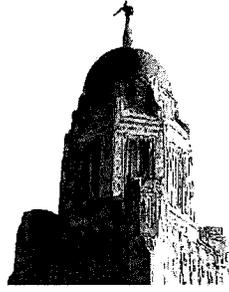


JULIE L. ROGERS
Inspector General



STATE OF NEBRASKA
OFFICE OF INSPECTOR GENERAL OF CHILD WELFARE
State Capitol, P.O. Box 94604
Lincoln, Nebraska 68509-4604
402-471-4211
Toll Free 855-460-6784
Fax 402-471-4277
oig@leg.ne.gov

August 16, 2019

Dannette R. Smith
Chief Executive Officer
Department of Health and Human Services
301 Centennial Mall South, P.O. Box 95026
Lincoln, NE 68509

RE: Youth Rehabilitation and Treatment Center - Geneva

Dear CEO Smith,

First, thank you for reaching out and meeting with Jerall Moreland, Deputy Public Counsel for Institutions, and me on Monday morning, August 12, 2019, to explain to us in person what was happening at the Youth Rehabilitation and Treatment Center—Geneva (YRTC-G), the urgency of the situation, and your immediate plans to alleviate the problems. As you've communicated to me over the past several months, transparency is very important to you, and by taking the initiative to communicate the concerns at the YRTC-G and your plans to deal with the problems showed that you are serious about that promise of transparency. I very much appreciate that.

The information you and Dr. Janine Fromm, DHHS Executive Medical Officer, provided about what you referred to as the current "Three-Tiered Problem" includes:

1. The acuity of the girls placed there,
2. The staffing challenges (lack of staff leading to overtime and double shifts), and
3. The disrepair of the facility (water damage, holes in walls, and the like).

The plan at that time was that a "Change of Location" would be filed in each corresponding juvenile court case, and girls would begin to be transferred off of the YRTC-G campus starting at 1 p.m. and those transferred would get YRTC programming at the alternate locations. Only four girls were transported to the Lancaster County Youth Services Center that day. The goal was to get the census down to about 20 girls in order to safely manage the population.

On Tuesday, August 13, 2019, Mr. Moreland and I visited the Lancaster County Youth Services Center and spoke with several people including each of the four girls transferred there. The youth did

not know why they were at the detention center at that time. Youth reported unsanitary living conditions at YRTC-G including water damage, mold, holes in walls, and exposed wires, but also a lack of programming, including no behavioral management program—what they referred to as the “Levels”. They described their days as sitting in the gym and either playing basketball, playing spades or sleeping from 7 a.m. to 9 p.m. At the detention center, the youth were receiving the same services as other youth in detention.

It does not appear that any “Change of Location” was ever filed in any of the juvenile cases.

On August 14, 2019, Mr. Moreland and I went to YRTC-G and toured the facility and every living unit with DHHS staff present. The OIG confirmed that only two living units (out of four) are being utilized and witnessed the unsanitary, questionable, and unsafe living conditions the youth have been exposed to. On that day, the on-campus census was 24 girls, with one girl on a day pass, coming back in the evening. Others were on furlough status. The OIG also confirmed that there is little to no programming taking place at the current time due to a number of factors, but mostly due to lack of staff, lack of staff training, and lack of appropriate physical space.

On August 15, 2019, (yesterday) you and I spoke about the need to get professionals (like health inspectors) into the two currently utilized living units to assess if it is truly safe for the girls and staff to be in those buildings.

Also yesterday, the OIG met with a parent of one of the youth who was transported to the detention center. The parent voiced concerns for the child’s safety and well-being. The parent had yet to be informed by DHHS officials about exactly what has happened to her daughter and any plan for her daughter moving forward.

A court hearing was held, and the four girls at the detention center were ordered to be transported back to the YRTC-G. By evening, they were moved to the YRTC in Kearney. It is my understanding there will be a meeting with you and the families of those four girls later today. I will plan to attend.

Based on the conversations with multiple people since Monday, other than the absolute deterioration of the living units at YRTC-G, allegations of neglect have surfaced: inappropriate use of room confinement, over-medicating youth, youth not getting her psychotropic meds prescribed before arriving at the YRTC-G, lack of mental health care, lack of programming, lack of physical activity, PREA violations, and staff shortages. Some of these issues were raised by you on Monday morning and some were not.

DHHS currently has the care, custody, and control of over 30 youth committed to YRTC-G. The OIG firmly suggests DHHS take urgent and immediate action for the safety and well-being of **all** of the youth placed there. The OIG would suggest DHHS take the following actions immediately:

1. Create alternate plans for where the girls will safely go in the event one or two of the current living units must be shut down.
2. Contact all legal parties (parents, attorneys, county attorneys, probation officers) to apprise them of the situation.
3. Work with all parties to coordinate plans and hearings for a change in placement.
4. Notify all judges DHHS cannot serve any youth at the YRTC-G campus until all issues have been addressed.

5. Contact any and all experts available to you (Public Health Licensing Specialist, Medicaid, DAS, mold removal experts, etc.) to fully assess the safety and conditions of the living units, to address the facility issues, and form a working plan. This includes closely and frequently communicating with the Department of Administrative Services.
6. Review and analyze the current programming at YRTC-G.
7. Implement staffing plans including the training and re-training of current staff.
8. Review and analyze the current mental health program.
9. Formulate a plan that will improve behavioral programming, mental health programming, and staffing.

If the OIG can be a resource to DHHS during this time, please reach out to me or our office.

Very sincerely yours,



Julie L. Rogers

CC: Legislative Council

