

Assessment of the Colorado Division of Youth Corrections Lookout Mountain Youth Services Center

Submitted by
The Missouri Youth Services Institute
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Introduction and Background

At the request of the Colorado Division of Youth Corrections, the Missouri Youth Services Institute (MYSI), a not-for-profit organization, initiated an initial brief assessment of the Lookout Mountain Youth Services Center (LMYSC) in Golden, Colorado. During the period of April 3 and 4, 2017, MYSI staff conducted an on-site review of the center and its programs. MYSI team members participating in this assessment were Mark D. Steward, Director; Louis Moten, Senior Consultant; and Alice Steward, Chief Operating Officer. The primary focus of the assessment was to review the current operations and practices of the LMYSC and to identify strengths and weaknesses as it applies to the possible implementation of MYSI Approach components.

The Missouri Philosophy

It should be noted that many of our observations, findings and recommendations are influenced by our many years of experience in Missouri's Youth Services system. The Missouri system was developed into a therapeutic group treatment model more than 40 years ago. It has advanced and improved over the years to become a model for juvenile justice systems across the country. A hallmark of the Missouri program is the state's low rates of violence and recidivism. The Missouri philosophy centers on group interaction and personal responsibility and development rather than on punishment, behavioral compliance and isolation that are prevalent in many juvenile justice systems. It also focuses on giving troubled youth what they have lacked in the past: structure, support, understanding and empathy in a humane and nurturing environment. This approach has led to much lower levels of violence. In Missouri's system, youth are 4 ½ times less likely to be assaulted, staff members are 13 times less likely to be assaulted and isolation is used 200 times less than in other systems¹. Also, the Missouri system recidivism rate is less than 10 percent and more than 90 percent of the youth served do not re-enter the juvenile justice system or enter adult prison. Missouri's youth also have realized above national average for educational gains during their time spent in the juvenile system —almost double the national average in most areas.

Such significant gains can be replicated outside of Missouri through implementation of the Missouri philosophy. This was proven by a three-year study performed by the National Council of Crime and Delinquency for the Santa Clara County Juvenile Probation Department, a system that adopted the Missouri Approach approximately seven years ago.

¹ Source: research by Dick Mendal 2009 comparing Missouri Division of Youth Services with youth correctional programs participating in the Performance Based Standards Process.

Lookout Mountain Youth Services Center

LMYSC has the capacity of 148 committed youth ranging in age from 14 to 21. The residents occupy four housing units. Three of these units have three separate pods for youth, one of them is divided into two separate pods for youth which houses the 24 youth with acute mental health issues. The overall campus of 17 acres is spacious, clean, and well-maintained, and each unit has sufficient space for the residents. The units themselves, however, are rather correctional, sterile and uninviting. The walls are drab and individual rooms have adequate space but are correctional in appearance and not youth friendly. The youth who have attained the highest level, the Eagles, had slightly better accommodations in their rooms with such things as televisions and no roommate. Another issue that the MYSI team noted was the high noise level because of poor acoustics throughout the units and the multiple levels for the rooms in the unit.

Organizational Structure and Personnel

LMYSC is staffed by Facility Director Jason Lillich, who is a licensed clinician and is involved in the programs and is a positive influence. There also are two assistant superintendents, a clinical director, four unit managers, ten youth services counselors/supervisors, 21 behavioral health specialists, two transition specialists and a contingent of medical staff, direct care staff, and educational staff. We were told the staffing to youth ratio is approximately 1:10. The MYSI team noted that the line staff assigned to the units appeared to view their roles as partially custodial or correctional, rather than being fully engaged with the youth. However, many of them interacted with the youth in a positive manner. The organizational structure of LMYSC is structured so that each unit is able to function independently in order to meet the specific and individual needs of the youth housed in the unit. The Unit Managers are responsible for one unit and have some type of supervisory capacity over the service providers and staff of that unit. This could be reviewed to optimize a total comprehensive team approach including reviewing who conducts the group meetings and how everything is connected. There were also several staff in the middle area of the units that were engaged in other activities, while two line staff were in the community meetings in each housing pod, we weren't sure who the staff were, or if they were rovers or supervisors. However, these were the staff that were coming in and out of the community meetings, which was disruptive to the process.

Youth Profile

All of the youth at LMYSC are committed males. The average length of stay of the youth there is 14.5 months and the average of age is 17.8 years old. Some of the youth have sentences from three to five years but they can advance through phases up to the Eagle level, where they have their own recreation area in a vacant dorm. We had two Eagle level youth assist with our tour. These youth, who admitted they had serious offences, were knowledgeable about the programs and were exceptionally friendly, respectful and forthcoming about their own strengths and weaknesses as well as the strengths and weaknesses of the facility. There are only five Eagles out of the 148 youth at LMYSC, but there

are another dozen or so who were in Phase 2 and 3 and applying to be accepted into the Eagles program.

Treatment Programs

The system appears to utilize a variety of modalities to address treatment needs of individual youth. Aggression Replacement Therapy, Substance Abuse Counseling, Pathways and Sanctuary seem to be the most common. However, in the LMYSO booklet it shows an entire page of various therapeutic group services curriculums, which some staff said was too many, too confusing and not connected. Students' expression of treatment was not negative, but there is a level of ambivalence regarding treatment other than it was required as a part of their respective plans. Students seem to focus more on completing and finishing the treatment rather than on the content and internal work that may or may not be achieved.

Youth who seem to have made internalized change have a mindset that they came to a point where they realized that this was the end of the line. When they felt they had nothing left to prove or that providing evidence of their moxie was fruitless, they would forego negative behaviors and begin to 'program'.

There is a clear distinction between the behaviors and attitudes of new students versus those who have bought in and are nearing their next phase at the facility. There is indication that the system embraces family engagement in optimal ways and includes families in the process of services. The system also indicated that it practices making attempts to adjust meetings and family contact based on the needs of the family.

Family phone calls are allowed on a schedule as well as when needed based on treatment and strategies. Youth also are allowed to make collect calls or grievance calls during down time using a phone in the common area of each pod.

Official treatment conducted by licensed clinician takes place in the middle of the school day between 11:10 and 12:30. Leadership recognizes this is a non-strategic practice and has plans in place to change this in the near future to later in the day after school.

The treatment process does not align with MYSI's approach. DYC's idea of treatment is limited to a designated time of day, by designated personnel, based on a framework established at the beginning of a youth's tenure with the agency. This leaves little room for addendums or adjustments to be made based on revelations that commonly occur at junctures in the placement when more trust is established. This tends to happen more with frontline staff and on their respective pods rather than in treatment groups and individual sessions. Furthermore, the handoff from clinician to line staff provides minimal information concerning the baseline or effect on the youth based on the session. This also seems to be the issue with case managers as well.

The MYSI approach views all interactions, engagement from staff, the structure and consistent follow-through from all adults involved with the youth as important. Each should operate from the same standards and same playbook as treatment. In a nutshell, everything that is done or established in the MYSI approach is considered "treatment". Youth and families should be placed at the center of all decisions, schedules and strategies that are established.

MYSI's approach stems from a "group process" or a "therapeutic milieu" where the group is a key factor in the success of the group and individuals in the group. The main elements of success of this approach are designated staff teams that are with the group all day and the group remaining together 24/7 (even in their school classes). A level of safety is created with this dynamic that allows individuals in the group to relax their guards and operate within a center of trust all day long.

Community Meetings

Our three MYSI team members all attended different group/community meetings in the Spruce Unit. There was interaction between staff and students in these meetings but most of the time it dealt with the behaviors of the youth that day and how they felt and who could help them. The meetings do not get into core issues or deeper discussions of why the youth exhibited certain negative behaviors. There also were frequent disruptions during the meetings with other staff coming in and out to speak with individual youth or taking them out of the group. In the MYSI Approach the group meeting time is a very special time and should not be disturbed except for emergencies only.

In all three community meetings, a staff member came in with a list of victims' rights issues to be discussed with the group. One of the topics brought up was rape. All the groups immediately shut down and did not respond for several minutes. Then, some youth did discuss the topic. While these issues could certainly be discussed, there should be preparation made by the staff on how to bring them up and how to discuss them. Some of the youth could possibly be "triggered" by some of these sensitive topics and plans should be in place as to what should be done. In addition, most of the staff leading these meeting told us that they had not been trained in group-building skills and didn't have a college degree or education that would prepare them for this. All the staff we observed however, tried to do the best they could to facilitate these meetings.

The community meetings are held later in the afternoon around 4:45 or 5 p.m. and as mentioned, the major portions of the meetings dealt with the "check-in" or how they were feeling, etc., as well as reviewing their daily behavioral log signed by staff they had been interacting with during the day. This log said whether they had any problems during their daily schedule, how they reacted to the problem. The youth then told how they could avoid the problem in the future and who they could count on for support. Again, these meetings basically just brought up issues, but did not go into deeper discussions with the group about how to handle these issues better or even why they occurred.

Staff/Student Interaction

During the course of our visit, we noted a cordial and friendly relationship between staff and students at LMYSC. Most of the students welcomed us as we toured the facility. They were appropriate in their interactions and were candid and objective when asked questions about their understanding of the program and what was most helpful to them and what they would like to see improved.

Based on our observations, the youth at LMYSC are fully aware of behavioral expectations and consequences for them and are informed of these during the intake process. None of the youth we visited with expressed any concerns for their safety to us. They did

indicate that there was some gang activity and that could cause some issues. During activities and throughout the course of the day and evening, frontline staff are visible and in close proximity to the youth most of the time. However, all staff do not function with an optimal awareness of youth dynamics, and we observed many instances of youth moving in and out of “blind spots” and moving to and from buildings with staff observing them from a distance. Leadership personnel exhibited an understanding of the significance of “engaging supervision” and used it when interacting with the youth, many of the leadership going on a first name basis, as we do also in the Missouri Approach.

Education/Vocational Education

We were impressed with the quality of the vocational programs at LMYSO. We observed several of their programs including the Culinary Arts, Cosmetology/Barbering, Horticulture, Landscaping, Construction Trades and Graphic Design. The students in these programs were enthusiastic about their studies and many were looking forward to continuing their training or working in their fields upon release.

It appeared that the youth in these classes bonded with each other and worked together as a group, similar to the group process recommend in the MYSI Approach across the entire campus.

We did not get to go into the education classes when we toured the school because the rooms were occupied by the therapists working with youth with specific treatment needs as previously described. We did hear that the education provided to the students with the needed classes does achieve good results. We did not review any of the data.

We learned from staff and students that many of the reported fights and problems happened during the school time, when the youth were on their way to school or going between classes. Again, the MYSI Approach of keeping youth together in the dorms, in class and in other areas enhances safety and results in reduced critical incidents. In several juvenile systems where they have kept the youth together all day long, including education, there has been a significant reduction in the fights and assaults that occur in the mixing of students from different dorms or units.

Safety Issues, Use of Isolation and the Wrap

The overall atmosphere of LMYSO appeared to be a safe environment for youth and staff. As visitors going into areas unescorted, we felt totally safe the entire time. Even when two rival gang members approached each other, they were properly and quickly addressed by the Evening Supervisor with no escalation of the potential problem.

The system has protocols and procedures in place that are deemed functional within DYC’s standards and understanding. However, the practices and protocols that are in place have built-in limitations to the level of interventions that can be made in the event of youth physically acting out. The system has protocols and procedures in place that allows staff to respond appropriately to infractions and mishaps, but the structure does not afford personnel the opportunity to adequately assess issues as they occur in order to prevent and minimize the possibility of preventing issues from escalating into a physical crisis.

Despite the safe atmosphere, there still remains serious issues with staff responding to fights and assaults by the use of mechanical restraints, various methods of physically restraining

youth, the use of isolation and the use of the wrap. To keep the facility safe, the staff at LMYSO feel that the techniques and methods they are using are the only ones available for them to use. Staff do not exhibit an understanding of group development tenets or an understanding of how to assess group dynamics to prevent as many of these occurrences as possible.

We were told that on average 15-16 fights or assaults occur monthly. There are three categories of these fights and assaults: level 3, with no injury; level 2, which requires first aid; and level 1, which results in major injuries. About 2/3 of the youth involved in these fights and assaults are placed in isolation. We also were told that the average length of stay in isolation was 48 minutes. Last month the average was 37 minutes with no youth staying longer than two hours. Any stay longer than eight hours requires a court order.

With regard to the use of the wrap, we were informed that it was used six times this past month and one time the prior month. The average use is two or three times per month. There are apparently only a handful of states that utilize this practice and its use should be eliminated as soon as possible. If MYSO does assist Colorado, this practice would be given immediate attention to help staff learn new techniques and practices to eliminate its use.

As mentioned, the staff stated they feel isolation and the wrap are the only options available to them. However, if given alternative ways to dealing with youth with violent behavior, it appeared that many staff would be interested in learning other options.

The use of isolation, while limited by the DYC in the amount of time a youth can remain in it, should continue to be evaluated and other options looked for to significantly reduce or eliminate this practice.

Again, the practices and treatment approaches that should be considered are to prevent the need for utilizing either isolation or the wrap. Missouri does not use isolation, the wrap, or chemical agents and the practices used by the MYSO Approach prevents the need to use them.

This approach also is supported by a 2015 Council of Juvenile Correctional Administrators publication entitled, *Toolkit: Reducing the Use of Isolation*:

“although room confinement remains a staple in most juvenile facilities, it is a sanction that can have deadly consequences.... More than 50 percent of all youths’ suicides in juvenile facilities occurred while young people were isolated alone in their rooms and that more than 60 percent of young people who committed suicide in custody has a history of being held in isolation.”

Lindsay M. Hays, Juvenile Suicide in Confinement: A National Study. 2004

General Summary of MYSO Observations and Recommendations

MYSO appreciates the opportunity to provide this assessment of the LMYSO. We would like to thank all the staff for their cooperation, openness and honesty during this process, which helped to make it a productive one. We understand how difficult it can be to accept a critique of a program in which much time and effort has been invested, and we commend the entire staff for their willingness to engage in this process. From our experience in Missouri, we appreciate the effort required to change something that has become familiar and comfortable. However, we also know from experience how rewarding it can be to implement changes that have been proven elsewhere to be successful and to watch these bear fruit.

We observed a number of positive aspects at LMYSC. These include the optimistic and affirmative attitudes of many of the staff members; the friendly relationship between many of the staff and the youth; and the spacious and clean condition of the facilities.

That being said, there are still many things that can be accomplished at LMYSC to move it toward a higher level of effectiveness. The following are some of our initial recommendations and observations:

- Right size LMYSC, reduce the staff to student ratio to 1-5 or 1-6 with group sizes optimally 10 and no more than 12.
- Restructure the organization to achieve a true “unit management” system, including redefined lines of supervisory authority and review all positions to explore an increased number of staff on a team with each youth group.
- Move to reduce and eventually eliminate solitary confinement.
- Move to eliminate the use of the wrap.
- Explore using restraint methods that do not inflict pain, nor use chemical agents or pepper spray.
- Review the use of placing youth in orange tee shirts when they have disciplinary issues, youth feel shamed by this and "shame" is not conducive to positive youth development practices.
- Institute follow-up training for the staff conducting the community meetings.
- Analyze the large number of Therapeutic Group Services Curriculums currently in use for their effectiveness and cohesiveness.
- Maintain and use individualized treatment plans for the students during improved group meetings dealing with more substantive issues.

Next Steps for Implementation of the New Colorado Model

The MYSI team stands ready to assist Colorado’s Division of Youth Corrections with the implementation of the changes needed at LMYSC to affect an environment at the facility that continues to provide for the safety of all who work and live there while revitalizing and strengthening the overall system. The challenge for LMYSC is to create a culture where the needs of the youth can be met in a manner that is beneficial and therapeutic while still maintaining the safety and security of the system. This can be done through the MYSI training and coaching that focuses on coordinated group interaction and the personal and individual development of youth. The ultimate goal should be to give youth what they need: structure, support, understanding, and the tools necessary to meet their individual needs. This must start with the staff, not just the clinicians — but all staff. All personnel at LMYSC should have a role in the process of turning around the lives of the youth entrusted to their care. From our observations and conversations with staff, this is something that is important to many of the staff who wanted to be more involved in the treatment process.

LMYSC has a foundation to provide the basis for implementing an effective therapeutic group treatment approach based on the components and practices in the Missouri Approach. This should result in improving the safety of the staff and youth and help reduce recidivism rates by having youth deal with their core issues that have been a contributing factor to their delinquency. As we discussed during our assessment exit briefing, we believe that to make

these improvements and changes to LMYSO the entire campus at LMYSO needs to be trained to implement this approach. We would recommend that if the Colorado DYC decides to build upon their foundation to implement this approach, the first step would be to evaluate the effectiveness of the existing treatment programs and practices.

After the development of an implementation plan, MYSO could begin with a pilot in an existing unit and then move across the campus implementing the new Colorado Model with some of the practices and components of the MYSO Approach.

- A MYSO consultant would perform a system assessment of LMYSO programming to understand where they are currently in relationship to moving from a correctional approach to a therapeutic group treatment and rehabilitative approach.
- A MYSO consultant would provide an overview training to the administrative staff in order for them to accomplish their system's reform efforts toward the Missouri/MYSO Approach.
- A MYSO consultant then coaches the staff in implementing the skill sets learned in the training process
- A MYSO consultant would blend these services with specific customization for Colorado's needs. No two MYSO projects are identical, but all have most of the basic components of the MYSO Approach.

MYSO consultants work side by side with facility staff to train, coach and model the MYSO approach. They work with facility administrators and mid-management to help establish oversight of the therapeutic group treatment process. MYSO staff don't just come in and give a training course and leave. They are on the ground daily, weekly and monthly to help implement the MYSO Approach day and night.

The MYSO commitment goes deeper by integrating a unique coaching component into the change process. Coaching services incorporate hands-on assistance, on-site observation and modeling to frontline staff, as well as ongoing consultation, feedback and recommendations to various levels of management. The MYSO team members will help Colorado staff work through issues one day at a time to help ensure success.

For additional training and support, MYSO has Basic Training Modules and other trainings toolkits available to use for the specific needs of LMYSO. MYSO also has an Advanced Facilitator Certification Packet for advanced skill development.

Project Costs and Timeframes

The initial portion of the project is a comprehensive review and assessment of the various Therapeutic Group Services Curriculum. The next step is to review the current Unit Management system and determine how it can be improved to better serve the Group Treatment process. During this initial period, beginning improvements can start with a pilot unit making it more youth friendly. The vacant open dorms are more amenable for the initial pilot unit, but we heard estimates of up to a million dollars for a sprinkling system, accessibility, etc. Therefore, if this is not an option, we would look at the four units presently in use to determine which one is the best option. The cost to improve the units —paint, furniture, rugs or carpet

and other cosmetic enhancements —should not be extremely expensive and we estimate a cost of \$100,000 per unit.

During the initial phase of this project, MYSI would use one consultant to assist in setting up the pilot unit. We estimate this would take five days per month for consultation in rearranging the dorms, getting furniture and accessories, assisting with the staff selections for the pilot and other pilot implementation details. The timeline for this task will range from three to six months. Therefore, the preparation stage with one MYSI staff consultant for five days per month for up to six months (30 days at \$1,500 per day) will cost \$45,000.

Following this, the initial 10-day training will begin with each of the staffing teams selected for the 20 or 30 bed pilot unit. Following the completion of the training, new youth can be phased into the pilot unit pod at a rate of approximately two or three per week. When this group is up and running, the MYSI coach will come on board to assist with coaching while the next staffing team is being trained and the same cycle would continue across the campus until all units are trained, coached and stabilized.

The first portion of the actual implementation with one MYSI staff will be for 15 days per month at a cost of \$22,500 per month for the first two months or a total of \$45,000. The next four months will include an additional coach at the same cost for a total of \$45,000 per month.

Using these cost guidelines, the first-year costs would be:

- The first six months' preparation cost - \$45,000
- The first two months of training and coaching - \$45,000, (one MYSI consultant at 15 days per month)
- The cost for the next four months of training and coaching with two MYSI consultants at 15 days per consultant per month is \$180,000

Months 1-6	\$45,000
Months 7 & 8	\$45,000
<u>Months 9-12</u>	<u>\$180,000</u>
First year cost	\$270,000

The second year's cost would be for these two-full time MYSI consultants at 15 days per month to continue the implementation of additional units across the campus which is \$540,000.

Second year Cost is \$540,000

It has been our pleasure to meet with the staff and youth of LMYSC and to provide this assessment. In our opinion LMYSC has the potential to incorporate the aforementioned changes to their program, which would better meet the individual needs of the youth there.