

- (a) The State shall not contract with a for-profit contractor for the provision of services relating to the ownership, operation, financing, or management of a correctional facility within the State of Vermont.
- (b) No later than June 1, 2021, the Commissioner of Corrections shall submit, to the House and Senate Committees on Appropriations, the House Committee on Corrections and Institutions, and the Senate Committee on Judiciary, a report detailing his or her efforts to end, by June 1, 2022, the practice of the State of Vermont housing any persons in the custody of the Commissioner of Corrections in correctional facilities owned, operated, or managed by a for-profit contractor.

Rationale for a 10 Bed, Short-Term Stabilization Facility

1. Why Woodside and not someone else

a. Vermont needs a no-eject/no-reject facility for justice-involved youth, and youth charged in adult court.

- They may come in the middle of the night and arrive with little advance notice.
- youth pose safety risk to community and themselves; cannot be placed in less secure settings until stabilized. Once stabilized, can be placed in appropriate treatment setting
- Risk of re-offense higher in less secure placements; running away, dangerous acts
- shields youth from increased criminal record
- A placement option for OOS youth through interstate compact on juveniles (ICJ).
- Last time no secure option for youth, the 1981 homicide occurred
- Get quality medical, dental, other types of care, sometimes for the first time in their lives.

b. Woodside recognition - Praise from:

- The US Department of Justice
 - Performance-based Standards
 - Prison Rape Elimination Act
- The Council of Juvenile Justice Administrators
- The Commission on Accreditation of Rehabilitation Facilities.

c. Education improvement

- In 90 days youth avg increase 1.5 grade levels in math and literacy largely due to the stabilizing effects from emotional support throughout the building

d. Available capacity

e. Our 2.5 day shift model allows caretakers present for an extended period, similar to a family

f. Can provide 1:1 staffing for youth in need

g. Can offer two distinct programs

- One stabilization unit and one long-term treatment program

h. Avoid placements out-of-state:

- Exacerbate workload for FSW by visiting youth out-of-state
- Reduce family visits/participation in treatment

i. Experienced and trained staff familiar with current facility

2. Improvements made/measures taken

a. Welcomed a Woodside Quality Assurance and Special Investigator from RLSIU and attained a favorable licensing report

b. Retained expert consultant for de-escalation, restraint and seclusion recommendations

c. Restraint and seclusion reduction

<u>Year</u>	<u>Restraints</u>	<u>Seclusion</u>
2015	116	320
2018	36	98

3. While placements are low, a secure facility is still needed

a. Woodside Total Bed Days

2016 - 4960

2017 - 4613

2018 - 4281

b. Average LOS and number of bed days remains high despite drop in the # of admissions

c. Decrease in the # of other licensed residential beds in VT

From 2010 to 2/19, from 302 to 161

d. Brattleboro retreat may close

Rationale for a Dual-Purpose Facility

1. It will save the state money

- a. Last year there were 29 delinquent youth placed out of state
- b. It often costs more to place youth out of state than it does to place them at Woodside
 - daily out-of-state rate = \$1,161.44
- c. Increased travel costs for DCF staff travelling out of state= \$20,000
- d. Increased cost to DOC to house minors with sight and sound separation and equal access to programming (estimates two youth out-of-state for a full year) = \$330,000

2. Reasons for additional Treatment Program

a. Obstacles in placing youth out of state

- Out-of-state programs not an option for youth in pre-adjudication phase.
- Court may not approve plan for out-of-state placement
- Out-of-state placements take time for approval due to requirements in the interstate compact on the placement of children, court approval of the out-of-state placement, and the CRC process.

c. DOC issues

- DOC can't place youth out-of-state as they have to provide education for youth w/o high school diploma
- DOC have to dedicate space for sight and sound separation from adults as required by federal law
- Additional DOC staff for adequate care, programming and supervision of youth
- Multiple displaced adults for every youth placed at DOC
- DOC youth can need years of care
- Under 16 DOC youth have to stay in hotels – huge overtime costs

d. Hard to find other successful in-state options

- For residents with multiple unsuccessful placements, history, significance of behavior
- Other programs are reluctant to accept older teens because they can't complete their program before 18.

e. Youth need addition time for stabilization than just the short-term program at Woodside can provide

f. Better care than just short term

- Clinical and educational services reduced
- Increase in restraint and seclusion without clinical de-escalation,
- Longer term needed to address risk needs

EXAMPLE PROGRAM: SMALL SHORT TERM DETENTION / STABILIZATION ON ONE SIDE, TREATMENT PROGRAM ON THE OTHER

STAFFING	SCHEDULE	TOTAL	
DIRECTOR	M-F (on call at times)	1	Facility Operation / management, supervise three Clin
SUPERVISOR 1 (Clinician / Treatment)	Shift / direct care / treatment	3	Operations Supervisor of treatment program, any shift
SUPERVISOR 2 (Detention)	Shift / direct care / detention	3	Operations Supervisor of Detention program, any dire
YOUTH COUNCELORS II	Shift / direct care	3	Any shift direct care duties, fill in for Supervisor 1 or 2,
YOUTH COUNCELORS	Shift / direct care	9	Any shift direct care duties, weekly shift placement of
DAY DESK / COVERAGE COORDINATOR	M-F (6am - 2pm)	1	Desk (6am-2pm M-F), establish temp coverage in the
YOUTH WORKERS	Nights (unit and desk), remaining desk coverage	6	Night shift (both units and desk), weekend desk, desk
TEACHERS	M-F	4	Classroom education both detention and treatment M-
NURSE (Manager)	Sun - Wed (10 hour days / possibly on call)	1	Nurse related duties
NURSE (LNA?)	Wed - Sat (10 hour days / possibly on call)	1	Nurse related duties
COOK 1	Sun - Wed (10 hour days)	1	Provide food services
COOK 2	Wed - Sat (10 hour days)	1	Provide food services
ADMIN 1	M-F	1	Admin, primarily finance, payroll, ordering, etc., cover
ADMIN 2	M-F	1	Admin, primarily cliinican / treatment assistance paper

*16 Bed dual purpose facility -

Detention / stabilization - Current Green / West / North unit. 8 residents maximum. Short term, "No Eject, No Reject" (1-30 days maximum), for assaultive, D.O.C custody, in need of emergency plac

Treatment - Current Blue / East unit. 8 residents maximum. Short or Long term treatment (specifics TBD). Program determines the residents accepted, (possibly "some" kids currently in other progræ

Detention / Stabilization unit direct care staffing for 8 residents: 1 Supervisor 1 plus two YC's (could include 1 YC and a YC II).

Treatment unit direct care staffing for 8 residents: 1 Clinician plus two YC's (could include 1 YC and a YC II)

Cost for staffing, food, operating costs, building rental, contracted services related to treatment, etc., would be estimated around \$4 million.

icians, three Supervisors 1's, and two nurses

direct care duties, facility director in the event of an absence, supervise Admin 1 & 2, Cooks, Desk coordinator, Youth Workers
ct care duties, facility director in the event of an absence, supervise, YC II's, YCs, Teachers

in the event of an absence, weekly shift coverage of detention / treatment would be TBD
detention / treatment would be TBD

event of any direct care (Clinician, Supervisor, YC II, YC, Youth Worker, Teacher), absence.
2-10 pm M-F

F (2:30-4:00 contact schools regarding IEPs, PLPs, report cards, credits, etc. develop curriculum, lesson plans, etc.)

day desk in the event of absence
work, documentation, running afternoon therapeutic group, PEQA, cover day desk in the event of absence

ement, etc.

ams, and /or out of state, etc.)