Committee Meeting

of

ASSEMBLY REGULATORY OVERSIGHT COMMITTEE

“Review the status of removing adjudicated juveniles with mental illness from juvenile correctional facilities to provide them with mental health treatment, a continuation from January 13, 2005; also review the status of the Department of Human Services, Division of Developmental Disabilities regulations to implement ‘Danielle’s Law’”

LOCATION: Committee Room 9
             State House Annex
             Trenton, New Jersey

DATE: June 16, 2005
      10:00 a.m.

MEMBERS OF COMMITTEE PRESENT:

Assemblyman William D. Payne, Chair
Assemblyman Joseph Cryan, Vice Chair
Assemblyman Douglas H. Fisher

ALSO PRESENT:

James F. Vari  Elizabeth Stone  Thea M. Sheridan
Office of Legislative Services  Assembly Majority  Assembly Republican
Committee Aide  Committee Aide  Committee Aide

Meeting Recorded and Transcribed by
The Office of Legislative Services, Public Information Office,
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Position</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senator Thomas H. Kean Jr.</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Kathryn Way</td>
<td>Deputy Commissioner</td>
<td>4</td>
</tr>
<tr>
<td>Howard L. Beyer</td>
<td>Executive Director</td>
<td>43</td>
</tr>
<tr>
<td>Lisa Macaluso</td>
<td>Director</td>
<td>60</td>
</tr>
<tr>
<td>Kevin M. Ryan, Esq.</td>
<td>Child Advocate</td>
<td>69</td>
</tr>
<tr>
<td>Terri Wilson</td>
<td>Deputy Commissioner</td>
<td>95</td>
</tr>
<tr>
<td>James M. Evanochko</td>
<td>Administrative Practice Officer</td>
<td>101</td>
</tr>
<tr>
<td>Diane Gruskowski</td>
<td>Mother</td>
<td>106</td>
</tr>
<tr>
<td>Robin M. Turner</td>
<td>Aunt/Guardian</td>
<td>109</td>
</tr>
</tbody>
</table>
## APPENDIX:

<table>
<thead>
<tr>
<th>Testimony submitted by</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kathryn Way</td>
<td>1x</td>
</tr>
<tr>
<td>Letter, plus attachments addressed to</td>
<td>5x</td>
</tr>
<tr>
<td>James M. Evanochko</td>
<td></td>
</tr>
<tr>
<td>submitted by Kevin M. Ryan, Esq.</td>
<td></td>
</tr>
<tr>
<td>Testimony, plus attachments submitted by</td>
<td></td>
</tr>
<tr>
<td>Diane Gruskowski</td>
<td>13x</td>
</tr>
<tr>
<td>Testimony, plus attachments submitted by</td>
<td></td>
</tr>
<tr>
<td>Robin M. Turner</td>
<td>24x</td>
</tr>
<tr>
<td>Testimony submitted by</td>
<td></td>
</tr>
<tr>
<td>Margaret Griscti</td>
<td></td>
</tr>
<tr>
<td>Private Citizen</td>
<td>28x</td>
</tr>
</tbody>
</table>

Imb: 1-112
ASSEMBLYMAN WILLIAM D. PAYNE (Chair): Good morning. We are about to start this hearing. May I have your attention, please? I apologize for not having sufficient chairs here. I didn’t know that there would be this much interest in these topics. However, we are going to have a follow-up on a hearing that we had on January 13, regarding the topics that are on the agenda today. One has to do with adjudicated juveniles with mental illness that are being housed -- were being housed in juvenile detention centers. And secondly, we will have a hearing to discuss the status of the regulations that have been reproposed on Danielle’s Law.

However, before we do that, we’d like to call the roll.

MR. VARI (Committee Aide): Assemblyman Fisher.

ASSEMBLYMAN FISHER: Here.

MR. VARI: Vice Chairman Cryan.

ASSEMBLYMAN CRYAN: Here.

MR. VARI: Chairman Payne.

ASSEMBLYMAN PAYNE: Here.

Thank you.

We will deal with the adjudicated juveniles with mental illness issue first. My name is William Payne, and I’m the Chairman of the Assembly Regulatory Oversight Committee. Those of you who have been following this issue and are aware of the work that we’ve been doing know that we have some very, very deep concerns about many of the youngsters in the State of New Jersey, and other people who are disadvantaged. Much attention has been given to this area of mental illness and developmentally disabled people, etc., and this current administration, led by Governor Codey, has underscored even more the importance of, and the
responsibilities that we feel, that we as public officials and legislators and administrators have toward all the citizens of the State of New Jersey; and in this instance, particularly with those people who are either -- are disadvantaged in our society.

We will have testimony today from people -- Kathryn Way, the Deputy Commissioner of the New Jersey Department of Human Services; Howard Beyer, who will also testify regarding the status of the detention centers and the JCC; and then we’ll have Kevin Ryan, the Child Advocate, to follow up, again, on testimony that was given in the past.

I will ask whether my members have any comments they’d like to make at the beginning of this hearing.

Mr. Cryan?

ASSEMBLYMAN CRYAN: No.

ASSEMBLYMAN PAYNE: Mr. Fisher?

ASSEMBLYMAN FISHER: No.

ASSEMBLYMAN PAYNE: Thank you very much.

The one reason why we continue to pursue this area is because many of us have very, very deep concerns about the manner in which our youth/juveniles are treated, the manner in which we treat people in our society that are just not -- who are less fortunate than others. Many of us are concerned of the fact that we seem to continually find conditions that exist that are unacceptable. And it’s just by coincidence that we’re having this hearing today. I know that the report came out recently, maybe yesterday, that talked about the status of some of the changes, or some of the conditions that are existing where it impacts upon those citizens of our State who are cared for by the Department of Human Services, etc. And so
it is, as I say, by coincidence that this hearing was scheduled prior to that report.

So I’m going to call, first, Deputy Commissioner Kathryn Way to give us a status report on where we stand with the topic of adjudicated juveniles who are currently being held in juvenile detention centers.

Commissioner, before you start, I’d like to ask Senator Kean, Tom Kean, to please come forward. I recognize him as one of the primary sponsors, if not the sponsor for Danielle’s Law. If you’d like to have a comment, Senator.

**Senator Thomas H. Kean Jr.** (speaking from audience) Thank you, Sir. I want to thank you for your tenacity on this issue.

**Assemblyman Payne:** Senator, I know you’re new around here, but we do have-- (laughter)

**Senator Kean:** There we go. I just want to thank you, sir, for your tenacity on this subject and on ensuring that we’ve now had the second hearing on Danielle’s Law, of which I was the prime sponsor in the Senate. We need more of these type of oversight hearings. Sometimes it shouldn’t be this difficult to implement well-intended and well-written laws, and your tenacity in this regard is great to see.

And I want to thank you for helping to implement and ensure that Danielle’s Law and the legacy of Danielle’s Law is being implemented.

And I want to thank Kevin Ryan, publicly as well, for all of his hard work in this regard as well.

Thank you, sir.
ASSEMBLYMAN PAYNE: Thank you, Senator -- Senator Tom Kean.

Yes. Ms. Kathryn Way.

DEPUTY COMMISSIONER KATHRYN WAY:

Good morning, Chairman Payne, Vice Chairman Cryan, and other members of the Committee. I want to thank you for the opportunity, today, to update you on our progress regarding mental and behavioral health treatment for children and youth in juvenile correction facilities in New Jersey. As you know, the Department of Human Services, the Office of Children’s Services, are deeply committed to ensuring that children and youth do not remain in detention post-disposition because out-of-home treatments and services are not available. That commitment is memorialized in the Child Welfare Reform Plan, and June 30, 2005 was established as the time to reach that goal.

Over the past months, the Office of Children’s Services closely examined the issue of children waiting for services and placement through the Office of Children’s Services. Working in partnership with the Juvenile Justice Commission and participating in the Juvenile Detention Alternative Initiative, we have made significant progress toward our goal of assuring that children in detention post-disposition do not have to wait an unreasonable amount of time to access services and out-of-home treatment.

I’d like to take a moment to describe our work thus far. In March, 2004, there were 26 youth in Camden Detention Center awaiting Children’s Services placement; this week there are two children awaiting placement. In March of 2005, there were 20 youth awaiting placement in Middlesex Detention Center; this week there are eight children awaiting
placement. In April of 2005, there were eight children awaiting placement in Atlantic County, and this week there are two. In Union County, a year ago, there were 15 children awaiting placement; currently, there are two children awaiting placement. And in Essex County, there are five children awaiting placement.

ASSEMBLYMAN PAYNE: What was the earlier number?

DEPUTY COMMISSIONER WAY: I don’t have an earlier number for Essex. I apologize. I will try to get that.

ASSEMBLYMAN PAYNE: So you said there was five?

DEPUTY COMMISSIONER WAY: Five.

ASSEMBLYMAN PAYNE: There may have been 50, there may have been two, there may have been seven. We don’t know the numbers so we can--

DEPUTY COMMISSIONER WAY: It was more than five; I can guarantee it was more than five.

Behind each of these stories of successful placement of children from detention stands a significant amount of staff work and resource development. The Office of Children’s Services assigned a full-time, high-level staff position to work with our partners from the Juvenile Justice Commission and the community to assure timely access to assessments, services, and placements. The Office of Children’s Services has added additional residential resources. We’ve expanded a pilot project in Camden County that diverts youth from detention by providing community supports and supervision, enabling children and youth to stay in the community. This program is being expanded to Middlesex and Essex
Counties by July 1, and hopefully statewide through the remainder of Fiscal Year 2006.

We’re confident that, with these additional resources and strategies, we can meet our commitment and the requirement of the Child Welfare Reform Plan that appropriate placement for all of those children previously waiting in detention centers will be found. However, we will not be able to achieve full compliance by the deadline set of June 30, 2005.

We have submitted a request to the Child Welfare Panel for an extension of time until September 30 of this year. And we will be meeting with the panel to discuss our request over the next few weeks. In preparation for our discussions with the Child Welfare Panel, we have provided a plan describing our strategy to meet the requested September 30 extension.

Part of our strategy is based on the results of a behavioral health capacity report prepared by Dr. John Lyons. We commissioned this report in order to understand the full extent and nature of projected need for services and out-of-home treatment, going forward. We now have a more complete understanding of not only the number of beds, but also the type of beds that will be needed.

The final version of this report, “Estimating the Optimal Size of New Jersey’s System of Care for Children with Emotional/Behavioral Disorders,” was received in final form in April of this year. The report predicted that we will have a shortage of 311 beds for out-of-home treatment for Fiscal Year 2006. We have a plan to obtain that number of needed beds. The Office of Children’s Services will add 96 residential beds for hard-to-place youth, who otherwise might have been headed to
placement out of state. Contracts have been completed for 56 of these beds, and we anticipate finalizing the contract for the remaining 40 beds in the near future. Establishing an additional 215 treatment beds -- the request for proposal for these beds was issued just this week with proposals to be submitted by July 17, in response to that RFP, and contracting to begin in September. However, establishing additional out-of-home treatment capacity is but one part of the work that must be completed to meet the deadline.

The requirement of the Child Welfare Reform Plan mandates, in part, that no new children will be placed in detention centers because of lack of appropriate placements in the child welfare system. We must note that children are placed, initially, by the courts. We do not have control over that. But the Office of Children’s Services becomes involved when children who are sent to detention centers are already involved in the child welfare system or are identified by a detention center or other staff as needing child welfare services. These services could either be behavioral health services, child protection services, or both.

ASSEMBLYMAN PAYNE: Let me, if you don’t mind -- just for clarification in my own mind. You say that these youngsters are initially placed by the courts.

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: There’s no alternative if a child is known to be mentally disturbed or need mental care. The court still determines that they will go into a juvenile detention center?

DEPUTY COMMISSIONER WAY: In the end. The court has the final decision over the placement of the child. The court makes the
determination to place the child in the detention center. We can offer alternatives at the very front of the process. But in the end, the court has the final jurisdiction.

ASSEMBLYMAN PAYNE: All right. So even if a child is known to have mental problems, mentally disturbed, etc., going before the court, the court has the final say.

DEPUTY COMMISSIONER WAY: Yes. They have the final say.

ASSEMBLYMAN PAYNE: Do they have an alternative -- they can send the child elsewhere, correct?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: The ones that are in the juvenile detention centers -- I think we had a number of some 200 last time, I think it was, throughout the State of New Jersey that were placed inappropriately in juvenile detention centers, that have been determined to be mentally disturbed or in need of psychiatric help, etc. They were said to be placed inappropriately in juvenile detention centers. Now, they were placed there, you say, by the courts. All right. Has the court also, initially, rather than sending youngsters to a detention center -- when it’s obvious that they need mental care, they can, in fact, send them -- have them detained elsewhere or placed elsewhere, correct?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: How often does that happen? In other words, we have 20 youngsters who we know are mentally disturbed who need mental help, etc., in our institutions. Why -- I guess we can’t answer for the courts -- but if we recommend that youngsters be placed --
they are mentally disturbed, right, bona fide, certified -- the alternative would be that the judge can, the court can send them into a group home or some other place like that or some other facility?

DEPUTY COMMISSIONER WAY: Our responsibility, I believe, is to make sure that we have sufficient options and resources available. But in the final analysis, my only point was, in the worst case scenario even if the resources were there, the judge has the final jurisdiction with regard to the placement of the children in detention.

ASSEMBLYMAN PAYNE: All right. Let’s say that the judge sends a child to a detention center--

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: --but the child is in need of mental health, etc. The detention center doesn’t have that. The child has a record, has a case -- needs mental health, right? The judge ignores that, sends the child to a detention center where there are no facilities to treat that child right. That happens on occasion?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: So they get into our centers and they’re just kept in a cell, or whatever they are, etc., right, without any care apparently -- that kind of business.

DEPUTY COMMISSIONER WAY: Let me go through--

ASSEMBLYMAN PAYNE: Okay.

DEPUTY COMMISSIONER WAY: --this, because I think I’ll address some of your questions with regard to that.

But we have responsibility for children who are in detention if they are already involved in the child welfare system, or if the detention
center or other staff identify children as either having needs in behavioral health services or through child protection.

The Office of Children’s Services has identified the following strategies to meet the child welfare needs of children and youth in detention: Early identification of youth in detention centers with behavioral health needs; behavioral health assessments within five days of referral by detention center staff or others; developing individualized service plans to meet the child’s and the family’s needs expeditiously; linking the child and family to appropriate services, including out-of-home treatment, when that’s warranted; and dedicating two, full-time staff members to address detention and court-related issues, including overcoming barriers in linking youth to appropriate services; developing a dynamic database of Office of Children’s Services -- children and youth in detention centers so that we know always how many children are there, where they are in the system, and what their status is.

Several of these strategies are already implemented and operational. Early identification of children and youth is taking place in several different ways: Seven counties are already using the Juvenile Justice Commission’s MAYSI-2 tool for intake screening of children and youth who may have a need for behavioral health services. The remaining counties are expected to begin using this tool by September of this year. Counties not using the MAYSI tool have staff identifying children in need of behavioral health assessment and notifying the contracted system’s administrator. Children are also identified for assessment by family court judges who are able to refer children for a 14-day plan, when a judge believes the child needs behavioral health assessment or protection services. The DYFS court
liaison in those cases reviews the court order and forwards it to the appropriate agency for action. The Administrative Office of the Courts director has advised presiding judges to notify DYFS liaison of any juvenile admitted to detention who may have behavioral health needs. At that time, the liaison will follow up Child Behavioral Health care, for follow-up.

We’re currently working to implement additional strategies: The Office of Children’s Services will be designating court expediters with responsibility for specific counties. These staff members will be responsible for monitoring and tracking the progress of each young person receiving services from first court contact through final disposition. Child Behavioral Health Services has developed a clinical review process to identify children and youth who are ready for discharge from out-of-home treatment placements. This will expedite the movement of appropriate children and youth to less restrictive settings and will also open up more intensive treatment beds to youth in detention who need that level of service. Child Behavioral Health team leaders in each Office of Children’s Services area office will be responsible for monitoring the movement of children and youth to more appropriate, least restrictive treatment settings in a timely manner.

We note that mental and behavioral health treatment for young people in detention is an ongoing issue. Even as we reduce the backlog of children and youth waiting for appropriate placements, the Division of Child Behavioral Health Services estimates that approximately 35 children and youth will enter the system every month with needs for these services.

In closing, we would like to take the opportunity to thank the following colleagues that we have for willingness to work with us to develop
the strategies and solutions necessary to assure juveniles do not remain in
detention for an unreasonable amount of time: The Juvenile Justice
Commission, the Office of the Child Advocate, the Governor’s Office, our
Child Welfare Panel members, the Administrative Office of the Courts, the
Public Defender, and the Office of the Attorney General. Further, we
sincerely appreciate Judge Carchman’s recent statement that the proposal
by the Department of Human Services represents the first time that a State-
level agency has offered to provide a standard behavioral health and mental
health assessment of juveniles in the juvenile justice system across the state,
and promises to provide a far more effective system than has been available
to the courts in the past.

Thank you for your attention. I’d be happy to take your questions.

ASSEMBLYMAN PAYNE: Thank you, Commissioner.
Assemblyman Cryan has some questions for you.

ASSEMBLYMAN CRYAN: Thank you.
Good morning.

DEPUTY COMMISSIONER WAY: Good morning.

ASSEMBLYMAN CRYAN: I read along a little bit with some
of Kevin Ryan’s statements, ahead. He says that there’s 50 kids waiting
now, as of June 8, in the count. Is that the right number?

DEPUTY COMMISSIONER WAY: Let me tell you that we
have tried to get the number for June 15. It comes out the 15th of the
month, and we tried very hard to get that number. There were 62 children
waiting in March; there were 48 children waiting in May. I do not have a
June number.
ASSEMBLYMAN CRYAN: But it’s more than the 19 you presented from the five counties?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: So let’s deal with at least 50 and accept that, all right? What are the length of stay for these kids? I’m just on the front page of your statement -- “there’s two children awaiting placement in Essex, there are five children” -- you rattled them off. How long are these kids waiting?

DEPUTY COMMISSIONER WAY: Well, I can tell you that in Camden County, the two children that are awaiting have been waiting since May.

ASSEMBLYMAN CRYAN: Aren’t some of these kids waiting more than May? Aren’t some of these kids -- are here?

DEPUTY COMMISSIONER WAY: Some of the kids have been waiting a long time.

ASSEMBLYMAN CRYAN: Some of these kids have been there since ’04, haven’t they?

DEPUTY COMMISSIONER WAY: I will ask Alan Vietze, but Alan Vietze is the person who works on a day-to-day basis on this.

ASSEMBLYMAN CRYAN: How about a yes or a no?

UNIDENTIFIED PERSON FROM OFFICE: Yes.

DEPUTY COMMISSIONER WAY: How many children since ’04?

UNIDENTIFIED PERSON FROM AUDIENCE: How many I can’t say. I can think of three or four, definitely.
ASSEMBLYMAN CRYAN: There’s three or four that have been there since last year, at least. We don’t know the right count, right?

UNIDENTIFIED PERSON FROM AUDIENCE: No. I mean, I can--

ASSEMBLYMAN CRYAN: Through the Chair, let me directly ask you for a count. I don’t care whether you use June 8 or June 15, but how long these kids have been waiting?

DEPUTY COMMISSIONER WAY: Okay. We will take the most recent list we have and tell you how long each one has been waiting.

ASSEMBLYMAN CRYAN: And is each one a special case, or is there some reason the kids would sit there since last year?

DEPUTY COMMISSIONER WAY: Children who have been waiting long for a placement are very complex children. I can assure you that those children -- numerous attempts have been made to secure placements for those children. They have very complex needs.

ASSEMBLYMAN CRYAN: Bill and I are on the Budget Committee. We put together the resources and made a priority decision to give you the resources. And it’s -- come on, come on -- how can that happen? How can kids sit there for months and months and months, and languish? How does that happen? How does that happen, some kid sitting there seven or more months?

DEPUTY COMMISSIONER WAY: Well, I think the information that we got from Dr. Lyons confirmed for us that we--

ASSEMBLYMAN CRYAN: Which came in April, right?

DEPUTY COMMISSIONER WAY: Which came in April -- and we have already engaged 56 residential treatment beds, under contract.
Those folks are due to open their doors during July. And we fully anticipate, based on our performance-based contracting, they will be taking children on a no-reject basis. So we absolutely anticipate having resources to care for those kids.

ASSEMBLYMAN CRYAN: How many beds do we have now? By the way, how many kids are out of state?

DEPUTY COMMISSIONER WAY: Two hundred and twenty-three.

ASSEMBLYMAN CRYAN: Are out of state?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: How many are in-state?

DEPUTY COMMISSIONER WAY: The total number is about 2,279, minus the 223 -- so slightly over 2,000 kids. That would be in a variety of--

ASSEMBLYMAN CRYAN: That fit into this profile?

DEPUTY COMMISSIONER WAY: No, no. No, no, no, no, no. That’s the entire universe of residential treatment centers, group homes, and treatment homes.

ASSEMBLYMAN CRYAN: Okay. So apples to apples, is the report that came out in April that says we need 311 more beds, that satisfies everybody’s needs?

DEPUTY COMMISSIONER WAY: That’s systemwide. That’s systemwide, yes.

ASSEMBLYMAN CRYAN: And so these 50 kids are waiting, out of a pool of beds that are 2,000 -- that are at least 2,200. Why? And these kids are stuck in the worst position, they’re in jail.
DEPUTY COMMISSIONER WAY: That’s right.

ASSEMBLYMAN CRYAN: Does that sound as horrible to you as it does to me?

DEPUTY COMMISSIONER WAY: It’s terrible. It’s terrible. We are absolutely committed to do something about this. I think what we’re looking--

ASSEMBLYMAN CRYAN: What I don’t get, Kathi, is the report comes out in April and the commitment was always for June. And first off, I know we’re on the right path. Everybody says that, but we are where we are. How does a report come out in mid-April, there’s a commitment date in June. We’re here on June -- whatever it is, 17th, whatever today’s date is -- and it’s like, okay, we’re not going to make June. And I’m going to ask you some questions about how we’re actually going to make September. I don’t get that. It’s like we’re in mid-April, and it sounds as if there was never a chance of getting to June. That’s the way it sounds to me when I look at a report in mid-April. Does that sound--

DEPUTY COMMISSIONER WAY: I would suggest to you that we had every expectation of trying to make the June 30 deadline.

ASSEMBLYMAN CRYAN: Okay. So when--

DEPUTY COMMISSIONER WAY: We have been working--

This number has decreased significantly over the past year.

ASSEMBLYMAN CRYAN: I get that, okay? I also get that there are kids there. But work with me here a little bit. June 30 didn’t come out of the sky, right?

DEPUTY COMMISSIONER WAY: No.

ASSEMBLYMAN CRYAN: It’s been around--
DEPUTY COMMISSIONER WAY: That’s right.

ASSEMBLYMAN CRYAN: --for a whole lot longer than April.

DEPUTY COMMISSIONER WAY: That’s right.

ASSEMBLYMAN CRYAN: So when did this contingency plan, that we got a report in April, that says something different -- then therefore we can’t make June. Because that’s the basis of what you’re saying here, the need is higher. I don’t follow that.

DEPUTY COMMISSIONER WAY: No. I think what we’re saying is we always assumed-- In fact, Assemblyman Payne asked me some time ago what the number of beds that we needed -- what the precise number was. And I told him, at that point, I couldn’t give him a number, but that we were having a needs analysis conducted. This resulted in the number. We always knew we needed beds, but it’s not just a question of beds. It is a question of working together with all of our partners, because we could have a service capacity available for a child. Again, if the judge doesn’t accept that arrangement and wants instead to send a child to a residential treatment center, we must comply with that court order or appeal the court order, one or the other. In any way, the child is waiting for a time as a result of that.

There have been -- this is not without difficulty. We have had problems -- our provider community has had problems locating residential facilities. The 40 beds that we’re due to contract on, that provider has had a very difficult time locating property and a facility and/or a facility that would be acceptable to the community to house and to provide treatment for those youth. This is not a population that is often a population that communities want to accept. And I would tell you that in all reality,
although many of us would like very much to be able to kind of snap our fingers, sign the contract, and have the youth move in, there is a very lengthy process -- and I’m sure that you’re all familiar with the process that went on with one facility in Delanco earlier this year where they had secured a property that they thought was appropriately zoned. They then had to backtrack, find another property; and that facility, which is 24 of the beds, is now not going to be available into July. That had anticipated to be available much earlier than that. So there are problems along the way that have delayed us from our original time line, if you will.

So it’s not as if, really, that we put out this June 30 time line and thought that we could never meet it. The actions have been taking place along the way. We piloted this program of alternative case management for children in Camden -- was very successful, and so we have expanded that to include Middlesex and Essex now.

ASSEMBLYMAN CRYAN: Look, I’ll respect the fact there are problems, but I’ll say this. We’re supposed to anticipate the problems for the level of people that we have. That’s the reality of it. You guys are the pros. Problems come up that aren’t new to New Jersey. That’s the whole idea. So, with all due respect, the idea that we have this problem or that problem, well, that’s what you’re there for, is to fix the problems, respectfully. My patience is running out. It really is. I got to tell you, it just is.

And I want to ask some other questions on your statement, here. On Page 2, “we now have a more complete understanding of not only number of beds, but also the types of beds that will be needed.” Are we going to have a problem with September 30 with the types of beds?
DEPUTY COMMISSIONER WAY: No. What we meant by that is, we have 96 residential beds; 56 of those are already under contract, and they are finishing their licensing requirements, if you will, to open their doors. The 40 beds, that’s the facility that has had difficulty locating a site. They will have their site located within the next 60 days, or we will move to another contract agency to provide that. Beyond that, the report says what we need is treatment home beds, not residential treatment center beds. Treatment home beds so that we can step youth down who are currently sitting in residential treatment centers, and open up those slots to youth who need more intensive treatment, and (b) make those available directly to youth who are in detention and have these needs, but need that level of care and not a residential treatment center level of care. That’s what we meant by type of bed.

ASSEMBLYMAN CRYAN: So when I look at the -- which leads me, you answered some of this already -- Completed for 56 of the beds, it doesn’t say they’re open. So that means there’s licensing and some other things that have to be done to get these 56 -- I’m on the 56 --

DEPUTY COMMISSIONER WAY: Some of them are in varying stages. Some of them are licensed--

ASSEMBLYMAN CRYAN: When will the 56 be available?

DEPUTY COMMISSIONER WAY: The 56 will all be available before September 1.

ASSEMBLYMAN CRYAN: When will, because it says near future, and whenever I see that I go--

DEPUTY COMMISSIONER WAY: The 40, yes.
ASSEMBLYMAN CRYAN: Yes. You talked about it a little bit. Is it either 60 days and they’ll begin the licensing requirements, or is it 60 days and then we’ll say, enough, and we’re going to move on?

DEPUTY COMMISSIONER WAY: They’re the providing agency that’s had difficulty siting a location, and we’re going to give them the next 60 days to provide a location. If they cannot do it, we’re going to have to move to another contract agency that has the space available and would be able to make arrangements, but--

ASSEMBLYMAN CRYAN: And if we go out and go to another contract agency, just give me the worst case time line, okay? Recognizing that what you want to do is go-- So we’re 60 days out, which gets us to middle August, which--

DEPUTY COMMISSIONER WAY: Mid-August.

ASSEMBLYMAN CRYAN: --in the real world is just about September. So if that’s the worst case, how long is the process to get those 40 beds?

DEPUTY COMMISSIONER WAY: The next 40 beds, if the first 40 fail?

ASSEMBLYMAN CRYAN: Right.

DEPUTY COMMISSIONER WAY: That space is available and could be -- we could get that very quickly.

ASSEMBLYMAN CRYAN: I got to ask you why--

DEPUTY COMMISSIONER WAY: Why we just don’t go with them?

ASSEMBLYMAN CRYAN: Yes. Especially since there’s still a shortage.
DEPUTY COMMISSIONER WAY: Well, because to some degree, this is part of a rating process in an RFP. When the original awards came out, the folks thought they had a site. And it was only after the contract award had been made that they could not get community agreement on the site.

ASSEMBLYMAN CRYAN: You don’t want to comment whether the value of a rating process is worth more than some kid sitting in a jail, do you?

DEPUTY COMMISSIONER WAY: Not at all.

ASSEMBLYMAN CRYAN: Okay. Why don’t we go with the 40.

DEPUTY COMMISSIONER WAY: I’m just telling you that we’re going to move as expeditiously as we can.

ASSEMBLYMAN CRYAN: I--

DEPUTY COMMISSIONER WAY: This is a provider who has not, historically, provided services in New Jersey and is having difficulty finding a site. They have had--

ASSEMBLYMAN CRYAN: The first 40, the first contractor?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: But you have a back-up plan pretty much ready to go, it sounds like?

DEPUTY COMMISSIONER WAY: We’re working on it, yes.

ASSEMBLYMAN CRYAN: All right. Let me put it to you this way. If we decided tomorrow that the initial contractor who is trying to start up doesn’t work, instead of 60 days from now, how long would it take to turn on the Plan B contract?
DEPUTY COMMISSIONER WAY: Probably 75 days.

ASSEMBLYMAN CRYAN: So why not, instead of losing six months, why don’t we just--

DEPUTY COMMISSIONER WAY: We’re not going to lose six months. I think the time line is going to be the same either way.

ASSEMBLYMAN CRYAN: Well, work with me here. Sixty days, plus 75, is 130 days -- what’s that -- four months. I’m sorry.

DEPUTY COMMISSIONER WAY: No, no. No, no. I’m sorry. It’s going to be 75 days one way or the other, either with the provider that we originally have talked to, or with the alternative provider. The time line is not going to be different.

ASSEMBLYMAN CRYAN: Maybe I’m confused. If it’s 60 days for one -- and the way I understood your statement was, is that if that doesn’t work, then we’re going to go the other provider, which will take 75 days.

DEPUTY COMMISSIONER WAY: I’m sorry. I thought -- no. The other provider is already working right now.

ASSEMBLYMAN CRYAN: So they’re parallel?

DEPUTY COMMISSIONER WAY: So they’re parallel tracks, the time line is.

ASSEMBLYMAN CRYAN: So the risk case here is 15 days?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: Okay, that I get.

I just want to get down some of the dates here. The next statement, the RFP for the beds that was issued this week -- proposals be
submitted July 17, contracting to begin in September. How long is the contracting process for the additional 215 beds?

DEPUTY COMMISSIONER WAY: Well, what I’ve given you here is the outside dates. So the contracting process would be very short. What will happen when you do treatment beds, we work with an agency. They then go out, once they have a contract award, and they recruit individual treatment homes to come on board, to work as part of their contract agency. As they recruit a treatment home and that gets up and running, then that becomes available. So they may get one treatment home with two beds, and then they may get another treatment home that has two beds, so that is a gradual ramp-up process and dependent on them recruiting treatment homes.

ASSEMBLYMAN CRYAN: So how long is the -- some of it is very short for contract, some of it isn’t. Is there a schedule in your Department for when the 215 beds are going to be up, and when does that schedule show that it’s completed.

DEPUTY COMMISSIONER WAY: We anticipate, including the ramp-up, that would take place from September until the end of the calendar year, so that in January the full array of those treatment homes would be up and running. But we do recognize that these agencies do have a ramp-up period, because they have to go out and recruit these treatment homes.

ASSEMBLYMAN CRYAN: So in January, we would be in a position, based on this April report, to have added the 311 beds, which would bring us to a--

DEPUTY COMMISSIONER WAY: Yes.
ASSEMBLYMAN CRYAN: --capacity of roughly-- There’s roughly 2,000. There’s roughly-- By the way, the 311 beds, the 223 people who are out of state, do they come back based on the 311?

DEPUTY COMMISSIONER WAY: No.

ASSEMBLYMAN CRYAN: So that remains part of our capacity?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: What states are they -- are they in Florida and Pennsylvania?

DEPUTY COMMISSIONER WAY: They are in Florida. They’re in Georgia. They’re in Pennsylvania and Virginia.

ASSEMBLYMAN CRYAN: And these are kids, as well as--

DEPUTY COMMISSIONER WAY: These are adolescents.

ASSEMBLYMAN CRYAN: Adolescents only.

So our need is somewhere, roughly, around 2,500--

DEPUTY COMMISSIONER WAY: Twenty-seven.

ASSEMBLYMAN CRYAN: Twenty-seven.

DEPUTY COMMISSIONER WAY: Twenty-two, three, and two. I mean, rough numbers. It’s about 27.

ASSEMBLYMAN CRYAN: Rough numbers.

Page 3 -- early identification, middle of the page -- this is on MAYS: “The remaining counties are expected to begin using this tool.” When I see expected, I go -- hmmm -- are they going to be using it or aren’t they?

DEPUTY COMMISSIONER WAY: Howard may be able to better address the specifics on that.
ASSEMBLYMAN CRYAN: All right. I’ll leave that for Howard.

DEPUTY COMMISSIONER WAY: That’s our understanding.

ASSEMBLYMAN CRYAN: And my only other question is, is that we identified another need of 311.

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN CRYAN: If I take the 35 that you gave us in the last page -- 35 times 12, roughly 420 -- 420 a year gets added. Does the capacity report show that we will be able to meet the forecasted demand based on the 2,700 number that we have?

DEPUTY COMMISSIONER WAY: Yes. It is all contingent on being able to break the log jam and the gridlock that we’ve had in New Jersey for so long, where we have kids in residential treatment centers and in group homes. Actually 25 percent of them, we now know, who are ready to step down, but we have no place to step them down to, or we have families who we need to make comfortable about having these youth come home, with the supportive services around them.

ASSEMBLYMAN CRYAN: Through the Chair, I’d like to ask that we get, without names, but a list by facility of any child that’s been in a facility for longer than 30 days by length, whether it’s--

DEPUTY COMMISSIONER WAY: From the detention facilities.

ASSEMBLYMAN CRYAN: From the detention center -- yes, from the facility.

DEPUTY COMMISSIONER WAY: Okay.
ASSEMBLYMAN CRYAN: All right. That’s been assessed. Is that reasonable?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: I think you’ve been talking about group homes -- youngsters that are there that need to be in mental facilities. We’re talking--

ASSEMBLYMAN CRYAN: Yes, right.

ASSEMBLYMAN PAYNE: --with juvenile detention centers. I think that those -- I’m not sure which is the worst setting, probably the juvenile detention center, where these youngsters are not being able to get any kind of service.

DEPUTY COMMISSIONER WAY: Absolutely.

ASSEMBLYMAN PAYNE: Right. And the numbers that you gave us before with Camden and Middlesex, Atlantic, Union, and Essex -- what about the other counties? They don’t have any youngsters in those other facilities? How many facilities are there?

DEPUTY COMMISSIONER WAY: I believe there’s 17 facilities.

ASSEMBLYMAN PAYNE: Seventeen. And the other ones, they don’t have any--

DEPUTY COMMISSIONER WAY: I reported to you the ones that we had, at this particular point in time. I will tell you that the last full array of county, of the 17 that I saw, the only county with a double digit number was Middlesex. That’s when Middlesex had 20 youth awaiting placement, and they now have eight. All the other facilities were in the single digit numbers.
ASSEMBLYMAN PAYNE: Let’s see -- one, two, three, four, five -- there’s 12 other counties that we have no accounting for.

ASSEMBLYMAN CRYAN: Well, I think the number depends on the date.

DEPUTY COMMISSIONER WAY: Exactly.

ASSEMBLYMAN CRYAN: Excuse me, Mr. Chairman -- is 50, if you use June 8, and Kevin’s numbers. But we’re 62, if we go to your number, fluctuating.

DEPUTY COMMISSIONER WAY: It was 62 in March. It was 48 in May. I don’t have the June number at this point, but I think we’re, roughly, in the same ballpark, yes.

ASSEMBLYMAN PAYNE: But none of those other counties have the same situation that we mentioned the five counties does?

DEPUTY COMMISSIONER WAY: We mentioned these because these are the counties that particularly have run high numbers in the past where we have made some progress. There are a number of other counties where the numbers remain, but they’re in the single digit numbers. I will get you the most recent list as we get it, by detention facility.

ASSEMBLYMAN CRYAN: Is there a population number -- more than 10 percent of Middlesex population is in need of these services. Is there an impact, to your knowledge -- in terms of having a higher percentage of the population needs these services -- to these kids?

DEPUTY COMMISSIONER WAY: Disproportionately, kids in detention versus the general population?

ASSEMBLYMAN CRYAN: Right.

DEPUTY COMMISSIONER WAY: Yes. I think that’s right.
ASSEMBLYMAN CRYAN: So it’s safe to say that you’ll be focusing on those with higher percentages?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN PAYNE: Mr. Fisher.

ASSEMBLYMAN FISHER: Well, certainly, Assemblyman Cryan has detailed significantly the issue and what our expectation is. I just question about those that currently, while waiting for a bed space, are in detention centers -- do they receive any interim-type care of the services that you would be providing if they were off-site now?

DEPUTY COMMISSIONER WAY: Two pieces to that: Number one, if they require emergency or inpatient care, they are taken either to a CCIS unit, or if their behavior is such that they can’t be accommodated at a CCIS unit, we have a specialty unit at Trinitas Hospital to care for them. For children who have been identified as having behavioral health and mental health needs, but do not rise to the level of needing an inpatient kind of arrangement, the county detention centers, as part of their agreement with the Juvenile Justice Commission, etc., supplies and provides for those services for children while they’re in their facilities.

ASSEMBLYMAN PAYNE: Excuse me, is that a fact? I mean, with the concern that we have here, is that a lot of these youngsters are in these facilities and are not being treated in any way, manner -- that they’re not, that there’s any capability. Is JJC treating these youngsters if they’re in need, or they’re providing the kinds of service? You said that if a child acts -- if a child is unable to be controlled or handled within the juvenile detention center, that they go to CCIS. But you’re telling me that the other youngsters, as long as they may have some mental problems, they need
mental services -- you’re telling me that everyone of these juvenile detention centers is providing the kind of services these youngsters need?

DEPUTY COMMISSIONER WAY: I’m telling you that the county-run detention centers have the authority/responsibility, if you will, to arrange for behavioral health services for the youth that are inpatient in the detention. They do it very differently, from one place to another.

ASSEMBLYMAN PAYNE: Well, the question -- they have the authority and the responsibility. My question is whether or not they’re doing it. I’ve heard the opposite.

DEPUTY COMMISSIONER WAY: Howard might be able to better enlighten you with that fact.

ASSEMBLYMAN FISHER: Well, let me just-- Can I just continue on that point?

ASSEMBLYMAN PAYNE: Yes.

ASSEMBLYMAN FISHER: Because you said they have the authority; then you said, and I think you said, the responsibility. But don’t you have the responsibility to make sure that they’re exercising their so-called responsibility?

DEPUTY COMMISSIONER WAY: We do not, I believe -- and Howard, I think, is going to be better able to explain the relationship between the Juvenile Justice Commission and the county detention facilities, and how those responsibilities are established.

ASSEMBLYMAN FISHER: Well, because where I’m heading is that right now we’re just talking about, literally, warehousing of someone, if they’re in those kinds of-- You said if they go into crisis, then we can ship them out to a medical facility. But if they’re at these detention centers,
you’re not really sure. You only know that they have the authority, and I guess--

DEPUTY COMMISSIONER WAY: They have the responsibility.

ASSEMBLYMAN FISHER: --what we’re asking is, while we’re waiting for these beds -- and we’re talking about 15, 30, 60, 90, 120 days -- we just want to make sure that they can get at least some of the appropriate treatments that would work for those that are not just in total crisis.

DEPUTY COMMISSIONER WAY: Right. And as I said, I think from one county to another there’s a great difference in how that’s provided. The specifics of that are probably better described by JJC.

ASSEMBLYMAN CRYAN: Who does the caseload? Does that add to your case-- How do the caseload numbers work with that?

DEPUTY COMMISSIONER WAY: What do you mean?

ASSEMBLYMAN CRYAN: Well, like, in the report from yesterday--

DEPUTY COMMISSIONER WAY: Right.

ASSEMBLYMAN CRYAN: --one of the things it talks about is caseloads again. In particular, it talks about discrepancies in caseloads, which I’d like to ask somebody about. But when your -- who gets it from your agency? Like, who -- is it assigned? How does the count work from your agency? I guess I want to ask it that way.

DEPUTY COMMISSIONER WAY: There is a DYFS family court liaison assigned to each local court. And when a case comes before a court, if it’s not known to DYFS but there are abuse and neglect issues identified as part of the information that’s shared with the court, then the
DYFS liaison would make certain that that case becomes part of and is assigned to DYFS for their appropriate work. If, on the other hand, and let me say, if it’s an open DYFS case, then they would provide the information from the court to that worker. If, on the other hand, this is a case where there is a behavioral issue or some sense that there are behavioral health or mental health problems, that DYFS family court liaison would make the connection to Child Behavioral Health Services and that would not become part of the DYFS system. So the DYFS family court liaison triages that case, either to DYFS, if it’s an appropriate DYFS referral and it’s not already an open case, or to Child Behavioral Health for assessment and for behavioral health follow-up.

ASSEMBLYMAN CRYAN: Thank you.

ASSEMBLYMAN PAYNE: Mr. Fisher.

ASSEMBLYMAN FISHER: No.

ASSEMBLYMAN PAYNE: My concern goes again back to the -- several things. One, I think the question was asked, well, who monitors -- who makes sure that-- Let’s say if a child is in the foster care system, a DYFS child is in a detention center and is in need of the mental health services, you say that the detention center has the responsibility and the authority to provide the services to that youngster, correct?

DEPUTY COMMISSIONER WAY: Right.

ASSEMBLYMAN PAYNE: My question was, and I think the question also, who monitors this? Who sees that this is happening, that’s going on there? Your person is in the courts and provides the courts with the information that will determine whether or not the child needs to have assessment, etc., etc. Who sees to it that youngsters in these detention
centers, in fact, are being cared for in the manner -- while they are languishing there and waiting for a bed in an appropriate facility? Who has the responsibility for that?

DEPUTY COMMISSIONER WAY: The detention center.

ASSEMBLYMAN PAYNE: The detention center has-- So you’re saying-- We don’t really know whether or not these youngsters who are being held inappropriately in these centers, who are DYFS children, who are in need of this kind of service -- we don’t really know whether or not it’s being done, except that the detention center says, “Well, yes, we’re doing it.” The people I talked to who are at detention centers say that we do not have the capability, we do not have the means to take care of these children. Do we need to have them placed in appropriate settings? Does anyone monitor this other than the detention center director saying, “Oh, yes, we’re providing this, or we have the capability.” Is there any way of knowing this?

DEPUTY COMMISSIONER WAY: I am not aware of any monitoring. Someone else might be able to better describe that. Again, the Juvenile Justice Commission might better be able to describe that. But let me just say, there is much concern. And I think the Child Advocate raised, a while ago in his report, concerns and suggestions that perhaps we should have -- we at Children’s Services should have responsibility for providing those behavioral health services or mental health services to youth while they were awaiting either disposition or a placement or whatever. And I think that that is a suggestion that’s open for a public debate. There are pluses and minuses that come with that. There is a real concern on our part that if that is the case, then detention facilities become treatment facilities;
and you’re going to slow down, if you will, the actual movement of youth to the appropriate venue for treatment that they need.

So is it better, for instance, to strengthen the supports that are available to the county detention facilities so that they can provide an interim kind of cohort of treatment for the child? What we do not want to do is to create a new treatment facility called a detention facility for youths.

ASSEMBLYMAN PAYNE: But in the meantime, the youngsters that need treatment in these juvenile detention centers don’t get any treatment in most cases. So we don’t want to create another treatment facility, no. But we know, based upon your testimony and other information that we have, that it’s extremely difficult to provide or find the beds that are necessary to treat these youngsters. So while they’re there -- and since we know from anecdotal evidence, or information that, in too many more cases than not, the youngsters are just locked in their room, or they’re controlled by keeping them under lock and key maybe -- we need to know whether or not they are, in fact, being given some kind of treatment while they’re there. We say that, well, it’s only -- now we’re down, in Camden County there are only two, and down in Middlesex County only eight, etc. -- tell that to the eight families. I mean, only -- we only have one or two. Tell it to the ones who are left behind.

DEPUTY COMMISSIONER WAY: Oh, I agree. I agree.

ASSEMBLYMAN PAYNE: So while we have this situation existing, we need to find a way to make sure that these youngsters who shouldn’t be there in the first place are, in fact, being given some kind of treatment. A lot of them are under suicide watch, or need to be, and things of that nature.
DEPUTY COMMISSIONER WAY: Well, let me also state that while we’re talking about 48 or 50 or 62, or the number, that includes the children who are post-disposition and awaiting placement. There are children who are there who are not yet -- their cases are not disposed of at this point in time. And I think that you know the JDAI project, the Detention Alternative Initiative, to keep children out of detention at the front gate--

ASSEMBLYMAN PAYNE: Right.

DEPUTY COMMISSIONER WAY: --our efforts with regard to our court expeditors, where we will track children from the day they go in, so that we can remove kids from detention prior to disposition to get them the services that they need. I mean this is -- it’s not just about beds available at the end of the process, at the end of the court process. It is about, throughout the life of the process, being able to provide the appropriate interventions to make sure that the youth can get out of detention and get access to the services and supports that they need. So that’s why it’s not just about the beds. It’s about, also, being able to have court expeditors who are there at the very front door, who are finding alternatives and presenting those to the court as other options: electronic monitoring with supports in the community. Let’s get them out of detention and let’s get them the services that they need.

ASSEMBLYMAN CRYAN: But these proceedings last, for these kids, months; and in some cases, more than a year to go through this system and get disposition. Right now, the reality is, is they’re not getting the services they need. So we take a kid who’s got a problem to begin with. We identify the problem in the courts and then we put the kid in a holding
cell, essentially, and almost leave them, to a point of waiting for a court to make a disposition, which is the worst thing you can do at a point when they’re probably-- I mean, you’re putting a kid in jail that needs some other help. What’s the mission of government?

DEPUTY COMMISSIONER WAY: I think that the court is working quickly to try to shorten their processes. That’s why I mentioned the various colleagues that have been working with us to try to remove some of the barriers, shorten some of the time frames, and make sure that the entire process comes together much more quickly. That only happens when we have resources and options available for the court as well. That will help shorten the process.

ASSEMBLYMAN CRYAN: But this process, whether it’s September 30 for beds or not, is not going to get shortened that length of time. This process, still after September -- if all these beds magically appear tomorrow, this process is still in need of a whole lot of work.

DEPUTY COMMISSIONER WAY: Absolutely. And that’s why we are beginning, with the court expeditors, to work with the court and the child, as the liaison, from the time the child comes before the court all the way through the process, so that we can-

ASSEMBLYMAN CRYAN: But that’s not there now. That’s MAYSI.

DEPUTY COMMISSIONER WAY: July 1.

ASSEMBLYMAN CRYAN: July 1.

DEPUTY COMMISSIONER WAY: That’s not MAYSI. That’s July 1.

ASSEMBLYMAN CRYAN: That’s July 1, yes. Okay.
ASSEMBLYMAN PAYNE: Thank you.
Any more questions?

ASSEMBLYMAN FISHER: Just one about, Mr. Chairman, the RFP for the -- I guess it’s group homes?

DEPUTY COMMISSIONER WAY: Treatment homes.

ASSEMBLYMAN FISHER: Treatment homes. You said that the developer, the responder that was going to -- ran into trouble.

DEPUTY COMMISSIONER WAY: Oh, I’m sorry. Yes, you’re right. The residential treatment center, yes.

ASSEMBLYMAN FISHER: Was a group home. Was that a totally new facility in an area where there is currently no facility like that now, or is it an addition to an existing center?

DEPUTY COMMISSIONER WAY: It was in an area where the building that was to be used -- the provider and their representatives felt was appropriately zoned, but it was not in an area that currently had adolescents being served in a residential way.

ASSEMBLYMAN FISHER: The reason I asked that question is because you can almost anticipate that every time you’re going to put an RFP out for additional space in an area where they don’t have a facility, you’re going to run into this. And it’s almost as if you need to begin to contract out for what you project your needs might be in the future. I’m questioning your projections. How you could end up, when you know that, based on how many years we’ve been doing this, that-- Do you project?

DEPUTY COMMISSIONER WAY: Yes. Actually, the assessment that was completed by Dr. Lyons gives us a 10-year projection. I gave you ’06. If every year there are additional resources that will be
needed-- And I’d be glad to provide the Committee with a copy of that report.

ASSEMBLYMAN FISHER: Yes. I would appreciate that. I’m sure we all would.

ASSEMBLYMAN CRYAN: How much do they go up?

DEPUTY COMMISSIONER WAY: They go up dramatically.

ASSEMBLYMAN CRYAN: Well, give us a highlight or two. Say, over the next couple-- Say -- tell the Budget Committee guys, like, for next year or the year after. (laughter)

ASSEMBLYMAN FISHER: Well, and then just to go further--

ASSEMBLYMAN CRYAN: I’m sorry.

ASSEMBLYMAN FISHER: No, no. That’s okay.

As I said, I can’t believe that any place that’s going to end up with new bed space in facilities like this, if they’re totally new, where -- you’re going to end up with delays. Because I’ve never known a community that just embraces the type of cases that you deal with, putting into a new residential area where they haven’t had this response before. And at the same time, I’ve seen in Corrections where some of the facilities that are-- And I don’t know how we do this in an RFP, but areas that already have -- where an area has accepted this type of activity, it never seems to be much trouble when they go to add that space, as it is when you start with a totally new area.

DEPUTY COMMISSIONER WAY: Let me get that and provide it to you. I have to add up the numbers from each of the years.

ASSEMBLYMAN CRYAN: Do you mind, Mr. Chairman?
ASSEMBLYMAN PAYNE: Please, if you’d do that, we’d appreciate it. Are you going to do it now, or-

DEPUTY COMMISSIONER WAY: Let me just read you some rough estimates: In 2010, the estimate is 1,033 group homes; 1,919 -- 1-9-1-9 -- treatment homes; 459 site community residences; and 1,894 RTC beds.

ASSEMBLYMAN CRYAN: Do we compare that against the 2,700 number, our rough number now? Is that apples to apples?

DEPUTY COMMISSIONER WAY: Yes.

ASSEMBLYMAN FISHER: And what do you come up with?

ASSEMBLYMAN CRYAN: Oh, that’s 5,000 and change, isn’t it?

DEPUTY COMMISSIONER WAY: That’s why -- I was going to try to add up those numbers.

ASSEMBLYMAN CRYAN: So today, even at -- so looking at 2010, which is only three budgets away--

DEPUTY COMMISSIONER WAY: Right.

ASSEMBLYMAN CRYAN: --we have, roughly, half. It’s probably around 45 -- we have 45 percent of capacity or 50 percent of capacity today. That’s amazing and disheartening.

DEPUTY COMMISSIONER WAY: It’s based on population trends, dynamics, and the number of children -- percentage of children that would require this level of care.

ASSEMBLYMAN CRYAN: Wow.

DEPUTY COMMISSIONER WAY: The other way to look at this, though, is if we can reduce-- See, if we can reduce the length of stay
for those children, if we get better at these community placements-- And this is a situation where, frankly, we have to win this one case at a time with the courts. They have to become confident that when we give them a plan that says we can give this family 30 hours of supports a week to keep their child at home and maintain that child, they have to get confident that we’re really going to do that. Because, historically, people have promised a lot of things, and they haven’t delivered them. So it’s one case at a time. But as we get -- develop more confidence with this community-based system, that number will come down. That number will come down. It’s based on the situation as it exists currently.

What we have to get good at is two things: We have to have confidence in our community-based approach to serving children at home, with their families, with relatives, with a lot of supports around them sometimes; and we have to get better at stepping children down. When they do require a residential treatment center level of care, they shouldn’t be there 16 months. They should be there, perhaps, six months. Our goal is to step that back a few months at a time to be able to make more room in our existing facilities. That’s how we lessen our requests going forward.

ASSEMBLYMAN FISHER: Just one last point, which is, at the same time when you’re warehoused in a detention center, which may or may not have -- be given any of the appropriate treatments, you’re talking about step-downs, while it seems as though they may be going into total meltdowns, because they’re not getting-- At the time that they’re originally sentenced and then warehoused and then told that they have to get treatment, they’re at the most, probably, some of the most vulnerable times.
And you’re telling us, well, we don’t have responsibility at that junction, we have it at another time.

DEPUTY COMMISSIONER WAY: These are county-run detention centers.

ASSEMBLYMAN FISHER: Right. I know, but what we’re doing is getting an understanding at the same time. Without pointing a finger--

DEPUTY COMMISSIONER WAY: No, no. I understand, but--

ASSEMBLYMAN FISHER: --it allows us to get some understanding of a situation that is severe.

DEPUTY COMMISSIONER WAY: I do want to make the point, though, that for the first time, as part of our closure of Brisbane, we actually have an identified unit of acute care for youth in detention who have violent behaviors and can’t be served in a typical CCIS unit. They can be served at Trinitas Hospital. We have a specific unit for those youths. This is the first time that we’ve really had that level of care for these youth in the State of New Jersey. So that is some progress.

ASSEMBLYMAN PAYNE: Thank you.

You’ve brought into this discussion the group homes, community treatment centers, etc. We were initially talking about detention centers, specifically about detention centers -- children who have been charged with a crime, perhaps, but who have these problems, need mental service, etc. -- we’re talking about that. And we’re talking about those youngsters who are inappropriately being housed in detention centers, all right, and many of whom are foster children. So that was our initial
concern. Now we know of the additional -- that you want to step down those who are in youth houses and group homes who need this care, as well. But we have a problem with youngsters being locked up in a youth prison who need to have these kinds of services, and they’re not being served now.

We know we have additional problems with the other population. And I really envision that we’re going to probably continue to need to have placements out of the state for some time to come. I don’t know when we’re going to be able to have sufficient facilities within our state, and I hope it’s soon. Because it’s extremely expensive to send our people out of state. But do you anticipate at some point that we will not need to have any out-of-state placements for these youngsters?

DEPUTY COMMISSIONER WAY: Let me be clear. Our highest priority at this particular point in time is to make certain that children who are sitting in detention centers post-disposition are moved, that they can access the appropriate services and treatment that they need. That’s our number one priority. We are concerned about children and youth who are out of state. Many of those children have finished their course of treatment out of state and can step down to these treatment homes as they come on board too. So it’s a multifaceted approach, if you will. Do I ever think the day will come when we have no children out of state in New Jersey? I would like to tell you, yes, but I don’t think that I could tell you that. I am hopeful that we get to the point where it is a very minimal number for very specialized care.

ASSEMBLYMAN PAYNE: Great.

Let’s not lose focus of these kids that are in jail.

DEPUTY COMMISSIONER WAY: I don’t want to.
ASSEMBLYMAN PAYNE: Let’s please not lose focus on that, because that’s the issue that we need to have taken care of. And there’s going to be cooperation needed between -- and I’ll ask Howard Beyer -- but between the judges who are sentencing these youngsters there, in instances maybe where they’re aware that these youngsters really need to be placed elsewhere. We know that there’s no other place for them right now. We’re working on it.

DEPUTY COMMISSIONER WAY: That’s right.

ASSEMBLYMAN PAYNE: But the fact is, that if these youngsters are going to be remaining in these detention centers, then we need to somehow provide services while they’re there. And that’s not happening in many, many instances.

Thank you.

I don’t know whether there’s any other questions.

DEPUTY COMMISSIONER WAY: Could I just say one more thing -- and that is that Judge Carchman has been extraordinarily helpful and willing to work with all of us to help the courts expedite this process. And we should all be thankful that we have somebody like Judge Carchman leading it.

ASSEMBLYMAN PAYNE: I think Judge Grant, in Essex County, is also working--

DEPUTY COMMISSIONER WAY: Absolutely. I met with him a few weeks ago.

ASSEMBLYMAN PAYNE: Let me just ask--

Thank you very much. I think you might be helpful if you remain for the other testimony.
DEPUTY COMMISSIONER WAY:  Okay.

ASSEMBLYMAN PAYNE:  And also, let me ask, who
administers the Americans for Disabilities Act, who monitors that? Is that
the Department of Human Services, or who is responsible for following, to
make sure that--  In other words, we have a situation where there was an
accident in Hawthorne, New Jersey -- the Christian Children’s Group Home
Retreat. There was an accident where a number of youngsters -- I think one
may have even been killed. But the question now is whether or not these
youngsters in this van were situated in wheelchairs that were bolted to the
floor and secured properly, and seatbelts, etc. I’m trying to find out
whether or not, if these youngsters were in -- foster children or they were in
the system. If something like this happens, who has the responsibility for
investigating it or looking into it?

DEPUTY COMMISSIONER WAY:  I think Deputy
Commissioner Wilson is here.

ASSEMBLYMAN PAYNE:  Okay, she is.

DEPUTY COMMISSIONER WAY:  And I think she may be
able to speak to that.

ASSEMBLYMAN PAYNE:  She can -- okay, fine. Maybe she’d
be able to answer that question.

All right. Thank you very much. Thank you.

Now we’ll ask Mr. Howard Beyer, Executive Director of the
Juvenile Justice Commission, to please come forward.

HOWARD L. BEYER:  Good morning.

ASSEMBLYMAN PAYNE:  Good morning.
MR. BEYER: Good morning, Assemblyman Payne, Chairman; Assemblyman Cryan, Assemblyman Fisher. I want to make it clear that my name is Howard L. Beyer. I’m the Executive Director of the Juvenile Justice Commission, and I want to say that because maybe, by the time I’m done testifying today, I may sound like a child advocate. But I am not the child advocate, and people think I am the child advocate because we look very similar, Kevin Ryan and I. In fact--  (laughter)

ASSEMBLYMAN PAYNE: You all look alike. You advocates all look alike to me.  (laughter)

MR. BEYER: Well, yesterday at a director’s board meeting that I have for the Commission, one of my directors, who is on that board, came up to me and said, “Kevin Ryan, what are you doing here?”  (laughter) So I want to make it clear who I am.

I’m here to talk to you this morning to give you an update from where we were last time. I think that we have made significant inroads. I want to say again why I feel so passionate about this particular subject, and I thank all of you for being passionate about this. I’ve been in State business, a career employee for nearly 30 years now, and I’ve never seen such passion come from the political world as I have seen now.

I was the Warden of Trenton Prison for nearly 10 years, during the ’80s and the early ’90s. And during that time, I saw more adult males come in with mental health issues, where I used to take people for tours. And I would get to a unit -- and first we had 24 guys, then we had 48 guys, and then we had 96 guys, and then we had 150 men. And they would say to me, “Well, what are they doing here? Why do you allow this?” It had nothing to do with me. They were sent to us. I’d like to see that stopped
in some way. I think part of the role of the Commission -- we are the last hope to change a life around. And many of the kids who are in our system have issues -- mental health issues, substance abuse issues, gang issues -- and here is an opportunity. And so, keep the heat on us. It is a good thing, because things are changing and things are getting better. Although we’re not perfect, we’re getting better collaboratively. And that’s kind of what I want to talk to you about.

We do have kids with mental health issues in the Juvenile Justice Commission. Some are in the Commission because they have delinquency issues and mental health issues. Some are in the Commission because, still, the system moves too slow -- as has been suggested -- and sometimes, out of frustration, we have to take the kids. So they send them to us. Is it getting better? Yes. Is it improving? Yes. Will it continue to get better? Yes. But it still happens, and that’s a reality. And as a result of good intentions, there are positive things happening. What Kathi had suggested about the MAYSI, or the Massachusetts Youth Screening Instrument 2 -- it is an opportunity as kids come in, boys and girls come into the detention centers, to provide them with this instrument. And at that moment, we get -- at least the detention centers get an idea as to the status of that child’s mental health status at that moment. And you can begin the process to begin treating.

I also want you to know that the process-- And we are working collaboratively -- and collaborative is the word here -- I just want you to know, collaboratively with Human Services and other agencies, so that when the child is arrested by the police, or brought in by the police, that the opportunity really starts there. So that if a kid, a boy or a girl, has a mental
health issue before he even gets to detention, that’s really what we want to do. And we’re working on that with Human Services so that the process starts before you go in detention.

I’ve heard -- you’ve been told about juvenile detention alternative initiatives, and I do want to talk about that as well. Because two years ago we went, in earnest, after the Casey Foundation, to get Casey to support New Jersey as a replication site to try and bring down the number of kids who are in detention. Because detention throughout the state is overcrowded. You’ve heard Camden, where there was 135 kids in a place built for 37. Incredible. We knew that something had to be done, and we wanted to do it. And we knew Casey was the answer. And we knew, in order to get Casey to come in and declare New Jersey as a replication site, we had to sit down with partners who are responsible for this issue, and that we had to sit and talk and collaborate to make things better. And that includes Human Services, and that includes the Child Advocate, and that includes the courts and the prosecutors and police and the detention association, and everybody else who’s involved in this world. And it’s working, and it has helped, and it is getting better, because we -- I just want to make this clear -- we are not advocating that there should be no detention centers. There is a place for detention centers. Some kids, unfortunately, do some terrible things. But what we do advocate and we do state -- and I say this often -- that if we -- a child, a boy or a girl, who does not need to go into detention should not go, even for one night. Because we believe one night in detention for a child who doesn’t belong there will change that child’s life forever, and will not change it for the better. It will be for negative outcomes in the end.
And so we are working very hard to do system changes, not Band-Aid fixes -- long-term fixes, long-term adjustments, system changes, so that 10 years from now, you won’t have to be asking these questions that -- why is this child waiting to go into a detention center or languishing in a detention center for months? Detention centers are not long-term facilities. They are to be short. It’s a public safety issue for the kid who needs to be off the street. Get him in, get him out.

The long-term things for rehabilitation, that’s the responsibility of the Juvenile Justice Commission. If it is a treatment issue, that’s the responsibility of the Department of Human Services. They treat, we rehabilitate. We recognize, though, that there are kids who are in our system.

We had a mental health unit at the Training School for Boys in Monroe Township. We got it through a grant. It was a three-year program. It was to end on March 3 of this year. I say it was supposed to end because one of your colleagues came to visit -- saw, talked to the kids -- was really touched by what he saw. And so we were given an opportunity to maintain that unit for these kids, because it is so desperately needed. And so instead of closing on March 3, on March 4, at 12:01, we took over. And I’m proud and pleased to tell you that the State is running this program -- we are. We’re doing it with our own staff, through collaborations with the University of Medicine and Dentistry of New Jersey, and I think we’re doing a better job. And we’re making sure that these kids with mental health issues and delinquency issues are being taken care of. It was a last minute save. We call it a miracle. But we’re pleased to be able to do that, because it is so important.
And so the kids who come in to the detention center -- we have a better idea of who they are when they’re identified. If we can divert them to a program outside the Commission, yes, let’s do it. If Human Services can do that, yes. If the police can do it, yes. But within the Commission, I just want to assure you, we are working very, very hard to deal with our kids who have mental health issues.

We’ve also worked very hard to improve health care for the kids who are in the Juvenile Justice Commission. We were providing health care by a private vendor for nearly 10 years. On January 1, through support by many folks in the Assembly, Senate, Governor’s Office, we were able to restore health care to be provided by the State of New Jersey -- doctors, nurses, health-care administrator now works, in essence, for the Commission, for me, and we are providing a higher level of care for our kids. And the University of Medicine and Dentistry, again, is providing the mental health care for our kids, for the boys and for the girls.

I don’t want to overlook or let you forget about the girls. We, right now, have 60 secured-care girls in our facility in Bordentown. They are our most needy and our most deserving, perhaps, of the better treatment that they can possibly have. Many of them are victims of abuse, and, yes, they have committed crimes, and, yes, they need to be taken care of. And I would like to take a moment at this point to tell you that those kids go home -- 99.9 percent of the kids in the Juvenile Justice Commission go home.

And here’s the real sad part. We can do the very best we can. We can provide them the very best health service. We can get them ready to go home, because we get them ready to go home from the day they walk
because we understand that reentry doesn’t start two hours before you go home. It starts the day the child walks in. We try to expand and ensure that the boy or the girl understands what it is to go to a pharmacy, how to use a banking card, how to drive a car, how to take care of yourself. But those kids with mental health problems, even with our meager 36 parole officers and our outreach programs, it’s really not enough.

The kids get lost. Collaboration with Human Services is necessary, and it is happening. But it has to be happening even on a greater level. These kids get lost. An 18-year-old girl, who just turned of age -- emancipated, if you will -- severe mental health issues. We have everybody and their brother looking out for her. She went back to Newark, and we are praying that she’s going to be okay. While she’s on her medication, she’s a gem. Off the medication, you got to watch out. You can’t be with the child all the time. And just because they’re of age and they become 18-and-a-half doesn’t mean that they’re now adults. In the Juvenile Justice Commission, we take care of kids. We don’t take care of little adults. And they always have to remember that they are kids.

So they have to be treated before, they have to be taken care of in, and they have to be taken care of after. And we are working very hard with our partners and our collaborators to ensure that this is happening.

Just recently, and as a result of this Committee hearing -- I want to thank you. Perhaps, the Child Advocate’s Office and the Office of the Juvenile Justice, we had some issues. We were both trying very hard to do the right thing for the right reason. But we came out of a recent hearing that, when we were together, where the Child Advocate made a commitment to us to provide funding for training -- enhanced training for
the officers in the Juvenile Justice Commission and enhanced training for
the officers in the detention centers. And I want to tell you how important
this is. The University of Medicine and Dentistry is providing the training.
We have brought in all the detention centers. We have 100 percent
cooperation and collaboration. We are going to present a program, which is
called the Champion Model, which helps staff identify and keep an eye on
kids with mental health issues, to better do the job while we have the kids
we are responsible for. If we’re unable to divert them and we do have to
have them, or they do come to our system, I could promise you this -- there
is no person in this business who wants to lose a child under their watch.
Never, ever, ever.

So what we have to do is to provide the very best care that we
can, and that comes with training. And I want to publicly thank the Child
Advocate for this support, because we have already began the training for
the detention centers and for the Juvenile Justice Commission. And I think,
as a result of this, this is going to bring us to a level of care, understanding,
and appreciation that you’ve never seen before. We have understood that,
unlike the adult correctional field -- and I’m not taking anything away from
them -- but we have to do our business differently. We are now training
our officers and our civilian staff to be better listeners and better
communicators. Because while I want them to be trained in how to handle
a riotous situation -- because you never know when that might happen --
when you’re dealing with kids, how you listen to a kid and how you talk to
a kid make all the difference of whether or not you’re going to have an
adversarial situation, especially when you have a kid with mental health
issues.
We don’t have to draw a line in the sand and be aggressive with a child who has mental health issues, who is maybe 16 years old, and doesn’t have a grasp on what his or her mental health situation is. That’s what we are talking about and what we are doing. And so this training is really raising the bar, of raising the professionalism, the awareness of where we are going with kids and how we are going to handle them. And I think it’s going to really be a terrific situation.

Since JDAI has come to New Jersey, I want to assure you -- and we intend to expand. The idea -- we started out in four counties -- Atlantic, Camden, Essex, and Monmouth -- and we just started with Hudson. We’d like to go to Union and Middlesex, perhaps, next. We’ve got to move at a pace that everybody can handle. But since we started in April of 2004, Chairman, there are 100 less kids every day in detention.

And I can’t even tell you the impact that it has on the issue of disparity. Because when we first sat down to do our study, it was incredible how many minority children are in our detention centers, and ultimately in the Juvenile Justice Commission. And this program allows us to deal with that issue. Because, as I said earlier, we’re talking about systems changes, and that’s really what it’s all about.

The poor child up in Union who committed suicide some time ago was arrested and placed in the detention center for stealing a bicycle. He took his life that night by tying a bed sheet around his neck. Now, for the family that maybe lost that bike, it was a terrible thing. But was it worth the life of a child? We don’t know what that child would have done. Here is an opportunity to do a better job.
And I want to personally thank Assemblyman Cryan, who has continued to support our efforts and been concerned in improving things. There will be a new detention center up in Union. But even with the new detention center, we hope that they’re going to build it way too big, because we want to come up with significant alternatives. So the only thing they’re worrying about is how empty it is. Because there’s going to be -- the kids with the mental health issues aren’t in there and the kids who don’t need to be in there are not in there. So let it be too big, but let us train that staff and work collaboratively with them so that the kids who are in there are provided with the very best care that they can, and that they don’t get lost in the system and they don’t languish, and that the Child Advocate could have their focus in other places. And that’s really what we’re trying to do. We’re trying to do the very best that we can.

ASSEMBLYMAN PAYNE: Thank you very much, Mr. Beyer.

I have a question or two. Detention centers -- what’s their role, what’s their purpose?

MR. BEYER: It’s to provide public safety, to remove those kids who have committed public safety issues, to get them in, and processed, and out as quickly as possible.

ASSEMBLYMAN PAYNE: In, processed, and out. In other words, they’re not long-term facilities, correct?

MR. BEYER: Absolutely. It is not to be a long-term facility.

ASSEMBLYMAN PAYNE: Okay. Mr. Cryan was mentioning a little earlier about some of the youngsters that are in these facilities for extended periods of time. I do know that in some instances -- I think in Essex County -- there’s a youngster who’s been in there for 600 days -- 600
days. That there are others that are in the facility who have been waved up to be placed in adult facilities, who are still there, okay. But it’s a short-term facility, until a child is adjudicated or what, exactly?

MR. BEYER: Right. Until he’s adjudicated and placed.

ASSEMBLYMAN PAYNE: Are they placed there? After going to court, then they are placed -- how does it work? A child is arrested, put in a detention center--

MR. BEYER: Right.

ASSEMBLYMAN PAYNE: --is supposed to go before a judge--

MR. BEYER: Right.

ASSEMBLYMAN PAYNE: --quickly, and either sent to Bordentown, or some other facilities there, just for a short period of time, correct?

MR. BEYER: Well, I want to -- yes. The whole idea is short-term. But I want to reemphasize the importance of diversion. Again, we would be talking about all different things if, as our system gets better and strengthened, the kids who you’re talking about -- is really, I think, if I’m reading you right -- are the kids who don’t need to be in there. That’s what JDAI is all about -- is getting people to think differently about the system we are running so that the kids don’t have to be in there.

ASSEMBLYMAN PAYNE: Yes. My point is that we talked about the extent, the period of time that the youngster is held in this temporary facility, and we have at least one youngster who is there for 600 days, waiting to be placed somewhere. I suppose they’re there waiting to be placed by the court system, right, by the courts -- to be placed someplace else, maybe into Bordentown, or wherever they’re supposed to be.
MR. BEYER: It could be us, or it could be Human Services.

ASSEMBLYMAN PAYNE: There are others that are being held in that same facility for 50 and 60, and 75 to 100 days.

MR. BEYER: Right. I just want to make one point clear about -- we cannot deny nor hold a child more than 15 days in the detention center.

ASSEMBLYMAN PAYNE: Yes.

MR. BEYER: And since we became a collaborator, and I guess the lead in the JDA process, we have made it our business to try and pick up the kids out of the detention centers almost immediately. I made a commitment to Kevin on that, and we have kept to that. So the JJC kids are kept to a minimum in all the detention centers.

ASSEMBLYMAN PAYNE: Do you know of some instances where, as I mentioned, that some of the youngsters are held far longer than that -- I mean, more than one or two?

MR. BEYER: For JJC placement?

ASSEMBLYMAN PAYNE: Well, let’s say you explain it to me. I don’t know what a JJC placement is.

MR. BEYER: In other words, a kid who would be coming to one of our facilities -- a Bordentown, a Monroe Township, a residential program -- we have been able to keep those numbers down so that they’re not waiting.

ASSEMBLYMAN PAYNE: Where do the other youngsters go? For instance, if they’re in a detention, because, then, I don’t know how the system works. They’re arrested and then they’re sent before a judge, I suppose, and adjudicated.
MR. BEYER: Well, there’s kids waiting to go into a Human Services program. We are both represented in the detention centers, and things have improved. We’re able to tell you that, because of the effort that has gone on through collaboration, there are a lot less kids waiting to be placed for long periods of time, because there are new opportunities through the efforts of Kathi and Commissioner Davy to get those kids out.

ASSEMBLYMAN PAYNE: By law, the youngsters are not supposed to be held more than how many days in a detention center?

MR. BEYER: I don’t know of a specific regulation that prohibits them from staying for a period of time. Our watermark is 15 days. At the 16th day, we start paying. So I can’t remember, within the year, where we had to pay.

ASSEMBLYMAN PAYNE: Fifteen days.

MR. BEYER: But that isn’t the reason why we work hard to get the kids out.

ASSEMBLYMAN PAYNE: Yes. But I’m just trying to get a clear understanding of the role of the detention center, when a child is placed in a detention center. I guess if, when they become arrested and they’re placed -- the official role of the detention center is what? A child is arrested.

MR. BEYER: And they’re held until they’re adjudicated.

ASSEMBLYMAN PAYNE: They’re held until they’re adjudicated, correct.

MR. BEYER: Right. And sometimes that could be a lengthy period.
ASSEMBLYMAN PAYNE: The adjudicated -- they go to court, right?

MR. BEYER: Right.

ASSEMBLYMAN PAYNE: And then they’re adjudicated then.

MR. BEYER: And then a decision is made, and then--

ASSEMBLYMAN PAYNE: Okay. So is there a delay sometimes between a youngster who is being brought to court -- they’re being waited--

MR. BEYER: Yes. There could be a delay until the court is satisfied that there is an appropriate placement for that child, yes. To answer your question, that’s how it happens.

ASSEMBLYMAN PAYNE: But what happens -- when does a child go before the court? You said that they go-- They’re arrested, let’s say, and for shoplifting let’s say, by the police officer. When they’re arrested, they’re brought to the detention center, correct, when they’re arrested?

MR. BEYER: Yes. And if they are committed to the Juvenile Justice Commission -- that process, whatever long it takes--

ASSEMBLYMAN PAYNE: Okay. But before--

MR. BEYER: And then they’re sentenced.

ASSEMBLYMAN PAYNE: But they’re holding the youngster before he goes before a judge. All of them go before a judge, correct?

MR. BEYER: Yes.

ASSEMBLYMAN PAYNE: They’re brought to the center by the police officer, picks them up on the weekend -- the courts are closed -- so they come to a detention center, right?
MR. BEYER: Right. And the police can determine who stays and who goes.

ASSEMBLYMAN PAYNE: Oh, is that right?
MR. BEYER: Yes.

ASSEMBLYMAN PAYNE: The policeman does that?
MR. BEYER: Right. And that’s the part I was telling you about, that--

ASSEMBLYMAN PAYNE: Sure. Curbside justice or court justice, etc., etc. But the police officer can determine whether or not to take a child to the detention center to hold them--

MR. BEYER: Right.

ASSEMBLYMAN PAYNE: --or what -- let him go?
MR. BEYER: Come up with an alternative situation.

ASSEMBLYMAN PAYNE: The police officer makes that decision?

MR. BEYER: Yes. They can do that.


MR. BEYER: To go home. To be in the custody of a shelter. It isn’t automatic, and that’s one of the things we are working to strengthen -- for options that will not necessarily mandate that a child must go into a detention center, to come up with those alternatives.

ASSEMBLYMAN PAYNE: Right. But when they are in a detention center, is a child sentenced to serve a term in a detention center?
MR. BEYER: No.
ASSEMBLYMAN PAYNE: Right. Okay. That’s what I want to get at.

We have some -- if they’re waiting-- You say, awaiting for adjudication, that is what? That’s when they go before a judge. Is that correct?

MR. BEYER: Yes.

ASSEMBLYMAN PAYNE: All right. So the child is brought to the detention center over the weekend. He’s held there until he’s taken before a judge to be-- The judge then determines guilty, yes, or not guilty or -- and then sentences him to maybe alternatives to detention, maybe a program and so and so, right?

MR. BEYER: Right.

ASSEMBLYMAN PAYNE: The question I have is, how would a youngster be held 35, 45 days before going to a judge? Is that before they go--

MR. BEYER: Well, if the court is not satisfied with the information that is provided, if they’re waiting for an evaluation, if they’re waiting for direction as to where they could possibly, appropriately place the kid, there will be delays.

ASSEMBLYMAN PAYNE: Okay. So they’re sent back to the detention center until--

MR. BEYER: No. They’re not sent-- They wait in the detention center, that’s your issue. That’s what happens.

ASSEMBLYMAN PAYNE: Okay. They wait until-- All right.

The judge does not bring that child before him until he’s got all the information on the case? Is that the way it works?
MR. BEYER: Well, they could come-- There could be a date. They come forward. The information that they needed is not all there. It’s sent back. I think everybody wants to do the right thing for the child. What happens is, if it doesn’t happen timely, if all of the pieces are not in place, as the Child Advocate would say, you have kids languishing way too long for a placement, and that’s what the collaboration is for -- to move the mountains that could never be moved before. To sit down and face each other and say, “Look, we cannot walk away from this issue any more. We cannot point fingers at each other any more. We have to do this together.” That we have to have the pieces in place so that doesn’t happen.

I want to go back to, again, if we can start the process before the child goes into a detention, then we have really achieved a great victory.

ASSEMBLYMAN PAYNE: How do you start the process? The cop picks up a kid. The cop determines what? That he should go -- not be booked, for instance. The cop has the wherewithal to have a child not brought to the detention center. How do we keep them from getting into the system?

MR. BEYER: Can I bring -- I have my lead person -- maybe I could ask Lisa.

ASSEMBLYMAN PAYNE: Sure, sure, sure.

And I’ve been told -- yes, please -- that it’s the judges that are holding things up. That the judges are the ones that are not moving these cases, and therefore, we have kids that are waiting a year. They’re not to be held -- not even supposed to hold a prisoner in a county jail for more than 365 days. And now we have youngsters in some of our youth houses being held far longer than that. Why?
LISA MACALUSO: I think that there is, basically, two reasons.

ASSEMBLYMAN PAYNE: Identify -- your name and -- yourself and what--

MS. MACALUSO: I’m sorry. My name is Lisa Macaluso. I’m from the Juvenile Justice Commission.

ASSEMBLYMAN PAYNE: Okay.

MS. MACALUSO: I think that there are two reasons. One of the reasons, through the JDAI, that we’ve kind of identified is going to your original question about how you divert kids prior to being placed in secured detention, is through something called a risk screening tool. And the Juvenile Justice Commission, along with our partners and the JDAI, are in the process of developing such a tool to be used at intake to identify kids who have low-level offenses, that don’t need to be in detention because they’re not a public safety risk. They’re not a risk of flight, which are the statutory reasons why you would place someone in detention. And if you have that piece in place, then the development of a system that diverts those kids, either on detention alternative or just outright release to someplace, becomes a much more rational process.

We’re very close. We’re piloting an instrument, retrospectively, on a sample of cases. We’re working with the Judiciary, Human Services, Probation, and the police to create and get it to happen. And hopefully we’ll be able to implement that in the next several months. But once a kid gets through that, basically, what happens is, a police officer will arrest somebody. And then they call Family Court intake. They have six hours to remove the kid, under their own jurisdiction. And then after six hours, they have to call Family Court intake. Family Court intake makes a decision
about whether to place the youth in detention or not. And at that point, typically, the only decisions are outright release or placement.

And then after intake, the youth will have a -- if they’re remanded to the detention center, the youth will have a hearing in 24 hours, another hearing in 48, to try and see if we can divert that kid in the short run.

ASSEMBLYMAN PAYNE: Does a child get a record right from the beginning, even though he’s diverted? Does a child get a so-called record from that point on, even though they’re sent to an alternative facility?

MS. MACALUSO: Yes. Because, typically, at that point, a youth has been arrested. And so the intake officer, they’ll start the file for the arrest.

ASSEMBLYMAN PAYNE: Okay. I don’t want to prolong this too much. You, Howard, and I are members of the Criminal Disposition Commission, now, okay, which has been reactivated, etc., etc. One of the purposes of the Criminal Disposition Commission is to see to it that we can avoid children, or even adults, from getting a record from day one. In other words, curbside justice, where a police officer too often-- Let’s take a city like Newark. A police officer, too often, takes the kid, arrests the kid for -- oh, I don’t know -- shoplifting, or something like that, or something else, arrests him. That child gets a record immediately.

Take another child doing the same thing in Livingston, or someplace like that, Summit, he’s taken home, or whatever, or not taken -- there were pretrial intervention. The youngster who does the exact same thing in the inner city gets a record at age 14 or 15, and so on. So the kid in Livingston, or Summit, somewhere, never gets a record, ever gets a
record, because the determination is made either in a courthouse or with the policemen themselves for the very same crime, or offense, or whatever.

So one of the things that the Criminal Disposition Commission will do is to look at how do we prevent that. We’re talking about -- we don’t want the kid to go into detention, although he has a record, we want him to go to an alternative. But he has a record. So what we’re trying to do is have equal justice under the law. We want to have a kid in Livingston, or Summit, or someplace else, to -- if the kid can go into PTI up there, then why not here, for the same crime, you see? The outstanding -- it’s absolutely amazing that the number of juvenile--

For instance, as an example, use Essex County, because that’s where I’m from. There are 463 African-American youngsters who are detained from January through December, all right -- 463. Eleven white youngsters, all right, same county. I have to say that I really believe the youngsters in Belleville, and Nutley, and other places also commit crimes, but why do we have 463 African-American youngsters compared to 11 of others? Okay? And the same thing across the board -- Camden, you have similar situations, etc. Union County, you have 10 white kids that are identified in this chart, 127 African-Americans.

Very often it’s because these youngsters have been stopped by a police officer and, immediately, they get a record. You go to the other part of the community, or other part of the county, and they’re taken home or say, “What the hell are you doing here,” and “Stop hanging around here, okay?” And so that one of the things that the Criminal Disposition Commission has to do is look at this and have equal justice. Okay? So it’s
absolutely astounding, when I got these figures about the number of-- The same county -- these people live in Essex County as well.

MR. BEYER: That’s why this project that we’re involved in with our partners is so important, because that’s exactly the issue we address collaboratively, that-- If you would hear Bart Lubow, who is Project Manager for Casey, would say, “You have two choices: Either put more white kids in detention, or you come up with long-term system changes.” And we choose the long-term system changes, so that we can achieve just what you are asking.

ASSEMBLYMAN PAYNE: Yes. But I want to address the problem before the kid gets in the system.

MR. BEYER: Well, that’s what we’re trying to do.

ASSEMBLYMAN PAYNE: You see, once they’re in it, it’s fine to -- well, let’s get them out of here real fast. He starts out early in life with that record throughout his life. So we have to do something where we change the mindset of the police officer, or those people there. That’s where it has to start. Because it doesn’t help once a child is arrested, and fine, we can put him in alternative programs, and we’re not going to send him to jail, we’re going to get him in training -- but he has a record. And we have to prevent these kids from getting a record for the same kind of thing. And that’s one of the concerns that I have, and one of the things that we, hopefully, we’ll be able to work on.

Drug courts -- I understand there’s only three drug courts for juveniles in the state. Is that correct?

MR. BEYER: Yes.

MS. MACALUSO: Yes.
ASSEMBLYMAN PAYNE: Do we need more? The majority of the kids in jail are probably drug-related kinds of offenses.

MR. BEYER: Many are.

ASSEMBLYMAN PAYNE: Yes. We have -- what -- for adults, I think, there’s 21, I think, or maybe-- Every state, every county has them now, I believe -- drug courts -- for adults.

MR. BEYER: I’m not sure.

ASSEMBLYMAN PAYNE: So we have three for youngsters, all right. So I think that’s a point that we need to make, and that we have to certainly look into that and see whether or not we can do this. It makes no sense. It makes no sense. Many of the youngsters that are in jail are for nonviolent kinds of crimes, etc. They shouldn’t be in jail. This is ridiculous. So I hope this collaboration is working. I do know something about the Judge Grant, and others up there, because initially I was going to be a part of that. But as an elected official, I wasn’t able to be on there, whatever it is. But this is what we’re looking at.

MR. BEYER: You’re still invited to be on it. We’d love to have you. (laughter)

ASSEMBLYMAN PAYNE: Well, thank you very much. Yes.

Those are just my concerns. I’m going to ask for -- any of my colleagues have questions.

Mr. Cryan.

ASSEMBLYMAN CRYAN: A couple of quick things in the interest of time. And he doesn’t need an invitation. (laughter)
When the kids do come in, though, they do get assessed? When these kids become part of it, we do have caseworkers? We do have managers?

MS. MACALUSO: When they come into the detention center or the Commission?

ASSEMBLYMAN CRYAN: When they come into the detention center, the process begins, right?

MS. MACALUSO: Yes.

ASSEMBLYMAN CRYAN: Whether it’s in 24 or 48 hours?

MS. MACALUSO: Right. Through the detention center, yes.

ASSEMBLYMAN CRYAN: You’ve heard that in previous--

One of the things with drug courts, just off the top, it’s one of the things that Judiciary argued pretty significantly to us, was the fact that there were two standards of justice. That was their argument to increase the amount of drug court money, because there were drug courts in some parts of the state and not in others, and therefore, they were worried about equal protection statutes. I wonder how that applies with the kids as well. And I hope that’s something we explore.

The alternative initiative with the numbers, four counties, now five -- you’re going into Hudson. I know you wavered a little bit, but especially with Middlesex, which has the highest percentage at the moment, one of the higher percentages, I should say. What’s the plan? That’s five out of 17, right, for the detention centers?

MR. BEYER: Right.

ASSEMBLYMAN CRYAN: What is -- is there a plan?
MR. BEYER: Yes. There is a plan to eventually capture all 17 counties that have detention centers. We recognize Union and Middlesex, on our radar screen, are the next two. It is a tremendous amount of resource. It takes a tremendous amount of resources to do the data, the collection, the information gathering, a huge commitment of time working with your collaborative partners -- the people from Probation and the courts and-- Even though we do have a grant from Casey, it is people powered. What we don’t want to do is fail. We want to make sure we keep moving forward and not overcommit ourselves so that we--

ASSEMBLYMAN CRYAN: I have no problem-- Started in April of ’04? Is that right?

MR. BEYER: Right.

MS. MACALUSO: Yes.

ASSEMBLYMAN CRYAN: And five in -- so is that a rough average in terms of how we’ll move forward, because the numbers are pretty astonishing out of the alternative initiative. Clearly, I won’t press you on what won’t be a date. That’s pretty obvious. It just seems like it’s an optimistic hope for the future.

One other question for you, Howard. As a legislative body, staying on the issue of just the mentally -- the kids that need the mental health. You heard us talk to Kathi -- Commissioner Way, I should say -- about the amount of beds and things that go with that. Are there legislative needs that we should either be looking at, either in legislation or finances, that can help at this point remediate some of this situation, or are we just on a path where we’re on the right way and are getting there?
MR. BEYER: Well, you are certainly on the path. And keeping the focus on children, whether it be Human Services or the Juvenile Justice Commission, is outstanding. If I could speak selfishly, we are the bottom rung on the ladder. We are often forgotten. We are left off the table. We can go and speak, and then there’s legislation passed, and the Juvenile Justice Commission -- even though we came, we testified, we talked -- is left out. And we have to scream and holler all the time. We are placed in the Department of Law and Public Safety under the Attorney General for a reason. We kind of got lost in Corrections, got lost in Human Services. You can’t forget about us. If the kids in the Commission are lost, I know where they’re going, whether they be boys or girls. And it is going to cost a fortune. And it is not a life to live if there’s a way to prevent that.

So if you keep us in mind--

ASSEMBLYMAN CRYAN: And you also have the opportunity to educate kids, right?

MR. BEYER: And we do. We’re going to have a big, statewide graduation a week from Friday -- boys and girls at our training school, cap and gowns, pomp and circumstance. And most of our kids are going to be getting their high school diplomas, not GEDs, because we do work with the school districts, because we are our own school district, to get their actual -- if it’s Paterson, Passaic, Elizabeth, whatever it is -- to get their actual high school diplomas.

ASSEMBLYMAN CRYAN: We should get you classified as an Abbott and get some extra money as a school district. (laughter) I just want to share--

Look at some eyes rolling back there. Look at that.
I do want to share with the -- Chairman Payne and I have heard it -- but throughout the budget process, where we’ve been in, and I just -- it’s such an alarming stat. Commissioner Brown, the Commissioner of Corrections, brought up the fact that well over 80 percent of those that are incarcerated -- of the 28,000 or so individuals that are in our prison system these days, over 80 percent of them don’t have a high school degree. And it’s a direct correlation. And so I think he said, thought the number 84 percent.

The recidivism rate, just to kind of put this thing in perspective -- whether it’s dollars or cents, or quality of life -- we are going to release, over the next five years out of the adult situation, over 70,000 individuals that have come in. Because the sentence today is, the average stay is, somewhere around three years. Of those, in the next five years in the State of New Jersey, we’re going to rearrest 38,500 individuals. So either we do it now or we don’t.

So we all look at fiscal crisis, and property tax rebates, and this stuff that kind of makes the front pages. The real way -- whether it’s in dollars and cents -- we can save a fortune, or more importantly, the quality of life, is dealing with this type of issue now.

MR. BEYER: I just want to say to you, and to piggyback on that, at our last Lifeskills and Leadership Academy graduation, six of our kids, six of our boys, were enrolled in a community county college.

ASSEMBLYMAN CRYAN: Great. Thank you.

MR. BEYER: So they’re going to school, and they’re going to college.

Thank you very much.
ASSEMBLYMAN PAYNE: Mr. Fisher?
ASSEMBLYMAN FISHER: No.
ASSEMBLYMAN PAYNE: Thank you, Mr. Beyer.
MR. BEYER: Thank you, sir.
ASSEMBLYMAN PAYNE: Thank you very much for your testimony. And you have our support. I'll be looking at your graduates, maybe in person, if I can make it down to their graduations.
MR. BEYER: Thank you.
ASSEMBLYMAN PAYNE: Thank you very much.

Kevin Ryan, the Office of the Child Advocate.

KEVIN M. RYAN, ESQ.: Good morning, Mr. Chairman, and members of the Committee. Thank you for inviting me to testify before you today.

This past January I had the opportunity to testify before this Committee about conditions for youth in the 17 county juvenile detention centers. At that time, I reported that the Office of the Child Advocate had completed a comprehensive report concerning, in part, the access of detained youth to mental and behavioral health services and the overall quality of services to children who languish illegally, following a court-ordered disposition, in detention centers.

At that time, we reported to you on the state of youth awaiting nonsecure child welfare or mental health placements and services; data regarding suicide threats, screening and assessment for mental health needs; and the critical need for a greater spectrum of service availability for New Jersey’s children. On each of these issues, we have continued to do the work that our statute requires, which among other things is to seek to
ensure the provision of effective, appropriate, and timely services for children at risk of abuse and neglect in the state; and ensure that children under State supervision, due to abuse or neglect, are served adequately and appropriately by the State.

As part of our monitoring efforts, we tracked the census from every detention center, every day. As an example, on June 8, 2005, there were 749 children in New Jersey’s 17 detention centers. We’re focused on the children who are post-disposition, but still in detention, because those children face the most egregious violation of their rights: A judge has conducted a hearing and ordered that they receive treatment, whether in a residential treatment center or a community-based program, and despite that, they remain in the most restrictive, most inappropriate setting -- jail.

That does not mean, though, that we are not concerned about many other youth in detention. In New Jersey, there are only two limited circumstances in which a judge can detain a child: When the child presents a risk of harm to the community or presents a flight risk. Despite those narrow criteria, judges are often forced to detain children because, simply, there is nowhere else for them to go -- no available residential placement, no shelter capacity, not enough host homes, and not families willing to take them. There are also children who sit in detention centers for months and months even before a judge enters a disposition, often because the disposition has been delayed, because there is nowhere for these children to go either. We are just as concerned about these children and the serious systemic flaws that force them to spend time unnecessarily in detention.

The county detention centers have been collaborating with us and providing to us the number of youth disposed by the court to the
Department of Human Services as of the 15th and the 30th of each month. As of the 15th and the 30th of last month, we can report to you that approximately 50 youth, on both days, were awaiting a nonsecure child welfare or mental health placement following disposition. State law is clear that youth cannot continue to be detained once a court orders them disposed to a nonsecure placement, such as a child welfare or mental health program. But the law continues to be violated for approximately 7 percent of our total juvenile detention population.

In counties such as Mercer and Middlesex, more than 10 percent of the youth in their detention centers are waiting for a placement, post-disposition. This is a persistent problem that is not unique to New Jersey, and it predates the current administration. To their great credit, in fact, Governors McGreevey and Codey, and Commissioner Davy are the first leaders in modern memory to publicly promise to end the illegal detention of children waiting for child welfare and mental health services. These are promises that we must keep.

Today, there is a 12-year-old boy who has been languishing in a county detention center for four-and-a-half months. Due to disability, the child’s father has a difficult time caring for him. The boy has been diagnosed with Attention Deficit Disorder and Post-Traumatic Stress Disorder. He is young, vulnerable, and in jail. His underlying delinquency charge stemmed from a low-level altercation with another youth that would not have lead to any jail time were he an adult. The State is planning to place this child in a residential institution. Because of a lack of suitable placements for the boy, the State plans to send him to a residential program in Pennsylvania, which is far from his family and his community.
There is a 15-year-old boy in another county detention center today, who has been there for five months because he violated his probation by breaking his curfew and threatening his father. Due to very significant family problems and his own behavioral health problems, this adolescent has remained in the detention center waiting for an out-of-home placement. The detention center staff considers him to be vulnerable, and he has already been assaulted by another bigger resident while in the detention center. Now we are told that he will be waiting for as long as six weeks, until a bed opens up in a residential facility so that he can leave the detention center. He remains in jail, at risk of abuse, without treatment services and without a voice.

And consider the 17-year-old girl who was recently released from that same detention center. After having serious problems at home for which she was charged with criminal mischief and resisting arrest, she was placed on probation. She broke curfew at home, and her probation was violated. She spent nearly seven months in the detention center. By all accounts, this teenager is exceptionally bright and motivated, but with no family who is willing to take her back and no home to return to. She waited for nearly seven months in a jail in order to be placed in an independent living program where she now resides. Why are we locking in a detention center a young person who can be appropriately served in an independent living program?

The outcomes in these cases are not what we want for our children in New Jersey. Whatever the program or the collaboration or the contracted service that the State enters, real kids stand to benefit from reform. I have been encouraged by Deputy Commissioner Kathi Way’s
expressions of commitment to reform, and to improving the lives of these children.

As to the question whether the State will soon meet its commitment to youth and find appropriate placements for children now languishing in detention centers, I simply don’t know. What I do know is that we seek a statewide, enduring solution; not a flurry of moves that would evacuate the detention centers within two weeks, but place children in other inappropriate settings.

I would ask you to be vigilant in your oversight, but not to be discouraged. I believe, truly, that this problem can be fixed. We have the political will of the Governor, who is himself a passionate advocate for those with mental illness. We have very strong support from the Legislature through its historic appropriations for reform. And we have roadmaps other states have used to build services and programs for kids.

We have participated in a number of meetings with the Department of Human Services, the Child Welfare Panel, the Juvenile Justice Commission, the Administrative Office of the Courts, and other agencies over the past several months to resolve this problem. To date, our discussions have triggered some very promising pilot initiatives, but they have not yet lead to a comprehensive statewide solution. We welcome continued discussion, but the time for action and reform is at hand.

Again, let me thank you for the invitation to testify before you today.

ASSEMBLYMAN PAYNE: Thank you very much, Mr. Ryan. I think when you were here before us in January, I said that you reminded me of a pit bull, and that you stayed on a target. You stayed on it
and you persisted, etc., and I said that I support you and I want you to continue doing that. There are those who feel that you are maybe too focused on the problem of caring for our young people, but I want to encourage you to continue doing what you’re doing. You have my support.

But let me ask you, you mentioned that you’re encouraged by Kathi Way’s report and comments about the efforts that the Department is -- have committed to reform, etc. Do you feel that the reform that’s going on now is expeditiously enough, is everything that’s being done-- I note, also, that you pointed out that we have roadmaps from other states. I was going to ask you whether or not there’s anyplace in the Union that is doing a job that would be one that we could emulate or repeat or replicate, etc., or whether or not New Jersey’s on the right track now?

MR. RYAN: Well, on the question of disproportionate minority confinement, to my knowledge the only program in the country that has ever made real headway on this front has been JDAI. And it has made real headway, I believe, in the state of Illinois, and in another county. And to the extent that New Jersey has embraced this initiative and is working on it, I think that roadmap for us is the roadmap to real change. Lots of other states have tried lots of other things, but children of color continue in those states to be detained disproportionately to white children.

On the issue of building services for kids, the Department’s conclusion, which I think is right, is that a quarter of the children who are now in residential treatment centers can step down. If those children left those residential treatment centers, that would open up a very significant number of beds, which many of the children who are now languishing in detention could fill. So the challenge is, where do the children in residential
treatment centers step down to? How do we build up our communities so that kids can return to their families or can receive appropriate services in their communities, and how do judges know that they’re sending kids responsibly to places where they’re going to be cared for?

I think that’s the roadmap, and I think states like Missouri and North Carolina have lead the way -- and Arizona -- have lead the way in doing this. I also think we’re talking right now about 50 young people in detention -- it’s clearly not 50 young people a year -- but the scope of this problem is manageable. And we have something that, in my view, we have not had before at the Department of Human Services, and that is a lack of defensiveness about this question and an ambition to make it better.

The Commissioner and the Deputy Commissioner, in every conversation that I have had with them about this -- and we have had several to many -- would time and again emphasize that they want to get this done. There was not posturing, there wasn’t finger-pointing to other stakeholders. There was an ownership of the problem and a willingness to resolve it. Honestly, I think this problem, as you, Chairman, I’m sure think, should have been solved many, many years ago. But we are where we are, and it could never happen fast enough for me. Because the kids in detention today are languishing, and it’s those kids that I am a voice for. I want those kids out today.

ASSEMBLYMAN PAYNE: Just one other question. The Judicial part of this -- the judges, etc. -- do you feel that there’s good cooperation, collaboration, that they understand the gravity of the situation-- That often, when a youngster is sentenced to a detention center or is held in a detention center who should not be there, or even when it’s
clear that a youngster is in need of a mental health services and yet is placed in a detention center and held there -- are the judges working closely enough or aggressively enough to resolve this problem?

MR. RYAN: Well, at the highest level at the Administrative Office of the Courts, the leadership there, in my view, is historic and smart. I think Judge Carchman embraces the collaboration to get this done and is working closely with the Department of Human Services to coordinate. On the question of the judges themselves, there’s no one in New Jersey, other than the kids themselves, who understand this better than the judges. Because every single day they sit behind a bench and watch families, but often not families, kids come before them, and the judges try to figure out this puzzle. Where is this young person going to go? Where is the young person going to be loved and nurtured?

And to the extent that some of the judges are reticent about the direction that reform is moving in, it is because they don’t want to send a child into an abyss. They don’t want to send a child into the community and then have that young person come to a worse end. And what we have known in New Jersey, and what judges have known in New Jersey for a very long time, has been institutional care. This is, as Deputy Commissioner Way said, is a battle that’s going to be won kid by kid. Because when judges see that the Department of Human Services is serious about strengthening children in their communities, and sends those children to those communities and those kids do better as a result of that, judges will begin to believe in this reform. And I think once that happens, the wind will be at our backs.
We’re not there today. Judge Grant, in my view, is one of two or three of the best Family Court judges in the State of New Jersey. And you could say the same in Atlantic County about Judge Armstrong and her record there. And to the extent that these judges are expressing reticence or frustration, it’s because they just haven’t yet seen the reform that’s promised.

ASSEMBLYMAN PAYNE: Thank you.

Mr. Cryan.

ASSEMBLYMAN CRYAN: Thank you.

Good afternoon.

MR. RYAN: Good afternoon.

ASSEMBLYMAN CRYAN: First of all, if you heard Commissioner Way talk earlier, are you confident in the September date, as opposed to the end of June?

MR. RYAN: I’m not sure yet. I would like to review the material that she shared with you today and then have a subsequent conversation with her about that. I’m not sure what that involves.

ASSEMBLYMAN CRYAN: And in apples, apples to apples, if -- we talked here in January about this, wasn’t the number of kids that fit into the focus of the hearing today -- was around 200, wasn’t it?

MR. RYAN: We were talking then about the number of kids who have mental health issues in detention. I think that that number is still around 200 young people. But what I’m talking about are the young people who have been ordered by the court to a placement. There are many children with mental health needs who have not yet been ordered by the court to a placement. That number, right now, looks to be hovering at 50.
ASSEMBLYMAN CRYAN: Okay. But you think the population in terms of need is around 200 today?

MR. RYAN: I think, based on the prevalence data, I think it’s around 200.

ASSEMBLYMAN CRYAN: And I thought, because one of the things you try and gauge -- like it or not, these are human conditions. But you do look at numbers, because that’s one measurable tool. I thought that in January, looking at the 50 number, for awaiting placement was 200. Is that correct, or am I off on that? That’s only from memory, so--

MR. RYAN: We have been talking about both groups of kids, and we’ve been talking about the kids who judges have ordered out of the detention centers, but also kids in centers who need services, but judges haven’t ordered them out yet.

ASSEMBLYMAN CRYAN: Okay. The step down, and again, the step down has been talked about a lot here, and opening of beds. Are there areas, as a Child Advocate, I guess from your perspective, that are opportunities that we’re missing anywhere, in terms of kids being able to step down, or are there areas that we’re missing today that we could be looking at?

MR. RYAN: I believe that one of the most exciting areas in the country of reform is in the rollout of a program called MST, which is Multisystemic Therapy. It is an intervention that is evidenced-based and has shown very significant outcomes for kids, in terms of -- there’s much lower recidivism rates. Kids are much more likely to reconnect with their families and not re-offend. Kids go on to finish school. The few MST programs that we have in New Jersey, right now, are funded by the Juvenile
Justice Commission, and there are not enough of them and there are not any of them that I know that are part of this children’s Behavioral Health system yet. And so I think an opportunity there is to take this evidenced-based practice from other parts of the country and deploy it in New Jersey in our communities. It has been shown, unlike some other interventions, to really work.

ASSEMBLYMAN CRYAN: Through the Chair, could I ask you to send us some information on the MST?

MR. RYAN: Yes, I would be happy to.

ASSEMBLYMAN CRYAN: In the last statement -- I have two other things. I want to ask about JDI and the comprehensive statewide solution, but I want to go back to the competence level. Because while it’s a different thing, but it’s part of the same. In the report you issued yesterday, it was pretty consistent that you hit training time, in page and page and page again. Are there training initiatives that you feel are being left out of the process now, in terms of these kids that need mental health initiatives, that are in part of the system today?

MR. RYAN: Well, one of the things that the report discloses is that field-workers who are doing DYFS casework with families were unsure of what Value Options, which is a stakeholder in the children’s Behavioral Health system, that is a clearinghouse for services for kids, what that system does. So strengthening the knowledge of DYFS workers about what the other system players are and how to access services, which I think is an ongoing exercise, is an important part of reform.

ASSEMBLYMAN CRYAN: Okay. This is one sentence out of this, but it comes up continually. Training for -- “the OCA is concerned
about the training for workers on existing resources, and accessing services for families, and the lack of prevention services necessary to support families.” I guess I’m concerned about it just in the aspect of the focus of the hearing, although I’d love to go over this whole report. Are our people, right now, the people that are processing and working these issues with these kids -- are there training tools or training needs that you’ve identified that aren’t there, yet, for them, or is it just an overall knowledge of the system?

MR. RYAN: Well, it’s both. As to the first piece of this, the training curriculum that the Office of Children’s Services is putting together, as part of its training academy, I believe, is going to roll out this Summer. So once that happens, I think that we’ll be further along, in terms of making sure that people doing this work understand what the resources are.

In terms of accessing services for kids, it’s critical that the people in these counties, who are charged with getting services for kids, know what those services are. And we have found that experience to be uneven -- that in some parts of the state there are gurus who are working this. Assemblyman, in your county, I think one of the hugest reforms has been that there are gurus in the MDT working this, accessing services for kids. That wasn’t true two years ago. That’s not true in other counties. So it would be important to grow that knowledge.

ASSEMBLYMAN CRYAN: And how is that -- I guess just as an opening, because that goes to Bill’s point about disproportionate and everything else -- how is that area being worked, or is that training being
improved to a level of satisfaction that you see there, or is this part of the comprehensive solution that’s not there yet?

MR. RYAN: I’ll answer for my-- I think that the Deputy Commissioner could probably provide you a better or more objective answer. My analysis would be that in some places it’s where you want it to be and in other places it’s not.

ASSEMBLYMAN CRYAN: And the identification of the places that it’s not -- let’s do it this way -- how is that done and who is that raised to or how is that worked?

MR. RYAN: I think it’s an issue within the Office of Children’s Services. And the Office of Children’s Services is building the infrastructure by having county team leaders who have responsibility for growing this knowledge now. And I think it’s their responsibility to understand and map out what the assets are in their communities. And again, some of these county team leaders have a very good sense of it.

ASSEMBLYMAN CRYAN: In your last statement, except for the thank you, is “have not lead to a comprehensive statewide solution, continuing discussion, but it’s time for action.” For all the investments that we’ve all made, there’s still no solution to this that’s at hand. We heard Howard talk about the JDI, the alternative initiative, and the other. Is the alternative initiative, is that the comprehensive solution long term, or is it part of an overall puzzle?

MR. RYAN: It’s a critical piece of it. There’s no doubt about it. But when we stop having kids inappropriately detained on the front end, we’ll have fewer children languishing in detention on the back end. But we have to work out the problem on both ends.
ASSEMBLYMAN CRYAN: So how do we get a solution, I guess, would be a nice way to ask it? How do we get one?

MR. RYAN: Here’s my proposal: I would propose that we figure out what the end in mind is. And for me, the end in mind would be at least that we would end the illegal detention of children post-disposition. How do you do that? I think we do that by knowing who these kids are much sooner in their detention experience. The Department of Human Services can’t find out on the 60th day that a young person is in a detention center waiting for a placement or service, and be expected to get that service available for that young person instantaneously. So it requires a statewide data tracking system, which would make this information available to the Department sooner.

And I understand that the Department plans to do that as part of its SACWIS development. I think that’s a key reform here. One of your questions has been about data. The way we get data right now is, we are calling the detention centers and we are talking to social workers and detention center directors and nurses, and that’s how the data in this system is being generated right now, to tell us which kids need what services. And in a system that has almost 800 children in it on any given day, you can’t make real headway if it’s Jurassic.

ASSEMBLYMAN CRYAN: So there’s no tracking system? This New Jersey Spirit, which is SACWIS--

MR. RYAN: There will be.

ASSEMBLYMAN CRYAN: Well, you ripped it up pretty good in this thing, didn’t you?

MR. RYAN: Yes.
ASSEMBLYMAN CRYAN: Wasn’t one of the problems here -- I know this is off the track a little bit, but it’s kind of on it -- didn’t you rip up the New Jersey Spirit for -- let’s see if I have a page. Yes, here. For one of these kids that died, the initial intake worker’s ability to respond immediately, to assess the O’Donnell (phonetic spelling) family, was impacted by a caseload of 63 children. The supervisor represented to you, to OCA, that the worker had a caseload of 41, and the disparity was because of the two data management systems now used by DYFS. And 63 to 41 is -- and whether it gets into New Jersey Spirit, is SACWIS eventually going to be able to track these kids? That part of this report really disturbed me. I have to tell you, this whole -- SACWIS has been an ongoing issue, but how do we-- Is SACWIS the right system, as far as you know? Let me ask it to you that way, because the guy is looking out for the kids.

MR. RYAN: Yes, as far as I know. It’s required by the Federal Government. It’s worked in other states. We’re going through the growing pains.

ASSEMBLYMAN FISHER: Let me ask a question?

ASSEMBLYMAN CRYAN: Okay. I’ll tell you what-- Go ahead. I’m sorry.

ASSEMBLYMAN FISHER: Well, I just wanted to understand--

ASSEMBLYMAN PAYNE: Assemblyman Fisher.

ASSEMBLYMAN FISHER: Well, thank you, Chairman.
There are fiscal and jurisdictional issues. One is that -- isn’t it after 15 days, the counties get the money for those who are put in detention centers? Is it 15 days?

MR. RYAN: That’s only in connection with a court’s decision to send a young person to a Juvenile Justice Commission program. If the judge makes a decision that the young person should be disposed to the Department of Human Services, the county remains responsible for the care of that young person until the young person is moved, regardless of whether that’s one day or three weeks, or three months.

ASSEMBLYMAN FISHER: So we have 17 juvenile detention centers, each under the auspices of those counties that are -- they’re running them. Some are multi-jurisdictional between a couple of counties, right?

MR. RYAN: That’s right. Right. That’s correct.

ASSEMBLYMAN FISHER: And you said that you have trouble tracking, knowing exactly what that population is so that you can determine who has been held over too long. And is that correct?

MR. RYAN: That’s correct. Every county keeps the data differently, so my staff works very closely every day with point people at the detention centers to talk through with them what happened in the young person’s case, what’s their status, and what is expected to happen for them soon.

ASSEMBLYMAN FISHER: But we have State standards about how -- we do have standards on how the juvenile detention centers are supposed to be run?

MR. RYAN: Yes.
ASSEMBLYMAN FISHER: We don’t have State standards on how they are supposed to be tracked and accounted for?

MR. RYAN: I’m not sure what data the Department of Human Services or the Juvenile Justice Commission gets from the county detention centers. I’m just telling you that that’s how we get it. And I know that we get it the same way the AOC is getting it, which is to call around and have the data delivered through Fax machines or telephone calls, etc.

ASSEMBLYMAN CRYAN: It’s unbelievable.

ASSEMBLYMAN FISHER: Yes. I just can’t believe that we’re talking about a SACWIS system, we’re talking about all the-- In the age of computerization, we can’t figure out how to do an overlay that allows for one system of tracking so, at least, we know, at any given point in time, where each one of our detainees are, or placements are, in a juvenile detention center?

MR. RYAN: Right. And if we don’t have that, we can’t really fix this.

ASSEMBLYMAN CRYAN: When is that portion of SACWIS or Spirit, or whatever you want to -- when is that scheduled to be up? I’m looking at Ray in the back, but when? Anybody know? Anybody?

DEPUTY COMMISSIONER WAY: (speaking from audience) I can answer that.

ASSEMBLYMAN CRYAN: Yes. When?

DEPUTY COMMISSIONER WAY: Let me just explain something. SACWIS is not--

ASSEMBLYMAN PAYNE: Come up to the mike, please? (referring to PA microphone) Come to the mike please?
ASSEMBLYMAN CRYAN: I know SACWIS isn’t Spirit. I know that. I know that. But when is SACWIS going to be up for this?

DEPUTY COMMISSIONER WAY: SACWIS is not a juvenile justice tracking system that will collect the data from 17 detention centers about every child that enters a detention center. To be perfectly honest with you, we’re getting our information from the Office of the Child Advocate. We call them so that we can track the kids as well. SACWIS will track children who are part of the child welfare system. So if, for instance, a child is active in child welfare, it would be part of the SACWIS system. However, if a child comes in through the detention door--

MR. RYAN: Right.

ASSEMBLYMAN CRYAN: If the kid just gets picked up, you’re not going to see the kid.

DEPUTY COMMISSIONER WAY: I wanted to clarify that -- no. I wanted to clarify that.

ASSEMBLYMAN CRYAN: So is there any -- either one of you, through the Chair -- is there any plans anywhere, outside of a manual collection, which is what this is, through Fax machine and phone, to capture-- This goes right to the Chairman’s point originally about getting there early. And how can you get a fair shake until you have the data? Just by manual collections you can’t get there. Is there any system planned anywhere that is going to collect at one shot?

DEPUTY COMMISSIONER WAY: Howard might know.

ASSEMBLYMAN PAYNE: Mr. Beyer.

ASSEMBLYMAN CRYAN: I’m sorry. Thank you.
MR. BEYER: Well, it is part of the JDAI project to collect the information and share the information. It’s in process. Again, we’re only a year old so--

ASSEMBLYMAN CRYAN: It’s April of ’04, we started in JDAI -- right, is that how you say the acronym, JDAI, J-D-A-I. Is that how you say it?

MR. BEYER: JDAI, that’s what we say.

ASSEMBLYMAN CRYAN: Okay. All right. JDAI is in four, going to move to two -- there’s 17 total.

MR. BEYER: Right. And we are collecting. There is a juvenile detention and internal system that we’re working on to get in place to collect the kind of information, to bring it into the 21st century, if you will.

ASSEMBLYMAN CRYAN: Respectfully, Howard, just looking at what we’re looking at in terms of four done, two on the way, 17 total -- and that’s to get an accurate assessment, each and every day, of kids at the most vulnerable, earliest point -- we’re what? It sounds like two, three, maybe more years away? Does that sound about right, through the Chair?

MR. RYAN: Yes. That sounds right to me. The scope of the problem is this. Before we decided to start talking directly to the county detention centers, we approached the Public Defender’s Office, because the Public Defender represents all, or the vast majority of these children; and we approached the Administrative Office of the Courts, because judges see all these kids, and their data collection processes are identical to ours. It’s hand counts of paper folders to determine where we’re at with kids’ cases.
ASSEMBLYMAN CRYAN: Yes. Sometimes you actually see them crossed out. Like at 12:00 there were three, and then you crossed it out to four.

ASSEMBLYMAN FISHER: So how many doors can someone walk through and ends up in a detention center, based on how many different avenues that they predict -- been sent there?

MR. RYAN: I’m sorry.

ASSEMBLYMAN FISHER: Well, I guess what I’m saying is, we’ve said that, well, the court sends them one way, another time a police officer can pretty much pick up somebody, determine that they’re either -- I think you said, risk or flight -- and they end up being put in a detention center right off the bat, which is what I think Chairman Payne was talking about. It, sort of like, bypasses every system and end up with a record. I guess what I’m hearing is, we don’t know exactly how many paths, where they can get there, that we can track and say, absolutely--

MR. RYAN: Right. I think that it’s important to note that every young person within 24 hours of their detention has a detention hearing, and a judge makes the determination. So the judge sees all these young people and decides about the young person’s presence in the detention center.

I am so confident that if the Department of Human Services had this information, early on, given the political will that exists and I think their genuine commitment to reform, if they had this information early in a young person’s experience, if they knew within a couple of days that a judge was going to want this young person to have a Human Services plan -- all this is doable, all that other states have done -- I’m confident we would not
see kids languishing in detention for as long as we now see. But the problem is that the agency that’s responsible at the end of the day for caring for them often doesn’t find out about this until deep into a young person’s detention experience, and then there’s the process of trying to turn up placements and services for young people.

ASSEMBLYMAN CRYAN: But I thought they get an assessment when they come right in? And don’t some of these have these court-appointed special advocates and this kind of thing? Don’t they get an assessment?

MR. RYAN: They only get an assessment if -- in two instances: One time, if the mandatory screening at the front end determines that there are mental health issues, then they get the assessment. But there could be young people who don’t present those issues at the front end, and it’s not obvious that they have mental health issues. For those kids, it requires that the Department of Human Services, in court, be told by the judge to have them develop a 14-day plan for the young person. And that sometimes kids -- 30, 45 days in, when that happens, on occasion.

ASSEMBLYMAN FISHER: When’s the next screening after that initial input?

MR. BEYER: Well, it depends on what the needs of the child is. There is an assessment in all the detention centers when a child comes in. For those places that currently have the MAYSI-- And by the way, there was a question before: when will the MAYSI be implemented statewide? It will be by September. The equipment is in, the materials are in, and the trainers are doing the training. It is just following the process so that we know who the kids are. We have come a long way. We have very
responsible, in most cases, detention superintendents. We once did not. We now do. We have folks who really do care what’s going on. They have even developed a rapport with the Child Advocate. We have come, really, out of the Dark Ages, but we are not perfect. We are closer than further, but we’re not there yet.

I have a little bit, maybe, more faith in the JDAI process. Because what makes it effective -- it brings every folk that you have talked about to the table. You have to be at the table. You have to talk to each other, whether it be Judge Grant, Judge Jackson, Judge Iadanza. It doesn’t matter where the judge is, they’re sitting at that table, we’re talking to each other and we’re collaborating to move forward. And then there are red flags that go up every day if something isn’t right.

If your numbers in Union go up, I could assure you, we get a call from Union. We get a call from Kevin. We know. And so it’s happening. Is it happening as fast as we like? Absolutely not.

ASSEMBLYMAN PAYNE: It’s not happening as fast as you’d like. What are the impediments that are causing it not to happen as fast as you like?

MR. BEYER: Do you want to answer that, my brother? (laughter)

MR. RYAN: Well, Chairman, we need a plan. We need a strategic statewide plan. We need to put forth -- and when I say we, I’m talking about everybody -- but at the end of the day, the agencies that are squarely responsible for caring for kids have to put together a plan that is going to provide care and services to those kids. I could today tell you what I think, if I were running the system, the two or three things I would do
would be. I’ve indicated to you -- I think one of them would be a statewide data tracking system. Another would be moving aggressively on the 25 percent of the young people who are languishing in residential treatment centers, and don’t need to be there, and move them out. And I’d build community capacity through MST.

But the question is better put to the people who are working this tirelessly everyday and asking them, what is the plan to get to zero by September 30?

ASSEMBLYMAN PAYNE: And the responsibility for developing this plan -- is it something that needs to be done through collaboration? Or who has -- somebody has to have-- We need a plan, all right? Who needs to develop a plan? We need to bring people together to develop the plan. We can’t come back in six months and say, “Well, we should have had a plan.”

MR. RYAN: Right. I think the Department of Human Services must build a plan, and they can’t be successful without the partnership of other agencies, including the Public Defender, the AOC, the JJC, and my office. Time is short here. The time for building this plan is--

ASSEMBLYMAN PAYNE: Is there a collaborative group going on now, working together? You’ve mentioned working together with other organizations. Is there an instrumentality, now, that can bring together these various groups to come up with this plan?

MR. RYAN: There is a group, and I would urge the Commissioner to convene this group as the planning body. There’s a group called the ICCF, which is created as part of the Child Welfare Reform plan. And I apologize that I can’t recall what ICCF stands for. But it involves the
heads of all the right agencies. Howard sits on it. Kathi sits on it. I sit on it. Judge Carchman is on it. The Attorney General is on it. And we have had one meeting with that group where we addressed one component of this problem, and I thought that the meeting moved us down the field. If that group took responsibility jointly for developing a plan that would get us to zero by September, with firm commitments from each of us, to do whatever it is we resolve needs to get done, I’m confident that we could get there. But lots of time seems to go by between these meetings, with not a lot happening. I think, as I’ve said to you before, that it would be important for that pace to pick up.

ASSEMBLYMAN PAYNE: Who’s the chairman of that group?
MR. RYAN: The Commissioner of Human Services.
ASSEMBLYMAN PAYNE: He is the convener and chairman, etc., etc., of that group?
MR. RYAN: Yes.
ASSEMBLYMAN PAYNE: I would expect that the Deputy Commissioner would, please, try to initiate that movement so we’ll not be back here in six months saying, “Well, we should have had a strategic plan.” Now, I don’t know whether the Legislature needs to get involved to require this to happen, but we don’t want to keep talking about this problem about what we need. Someone needs to take the initiative to bring this together. And if the Commissioner is the head of this group -- what -- ICCF, is that what it’s called?
MR. RYAN: Yes, that’s what it’s called.
DEPUTY COMMISSIONER WAY: That group is scheduled to meet next Wednesday.
ASSEMBLYMAN PAYNE: Do you want us to come to that meeting, or do you think you can handle-- (laughter)

DEPUTY COMMISSIONER WAY: But you’re welcome.

ASSEMBLYMAN PAYNE: What does ICCF stand for?

DEPUTY COMMISSIONER WAY: Interagency Children Coordinating -- I don’t know. (laughter)

MR. BEYER: I can just say this to you. About six months, and then six months from then, as a person, the head of an agency where we’re responsible for people, the agency will tolerate what is tolerated at the top. If we don’t tolerate certain things, certain things will not happen, or certain things will happen. It’s good to have a Child Advocate. Even though we think we’re advocates, somebody to remind you that they’re watching. When you’re responsible for the welfare of people and you have total control over young peoples’ lives -- that’s really what we do. We have total control over our folks’ lives.

It’s like what happened with the military, and terrible things happened. And the people at the top said they weren’t responsible. Don’t believe that for one minute. It’s what the people who are on top are responsible with -- what happens and what is tolerable and what is not tolerable. We have our internal goals and accomplishments that we want to achieve. But I think it’s good that there’s people like yourselves to keep us moving forward and keep pressing the issues. Because I fear one day -- because I told you I’d never seen a level of care and concern in my 30 years like now. I pray that it continues, because we need it, whether it comes from this guy, from you. We need to do that. Keep us honest, keep us straight, keep us committed, because it’s that important.
ASSEMBLYMAN PAYNE: And it needs to be institutionalized. So if Kevin Ryan is not here any more, or I’m not, or anyone else, that it’s institutionalized so that we can, in fact, bring about the full effect.

MR. BEYER: That’s right. We try to avoid the Band-Aid fix.

ASSEMBLYMAN PAYNE: Oh, absolutely. I expect that in six months, we will call the Commissioner here to give a report on the ICCF and the development of the strategic plan, because we don’t have these hearings just to hear ourselves talk, or to hear you guys come and talk about it. We identify the problems. If there’s something like we’re just saying now, that there needs to be a plan to carry this out, implement, but that no one is working on the plan yet -- that there was a meeting of this group at one point, but we’re not moving forward on it -- well, the problem still exists here.

So I guess we need to set time lines and say that we will, in fact, have another hearing in about six months. And hopefully, the plan will have been drawn up and will be implemented by then. Otherwise, we’ll just be here again. They’ll be other children languishing in places where they shouldn’t be, etc., and we’re still having the same kinds of problems. And that’s not what we’re all about.

I want to thank you for being here this morning. And I hope that we’ll be able to not just talk about these issues, but we need to focus on them, bring light where there needs to be some light, and implement some of the strategic plan that I expect will be developed on this.

Thank you very much. Thank you very much for coming.

MR. RYAN: Thank you.
MR. BEYER: Thank you.

ASSEMBLYMAN PAYNE: Can I have your attention? We’ll start the discussion on Danielle’s Law in three minutes. We’ll hear from Theresa Wilson, Deputy Commissioner, New Jersey Department of Human Services; after that, we’ll hear from Robin Turner; and Thomas Baffuto (phonetic spelling), that will be number three. We’ll start in two minutes.

RECESS

AFTER RECESS:

ASSEMBLYMAN PAYNE: Thank you very much. We will start hearing our testimony on Danielle’s Law. At this time, I’d like to ask Deputy Commissioner Theresa Wilson, from the services for people with disabilities from the New Jersey Department of Human Services, to please come forward to discuss the reproposed regulations for Danielle’s Law.

DEPUTY COMMISSIONER TERRI WILSON:
Good afternoon. I am Terri Wilson, Deputy Commissioner of Disability Services in the Department of Human Services. On behalf of Commissioner Davy, I want to begin by thanking you, Commissioner Payne, Vice Chairman Cryan, and Committee members, for providing the opportunity today to update the Committee on the status of Danielle’s Law rules.

Also, I’d like to introduce, to my right, Jim Evanochko, Administrative Practice Officer for the Division of Developmental Disabilities.
When we last met, in late September, the public comment period was still open for this regulation, N.J.A.C. 10:42A. The initial proposed regulation appeared in the New Jersey Register on September 7, 2004, and the open comment period ended in November. During that comment period, the Division of Developmental Disabilities received a total of 1,848 comments. From family members, advocates, and concerned citizens, the Division received the following: 1,411 signatures on a petition, 397 form-letter responses, and five postcards. Ten legislators sent letters and 25 private agencies provided comments to the Division.

After reviewing all of the written comments, as well as testimony from people before this Committee in September, it was clear that there was a strong opposition to the rule as proposed.

Since substantial changes were needed, the Division rescinded the initial proposal. There were some sensitive issues raised that required legal review. A new rule proposal was developed and published in the New Jersey Register in February 2005. The comment period for the February posting of the rule ended in April. We received eight comments on the new rule proposal and are currently considering them. Following any modification to this most recent rule proposal, we will again prepare the final rule for adoption.

The final rule adoption is then filed with the Office of the Administrative Law and published in the New Jersey Register. We anticipate having final reviews and necessary approvals in time to submit the final adoption proposal on July 8, in order to meet the New Jersey Register’s August 1 publication date.
As you know, the purpose of the 60-day, public comment period is to obtain public comment to the proposed rule and take all of these comments into consideration. The comment period and the subsequent review period allow the Division to consider and address issues raised, and where appropriate, make changes to the rule as proposed.

This rule will guide the implementation of Danielle’s Law throughout the more than 2,000 programs of public and private agencies serving people with developmental disabilities and traumatic brain injury. It is critical we get this right. As you recall, the primary concern about the initial rule proposal was that there were different procedures established to account for the difference in operations at the developmental centers and community homes.

Developmental centers have a medical team on staff, while group homes obtain medical care in their communities. Developmental centers have a central switchboard system, and emergency calls are usually made by supervisors. Group homes, operated by private agencies, have direct phone lines.

Because of these operational differences, the original rule proposal required that 911 be called, but the rule incorporated some leeway to meet the different environments. The comments that we received were overwhelmingly in favor of consistency, and sought to require all direct care workers to directly call 911. Accordingly, we have changed the phone systems and the procedures in the developmental centers to make this possible. I am pleased to report that the telephone work at six of the centers is now complete.
Direct care employees can call 911 directly, without going through the switchboard and without having to ask their supervisor to make the call. Work at the seventh, the Hunterdon Developmental Center, is expected to be completed by July 1. Let me just say the reason for July 1 is outside phone work and getting all the systems together. It is no longer an option to have a designated staff person responsible to make 911 calls. The revised rule will require any direct care staff working in a developmental center or working for a private agency personally responsible to make the call to 911 in a life-threatening emergency.

It is our sincere intent to comply with both the letter and the spirit of Danielle’s Law. In all cases, the new regulation will require that in a life-threatening emergency, 911 must be called by the employee, in accordance with Danielle’s Law. It is equally important that accountability for Danielle’s Law, including training and penalties, is clearly described in the rule.

Each direct care employee working in a developmental center or provider agency is required to receive training regarding their requirements of Danielle’s Law, in addition to the curricula for Red Cross training for CPR and first aid. The Department has been developing a training curriculum devoted to Danielle’s Law. To date, we have developed a training plan, produced a video, developed a PowerPoint presentation, and prepared a notebook with all the training information. The notebook includes the story of Danielle, written by Danielle’s mother.

When the training materials are complete -- and I mentioned when they are complete, because I just personally reviewed the final, and there’s a few minor things I want to do -- I will invite my Family Advisory
Group and any Committee members to review the materials prior to its use by our trainers. As soon as the package is final, we will require representatives from each of the developmental centers and community provider agencies to attend training and receive a train-the-trainer sessions. The training package will be made available to each agency licensed by the Department. An agency’s license may be affected if training is not provided to the agency’s direct care staff members.

Since the inception of Danielle’s Law, the Department of Human Services has taken steps to ensure compliance with the law. The Office of Program Integrity and Accountability reviews all potential cases that may involve Danielle’s Law. If the Division director determines that a violation has occurred, the employee will be notified by a certified letter of the violation, the penalty, and informed of the right to appeal the decision to the Office of the Administrative Law.

Every agency, every program, and every center serving people with developmental disabilities and traumatic brain injuries is continually striving to meet the challenge of extremely complex and diverse medical needs. We share an appreciation for the concern that prompted the creation of Danielle’s Law. In memory of Danielle, and for all the people with developmental disabilities or traumatic brain injuries, we continually strive to improve safety, promote health and well-being, and honor the trust that has been placed with us to work to continually improve services.

I want to thank the members of this Committee and other legislators who have given us input -- the family members and advocates, government attorneys, the physicians, emergency medical technicians, the New Jersey State Police, the American Red Cross, the American Heart
Association, the Center for Disease Control, and the New Jersey Department of Health -- who have all given input into this process.

The work will be ongoing, but the process to embed Danielle’s Law into our operations is almost complete. We believe Danielle’s Law improves on our procedures and brings consistency, clear expectations, and accountability to the care of vulnerable individuals. Again, I would like to thank this Committee for the opportunity to testify today on the progress of the Department of Human Services to implement Danielle’s Law.

Thank you.

ASSEMBLYMAN PAYNE: Thank you very much, Commissioner Wilson. I have to say that I’m considerably impressed with what we have presented here today -- the report that you’ve given here today. Certainly, it shows that by strong advocacy on the part of all of us concerned with the developmentally disabled and people that are in our care, has brought about what I think appears to be a satisfactory set of regulations that will ensure that the legislation is carried out the way it was intended.

I want to thank you for your testimony here today.

DEPUTY COMMISSIONER WILSON: Thank you.

ASSEMBLYMAN PAYNE: Any questions?

Mr. Cryan.

ASSEMBLYMAN CRYAN: Thank you.

Thank you, Mr. Chairman.

I have some follow-ups. It goes in the Register August-- Are any of the eight comments that you got back in any way, shape, or form going to alter any of the gist of the procedures?
DEPUTY COMMISSIONER WILSON: Actually, the intent of everything that we’re doing is really clear. Just call 911; maybe some minor procedural ones.

Jim, do you want to talk about it?

ASSEMBLYMAN CRYAN: Should there be any concern from the Committee about the comments you got to the new regulation?

JAMES M. EVANOCHKO: Good afternoon. This is Jim Evanochko.

There were a few comments. They were mostly procedural. They were not any sort of substantive change, because we would have actually had to repropose those changes. But we did get some wording suggestions -- “This is a little bit clearer if you say it this way,” “Why don’t you stipulate to say it this way rather than that way?” That’s the only changes that appear in the document.

ASSEMBLYMAN CRYAN: Is there anything that should put my antenna up, or any member of the Committee?

DEPUTY COMMISSIONER WILSON: No.

MR. EVANOCHKO: I do not believe so, sir.

DEPUTY COMMISSIONER WILSON: I wouldn’t -- the message is clear.

ASSEMBLYMAN CRYAN: Okay. All right. There are seven centers, right? With July 1, that’s the last center, right?

DEPUTY COMMISSIONER WILSON: Yes. That’s the last one. I need to be able just to say, and you said it earlier, you’ve got to project a plan. If I could handle the -- outside of the developmental center
at Hunterdon, I’d say absolutely July 1. You know telephone systems -- I can’t control the company. So I just want to put it on--

ASSEMBLYMAN CRYAN: It is what it is. We’re getting where we need to be.

DEPUTY COMMISSIONER WILSON: Okay. Yes.

ASSEMBLYMAN CRYAN: Six out of seven with a plan, certainly, I think, is something acceptable to me.

DEPUTY COMMISSIONER WILSON: Yes, right. Okay.

ASSEMBLYMAN CRYAN: A couple of other questions for you. It goes in the Register in August 1. So when does the rule actually go into effect?

DEPUTY COMMISSIONER WILSON: It should be adopted within 30 days -- is it -- or 60?

MR. EVANOCHKO: No. Once it goes into the Register, it is in effect. The rule does give the agency 30 days in which to make sure that all their staff are trained--

ASSEMBLYMAN CRYAN: That’s what I was going to ask.

MR. EVANOCHKO: --and submit a plan to the Department for review.

ASSEMBLYMAN CRYAN: And they have to provide a certification that people have been trained within 60 days?

DEPUTY COMMISSIONER WILSON: Yes.

MR. EVANOCHKO: Yes.

ASSEMBLYMAN CRYAN: So, in essence, by September 30, those that need to be informed in or instructed in this law will be. Is that correct?
DEPUTY COMMISSIONER WILSON: Yes.

ASSEMBLYMAN CRYAN: Okay. One other question on the law itself, or the procedure, I guess I should say, and that is the reporting of the staff member and a call-- “If a staff member is unsure whether a medical condition, he or she shall call.” By the way, the training curriculum--

DEPUTY COMMISSIONER WILSON: Yes.

ASSEMBLYMAN CRYAN: --how long is that? Is it an hour? Is it two? How long is that?

DEPUTY COMMISSIONER WILSON: I would say it takes a day to get through the training, maybe a half a day, but it depends on the participants because it is interactive. By the time you come in and you go through the training manual, you view the video, you have some discussion-- say, it could be, minimum, half a day to a day.

ASSEMBLYMAN CRYAN: Really?

DEPUTY COMMISSIONER WILSON: Want to see it? Want to come?

ASSEMBLYMAN CRYAN: We’ll see. We’ll see.

DEPUTY COMMISSIONER WILSON: I’ll invite you to the Family Advisory meeting.

ASSEMBLYMAN CRYAN: Thank you.

The record keeping, which is both calling for life-threatening and non- -- it just threw me off a little bit when I read it. “Every 911 and failure to make an 911, in a event of -- shall be recorded as an unusual instance.”

DEPUTY COMMISSIONER WILSON: Yes.
ASSEMBLYMAN CRYAN: Who makes the judgment on the ones-- I get it when it’s life-threatening. The guy shows up, I think I can reasonably get that.

DEPUTY COMMISSIONER WILSON: Yes.

ASSEMBLYMAN CRYAN: The ones that aren’t, how is that judgment made? Who makes the call, I guess, would be the way to say it? I guess this is the -- “the facility shall keep a record of every 911, and every failure to make a 911 call, and the event.”

DEPUTY COMMISSIONER WILSON: Yes.

ASSEMBLYMAN CRYAN: How does that work?

DEPUTY COMMISSIONER WILSON: You have to depend upon some of the integrity of our organization, because, in fact, we can’t see everything.

ASSEMBLYMAN CRYAN: So it’s a judgment call.

DEPUTY COMMISSIONER WILSON: So it is a judgment call, but that’s one set of eyes. I’m certain family members, as well, may report to us. Significant others may report to us. Any medical person may report to us.

ASSEMBLYMAN CRYAN: I don’t have any problem with that. I just wanted to understand it.

And the Department is going to keep a record of those reports in which the 911 call was, and then those that weren’t.

DEPUTY COMMISSIONER WILSON: Yes.

ASSEMBLYMAN CRYAN: Is that going to be something that’s published annually, anything like that?
DEPUTY COMMISSIONER WILSON: Well, certainly, as you know, Assemblyman Cryan, you can offer the request, but it would be nice for us to be able to put together a report. And I would want a trend analysis of what’s happening in the community. We need to do that, and the public has a right to know. So I will be asking for the Division of Developmental Disabilities to monitor that, and also our Office of Program Integrity and Accountability, so we can prepare a report and learn.

ASSEMBLYMAN CRYAN: Okay.

ASSEMBLYMAN PAYNE: Excuse me? Which would be issued to us? I’d like to see a copy of that report after a period of six months and a year.

DEPUTY COMMISSIONER WILSON: Absolutely.

ASSEMBLYMAN CRYAN: And thank you very much, through the Chair, for having this be a positive meeting today.

DEPUTY COMMISSIONER WILSON: Thank you.

ASSEMBLYMAN PAYNE: Thank you, always.

Mr. Fisher.

DEPUTY COMMISSIONER WILSON: I have to thank my hard-working staff. They all understand.

ASSEMBLYMAN PAYNE: Well, you’re not finished yet. Wait a minute. Mr. Fisher may have a question.

ASSEMBLYMAN FISHER: Well, no. I just wanted to say--

DEPUTY COMMISSIONER WILSON: No. I just say a thank you, before I go down, right? I may be down, right?

ASSEMBLYMAN PAYNE: Wait a minute. There may be something coming from left wing.
ASSEMBLYMAN FISHER: No, I think we’re still up.

DEPUTY COMMISSIONER WILSON: Okay, good.

ASSEMBLYMAN FISHER: I just want to say that, after the last hearing and all the issues, that you and your Department really listen, really well, and are able to come up with, I think -- which is a great deposition in changing these rules to make it work. And I’m just delighted, because we don’t always hear that in Trenton. But in this case, it was extremely well thought out.

DEPUTY COMMISSIONER WILSON: Can I say thank you now? (laughter)

ASSEMBLYMAN PAYNE: Right.

I think that we certainly need to give an opportunity for Robin Turner. Would you care to have your testimony -- I have you on the list. (applause) And Diane Gruskowski. Diane.

Please identify yourself for the record. Is the red light on?

DIANE GRUSKOWSKI: Yes. (referring to PA microphone)

Good morning, Assemblyman Payne, Assemblyman Cryan, Assemblyman Fisher, Committee members. My name is Diane Gruskowski. My daughter Danielle is the namesake for Danielle’s Law. I would like to extend a heartfelt thank you for calling this hearing and giving me the opportunity to testify today. This hearing demonstrates your true compassion and concern for the well-being of citizens with disabilities like my daughter, Danielle.

I also want to thank the Department of Human Services, and everyone who has gathered here today for attending this hearing. Many New Jersey families, especially mine, were elated when the Department of
Human Services announced they are in the process of installing outside telephone lines in our seven New Jersey developmental centers, with the completion date of July 1, 2005. This is certainly the right thing to do. I have come to believe that, from my own eye-opening experiences, that 911 must be called in life-and-death situations, something that my daughter was not afforded.

It has been an uphill battle to ensure that the rules proposed for Danielle’s Law by the Department of Human Services get implemented properly. While this simple act to call 911 in a life-threatening emergency may seem the logical thing to do for most people, in some agencies and states, it is not advocated as a method to reduce the incidence of life-safety scenarios that may occur on any given occasion. We have to make sure that we have the right safeguards and protections in place for people with developmental disabilities and traumatic brain injuries, some of which cannot articulate what is wrong, like my daughter Danielle. Why should a disabled person be treated any differently than any other member of our community?

My daughter Danielle has brought a community together and perhaps the nation. I have been very touched by letters, e-mails, and phone calls that I receive offering comfort and support. People that I don’t even know have reached out to me. As heartbroken as I am over my daughter’s tragic death, I can sometimes see the light at the end of the tunnel because of caring people, like this honorable Committee and the citizens in this room today, who want to do the right thing for our most vulnerable population.
Here are just a few of the positive aspects of Danielle’s Law: Congressman Rush Holt will announce his prime sponsorship of Danielle’s Law, H.R. 1649, on a Federal level, at a press event that will take place this Monday, June 20, at the Carteret Library, in Carteret, at 12:00 noon. And most recently, Danielle’s Law received state support and a resolution was passed by the state of New Jersey’s Knights of Columbus, and another vote will take place at their national level and voted on at their conference in Texas in two weeks.

We have also received support, and a resolution was passed, at the North Brunswick Town Council meeting last week. We have received support from organizations such as the International Rett Syndrome Association, Tubular Sclerosis, the State Parent Advocacy Network, TASH, DAC -- Disabled Action Committee -- the New Jersey Catholic Conference for the Catholic Bishops of New Jersey, the Family Alliance to Stop Abuse and Neglect -- of which I am proud to be a member -- various nonprofit organizations, New Jersey legislators, New Jersey congressional leaders, New Jersey citizens, and many citizens across the country, just to name a few.

Community Options, a nonprofit organization serving people with developmental disabilities in eight states, has taken a documentary that was created about Danielle’s Law, and they have included excerpts of the video into their agency’s orientation training program for medical emergencies, so that employees can see the importance of getting help in a life and death situation, when an individual is in their care.

The Department of Human Services has agreed to use Danielle’s biography as a training tool for perspective employees who will care for our most vulnerable individuals. And tonight, we are awarding the
second annual Danielle J. Gruskowski Memorial Scholarship at the Carteret Town Council meeting. We are awarding it to Tom Bradley Jr., who is the recipient from Carteret High School, Class of 2005.

I know that in my precious daughter Danielle’s memory, protections and safeguards will be put in place to protect children like my daughter who are voiceless and helpless wherever they may be. All human beings are entitled to the same rights. These seemingly small steps will result in great strides toward the well-being and care for people with developmental disabilities and traumatic brain injury. Danielle has been, and continues to be, an inspiration to many people across the country. As you can see, I was truly blessed with a beautiful, loving daughter named Danielle.

Thank you very much. God bless you.

ASSEMBLYMAN PAYNE: Thank you very much.

Ms. Robin Turner.

ROBIN M. TURNER: Thank you.

I just wanted to express my gratitude to this Committee for your steadfast commitment to ensure that Danielle’s Law got implemented as the New Jersey Legislature intended. I’m not going to go too much into my testimony. You can read it for yourself. I just want to make sure that we’re in the right direction. There are things that are said sometimes, that shouldn’t be said, that gives mixed message as to whether or not they know if they really, truly believe in Danielle’s Law. So that’s one of the things I wanted to say.

This Committee’s effort to make sure that Danielle’s Law is implemented as it was written sends a very powerful message that people
with developmental disabilities are also your constituents, and that you're their elected representative in State Government and you consider their lives valuable.

So, on behalf of Danielle and my family, and on behalf of the many families whose loved ones’ lives might be saved because of Danielle’s Law, thank you very much and thank you for speaking out for our most voiceless and helpless citizens that cannot always speak up for themselves.

So thank you, and I truly commend all your efforts. Thank you very much.

ASSEMBLYMAN PAYNE: Thank you.

Thank both of you. Obviously, you serve as quite an inspiration for us also. And certainly the love and concern and care of a mother and an aunt, who is also a guardian, is what has brought us to this point. I know that Danielle has a permanent legacy and one which we will all benefit from, not just children, but all of us will benefit from. We have now -- and she’s enshrined really in our minds and in our hearts. And in fact, that we have brought out the compassion of some bureaucrats who, perhaps, initially, did not understand and realize the gravity and the seriousness of this situation.

I have to tell you that you, as a team, and the Family Alliance, and all the rest that work with you, have really, I think, helped us to have a great appreciation of the significance of the citizens of the State of New Jersey and our responsibility to provide for all the citizens -- those who are unable to care for themselves -- but all the citizens. I think that we are able to show some compassion, and Danielle puts a face on this great effort.
And the two of you have done, along with all of your supporters, have done an incredible job. And we thank you for all that you’ve done for us.

Colleagues, do you have any comments or questions?

ASSEMBLYMAN CRYAN: Congratulations.

MS. GRUSKOWSKI: Thank you.

ASSEMBLYMAN CRYAN: I’m sure we won’t miss the e-mails, though. (laughter)

MS. GRUSKOWSKI: There’s more stuff.

MS. TURNER: You may still get some.

ASSEMBLYMAN PAYNE: Thank you very much for your tremendous service to the State of New Jersey, through your efforts.

Thank you so much.

MS. TURNER: Thank you.

MS. GRUSKOWSKI: Thank you. This is something that should have never happened.

ASSEMBLYMAN PAYNE: Thank you.

Is Janette Vance here? (no response)

Also Vito Albanese (no response) -- I don’t see Vito. Please tell Vito that things worked out -- with his urging and his strong advocacy, we have arrived at this point.

Peg Kinsell or anyone else? (no response)

UNIDENTIFIED PERSON FROM AUDIENCE: She just left.

ASSEMBLYMAN PAYNE: All right. Well, fine.

Well, thank you very, very much, and we’re very pleased that this has concluded in a very positive way.
Thank you.

(MEETING CONCLUDED)