

## EMBARGOED UNTIL 11/26/19 AT 10AM



# YOUTH RESIDENTIAL PLACEMENT TASK FORCE

## **Executive Summary**

Philadelphia's Youth Residential Placement Task Force seeks to reduce the reliance on—and improve the quality of—youth residential placement across three systems: child welfare, juvenile justice, and behavioral health treatment.

### Our goal is to ensure that youth:

- 1) enter placement in fewer numbers due to successful community-based alternatives.
- 2) stay in placements close to home, in smaller settings, whenever possible.
- 3) have their personal safety protected while in placement.
- 4) benefit from quality care and full family support during and after placement.
- 5) receive appropriate education services while in placement.

Philadelphia leaders have worked to significantly reduce the number of our city's youth involved in the child welfare, juvenile justice, and behavioral health systems who enter residential placement, and to improve the safety and quality of those placements. These efforts have led to an approximate 50% decrease in the number of youth in residential placement over the past five years. But advocates and system leaders agree that there are still too many individuals in these facilities, away from their families, communities, and schools.

As of April, 30, 2019, approximately 861 youth were in residential placement—426 through child welfare (dependent), 244 through juvenile justice involvement (delinquent), and 191 in psychiatric residential treatment facilities (behavioral health). These young people are disproportionately teens of color (approximately 91% black or Hispanic and 96% over age 11), and their stays in residential placement are not achieving the healing outcomes they and their families need. Almost half (45%) of those who entered residential placement in FY18 had a previous stay. Additionally, their rights to safety and to education are not being appropriately protected.

In the child welfare and juvenile justice fields, residential placements are commonly known as "congregate care" and include group homes, residential institutions, state-run detention centers for delinquent youth only, and emergency shelters for dependent youth only. In the behavioral health system, residential placements are referred to as PRTFs (psychiatric residential treatment facilities).

Some residential facilities offer ongrounds educational services. Residential placement providers operate 365 days a year and are expected to house youth in a safe, 24hour supervised environment. They should also support behavioral health needs and overall youth well-being, including educational progress. As a city, we are committed to redoubling our efforts to reduce the use of residential placement. And where residential placement remains necessary, we are committed to ensuring that the placement is safe, provides high-quality care and treatment, and meets youths' educational needs. We will work urgently and boldly across our agencies to continue to improve services for families and youth and interrupt the cycles of trauma. Our work today to help youth thrive will impact the lives of Philadelphians in their adulthood and, ultimately, the next generation of Philadelphians.

Many of the recommendations below are consistent with those made by youth and advocates. They are organized into five areas:

- System Level Improvements
- Reducing the Use of Placements
- Improving the Quality of Placements
- Improving the Safety of Placements
- Improving Education Quality

Some call for concrete actions like ensuring families receive clearer information about where to turn for help when a child is in placement, the creation of a new Youth Ombudsperson office, and a commitment to increasing

hourly wages (to \$18 an hour by 2024) for staff at youth residential placement facilities. Others are ambitious long-term initiatives, like tackling the racial biases that contribute to placement rates, committing to significantly reducing placement for probation violations, and adopting a City role in ensuring that youth's education rights are protected. The Task Force presents the following recommendations to City Council, Mayor Kenney, and State executive and judicial branch leadership. Stakeholders in the child welfare, behavioral health, and juvenile justice community can come together to make these critical changes happen.

#### 90 Day Action Items

- Complete the process of opening a new small psychiatric residential treatment facility (PRTF) in Philadelphia.
- Develop and release the DHS Residential Placement Provider Assessment Report
- Implement a Trauma Responsive Plan in the School District of Philadelphia.
- Make additional investments in Evening Reporting Centers to allow more youth to stay in their homes while receiving supervision, as well as positive supports.
- Release the elements and processes for the School District of Philadelphia student-friendly onramp (described in Recommendation #19) for all students returning to school from residential placements
- Implement onsite technical assistance training for The Six Core Strategies to Reduce the Use of Seclusion and Restraint at PRTFs.
- Provide clear documents to youth and families on their rights, grievance procedures, and key contacts' information.
- Meet with State leadership to advocate for partnership in implementing the recommendations.

#### **Recommendations and Metrics**

	Recommendation Timeline S (Short) <1 Year M (Medium) <2 Years L (Long) <4 Years	Agencies Responsible (Lead in Bold)	Potential Metrics
System Level Improvements	<ol> <li>Develop a comprehensive cross-system plan to further reduce the number of youth in residential placement and increase the number of community- based alternatives. (S)</li> </ol>		
	2. Issue a public Annual Progress Report of the system with provider profiles for transparency. (S/M)	MDO, DHS, DBHIDS/CBH, SDP, FJD, DAO, Def. Assoc.	<ul> <li>Release of annual report</li> <li># of youth in residential placement</li> <li># of youth in community-based alternatives</li> </ul>
	3. Expand the use of integrated data to increase coordination and communication among all services received by a youth, including education. (M)		
	4. Develop and make public strategies to eliminate racial, gender, and LGBTQ-GNC overrepresentation in placements. (L)		<ul> <li>Release of strategy</li> <li>Rate of placement by race, gender, LGBTQ-GNC status</li> <li>% change in the disproportionality of placement by race, gender, LGBTQ-GNC status</li> </ul>
Reduce the Use	5. Expand and prioritize the use of prevention and diversion services for youth and their families in the juvenile justice system. (L)	<b>FJD, DAO, DHS,</b> MDO, Def. Assoc., DBHIDS/CBH, SDP	<ul> <li># of youth in delinquent placement</li> <li># of children in community-based alternatives to delinquent placement</li> </ul>
	6. Monitor, minimize, and make public the number of youth sent to placement for nonviolent offenses or technical probation violations. (S/M)	<b>FJD, DAO, MDO,</b> DHS <b>,</b> Def. Assoc., DBHIDS/CBH, SDP	<ul> <li># of youth entering residential placement because of a probation violation</li> <li># of youth entering residential placement because of a non-violent offense</li> </ul>
	7. Develop additional child welfare prevention programming and local community- and family- based alternatives to dependent residential placement. (M/L)	DHS, DBHIDS/CBH, SDP, FJD	<ul> <li># of youth in dependent placement</li> <li># of youth in community-based alternatives to dependent placement</li> </ul>
	8. Provide preventive supports at school for all youth and ensure the needs of youth at risk are addressed. (M)	SDP, MDO, DBHIDS/CBH, DHS	<ul> <li># of children at schools with preventive supports</li> <li>% change of children referred to behavioral health crisis services</li> </ul>
	9. Ensure that youth's disabilities and/or special education needs are properly identified and information about them is made available to system decision makers. (S)	SDP, FJD , MDO, DBHIDS/CBH	<ul> <li># of youth with an IEP or 504 plan who are in residential placement, and changes over time</li> <li># of youth with a change in IEP status while in placement</li> </ul>

	Recommendation	Agencies Responsible	Potential Metrics
	Timeline S (Short) <1 Year M (Medium) <2 Years L (Long) <4 Years	(Lead in Bold)	
Improve the Quality	10. Develop new small residential programs in Philadelphia to keep youth close to home. (M/L)	DHS, DBHIDS/CBH, MDO, City Council	<ul> <li># of facilities sited in Philadelphia County</li> <li># of slots at Philadelphia-based residential programs</li> </ul>
	11. Ensure youth and families receive clear information on rights, grievance procedures, and key contact information. (S)	DHS, DBHIDS/CBH FJD Prob. and Parole, Def. Assoc., and Advocates	<ul> <li># of providers meeting contract requirements related to receipt of information about rights and grievance processes</li> <li>% of youth and families reporting on a survey that they are familiar with their rights and who to call</li> </ul>
	12. Make engagement with family a central component of program delivery. (S)	DHS, DBHIDS/CBH, FJD Prob. and Parole	<ul> <li>% of family surveys reporting an increase in families' self-perceived capacity to positively interact with the youth</li> </ul>
	13. Expand paid peer advisor/credible messenger positions for youth and adults. (S/M)	DHS, DBHIDS/CBH, SDP	# of peer advisors/credible messengers     employed throughout the system
Improve the Safety	14. Require contracted providers to improve the quality of frontline residential program staff through wages, benefits, and training improvements. (M/L)	DHS, DBHIDS/CBH	<ul> <li>Retention rate of frontline staff</li> <li># of providers paying at least \$18 an hour</li> </ul>
	15. Establish an independent Youth Services Ombudsperson office to receive and investigate concerns from youth and families about safety or services. (M)	<b>MDO,</b> DHS, DBHIDS/CBH	• # of calls and reviews
	16. Require providers to adopt evidence-based models to reduce or eliminate manual restraints and install video cameras. (M/L)	DHS, DBHIDS/CBH	<ul> <li># of providers with video cameras installed in all common areas</li> <li># of restraints</li> <li>% decrease in the use of restraints over time</li> </ul>
Education Quality	17. Ensure youth have access to the full range of educational opportunities available to other students in public schools, as well as school stability or immediate enrollment when placed in a residential setting. (M)	<b>SDP,</b> DHS, DBHIDS/CBH	<ul> <li>% of youth placed in residential facilities who attend local schools</li> <li>% of those youth who meet credit attainment goals</li> <li>% of youth who remain in the same school</li> </ul>
	<ol> <li>Establish mechanisms for local monitoring and oversight of education facilities, including on- grounds schools. (M/L)</li> </ol>	MDO, DHS, DBHIDS/CBH, SDP	<ul> <li># of providers with on-grounds schools that meet education quality measures</li> <li>% of youth in placement who attend on- grounds schools who meet credit attainment goals</li> </ul>
	19. Improve timely information sharing and collaboration to prevent harm to educational progress and to support youth's educational transitions. (S/M)	SDP, DHS, DBHIDS/CBH	• Credits recognized and counted toward graduation while youths were in residential placement