered the Healthy Living Outpatient Curriculum on November 1, 2007.
- SBTP Task Force Meeting - On October 30, 2007, Dr. Barbara Schwartz, SBTP court appointed expert, participated in the SBTP Task Force meeting in San Diego to discuss the completed Healthy Living Curriculum and implementation of a curriculum field test.
- A new contract for the SBTP Expert was executed on December 19, 2007, well in advance of the end of the fiscal year. The new contract period is from July 1, 2008 to June 30, 2011, eliminating the need for yearly renewals.
- Healthy Living Outpatient Curriculum Field Testing –The SBTP Task Force Review was drafted into a formal proposal for field testing of the curriculum. The proposal will be undergoing executive management review and approval in January 2008. The recommendation is for the curriculum to undergo a 12-week field test on 5-6 wards per facility.
- FileMaker Pro and WIN Exchange Data Base Systems - In November 2007, SBTP Coordinator and CDCR Information Technology personnel met to plan preliminary design and content of the requirements and modifications to the FileMaker Pro software and WIN Exchange data base system. The system is utilized to track placement and treatment of wards participating in the SBTP. A follow-up meeting has also taken place.

III. Significant Accomplishments (cont'd)

- Placement of Wards with Co-occurring Disorders (Sex Behavior and Mental Health) - In October 2007, the SBTP Coordinator initiated weekly meetings with DJJ Mental Health Services staff to develop a process to coordinate placement of wards with co-occurring disorders.
- California Sex Offenders Management Board (CASOMB) Monthly Meetings - The SBTP Coordinator represented DJJ at the CASOMB monthly meetings. CASOMB's role is to make recommendations for policies and determine practices for the systems that manage sex offenders. CASOMB meetings for this quarter were held on October 18, 2007, November 15, 2007, and December 20, 2007.
- Staff Training - December 5-6, 2007, the SBTP Coordinator participated in cross training of health care practices at the DJJ Health Care Services conference in Ventura.
- Executive Leadership Program - The SBTP Coordinator completed a six month CSU Sacramento Executive Leadership Program in November 2007.
- Staff Hires - On October 5, 2007, an Office Technician for the SBTP was hired at DJJ Headquarters. A duty statement was completed for this position.
- SBTP Task Force Membership - During December 2007, three new members were approved for SBTP Task Force membership. A psychologist filled a vacancy left from a previous psychologist and the remaining two new members were added to the Task Force so that it will be more inclusive of other disciplines; one psychologist and one Supervising Casework Specialist. A PAIL Supervisor from the IBTM Development Team was also added.
- Association for Treatment of Sexual Abusers (ATSA) International Conference - Thirty clinicians, and SBTP Task Force members representing all of DJJ's youth correctional facilities attended the ATSA International Conference in San Diego from October 30, 2007, through November 1, 2007.
- Risk Assessment Instruments – The SBTP Coordinator drafted a proposal for the integration of the Juvenile Sex Offender Assessment Protocol II (JSOAP II), Juvenile Sexual Offender Recidivism Risk Assessment Tool II (JSORRAT II), and STATIC 99 risk assessment instruments.
- State Authorized Risk Assessment Tool for Sex Offenders (SARATSO) Meetings - The SBTP Coordinator continues to regularly represent DJJ at SARATSO meetings at the Department of Mental Health headquarters in Sacramento. During this quarter, meetings were held on October 16, 2007, November 13, 2007, and December 13, 2007.

III. Significant Accomplishments (cont'd)

- Coordination between the SBTP Remedial Plan and Classification, Assessment, Placement and Intake (CAPI) workgroup – The SBTP Coordinator was assigned to the CAPI workgroup. Weekly meetings between the SBTP Coordinator and Dr. Juan Carlos Arguello, Chief Psychiatrist in charge of overseeing the Mental Health Remedial Plan, are being held to communicate updates of SBTP progress and CAPI workgroup developments. The first meeting was held in November 2007.
- Since October 2007, the SBTP Coordinator now reviews and approves all placements of SBTP youth in SBTP programs.

IV. Items in Progress

- SBTP Policy Development - During the quarter, 10 identified Sex Behavior policies were condensed into one policy by the CAPI workgroup and submitted to the SBTP Task Force for review. DJJ anticipates the internal review process to be completed by the end of February 2008.
- SBTP Residential And Outpatient Curriculum - Dr. Cellini began writing the SBTP Residential and Outpatient Curriculum in December 2007. The curricula will be completed by June 30, 2008.

CDCR- DIVISION OF JUVENILE JUSTICE SEXUAL BEHAVIOR TREATMENT PROGRAM MATRIX TRACKING DOCUMENT

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Implement Healthy Living Program Curriculum Implement curriculum for the Healthy Sexuality Program. (This is the first level of treatment for the SBTP.)	January 2006		Dr. Cellini, SBTP Program Consultant, provided DJJ with the Healthy Living Outpatient Curriculum on Nov 1, 2007. Once the Healthy Living Outpatient Curriculum implementation plan is approved by executive management a field test will begin.	
Dynamic & Experiential Guide Complete a plan to develop a Dynamic & Experiential Guide for the Residential Sexual Behavior Treatment Program (RSBTP).	January 2006		Dr. Cellini began writing the SBTP residential and outpatient curriculum in December 2007. Experiential exercise guides are to be included throughout all curricula and not a stand-alone guide. Dr. Cellini expects to have a draft by the end of February 2008 and the complete product by Jun 30, 2008.	
Research Treatment Modalities and Develop a Curriculum for Female Wards with a History of Sexual Offenses Research appropriate treatment modalities specific to the female population and develop a separate curriculum.	March 2006		DJJ has contracted with two experts in gender responsive programming for female offenders to complete a comprehensive assessment of DJJ needs for female programming. DJJ currently has one (1) identified female with a history of sexual offenses. The recommendation of the female experts is that a separate curriculum is not necessary. Treatment for this population is being handled on an individual basis by appropriate clinical/treatment staff.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Re-evaluate Existing Curricula Based on Developmental Differences Existing curricula re-evaluated based on developmental differences and alter assignments accordingly.	June 2006		Dr. Cellini has informed DJJ he is taking developmental differences into consideration, which may alter assignments for youth with developmental differences. He will draft his curriculum accordingly. DJJ is evaluating the need to pursue this item, pending receipt of Dr. Cellini's curriculum.	
Policy & Procedures Manual Complete a Policy and Procedures Manual.	July 2006		Upon the implementation of DJJ policy on policy, the draft manual will be integrated into the overall DJJ policy manual. Staff will begin meeting with the Policy Unit, in February 2008.	

REMEDIAL REQUIREMENTS-WITHOUT SPECIFIC DATES (WSD)

Implement Outpatient Sexual Behavior Treatment Program Curriculum Implement curriculum for the Outpatient Sexual Behavior Treatment Program.	WSD		Dr. Cellini began writing the residential and outpatient curriculum in December 2007. Dr. Cellini expects to have a draft by the end of February 2008 and a complete product by Jun 30, 2008. An implementation schedule will be developed once the curriculum is finalized.	
Develop Residential Treatment Program Develop curriculum for the Sexual Behavior Treatment Program.	WSD		Dr. Cellini began writing the residential and outpatient curriculum in December 2007. Dr. Cellini expects to have a draft by the end of February 2008 and a complete product by Jun 30, 2008. DJJ is evaluating the need for outpatient treatment due to population changes and is determining the appropriate population in the program.	
Implement Residential Treatment Program Implement curriculum for the Sexual Behavior Treatment Program.	WSD		Dr. Cellini began writing the residential and outpatient curriculum in December 2007. Dr. Cellini expects to have a draft by the end of February 2008 and a complete product by Jun 30, 2008. An implementation schedule will be developed once the curriculum is finalized.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS				
Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Treatment Availability Sexual Behavior treatment will be afforded to all wards that have a need for treatment.</p>	WSD	Develop comprehensive assessment process and placement protocol for appropriate treatment level.	DJJ is in the process of implementing the JSORRAT II and the STATIC 99, which is the state approved sex offender risk assessments. DJJ is currently using assessment tools (SORD) to ensure that all youth who meet the criteria receive Sex Behavior treatment. All youth identified by the court, are provided treatment. Data from these assessments are reviewed on a weekly basis by the SBTP Coordinator.	
<p>Standardized psychological assessment Pre and post-testing will be utilized and reasonable accommodations will be made to administer a battery of psychometric pre and post-program measures that are consistent with industry standards.</p>	WSD	Research testing materials to determine which standardized tests to utilize statewide.	COMPLETED Legislation was passed requiring DJJ to use the JSORRAT II for youth under 18 and the STATIC 99 for youth 18 and over as the state approved sex offender risk assessment too.	
<p>Annual Training for Treatment Developmentally Disabled/lower Functioning Youth A selected group of staff from each program will visit other sexual behavior treatment programs at such places as Developmental Centers and State Hospitals.</p>	WSD		This is an agenda item for the next Quarterly SBTP Task force meeting scheduled for February 2008.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Additional training for staff that treats psychopathic youth with sexual offenses/Task Force to monitor new research related to the treatment of psychopathic individuals SBTP Task Force will monitor new research related to the treatment of psychopathic individuals with a history of sexual offenses and make recommendation to alter the curriculum and treatment approach as needed. This includes making training recommendations for staff.</p>	WSD		The SBTP Coordinator has been researching professional studies and psychological journals. These articles are discussed with the SBTP Task Force. A recommendation to utilize the PCLR-HARE was presented and is currently under consideration. Other alternatives will also be considered and reviewed. The SBTP Task Force will monitor for research regarding sex offenders with psychopathic behavior. This topic was discussed with the expert, Dr. Schwartz. Due to population realignment and the ability to open additional SBTP units, DJJ will explore the possibility of creating a residential unit for more predatory and/or psychopathic youth. The SBTP Task Force will identify and report on new research and training opportunities, at least quarterly, and on an ongoing basis.	
<p>Monitor number of developmentally disabled wards in all outpatient and residential sexual behavior treatment programs SBTP Coordinator will monitor number of developmentally disabled youth in all outpatient and residential sexual behavior treatment programs.</p>	WSD	The SBTP will coordinate with Education Services and the Wards with Disabilities Program to determine current number of developmentally disabled wards in SBTP and monitor on a monthly basis.	The SBTP Coordinator is scheduling meetings with the departmental WDP Coordinator and the Superintendent of Education Services to discuss the tracking process of developmentally disabled youth. This meeting will take place by March 31, 2008.	
<p>Cases on Appeal Youth who claim to have an appeal pending and report that they are unable to participate in Sexual Behavior Treatment will be required to provide a letter from their attorney. Documentation will be forwarded to the SBTP Coordinator to track and monitor the appeal.</p>	WSD	Develop Temporary Departmental Order (TDO) to ensure standardization of practice. Task Force members are to work with the recently assigned policy writer.	During the quarter, the CAPI workgroup combined 10 Sex Behavior policies into one., including cases on appeal. On December 27, 2007, draft policies for the SBTP were completed through the CAPI workgroup and submitted to the SBTP Task Force for review and subsequent revision in January 2008.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Unsuccessful Residential Youth An interdisciplinary treatment team case conference will be conducted for youth that are unsuccessful in residential sexual behavior treatment. The team will assess and devise a revised treatment plan.</p>	WSD	DJJ will develop Temporary Departmental Order (TDO) to ensure standardization of practice. The SBTP Task Force members will work with recently assigned policy writer and legal counsel.	During the quarter, the CAPI workgroup combined 10 Sex Behavior policies into one, including unsuccessful residential youth. On December 27, 2007, draft policies for the SBTP were completed through the CAPI workgroup and submitted to the SBTP Task Force for review and subsequent revision in January 2008.	
<p>Treatment Modalities Treatment hours on the SBTP will be 20 hours a week, with exception of institutional emergencies.</p>	WSD		DJJ will need to modify this expectation. The expert has recommended a reduction of treatment hours per week for the outpatient program. The Healthy Living treatment program is designed to provide three hours of treatment per week.	
<p>Family Counseling In the residential Sexual Treatment Program, there will be a family-counseling component.</p>	WSD		DJJ will develop a Family-Counseling Guide in conjunction with the SBTP Consultant. This will be written in conjunction with the residential treatment curriculum.	
<p>Discharge Criteria The determination of residential sexual offender program successful completion will be competency based and determined by measurable objectives reflecting treatment completion and goal obtainment.</p>	WSD		During the quarter, the CAPI workgroup combined 10 Sex Behavior policies into one, including discharge criteria. On December 27, 2007, draft policies for the SBTP were completed through the CAPI workgroup and submitted to the SBTP Task Force for review and subsequent revision in January 2008. Criteria for promotion at each stage will indicate treatment and goal completion. The SBTP Task Force has developed, and is now modifying a form for use at each youth case conference to confirm the completion of stages.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Maintenance Stage If needed each facility will conduct at least one Maintenance Group. Each institution's outpatient psychologist and a Youth Correctional Counselor are recommended to lead the Maintenance Group.</p>	WSD		During the quarter, the CAPI workgroup combined 10 Sex Behavior policies into one, including the Maintenance Stage. On December 27, 2007, draft policies for the SBTP were completed through the CAPI workgroup and submitted to the SBTP Task Force for review and subsequent revision in January 2008. Policies and procedures for the Maintenance Stage will be developed in conjunction with the outpatient curriculum.	
<p>Evaluation Process Develop an effective evaluation able to monitor and document each youth's progress and treatment.</p>	WSD		The SBTP Force developed a form that documents the youth's completion of the different treatment stages. This has been received and approved by the SBTP expert. The SBTP Coordinator met with WIN personnel to have this document entered into WIN. It is anticipated that a second meeting will be held in February 2008.	
<p>Staff Training Staff working on Sexual Behavior Treatment Programs shall receive initial orientation training, yearly in-service training, as well as outside professional development for select staff.</p>	WSD		A meeting will be scheduled with the Office of Training and Professional Development by Mar 2008 to discuss initial orientation. Training will be developed in conjunction with curriculum development. Association for Treatment of Sexual Abusers (ATSA) International Conference - Thirty clinicians, and SBTP Task Force members representing all of Juju's youth correctional facilities attended the ATSA International Conference in San Diego from October 30, 2007, through November 1, 2007.	
<p>Residential Treatment Program Meetings Each residential team shall be provided the opportunity for yearly team meetings.</p>	WSD	The policy and procedures being drafted will include interdisciplinary team meetings.	During the quarter, 10 identified Sex Behavior policies are being developed through the CAPI work group. On December 27, 2007, draft policies for the SBTP were completed through the CAPI workgroup and submitted to the SBTP Task Force for review and subsequent revision in January 2008.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Staffing on Residential Treatment Programs The four residential treatment programs which house between 50 and 60 youth, will have the following staffing ratio: nine youth correctional counselors, one senior youth correctional counselor, one parole agent, one supervising casework specialist, three psychologists, one program administrator, and one office technician.</p>	WSD		The newly established plan for the SBTP's will include a reduced number of youth on each living unit. Due to population realignment, the staffing and census will need to be re-negotiated, consistent with the Safety and Welfare Remedial Plan.	
<p>Staff for Outpatient Sexual Behavior Treatment Programs Staffing is as follows: one youth correctional counselor, one clinical psychologist and one office technician per program.</p>	WSD		Facilities are currently advertising, recruiting and interviewing to fill vacant positions. Due to population realignment, the staffing and census will need to be re-negotiated, consistent with the Safety and Welfare Remedial Plan. The need for outpatient programs and staffing will need to be addressed.	



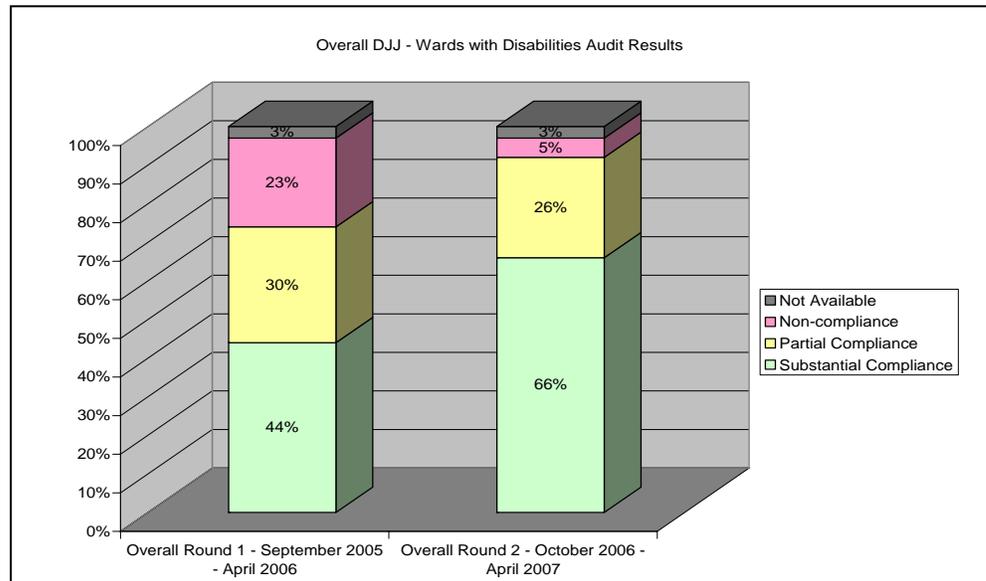
Wards with Disabilities Remedial Plan

Wards with Disabilities Program Remedial Plan

In response to *Farrell vs. Tilton*, the California Department of Corrections and Rehabilitation (CDCR), Division of Juvenile Justice (DJJ) filed the Wards with Disabilities Program (WDP) Remedial Plan with the court on May 31, 2005. This report will provide an update on DJJ progress on certain portions of this plan from the date it was filed.

I. WDP Audit Results

- *Farrell* WDP Expert Audit Reports – DJJ received initial WDP audit reports in November 2007, for the DeWitt Nelson and Preston Youth Correctional Facilities (YCF) and on December 19, 2007, for the Ventura YCF.
- Overall *Farrell* Education Compliance Percentage – Because the WDP Expert is not providing specific compliance ratings until after he has completed his second round of audit visits, DJJ does not yet have a compliance analysis for this round of audits. However, an analysis for the very first round of WDP audits from September 2005 – April 2006 found that the Division was in 44% of Substantial Compliance, 30% of Partial Compliance, 23% of Non-compliance and 3% Not Available. For the next round of audits from October 2006 to April 2007, the Division increased its Substantial Compliance percentage by 22% to an overall of 66%. Partial Compliance for that round was at 26%, Non-compliance was at 4.8% and Not Available was at 2.8%.
- For the fiscal year 2007-2008, the WDP Expert has planned two shorter site visits to each correctional facility, typically one-day visits. The first audit date will involve a more general review of all items contained in the WDP audit tool, while the second audit date will focus on a follow-up and a more detailed analysis of items not resolved by the first audit, as well as interviews and final coordination with facility staff. It is possible that the findings of the first audit at a facility will be sufficient to make the second audit date unnecessary.



II. Upcoming Scheduled Audits

- *Farrell* WDP Audits scheduled for next quarter:
 - January 10, 2008: Southern Youth Correctional Reception Center-Clinic
 - January 23, 2008: O.H. Close
 - January 24, 2008: N.A. Chaderjian
 - February 26, 2008: DeWitt Nelson
 - March 11, 2008: Heman G. Stark
 - March 12, 2008: Ventura

III. Significant Accomplishments

- Wards with Disabilities Policy - The Temporary Departmental Order (TDO) #07-94, Wards with Disabilities Emergency Announcement Protocol, was signed on November 27, 2007, and will be in effect through November 27, 2009.
- WDP Coordinators Training - Training for Trainers, on the TDO Wards with Disabilities #06-71, is scheduled for all WDP Coordinators in the Northern and Southern regions in January 2008. Once Training for Trainers has been completed, the WDP Coordinators will begin training facility staff.
- Architectural Barriers Removal - DJJ Headquarters and facility staff continue to work with CDCR's Office of Facilities Management (OFM) on monitoring and completing the work of removing the architectural barriers identified in the WDP Remedial Plan. The documents provided by OFM for this reporting period cover the period of November 3, 2007, through December 3, 2007. The status of each item presented has been identified either as Completed, In Construction, In Procurement, or Seeking Funding. (See Appendix 2: Architectural (Physical) Barriers Removal Report).
- Titmus Vision Screening Machine - The new electronic vision screening machine was purchased for the Ventura YCF in June 2007. During the November 2007, audit of Ventura, the expert noted the use of the vision screening machine provided all youth with effective screening. The WDP Coordinator continues to work in conjunction with Health Care Services in the vision screening of the youth.
- Wards with Disabilities Monthly Report - Since 2007, the Wards with Disabilities Monthly report continues to be filed in a timely manner by the facility WDP Coordinators at all facilities. An expanded format recommended by the Disabilities Court-ordered Expert has been implemented.

- Wards with Disabilities Remedial Plan Training – The following training and training related activities occurred during the reporting quarter:
 - Disability Awareness (DA) Training and Staff Assistant Training was provided at the following facilities: Dewitt Nelson YCF - 47 staff were trained on October 16, 2007, and 24, 2007. Preston YCF - 32 staff were trained on November 28, 2007, and December 5, 2007.
 - The In-Service Training (IST) version of the Disability Awareness Training is currently awaiting approval and sign-off from the Office of Training and Professional Development. It is anticipated to have final sign off in February 2008. Once approved, training for trainer's session will be scheduled and each facility will provide training to all staff.
 - The WDP Coordinator represented DJJ at the statewide Youth Leadership Forum (YLF) Steering Committee, on December 14, 2007. The YLF is a forum for information exchange, provides young people with disabilities more opportunities and facilitates the interchange of learning between youth and adults with disabilities who are role models to provide learning and inspiration.
 - The Disability Awareness core lesson plan is ready for distribution. Training for Trainers will be provided to all Training Officers at the Stockton Training Center for the Basic Correctional Juvenile Academy on February 20, 2008.

IV. Items in Progress

- WIN Exchange Modifications - The modifications required for the WDP tracking is incorporated into the WIN Exchange. Training is scheduled in January and February 2008 for all facilities with a target date of April 2008, for the WIN Exchange to be activated.
- Coordinator Position - Ward with Disabilities Remedial Plan Coordinator position became vacant effective December 31, 2007. An interim Ward with Disabilities Remedial Plan Coordinator has been assigned until the position is filled permanently. The position has been advertised and applications received. Interviews are anticipated to take place the first week of February 2008.
- A directive will be issued to assist the facilities with implementation of the TDO #07-94, Wards with Disabilities Emergency Announcement Protocol.

**CDCR- DIVISION OF JUVENILE JUSTICE
WARDS WITH DISABILITIES PROGRAM MATRIX TRACKING DOCUMENT**

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>WIN 2000 Modifications/Tracking The Department shall ensure wards with disabilities that require accommodations are tracked through the WIN system and that an accurate record is maintained for wards with disabilities that allows for the collection of individual and aggregate data. Complete modifications to the WIN 2000.</p>	September 2005		The WIN section was piloted at OH Close Correctional Facility on Aug 8, 2007, and is now active at both O.H. Close and Chaderjian facilities. Deployment will begin at all facilities between January and April 2008. A WDP section has been developed and included into the WIN system. WDP elements including the WIN were reviewed by Program and Medical. Meetings were conducted Mar 13, 2007, and Mar 20, 2007. Anticipated WIN implementation development & deployment April 2008.	
<p>Developmental Disabilities Study CDCR will conduct a study regarding the need for a residential program for wards with certain developmental disabilities within six months of the filing of this plan; CDCR will develop a plan based on the results of the study if applicable.</p>	November 2005	Establish a work group/ committee to address wards with developmental disabilities.	The first meeting was held on Aug 21, 2007, with the WDP Disability Expert, Medical and Mental Health, Legal, and WDP staff.	
<p>Wheel Chair Vans (Para Transit Buses) The DJJ shall procure two wheelchair accessible buses to transport wards with disabilities by July 2006.</p>	July 2006	A purchase order was placed on Sep 8, 2006 to acquire the vans.	The Para Transit buses will be completed and retro-fitted by mid February 2008.	Sep 8, 2006 Purchase Order

Updated: 12/31/07

REMEDIAL REQUIREMENTS				
Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date

Develop System to Document the Mental and Physical Impairments Of Wards. Department will develop and maintain a system that documents the mental and physical impairments of wards with disabilities and any reasonable accommodations.	July 2006		Significant progress has been made and all components for tracking and documenting wards with disabilities have been built into WIN. Beta testing began at OH Close on Aug 8, 2007, and is now active at both O.H. Close and Chaderjian facilities. Deployment will begin at all facilities between January and April 2008.	
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PLANT MODIFICATIONS				
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Appendix C- Category 1 Projects Complete first category of projects.	Sept. 30, 2006		See DJJ Physical Barrier Removal Report.	N.A. Chaderjian YCF completed Aug 11, 2006 Dewitt completed Sep 29, 2006
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Appendix B- "Critical Disability Related Barriers" Complete list of critical disability related structural barriers per schedule	May 2006 thru August 2009		Anticipated completion date: 08/09. See DJJ Physical Barrier Removal Report.	
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Appendix C- Category 2 Projects Complete second category of projects.	Sept. 30, 2008		Anticipated completion date: 9/29/08.	
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REMEDIAL REQUIREMENTS -WITHOUT SPECIFIC DATES (WSD)				
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Implementation of Security Procedures CDCR staff shall be aware of accommodation to wards with disabilities in developing and implementing security procedures including use of force, count, searches, transportation, visiting, and property.	WSD	WDP Headquarters' Coordinator preparing a draft document to identify specific disability needs to be addressed.	Work group has been established to work on a new Use of Force policy and procedures. WDP information will be incorporated into the Use of Force Policy procedure. Policy and procedures are still in the drafting phase.	
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Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>N.A. Chaderjian Room Modification Current shower room will need to be expanded to a minimum 60" width to allow for a wheelchair to make a complete turn.</p>	WSD	This project was not included as part of the original construction projects plan, but would be undertaken and completed separately by the Office of Facilities Management (OFM).	Office of Facilities Management is in the schematic phase of this project. The project was incorporated as an additional project. The site has been surveyed, and proposal submitted. Working drawings have been completed.	
<p>Shower/Lavatories There will be at least one fully accessible shower and/or lavatory at each facility.</p>	WSD	Part of Office Facility Management's Construction Matrix & Monthly Report.	See Physical Barrier Removal Report, Appendix 2.	Jan. 27, 2006, El Paso de Robles YCF; Dec. 30, 2005 & Aug 18, 2006 Preston YCF; Sep 11, 2006 Dewitt Nelson YCF; OH Close 10/25/06
<p>Psychotropic Drug Study Establish a special working group in coordination with mental health experts to study the effects of certain psychotropic drugs on wards.</p>	WSD	Contact mental health experts within the department to establish working group and schedule meetings.	A workgroup has been established and the first meeting was held with the WDP Disability Expert, Legal, Medical and Mental Health, and WDP Staff on Sep 4, 2007. A follow-up meeting held Sep 26, 2007, included the Remedial Plan Mental Health Experts from their Remedial Plans. The Psychopharm Policy is near completion. The initial evaluation and progress note requirements will be included in the Psych Evaluation Policy. Electronic templates will be placed in WIN in early April 2008. The Benzo/Seroquel restriction is part of the Psychopharm Policy, a new Medication Tier List. The Chief Psychiatrist and the P&T Committee will determine the proper level for each medication. Each level is more restrictive and the highest level requires prior approval from management before prescribing.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Health Care Working Group Coordinate with those working on the Health Care Remedial Plan to document the inclusion of several specific items for wards with disabilities.	WSD	Establish a working group with Health Care Services to review and document the inclusion of specific items for wards with disabilities.	This workgroup will start after completion of the Assessment of Developmental Disabilities (DD) and the residential program plan for those with DDs.	



Health Care Services Remedial Plan

Health Care Services Remedial Plan

On February 24, 2006, the Health Care Services Remedial Plan was filed with the court. Subsequently, on June 7, 2006, the court ordered implementation of the plan. On December 6, 2007, the Health Care Services audit tool was filed with the court. This report will provide an update on the progress DJJ has made on certain portions of this plan from the date it was filed.

I. Health Care Services Audit Results

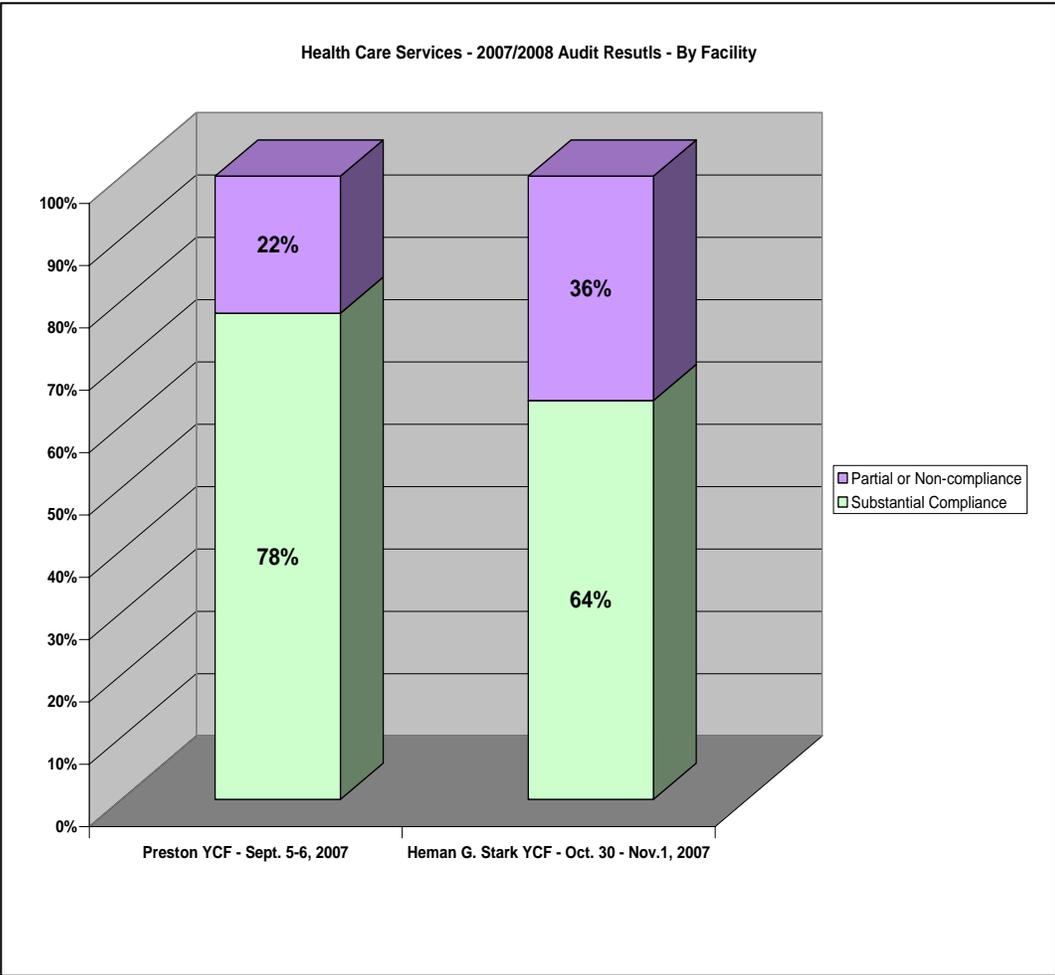
- *Farrell* Health Care Services Experts Audit Reports – During this reporting period, DJJ received Health Care Services audit reports for the Preston YCF and the Heman G. Stark YCF
- Preston YCF Audit Results - As reported by the *Farrell* Health Care Services Experts, the Preston YCF is currently in 78% Substantial Compliance. The Experts assessed and applied compliance ratings to a total of 707 screens/questions of which Preston YCF was in Substantial Compliance with 548 of those screens/questions.

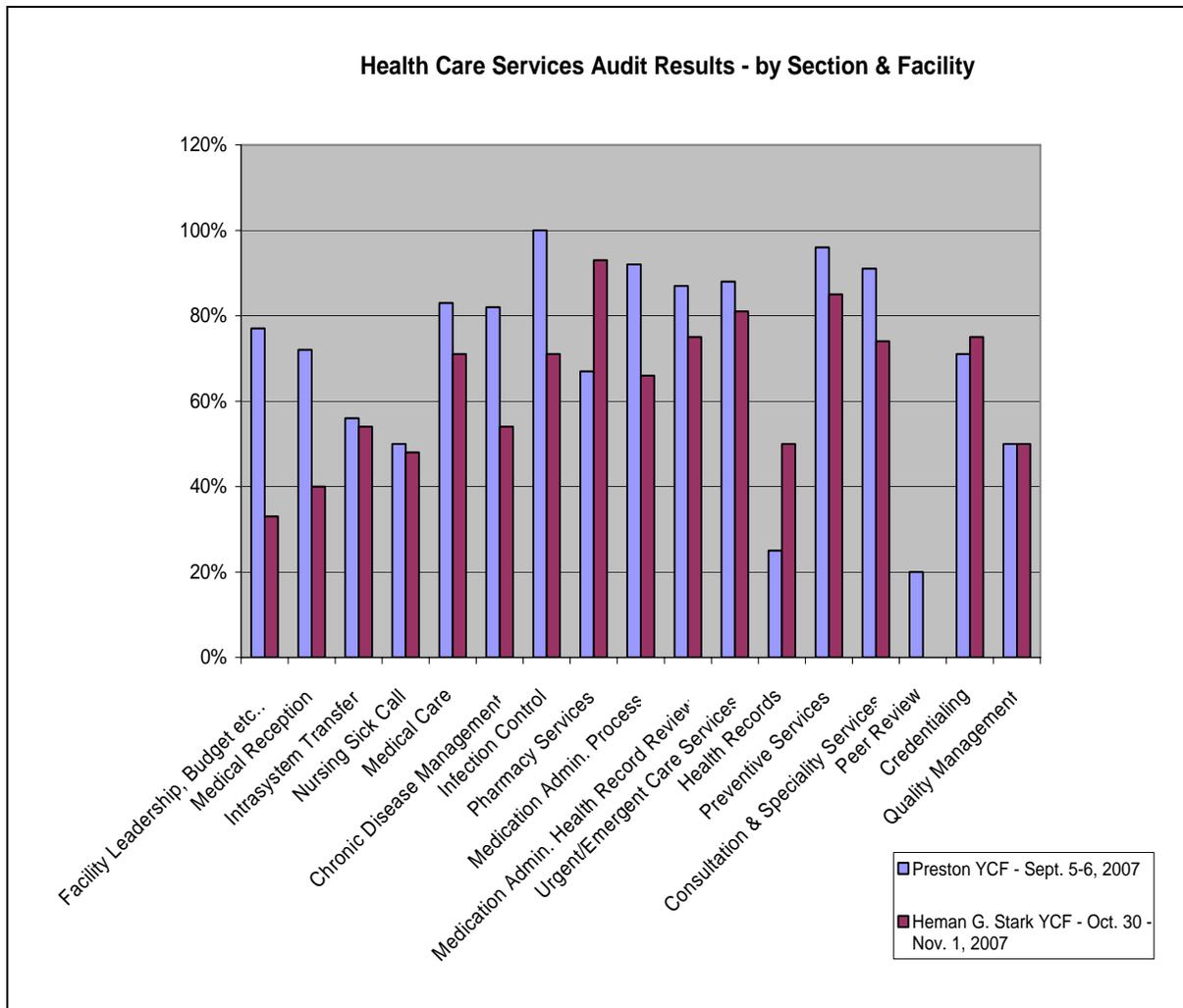
Compliance percentages by the different sections of the Health Care Services audit tool for the Preston YCF include:

- Facility Leadership, Budget, Staffing, etc...77%
- Medical Reception 72%
- Intrasystem Transfer 56%
- Nursing Sick Call 50%
- Medical Care 83%
- Chronic Disease Management 82%
- Infection Control 100%
- Pharmacy Services 67%
- Medication Administration Process 92%
- Medication Admin. Health Record Review 87%
- Urgent/Emergent Care Services 88%
- Health Records 25%
- Prevention Services 96%
- Consultation and Specialty Services 91%
- Peer Review 20%
- Credentialing 71%
- Quality Management 50%
- Heman G. Stark YCF Audit Results - As reported by the *Farrell* Health Care Services Experts, the Heman G. Stark YCF is currently in 64% Substantial Compliance. The Experts assessed and applied compliance ratings to a total of 657 screens/questions of which Heman G. Stark YCF was in Substantial Compliance with 419 of those screens/questions.

Compliance percentages by the different sections of the Health Care Services audit tool for the Heman G. Stark YCF include:

- Facility Leadership, Budget, Staffing, etc...33%
- Medical Reception 40%
- Intrasystem Transfer 54%
- Nursing Sick Call 48%
- Medical Care 71%
- Chronic Disease Management 54%
- Infection Control 71%
- Pharmacy Services 93%
- Medication Administration Process 66%
- Medication Admin. Health Record Review 75%
- Urgent/Emergent Care Services 81%
- Health Records 50%
- Prevention Services 85%
- Consultation and Specialty Services 74%
- Peer Review 0%
- Credentialing 75%
- Quality Management 50%





III. Significant Accomplishments

- Clinical Record Administrator Position – Due to continued difficulties in recruiting the Clinical Record Administrator position, and in an effort to have additional qualified applicants from which to choose, DJJ reclassified the Clinical Record Administrator position to a Health Program Specialist II position. The Health Program Specialist II classification was selected as it requires high skills and consultant level technical knowledge. The working title of the position will remain Clinical Record Administrator and the incumbent will remain responsible for the organization and content of the Unified Health Record (UHR). If necessary, the selected candidate will be provided additional training in UHR standards. The Health Program Specialist II position advertisement was posted on December 26, 2007, with a final filing date of January 14, 2008.
- Medical Records Services Contract - In conjunction with the above, a Bid Announcement for a Medical Records Services contract was published on December 28, 2007, with a January 18, 2008, final submission date. This contract will be used to provide for records administration until the above position

can be filled. Once filled, the contract will be utilized to provide additional training to the newly appointed Health Program Specialist II in the area of records administration.

- The Health Care (HC) Remedial Plan Audit Tool – The HC audit tool developed by the court-appointed experts, and approved by the parties, was finalized and filed with the Court on December 6, 2007.
- Health Care Remedial Plan Audit Review Process - A uniform process for audit findings review and internal information-sharing was developed by DJJ Health Care Services staff. An analysis of the results of the initial Preston YCF audit was shared with all facilities at the recent statewide quarterly meeting. Subsequent court-expert audit reports will be summarized and distributed following the newly created uniform review and information-sharing process. Each YCF will incorporate the audit findings into their Quality Management Program structure.
- Quality Management Program - In July 2007, DJJ initiated a Quality Management Program as specified in the Health Care Services Remedial Plan. All eight youth correctional facilities have designated staff to participate on a facility Quality Management Committee. Each facility Quality Management Committee has held at least one meeting since their inception. A minimum of at least one member of the DJJ headquarters Quality Management Team attended these meetings to assist in the implementation of the overall DJJ Quality Management Plan. Future facility Quality Management Committee meetings (as well as selected sub-committee meetings) will continue to be attended by members of the headquarters Quality Management Team.
- Statewide Health Care Services Management Team - On December 11-12, 2007, all Health Care Services management and supervisory staff from each YCF attended the regularly scheduled quarterly meeting. A break-out meeting was held for the statewide Pharmacy and Therapeutic Committee, and the statewide Quality Management Team.
- Peer Review Policy – As a portion of DJJ's internal compliance and quality management structure, a peer review policy was signed on November 28, 2007, by the CDCR-DJJ Chief Deputy Secretary then disseminated to youth correctional facilities and field offices for full implementation.
- Peer Review Process – In an effort to improve the methods used by individual clinicians in conducting peer reviews, the Health Care Services Director, Dr. Robert Morris met with the medical clinicians at three youth correctional facilities to conduct audits of the clinicians' charts and to discuss the elements of the Peer Review Process.
- Health Care Services Policy Training – During the reporting period, training was provided by the Health Care Services Director of Nursing and the Deputy Director of Facilities to Health Care Services staff in the implementation of the DJJ health care policies. Training participants included Health Care Services supervisors including Chief Medical Officers (CMO), nursing supervisors, and YCF custody management, such as Assistant Superintendents, Majors, and Captains.

- Nursing Skills Competency Testing - Nursing Skills Competency Testing began in October 2007, and has been completed at Northern California Youth Correctional Center (NCYCC), Preston, Heman G. Stark, and Southern Youth Correctional Reception Center and Clinic (SYCRCC). Testing at the remainder of the youth correctional facilities is scheduled to be completed in January 2008.
- Medication Administration Remediation - Medication Administration Remediation classes began in December 2007, with completion projected for February 2008.

IV. Items in Progress

- Nursing Protocols - The first ten nursing protocols are in development with five in draft form at this time with a projected completion date of April 2008. Implementation is planned for nurse use in sick call after the classes in physical assessment are provided. Training in the protocols will occur in advance of implementation.
- Nursing Physical Assessment Classes - Nursing Physical Assessment classes are in development and are projected to commence in April 2008. The classes will include basic physical assessment, nursing process, documentation, and patient education. It is projected that it will take 9-12 months to complete the classes system wide. Teaching sites will rotate throughout the state to provide regionalized training centers. This will reduce participant's travel time and ensure class size sufficient for meaningful educational experiences.
- Farrell Dental Expert – DJJ is in the process of finalizing a contract with Dr. Don Sauter as the expert to monitor implementation of the dental aspects of the Health Care Remedial Plan.

CDCR- DIVISION OF JUVENILE JUSTICE HEALTH CARE SERVICES MATRIX TRACKING DOCUMENT

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Nursing Protocol Manual Nursing Protocol manual will be completed.</p>	October 1, 2006	Director of Nursing will work with the Experts, Nurse Consultant, Nurse Instructors and nursing supervisors to develop.	The first ten nursing protocols are in development with five in draft form at this time with a projected completion date of April 2008. Implementation is planned for nurse use in sick call after the classes in physical assessment are provided. Training in the protocols will occur in advance of implementation. Nursing Skills Competency testing began in October 2007, and has been completed at NCYCC, Preston, Heman G. Stark, and SYCRCC. The remainder of facilities will be completed in January 2008	
<p>Local Operating Procedures and Training All local operating procedures completed, all staff trained, and essential policies implemented.</p>	November 1, 2006	Local operating procedures are being developed at the facility level using the previously developed templates as guides.	Local Operating Procedures (LOPs) drafts were reviewed and edited for clarification of content before the LOPs can be implemented. The LOPs are being formatted. Once the LOPs are reviewed and revised for clarity, an instruction/orientation program will be developed for the LOP's and the Supervising Registered Nurses (SRNs) and the Nurse Instructors will be able to educate the nurses on the specifics of the LOPs.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS				
Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date

REMEDIAL REQUIREMENTS-WITHOUT SPECIFIC DATES (WSD)				
Chronic Illness Audits	WSD	Develop audit; train appropriate staff on audit mechanism; conduct audits.	This is part of the overall Quality Management program. The Chief Medical Officers have been directed to use the audit tool and to work with physicians whose documentation "scores" were low, in order to improve their documentation in the management of chronic illness.	
Additional Policies Additional policies will be identified and developed as necessary.	WSD		No additional policies were identified during this quarter. Clinical Records is in development and Health Care is in the process of developing procedures for pharmacy.	
Health Care Leadership Positions Fill remaining Health Care Leadership positions.	WSD	Establish/Convert positions as necessary; advertise; interview; fill position.	Due to continued difficulties in recruiting the Clinical Record Administrator position, DJJ reclassified the Clinical Record Administrator position to a Health Program Specialist II position. The Health Program Specialist II classification was selected as it requires high skills and consultant level technical knowledge. The working title of the position will remain Clinical Record Administrator and the incumbent will remain responsible for the organization and content of the Unified Health Record (UHR). If necessary, the selected candidate will be provided additional training in UHR standards. The Health Program Specialist II position advertisement was posted on Dec 26, 2007, with a final filing date of Jan 14, 2008.	



Safety and Welfare Remedial Plan

Safety and Welfare Remedial Plan

The Safety and Welfare Remedial Plan was filed on July 10, 2006. The Standards and Criteria were filed October 31, 2006. This report will provide an update on the progress DJJ has made on certain portions of this plan from the date it was filed.

I. Safety and Welfare Audit Results

- No Safety and Welfare audit reports were received during this reporting period.

II. Upcoming Scheduled Safety and Welfare Audits

- *Farrell* Safety and Welfare Audits Scheduled for Next Quarter:
 - TBD: Ventura Youth Correctional Facility
 - January 28-29, 2008, O.H. Close Youth Correctional Facility

III. Significant Accomplishments

- Program Service Day - A draft of the proposed Program Service Day was shared with Court Experts, with favorable input. The proposal is currently in the Executive Review phase with approval anticipated in January 2008.
- Policy Development
 - Use of Force Policy - A revised draft of the Use of Force policy and procedures is near completion.
 - Ward Grievance Policy – A Temporary Department Order (TDO) was issued on October 1, 2007.
 - Staff Misconduct Policy – The completed policy was distributed to field staff on October 1, 2007.
- Staff Training to develop the knowledge and skills to increase safety and implement best practices has been a major focus during the reporting quarter. Some examples include:
 - Two hundred and seventeen staff from all eight youth correctional facilities received Safe Crisis Management Training.

- Fourteen staff completed six-week Training for Trainers in Conflict Resolution and Mediation through LETRA, Inc. An additional fourteen staff will begin the certification process in January 2008.
- An overview of Aggression Replacement Training was provided to DJJ managers and executive staff. Presentations conducted on October 17-19, 2007, for a total of 166 staff. Training for direct care staff began on December 3-7, 2007, and December 10-14, 2007, at the Herman G. Stark and Preston YCF's. This training will continue through this fiscal year.
- DJJ has contracted with the University of California, San Diego to provide Motivational Interviewing training to all direct care staff. Training for executive staff was conducted December 7, 13, 14 and 18, 2007. A total of 160 executive staff attended. Direct care staff training will begin in January 2008.
- Crisis Management Training of Trainers - Eighteen staff have been certified by JKM Training to instruct their Safe Crisis Management curriculum.
- The RFP for Normative Culture was released. Bids are due in January 2008.
- The RFP for Female Offenders was updated and released. Bids are due in February 2008.
- DJJ Headquarters Staffing: Director of Juvenile Programs - Mr. Doug McKeever was announced as the Director of Juvenile Programs on December 20, 2007, with an effective start date of January 2, 2008.
- *Farrell* Compliance Team – The *Farrell* Compliance Team was established in December, 2007. One position remains to be filled with an anticipated completion date of February 2008.
- The contract for the Safety and Welfare Expert has been renewed, well in advance of the end of the fiscal year. The new contract will take effect on July 1, 2008 and will run through June 30, 2011, eliminating the need for yearly renewals.
- A Protocol for Handling Disagreements between Facility and Health Care Staff – a December 14, 2007, memorandum signed by the DJJ Director of Juvenile Facilities and the Medical Director, authorized the protocol for handling disagreements between facility and health care staff.

IV. Items in Progress

- WIN Exchange – The WIN Exchange is currently in the beta testing phase in preparation for the April 2008, scheduled roll-out.

- Family Involvement – Additional strategies to improve family involvement beginning with the youth’s commitment were initiated in November 2007. A pilot program is being implemented at OH Close YCF. Staff from the Re-Entry workgroup met with Family Justice staff and OH Close staff to generate ideas to formalize the program and initiate strategies for implementation elsewhere.
- Integrated Behavioral Treatment Model (IBTM) – The IBTM model is in the development phase. An executive overview will be presented by the company contracted to assist DJJ in the model’s development, Orbis Partners, Inc., in January 2008. Orbis Partners Inc. completed site visits at nearly every facility, meeting with staff, youth and Parole staff from several parole offices to gather information regarding the youth program and case management practices. In addition they met with the CAPI workgroup and Research staff to provide an overview of the proposed IBTM principles and the proposed assessment categories. The workgroup provided Orbis with all the assessments DJJ currently uses for treatment placement and case management purposes. This included a draft of the Community Assessment Report. Orbis is reviewing the assessments to assist in recommendations regarding which assessments can be eliminated, or incorporated in the new assessment process. Orbis has proposed initial key areas which include: a new substance abuse assessment and new substance abuse programs – one for under 18 youth and one for youth 18 and over; a new risk needs assessment, with additional training and skills practice for Motivational Interviewing; Group Facilitation skills, Cognitive Behavior primer; and Case Management.
- DJJ is in the process of a non-competitive bid contract with the Change companies for training on interactive journaling and development of additional journals.

CDCR- DIVISION OF JUVENILE JUSTICE SAFETY AND WELFARE MATRIX TRACKING DOCUMENT

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Create Capacity for Change				
Add Central Office Resources				
Add or appoint a temporary transition team, compliance team.	October 1, 2006	Position approval by DPA Positions advertised and applications received. Pending interviews for the transition team.	The Compliance team has been established as of December 2007. One position remains to be filed with a completion date of February 2008.	
Add or appoint an administrator for matters pertaining to female youth.	October 1, 2006	Female Offender Administrator position established. Submit Request for approval to hire. Recruit for position Interview, select candidate and complete hiring package.	Position became vacant in September 2007. A YA Administrator is currently responsible for these duties until a replacement has been hired.	
DJJ will have sufficient and appropriate dedicated staffing for developing and maintaining policies for juvenile corrections based on contemporary standards of care and practice. Policies will be reviewed annually and updated as necessary.	November 21, 2007 Master "Table of Contents" and "Schedule" date of January 15, 2007	Identify the complete workload related to policy development and revision. Master "Table of Contents" and "Policy Development Schedule" are developed and to be forwarded for approval.	DJJ has identified a total of 2,147 policies of that approximately 714 are identified as existing policies requiring revisions due to <i>Farrell</i> . To date, 56 are identified as new <i>Farrell</i> related policies. DJJ is in the process of immediately hiring 4 additional staff to assist with the current workload and the annual review and revision processes.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Consistent with the need to maintain clear separation between juvenile and adult training content and expectations, added staff will include dedicated personnel for developing/approving juvenile training curricula, certifying trainers for juvenile corrections as appropriate, and setting standards and maintaining records for DJJ employee certification and recertification.	June 30, 2008	DJJ worked with the CDCR Office of Training and Professional Development to ensure these goals were met.	COMPLETED Off-Post Training schedule is based on regulation mandates and MOU's specific to DJJ. A meeting to begin developing a Services Level Agreement was held on November 2007, with OTPD Curriculum Development Unit and DJJ. DJJ contract is with outside vendors to provide specific training for DJJ.	
Designate staff to act as facility compliance monitors and to develop an internal compliance schedule for all operations.	July 31, 2007	A Compliance Unit has been established and staffed in DJJ.	Staff positions have been identified. A Compliance Unit has been developed within DJJ and staff hired in December 2007. One staff vacancy is remaining and is currently being advertised with an anticipated completion date of February 2008.	
Develop a system for corrective action planning, implementation, and review.	July 31, 2007	The Compliance Unit led by Bob Moore is developing the framework for the unit	A 2008 Audit schedule, "Compliance/Peer Review Branch, Juvenile Justice Programs" has been developed. Meetings were held with CDCR Audits & Compliance to coordinate audit reviews of DJJ facilities. The DJJ Compliance Unit is currently developing a system for Farrell Compliance reviews, planning and implementation.	
Rewrite local directives and procedures consistent with agency policy. This will be completed incrementally as facilities are phased in.			Ongoing	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Produce updated job descriptions for all living unit and management staff at the treatment team leader and above, incorporating duty requirements and performance measures consistent with agency policy.	January 31, 2007	Job descriptions will be developed as living units are converted and will evolve as the rehabilitative model is clearly defined.	This action item is dependent upon development and approval of IBTM. Orbis Partners, Inc. is currently working with DJJ in developing the treatment model.	
Improve MIS Capability				
Complete the WIN Exchange.	January 1, 2007	Develop the five new electronic tracking features (Classification, Suicide Watch/High Risk Observation, Restricted Programming, Youth with Disabilities, and Incidents of Violence.) Beta test. Make necessary adjustments. Develop/revise required policies. Train staff and implement.	WIN Exchange is currently being beta tested at O.H. Close. It is in the final stages of testing and is projected to roll out statewide in April 2008. Facilities are scheduled to be trained within the next eight weeks	
Assess management information systems to identify the existing deficiencies and develop a plan to address these deficiencies. The plan will address the issue of having sufficient technical staff to assist in programming changes to ensure that the system is responsive to user needs.	January 31, 2007	DJJ is working with Enterprise Information Systems and has established an Information Technology Priority Board. With the IT Priority Board, DJJ and EIS will meet on a regular basis to develop an IT plan and prioritize all DJJ current and future IT project requests.	Meeting conducted with EIS to assess MIS needs and develop a plan for DJJ was held on Oct 2, 2007. Nine EIS and 17 DJJ staff attended the meeting: Agenda items included: Business information System, Strategic Offender Management System, WIN Project, DJJ IT Priority Board Update Items The next meeting is scheduled for January 2008	
Add Resources at DJJ Facilities				
DJJ will ensure that the facility has Program Manager(s) responsible for high-risk, low-risk, and re-entry programs as needed.	Varies by Facility January 1, 2007 – July 1, 2009		DJJ is currently determining the appropriate allocation of these positions. Treatment model will need to be developed and approved. Job descriptions will be updated once the model is more clearly defined.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will ensure that the facility has a Vocational Specialist to provide vocational and career counseling and coordination with parole and re-entry specialists.	Varies by Facility July 1, 2007 – January 1, 2010		FUTURE DATE For this reporting period, only Heman G. Stark is required to have this position filled. Heman G. Stark currently has this position filled.	
DJJ will ensure that the facility has a Victim Services/Restitution Specialist.	Varies by Facility July 1, 2007 – January 1, 2010		FUTURE DATE For this reporting period, only Heman G. Stark is required to have this position filled. Heman G. Stark currently does not have this position filled.	
DJJ will ensure that the facility has a Training Officer.	Varies by Facility July 1, 2007 – January 1, 2010		FUTURE DATE For this reporting period, only Heman G. Stark is required to have this position filled. Heman G. Stark currently has this position filled.	
DJJ will ensure that the facility has Conflict Resolution Team(s).	Varies by Facility January 1, 2007 – July 1, 2009		FUTURE DATE On Jun 14, 2007, the Director of Juvenile Facilities advised Superintendents to hire the Conflict Resolution Team positions. Due to the future closures and realignment, additional positions may be needed at other facilities.	
DJJ will ensure that the facility has a Work Assignment Coordinator to seek out and develop work assignments for youth throughout the facility, monitor and assure that the maximum number of youth are attending Free Venture programs, and coordinate and develop external job assignments, work experience programs, and job furlough programs.	Varies by Facility July 1, 2007 – January 1, 2010		FUTURE DATE Heman G. Stark YCF has a full-time Work Assignment Coordinator. Three other facilities have staff performing these duties as secondary assignments.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Research

<p>Research will oversee, or conduct, the validation studies described in Section 4 of this Plan and the collection and analysis of information for use in the annual reports described above. Research may also assist with other data analysis and reporting requirements, such as the collection of Safety Outcome data elements in the PbS system as described in Section 3, "Reduce Violence and Fear."</p>	<p>Assist with Annual Reports July 1, 2007</p> <p>Oversee Validation Studies June 1, 2008</p>		<p>FUTURE DATE</p>	
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Reduce Violence and Fear

<p>DJJ will revise the policy as necessary to be consistent with this Plan, including policies and procedures relating to accommodations in the use of force for mentally and physically ill youth.</p>	<p>August 1, 2007</p>		<p>A revised Use of Force policy is being drafted.</p>	
<p>DJJ will qualify a minimum of 18 staff as trainers by a crisis management organization agreed upon by the plaintiff's counsel and/or hire an outside organization to provide this training to all direct care staff.</p>	<p>July 7, 2007</p>		<p>COMPLETED To date, JKM Training, Inc. has certified 22 DJJ Instructors through the Safe Crisis Management Instructor training program</p>	
<p>Direct care staff of at least two facilities will receive the agreed upon crisis management training.</p>	<p>November 1, 2007</p>		<p>217 staff members from all eight facilities have received Safe Crisis Management. Training priority has been given to staff working in high risk units and conflict resolution team members statewide as opposed to concentrating on just two facilities. This decision was made so training could be scheduled and implemented, regardless of the facility closure decision. Additional trainings are scheduled through the fiscal year.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Staff in all remaining facilities will receive the agreed upon crisis management training.	July 1, 2008		DJJ has prioritized training to staff from all facilities who work in high risk units and conflict resolution teams. A schedule for training has been developed.	
DJJ will, in consultation with the plaintiff's counsel and the relevant Consent Decree expert, develop and adopt a database to track all incidences of violence and use of force. DJJ will use this system until a more complete centralized MIS is implemented.	January 1, 2007	Daily Operations Report data in these areas are summarized monthly in the COMPSTAT report beginning in July 2006, and reported biannually in PbS beginning December 2006.	A Daily Operations Report was developed and sent to the Safety and Welfare expert for his review and feedback. PbS Outcome Measures for each facility have been implemented. DJJ completed the PbS candidacy phase in December 2007. DJJ will renew the contract with PbS in February 2008. Daily Operations Report is presently at Dewitt Nelson, N.A Chaderjian. O.H. Close and Preston. To be installed at other four sites by April 2008.	
DJJ will implement a system to regularly record the data elements collected for PbS Safety Outcome Measures 2, 3, 4, 11, and 12 for every day of the year.	November 1, 2006	Initial draft of database in beta testing stage. See above.	PbS Outcome Measures for each DJJ facility are adopted and identified. Measures are collected as defined by PbS. Daily Operations Report data in these areas are summarized monthly in the COMPSTAT report which began in July 2006, and reported biannually in PbS beginning in December 2006	
DJJ will develop formats and procedures for reporting results and share these quarterly.	April 1, 2007		DJJ has implemented the COMPSTAT reporting format in which data is shared on a regular basis with the Secretary of CDCR, COMPSTAT and PbS data has been provided as requested to the experts.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will implement a six-month pilot program to monitor the use of chemical agents. A determination will be made whether to use this system at other DJJ facilities, test or implement an alternative system, or discontinue the pilot project due to lack of material benefit.	Sept. 30, 2006		COMPLETED Pilot program was completed at EPDRYCF in August, 2007. An analysis of the pilot program was submitted on Oct 30, 2007, with the recommendation to discontinue due to no material benefit – and embark on a comprehensive training program using additional trainings, such as Safe Crisis Management and Motivational Interviewing.	
DJJ will consult with a national expert to help develop strategies and procedures to safely integrate gangs and racial groups.	June 1, 2007		DJJ representatives attended the Gang Consultant meeting with out of state gang experts/consultants to learn about findings of gangs and confinement. Additionally, DJJ is working with Orbis Partners to ensure the assessment and interventions will assist staff with gang entrenched youth.	
DJJ will open Behavior Treatment Program units as specified.	Varies by Facility Interim BTPs June 30, 2007 – March 31, 2008 Full BTPs Sept. 30, 2008		Specific facility action plans are under development at Heman G. Stark, Preston, and DeWitt Nelson.	
DJJ will use improved data from the new assessment instruments and process, disciplinary review process, and monitoring systems established to measure violence and use of force, to make annual estimates of the number of BTP units that will be needed for the following two years.	July 1, 2008		FUTURE DATE	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will have sufficient capacity in BTPs to provide treatment/rehabilitation for the estimated number of youth requiring BTP level treatment/rehabilitation during fiscal year 2008-2009.	July 1, 2008		FUTURE DATE	
DJJ will consult with national expert(s) to develop methodology for training impartial observers to conduct regular surveys of youth and staff using the PbS Staff Climate Survey and Youth Climate Survey or similar instruments at each facility.			PbS Coordinators and Analysts were trained in October 2006; DJJ completed the PbS Staff and Youth Climate surveys in December 2006. Surveys of youth and staff were conducted in April, May, September, and October 2007. DJJ has completed the candidacy phase for PbS in December 2007. DJJ is awaiting confirmation from CJCA on the status of its candidacy.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Identify a Rehabilitative Treatment Model

<p>All case managers, casework specialists, and other staff involved in risk/needs assessment will be trained in use of the instrument.</p>	<p>February 1, 2009</p>		<p>FUTURE DATE Approved contract for Orbis Partners, Inc. in June 2007, to develop and implement an Integrated Behavioral Treatment Model (IBTM) based on a valid, objective risk/needs assessment and interventions that align with the assessment results. Orbis Partners completed site visits at nearly every facility, meeting with staff, youth and Parole staff from several parole offices to gather information regarding the youth program and case management practices. In addition, they met with the CAPI workgroup and Research staff to provide an overview of the proposed IBTM principles and the proposed assessment categories. The workgroup provided Orbis with all the assessments DJJ currently uses for treatment placement and case management purposes. Included in this was the draft of the Community Assessment Report. The draft R/N assessment is anticipated next quarter.</p>	
<p>DJJ will consult with experts in cognitive-behavioral treatment for juvenile offenders to adapt the Washington Integrated Treatment Model to the needs of DJJ with specific emphasis on modifications needed for: older youth, gang involved youth, youth with racist attitudes and behaviors, and any other area DJJ deems necessary.</p>	<p>July 1, 2007</p>		<p>DJJ issued an RFP in April 2007, to include a Risk/Needs assessment and Integrated Behavioral Treatment Model (IBTM), to conduct training and design interventions to reduce youth's risk to re-offend. A contract was awarded in June 2007, with Orbis Partners to develop and implement the IBTM model based on valid, objective risk/needs assessment and interventions that align with the assessment results. Orbis will build staff expertise and capacity through a Train the Trainers model and staff will be certified to conduct the assessments. Trainers will deliver the interventions and train other DJJ staff, statewide, to conduct the risk/needs assessments and deliver the relevant interventions, using motivational enhancement techniques.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will produce a written description and manual for its adopted treatment/rehabilitation model.	November 15, 2008		FUTURE DATE See above. This is included as part of the Orbis contract. Approved contract for Orbis Partners, Inc is on target for date.	
Lay the Foundation for Treatment Reform				
DJJ must consult with subject matter experts to help develop program designs and content.	May 30, 2007		DJJ issued an RFP in April 2007, to include a Risk/Needs assessment, conduct training, and design interventions to reduce youth's risk to re-offend. Contract awarded to Orbis Partners in June 2007.	
DJJ must develop an adapted treatment model which will incorporate the following components: DJJ's Integrated Treatment Model, Risk Needs Assessment, Treatment/Rehabilitation Plan Development, Motivational Interviewing, Normative Culture, Interactive Journaling, and other formal treatment/rehabilitation programs adopted by DJJ.	August 1, 2007		DJJ issued an RFP in April 2007, to include a Risk/Needs assessment, conduct training, and design interventions to reduce youth's risk to re-offend. Contract awarded to Orbis Partners, Inc. in June 2007. Contracts for Motivational Interviewing and ART are completed. Training in ART began in December 2007, and Motivational Interviewing will begin in January 2008. The Request for Proposal for Normative Culture was advertised on Dec 13, 2007. The contract for Change Company is in progress.	
Develop or obtain the training curricula and materials for the components listed above and establish a schedule for training. (DJJ's Integrated Treatment Model, Risk Needs Assessment, Treatment/Rehabilitation Plan Development, Motivational Interviewing, Normative Culture, Interactive Journaling, and other formal treatment/rehabilitation programs adopted by DJJ).	Varies by curriculum April 1, 2008 – June 15, 2009		FUTURE DATE During December 2007, five Executive Summits were held on Motivational Interviewing. Overviews were provided by University of California, San Diego. Executive Overviews for the IBTM are anticipated to begin in January 2008.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Hire or train trainers in each of the areas noted above. (DJJ's Integrated Treatment Model, Risk Needs Assessment, Treatment/Rehabilitation Plan Development, Motivational Interviewing, Normative Culture, Interactive Journaling, and other formal treatment/rehabilitation programs adopted by DJJ)	Varies by area; specific dates to be declared in the interim training schedule; last item is April 1, 2009		FUTURE DATE	
Establish new job classification(s) or modify existing ones for treatment team staff, including treatment team leaders, case managers and treatment team members as necessary. The new classification(s) or changes are to ensure that: treatment teams have qualified leadership and participants, salaries are competitive and attractive to new recruits and promoting staff, and there are opportunities for promotion.	February 8, 2007		Job descriptions will be developed as living units are converted and will evolve as the rehabilitative model is clearly defined. Items related to the development of the IBTM will need new timelines consistent with the deliverables of the contract.	
Convert Facilities to the Rehabilitative Model				
DJJ will phase in the rehabilitative model one facility at a time. It will convert at least one facility to the rehabilitative model as described in this Plan.	July 1, 2007		Specific facility action plans under development. Due to realignment, the phases in the plan will be modified. DJJ anticipates implementing the model at Preston in 2008.	
DJJ will phase in the rehabilitative model one facility at a time. Complete conversion of all facilities to the rehabilitative model.	July 1, 2010		FUTURE DATE	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will establish a Program Service Day schedule for N.A. Chaderjian	November 1, 2006		A "Draft Program Service Day" schedule was developed and shared with Education, Mental Health, and Sex Behavior Treatment Program Experts in December 2007. It is pending Executive approval. Modifications specific to N.A. Chaderjian may be necessary as a part of implementation.	
DJJ will establish the Program Service Day schedule for the first facility converted to the rehabilitative model.	December 1, 2006		A "Draft Program Service Day" schedule was developed and shared with Education, Mental Health, and Sex Behavior Treatment Program Experts in December 2007. It is pending Executive approval.	
The Program Service Day schedule will be implemented at each facility as it is converted to the rehabilitative model	Varies by Facility January 1, 2007 – July 1, 2009		A "Draft Program Service Day" schedule was developed and shared with Education, Mental Health, and Sex Behavior Treatment Program Experts in December 2007. It is pending Executive approval.	
DJJ will develop a Program Service Day Schedule for each BTP unit to maximize out of room time and to ensure structured activity based on evidence-based principles for 40 to 70 percent of waking hours.	HQ Standards by December 15, 2006 Varies by Facility January 1, 2007 – July 1, 2009		A "Draft Program Service Day" schedule was developed and shared with Education, Mental Health, and Sex Behavior Treatment Program Experts in December 2007. It is pending Executive approval.	
DJJ will complete training on its Integrated Treatment Model, including the Risk Needs Assessment, Motivational Interviewing, Normative Culture, and other key treatment components.	Varies by area; specific dates to be declared in the interim training schedule; last item is August 15, 2009		FUTURE DATE	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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System Reform for Females

The administrator for female programs will develop an implementation plan and schedule and ensure that gender-specific services for females are provided at contracted facilities and/or one or more DJJ facilities that are equal to those provided to males under the rehabilitative model described in this Plan	June 30, 2008		FUTURE DATE Released an RFP in March 2007. DJJ received no successful qualified proposals. A second RFP was re-released in December 2007. Proposals are due Feb 11, 2008. Orbis will be developing the IBTM. The assessment instrument(s) will be sensitive to the needs and be responsive to the issues presented by both male and female youth.	
In the event DJJ is unable to contract for services for some or all females, DJJ will convert all or part of an existing facility, or build one or more new facility, to provide rehabilitative services to females. The number and type of females for whom services are provided through contracts will affect the size and mission of the state facility, or facilities.	June 30, 2008		FUTURE DATE Dependent upon results of RFP, Facilities Master Plan and phase in schedule.	

Acceptance/Rejection Criteria

DJJ will begin working with counties on statewide definitions related to "risks" and "needs" and will explore long-term strategies for conducting initial classification/assessment while the youth is in county custody.	July 1, 2007		State Commission on Juvenile Justice that includes community representation and other broad based service has been established. DJJ is working with the State Commission on Juvenile Justice in developing statewide definitions. The Commission is charged with developing "Risk/needs assessment tool, universal data collection elements and criteria and strategies to promote evidence based responses to youthful offenders by January 2009. A State Commission on Juvenile Justice meeting was held on Dec 3, 2007, and the next meeting is scheduled for January 2008.	
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Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Orientation

DJJ will standardize orientation processes for all youth and add material on victim impact and restitution, the disciplinary system, and on the positive incentives program.	March 15, 2009		FUTURE DATE	
DJJ will develop strategies to improve outreach and inclusion of parents and families immediately upon a youth's commitment to DJJ.	July 1, 2007		DJJ continues to ensure that all facilities have outreach activities on a regular basis that include parents and families. DJJ recognizes that family contact is a critical element of rehabilitation. DJJ is currently working with Family Justice, Inc , to further our family contacts in treatment and visitation. Additionally, DJJ has an ombudsman who was appointed to oversee the La Bodega pilot program and DJJ's efforts with Family Justice. To support DJJ in this effort, a recent bill, AB1300, mandates a minimum of 4 phone calls a month and the establishment of a toll free number for families to confirm visiting times and days .	
Pending available resources, DJJ will provide orientation at the county/juvenile hall level. Information provided there will give youths an opportunity to learn about and understand the resources available within DJJ. Reliable information should help alleviate youth's fears and dispel the myths about DJJ.	July 1, 2008		FUTURE DATE	
DJJ will improve orientation by developing curriculum, providing training, and updating the Youthful Offenders' Rights Handbook. All materials used for orientation to DJJ (as opposed to facility orientation materials) will be standardized.	March 15, 2009		FUTURE DATE	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Family Involvement				
<p>DJJ will begin conducting Community Assessment Reports (CAR) for each youth at intake, which will include contacts and interviews with parents, close relatives and community service providers who are available and willing and who can provide significant information about the youth. The Community Assessment Reports will include measures to assess family background, strengths, and functioning.</p>	<p>July 1, 2007</p>	<p>Policy drafted. Pending formal policy review and labor review process.</p>	<p>The CAR is scheduled to be included in the work of Orbis. A seven page draft has been completed and is in review. DJJ Re-Entry workgroup provided all the draft CAR materials to Orbis to determine the ability to include it in the assessment process. Orbis met with Parole staff and facility staff to get further input. Target date for executive review is March 2008.</p>	
<p>Ongoing telephone contact between the youth and his/her family will be facilitated on a regular basis during the entire period of the youth's confinement. Strong efforts will be made to maintain contact with and engage the youth's family after placement in the appropriate DJJ facility.</p>	<p>December 1, 2006</p>	<p>Minimal phone contact standards contained in Ward Incentive Policy. The ability to gather additional calls is afforded each youth based on achieved incentive level.</p>	<p>DJJ recognizes that family contact is a critical element of rehabilitation. DJJ is currently working with Family Justice, Inc., to further family contacts. Additionally, Rosalina Rosalez, the DJJ Ombudsman, performs outreach to families and the communities to further this objective. To support DJJ in this effort, a recent bill, AB1300, mandates a minimum of 4 phone calls a month and the establishment of a toll free number for families to confirm visiting times and days. A memo from the Director of Facilities went out to all superintendents informing them of this new mandate in December 2007.</p>	
<p>DJJ will organize quarterly "Family Visiting Days" to encourage further participation of families in the youth's treatment/rehabilitation.</p>	<p>March 1, 2007</p>		<p>Draft language regarding family visiting days is being incorporated in the revision of the visiting policy. The "Family Visiting Days" policy is targeted for completion on March 21, 2008.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Disciplinary System

Training for Disciplinary Coordinators and others involved in the disciplinary system will be reviewed and updated as needed.	March 31, 2007		Draft DDMS Policy has been developed and pending formal policy review process. Training will be developed and delivered when the policy is implemented.	
New hires and current disciplinary staff will receive full or refresher training on a competency basis.	March 31, 2007		Draft DDMS Policy has been developed and pending formal policy review process. Training will be developed and delivered when the policy is implemented.	
Along with this expansion of resources, the length of time it takes to process Level 3 serious misconduct cases will be reduced. For fact finding hearings, instead of 24 days, the maximum time before a hearing is held will be reduced to 14 days. The current standard of 14 days for disposition hearings will be reduced to seven days.	March 31, 2007		Draft DDMS Policy has been developed and pending formal policy review process.	
DJJ will add a process for appeals of Level 1 infractions.	March 31, 2007	Will take effect when new policy is implemented.	Draft DDMS Policy has been developed and pending formal policy review process.	
DJJ will develop a standard for presentation of court cases to district attorneys.	July 1, 2007		Committee established. Partial draft completed.	
DJJ will increase the ability for youths to earn back disciplinary time with good behavior. (See "Time Adds," below.) Eligibility for restoration of disciplinary time will be reviewed at each youth's case conference.	March 31, 2007		This requirement is included in the DDMS draft policy. Policy pending formal policy review process.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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Grievance System

Forms on which to file grievances or complaints alleging staff misconduct will be made available on all living units in a location accessible to youths without requiring assistance from staff or clerks.	March 31, 2007		Policy developed and approved and will be implemented as soon as automation is completed.	
The role of the clerk will be redefined to ensure this position is no longer responsible for issuing, recording, submitting and tracking grievances, but rather is responsible for ensuring that there is an adequate supply of forms on the living unit and educating and assisting youths in the grievance process.	March 31, 2007		Policy developed and approved and will be implemented as soon as automation is completed. Automation is referring to the WIN System updates. This is referred to on Page 6 of the Grievance TDO Policy and on Page 4 of the Staff Misconduct Complaint TDO Policy.	
Youths will be notified upon receipt of grievances and complaints alleging staff misconduct.	March 31, 2007		Policy developed and approved and will be implemented as soon as automation is completed. This is referred to on Page 10 of the Grievance TDO Policy.	
The superintendent will review all allegations of staff misconduct.	March 31, 2007		Policy developed and will be implemented as soon as automation is completed. This is referred to on Page 7 & 10 of the Staff Misconduct Complaint TDO Policy.	
A process will be developed to address abuse of the grievance system with regard to excessive filing, inappropriate statements (profanity, obscene language), excessive verbiage (pointless verbiage or voluminous unrelated documentation), and lack of cooperation (refusal to be interviewed or cooperate with the reviewer).	March 31, 2007		Policy developed and will be implemented as soon as automation is completed. This is referred to on Page 7 and 12 of the Grievance TDO Policy.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
Monitoring will be improved at the facilities by scanning, tracking and monitoring all grievances and complaints alleging staff misconduct, as well as by collecting and presenting data to the local management team on a monthly basis for review of trends and development of intervention strategies. Weekly and monthly reports will be developed and automated.	March 31, 2007		<p>Policy developed and will be implemented as soon as automation is completed.</p> <p>This is referred to on Page 14 & 43 of the Grievance TDO Policy and on Page 9 & 17 of the Staff Misconduct Complaint TDO Policy.</p>	
Headquarters will improve oversight by reviewing timeframes and quality of responses on a regular/random basis as well as by collecting and evaluating data, reporting findings, and assisting facility staff with the development of action plans to address deficiencies.	March 31, 2007		<p>Policy developed and will be implemented as soon as automation is completed. In the interim, DJJ has a process in place to collect and evaluate the data for all grievances.</p> <p>This is referred to on Page 43 of the Grievance TDO Policy and on Page 17 of the Staff Misconduct Complaint TDO Policy.</p>	
Complaints alleging staff misconduct will be separated from grievances.	March 31, 2007		<p>A separate policy developed and will be implemented as soon as automation is completed.</p> <p>TDO 07-93 Staff Misconduct Complaint Policy developed separately from Grievance Policy.</p> <p>Was distributed out to the facilities/fields on October 10, 2007 along with the Youth Grievance TDO,</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
All staff whose job responsibilities include direct, ongoing contact with youths will be trained on the Grievance System. Staff responsible for tracking, monitoring, conducting inquiries and responding to grievances will be provided specialized training.	March 31, 2007		Policy developed and will be implemented as soon as automation is completed and training will be provided. This is referred to on Page 45 of the Grievance TDO Policy.	
Time Adds				
DJJ will expand its earned program credit policy to allow youths (not excluded by policy from the 50 percent earn back provision described below) to contract for program credits in an amount not to exceed the number of months added to his/her parole board date for disciplinary reasons.	March 31, 2007		This item will be addressed in a new policy. The policy is under development. Draft will be submitted to the Policy Unit in February 2008.	
DJJ will revise the earn back policy for time adds so that 50 percent of disciplinary time adds can be earned back following six consecutive months of good behavior, except for those behaviors excluded from current policy. [1]	March 31, 2007	Will take effect when new policy is implemented.	This item is addressed in the draft DDMS Policy. The draft policy is pending formal policy review process and it is anticipated that this review process will be completed by Mar 6, 2008.	
DJJ will increase offsets to time ads through increased use of positive reinforcement for good behavior.	March 31, 2007	Will take effect when new policy is implemented.	Policy under development. Draft will be submitted to the Policy Unit in February 2008. Also referenced in the DDMS draft policy.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ research will conduct an analysis of program time ads and identify the reasons, and the frequency of these reasons, for them. DJJ will use this analysis to develop a plan to address the needs identified in the analysis. The goal of this plan will be to reduce the frequency and duration of time adds based on inadequate access to programs.	June 30, 2007		New Juvenile Justice Administrative Committee (JJAC) forum will be implemented in February 2008, which will assist in tracking time adds. The Research Unit will then analyze the data.	
Access to Court and Law Library				
Education Services Branch (ESB) will assume full responsibility for the operations of DJJ law libraries, including the budget.	August 30, 2007		ESB selects, orders, and maintains responsibilities for the law libraries. Ongoing subscription and order information is documented by DJJ on an ongoing basis. Training was completed for Law Librarians in March 2007.	
DJJ will revise the Youthful Offenders' Rights Handbook and orientation program to include information regarding access to the law library and attorneys, specifically addressing concerns raised in the Expert's Report, Summer 2001.	March 15, 2009		FUTURE DATE Youthful Offenders' Handbook is currently being revised.	
DJJ will conduct annual School Site audits to determine compliance and will purchase needed law library materials.	August 30, 2007		Law library materials were purchased for all facilities and distributed. Computerization of law library materials still needs to be addressed.	
DJJ will develop clear and consistent policies and procedures regarding access to courts and law library and will develop compliance measurements for monitoring performance in the area of access to courts.	October 1, 2007		Policy completed and approved. Training scheduled for April 2008.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will develop, and train staff on, curriculum addressing access to courts and law library. In addition to the initial training, refresher training will be developed.	October 1, 2007		Training scheduled for April 2008.	
DJJ will develop a plan in consultation with plaintiff's counsel and attorneys for youth to ensure appropriate access to attorney visits and phone calls.	February 1, 2007	DJJ conducted workgroup with PAII's, Public Defenders and plaintiff's counsel to develop policies in this area. The formal policy review process has been completed pending final executive review and approval.	Policy completed and approved in January 2008. Completed policies on "Confidential Youth Visitation", "Confidential Telephone Access to Youth" and "Youth Request for Confidential Telephone Calls"	
Access to Religious Programs and Functions				
DJJ will have a system in place to provide oversight to monitor and ensure compliance with policies and regulations regarding Access to Religious Programs in a Correctional Setting.	June 30, 2007		The tracking of the religious events continued to be monitored and tracked and recorded in the WIN system by all facilities for this reporting period.	
A Religious Coordinator will oversee uniform enforcement of legally mandated religious programming to youths in all DJJ facilities.	June 30, 2007		COMPLETED Religious Coordinator position was filled Aug 10, 2006. A copy of the DJJ 'Chaplain's Handbook' was developed and distributed in December 2007. DJJ policy on 'Religious Services to Wards' was submitted on Dec 13, 2007.	
The Religious Coordinator will also be responsible for oversight of religious policy, manual revisions, and chaplain training.	June 30, 2007		A copy of the DJJ "Chaplain's Handbook" was developed and distributed in December 2007.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
DJJ will revise the Youthful Offenders' Rights Handbook to reflect changes in policy and regulations.	March 15, 2009		FUTURE DATE	
Refresher training will be developed and provided to staff on revisions to the religious programming policy, reporting requirements, and modifications to WIN.	June 1, 2008		FUTURE DATE DJJ policy on "Religious Services to Wards" was submitted on Dec 13, 2007.	
Physical Plant Improvements				
The Director of Juvenile Facilities will provide a quarterly report to the Chief Deputy Secretary outlining a complete inspection of DJJ facilities, identifying deficient sanitary and physical conditions by type and location and including recommendations to remedy those deficiencies.	January 5, 2007		On Apr 27, 2007, a memo was sent to all Superintendents instructing them to submit their quarterly reports with information that should include environmental health issues, sanitary and physical conditions and corrective action plans. A standard facility inspection format is currently being developed. The first quarterly report will be completed and submitted to the Chief Deputy Secretary in the next quarter.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>The superintendent of each facility is responsible and accountable for the sanitary and physical condition of every occupied building and outdoor area at his or her facility. A copy of each quarterly inspection report, and any other written finding relating to physical plant condition, will be kept in a working file in the office of the Director of Juvenile Facilities. The Director of Juvenile Facilities will include these findings in a written annual performance review.</p>	<p>July 1, 2007</p>		<p>On Apr 27, 2007, a memo was sent to all Superintendents instructing them to submit their quarterly reports with information that should include environmental health issues, sanitary and physical conditions and corrective action plans. A standard facility inspection format is currently being developed. The first quarterly report will be completed and submitted to the Chief Deputy Secretary in the next quarter.</p>	
<p>Master Planning</p>				
<p>DJJ will prepare a Juvenile Justice Facilities Master Plan.</p>	<p>July 1, 2007</p>		<p>DJJ was not able to complete this by July 2007, given the uncertainty about the numbers and type of offenders to be committed to DJJ. A work team has been appointed to work with the architect hired in December 2007. An update will be prepared by February 2008.</p>	
<p>DJJ will prepare an Operational Master Plan, in substantial conformance to the description provided above.</p>	<p>July 1, 2008</p>		<p>FUTURE DATE DJJ has completed the architectural programming phase and is transitioning to the design phase.</p>	
<p>DJJ will prepare a proposal for the first prototypical facility.</p>	<p>July 1, 2007</p>		<p>Process has transitioned from the architectural programming phase to the design phase.</p>	



Mental Health Remedial Plan

Mental Health Remedial Plan

The Division of Juvenile Justice (DJJ) filed the Mental Health Remedial Plan on August 25, 2006. The Standards and Criteria were filed on December 14, 2006. This report will provide an update on the progress DJJ has made on certain portions of this plan from the date it was filed.

I. Mental Health Audit Results

- No Mental Health audit reports were received during this reporting period.

II. Upcoming Scheduled Mental Health Audits

- There are no scheduled Mental Health audits for next quarter.

III. Significant Accomplishments

- Protocol for Handling Disagreements between Facility and Health Care Staff - This protocol was developed for resolution of disputes related to the exercise of clinical and professional judgment by mental health personnel. This document was signed and disseminated to the field by the Director of Juvenile Facilities and the Chief Medical Director in December 2007.
- Suicide Prevention Assessment and Response - This policy, required by the Consent Decree for management of potentially self-harming youth, was finalized on December 28, 2007. This policy meets contemporary standards and incorporates provisions for staff training, quality improvement and forms for implementation. Training and a pilot test will be completed prior to full implementation, anticipated for April 2008.
- Table of Contents - A comprehensive table of contents for mental health policies was completed in November 2007. This document will serve as an outline for mental health policies that need to be developed and implemented.
- Forensic Evaluation Policy - In conjunction with the Board of Juvenile Parole, Facility staff, Legal Services, Health Care staff, Mental Health professionals and the Sexual Behavior Treatment Program expert, a forensic policy for WIC 1800/1800.5 evaluations has been developed. The draft Forensic Evaluation Policy was completed in December 2007 and upon development of the training component for this policy and final approval of the policy, the policy will be signed.
- Policies - All identified Mental Health policies have been assigned to the various Mental Health staff for development. In December 2007, a coordinator was designated to track and review the draft policies. Weekly meetings to review and update the status of these policies were initiated.

III. Significant Accomplishments (cont'd)

- Mental Health Program Administrators - As of October 2007, five of the six Mental Health facilities have Mental Health Program Administrators.
- Staff Hiring - All psychiatrist vacancies have been filled in both the Northern and Southern facilities. All psychiatric positions statewide have been hired.
- Staff Training – Barry Glick, PhD., provided training to staff in Aggression Replacement Therapy (ART).
- Lisa Boesky, PhD., began training mental health staff in “Understanding and Preventing Suicide” and “Identifying and Managing Youth with Mental Health Disorders.” This training will be scheduled through the end of the fiscal year.
- Response to experts’ report on the Mental Health Licensed Mental Health Beds – DJJ completed a response to the experts’ assessment of the Mental Health Licensed and Beds on October 19, 2007.
- Adequacy of Current Inpatient Licensed Bed Resources - An analysis of the data and evaluation of use of inpatient, licensed beds was completed by DJJ in October 2007. DJJ’s analysis concluded that the “complexities involved in establishing a CTC in Northern California would not be in the best interest of the youth or DJJ. The number of youth requiring CTC level of care is low and will not support a therapeutic milieu.”
- Dr. Eric Trupin, one of the two Mental Health Experts, had his contract renewed on December 19, 2007, well in advance of the end of the fiscal year. Dr. Trupin’s new contract will take affect on 7/1/08 and will run through 6/30/11, eliminating the need for yearly renewals. The other Mental Health Expert, Dr. Terry Lee, is currently in the process of getting his contract renewed and it is anticipated to occur in early January 2007.
- Department of Health Services (DHS) Licensing and Certification - A meeting with DHS, Mental Health, and Health Care Services was held on October 4, 2007. The purpose of the meeting was to coordinate with DHS to explore licensing options for new facilities, including identification of youth who require treatment in licensed facilities and options for licensing of mental health beds. The outcome of the meeting provided DJJ with CTC’s regulatory information, minimum standards and requirements.
- Peer Review Pilot Program - A pilot program for Peer Review of psychiatrists was completed in December 2007. Based on the results of the program, Mental Health is currently revising the forms used in the review. After the revision, an ongoing Peer Review program for both psychiatrists and psychologists will be scheduled.
- A pilot program for an administrative review of psychopharmacologic practices has been completed. A review of the results is being analyzed to determine required policy revision and training requirements. Draft of Psychopharmacology Policy under final revision.

IV. Items in Progress

- Use of Force - This policy is in the final stages of internal review and includes considerations for youth with Mental Health issues.
- Criteria for the placement of youth in each mental health Levels of Care is currently being developed by Mental Health staff.
- Dedicated Mental Health Training Team - Three clinician positions for the Mental Health training team were identified and approved in December 2007.
- Information Sharing with Local Governmental Entities – The policy for sharing information with local government agencies is in development. DJJ has created a form that will be part of this policy.
- Discussion between Court and Intake Services, counties and Mental Health Services has resulted in the development of a new form used to share information with the counties on youth returning to their jurisdiction. This discharge summary of care will be provided to the counties for every youth transferred from DJJ back to the youth's county of commitment. The form is in the final stages of review. An informational memo will be prepared for the counties describing the new procedure. This process should be completed within the next quarter.
- Licensed and Residential Mental Health Beds - DJJ is continuing to respond to the mental health experts' recommendation for Licensed and Residential Mental Health Beds. Steps to address an increase in CTC admissions are being implemented as well as the proposed levels of Mental Health care. DJJ scheduled a meeting with the Sierra Vista CTC Hospital in December 2007, to resolve treatment and security issues and reinstitute a contract. Due to unanticipated scheduling conflicts, the meeting was rescheduled to January 2008.
- Memorandum of Understanding (MOU) - The next meeting is scheduled for January 2008 for renegotiation of the MOU for Intensive Care Facility, Metropolitan State Hospital, which was developed in December 2007. DJJ issues listed in the previous MOU have been resolved. The MOU will be reviewed in January and anticipate a signed MOU by February 2008.
- Mental Health Monitoring Systems – Mental Health services are including Quality Improvement indicators to monitor compliance with written policy and tracking system information used for management purposes. DJJ has consistently reported plans to include QI (Quality Improvement) processes when developing new policies and programs.
- Program Service Day – A draft of the Program Service Day Schedule was developed and reviewed by the Education, Mental Health and Sex Behavior Treatment Program Experts as well as DJJ staff, in December 2007. A final draft is targeted for approval in January 2008. Once approved, the Program Service Day may need site specific adjustments for mental health units.

CDCR- DIVISION OF JUVENILE JUSTICE MENTAL HEALTH MATRIX TRACKING DOCUMENT

Updated: 12/31/07

The following matrix is not all inclusive of DJJ's completed Action/Tasks, but only highlights those Action/Tasks that were completed during this reporting period. For a listing of past completed items refer to Appendix 1.

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Staffing DJJ will add or appoint four senior clinicians and/or senior administrators with expertise in mental health services to represent mental health issues and facilitate implementation of this plan. These staff will be part of the divisions' reform implementation team. They will be added or appointed no later than Oct 31, 2006.</p>	October 31, 2006		<p>COMPLETED Positions were initially established and advertised in 2006. All positions have been filled. DJJ has deployed four MH clinicians to the multi-disciplinary work teams to represent MH issues and facilitate implementation of the Remedial Plan.</p>	
<p>DMH transfers By no later than Dec 31, 2006, DJJ will develop written policies and procedures on transfer to DMH, or return to the committing court, of youth requiring long-term inpatient care in a licensed facility.</p>	December 31, 2006		<p>Held discussions with DMH to develop this policy. Mental Health field staff developed an initial draft policy. Draft policy is targeted for review in the next quarter.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>UOF, Restraints, and Discipline with MH In consultation with Consent Decree mental health experts, DJJ will develop policies regarding mentally ill youth and the use of force (UOF), use of restraints, and the disciplinary process. These policies will be consistent with the descriptions in this section. These modifications will be completed by Dec 31, 2006.</p>	<p>December 31, 2006</p>		<p>Modifications to the Use of Force and DDMS policy are being made. The UOF policy and procedures is being drafted. Additional modifications were required to include additional Use of Force options. Final Draft will be reviewed by Mental Health prior to Executive approval.</p>	
<p>Levels of Care Criteria In consultation with the Consent Decree mental health experts, DJJ will adopt formal criteria for referring youth to each mental health level of care described in this section. These criteria will be fully implemented no later than Jan 31, 2007.</p>	<p>January 31, 2007</p>		<p>The existing Level of Care Policy requires revision. Mental Health is currently developing formal criteria for levels of care and the policies and procedures for movement. The level of care policy will interface with Program Service Day. Criteria for the placement of youth in each mental health Levels of Care are being developed as part of a multidisciplinary effort. The draft policy is targeted for executive review by Apr 2008</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Licensed Mental Health Beds Mental Health staff will work with the Consent Decree mental health experts to evaluate current practices, and if appropriate, propose alternative solutions for contract mental health beds. In particular, the experts will provide input on the adequacy of contract services and, based on objective evidence, treatment concerns relating to transporting youth needing acute inpatient care, and the impact on family involvement and continuity of care for Northern California youth transported to Southern California for acute or sub acute care. This evaluation will address contract services for males and females and youth under 18 and those 18 and older. This evaluation will be completed no later than January 31, 2007.</p>	<p>January 31, 2007</p>		<p>In response to the court experts, a report on the assessment of Licensed Mental Health Beds was submitted by DJJ on Oct 19, 2007. ICF MOU was renegotiated with DMH in December. The MOU will be reviewed by the Metropolitan State Hospital in January, 2008, and is expected to be completed within 30–60 days. Plans are underway for youth in Northern California to go to Sierra Vista Hospital for treatment. A multidisciplinary team of DJJ staff met in December, 2007, with Sierra Vista administrators to work out concerns of security, clinical and emergency treatment issues. The next meeting is scheduled for January, 2008, to reinstitute a contract.</p>	
<p>Mental Health Training Team Mental Health staff will develop a dedicated mental health training team consisting of at least three licensed clinicians, plus an instructional designer and office technician no later than January 31, 2007.</p>	<p>January 31, 2007</p>	<p>Training positions identified. Complete request to hire for three vacancies. Recruit for positions. Interview and hire positions.</p>	<p>Advertising and recruitment will begin in the next quarter for these positions.</p>	
<p>Feasibility of Parent Partners DJJ will investigate the feasibility of implementing a program of parent partners. This feasibility review will be completed by no later than May 30, 2007.</p>	<p>May 30, 2007</p>		<p>Parent Partners has been assigned to a multi-disciplinary workgroup.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Family Integrated Transition (FIT) A.) No later than May 30, 2007, DJJ will initiate a pilot using a.) the Family Justice (“La Bodega”) model for youth in core treatment programs and</p> <p>B.) The Family Integrated Transition model for youth in its specialized mental health programs.</p>	<p>May 30, 2007</p>		<p>A.)The Family Justice (‘La Bodega’) model is being piloted at OHCYCF.</p> <p>B.) Chief Mental Health Director has conducted research on family integration models. In the interim Mental Health includes and promotes family integration by working closely with Parole and the community in the preplanning for youth leaving. Every Mental Health policy in development has a family component when applicable. Mental Health has assigned a Chief Psychologist, Dr. Poncin, to look into family integration approaches while the youth is in DJJ. Dr. Poncin will be investigating programs for their feasibility to implement in DJJ.</p>	
<p>Adequacy of Current Inpatient Resources Based on the analysis of the tracking data and evaluation of use of contract beds noted above, DJJ will reassess the adequacy of current inpatient resources for females and for Northern California males, and make any necessary plans to ensure timely and appropriate care for youth in need of inpatient services, including plans with respect to licensed acute and/or sub acute beds, no later than four (4) months following completion of the analysis and evaluation. DJJ will begin implementing these plans the following fiscal year.</p>	<p>May 31, 2007</p>		<p>An analysis of the data and evaluation of use of contract beds was conducted in October 2007. The analysis included that the “complexities involved in establishing a CTC in Northern Ca. would not be in the best interest of the youth or DJJ. The number of youth requiring CTC level of care is low and will not support a therapeutic milieu.” Plans are underway for youth in Northern California to go to Sierra Vista Hospital for treatment. A multidisciplinary team of DJJ staff met with Sierra Vista administrators in December, 2007 to work out concerns of security, clinical and emergency treatment issues. The next meeting is scheduled for January, 2008, to reinstitute a contract. ICF MOU has been renegotiated with DMH. The MOU is being reviewed by Metropolitan State Hospital. Restrictions on use listed in the last MOU have been removed. The new MOU should be completed within 30–60 days.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Information Sharing In consultation with local governmental entities, DJJ will establish a policy and process to receive and share behavioral, and assessment information about youth committed to DJJ by Jun 1, 2007.</p>	<p>June 1, 2007</p>		<p>Intake and Court Services has a policy and process for obtaining behavioral and assessment information from the counties. There is also a process in place for providing the committing courts with annual updates regarding each DJJ youth. Discussions between Court and Intake Services, the counties and Mental Health Services have resulted in the development of a new form used to share information with the counties on youth returning to their jurisdiction. This Discharge Summary of Care Form will be provided to counties with every youth transferred from DJJ back to the counties. The form is in the final stages of review by Court and Intake Services and the counties. The procedure for the sharing of information is in development. This procedure will address sharing of information with the counties and parole. An informational memo will be prepared for the counties describing the new procedure. This process should be completed within the next quarter.</p>	
<p>Implement Information Sharing The policy and process described in the previous action plan item will be implemented no later than Dec 1, 2007.</p>	<p>December 1, 2007</p>		<p>In December 2007, a reassessment of the current Intake and Court Services policy and process for obtaining behavioral and assessment information from the counties was completed. It was determined that the existing policy and forms do not meet the needs for this requirement and are being revised. Because of these meetings, Mental Health is developing additional forms to ensure mental health information is shared between facilities and counties.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Forensic Evaluation Policy DJJ will develop and implement a policy regarding forensic evaluations that is consistent with the principles discussed in this section by June 1, 2007.</p>	<p>June 1, 2007</p>		<p>In conjunction with the Board of Juvenile Parole, facility staff, Legal Services, Health Care staff, Mental Health professionals and the Sexual Behavior Treatment Program expert, a forensic policy for WIC 1800/1800.5 evaluations has been developed. The draft Forensic Evaluation Policy was completed in December 2007, and upon final approval and development of the training component for this policy, the policy will be signed.</p>	
<p>Monthly Reviews The Mental Health Team will establish a protocol so that monthly treatment team reviews for any youth who has been in an IBTP or SCP for more than four months, or an ITP for more than two months, includes participation by at least one clinician not regularly involved in the treatment of the youth. This protocol will include the requirement for ongoing participation by a clinician not involved in the youth's treatment and central office review of treatment team meetings requiring the presence of an outside clinician consistent with this section. This protocol will be established and implemented by June 1, 2007</p>	<p>June 1, 2007</p>		<p>Policy has been assigned and is in development.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Treatment Planning In consultation with the Consent Decree mental health experts, DJJ will develop a policy and procedure for developing a treatment plan for each youth within three working days of admission to a residential mental health unit, for weekly treatment team meetings, and for monthly treatment team reviews to evaluate the need for continued stay in the program, refinement of the treatment plan, or recommendation for placement in an alternative treatment program. This policy and procedure will be implemented by Jun 30, 2007.</p>	June 30, 2007		A team has been assigned to develop the policy; a draft treatment plan is being developed. The plan will interface with the work of Orbis Partners, Inc. in the development of the IBTM.	
<p>New Facilities As new facilities are being built and new mental health needs are identified, DJJ will work with DHS Licensing and Certification to explore licensing options in a timely manner. DJJ will also seek the assistance of the Licensing and Certification Division to ensure that it successfully distinguishes between youth who may be treated in no licensed DJJ mental health programs and youth who are required to be treated in licensed facilities. DJJ will develop screening and assessment policies and procedures that clarify the distinction by Jun 30, 2007.</p>	June 30, 2007		DJJ had a Mental Health representative on the new facilities planning committee. The first new facility is not scheduled to have any Mental Health units.	
<p>Treatment Programs By Jul 1, 2007, DJJ will implement five (5) Intensive Treatment Programs, seven (7) Specialized Counseling Programs, and one (1) Intensive Behavior Treatment Program, as described in this section.</p>	July 1, 2007		DJJ has implemented five ITP's, five SCP's and one IBTP. Development of future ITPs and SCPs is on hold pending discussion and assimilation of programs in recently announced facility closures.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>Movement between Levels of Care In consultation with Consent Decree mental health experts, DJJ will develop policies and procedures to guide and direct movement between mental health levels of care and programs. These policies and procedures will be fully implemented by Jul 31, 2007. DJJ will continue with its current process of central monitoring and oversight until policies and new procedures are in place.</p>	July 31, 2007		System-wide Program Service Day Schedule is in development. The Mental Health Program Service Day will be developed after the statewide system is finalized. Criteria for Levels of Care are in development. However, finalization of the Program Service Day is necessary for the Levels of Care policy to become finalized.	
<p>Outpatient MH Staff No later than Jul 31, 2007, DJJ will have increased outpatient mental health staff consistent with the staffing standards included in this section.</p>	July 31, 2007		Advertising continues for all budgeted positions. Interviews being conducted at the facility level with Headquarters collaboration.	
<p>MAYSI-2 Effective immediately, DJJ will use the Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2) at initial intake of all youth upon admission to the reception center.</p>	Sept. 1, 2006	<p>IT Program Issues for the scoring of the MAYSI-2 are currently being identified and discussed.</p> <p>Scantron upgrade requested in June 2007.</p>	DJJ is currently utilizing the MAYSI 1 at reception centers. MAYSI 1 Scantron form is not compatible for the MAYSI 2. Data from MAYSI 1 utilizes a Scantron and does not have the capability to transfer data into the MAYSI 2. Identification and purchase of an updated software application has been ordered so that the data can be transferred into the MAYSI 2.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>MH Tracking System DJJ will develop tracking systems to document requests for, and receipt of, medical, psychiatric, and testing information from other facilities and agencies; successful and unsuccessful attempts to contact family members or guardians throughout a youth's stay in DJJ facilities; the type of screenings and assessments conducted; and the time such screenings and assessments were completed. These tracking systems will be in place no later than Nov 1, 2007.</p>	November 1, 2007	Will develop a team to collaborate with current Information Technology Division and WIN Program Analyst to determine the adequacy of current system and needed modifications to address need. Will explore other options if current system is inadequate.	This task was not completed by Nov 1, 2007. No progress to date.	
<p>IT for Residential MH Programs DJJ will develop a plan for providing appropriate technology for residential mental health programs and staff as described in this section. This plan will be completed no later than Jan 15, 2008. DJJ will request funding as necessary and begin implementation at the beginning of the fiscal year for which funds are appropriated.</p>	January 15, 2008		<p>FUTURE DATE The plan to provide appropriate technology for Mental Health is in part incorporated into the WIN Exchange system. WIN Exchange has been updated to include recently developed Suicide Prevention and Response policy (SPAR). WIN Exchange is in the final stages of implementation and is projected to be deployed in April 2008. Facilities are scheduled to be trained within the next eight weeks. DJJ was requested to review IT priority list for EIS in November to develop an IT plan.</p>	
<p>Review of FIT and FJ program By February 2008, DJJ will complete a review of outcomes from the Family Integrated Transition model and the Family Justice model pilot programs.</p>	February 1, 2008	Develop a team to review Family Integrated Transition Model and Family Justice Model.	<p>FUTURE DATE</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Tracking System for Family Contact DJJ will develop and implement a system to document and track: (1) attempts to engage families in their child's treatment program, (2) family participation in their child's treatment, and (3) family notification of suicide attempts, hospitalizations, and movement to different levels of care, serious injuries, and serious offenses committed against the youth consistent with DJJ policies.</p>	February 29, 2008	To be determined. Review will need to include collaboration with the Information Technologies Division.	No progress to date. A Scope of Work request for the development of a system to document and track attempts to engage families in their child's treatment program, etc. will be communicated to EIS.	
<p>Implement Family programs If found feasible and appropriate for the DJJ population, DJJ will work with the Consent Decree experts to develop an implementation plan to continue the Family Integrated Treatment and Family Justice programs beyond the pilot phase no later than April 30, 2008.</p>	April 30, 2008		FUTURE DATE	
<p>Publications Budget No later than Jun 30, 2008, DJJ will provide a budget for acquisition of professional journals and publications at each facility. The Director of Mental Health Services/Chief Psychiatrist will oversee maintenance of the professional libraries.</p>	June 30, 2008	Establish budget and identify pertinent journals. Explore potential for electronic resources	FUTURE DATE Decisions on which journals are to be provided in each institution have been assigned to a team. Decisions to be available by April 2008.	
<p>Family Engagement Model If a Family Engagement Model, or other evidence-based model for family engagement, is found to be feasible and appropriate for DJJ's population, an implementation plan will be developed and the model will be implemented no later than July 31, 2008.</p>	July 31, 2008	To be determined	FUTURE DATE	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Implement parent partners If a program of parent partners is found feasible and appropriate for DJJ's population, an implementation plan will be developed and DJJ will begin implementation no later than August 10, 2008.</p>	August 10, 2008	To be determined	<p>FUTURE DATE No reportable status</p>	
<p>Analyze efficacy of assessments By Nov 1, 2008, and periodically thereafter, DJJ will analyze the efficacy of screening and assessment instruments for youth under 18 and those 18 and older. On an ongoing basis, using these analyses and data from the scientific literature, DJJ will substitute improved instruments and discontinue the use of those found less effective.</p>	November 1, 2008	To be determined	<p>FUTURE DATE DJJ has contracted with ORBIS, Inc. to develop assessment instruments for DJJ. Orbis is currently conducting research on assessments to be utilized.</p>	
<p>Substance Abuse Program In consultation with national experts, DJJ will develop a new Substance Abuse/Dependence Treatment Program, including admission and exit criteria, as part of the Integrated Behavior Treatment Model on the timeframe described in the Safety and Welfare Remedial Plan. The new Substance Abuse/Dependence Treatment Program will be implemented by July 1, 2009.</p>	July 1, 2009	Establish a team to research and/or modify the substance abuse program.	<p>FUTURE DATE DJJ has contracted with Orbis Partners for new substance abuse assessment and programs. DJJ is on target to meet this deadline.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Intervention Training As applicable to each clinician, DJJ will provide instruction in the evidence based interventions for high frequency diagnoses and maladaptive behaviors identified above to all mental health clinicians in intensive treatment programs by July 15, 2009.</p>	July 15, 2009	Establish team to identify pertinent interventions and work with Training Division to develop training.	<p>FUTURE DATE No reportable status</p>	
<p>MH Unit Population Reduction By Jun 30, 2010, DJJ will reduce the maximum number of youth in its residential mental health programs to the size determined in conjunction with the Consent Decree mental health and safety and welfare experts.</p>	June 30, 2010	To be determined	<p>FUTURE DATE No reportable status</p>	
<p>Sr. Administrator DJJ will add or appoint a senior administrator with experience in implementing mental health programs to oversee and direct implementation of this Remedial Plan and its coordination with other Remedial Plans. This person will be hired or appointed no later than February 29, 2007.</p>	February 29, 2007		<p>COMPLETED Paul Woodward has been assigned to this position and will receive direction from the Director of Programs when issues of overlap occur between the Mental Health Remedial Plan and the other <i>Farrell</i> remedial plans.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
<p>New Treatment Programs In fiscal year 2007/2008, DJJ will establish one additional Intensive Treatment Program and one additional Intensive Behavior Treatment Program. The intent of Actions Plan items 12 and 13 is to create sufficient capacity at each level of care to provide for the mental health needs of all youth in a timely way. Compliance will be measured by providing sufficient capacity, with minimal waiting time for youth, not simply by adding the units listed above. Consequently, plans for mental health treatment units may be modified based on the analysis of populations and needs for various levels of care, as described in this section.</p>	<p>June 30, 2008</p>		<p>The IBTP scheduled to open at HGSYCF is pending the hiring of staff.</p>	
<p>MH Records Other actions pertaining to mental health records will be taken in conjunction with the Health Care Services Remedial Plan and be governed by that plan.</p>	<p>Refer to Health Care</p>	<p>Coordinate with Health Care Remedial Plan</p>	<p>This procedure requires the expertise of a Medical Records Administrator. Please refer to Health Care matrix for status of this position.</p>	
<p>Peer Review All other actions relative to implementation of a quality management and peer review system will be taken in conjunction with the Health Care Services Remedial Plan and be governed by that plan.</p>	<p>Refer to Health Care</p>	<p>Coordinate with Health Care Remedial Plan</p>	<p>A pilot program for Peer Review of psychiatrists was completed in December 2007. Based on the results of the program, Mental Health is currently revising the forms used in the review. After the revision, an ongoing Peer Review program for both psychiatrists and psychologists will be scheduled.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>MH Beds Needs Assessment DJJ will identify an expert approved by the Consent Decree mental health experts and plaintiff's counsel to conduct an assessment and projection of the numbers and types of beds needed for each level of care and to develop an ongoing system to track the need for and use of those beds. The systems will be in place, and reports generated on a monthly basis by a date to be determined in the Standards and Criteria section.</p>	<p>Sept 1, 2007</p>		<p>The Mental Health Experts have completed facility tours to assess need for licensed beds. Their report was submitted to DJJ in late June 2007. DJJ is continuing efforts to respond to recommendations included in this report, including renegotiating MOU's with the Department of Mental Health and reinitiating use of the Sierra Vista contract. DJJ is still awaiting the experts' recommendations for non-licensed, residential beds.</p>	
<p>Modifications to MH Beds By a date set in the Standards and Criteria section, and in consultation with the Consent Decree mental health experts and the expert identified pursuant to the preceding paragraph, DJJ will determine if modification to the current array of residential mental health programs, especially ITPs and SCPs, is appropriate and needed. DJJ will provide its evaluation and determination in writing, with a summary of the experts' opinions and recommendations, to the Consent Decree experts, the Special Master and plaintiff's counsel. Any recommendations to modify the ITPs and SCPs will be implemented by a date to be set in the Standards and Criteria section.</p>	<p>January 1, 2008</p>	<p>To be determined</p>	<p>Some preliminary considerations have been given in the DJJ realignment process. Further discussions and planning needs to be done. DJJ is still awaiting the experts' recommendations for non-licensed, residential beds.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Modification of Treatment Based on the analysis treatment intervention efficacy and of the treatment needs of its population described in the previous action plan item, DJJ will modify its treatments and identify and implement new training as required by a date to be set in the Standards and Criteria section.</p>			<p>FUTURE DATE DJJ is still awaiting the experts' recommendations for non-licensed, residential beds.</p>	
<p>IBTM Training Schedule By a date to be specified in the Standards and Criteria section, DJJ will establish a schedule for training staff based on the timeframes, which various components of the Integrated Behavioral Treatment Model are developed, including evidence based treatment for identified high frequency diagnoses and maladaptive behaviors.</p>			<p>An annual training calendar has been developed and is updated on a regular basis that includes components of the IBTM and evidence-based training. Training has begun with Lisa Boesky for Mental Health staff. In addition, DJJ Mental Health and Curriculum staff is developing curriculum for SPAR as a priority.</p>	
<p>Policies In consultation with Consent Decree mental health experts, DJJ will develop a comprehensive set of essential policies and procedures for the delivery mental health services as described in this section. DJJ will provide plaintiff's counsel and the Special Master with copies of proposed policies and procedures for their review and comment prior to adoption. Updated mental health polices and procedures will be completed by a date to be specified in the Standards and Criteria section. Policy and procedure pertaining to psychopharmacological services will be coordinated with policy development</p>	<p>March 1, 2007</p>	<p>Obtain current set of existing policies. Identify deficient policies and review all policies. Share existing policies with mental health experts and identify needed policies</p>	<p>A list of essential polices and procedures were developed in November 2007. This list was submitted to the Special Master in November 2007. All policies and procedures are coordinated with Policy Development and Health Care Services.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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consistent with the Health Care Services Remedial Plan.				
<p>Review of Records System By a date to be set in the Standards and Criteria section, DJJ will review the current records systems to address problems related to redundancy and lack of access to clinical/treatment information.</p>	Ongoing	Identify current deficiencies and establish feedback loop for communication	A review of the current records system requires the expertise of a Medical Records Administrator. The Medical Records Administrator (MRA) position in Health Care Services has been vacant for 1 and a half years. DJJ reclassified the Clinical Record Administrator position to a Health Program Specialist II position. The Health Program Specialist II classification was selected as it requires high skills and consultant level technical knowledge. The working title of the position will remain Clinical Record Administrator and the incumbent will remain responsible for the organization and content of the Unified Health Record (UHR). If necessary, the selected candidate will be provided additional training in UHR standards. The Health Program Specialist II position advertisement was posted on Dec 26, 2007, with a final filing date of Jan 14, 2008.	
<p>Computerized Records System By a date to be set in the Standards and Criteria section, DJJ will identify or develop an appropriate computerized record system to address problems of redundancy and lack of access identified in the previous action plan item.</p>	Ongoing		The development of this system requires the expertise of a Medical Records Administrator.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>MH Audit system DJJ will develop an internal audit system for mental health services consistent with the Health Care Services quality management and peer review program and with the recommendations of the experts consulted in the development of this Remedial Plan. This audit system will be in place by a date to be specified in the Standards and Criteria section.</p>		<p>Coordinate with Health Care Remedial Plan</p>	<p>Mental Health policies are currently being written to include quality improvement indicators as part of an internal audit system. Mental Health specialist assigned to Q&M process is being used to supplement other data collection duties.</p>	
<p>IBTM Training All direct care staff will be trained on the Integrated Behavior Treatment Model in accordance with the implementation schedule for core program rehabilitation/treatment units described in the Safety and Welfare Remedial Plan and the implementation schedule for intensive treatment units as described below.</p>	<p>April 1, 2009</p>		<p>Orbis Partners, Inc. contract executed in June 2007, to develop and implement an Integrated Behavioral Treatment Model (IBTM). Staff is currently being trained in some of the basic skill sets such as motivational interviewing, safe crisis management, conflict resolution and mediation and aggression replacement therapy.</p>	
<p>Treatment Hierarchy DJJ will develop a treatment hierarchy as described in this section as part of the Integrated Behavior Treatment Model on the timeframe described in the Safety and Welfare Remedial Plan.</p>	<p>August 1, 2007</p>	<p>.</p>	<p>The Treatment Hierarchy will be dependent upon the development of the Integrated Behavior Treatment Model guidelines on Treatment Hierarchy.</p>	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>Unit Size for New Facilities DJJ will determine the appropriate size of mental health living units in new facilities planned and implemented on the master-planning schedule provided for in the Safety and Welfare Remedial Plan.</p>	July 1, 2007	.	Due to facility closures and recent legislation that may impact DJJ's population, this item is currently under re-evaluation.	
<p>Program Service Day DJJ will develop a Program Service Day Schedule for each intensive treatment unit prior to bringing it on line. These schedules will be developed to ensure constructive program hours and out-of-room time consistent with the standards articulated in this section.</p>	June 30, 2007		Draft of "DJJ Program Service Day" was developed in December 2007. Program Service Day will incorporate changes after input from each discipline. Shared with Education, Mental Health and SBTP experts. Program Service Day will be reviewed by Executive Staff by February 2008. Once approved, a Service Day for Mental Health will be developed	
<p>Mental Health Issues DJJ will ensure that mental health issues are taken into account in the Juvenile Justice Operational Master Plan and Facilities Master Plan on the schedule set forth in the Safety and Welfare Remedial Plan.</p>	Ongoing			
<p>Mental Health Administrator DJJ will appoint a mental health program administrator at each facility with one or more residential mental health program prior to the date the program is implemented (or an existing program is modified) as described in this section.</p>	TBD		The following five facilities with residential MH programs have Mental Health Administrators in place: Preston, Chaderjian, SYCRCC, Heman G. Stark and Ventura.	

Updated: 12/31/07

REMEDIAL REQUIREMENTS

Action/Task	Plan Required Completion Date	Action Steps	Progress to Date	Actual Completion Date
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<p>MH Review Team DJJ will establish a centralized Mental Health Review Team to review recommendations for placement or a youth in an inpatient or residential mental health program and recommendations for changes in levels of care. This review team will be responsible for determining if these recommendations are appropriate. The Mental Health Review Team will be in place prior to bringing the first modified, or new, residential mental health living unit on line.</p>	<p>July 1, 2007</p>		<p>This team will be completed once a Chief Psychologist (Neuropsychologists) in HQ is hired.</p>	
<p>Additional Interventions Over the course of the next three years, DJJ will develop an implementation plan to incorporate additional interventions into the IBTM. The priority and type of interventions will be determined in conjunction with the Consent Decree mental health experts.</p>			<p>FUTURE DATE</p>	