

THE NEW RHODE ISLAND TRAINING SCHOOL FOR YOUTH

# **Proposal to Implement a New Treatment and Resocialization System for Adjudicated Youth in Rhode Island**

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## Executive Summary

*The need for, and intent of this proposal.*

Since May of 2002, the Department of Children, Youth and Families (DCYF) has been engaged in the redesign of the facilities and the program at the Rhode Island Training School for Youth (RITS). After consideration and implementation of several alternative plans over 30 years, DCYF determined that no solution short of new facilities would satisfy the requirements of the Federal Court order that RITS is required to meet. A Steering Committee comprising representatives from DCYF, DOA and RIDE developed a plan for new, creditable facilities that would improve staff utilization and service delivery for juvenile residents of the RITS. The plan has met with opposition primarily due to siting—several alternative site configurations have been proposed and evaluated. No feasible sites have been acceptable to all stakeholders in the project.

At the same time, DCYF has been examining the academic, behavioral and correctional treatment programs provided to juveniles remanded to the RITS. A study has been completed of other approaches used in juvenile corrections in other states, with positive results. The ultimate goals of Rhode Island's juvenile corrections program are to address the underlying causes of delinquency, assisting youth to develop new behavior patterns appropriate to their environment, and eliminate recidivism for youth who are discharged from our programs.

This proposal begins with a look at the youth who are now present in the RITS programs and those who are projected to be consigned to our programs through 2010. We then look at the treatment program changes we believe should be implemented. These changes require legislative action in part. Finally, we look at the facilities and staffing implications of these program changes, including a new concept for siting of juvenile correctional facilities.

## Project Objectives

### *An historic opportunity*

The Rhode Island Training School faces two critical challenges. The present facility is outmoded, inefficient and unsafe. It does not meet state fire codes, the living quarters are in shambles and on-going maintenance costs are soaring. The facility does not meet national American Correctional Association (ACA) accreditation Standards. The Federal Court Suit Consent Agreement required that new facilities be built several years ago. If new facilities are not started soon, we face the potential of court-imposed fines or other sanctions. In his most recent review the Special Master says:

*The original consent decree in this was entered over 30 years ago. It was updated by the parties and the Special Master in October of 2000. At the request of the parties, the Special Master conducted a compliance review and issued a report in June of 2001 (2001 Report) and again in July of 2002 (2002 Report) to determine whether the provisions in the decree were satisfied. More recently the parties and the Special Master agreed that the time was ripe for the issuance of another comprehensive report. What follows, then, is an assessment of the defendants' compliance since the July 2002 report.*

*The findings in this report are similar in some respects to those reported in 2001 and again in 2002. The defendants remain out of compliance with only a few essential elements of the consent decree, but they remain genuinely committed to doing whatever is needed to achieve compliance. The continued physical deterioration and obsolescence of the facility, however, thwarts their best efforts.<sup>1</sup>*

The second challenge is even more disturbing and vital. The present facilities do not provide any meaningful transition program to enable delinquent youths to continue their rehabilitation in the community. In fact, the RITS has become a primary training ground for the ACI – not because of RITS staff or programs, but

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<sup>1</sup> “Report of the Special Master”, by Matthew A. Lopes, Jr., U.S. District Court in reference to *Inmates of the Rhode Island Training School for Youth vs. Jay G. Lindgren, Jr. et al*, March 2004.

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because many youths who go to the RITS develop new “friends”, then learn new tricks from their peers. Many RITS residents are in and out of the facility from their early teen years until they reach their majority.

Although there are no firm data on the issue, early returns from studies conducted by Yale University researchers show recidivism rates at RITS ranging from 32.5% after one year of release to as high as 64% within four years. Within four years of release, almost two-thirds of RITS residents are re-incarcerated in either the RITS or the ACI. The rehabilitation outcomes are embarrassing. Based on these negative outcomes, much of the RITS expenditure is not providing rehabilitation.

Yet, the social workers and other clinical staff are well-trained and well-motivated; the RITS school is close to attaining national certification. Huge strides have been obtained in recruiting a diverse and well-educated corps of juvenile program workers. Contracted private agency programs focusing on substance abuse, sex offenders, anger management, personal and family counseling, arts, music and other activities are offered daily at the RITS.

The major impediment to community success is the lack of any transitional, re-entry program to guide and support delinquent youth when incarceration is complete. Most youth are well-behaved and compliant at the RITS; many outsiders who visit are astonished by the demeanor of the vast majority of our youths. Managing a youth correctional institution that is safe for youth and staff without overly oppressive practices is a major accomplishment.

The return to the community is another story. There is seldom a comprehensive plan agreed to by all parties. While probation and parole officers follow these young people once they are returned to the community, all too often these youth are returned to the same circumstances that caused them to run afoul of the law in the first place. To exacerbate matters, public schools often do not welcome the returnees. Local agencies (police, recreation and neighbors) see the returnees as trouble. Too often, only gang members or fellow delinquents are welcoming to these returning youngsters.

Research tells us that some of the strongest predictors of delinquent behavior are one's peers<sup>2</sup> and lack of appropriate parental or other adult sponsorship and monitoring.<sup>3</sup> If you hang out with violators, there is a high probability that you will become a violator. Usually, delinquents sent to the RITS have a history of association with anti-social peers. This history is strengthened by incarceration with older and more serious offenders. When these residents go back home, often the only welcoming committee is comprised of the original delinquent peer group. Parents need to be involved in the rehabilitation

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<sup>2</sup> “The Peer Influence Paradox: Friendship Quality and Deviancy Training within Male Adolescent Friendships” by Thomas J. Dishion, Eric Hoas, Francois Poulin; *Merrill-Lynch Quarterly*, vol. 45, 1999.

<sup>3</sup> *Unlocking the Future*, Coalition for Juvenile Justice, 2003 Annual Report, Washington, D.C.

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process, especially at transition points. If parents are not available, surrogate adult monitoring systems must be engaged. The opportunity to address these challenges is present-the \$69 million capital funding request for a new RITS provides that historic opportunity to develop new facilities and devise a system that will enhance transition planning. Research also tells us that re-socialization programs and well- designed transition programs will improve the chances for success for delinquents returning to the community.<sup>4</sup>

The RI General Assembly has refused to endorse an earlier proposal to construct new RITS facilities on parcels 4 and 5 of the Pastore Complex. Therefore, DCYF has worked with other state agencies to develop a new proposal, including new sites. We are proposing a multi-site program to include approximately 250 beds.

The state will seek future General Assembly approval to construct a 50,000 to 70,000 square foot DCYF central administration building to be co-located on site with the Youth Assessment Facility. This will save the state substantial lease dollars now being spent in Providence. It will allow easier access by parents, staff and public or private agency staff to the administrative and business office staff of DCYF. It should also provide improved efficiency by having certain clinical, support and probation office staff in close proximity to the department's main 24 hour a day facilities. Certain 24 hour call phone centers (CANTS, RITS, Probation) will be combined for efficiency purposes.

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<sup>4</sup> Unlocking the Future, Coalition for Juvenile Justice, 2003 Annual Report, Washington, D.C.

## Populations at Risk

*DCYF commissioned two independent studies projecting future RITS populations.*

The first need in any services evaluation is to understand the population you are serving. With this in mind, DCYF asked two organizations with solid experience in the field to provide projections of future populations at the RITS, over a ten-year planning horizon. The National Council on Crime and Delinquency (NCCD) prepared the first projections. NCCD used statewide population projections prepared by the State Division of Planning, by age cohort, residence and ethnicity to forecast future populations of those youth considered to be most “at risk” of entering the juvenile correctional system. Data extrapolated from these projections are included attached as Table 1.

Table 1 shows projected admissions to RITS, based on demographics of the current RITS admissions, over a ten-year planning horizon. The ten communities specifically called out are the ten communities with the highest rate of admission to RITS. Together, juveniles from these communities comprise 80% of the detention admissions and 83% of the adjudicated admissions managed at RITS on an annual basis.

The second forecast was conducted to parse projected admissions data into resident projections—to determine the architectural bed counts required to accommodate future RITS residents. International Partnership for Youth (IPFY), the program consultant who prepared this study, examined case files for current RITS residents to project how the projected admissions populations would translate into resident populations—by age cohort, sex, and treatment needs. Data extrapolated from IPFY’s study are provided as Table 2.

Table 2 foresees a 7% increase in the RITS population levels from 2004 to 2012, with the largest percentage increase in the adjudicated female population, and the largest numeric increase in the 17-18 year male population—already the largest cohort at the RITS.

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Admission Forecast	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
<b>DETENTION</b>	<b><u>785</u></b>	<b><u>799</u></b>	<b><u>813</u></b>	<b><u>827</u></b>	<b><u>841</u></b>	<b><u>855</u></b>	<b><u>869</u></b>	<b><u>883</u></b>	<b><u>897</u></b>	<b><u>911</u></b>	<b><u>925</u></b>
Providence	307	314	322	329	337	344	352	359	367	374	382
Pawtucket	83	84	86	87	88	90	91	92	93	95	96
Woonsocket	55	55	55	56	56	56	56	57	57	57	57
Central Falls	36	36	36	37	37	37	37	37	37	38	38
Cranston	31	32	33	34	34	35	36	37	38	39	40
Warwick	30	30	31	31	31	31	32	32	32	32	33
Newport	24	24	25	25	25	25	26	26	26	26	27
East Providence	23	24	26	27	28	29	31	32	33	35	36
North Providence	19	20	21	23	24	25	26	27	28	30	31
West Warwick	17	17	17	17	18	18	18	18	18	18	18
Other	160	161	162	162	163	164	165	165	166	167	168
<b>ADJUDICATED</b>	<b><u>307</u></b>	<b><u>313</u></b>	<b><u>320</u></b>	<b><u>326</u></b>	<b><u>332</u></b>	<b><u>339</u></b>	<b><u>345</u></b>	<b><u>351</u></b>	<b><u>358</u></b>	<b><u>364</u></b>	<b><u>370</u></b>
Providence	134	137	141	144	148	151	155	158	161	165	168
Pawtucket	30	31	31	32	32	33	34	34	35	35	36
Woonsocket	25	25	25	25	25	25	25	25	25	26	26
Central Falls	15	15	15	16	16	16	16	16	17	17	17
Cranston	9	9	10	10	10	11	11	11	11	12	12
Warwick	10	10	10	11	11	11	11	11	12	12	12
Newport	8	8	8	8	8	8	9	9	9	9	9
East Providence	6	6	7	7	8	8	9	9	10	10	11
North Providence	8	9	9	10	10	11	11	12	12	13	13
West Warwick	8	8	8	8	8	8	8	8	8	8	8
Other	54	54	55	55	56	56	56	57	57	57	58

Table 1: NCCD Admissions Forecasts for RITS

Data derived from: National Council on Crime and Delinquency. *Rhode Island Department of Children, Youth and Families Training School Population Forecast 2002-2011*. Oakland, CA: April 2002.

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Population Forecast (IPFY)	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
<b>MALE</b>	<u>196</u>	<u>198</u>	<u>200</u>	<u>201</u>	<u>203</u>	<u>205</u>	<u>207</u>	<u>209</u>	<u>210</u>	<u>212</u>	<u>213</u>
<b>Detention (Mean LOS=32)</b>	<u>48</u>	<u>48</u>	<u>48</u>	<u>48</u>	<u>49</u>	<u>49</u>	<u>49</u>	<u>49</u>	<u>50</u>	<u>50</u>	<u>50</u>
Short Term (1 hr - 3 days)	12	12	11	11	11	11	11	11	11	11	11
Mid-Term (3 - 30 days)	20	20	20	20	20	21	21	21	21	21	21
Long-Stay (over 15 days)	16	17	17	17	17	17	17	17	17	17	17
Projected High Peak	46	47	47	47	47	48	48	48	48	49	49
Projected Low Peak	39	40	40	40	40	41	41	41	41	41	42
<b>Adjudicated</b>	<u>148</u>	<u>150</u>	<u>151</u>	<u>153</u>	<u>155</u>	<u>156</u>	<u>158</u>	<u>159</u>	<u>161</u>	<u>162</u>	<u>163</u>
Substance Abuse (Mean LOS=103)	24	24	24	25	25	25	25	26	26	26	26
Maximum Custody (Mean LOS=85 days)	25	25	25	26	26	26	27	27	27	27	27
Other (Mean LOS=93 days)											
15(-) years	15	15	15	15	15	15	16	16	16	16	16
16 years	23	23	23	24	24	24	24	25	25	25	25
17-18 years	53	53	54	55	55	56	56	57	57	58	58
19(+) years	9	9	10	10	10	10	10	10	10	10	10
<b>FEMALE</b>	<u>25</u>	<u>25</u>	<u>26</u>	<u>26</u>	<u>26</u>	<u>27</u>	<u>27</u>	<u>27</u>	<u>28</u>	<u>28</u>	<u>28</u>
<b>Detention (Mean LOS=10)</b>	<u>8</u>	<u>9</u>	<u>9</u>	<u>9</u>							
Short Term (1 hr - 3 days)	4	4	4	4	4	4	4	4	4	4	4
Mid-Term (3 - 30 days)	3	3	3	3	3	3	4	4	4	4	4
Long-Stay (over 15 days)	1	1	1	1	1	1	1	1	1	1	1
Projected High Peak	8	8	8	8	8	8	8	8	9	9	9
Projected Low Peak	6	6	6	7	7	7	7	7	7	7	7
<b>Adjudicated (Mean LOS=69)</b>	<u>17</u>	<u>17</u>	<u>18</u>	<u>18</u>	<u>18</u>	<u>18</u>	<u>19</u>	<u>19</u>	<u>19</u>	<u>19</u>	<u>20</u>
Supervised Release Violation	3	3	3	3	3	3	4	4	4	4	4
Other	14	14	14	15	15	15	15	15	16	16	16
<b>MEAN POPULATION FORECAST</b>	<u>221</u>	<u>223</u>	<u>225</u>	<u>227</u>	<u>230</u>	<u>232</u>	<u>234</u>	<u>236</u>	<u>238</u>	<u>240</u>	<u>242</u>
Projected High Peak	224	226	229	231	234	236	239	241	243	244	246
Projected Low Peak	216	218	221	223	225	228	230	232	234	235	237

Table 2: RITS Population Forecast (IPFY)  
 Data derived from: International Partnership for Youth. *Bed Space Analysis*. Demarest, NJ: July 2, 2002.

## Treatment Model

*An outline of the deficiencies of the current model of care, and the new treatment modalities proposed to correct them.*

When the current RITS facility was constructed, in the late 1960's, the facility plan envisioned a model system of care. In the decades since, while our understanding of juvenile corrections and rehabilitative therapy has advanced, our system of care has regressed, in response to budget cuts, short term needs, and high turnover in the Division of Juvenile Corrections.

The 1960's plan envisioned separate facilities for girls and boys. The Girls' Training School was located in three buildings south of Rt. 37—a residence for girl's detention, a residence for adjudicated (sentenced) girls, and a school, now known as the Marjorie Sundlun Building. The Boys' Training School was centered in a group of buildings located north of Rt. 37, on Power Service Road, and originally continued to use parts of the original 1920's Boys Training School—particularly the gymnasium, pool, and some of the educational space. The programs were independent. Boys and girls did not mix. This is one of the tenets of good management of juvenile correctional populations. The girls in our system are here primarily for substance abuse or prostitution. They are as much victims as offenders; they tend to have low self-esteem. Often the male juveniles at RITS are the victimizers, or are at least males with those same tendencies. Successful treatment of the juvenile females is better accomplished in an environment that does not include the stresses that can be induced in an overwhelmingly male environment. Over time, a number of the females were sent to outside treatment programs, since their population was insufficient to provide required programs for girls with special needs. The reduced population of girls was insufficient to support even an independent school program, so the girls' school program was merged with the boy's school program, putting them together for much of the day. Today, the girls' population is reduced to the point where the girls in detention are housed with the adjudicated girls in one unit. It is not considered good practice, and is contrary to ACA accreditation standards, to merge populations of juveniles who have not been to court and may not be remanded to juvenile correctional programs, with juveniles who have been adjudicated and are in treatment here. The former girl's school is now a maintenance facility. One of the girl's residences has been converted to house an overcrowded boys population.

The 1960's Boys' Training School was planned around a series of cottages. The boys were intended to live grouped with similar boys in a cottage community, by age, by difficulty, and by treatment need (maximum security, sexual offender, substance abuse, etc.) While the cottage concept still continues, the segregation of vulnerable populations from more hardened juveniles, and the segregation by treatment modality, has broken

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down due to overcrowding. Many of the males in maximum security, for instance, are difficult to handle, but are not serious offenders. Fourteen and fifteen year old boys at RITS for simple assault mix with nineteen and twenty year-olds there for serious sex offenses. In part, the program always promoted more mixing of populations than desirable, since the boys always shared a common school. In the 1980's, several modular buildings were erected to deal with what was perceived to be a temporary blip in the male population. These units have expended their useful design lives.

While there is an attempt to maintain juveniles in appropriate treatment units, this is hindered by detailed court supervision of juvenile placement. In current best practice, juvenile facilities are considered primarily a mission of “rehabilitation” rather than “correction”. Juveniles are not “sentenced”, they are “placed”. The determination of proper placement should consider their progress through phases of academic, behavioral and correctional therapy. Appropriately trained and certified teaching, social work and program staff should assess this progress. Under the current model, placement is determined primarily by attorneys—sometimes with appropriate professional input; sometimes not.

## The Resocialization Program

In pursuit of better treatment options, DCYF has examined the juvenile programs in place in many states. We have spent particular time working with the Texas Youth Division (TYD) to understand and refine their ABC Phase Assessment Resocialization Program (ABC) to our needs in Rhode Island. TYD has been generous with their time and extremely helpful to us in this project—hosting us at their facilities in Texas, visiting our facilities in Rhode Island, sharing their program materials. They have assisted us in developing training in ABC for our staff. At this point, the program staff at RITS has been trained in the concepts of ABC. We believe ABC provides more appropriate treatment for juveniles, with better outcomes than the methods that have been traditional at RITS.

Under ABC, youth are evaluated and placed in programs at appropriate phases. Completion of a Phase is rewarded with higher skill activities and increased privileges. Phase Assessment is completed monthly to evaluate treatment progress, develop treatment plans and provide frequent feedback to youth, staff and families.

*Youth are expected to make progress by learning to use specific skills (Positive Skills, Offense Cycles), behaving in specific ways (following rules, completing assignments, cleaning their personal areas) and internalizing specific concepts (values, empathy).*

*Progress is rarely smooth, and some youth will progress quickly in some areas and slowly in others. Youth may make progress, and then have set backs. Frequent assessment allows the fine-tuning of treatment strategies and provides opportunities for short-term feedback, suggestions and encouragement to youth and their families.*

*Although a youth may lose Phase objectives and be “demoted”, the demotion is not a punishment. It is a part of a check and balance system designed to ensure accurate assessment. As youth internalize components, there are changes in their outward behavior. The evidence of the internalization is seen in these changes. When youth on the more advanced Phases behave in ways suggesting they have not internalized a key component, they may be re-evaluated and lose credit for that component. This is not to punish the behavior, but to allow re-focusing on the component and helping the youth with the difficult process of internalization.<sup>5</sup>*

Youth are evaluated in three key areas:

**ACADEMIC/WORKFORCE DEVELOPMENT.** The student shows progress in academic or employment skills, passing all required tests and/or meeting employer requirements based on ability. Required assignments are appropriately completed.

**BEHAVIOR.** Youth learns the rules of conduct and shows progressive reduction in the number and severity of rule violations.

**CORRECTIONAL THERAPY.** Youth develops an understanding of the Offense Cycle, learns to internalize Thinking Errors, Empathy and Values through layout of a Life Story, develops and implements a Success Plan to implement Positive Skills.

Youth in the Resocialization Program are evaluated by a Phase Assessment Team consisting of staff familiar with the youth—the Juvenile Program Supervisor, an Educator, and the Clinical Social Worker. The staff prepare a report on the youth using a defined metric outlining progress expectations in each of the three key areas of evaluation. In the Rhode Island System, we propose that youth recommended for reclassification as a result of Phase Assessment be confirmed and assigned by action of the DCYF Reclassification Board. Placement, and ultimately, release of the juvenile would be determined by the Phase Assessment Team confirmed by the Reclassification Board, rather than by the Family Court. This is an important concept, key to success of the Resocialization concept—youth need to understand that their advancement in the program, and ultimately their release, depends on their progress in achieving program goals, not on their attorney’s skill before the Court.

Youth in ABC can earn placement in progressively less restrictive facilities, and earn higher levels of privilege within the facility. When they demonstrate that they have achieved satisfactory progress in the areas of evaluation, they can earn placement in the community.

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<sup>5</sup> Texas Youth Commission. *ABCs of Phase Assessment*. November 2001.

## Facility Implications

*How facilities can be shaped to support the goals of Resocialization training.*

The facilities at the RITS have been determined by the Federal court to be deficient and to require replacement. As we plan those new facilities, they will be planned to support the goals of the Resocialization program.

First, we recognize that many of the youth at the RITS are young and/or are placed here for minor offenses. These youth require supervision and training, but they do not require the full institutional program offered at RITS. We propose to place these relatively low-risk youth in community-based facilities close to the neighborhoods they come from. Based on a study of the communities of origination for RITS youth, these facilities would be from eight to twelve beds, generally staffed by two Juvenile Program Workers (JPW). Social workers and nurses would visit the facilities. Students would, to the extent possible, continue to attend local schools, but would wear electronic ankle bracelets to be tracked and would return to the community facility after school each day. Probation and parole officers would be based in these facilities. They would have an opportunity to work with and begin to know these youth from the day they entered the facility, so that a relationship would already be established and a plan worked out by the time youth left the facility on parole. Based on studies of the origin of RITS admissions (see Table 1), we tentatively expect that three of these facilities would be located in the Providence/Cranston area, with one each located to serve Pawtucket/Central Falls, Woonsocket, Warwick/West Warwick, and Newport. These seven facilities would house approximately 70 of the juveniles who otherwise would come to the RITS. The community facilities will provide much more appropriate programming and transition for low risk juveniles. In the future, it may be desirable to develop facilities in the South County and East Bay areas.

Other youth have more serious offenses in their background, or require special treatment programs. These youth would be housed in the new Youth Development Facility (YDF) to be constructed on Parcel 5 in the Pastore Center, located on current RITS property just south of Rt. 37. This unit would consist of 96 beds in four units of 24 beds. One unit would house youth with sex offense violations. One would house youth with chemical dependency issues. One would replace the current maximum security unit. The final unit would house a mixed population—youth above 18 years of age still in RITS facilities—typically sentenced as juveniles for serious offenses and held up to the age of 21, as well as hard-to manage younger students requiring medium security housing. We have found that, in many cases, older youth who have participated and internalized the ABC goals can act as mentors for younger juveniles, accelerating their progress through the program. The

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YDF facility could be expanded to meet future needs by adding up to two additional housing units (48 beds) on the second floor of the facility. It may prove preferable to develop additional capacity on an alternative site.

All youth in the YDF would participate in the ABC program. As they progress, they can earn better housing options—from maximum to medium security, for instance, or from maximum to a needed chemical dependency program. They can also earn increased privileges—more family visits, friend visits, later hours, more telephone calls. Ultimately, our goal is to develop all youth to the point where they can learn positive behavior patterns to return to the community. At this point, the community facilities will be a valuable resource to help them transition into the community. Rather than simply sending them home at the end of their sentence—which is what now occurs, youth demonstrating internalization of the ABC program goals would first be reclassified to the appropriate community facility near their home during their last months. There, under close staff supervision, they would begin to return to school, or to work, demonstrating that they can live by the ABC precepts in the community, and only then, having demonstrated their ability to live in the community, would they be released to the community. Youth who fail to demonstrate an ability to use the skills taught in ABC would be reclassified to a more restrictive level of care until those lessons were better learned.

#### **Community Transition Facilities**

These would be located in non-residential zones and they would be treatment-based, allowing Medicaid reimbursement. Most would be state operated; depending upon staff availability after the new Youth Assessment and Youth Development facilities are staffed.

Community Transition Facilities will be expected to meet JCAHCO standards (Joint Council on the Accreditation of Health Care Organization) or other national accreditation criteria in order to obtain Federal Medicaid reimbursement.

These community facilities would not be locked, but would be “staff secure”, meaning that staff would be responsible for the whereabouts of each resident. High tech supports, such as video cameras, electronic monitoring devices, cell phones, scheduling devices and the like would be available to assure resident accountability. Eligibility for participation in the Community Transition Facilities would be solely determined by the Reclassification Board, reporting to the RITS Superintendent. Careful use of risk assessment instruments will be required. No youngster with serious sex offences, other serious assaults or weapons violations would be eligible to start their treatment in these community settings. Such juvenile offenders would go to the RITS first. However, these community facilities will not be considered correctional settings; their purposes are treatment and reintegration to the community.

Good behavior, program compliance, demonstration of competence on treatment goals and commitment to a personal transition plan by any RITS resident would constitute eligibility for participation in these Community Transition Facilities. It is anticipated that most RITS residents would spend the last 1-3 months of their treatment—before release—in these community transition settings. The exceptions would be serious offenders who are treatment resistant or non-compliant while at the RITS. Final decision-making regarding placement must rest with the Reclassification Board. Chief Judge Jeremiah of the RI Family Court has indicated that DCYF and Family Court can develop an administrative agreement to implement this process.

Probation and parole officers will be assigned to each transition facility in the community to guarantee close supervision, and enhance successful transition for each resident. Transition activities will focus on developing

an appropriate place to live, if the resident cannot return home and on admission or readmission to a high school for those residents who do not have a diploma or GED. Those who have completed secondary school will be expected to attend post-graduate training or education, or secure a job. The probation officer will facilitate planning and implementation for each resident. Such programs as Project Hope, CASSP, CIS and other community based and residential services for children and their families will be accessed as needed by individual youth returning to their homes and neighborhoods. This will help to establish the relationships that are necessary for proper support as youth begin their transition back to the community.

#### **Youth Assessment Center**

The vast majority of youth brought into detention are held for less than three days. There tends to be a population bulge over the weekend, as youth picked up Friday and Saturday are held for Monday arraignments. Only 15 percent are held more than 15 days in detention.<sup>6</sup> These tend to be the more serious offenders, who are held during trial and have more extended trials.

The goals of detention are to begin to classify and understand the treatment needs of the youth who are brought here, to provide suitable academic, social and treatment placement, to introduce them to the ABC program, and to begin rehabilitative treatment. Youth in detention begin a program of academic study, physical exercise and group therapy structured to prepare them for RITS programs.

DCYF will construct a new Youth Assessment Facility (YAF) on the corner of Howard Avenue and Slate Hill Road in the Pastore Complex.. The YAF will house 52 beds—a 24 bed Intake Unit, a 24 bed Mid and Long-Stay Unit for more serious offenders, and a four bed extension to the Mid and Long Stay Unit for youth in detention who require maximum security holding. The YAF can be expanded by one housing unit (24 beds) if required for future population growth.

The Youth Assessment Center is a superior site for detention services. Since youth and their families are introduced to the Rhode Island juvenile justice system through the YAC, this location at the entrance to the Pastore Complex, immediately off New London Avenue and on the major bus route through Pastore will be readily accessed by families, attorneys, judges, and community police. Because of the high turnover rates at YAC, it has significantly more outside traffic than other RITS facilities, making ease of access a significant concern. From a campus development point of view, this section of Pastore is underutilized. The required land area is comparatively easy to dedicate to this use, and there is significant unutilized parking capacity adjacent to the site, which may be converted to RITS use.

#### **Youth Development Center**

The Youth Development Center will be constructed on Parcel 5, which has had some controversy. This plan does, however, reduce the population on the site from 228 to 96. With concomitant reductions in facility size and parking, we believe the site will be appropriate for this population. This plan also eliminates the need to use land north of Rt. 37, which is opposed by the City of Cranston.

The Federal Court Consent Decree requires the state to obtain American Correctional Association (ACA) accreditation for the new facilities. Separation of the two populations (detention and adjudicated youth) is required, as is line of sight relief from adult facilities. This relief can be obtained via landscaping. ACA

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<sup>6</sup> International Partnership for Youth. *Bed Space Analysis*. Demarest, NJ: July 2, 2002.

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standards require each facility to hold less than 150 persons; this design meets that standard. Public access to these two facilities will be available via RIPTA bus route to the Pastore Center.

Female populations are not included in the above plans. After serious consideration, DCYF has concluded that the numbers of females in RITS programs are not adequate to support the types of programming these females require and should be provided. DCYF proposes to outsource the female programs to third-party providers who are better equipped to provide this programming. This approach is further explained in the following section.

## Female Programs

*The following discussion outlines DCYF's plan to improve the delivery of services to females referred to juvenile corrections through third party service support*

This recommendation separates males and females, along with the suggestion that the very small girl's program be privatized. This would entail advertising for and selecting a private vendor to operate approximately 20-25 beds for girls. Five beds would be for detention, and there would be five secure beds for adjudicated, court-committed girls. Another 10 beds would be treatment beds for the girls returning from the secure setting, or as an alternative to incarceration. This approach is based upon a multi-year training and program development effort funded by the Governor's Justice Commission. The new design is grounded in cutting edge research findings and best practice models.<sup>7</sup>

Present RITS staff now serving the girls would be transferred to RITS service components for boys. There would be no lay off. The state would commit not to privatize any additional RITS components.

DCYF has consulted with several private providers in developing this proposal to confirm that providers are willing and capable of providing these services under DCYF supervision and to DCYF specifications.

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<sup>7</sup> "Capacity Building: Developing a Gender Responsive Justice System for Young Women in the State of Rhode Island," Alyssa Benedict, MPH, CORE Associates, January 2003.

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## Community Programs

*The following existing and proposed programs will engage youth in the Community Transition Facilities and further support reintegration on release.*

### **Project Hope**

An example of the community programs available to the residents of RITS is Project Hope. Project Hope is a federally-unded state initiative designed to address the multiple needs of adjudicated youth with serious emotional disturbances through the development of a flexible community-based service system that incorporates key program elements from best practices in children's mental health and juvenile justice. It is founded on guiding principles that recognize the importance of advocacy for strength-based practices and family involvement in decision-making. Services provided are community based, family-centered and culturally competent.

Project Hope is administered by the Department of Children, Youth and Families, Division of Children's Behavioral Health and Education. DCYF channels Federal funds to the community through contracts, building upon the interagency and clinical infrastructure already established in the state's eight (8) mental health catchment areas.

Community based services available to youth include therapeutic recreational activities, job and life skills assessment and preparation through the Jobs for Ocean State Graduates Program, educational advocacy, tracking, mentoring, and other non-traditional services as requested by the youth and family.

Youth who participate in Project Hope may be returning home to a parent or relative, may be discharged to a shelter, group home facility, or may enter an independent living arrangement in the community. Following discharge, the youth may or may not have continued DCYF involvement with probation and/or child welfare. Youth must have a diagnosed or diagnosable serious emotional disorder, be in need of multiple, coordinated services, and be willing or have parental permission to participate in this voluntary program.

Project Hope services are available to adjudicated youth completing their sentence at the RITS, transitioning back to the community and their families. Services are accessed through a monthly transitional meeting held at the RITS. Youth are referred by a multi-disciplinary team including the RITS Clinical Director, RITS Clinical Social Workers, Project Hope Supervisors, CIS clinical staff, TIDES outreach and tracking, AS220 and Parents Support Network. Participants at this meeting review all adjudicated youth scheduled for discharge during the next 90-120 days. If a youth is considered appropriate, the RITS Clinical Social Worker generates a referral to

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the local community Project Hope site. The 90-120 days lead time allows the Family Service Coordinator (FSC) of the Project Hope staff adequate time to get to know the youth and family prior to developing a service plan with them. The FSC is employed by the program and fiscal agent. An FSC is someone who has been a caregiver for a youth with a serious emotional disturbance and who has experience with the RITS or other correctional facility. The FSC has extensive knowledge of, and experience in negotiating the social service and educational systems in the area.

Following initial contact with Project Hope, the FSC meets with the youth and family member to conduct a strength based assessment and discuss what services will be essential in assisting the youth to remain in the community, avoiding re-incarceration. A Community Planning Team/Child and Family Team meeting composed of the youth, the parent/caretaker, RITS Clinical Social Worker, the informal support network, and significant community providers (including but not limited to the youth's mentor, job coach, and clinician) takes place, preferably prior to discharge, for the development of a youth specific service plan. The Project staff work closely with Safe Streets and Juvenile Probation Officers. The Family Service Coordinator ensures implementation of the plan through on-going contact with the youth, the youth's family, and service providers that are included in the plan. This contract is provided to the youth and family during the period when the youth is concluding their sentence at the RITS and for a period of nine (9) to twelve (12) months following discharge.

Throughout the term of the youth's involvement, this planning team is brought back together to change or modify the youth's plan as needed or desired by the youth and family. Services and supports are funded through traditional resources such as Medicaid and other insurance programs, and non-traditional resources such as wrap-around funding.

Project Hope has been cited as a "Promising Practice" by the Office of Juvenile Justice and Delinquency Prevention (OJJDP).

### **URI Transitional High School**

DCYF is working with the University of Rhode Island to develop a high school to facilitate the transition of youngsters, especially focused on the Greater Providence area. This program is still in developmental stages, but shows promise for overall improvement. We also expect to work closely with the RI Department of Education, regional collaborative programs and local schools to assure educational opportunity for returning youths.

### **Reentry Court**

The Rhode Island Family court is partnering with DCYF in offering the Re-entry Court, a transitional program closely tied to the "Safe Streets" program. This allows close supervision by the court and by our probation officers for high-end violent offenders presently returning to Providence. The program is being expanded to Pawtucket. This is a promising experiment which should lead to new discharge planning processes.

## Implementation Costs

*The table below provides a summary of expected implementation costs for the proposed reconfiguration. These costs include provision for costs already expended on project implementation.*

**\$ 66,499,436**

<b><u>Land and Building(s)</u></b>	<b><u>2,850,000</u></b>
Land Acquisition	2,100,000
Existing Building(s) Acquisition	0
Demolition	450,000
Site Preparation	300,000
Special Utility Costs	0
Pre-Construction Carrying Costs	0
Other	0
<b><u>Architectural and Engineering Services</u></b>	<b><u>6,619,907</u></b>
Building Design Contract	4,788,907
A/E Reimbursable Expenses	428,000
Alternative Delivery Study	95,000
Geotechnical Engineering	55,000
Telecommunications Consultant	60,000
Information Technology Consultant	200,000
Survey, Topography/Boundary	112,000
Archaeological Consultant	40,000
Tribal Consulting	20,000
Environmental Engineering	141,000
Other Design Consultant	240,000
Other Engineering Consultant	240,000
Materials Testing	200,000

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**Construction** **47,378,000**

Construction Contract--New	37,663,000
Construction Contract--Renovation	0
Construction Phasing	215,000
Design Contingency	2,207,000
Construction Contract Contingency	1,391,000
Change Orders	1,910,000
Builder's Risk/Liability Insurance	50,000
Furnishings, Fixtures and Equipment	2,392,000
Telephone / Data / Video Systems	429,000
Information Technology	540,000
Artwork: 1%	25,000
Building Signage / Interior Graphics	54,000
Building Permit	497,000
RIDEM Permits	5,000

**Presentation** **28,000**

Public Relations	20,000
Site Sign	3,000
Rendering / Model	5,000

**Financial** **641,900**

Debt Issuance Cost	145,000
Bond Insurance Premium	161,400
Underwriter's Discount	335,500
Capitalized Interest	0

**General and Administrative** **8,981,629**

Project Supervision	5,364,037
Travel, Expenses, Shipping	25,000
Document Reproduction	40,000
Legal Fees--Real Estate	20,000
Legal Fees--Financing	15,000
Legal Fees--Labor	20,000
General Project Contingency	3,497,592