

Compliance with Mental Health Requirements: Ventura Site Visit Report
January 28, 2010
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The Mental Health Remedial Plan assigns monitoring of some requirements to the office of the special master (OSM). Donna Brorby and Aubra Fletcher visited Ventura on November 16-17, 2009 to audit compliance with these requirements. This report is based on ten youth interviews, staff interviews, and multiple “proofs of practice” provided by DJJ.¹ The parties had the opportunity to provide comments on a draft of this report, and this final version reflects consideration of comments received.

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

The acting assistant superintendent continues to work as the mental health administrator.² The MH administrator position remains her secondary assignment because the facility cannot fill it until it is actually vacant. Because she is still “acting” assistant superintendent, her mental health administrator position is not technically vacant. She remains in “acting” status because acting superintendent David Finley still technically occupies the assistant superintendent position. Sacramento has only recently begun vetting Mr. Finley for the permanent superintendent position.

Rating: Substantial compliance

5.11: Outpatient MH staffing consistent with MH Remedial Plan. *Partially superseded by July 31, 2009 Order re: Modification of Remedial Plan in Accord with Division of Juvenile Justice Staffing Model and Business Rules.*

The remedial plan staffing requirements have changed since OSM’s May 2009 informal report for Ventura.³

The Court’s July 2009 order requires one senior psychologist,⁴ and the facility employs two senior psychologists. One oversees the residential mental health units, and the other oversees intake and core units.⁵

¹ We interviewed select non-clinical staff, the facility’s chief psychologist, its two senior psychologists, and two staff psychologists. We selected ten youth from the 97 names on a November 16, 2009 mental health caseload list, by selecting every tenth name on the list. We asked to interview all ten selected youth, but some youth declined to participate. We randomly selected additional youth and interviewed a total of ten youth. The six interviewed young women represented all four female living units, and the four interviewed young men represented three of Ventura’s male living units.

² Statements of assistant superintendent during site visit, November 16, 2009. The remainder of this paragraph is based on this source.

³ See Order, July 31, 2009.

⁴ See *id.*, Exhibit A.

⁵ Statements of chief psychologist during site visit, November 16, 2009.

The new staffing requirements mandate a single psychiatrist for the entire facility.⁶ The facility currently employs two psychiatrists, one of whom was expected to retire at the end of 2009.⁷ The facility's chief psychologist believes the reduction to one psychiatrist to be ill-advised.⁸ Currently, psychiatrists conduct individual therapy and participate in weekly inter-disciplinary team meetings for the youth on residential MH units. The reduction to one psychiatrist will limit the psychiatrist's role to medication management only, and the sole psychiatrist may not have sufficient time to attend to all youth adequately. Also, the psychiatrist must remain on call at all times, which will be costly.

Other staffing requirements follow:⁹

Living unit	Required psychologist coverage	Required psych tech coverage
Alborado (female ITP)	1	1
Alta Vista (male low-risk core)	0.5	0
Buenaventura (female SCP)	1	1
CDC (male SCP)	1	1
CLC (male high-risk core)	0.5	0
Montecito (male low-risk core)	0.5	0
Mira Loma (female substance abuse treatment)	0.5	0
Mira Mar (female core)	0.5	0

Ventura is compliant with these staffing requirements. Ventura also has 4.5 psychology interns. The facility will lose this reportedly valuable and economical resource with DJJ's implementation of its new staffing model in about February 2010.

An unchanged remedial plan provision requires Ventura to have one mental health office technician per four clinicians.¹⁰ Ventura employs only one office technician for its mental health department.¹¹ Under the new business rules, it will have nine clinicians.

Rating: Partial compliance

5.14a: Reduce ITPs and SCPs to no more than 30; **5.15a:** Reduce ITPs and SCPs to no more than 24.

5.14a: The ITP and SCP populations remain below 30.¹²

⁶ See Order, July 31, 2009, Exhibit A.

⁷ Statements of chief psychologist during site visit, November 17, 2009.

⁸ See statements of chief psychologist during site visit, November 16, 2009. The remainder of this paragraph is based on this source.

⁹ See Order, July 31, 2009, Exhibit A.

¹⁰ See Mental Health Remedial Plan, p. 23, Standards and Criteria, item 5.11.

¹¹ Statements of senior psychologist during site visit, November 16, 2009.

¹² See Ventura Youth Correctional Facility, Daily Population Report, November 8, 2009 (female ITP at 16 youth; female SCP at 16 youth; male SCP at 23 youth); Administrative Summary for: VYCF, November 15, 2009 (female ITP at 18 youth; female SCP at 17 youth; male SCP at 23 youth).

Rating: Substantial compliance

5.15a: The ITP and SCP populations remain below 24.¹³

Rating: Substantial compliance

5.16b: Reduce size of MH units to level determined in conjunction with Consent Decree MH and S&W experts. Units reduced to specified population levels.

The experts have not specified a population level against which we can monitor. The safety and welfare expert states that he defers to the mental health experts.¹⁴ The mental health experts inform us that they will evaluate the issue in 2010, after the IBTM is described and DBT is introduced.

Rating: Not rated

6.3: If feasible, implement evidence-based model for family engagement. Appropriate family engagement model implemented (if feasible); **6.5:** If feasible, implement parent partner program. Appropriate parent partner program implemented (if feasible); **6.8:** If feasible, develop plan to continue Family Integrated Transitions and Family Justice Model.

Family Justice Model and DJJ's family engagement charter process

Central office is drafting a project charter that addresses family engagement.¹⁵ Also, interdisciplinary work groups at all facilities are continuing DJJ's prior work with Family Justice to improve family involvement.¹⁶ The facilities have held youth and staff focus groups to develop youth and family surveys. DJJ has provided written materials describing Family Justice-related activities and plans, as well as a copy of the Family Engagement Initiative project charter. OSM has forwarded this information to the mental health experts.

Heading Ventura's family involvement efforts is a social worker who previously worked for Child Protective Services and who has a keen appreciation for the value of what she terms "family reunification."¹⁷ She has proposed various initiatives to facility administration and to the central office family engagement charter group. Her proposals include the "Ventura Family Phone Tree" and the "Youth Passport."

¹³ See Ventura Youth Correctional Facility, Daily Population Report, November 8, 2009; Administrative Summary for: VYCF, November 15, 2009.

¹⁴ Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 6. The following sentence is also based on this source.

¹⁵ Statements of senior supervising psychiatrist during site visit, October 26, 2009.

¹⁶ Eleventh Report of the Special Master (November 2009), Appendix H (Schwartz and Fletcher Report), p. 8. The following sentence is also based on this source.

¹⁷ This and the following three paragraphs are based on statements of case work specialist during site visit, November 17, 2009.

The Family Phone Tree is an automated phone tree system with the capacity to send recorded messages to up to 99 subgroups (e.g., female youth families, male youth families, Spanish-speaking groups). The idea is to provide families with notice of events and other information. Facility administration has approved this measure.

The Youth Passport is a folder for the youth containing documents s/he needs on return to the community, such as a driver's license, a resume, certificates of achievement, etc. The youth will have access to it when s/he needs it, such as for parole hearings and when s/he leaves. Facility management has also approved this initiative.

Ventura also hopes to begin a foster grandparent program, according to the assistant superintendent. The young women's Kiwanis chapter will host a senior citizen lunch in December and hopes to find foster grandparent volunteers at that event.¹⁸

Family Council events, community involvement, and family visiting

Ventura's Family Council continues to be very active.¹⁹ Ventura and its Family Council organized a family reunification event in April 2009 in which 250 family members toured the facility and met with staff from various disciplines.²⁰ Community members helped some families with transportation and lodging. Following the main event, some A-Level youth enjoyed a movie with their families.

The Family Council hosted a youth-family movie night in late July and another reunification event in mid-August.²¹ A Thanksgiving meal for youth and families was scheduled for the Saturday following our November visit, and the facility is also planning a winter holiday event.²² Only youth with visitors may attend family visiting events.²³ The facility's chaplains hold quarterly events for youth who have not received family visits within a certain period of time.²⁴

Community members continue to help families visit their youth by providing gas cards and lodging.²⁵ The community also provides some of the books for Ventura's "storybook program," in which youth with children record themselves reading a children's book, and send the recording and book to the child.²⁶

Family visiting events are also discussed at item S&W 8.3.3, below.

¹⁸ Statements of assistant superintendent during site visit, November 16, 2009.

¹⁹ See statements of assistant superintendent during site visit, November 17, 2009.

²⁰ DJJ Today, vol. 1, issue 1, June 2009, p. 3. The remainder of this paragraph is based on this source.

²¹ DJJ Today, vol. 1, issue 3, July 2009, p. 6.

²² Statements of various staff during site visit, November 16-17, 2009.

²³ Statements of superintendent and various interviewed youth during site visit, November 16-17, 2009.

²⁴ Statements of assistant superintendent during site visit, November 17, 2009.

²⁵ *Id.*; see also OSM, Informal Report on OSM Site Visit to Ventura, February 2009, pp. 49-50.

²⁶ Statements of assistant superintendent during site visit, November 17, 2009.

Staff-family contact

A case work specialist commonly contacts families when drafting the youth's intake "clinical summary" to give the family contact and other information, and to answer their questions.²⁷ A supervising case work specialist stated that most staff-family contact initiated by case work specialists, case managers, and parole agents occurs during visiting days and when facilitating youths' regular calls home.

Clinicians do not contact youth families at the time of intake.²⁸ Of the two interviewed staff psychologists, one does not hold family counseling sessions and prefers individual sessions. The other holds approximately 20-minute phone sessions with families and youth shortly before release, to discuss youth and family expectations. The latter psychologist also stated that s/he sometimes facilitates youth phone calls to families in times of crisis and debriefs with the youth after the calls.

No interviewed youth had participated in family counseling sessions with a clinician in the recent past. One young woman stated that she participated in family sessions years ago. Another young woman said that her clinician planned to initiate family counseling with her and her mother last year, but her mother passed away. Two other young women had been offered family counseling but had not participated. Another young woman and a young man stated that they had not been offered family counseling; the young woman indicated that she would be interested in sessions with her family.

Ratings provided at the central office level only.

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

By contract, psychiatrists and psychologists are allotted certain time off for continuing education and some money to pay for registrations (but not travel costs). One clinician was approved to attend an out-of-state conference (American Psychological Association) last year, but the approval was cancelled due to state budget issues.²⁹ Clinicians say that they tend to pay out of pocket if they want to attend conferences because of the bureaucratic difficulties in obtaining CDCR funding.³⁰ The local CMO sometimes provides funding, but under the business rules Ventura will no longer have a local CMO.³¹

Rating provided at the central office level only.

²⁷ Statements of case work specialist during site visit, November 17, 2009.

²⁸ Statements of senior psychologist during site visit, November 17, 2009.

²⁹ Statements of chief psychologist during site visit, November 16, 2009.

³⁰ See statements of two interviewed mental health clinicians during site visit, November 17, 2009.

³¹ Statements of chief psychologist during site visit, November 16, 2009.

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

Relevant mental health policies implemented in 2009 are SPAR (March 2009³²), psychopharmacology (April 3, 2009³³), and WIC § 1800 (June 1, 2009³⁴). Ventura staff provided a binder of youth signature logs, signed during large group meetings in which policy changes were discussed. None of the signature logs indicated that SPAR, psychopharmacology, or WIC § 1800 changes were announced to youth.

Many interviewed youth reported that they have a copy of the Youth Rights Handbook, which most found helpful. However, the Youth Rights Handbook has limited coverage of medical and mental health care issues. It does inform youth of their right to care, their right to refuse medication, and how to request services. DJJ should develop a medical and mental health supplement to the handbook, with feedback from the relevant *Farrell* experts.

Rating provided at the central office level only.

11.1: Implementation plan for offices and MH treatment rooms. Sufficient office space to exist so that all MH staff requiring offices have space and, where appropriate, that space is in, or adjacent to, the living unit. Sufficient space to exist so that no regular MH programs have to be canceled due to lack of space. Treatment space to be appropriate for treatment, providing a therapeutic milieu and areas for confidential conversations.

Implementation plan

The facility has still not received its needed modular buildings.³⁵ According to DJJ's June 2009 Quarterly Facility Report, Ventura needs 35 new modular buildings.³⁶ The superintendent expects to receive 17 modulators and stated that the process can take up to 18 months.

Office space

All psychologists have offices on their assigned living units.³⁷ Each office is equipped for phone and computer access, though at least one psychologist must share a phone line with two other unit staff.³⁸ The psychiatrists each have an office in the outpatient housing unit and share an office on the female SCP unit.³⁹ Office space for case managers should be complete in the near future; youth rooms are being converted to office spaces gradually.⁴⁰

³² See e-mail of Robert Rollins to Mark Blaser, et al., March 19, 2009.

³³ See DJJ, Section # 6267.6, Institutions and Camps Manual (Psychopharmacology), January 20, 2009, p. 2.

³⁴ See DJJ, Institutions and Camps Manual, Section 3320, "Forensic Evaluation – Welfare and Institutions Code 1800/1800.5," April 2, 2009, p. 2 (PoP # 440, June 17, 2009).

³⁵ Statements of superintendent during site visit, November 16, 2009.

³⁶ See DJJ, Quarterly Facility Report, June 2009, p. 18 (provided as PoP #533, October 13, 2009).

³⁷ Statements of chief psychologist during site visit, November 17, 2009.

³⁸ *Id.*; statements of staff psychologist during site visit, November 17, 2009.

³⁹ Statements of chief psychologist during site visit, November 17, 2009.

⁴⁰ Statements of assistant superintendent during site visit, November 17, 2009.

Treatment space

Residential mental health units have conference rooms or other designated space for treatment groups.⁴¹ Core units lack confidential space for group meetings, which are often held in day rooms and kitchens.⁴² Some groups are held in school area classrooms.⁴³

Rating: Partial compliance

6.1c: [Complete conversion to a rehabilitative facility.]

OSM defers to the safety and welfare and mental health experts regarding compliance with this requirement.

8.3.1: Intake process to include documentation of family interviews and assessment. The written report at intake must document contacts and interviews with parents, close relatives, and community service providers during the intake process for each youth. The reports include measures to assess family background, strengths, and functioning. Deadline is July 1, 2007. This item is also monitored by the mental health experts. **8.3.2a:** By November 1, 2006, DJJ is required to facilitate family phone contact within 24 hours of youth arrival. **8.3.2b:** By December 1, 2006, DJJ is required to facilitate ongoing family phone contact. **8.3.3:** By March 1, 2007, 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: Central office recently implemented the community assessment report (CAR) and procedure in July 2009, and field parole agents are to complete these reports shortly after youths' arrival to facilities.⁴⁴ A case work specialist assigned to intake stated that she had only seen one CAR as of November 17, 2009. Documentation indicates that Ventura received 98 new youth between July 1, 2009 and November 16, 2009.⁴⁵

Rating provided at the central office level only.

8.3.2a: A case work specialist assigned to intake stated that either she or a youth's assigned counselor provides youth with their first phone call.

Rating provided at the central office level only.

⁴¹ Statements of chief psychologist and assistant superintendent during site visit, November 17, 2009.

⁴² Statements of chief psychologist, two senior psychologists, and one staff psychologist during site visit, November 17, 2009.

⁴³ Statements of senior psychologist during site visit, November 17, 2009.

⁴⁴ See statements of field parole staff during central office site visit (safety and welfare audit), November 2, 2009.

⁴⁵ See VYCF, Intake: SRSQ date and time completed, November 16, 2009.

8.3.2b: Staff and youth consistently reported that youth are permitted at least one direct, 15-minute family telephone call every week. Some youth said that they make one or two direct phone calls each week and/or that youth could earn extra direct calls. Youth who can reach their families by collect calls have access to pay phones during unstructured program time. The WIN telephone records are relatively consistent with youth statements.

Rating: Substantial compliance

8.3.3: Ventura and its Family Council organized a family reunification event in April 2009 in which 250 family members toured the facility and met with staff from various disciplines.⁴⁶ Community members helped some families with transportation and lodging. Following the main event, some A-Level youth enjoyed a movie with their families.

The Family Council hosted a youth-family movie night in late July and another reunification event in mid-August.⁴⁷ A Thanksgiving meal for youth and families was scheduled for the Saturday following our November visit, and the facility is also planning a winter holiday event.⁴⁸

Only youth with visitors are allowed to attend the family events,⁴⁹ for which reason OSM assigns a partial compliance rating. OSM recommends that Ventura follow other facilities' example and allow youth without visitors to participate in the special family event in some way.

Rating: Partial compliance

⁴⁶ DJJ Today, vol. 1, issue 1, June 2009, p. 3. The remainder of this paragraph is based on this source.

⁴⁷ DJJ Today, vol. 1, issue 3, July 2009, p. 6.

⁴⁸ Statements of various personnel during site visit, November 16-17, 2009.

⁴⁹ Statements of superintendent during site visit, November 17, 2009; statements of various interviewed youth during site visit, November 16-17, 2009.