

DEPARTMENT OF CHILDREN AND FAMILIES

OFFICE OF THE OMBUDSMAN



Calendar Year 2014

ANNUAL REPORT

**Connecticut Juvenile Training School
&
Pueblo**

Introduction

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

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

As required, the Office of the Ombudsman, in collaboration with Regional and Facility staff, consults and problem-solves case-related and systemic issues in order to assist and support DCF staff at all levels and across each division.

What We Believe

Mission - The mission of the Office of the Ombudsman is to assist in assuring the safety and well-being of Connecticut's children, to improve effectiveness, efficiency and responsiveness of state government, and to promote public confidence in the child welfare system.

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

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

How We Conduct Our Work

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

Inquiries and Grievances

During calendar year 2014, the Office handled a total of 3,057 inquiries, complaints and grievances.

The breakdown of this total shows that 2,857 inquiries and complaints were made on active or closed child protective services cases. This number also includes questions raised by families and providers throughout Connecticut who do not have involvement with our Department.

Also included in the data are a total of 173 grievances that were filed by the residents at Connecticut Juvenile Training School (CJTS) and an additional 17 grievances filed by residents at Pueblo.

Connecticut Juvenile Training School and Pueblo Unit

The Director of the Office of the Ombudsman handles the grievances filed by youth at the Connecticut Juvenile Training School (CJTS) and the Pueblo Unit.

The process to assess the grievances is as follows:

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

During the time the Ombudsman visits each facility, he will also randomly talk with youth, engage them in discussions and partake in unit activities. Youth are interviewed either directly on the unit or in another location according to their preference.

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

Data – Connecticut Juvenile Training School

For the calendar year 2014, a total of 173 grievances were filed by residents at the Connecticut Juvenile Training School.

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

Unit	Total	No Merit	Merit	Partial Merit	Careline Referral	Human Resources
2B	1	1	0	0	0	0
2D	1	1	0	0	0	0
4B	7	7	0	0	0	0
4C	0	1	0	0	0	0
4D	7	3	3	1	0	0
5B	14	12	0	0	2	0
5C	16	10	2	3	1	0
5D	36	28	2	5	0	1
6B	21	21	0	0	0	0
6C	8	7	1	0	0	0
6D	52	42	4	5	0	1
School	9	8	0	1	0	0
Total	173	141	12	15	3	2

As the chart above indicates, a total of 173 grievances were filed during calendar year 2014. A total of 27 or 16% were found to have either Merit or Partial Merit with 82% having No Merit. A total of 5 grievances or 2% were referred to either the Department of Children and Families Careline or the Human Resources Division for investigation.

A total of 85 unique residents filed grievances. The data shows that 6 residents accounted for 55 or 32% of the total grievances. They each filed at least 5 or more grievances with two residents filing 14 and 15 grievances respectfully.

A total of 59 unique staff were the subject of grievances being filed. The data shows that 8 staff accounted for 58 or 34% of the total grievances. They each had at least 5 or more grievances filed against them with two staff members having 12 and 10 filed against them accordingly. Further review of the data shows that the highest number of grievances were filed in Units 6D, 5D, 6B and 5C and combined, they accounted for 125 or 72% of the total grievances filed in the facility. These three units also accounted for 6 Merit and 10 Partial Merit findings as well as 2 referrals to Human Resources. A further analysis of these four units is required.

Unit 6D

Unit 6D had a total of 52 grievances filed which resulted in 4 Merit and 5 Partial Merit findings as well as 1 referral to Human Resources. Of the 52 grievances, 30 of them were filed by three unique residents and those grievances accounted for almost all of the findings. This unit also had three staff members who appeared to be targeted by the residents as they each had 5 grievances filed against them within a specific time period, and by the same resident or similar group of residents, without any confirmation of a Merit or Partial Merit finding.

Unit 5D

Unit 5D had a total of 36 grievances filed which resulted in 2 Merit and 5 Partial Merit findings as well as 1 referral to Human Resources. Of the 36 grievances, 15 of them were filed by one unique resident and those grievances only resulted in 1 Partial Merit finding. This unit also had two staff members who appeared to be targeted as they had 12 and 6 grievances filed against them within a specific time period, and by the same resident or similar group of residents, without any confirmation of a Merit or Partial Merit finding.

Unit 6B

Unit 6B had a total of 21 grievances filed which resulted in no findings of Merit, Partial Merit or referrals to either the Careline or Human Resources. Of the 21 grievances, 5 of them were filed by the same resident. This unit also had one staff member who appeared to be targeted as she had 9 grievances filed against her within a specific time period, and by the same resident or similar group of residents, without any confirmation of a Merit or Partial Merit finding.

Unit 5C

Unit 5C had a total of 16 grievances filed which resulted in 2 Merit and 3 Partial Merit findings as well as 1 referral to the Careline. There was not a single resident found to file an unusually high number of grievances. One particular staff member was found to be responsible for the high majority of findings on this unit.

Data – Pueblo

For the calendar year 2014, a total of 17 grievances were filed by residents at Pueblo.

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

Unit	No Merit	Merit	Partial Merit	Careline Referral	Human Resources	Total
Pueblo	14	0	2	1	0	17

As the chart indicates, a total of 17 grievances were filed during calendar year 2014. A total of 2 or 12% were found to have either Merit or Partial Merit with 14 or 82% having No Merit. A total

of 1 grievance or 6% was referred to the Department of Children and Families Careline. No referrals were made to the Human Resources Division for investigation.

A total of 7 unique residents filed grievances. The data shows that 2 residents accounted for 13 or 76% of the total grievances. They each filed 9 and 4 grievances respectfully.

A total of 3 unique staff were the subject of grievances being filed. The data shows that one staff accounted for 4 or 24% of the total grievances. A total of 7 or 42% of the grievances were filed on the general conditions of the facility and did not name a particular staff member.

Grievances versus Director of Residential Care Requests

Beginning in April, 2014 a change was made in the manner in which information received by the residents was to be assessed. Grievances remained being handled by the Ombudsman while information pertaining to minor staff or facility issues would be handled by a request to speak to the Director of Residential Care. A breakdown of each type of request is as follows:

Grievances	Director of Residential Care
Staff Misconduct	Food, Room, and Temperature Concerns
Harassment, Oppressive Treatment, Punitive Sanctions	Clothing and Hygiene issues
Abuse or Neglect Related Concerns	Access to Facility Services ie. Medical, Clinical and Educational
Confidentiality Issues	Other General and Minor Allegations of Staff Misconduct

Assessment of Grievances and Information Obtained

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

Major Themes for the Connecticut Juvenile Training School

- 1) Residents who file multiple grievances appear to have benefitted from a multidisciplinary meeting to address their concerns. By these efforts, the context of the youth’s circumstances were clarified and a plan developed to address them by a team of individuals.

- 2) The Ombudsman proactively talking to residents who have filed multiple grievances, even in the absence of a new grievance being filed, is one intervention which will continue and may lead to quicker resolution of issues.
- 3) Residents report a confusing message when staff utilize derogatory or demeaning language towards and around them while at the same time, the resident is held accountable in negative fashion for repeating the same language.
- 4) Residents less often complain about the restraint they have been involved in and more often state concerns about the circumstances leading up to the physical intervention. They express anger and frustration that at one point, they engaged with staff who crossed boundaries with them in a joking manner. When the interaction then turned serious, the staff held the resident accountable for the same behaviors they displayed. This resulted in a negative youth reaction, escalation in behaviors and assistance was needed.
- 5) During the course of the year, residents expressed concerns that they were in their rooms for extended periods of time. Seclusion policies and procedures were not implemented in uniformed fashion across the units.
- 6) Residents report other youth referring to them “snitches” when it is known they have filed a grievance. Likewise, it was stated that staff mention the filing of grievances during disagreements with a resident including the staff telling the resident the correct way to spell their name to put on the form.
- 7) Multiple residents report concerns that they will be “smoked”. This means for those youth who are about to leave the facility, staff will make comments that they will find something to charge a resident for which may delay their discharge.
- 8) Residents report inconsistency in the manner in which they are allowed to clean the unit, have extra meals, attend art therapy and partake in other activities that appear to be up to the discretion of the staff.
- 9) The data shows that residents may be targeting particular staff. These are most often newly assigned Youth Services Officers to the unit. When multiple grievances are filed on the same staff member, it was a positive intervention when the Unit Leader addressed the concerns with the whole unit of residents with the staff member present to determine the nature of the concerns.
- 10) Residents have expressed that they were denied the right to make a call to their Parole Officer or Attorney. This typically occurred after a youth was restrained or was held accountable for their behavior.
- 11) Staff interactions with residents have been observed to vary depending on the unit, shift and staff members assigned. While at times, staff interact openly with the residents and engage them in activities, at other times, communication is limited to directives and compliance driven statements.
- 12) During the course of the year, many positive staff interactions and efforts were observed associated with all levels of staff. It is important during the Ombudsman’s assessment of the grievances that these practices are acknowledged and highlighted.

Major Themes for Pueblo

- 1) The residents of Pueblo state the Assistant Superintendent is accessible and open to discussing issues with them leading to frequent direct contact and quicker resolution of problems.
- 2) Residents who filed multiple grievances appear to have benefitted from a multidisciplinary meeting to address their concerns. By these efforts, the context of the youth's circumstances were clarified and a plan developed to address them by a team of individuals.
- 3) The Ombudsman proactively talking to residents who have filed multiple grievances, even in the absence of a new grievance being filed, is one intervention which will continue and may lead to quicker resolution of issues.
- 4) The Attorneys representing residents at Pueblo meet consistently with their clients and work collaboratively with the Ombudsman to resolved issues in proactive manner.
- 5) The data shows that residents may be targeting particular staff. When multiple grievances are filed on the same staff member, it was a positive intervention when the Assistant Superintendent and Unit Leader addressed the concerns with the resident and staff member together to determine the nature of the concerns.
- 6) Residents report that given the physical structure of Pueblo, they may be limited in their ability to create positive space with other residents during stressful times.
- 7) During the course of the year, many positive staff interactions and efforts were observed associated with all levels of staff. It is important during the Ombudsman's assessment of the grievances that these practices are acknowledged and highlighted.

Next Steps

- 1) The process will begin of sending a copy of the grievances and outcomes to the Office of the Child Advocate and Office of the Public Defender.
- 2) Information in this report will be provided to the Parole Officers and Regional Office staff about the themes at both facilities so they can act as supports to the residents.
- 3) A discussion will occur with all youth in the facility, per unit, about the grievance process including clarification of the grievance versus a Director of Residential Care response.
- 4) A one page information sheet will be developed for residents about the grievance process and the typical issues brought forth and means of resolution.
- 5) The Ombudsman will engage in forums with each level and discipline of staff to discuss the findings of this report and recommendations.