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**2012 JCR RESPONSE**  
**REPORT ON THE DEPARTMENT OF JUVENILE SERVICES**  
**RECEPTION AND EVALUATION CENTER IMPLEMENTATION PLAN**

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**INTRODUCTION**

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In the Report on the State Operating Budget (SB 150) and the State Capital Budget (SB 151) and related Recommendations - Joint Chairmen's Report, 2012 Session, p. 132, the Maryland General Assembly requested that the Department of Juvenile Services (DJS) submit a report on the plan for implementing a new reception and evaluation center.

Specifically, the committees requested DJS to discuss how a new reception and evaluation center will function and how the new process will be implemented. The submitted report shall also include an implementation timeline and cost-benefit analysis.

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**DJS RESPONSE**

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**I. Background and Overview of the new Reception and Evaluation Process**

The Department of Juvenile Services (DJS) is committed to providing quality care and appropriate services to youth and families involved in the juvenile justice system. DJS operates a system of services delivered in communities and facilities to meet the specific needs of youth and their families without compromising public safety.

National research articulates that agencies responsible for protecting both the welfare of youth and public safety must address at least two critical issues: custodial obligation to the youth's mental health needs, and public safety obligation of providing rehabilitative services to youth in reducing recidivism. (Vincent, 2012; Grisso, Vincent & Seagrave, Eds., 2005) Many youth entering the juvenile justice system arrive with a myriad of needs, including but not limited to, behavioral health needs, school performance/behavior problems, familial/domestic issues, somatic/developmental health needs and financial limitations. National best practices support that youth who enter our system receive a comprehensive evaluation. The purpose of the evaluation is to differentiate and determine these needs to best address their behavioral health demands and develop an appropriate treatment plan to address the behaviors leading to the youth's entry into the juvenile justice system.

DJS currently contracts with private vendors to provide various psychological, psycho-social and psychiatric evaluations for youth adjudicated. These assessment results are used to assist the courts in determining the appropriate treatment needs of the youth and out-of-home placement needs that maximize community safety. DJS contracted vendors completed over 1100 evaluations of youth in FY2012. Evaluations completed by contracted vendors have varied significantly in their quality and recommendations. There have been anecdotal reports from the courts that clinical professionals would provide incomplete and inaccurate evaluations which would include incorrect names, date of birth, inconsistent diagnoses and recommendations that would not be consistently supported by outside assessments.

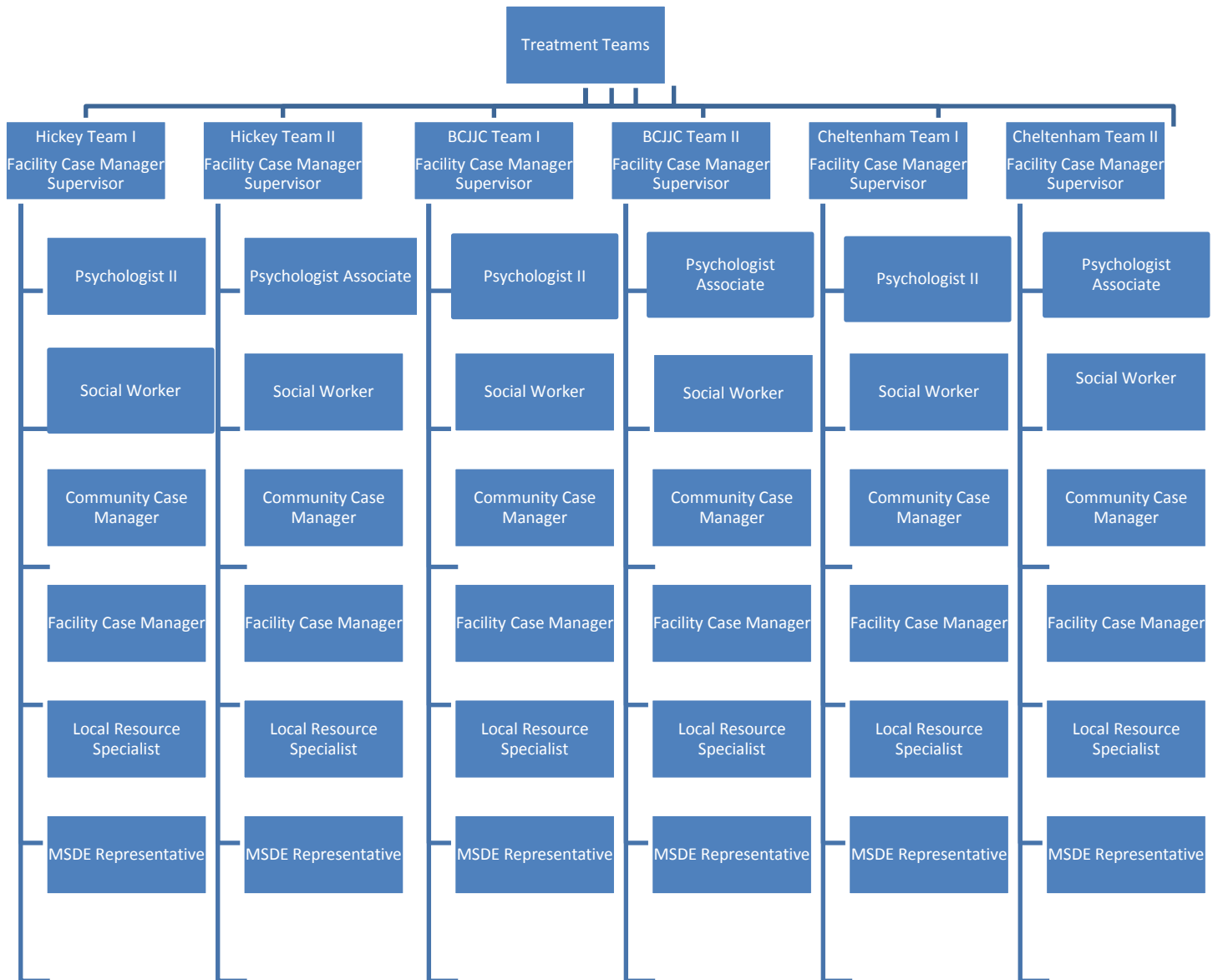
To address the issue of inconsistent evaluation reports, DJS originally explored developing a centralized reception and diagnostic center as an intake unit for all youth committed by the court to an out-of-home placement. This is a model that is typically used nationally and even with adult offenders committed to State custody. However, there were two major reasons why a physically centralized facility for youth committed for an out-of-home placement, would not be feasible:

- 1) There would be significant costs in constructing a new or modifying a currently existing detention center specifically designed as a centralized reception center. Creating a new center would incur costs in capital outlay, specialized training and staffing, and logistic issues of transporting youth throughout the state to a single location. Modifying a currently existing detention center would also incur additional costs and reduce available general population detention beds.
- 2) Maryland is unique in that local courts, when committing a youth to DJS, may determine what type of facility the youth is to be accommodated in, and what level of treatment services are required. Therefore, information critical for screening the youth's various needs and placement recommendations must be presented to the court prior to the court's determination. A comprehensive assessment by a multi-disciplinary team would be most beneficial when integrated into the pre-disposition report presented to the Judge.

Based upon these issues, DJS plans to place assessment teams in all of the currently existing detention centers. Youth placed in DJS detention facilities awaiting disposition and being considered for out-of-home placement, would then be assessed by a multi-disciplinary team including psychologists, social workers, educational specialists, nurses/physicians/psychiatrists, case managers, resource specialists and other professionals. This team would then collate the assessment results from each discipline, and present a cohesive, comprehensive report to the court with appropriate treatment and placement recommendations.

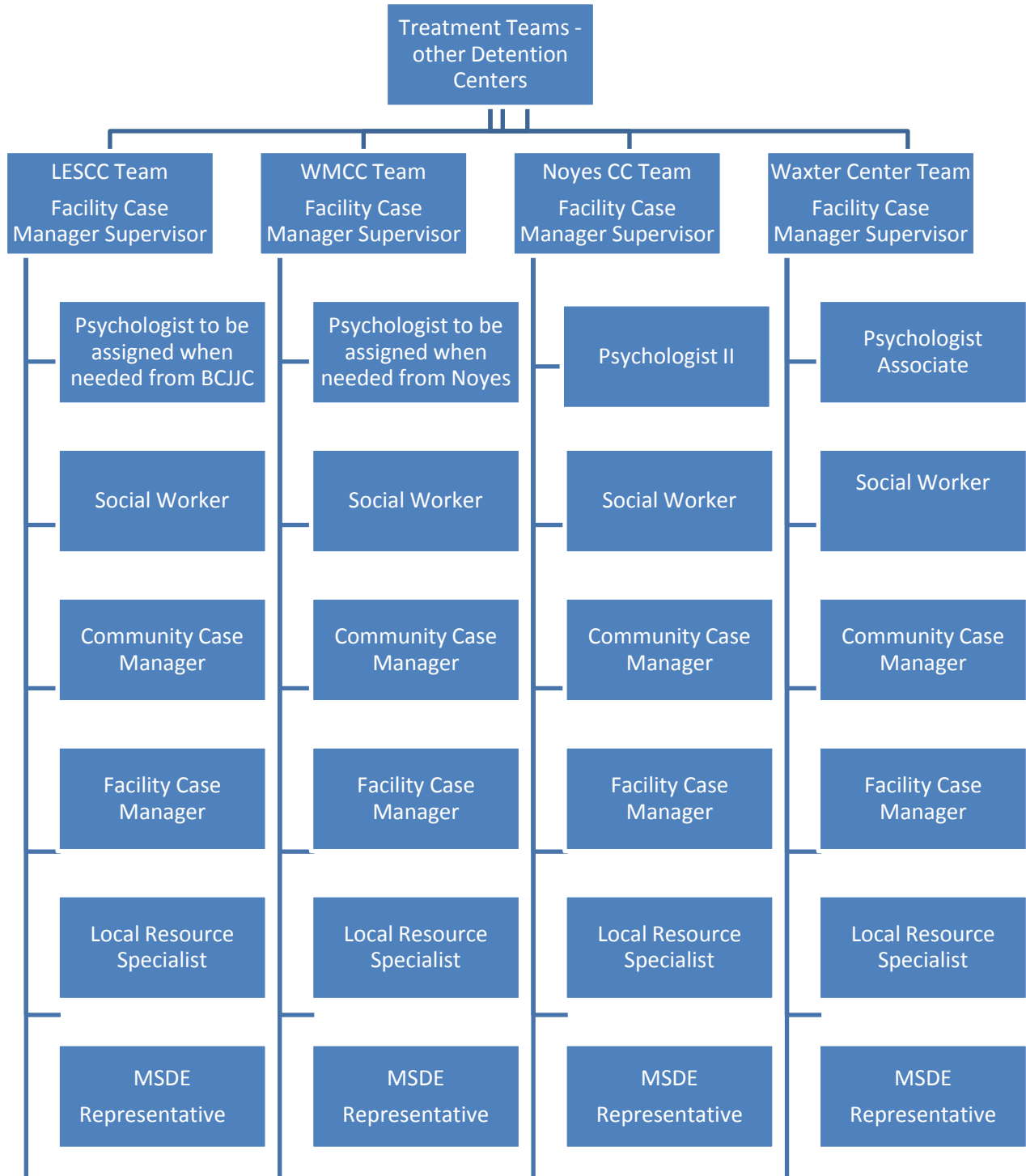
## II. How the Assessment Teams will be Implemented at DJS

The following organizational chart displays two teams at the three largest facilities - C. Hickey School (Hickey), Baltimore City Juvenile Justice Center (BCJJC), and Cheltenham Youth Facility (Cheltenham):



The assignment of two assessment teams at each of these three facilities is based upon the number of evaluations completed in FY2012, time required to complete assessments, and workload expectations including test interpretation, history integration and report writing.

The following organizational chart describes the assessment teams at the remaining centers – Lower Eastern Shore Children’s Center (LESCC), Western Maryland Children’s Center (WMCC), T.J.S Waxter’s Children’s Center (Waxter), and A.D. Noyes Children’s Center (Noyes). The team membership is reduced given the numbers of evaluations requested for youth in those facilities during FY2012:



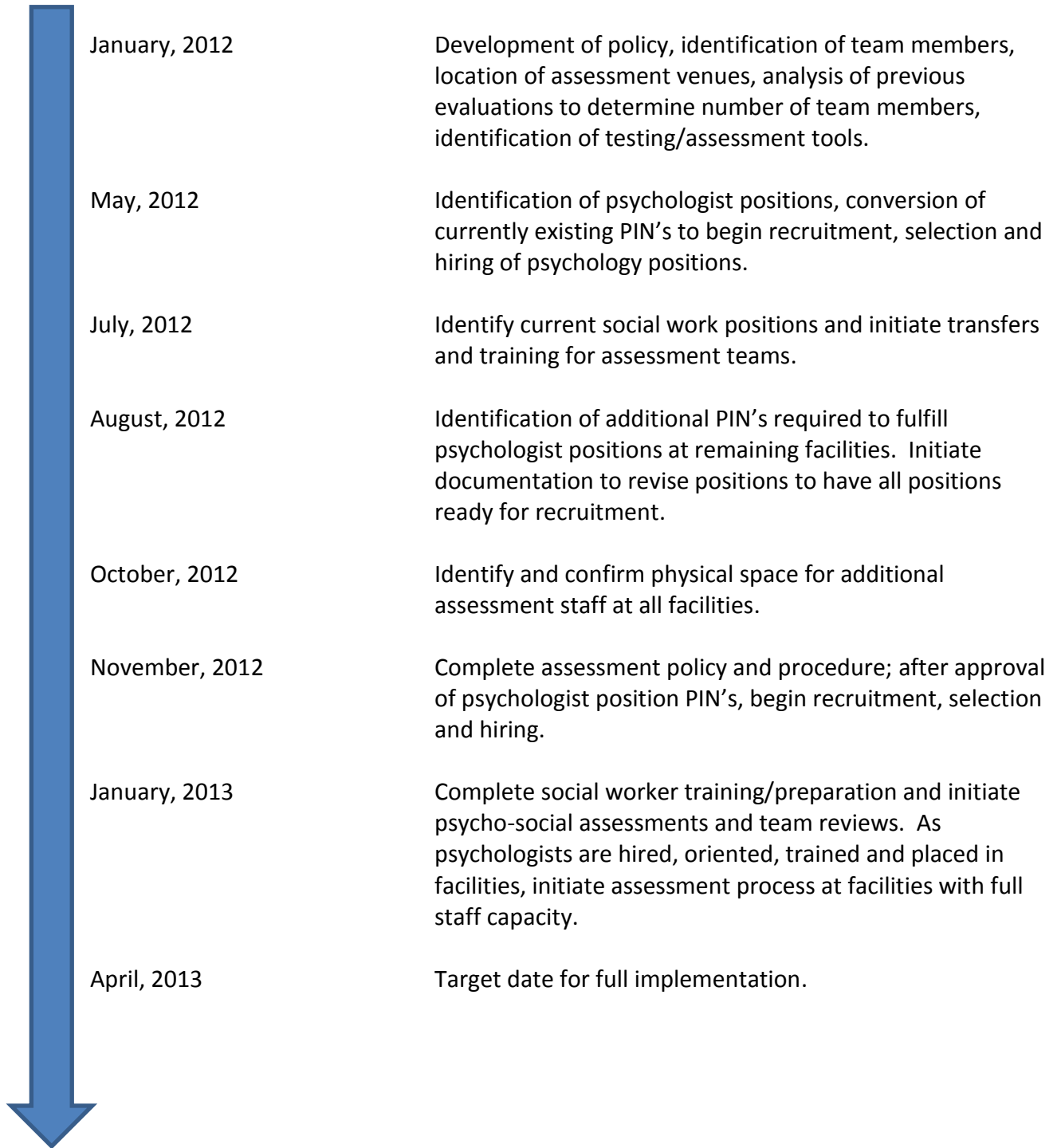
Once a youth is adjudicated for their offenses and determined by the community case manager and others to require out-of-home placement, the youth will be referred to their assessment team based upon their placement in the corresponding detention center. The assessment team will review comprehensive assessments from the following professionals:

- 1) Psychologist – will complete and report results on intellectual, personality and other psychological tests as needed or requested (i.e. evaluation for ADHD, mood disorders, etc.)
- 2) Social Worker – will complete comprehensive psycho-social assessment including meeting with youth, family members, complete needs component of the MCASP, administer and score the Child and Adolescent Service Intensity Instrument (CASII), summarize family, school and previous treatment history, and present substance abuse assessment results.
- 3) Community Case Manager – will complete the Pre-Disposition Investigative Report, complete the risk component of the MCASP, and present the treatment team’s recommendations to the court for the disposition hearing.
- 4) Facility Case Manager Supervisor – will chair the treatment team meeting to coordinate all reports and complete summary of assessment results for the community case manager to present to the court.
- 5) Facility Case Manager – will report on the youth’s progress while in the detention center including adaptation to the facility, compliance with treatment and staff, and over-all functioning.
- 6) Resource Specialist – will assist in determining the most appropriate placements available to the youth based upon the evaluation of the team
- 7) Maryland State Department of Education (MSDE) representative – will provide a summary of the youth’s previous educational services, assess the youth’s needs through a psycho-educational evaluation if needed, and make recommendations for the youth’s educational and professional development training.
- 8) Physician/Psychiatrist representative (as needed) – will provide a report of the youth’s somatic and psychiatric needs, when appropriate; with recommendations of interventions and services required.

Once the evaluations are completed, a comprehensive staffing will be held with the youth and the above discipline representatives. After the staffing is completed a summary/comprehensive report will be developed. The report from the staffing will then be presented to the Court by the community case manager as part of the disposition hearing to assist the Judge in recommending treatment and placement options.

In this new model of assessment, psychologists and social workers completing these evaluations will be employees of the Department. This will increase the accountability and quality of reports given to the court, and more directly address the court’s needs and expectations of the assessments. Better quality evaluations will provide more accurate and comprehensive information to the court, which will result in better and more informed decision-making regarding treatment and placement options. The youth’s multiple treatment needs will be addressed, while insuring community and public safety.

### III. Implementation Timeline and Cost Benefit Analysis



#### **IV. Cost-Benefit Analysis**

In FY2012 the costs for outside vendor evaluations was almost \$1.5 million. This included contracting with private psychiatrists, psychologists, social workers and licensed professional counselors to complete psychiatric, psychological and psycho-social evaluations requested by the court and private facilities that may receive our youth.

The primary costs in developing the local assessment teams will be in creating and hiring additional psychologists and social workers. However, to accomplish this, DJS will utilize currently existing vacant positions and convert those positions into the professional staff required to administer the program. At a minimum, the program will require reclassifying six positions – five (5) for psychologist and one (1) for a social worker. The other psychologist and social work positions required for implementation already exist within DJS and will be reassigned to the assessment program.

By utilizing already existing vacancies and reallocating their positions' titles, duties and responsibilities, there will be a slight increase in costs, as the salary range of the clinical staff will be higher than allocated for the currently existing positions. However, this will be outweighed by the drastic reduction of the outside vendor evaluations. The only component continuing in the outside vendor evaluations will be utilization of contract psychiatrists for Certificate of Need (CON) evaluations. The CON evaluations are a small portion of the vendor contracts. It would not be cost effective for DJS to hire a full-time psychiatrist for CON evaluations, as they are infrequent and will occur throughout the state.