


COUNTY FACILITY – Q&A

May		
	QUESTION	ANSWER
1	When did DHS first start using repurposed jail (RJ) placements? Which county was first? Was it the idea of the counties or DHS?	CCLP reports 2003 is the oldest licensing approval they can find. Based on the history DHS has it is unclear if the first agreement was county driven or DHS driven.
2	How many children are in the programs today? How many of these beds are available? How many total children have been served in these facilities over the last 24 months?	As of April 25, 2019, there were 41 youth placed in county contracted programs. There is a total of 60 beds contracted. In the last 24 months a total of 308 youth received BRS treatment through county administered programs and 6 received Independent Living Skills support through one county contract. A total of 314 in all.
3	Which counties are serving children in RJ's?	Multnomah, Lincoln, Josephine and Douglas. A contract exists for Klamath but is currently not being used.
4	What is the age range of children served in RJ's?	13-17 years
5	What is the daily rate at the RJ's?	It ranges based on the level of care. The lowest rate is provided to Lincoln County's ILS program at \$130/day and the highest is BRS Intensive Behavioral Support provided at Douglas County River Rock at \$352.07/day
6	What is the average length of stay for a child or youth in an RJ? What has been the shortest stay? The longest?	The average length of stay within the current county contracts is 49 days. The shortest stay was one day, and the longest stay was 337 days.
7	Are you aware of any other state that places foster children who have not been court involved in repurposed detention facilities?	We have reached out to Casey Family with this question to see if they track data related to the topic or if they can connect us with Child Welfare contacts in other states.
8	Has there been any assessment by mental health professionals about the impact of jail placement on the psychological well being and self worth of children and youth?	From the Official Journal of the American Academy of Pediatrics: <ul style="list-style-type: none"> <li>• <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5260153/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5260153/</a></li> <li>• Despite the widespread epidemic of mass incarceration in the US, relatively little literature exists examining the longitudinal relationship between youth incarceration and adult health outcomes.</li> </ul>

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		Through our research group they have identified that the impact of incarceration or a detention setting on child/youth wellbeing is highly variable and child dependent. A key factor of success has been identified as the treatment environment and agency culture.
9	Recently, we learned that 30% of Oregon kids placed out of state are either Black or Native American. Please provide us with the racial, gender, disability and LGBTQA demographics for kids placed in refurbished juvenile detention facilities over past 12 months.	 OOS race-ethnicity info.docx
10	Are you aware that the Douglas County Republicans passed a resolution calling for DHS to stop placing children in repurposed detention programs?	Child Welfare contracts with Douglas County but does not follow political parties, nor was the resolution sent to Child Welfare.
11	Many child advocates and the public have also expressed concerns about this practice. Will DHS commit to ending placements in refurbished detention facilities for CW youth?	Other settings are preferred and prioritized when building capacity. Child Welfare contracts with two programs utilizing repurposed detention pods. However, the needs of Child Welfare youth are varied, and a robust service array is needed to ensure those needs can be met. We need to consider demographics of youth accessing these programs and only utilize them for youth who experience cross system, juvenile probation involvement.
12	DHS does not license county programs. Can you please provide us copies of the “letters of understanding” that Tom Vanderveen described at our hearing earlier this year.	More information forthcoming on this question.
13	CCAs are required to provide 24-7 access to all areas of a facility to CASAs, DHS workers, attorneys and others. Is that accommodated and	County programs are held to the same standards as CCA’s and must allow access to CASA’s, DHS Caseworkers and Attorney’s.

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	enforced a these programs? Several attorneys have reported not being allowed beyond the receiving area and being denied access to living quarters.	
14	Does DHS expect staff to follow the same notification protocols for RJs as for CCAs?	Yes
15	County programs are not licensed by DHS, but DHS kids are placed there. Are there any other placements used by DHS that are not licensed?	There are differences in the continuum for youth 18 yr and older who are young adults who are still involved with CW but transitioning into independence
16	How many (or what percentage) of the kids in refurbished detention facilities are receiving their monthly face to face visits?	There are 3 youth placed in a refurbished detention setting. They have received 100% of their monthly visits.
17	How are children assessed prior to placement in a repurposed detention facility?	All youth accessing BRS Treatment (which is provided in the two programs with refurbished detention programs) are authorized for this level of care by a Licensed Practitioner of the Healing Arts.
18	What is the name of the assessment tool used and who typically does these?	<p>The following criteria are listed in BRS OAR:</p> <p><b>410-170-0040 Prior Authorization for the BRS Program; Hearing Rights</b></p> <p>(1) The BRS program requires prior authorization from the agency in accordance with the Authority’s rules, the general BRS program rules, and applicable agency-specific BRS program rules. A referral by an LPHA or agency to the Authority for prior authorization of the BRS program is not a prior authorization.</p> <p>(2) Prior Authorization Criteria for the BRS program:</p> <p>(a) The Authority shall provide prior authorization for the BRS program to an individual who:</p> <p>(A) Is enrolled in the Oregon Health Plan (OHP), is eligible for Oregon’s Medicaid or CHIP program, and is eligible for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services, according to the procedures established by the Authority;</p>

		<p>(B) Has a determination by a designated LPHA that the BRS program is medically appropriate to meet the individual’s medical needs;</p> <p>(C) Is not receiving residential mental health or residential developmental disability services from another governmental unit or entity;</p> <p>(D) Is a child; and</p> <p>(E) Does not have a current prior authorization for the BRS program for the requested time period from OYA or the Department.</p> <p>(b) OYA or the Department may provide prior authorization for the BRS program for an individual that meets the requirements in its agency-specific BRS program rules.</p> <p>(3) To meet the requirement in section (2)(a)(B) of this rule, the designated LPHA shall determine that the BRS program is medically appropriate because the individual:</p> <p>(a) Has a primary mental, emotional, or behavioral disorder or developmental disability that prevents the individual from functioning at a developmentally appropriate level in the individual’s home, school, or community;</p> <p>(b) Demonstrates severe emotional, social, and behavioral problems, including but not limited to: Drug and alcohol abuse; anti-social behaviors requiring close supervision, intervention, and structure; sexual behavioral problems; or behavioral disturbances;</p> <p>(c) Requires out-of-home behavioral rehabilitation treatment to restore or develop the individual’s appropriate functioning at a developmentally appropriate level in the individual’s home, school, or community;</p> <p>(d) Is able to benefit from the BRS program at a developmentally-appropriate level;</p> <p>(e) Does not have active suicidal, homicidal, or serious aggressive behaviors; and</p> <p>(f) Does not have active psychosis or psychiatric instability.</p>
17	<p>Prior to placement in a BRS facility, DHS policy requires that a licensed clinician of the healing arts approves and signs off on an assessment and the demonstration of need. Does</p>	<p>Yes, the LPHA authorizes access to these settings as described above. The LPHA reviewing and authorizing placements for Child Welfare youth is a registered nurse.</p>

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	this happen in these setting? Who is the licensed clinician of the healing arts?	
18	How are siblings kept together? Are siblings placed together in these facilities?	As access to these programs requires a medical need authorization, siblings are not typically placed together. Although it does happen occasionally. Sibling placements are more frequent in BRS Proctor Foster settings where an exception process can be pursued to allow the child not requiring treatment level services to reside in a Proctor Foster home certified by a CCA.
19	Is chemical restraint (oral or injected) ever used in these facilities?	No.
20	What about mechanical restraint—are foster youth ever placed in belly chains, handcuffs, or ankle chains at the facility or during transport—including secure transport.	Secure transportation services are not a part of County contracts or any BRS contracts with CCA’s. Child Welfare contracts with secure transport services directly through the Field Services Unit.  Field Services provided the following information related to their contracts with secure transportation:  Secure Transportation Contract
21	Does DHS have a written policy about the use of mechanical restraints on children in these programs? If so, please provide a copy. If not, is DHS willing to provide one?	413-215- 0076(3)(c)(ii) Mechanical restraint, meaning the use of any physical device to involuntarily restrain the movement of a child in care as a means of controlling his or her physical activities, is prohibited.
22	Are programs required to file incident reports of each incident of restraint or seclusion like CCAs are?	Yes

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23	Please provide the total number of reported incidents of restraint and seclusion for each facility for each month of the past 12 months by facility. Please include any PRN administration of medication (including Benadryl) either orally or by injection for behavior management?	No county programs utilize seclusion practices. Josephine, Lincoln, Multnomah and Klamath Counties do not use utilize physical restraint practices. Douglas County uses the Evidence Based Model: Non-Violent Crisis Intervention which through the Crisis Prevention Institute. In the last 12 months there have been a reported total of 13 physical restraints involving 10 youth within Douglas County programs.
24	Are the facilities locked, staff secure or are youth free to come and go at will?	More information forthcoming on this question
25	Are youth permitted to bring friends and visitors into the facilities on an at will basis?	Answered in previous hearing.  No facility we license allows visitors on an at-will basis, but all facilities, including county-operated programs, allow visitors at certain times not in conflict with other scheduled activities. If Licensing or Child Welfare gets complaints about a failure to accommodate visitors, we follow up. Complaints like this are rare, and none have been received by Licensing anytime recently.
26	What, if any, restrictions are placed on access to personal property? Are those restrictions for the entire population, or specific to each youth?	Answered in previous hearing, aerosol sprays and fingernail polish must be checked out as needed to ensure safety.
27	Are youth permitted to choose their own clothing and accessories? Are youth required to wear program issued clothing?	Yes, Answered in previous hearing. Yes, access to accessories is permitted so long as it does not pose a safety concern. Youth are allowed to wear their own clothing.
28	Are children subjected to strip searches, or modified strip searches? Are their bodies ever patted down or their clothes	Clothing searches are utilized, this was answered in previous hearing.

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	<p>searched? When does this happen? How is prior trauma related to physical or sexual abuse addressed with these practices?</p>	
<p>29</p>	<p>Do youth have access to their cell phones, to computers or other communications equipment?</p>	<p>Typically they do not, although some programs allow use of cell phones it has posed a significant safety risk in the past. Answered in previous hearing</p>
<p>30</p>	<p>Are youth required to participate in religious programming? Alternately, if children do have a faith tradition are they supported to attend religious services outside the facility on a regular basis?</p>	<p>We’ve never heard of a county program, or any licensed residential or shelter program for that matter, requiring youth to participate in religious programming. At Douglas last week there was mention of a church-sponsored youth group that youth from one of the sites participated in, but the youth group was characterized as non-religious. Licensing rules don’t specifically address religion, but our rules do contain this language:</p> <p><b>A child-caring agency must respect the race, spiritual beliefs, sexual orientation, gender identity and gender expression, disabilities, national origin, and cultural identities of a child in care, and provide opportunities to enhance the positive self-concept and understanding of the child in care.</b></p> <p><b>The child-caring agency must ensure that written materials are made available in other languages as necessary, or as indicated by the demographic environment or the population served by the program.</b></p> <p>Our rules also require programs to “apply the <i>reasonable and prudent parent standard</i> when determining whether to allow a <i>child in care</i> in substitute care to participate in extracurricular, enrichment, cultural, and social activities”, which essentially means programs must make reasonable accommodations for children. If a particular child is a high-run risk or presents a particular safety risk, or if the youth’s preferred church is a great distance away, the program isn’t required to ensure church attendance. We haven’t received any complaints about county programs or other programs failing to take a child to a preferred church or making a child go to church against the child’s will.</p>

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		<p>Specific Examples</p> <p>Douglas County provided this information regarding options in their program:          Spiritual/Church options are as diverse as our community. Youth may request to attend any religious denomination they request. Youth may attend alone, with other residents, with family or friends, etc. Youth for Christ comes into our facilities and do volunteer activities with youth who are interested. Journey Church members have volunteered a lot of time to our facilities/youth and invited them this past Easter to a dessert night. Youth who were interested in attending were accompanied by staff. Currently, I know that we have to boys in Fowler House who have been attending church regularly.</p> <p>Lincoln County reports they transport youth to any spiritual venues/churches they would like to attend within the county including spiritual Tribal activities.</p>
31	<p>How are children informed of their rights in the detention facility? For instance, are they expressly told in writing and at visits that they are not to be locked in their jail cells? Are they given a number where they can make confidential reports of violations of their rights?</p>	<p>As with all placements, youth placed in county settings must be informed of their rights at intake. This is a requirement of BRS and Licensing OAR. 410-170-0030(11) relates to required policy and procedure, F relates to youth rights:          Policies regarding the BRS client’s and family’s rights, including but not limited to the search and seizure of the BRS client’s person, property, and mail; visitation and communication; and discharges initiated by the BRS client.          All contracted programs are required to have and use grievance procedure and process as well as post the Foster Care Youth Bill of Rights.</p>
32	<p>Are educational options the same for all children in a facility, or are they individually determined (ie, online vs. public school)</p>	<p>Answered in previous hearing – some include on site school, some offer online or public school options.</p>
33	<p>Oregon foster youth are entitled to participate in extra curricular activities of their choosing. How is</p>	<p>Programs are required to engage youth in community activities on a weekly basis per BRS OAR.  <b>410-170-0100(1)(c)</b></p>



<p>this supported for kids in repurposed jails?</p>	<p>(c) Recreational, social, and cultural activities: (A) The BRS contractor shall or shall require that its BRS provider provide recreation time for the BRS client daily and offer activities that are varied in type to allow BRS clients to obtain new experiences. The BRS contractor shall or require that its BRS provider document recreation as having been provided by recording the type of activity the BRS client participated in and the date it occurred; (B) The BRS contractor shall or require that its BRS provider provide each BRS client at least one opportunity per week to participate in recreational activities in the community, unless the BRS client is clearly unable to participate in offsite activities due to safety issues. If a BRS client is restricted from participation in community recreation, the BRS contractor shall or require that its BRS provider document the reason in the BRS client’s case file, and the reason must be reviewed regularly to ensure that the BRS client is not unnecessarily restricted from offsite activities. The BRS contractor shall or shall require that its BRS provider offer any BRS client who is restricted from community activities alternative opportunities for recreation on-site; (C) The BRS contractor shall or shall require that its BRS provider provide access to or make available social and cultural activities for the BRS clients as part of the therapeutic milieu of the program. These activities are to promote the BRS client’s normal development and help broaden the BRS client’s understanding and appreciation of the community, arts, environment, and other cultural groups; (D) The BRS contractor may not and shall ensure that its BRS provider does not permit BRS clients to participate in recreational activities that present a higher level of risk to BRS clients without pre-approval by the caseworker. This applies to activities that require a moderate to high level of technical expertise to perform safely, present environmental hazards, or where special certification or training is recommended or required such as: whitewater rafting, rock climbing, ropes courses, activities on or in any body of water where a certified lifeguard is not present and on duty, mountain climbing, and using motorized yard equipment.</p>
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34	What type of access to food do children have? Are they able to serve themselves healthy snacks and water at any time of day or night?	Answered in previous hearing, youth report having access to all meals and snacks between.
35	What kinds of bathrooms do they use? Do they have toilets in their cells or do they have more typical bathrooms?	Youth have access to bathrooms, Multnomah and Klamath Counties have toilets in the bedrooms, the others do not.
36	Are youth permitted to choose timing and frequency and length of showers/baths? What about personal care products like shampoo, shaving cream, razors, etc?	Answered in previous hearing
37	When CW youth are placed in the same facilities as OYA or juvenile detention youth, are the program staff coming from DHS child welfare programs or from correctional programs? Do CW youth have the same restrictions on freedoms as the OYA/detention youth in the same facility?	Answered in previous hearing Youth placed in BRS programs are intended to have the same freedoms as all programs must meet BRS requirements.
38	Youth Improvement Program in Klamath Falls	Discussed in previous hearing.
39	Please outline the findings of the team that went to look at the YIP.	<p>Answered in previous hearing and Legislature was provided with the YIP corrective action letter.</p> <div data-bbox="737 1235 806 1308" data-label="Image"> </div> <p>Joint letter with DHS-OYA-CCLP.pdf</p>

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40	How many children were served at the YIP? When did that start? What was the daily rate there?	Daily rate is set at \$248 More information forthcoming on this question.
41	Were children expected to use the toilet facilities in their cells?	They could use toilets in their room or in the main bathroom.
42	Was the YIP staffed by child welfare trained staff or detention staff?	<p>Programs are required to train their own staff to meet BRS and licensing requirements. 410-170-0030(4)(d)</p> <p>(d) Direct care staff, social service staff, and the program coordinator who directly work with BRS clients shall:</p> <p>(A) Receive a minimum of 28 hours of initial training prior to or within 30 days of employment or certification on the following topics: BRS services documentation, mandatory reporting of child abuse, program policies and expectations, gender- and cultural-specific services, behavior and crisis management, medication administration, discipline and restraint policies, and suicide prevention. Any direct care staff, social service staff, or program coordinator who has not yet completed this initial training prior to employment or certification shall be supervised by an individual who has completed this training when having direct contact with BRS clients; and</p> <p>(B) Receive a minimum of 16 hours of training annually on skills-training that supports evidence-based or promising practices and other subjects relevant to the responsibilities of providing services and placement-related activities to the BRS client; and</p> <p>(C) Have and maintain cardiopulmonary resuscitation (CPR) and first aid certification.</p>
43	Were OYA kids and CW kids in the same location?	Yes
44	How many reported incidents of seclusion or restraint were reported at the facility?	There have been no reported instances of restraint or seclusion at the YIP program.
45	OYA reported that the YIP is a parole revocation program. Why	YIP is a BRS program and intended to serve youth who are cross system involved with juvenile probation.

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	was it appropriate to place child welfare youth in a parole revocation program?	
46	Please provide copies of any documents or letters sent to YIP informing them of the removal of children and the violations and concerns found at the facility. Please also provide copies of letters of notification about the violations and concerns found at the facility to the attorneys, CASAs, caseworkers and parents of the children placed there	A copy of the letter was previously submitted and testimony was provided by Marilyn which reviewed the violations on the record.
47	Have any more children been placed in the YIP since kids were removed last month?	None
48	Has DHS committed to not using YIP as a resource at any time in the future? Is DHS still supporting the proposal to expand the number of beds in the YIP?	YIP continues to work on their action plan to address the concerns identified. If they remedy all concerns and demonstrate trauma-informed practice then Child Welfare will consider placing youth who are involved with juvenile probation in the future.