

Why has there been a rapid recent decline in population at Woodside?

1. Because they are being placed elsewhere

a. Changes in policy

1. On July 1st 2018 - Legislative change impacting youth administrative placement
 - a. Administrative placement authority limited to post-adjudication youth
2. RLSI – Woodside is now required to meet Standard 508 – “shall accept and serve only those children/youth whose needs can be met by the services provided by the program”.
3. Woodside Policy 301 (Recent) – Intake and Screening Statement: “Woodside does not have the clinical resources and expertise to serve all referred youth”....protocol is intended to screen out youth.....who need a higher level of clinical care than Woodside is able to provide”

b. Community-based service options have been increasing through new provider capacity contracts and through their understanding that they can't place residents at Woodside

1. Community providers like The Depot Program (204), Howard Center, Brattleboro Retreat, Local hospitals
2. Community partners have made comments to Woodside staff that they have been told that Woodside is not available for the Department to place youth at.
3. Programs like Howard Center, who testified before HHS Committee that they often didn't call about unsafe youth because they knew 204 was full and that kids couldn't be placed at Woodside.
4. Youth may be accepted back into programs before the programs were ready to accept them back.

2. No objective screening/assessment system to identify the appropriate level of placement that youth should be placed in.

- a. Youth have dozens of placements over a short number of years.
- b. Process of Elimination approach to placements, until a youth is successful at a program or makes their way to Woodside.

“A Therapeutic prison for young offenders.”

1. Woodside can handle DOC youth
 2. The facility is physically capable of supporting that population
 3. Additional training needed for staff to be “DOC Academy trained”
 4. Align programming and educational components to the adult system to allow for continuity
 5. We have, by policy, been able to accept individuals past their 18th birthday, but on a voluntary and conditional basis
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6. Staff are familiar with this demographic.