

Compliance with Safety and Welfare Requirements: OH Close Site Visit Report
January 28, 2010
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The Safety and Welfare Plan assigns monitoring of some requirements to the office of the special master (OSM). Donna Brorby and Zack Schwartz visited OH Close on November 5-6, 2009 to audit compliance with these requirements. This report is based on staff and youth interviews¹ and multiple “proofs of practice” provided by DJJ. Facility staff were extremely gracious and helpful during our visit, and provided comprehensive information.

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

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

Rating: Partial compliance

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

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

Rating: Substantial compliance.

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

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

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

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

³ *Id.* El Dorado was briefed in October. Other units were briefed in March.

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

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

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

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

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

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

Rating: Partial compliance

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

⁸ Statements of AGPA during site visit, November 5-6, 2009.

⁹ *Id.*

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

2.4.2: The facility has a positive incentives and volunteer coordinator.¹¹

Rating: Substantial compliance

2.4.3: Johanna Boss High School has a vocational specialist as of October 2009.¹² A memorandum states she will meet with vocational education teachers each month.¹³ We did not see the organizational chart for the high school, so we did not check anything about vocational education at O.H. Close; we rely on the education experts to report any issues that go to education staffing and vocational education.

Rating: Substantial compliance

2.4.4: The facility has a victim services/restitution specialist.¹⁴

Rating: Substantial compliance

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

Rating: Substantial compliance

2.4.7: The facility has a work assignment coordinator.¹⁷

Rating: Substantial compliance

2.4.8: The facility has an administrator for operations and business services.¹⁸

Rating: Substantial compliance

6.3 & 6.4a: The assistant superintendent is the facility administrator of programs.¹⁹

Rating: Substantial compliance

¹¹ Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

¹² Memorandum by education management staff, October 22, 2009.

¹³ *Id.*

¹⁴ Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

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

¹⁶ See "Reform Related Training Statistics," October 29, 2009.

¹⁷ Memorandum of assistant superintendent to head of *Farrell* compliance, October 30, 2009.

¹⁸ *Id.*

¹⁹ *Id.*

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

Rating: Substantial compliance

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

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

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

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

²⁰ Memorandum of assistant superintendent to all OH Close staff, October 2, 2009.

²¹ *Id.*

²² Memorandum of assistant superintendent to CRT member, October 27, 2009.

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

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

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

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

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

Rating: Defer to expert

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

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

Rating: Not applicable

3.4c: Data compiled by central office show that half the staff at OH Close have completed Safe Crisis Management training, as of October 29, 2009.²⁶ No education staff have completed the training. Excluding education staff, 66% of staff have completed the training.

Rating: Partial compliance

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

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

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

reports on selected PbS data elements.

3.5 and 3.6a: An AGPA (“analyst”) is responsible for collecting data on violence and use of force for the Quarterly Statistical Report²⁷ (QSR) and for PbS.²⁸ In the past year, she indicated, DJJ has adopted a new data entry system for the QSRs. Rather than entering data into an Excel spreadsheet, and sending it to central office, she now enters it directly into the CDCR intranet. There have been no changes to PbS.

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

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

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

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

Rating: Partial compliance.

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

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

Rating: Defer to expert

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

²⁷ Formerly known as CompStat.

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

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

remedial plan provisions.

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

Rating provided at the central office level only.

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

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

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

Rating: Non-compliance

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

Rating: Substantial compliance (both items)

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

Rating: Partial compliance

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

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

Rating: Not rated at this time

6.7f: This training has not yet begun.

Rating: Non-compliance

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

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

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

In addition, OH Close currently retains:

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

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

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

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

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

³⁴ "Reform Related Training Statistics," October 29, 2009.

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

Rating: Beginning compliance

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

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

Rating: Defer to expert

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

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

Rating: Beginning compliance

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

See 8.1.1 above.

Rating: Beginning compliance

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

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

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

Rating: Not rated

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

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

Rating provided at the central office level only

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

Rating: Partial compliance.

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

Rating: Substantial compliance

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

³⁶ Statements of Tammy McGuire during site visit.

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

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

Rating: Substantial compliance

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

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

Rating: Substantial compliance

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

Rating: Substantial compliance

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

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

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

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

³⁸ This paragraph is based on statements of the grievance coordinator during the site visit.

³⁹ This paragraph is based on statements of Tammy McGuire during the site visit.

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

Rating provided at the central office level only.

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

In November 2009, DJJ provided a list of all youth who did not earn the maximum possible program credits in case conferences held between September 14 and October 28, 2009.⁴⁰ The list includes five youth from O.H. Close. The explanations do not indicate that youth were denied credits for non-participation in programs for which they were not responsible.

Rating: Substantial compliance

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

See fact gathering memo for 8.4.7b.

Rating provided at the central office level only.

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

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

Rating provided at the central office level only.

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

Rating provided at the central office level only.

8.7.5: The facility has a functioning electronic law library.⁴³

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

⁴¹ Intraoffice Requisition form NCYC09-0032059, May 12, 2009.

⁴² Statements of program administrator during site visit, November 5-6, 2009.

Rating: Substantial compliance

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

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

Rating provided at the central office level only

⁴³ Statements of law librarian during site visit, November 5-6, 2009.