

DEPARTMENT OF CHILDREN AND FAMILIES

OFFICE OF THE OMBUDSMAN



Calendar Year 2015

ANNUAL REPORT

**Connecticut Juvenile Training School
&
Pueblo**

OVERVIEW

The Office of the Ombudsman addresses inquiries and complaints related to Department of Children and Families (DCF/Department) services in order to resolve the identified issues and to help ensure that the rights of individuals involved with the Department are upheld and maintained.

The Ombudsman staff utilizes a neutral and collaborative process to facilitate fair and equitable outcomes to concerns that are reported, and attempts to facilitate resolutions as amicably as possible.

As required, the Office of the Ombudsman, in collaboration with Regional, Facility and Central Office staff, consults and problem-solves case-related and systemic issues in order to assist and support stakeholders who outreach to the Department.

What We Believe

Mission - The mission of the Office of the Ombudsman (Office) is to assist in supporting the safety and well-being of Connecticut's children; to improve effectiveness, quality, efficiency and responsiveness of DCF and connected services and supports; and to promote families, youth's and public confidence in Connecticut's child welfare system.

Vision - Our vision is a collaborative and transparent system whereby individuals can freely express themselves about the Department's work, resulting in issue resolution and improvements from a case, systems, policy, and/or statutory perspective.

Values - We engage in the values of compassion, understanding and a commitment to each individual with whom we communicate, as we believe they deserve to be heard and feel respected throughout their involvement with the Department.

How We Conduct Our Work

- *Respond* promptly to inquiries
- *Engage* the caller
- *Assess* concerns
- *Answer* questions
- *Provide* information about Departmental policy and procedures
- *Search* for a resolution of disputes
- *Speak* on behalf of the client
- *Mediate* and act as a liaison between all involved parties
- *Arrange* case conferences when necessary
- *Collaborate* with community providers
- *Educate* the community

PROCESSES and DATA

Inquiries and Grievances

During Calendar Year (CY) 2015, the Office handled 115 grievances that were filed by youth at Connecticut Juvenile Training School (CJTS) and an additional 25 grievances filed by youth at Pueblo. This represents about 6% of the total inquiries and complaints (N=2,340) that the Office received from all stakeholders during the course of CY 2015.

The process to assess the CJTS and Pueblo grievances is as follows:

- 1) The Ombudsman visits each facility, typically in unannounced fashion during all shifts including weekends.
- 2) The grievances are received after they are placed by residents into a locked grievance box on each unit marked "Ombudsman." Concerns are also brought to the attention of the Ombudsman by the resident's family members or Public Defender via phone calls or e-mails.
- 3) The Ombudsman reviews the grievance and then speaks directly to the youth involved to gain a greater perspective of the concern and to understand it in the correct context. Youth are interviewed either directly on the unit or in another location according to their preference.
- 4) A copy of the grievance is scanned and sent to the Superintendent, Assistant Superintendent and Clinical Director of either CJTS or Pueblo. It is also sent to the Director of Residential Care and Unit Leader where the youth resides if they are placed at CJTS. Information learned from the initial interview with the resident is included in this notification of the grievance. This exact information is also sent to the Child Advocate and Public Defender who represents the youth.
- 5) Designated staff in each facility are responsible to review the grievance, talk with the involved staff and youth, as well as to review Condoit for applicable incident reports and notes pertaining to the matter.
- 6) The Ombudsman also reviews Condoit and speaks to other individuals including residents, staff, the youth's Public Defender or even the resident's parents and guardians who may have knowledge of the expressed concerns.
- 7) The Assistant Superintendent for each facility provides a response back to the Ombudsman when their assessment is complete.
- 8) The information provided by Administration is then reviewed by the Ombudsman who combines that with his assessment and a finding is established for the grievance.
- 9) The Ombudsman communicates back to CJTS or Pueblo Administration about the grievance finding as well as the Child Advocate's Office and the youth's Public Defender.
- 10) The Ombudsman again speaks to the youth to confirm the outcome of the grievance and next steps.

During the time the Ombudsman visits each facility, he will also randomly talk with youth and engages them in discussions on a variety of topics. Youth were found to ask for assistance in clarifying discharge planning, to provide ideas pertaining to facility programming, they express concerns pertaining to the risks they face in the community upon returning home, preferences regarding recreational activities or their favorite sports teams and video games. As another way to engage with the youth, the Ombudsman partakes in unit activities such as playing basketball, assisting with homework, watching television, going for a walk with a youth, sitting in on a class at school or talking to an entire unit about his role within the facility.

The same conversations, both planned and random, occur with staff across all levels at each facility. These are intended to answer general questions about the role of the Ombudsman, listen to concerns expressed about the facility or an individual youth, and to identify trends within each unit and building which are then forwarded back to facility Administration.

Connecticut Juvenile Training School Data

The following is a breakdown of grievances filed and the findings according to unit:

Unit	Total	No Merit	Merit	Partial Merit	Careline Referral	Human Resources
4B	16	13	3	0	0	0
4D	4	3	1	0	1	1
5B	4	4	0	0	0	0
5C	15	15	0	0	0	1
5D	8	8	0	0	0	0
6B	19	16	3	1	4	4
6C	22	10	12	0	1	9
6D	20	15	5	1	3	3
Medical	4	4	0	0	0	0
School	3	3	0	0	0	0
Total	115	89	24	2	9	18

As the chart above indicates, 115 grievances were filed during calendar year 2015 of which 85 named a specific staff member and 30 were filed against the general conditions of the unit or facility. Twenty-six of (26) these grievances (23%) were found to have either Merit or Partial Merit, with 77% having No Merit. 27 grievances (23%) were referred to either the DCF Careline and/or the Human Resources Division for investigation.

In comparison to CY 2014, 173 grievances were filed. Twenty-seven (16%) of these grievances were found to have either Merit or Partial Merit with 82% having No Merit. Five (5) grievances (2%) were referred to either the Careline and/or the Human Resources Division for investigation.

Over the past year, there has been a significant increase in the number of grievances that resulted in a referral to either the Careline and/or the Human Resources Division. This increase is attributable directly to two distinct staff members, and is not a reflection of the overall conditions at the entire facility.

Unique Resident and Staff Grievances

Fifty-nine (59) unique residents filed grievances. Eleven (11) residents accounted for 52 or 45% of the total grievances. They each filed at least 3 or more grievances, with two residents filing 8 and 9 grievances respectfully.

Forty-nine (49) unique staff were the subject of grievances being filed. The data shows that 9 staff accounted for 42 (49%) of the grievances filed directly against a staff member. They each had at least 3 or more

grievances filed against them. It should be noted that 1 staff member had 12 grievances filed against him, which made up 14% of the grievances filed against staff.

Unit Specific Data Review and Concerns

Further review of the data shows that the highest number of grievances were filed in Units 6C, 6D, 6B, 5C and 4B. Combined, they accounted for 92 (80%) of the grievances filed in the facility. These five units also accounted for 23 Merit and 2 Partial Merit findings, as well as 9 referrals to the Careline and 16 referrals to the Human Resources Division. A further analysis of these five units is outlined below.

Unit 6C

Unit 6C had 22 grievances filed, resulting in 12 Merit findings, which is almost 50% of the total for the entire facility. In this unit, 1 referral was made to the Careline and 9 referrals were forwarded to Human Resources. Of the 22 grievances, 14 (59%) were filed by two unique residents and those grievances accounted for almost all of the findings. Of concern is that one staff member had 9 grievances filed against them as youth documented that staff's derogatory statements towards them, poor follow through with requests for assistance and that the staff person was not paying attention to the residents due to the fact the staff person was on their personal cell phone while on the unit. The youth went as far as describing the phone and some of the activities the employee engaged in while utilizing it. The concerns did result in referrals being made to the Human Resources Department and the actions of the staff member were investigated, documented and handled via the progressive discipline process.

Unit 6D

Unit 6D had 20 grievances filed, which is almost 23% of the total for the entire facility. These grievances resulted in 5 Merit and 1 Partial Merit findings. In this unit, 3 referrals were made to the Careline and 3 referrals were forwarded to the Human Resources Division. Of the 20 grievances, 6 of them were filed by two unique residents. One staff member had 4 grievances filed against them due to that employee's abusive and condescending behavior towards the residents, lack of appropriate de-escalation techniques while responding to a crisis and denial of a resident's basic necessities. Those incidents were reported to the Careline and the Human Resources Division.

Unit 6B

Unit 6B had 19 grievances filed, which resulted in 3 Merit and 1 Partial Merit findings. Four (4) of this unit's referrals were made to the Careline and 4 referrals were made to the Human Resources Division. Of the 19 grievances, 12 (63%) were filed by four unique residents. The culture of this unit was difficult as it contained older and quite frustrated youth who had either been at the facility multiple times or had an extended length of stay. A dynamic seen here, which is not consistent with other units, is the amount of grievances filed in which residents then did not wish to meet with the Ombudsman during the assessment process. The reluctance may be due to the population of youth in this unit who tended to be older and have multiple or extended stays. This prompted calls to the youth's Public Defenders to compel their cooperation during the interview process and for the Ombudsman to consistently be in discussion with the Public Defenders for these youth to maintain open lines of communication and address issues before they escalated into another grievance filing. It was also found that this unit had three staff members who were new to the facility. These staff had a total of 12 grievances filed against them (i.e., 4 each). Consistent with the 2014 findings, in this

unit, new staff appeared to be targeted by the older and more experienced residents. It appears that when these youth were not satisfied about an interaction, circumstance or consequence they experienced, they may have used the grievance process as a way to test the new employees' skills, training and consistent follow-through.

Unit 5C

Unit 5C had 15 grievances filed. None resulted in Merit or Partial Merit findings, but one referral to the Human Resources Division was made. In this unit, 6 (40%) of the grievances were filed by the same resident. As context, this is a youth who had an extended stay at the facility and had a very specific programming plan. This youth was involved in constant altercations requiring interventions by staff. In response, the Ombudsman proactively spoke with this youth when visiting the facility in an attempt to address any issues he may have before they escalated into a grievance filing.

Unit 4B

Unit 4B had 16 grievances filed, which resulted in 3 Merit findings. One resident was responsible for filing 4 (25%) of the total grievances. It should be noted that Unit 4B is the transitional unit where residents entering the facility are originally placed until they are assessed and subsequently transitioned into the general population. The residents may struggle with the overall structure of being placed into a new facility and this is seen by the fact that 38% of the grievances filed pertain to the general conditions of the unit or facility, rather than be directed to staff. None of those grievances filed on the general conditions were found to have Merit or Partial Merit. However, one staff member had 4 (25%) of the grievances filed against them, of which 3 were found to have Merit. Youth statements included this staff member talking in a derogatory fashion to them, treating residents differently and actually provoking residents instead of de-escalating them. Each of those grievances was filed by a different resident documenting the same behaviors of the same staff member during different months. The actions of this staff member were addressed by the DCF Human Resources via the progressive discipline process.

Pueblo Data

For the CY 2015, a total of 25 grievances were filed by residents at Pueblo. The following is a breakdown of grievances filed:

Unit	Total	No Merit	Merit	Partial Merit	Careline Referral	Human Resources
Pueblo	25	21	3	1	0	0

As the chart indicates, a total of 25 grievances were filed during calendar year 2015. 16% were found to have either Merit or Partial Merit, with 84% having No Merit. No grievances necessitated a report being made to the Careline and/or the Human Resources Division for investigation.

Comparing these numbers to 2014 data, 17 grievances were filed during that period. 12% of those grievances were found to have either Merit or Partial Merit, with 82% having No Merit. One grievance was referred to the Careline. No referrals were made to Human Resources for investigation.

Unique Resident and Staff Grievances

Six unique residents filed grievances. Two residents accounted for 64% of the total grievances, each filing 6 and 11 respectively. Both of these residents had extended stays at the facility and seemed to be struggling with their planning and discharge dates. For example, one specific youth experienced highly contentious legal proceedings to determine her next steps. Due to these stressors, it is believed the resident's grievance filings were a more designed to draw attention to their unhappiness in placement versus negative conditions at the facility or staff misconduct. As a result, the Ombudsman remained in close contact with the residents' Public Defenders and took part in both joint interviews and meetings with them and their clients to ensure proper communication continued and issues were addressed as needed.

At one point prior to the facility closing, the Ombudsman took part in a meeting with all of the residents, the Assistant Superintendent and other staff as a result of a lengthy letter the residents drafted about the overall conditions. The residents did a nice job advocating for themselves and expressing their concerns.

Nine unique staff were the subject of grievances being filed. The data shows that one staff accounted for 24% of the total grievances. The actions of this staff member were addressed via the progressive discipline process. 46% of the grievances were filed on the general conditions of the facility and did not name a particular staff member.

Assessment of Grievances and Information Obtained

Throughout the course of interviews with youth, staff, record reviews and other information provided during the course of assessing grievances, a number of themes about the conditions in both facilities were noted. It is important to recognize these regardless of whether or not a grievance was found to have Merit or Partial Merit.

Major Themes for CJTS

- 1) Youth displayed negative reactions and an escalation in their behaviors after staff did not maintain proper boundaries with them. The boundaries crossed by staff included utilizing derogatory or demeaning language towards the residents, speaking about their family members or sarcastically talking about their placement at the facility including length of stay.
- 2) Similarly, staff members who release personal information about themselves to the residents, (e.g., the constellation of their family members, where they live and interests outside of the facility, etc.), face the risk of having this information brought back up to them by the residents in a negative way if a disagreement between a youth and staff member occurs.
- 3) Residents expressed frustration when they are given a minor infraction or charged for the same behavior a staff member demonstrated on the unit a short time earlier without them receiving a consequence.
- 4) Youth expressed concerns that when it is known they have filed a grievance, negative comments are directed towards them by both staff and other residents for "snitching". On a couple of occasions, while was on the unit, the Ombudsman heard residents make comments such as "snitch" or "don't talk to him."
- 5) Youth report a perception that close to discharge, staff will find something to charge a resident for which may delay their exit from the facility.

- 6) Residents report inconsistency in the manner in which they are allowed to complete extra chores and partake in other activities. It appears that these are at the discretion of the staff.
- 7) On a couple of units, newly assigned Youth Services Officers were targeted with multiple grievances. When this occurs, the Unit Leader addressing the concerns with the whole unit of residents, with the staff member present, was a successful intervention.
- 8) During the course of the year, many positive staff interactions and efforts were observed associated with all levels of staff. It is important during the Ombudsman's assessment of the grievances that these practices are acknowledged and highlighted.

Major Themes for Pueblo

- 1) The residents of Pueblo stated the Assistant Superintendent was accessible and open to discussing issues with them leading to frequent direct contact and quicker resolution of problems.
- 2) Youth displayed negative reactions and an escalation in their behaviors after staff did not maintain proper boundaries with them. The boundaries crossed by staff included utilizing derogatory or demeaning language towards the residents, speaking about their family members or sarcastically talking about their placement at the facility including length of stay.
- 3) The residents' extensive length of time at the facility and uncertainty about discharge are believed to be directly related to a number of grievance filings.
- 4) The residents frequently asked to speak with the Ombudsman to seek objective help with resolving an issue. At times, he was called in his office by a youth to discuss a particular manner even in the absence of visiting the facility.
- 5) The physical structure of Pueblo may have limited the youth in their ability to create positive distance from other residents during stressful times.

Positive Interventions:

For both facilities, an intervention that appears to be of benefit was the Ombudsman proactively talking to residents who have filed multiple grievances, even in the absence of a new grievance being filed. The Ombudsman will continue to engage the youth in CJTS in such fashion as it is thought that this may lead to quicker resolution of issues and abate issues before they escalate. With respect to Pueblo, residents who filed multiple grievances appear to have benefitted from a multidisciplinary meeting to address their concerns. By these efforts, the context of the youth's circumstances were clarified and a plan developed to address them by a team of individuals.

Finally, The Ombudsman and Public Defenders representing youth at CJTS and Pueblo established a collaborative working relationship to resolve issues in a proactive manner. This was particularly helpful when residents did not want to speak to the Ombudsman and their Public Defender intervened to gain their cooperation.