



STATEMENT OF NEED

The Department of Juvenile Services (DJS) is dedicated to creating safer communities, providing prevention and rehabilitation services to vulnerable youth and safe, healthy, appropriate environments for youth unable to remain in their family home. DJS is issuing this Statement of Need (SON) for the establishment of a Residential Child Care (RCC) program to respond to the increased need for staff secure placement, resources and support for female, transgender, intersex and gender non-confirming youth involved in the juvenile services system. This SON is issued pursuant to COMAR 14.31.09.04 to solicit prospective licensees to alter DJS that they plan to apply to the Request for Proposals (RFP) for the RCC program described herein and in accordance with COMAR 14.31.02 and the RFP once it becomes available.

Offeror(s) are invited to apply to host additional classifications of residential programs as part of a continuum of services for youth stepping down from staff secure congregate care programs or in lieu of staff secure congregate care, i.e., therapeutic foster care, kinship care, semi-independent and independent living. Offeror(s) are not required to propose any of these additional services but need to propose appropriate after-care planning for youth leaving staff secure congregate care. These services can be proposed by one or more vendors.

I. Background and Purpose

In general, most youth who interact with DJS remain in the community for the duration of their involvement with the juvenile services system. In some situations, however, juvenile courts may order that a youth receive out-of-home placement upon adjudication and disposition of their case. Currently, girls and gender-expansive young people make up a very small proportion of this population. The average daily population for girls in committed programs had been about 10 for the past three fiscal years.

Girls and gender expansive youth may enter out-of-home care for a variety of complex reasons, many of which are related to the vulnerabilities, challenges and possible past trauma they have faced in their communities. The national trend of detaining and committing girls and gender expansive youth for minor offenses that pose little public safety risk is consistent with Maryland's current landscape. In FY 2023 33.3% of girls placed into a committed treatment placement were placed for misdemeanors, compared to 26.6% of boys. Girls and gender expansive youth often become involved with DJS not because they pose a threat to public safety, but because of scarce community resources, family dynamics, parental abuse or unavailability of a home the courts feel comfortable returning the girl to, trauma and emotional challenges, educational needs, and/or the need for protection and prevention of physical, sexual and emotional abuse.

Based on consultation with national experts, the Justice + Joy National Collaborative and review of contemporary research, an effective program should be rooted in the following principles:

- Gender-responsive, trauma-informed, healing-centered approaches: recognizing that girls and gender expansive youth have specific needs and experiences that should be met with specialized approaches, providers are expected to approach all aspects of the model through these principles.
- Positive Youth Development: although youth in the juvenile services system face many challenges, each youth's skills, strengths, and positive qualities need to be acknowledged and supported in the program.
- Public Safety: consistent with the juvenile court's determination that returning home following disposition is contrary to the welfare of the youth and that an RCC program is the safest, most appropriate, least restrictive placement level, intensive, caring supervision and monitoring shall be provided by certified, attentive, well-trained staff without hardware secure locks, bars or correctional-style fences.
- Educational achievement: all youth shall be afforded supportive educational services, consistent with their individual needs.
- Community and family engagement: supporting youths' positive ties in their homes and neighborhoods is crucial to ensuring they thrive and do not reengage with the juvenile services system. As such, providers will bolster these relationships by offering family and group therapy; encouraging visits (both to the facility by family members and home visits by girls); providing robust aftercare services for the girls upon their return home; and arranging transportation. Providers should have a vehicle(s) that complies with COMAR 14.31.06.08D for this purpose.

Currently, Maryland has one State owned and operated facility-based program for girls and gender expansive youth that provides a total of 6 beds for girls committed to DJS for out-of-home placement. The State seeks to close the current State owned and operated program in favor of a more home-like environment.

DJS is interested in providing services for girls and gender expansive youth coming from all geographical regions in the State of Maryland.

II. Provider Program Requirements:

DJS is seeking an eight (8) bed program, that would eventually need to be certified as a Qualified Residential Treatment Program (QRTP). Although a new provider will not be able to be certified as a QRTP immediately, we expect the following criteria to be accommodated so that the provider can apply for and become a QRTP. A QRTP must meet the following criteria:

- Provides a trauma-informed model of care designed to address the needs, including clinical needs, of youth with serious emotional or behavioral disorders or disturbances or disturbances as identified in the required 30-day assessment facilitated by the DJS Qualified Health Care Provider.
- Has registered or licensed nursing staff and other licensed clinical staff who provide care within the scope of their practice as defined by state law, who are on-site consistent with the treatment model, and who are available 24 hours/7 days a week (need not solely be direct employees of the QRTP).

- Facilitates family participation in a youth's treatment program (to the extent appropriate, and in accordance with the youth's best interest).
- Facilitates and documents family outreach and maintains contact information for any known biological family and fictive kin of the youth.
- Documents how the youth's family is integrated into the youth's treatment, including post discharge, and how sibling connections are maintained.
- Provides discharge planning and family-based aftercare supports for at least 6 months post discharge; and
- Is licensed in accordance with Title IV-E of the Social Security Act requirements and nationally accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Joint Commission on Accreditation of Healthcare Organizations (the Joint Commission), the Council on Accreditation (COA), or another independent, not-for-profit accrediting organization approved by the Secretary of the U.S. Department of Health and Human Services. NOTE: Two additional accrediting organizations have been approved by the Secretary of DHHS: Educational Assessment Guidelines Leading toward Excellence (EAGLE) and Teaching-Family Association.

If the provider is not already certified as a QRTP a detailed time-line for qualifying as a QRTP shall be provided.

The projected need for placements has been determined based on the number of girls and gender expansive youth who have been placed previously and the most recent data concerning requested placements. Should the provider offer family foster care, kinship care, semi-independent or independent living those placement beds would be in addition to the eight (8) bed congregate care home and will also require separate proof of insurance.

Education shall be provided in an on-grounds school, or the provider shall provide detailed transportation plans for transporting youth to an on-grounds school located on another licensed RCC operated by the provider, or in partnership with another licensed RCC provider.

III. Target Population

Providers should demonstrate the ability to provide placements, education and resources for females and gender-expansive youth from ages 13 to 20. In addition, the target population includes youth who may have co-occurring treatment needs and/or history of neglect, sexual and physical abuse and may be co-committed to the Maryland Department of Human Services/Local Department of Social Services or the Maryland Health Department.

Providers shall maintain a no eject, no reject policy for all youth placed by DJS. Ejections will be permitted only in exceptional circumstances after all reasonable efforts to accommodate the youth have been exhausted, and in coordination with DJS policies.¹ This will be the highest level of care for girls and gender expansive youth in Maryland – as such, the provider is expected to be prepared to work through challenging behaviors with youth in accordance with COMAR 14.31.06.15.

¹ The DJS placement policy is available here: https://djs.maryland.gov/Documents/policies/community/Placement-of-DJS-Youth-in-Residential-and-Non-residential-Programs_CS-126-16.pdf

IV. Provider Capacity to Serve

Providers are required to categorize residents based on congruent gender identification, age and phase of rehabilitation or recovery. Furthermore, they must possess the capability to accommodate eight (8) beds in a small, home-like environment and stand to derive greater advantages from a more compact, family-like environment. Beds and other living arrangements need to meet the requirements of COMAR 14.31.06 regulation standards.

V. Facility Security

Providers must maintain 100% compliance for Child Protective Services (CPS) clearances and Criminal Background checks for all employees, volunteers, sub-contractors and prospective employees. Each employee shall meet COMAR 14.31.06.05 standards for indicated child abuse and criminal convictions.

To ensure the safety of both the youth and staff, the program should utilize security cameras (not inside youth's rooms or bathrooms/shower/changing areas), alarm systems, 24-hour staffing and on-site security.

VI. Services

DJS is seeking providers with the ability to provide ongoing intensive services to up to eight (8) female and gender expansive youth. Providers must collaborate with DJS to provide all the service needs in one setting. Those services must include the following:

- Basic needs (i.e., food, shelter, clothing, toiletries, appropriate to sleep)
- Intensive case management
- Individual trauma therapy; group therapy; victim advocacy; mental health counseling and treatment (e.g., cognitive behavior therapy (CBT); dialectical behavior therapy (DBT); family therapy; substance abuse treatment and therapy)
- Medical screening and routine medical care
- Development programming such as:
 - Youth Sports Programs
 - Arts and Creative Programs
 - Community Service and Volunteer Programs
 - Cultural and Diversity Programs
 - Career Development and Job Training Programs
 - Health and Wellness Programs
 - Academic Enrichment Programs
- Family involvement and reunification services
- Educational Services on grounds certified by the Maryland State Department of Education
- Services and support that address runaways, trafficking, and substance abuse
- Services to a population of girls and gender expansive youth ages 13 – 20 with the following treatment needs that may be co-occurring:
 - Inappropriate sexual behavior (to include victims and/or offenders)
 - Violence and aggression
 - Autism Spectrum Disorder
 - High elopement risk

- Developmental Disabilities
- Learning Disabilities
- Self-injurious behaviors
- Physical disabilities
- Ensure that the program's Certified Program Administrator, as outlined in COMAR 14.31.06.06, shall have experience providing individualized services that may include individual, group, milieu, family, educational, and behavioral treatment approaches as applicable.

VII. Program Staffing

It is crucial for staff working with juvenile services-involved girls and gender-expansive youth to be well-prepared and trained in key areas. This is a breakdown of the essential components of such training:

- A. Trauma-Informed Care
 1. Staff should be trained in recognizing and addressing the physical and psychological impact of trauma on youth.
 2. Understanding trauma-responsive care principles, such as creating safe and empowering environments and avoiding re-traumatization, is vital.
- B. Boundaries and Healthy Relationships
 1. Maintaining appropriate boundaries is crucial to ensure the safety and well-being of both staff and youth.
 2. Staff should receive training on ethical conduct and professional boundaries, while still maintaining empathy.
 3. Staff should be familiar with the legal and ethical considerations related to working with juvenile services-involved youth, including issues related to confidentiality, informed consent, and child abuse reporting requirements.
 4. Cultural competence is crucial, as youth come from diverse backgrounds. Staff should be trained to be culturally sensitive and responsive to the unique needs and experiences of survivors from different cultural backgrounds. Staff must be available to accept referrals 24 hours a day, 7 days a week and every day of the year.
- C. Transition Planning: Reintegrating into their families or communities after being in out-of-home placement can be challenging. Partnership with DJS case management is crucial to development of a transition plan that prepares the youth for return to the community.
- D. Positive Youth Development: Staff should be prepared to build on youth's strengths as opposed to focusing exclusively on their deficits.
- E. Crisis Intervention
 1. Staff must be trained and available for immediate crisis intervention and post incident processing.
 2. Both clinical and program management remain on call 24 hours a day for emergencies and crisis management.
 3. Staff and administration must be trained in DJS Incident Reporting Policy to ensure the safety and well-being of youth.

VIII. Program Location

The provider is expected to accommodate youth from all Maryland jurisdictions, including transportation of youth to court appearances, off grounds activities, family visits, educational services and other prosocial activities.

IX. Rate Setting

The provider will create a budget for the first two years of the program operations. After that point, the vendor would be expected to apply for a rate through the Interagency Rate Committee which would fund the program after that point.

X. Priority Selection Criteria

- The provision of high-intensity services for girls and gender expansive youth.
- The availability of the required beds in a facility that meets all core regulation requirements and is ready to receive youth as expeditiously as possible following the execution of a contract.
- A facility for girls and gender expansive youth.
- Previous experience operating a high intensity, small, home-like program serving this population.

XI. Expressing Interest

Interested vendors should email Juanita.Heaggans@Maryland.gov notifying her of their intent to apply to the RFP when it becomes available. Interested vendors need to notify Ms. Heaggans by April 7, 2025.

XII. Licensure does not ensure a Contractor will be awarded a contract by the State.