

MARYLAND :
A Case Study of
Deinstitutionalization
of Status Offenders

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SUMMARY

Maryland legislation prohibiting the institutionalization of status offenders anticipated the JJDP Act of 1974 by six months. The service network of state and community-based programs has expanded as a result of the change, but the basic structure of the service delivery system was not altered by the legislative change. The primary responsibility for status offenders remains with the Juvenile Services Administration.

One impact of the prohibition against detaining or committing status offenders in secure institutions has been a slight reduction in the tendency of the community to use the juvenile courts as a dumping ground for truant, ungovernable, or runaway youth: the number of status offenders referred to court intake has been steadily dropping since the new legislation became effective. Juvenile Service court intake workers have encouraged families to cope with problems themselves or seek help from local community agencies by increasing the number of status offender referrals which are closed at intake from 31% in FY 1973 to 68% in FY 1976.

The process of deinstitutionalization may have added to problems in interagency coordination and cooperation. Before the legal change, most institutionalized CINS were in training schools where formal education, medical and social services were available under one roof. Now that community-based placements are required, it is far more difficult for the Juvenile Services Administration to coordinate its own services with Departments of Social Services, local health departments, the Mental Retardation Administration, the Mental Hygiene Administration, and the Department of Education. In addition to requiring a more complex service delivery system, the law inherently requires some redefinition of roles by some agencies which are long accustomed to serving a specialized client group, but which are now asked to contribute to the treatment program of a youth whose problems are complex and unfamiliar.

Maryland has made considerable progress in deinstitutionalizing status offenders, having reduced secure detentions by 80% and commitments of status offenders by 97% in the two years following its legislative change. Of those status offenders who remain in secure detention and commitments, the majority are runaways, a fact which highlights the need for additional structured shelter care facilities. The majority of status offenders held in a secure institution for diagnostic evaluation are ungovernable youths, whose situation points to the insufficient diagnostic and mental health service capability at the local level. In addition, more group home, foster care, and day treatment spaces are needed for status offenders and other troubled youth.

The Maryland Juvenile Code clearly supports the same objectives as the JJDP Act of 1974, but in the absence of LEAA guidelines prior to Spring of 1977, Maryland developed its own interpretation of what

constitutes a juvenile detention or correctional facility. The definitions arrived at in Maryland bring the state into conflict with LEAA definitions. As a result, many facilities currently being used by status offenders in Maryland could be classified as juvenile correctional facilities by LEAA. The cost and service impact of compliance with federal definitions would be significant.

Other cost impacts of deinstitutionalization have been minimal. One state training school formerly used primarily by CINS has been closed, making it possible for the Juvenile Services Administration to realize a direct cost savings. Although the exact numbers placed in alternative community programs during FYs 1974 and 1975 is not known, the costs of community programs most often used by CINS tend to be lower than the costs of institutional placements.

A significant cost and service impact would probably be involved in ending out-of-state placements of status offenders. Because out-of-state placements result from lack of specialized services in Maryland, or serious difficulties in coordinating and delivering existing services, a considerable amount of planning and program development would be required to provide community-based treatment for those now placed at long distances from their homes.

I. Introduction

Maryland was one of ten states chosen for case studies of the service needs of status offenders and the cost implications of providing treatments in unrestricted settings. The Maryland case study is part of a joint effort sponsored by the Office of Juvenile Justice and Delinquency Prevention of the Law Enforcement Assistance Administration, and the Office of Youth Development, Department of Health, Education, and Welfare. Arthur D. Little, Inc., was asked to undertake the ten case studies and comparative analysis.

Prior to beginning the case studies, ADL staff conducted feasibility studies in two states. Because Maryland was one of the two initial states, research in Maryland was conducted in two phases: first in March as part of the feasibility study, and then in June during completion of the case study. Information was gathered through review of state and local reports and plans, through study of data on the numbers and types of youth who come into contact with the juvenile justice system, and through field research with state, local and private agencies. Field research was conducted in Baltimore with state agencies, and in three localities during the week of June 6, 1977. The full report of ten state case studies with a comparative analysis will be available after August 31, 1977.

II. Organizational Context

The prevention, treatment, and control of juvenile delinquents and status offenders (Children in Need of Supervision) and dependent and neglected youth (Children in Need of Assistance) are responsibilities shared by state, county, local and private agencies. Law enforcement and the courts are local functions, while intake, probation, aftercare, the operation of training schools, forestry camps, detention centers and the programming of residential and nonresidential services provided under purchase-of-care are all centrally administered. The services and programs provided through purchase-of-care such as shelter facilities, or group homes, are generally locally and privately operated.

A. The Juvenile Justice System

Under changes made to the Juvenile Causes Statute of the Annotated Code of Maryland effective January 1, 1974, Maryland began to deinstitutionalize Children in Need of Supervision (CINS). The definition of CINS is found in the state's 1975 Cumulative Supplement of the Annotated Code:*

Child in Need of Supervision - is a child who needs guidance, treatment, or rehabilitation, because:

- a. he is required by law to attend school and is habitually truant; or
- b. he depicts himself so as to injure or endanger himself or others; or
- c. he is habitually disobedient, ungovernable, and beyond the control of the person having custody of him without substantial fault on the part of that person; or
- d. he has committed an offense applicable only to children.

Primary responsibility for delinquent youth and Children in Need of Supervision (CINS) rests with the Juvenile Services Administration, and Children in Need of Assistance (CINA) are the responsibility of the Department of Social Services.

1. Juvenile Services Administration
 - a. Organization

Since July 1, 1967, the Juvenile Services Administration has been the state agency to assume major responsibility for

*Annotated Code of the State of Maryland, Courts and Judicial Proceedings Article, Title 3, Subtitle 8, Section 3-801.

the administration, coordination, and standardization of state and private programs and services for juvenile offenders, both delinquents and CINS. In 1969, the Administration was placed within the State Department of Health and Mental Hygiene. The Administration has two major divisions: Court and Community Services, and Institutional Services. Other units include Special Services, Training and Staff Development, and Volunteer Services. The Institutional Services Division administers seven secure state facilities for the detention, commitment or evaluation of juveniles, as well as hold-over facilities. The Division of Court and Community Services provides all court services related to intake, probation or protective supervision, and aftercare, and has responsibility for the programs and funding (or partial funding) for all JSA residential and nonresidential community-based services. The Division of Special Services supplies internal services to JSA in the form of planning, data collection, research, evaluation, publications, grants development, and Title XX planning. The Juvenile Services Administration licenses the private care facilities from which it purchases care.

JSA provides the court intake unit personnel who are available in person or by telephone on a 24-hour per day basis, for every juvenile court in the state. Because the courts are the first point of contact with the juvenile justice system for delinquents, CINS and CINA, some of whom require services outside the direction of JSA, a few localities have developed diagnostic and referral teams composed of representatives from all relevant agencies as a means of assuring a continuity of care and interagency cooperation and coordination following disposition of difficult cases. The arrangement is formalized in Baltimore City as the Child Management Intake Team and operates more informally in other localities.

b. Volume of Clients

Over three-fourths of all juveniles brought to court intake are referred by a law enforcement officer who has several choices of action open to him in dealing with a delinquent or status offender. According to the Governor's Commission on Law Enforcement and Administration of Justice a police officer may release the youth with no further action; release the youth but file an official report on the juvenile; reprimand and release to the parents or guardian; refer the youth to an agency on a voluntary basis; refer to JSA intake without recommending detention; and refer to JSA intake with a recommendation for detention. CINS represent a very small proportion of all juveniles referred to court intake:

NUMBER OF JUVENILES CASES REFERRED TO INTAKE, FY 1976*

	Referred to Intake	
	No.	%
Delinquents	49,798	86%
CINS	6,133	10
CINA	2,051	4
Special Proceedings	62	0
Total	58,044	100%

Intake may decide that a youth does not require services and close the case at intake, may counsel a youth for up to 90 days on an informal voluntary basis, or may refer a youth to a community service program; however, in order to purchase a placement or service or send a child to the state evaluation center, a formal petition must be prepared and a court hearing take place. Most CINS are diverted away from the court at intake. The proportion of CINS formally appearing before Court is smaller than the proportions of delinquents and CINA whose cases are heard by a juvenile judge:

MANNER OF HANDLING JUVENILE CASES DURING FY 1976**

	Disapproved/Closed		Informal		Formal		Total	
	No.	%	No.	%	No.	%	No.	%
Delinquents	25,495	51	4,377	9	19,926	40	49,798	100
CINS	4,141	67	707	12	1,285	21	6,133	100
CINA	135	7	25	1	1,891	92	2,051	100
Special Proceedings	0	0	0	0	62	100	62	100

c. Secure Detention, Commitment, and Evaluation Facilities

The Juvenile Services Administration operates four detention facilities: Maryland Training School, The Montrose School, Boys' Village, and the Waxter Children's Center, and JSA will open a new detention facility in FY 1978, the

*JSA Annual Report for 1976, Table 14, pp. 27-28.

**JSA Annual Report for 1976, Table 9, p.22.

Alfred D. Noyes Children's Center in Montgomery County. Boys' Village, the Waxter Children's Center, and the Alfred D. Noyes Center are used exclusively for detention and have a total rated capacity of 126 beds. Institutional treatment programs are also in operation at the Maryland Training School, and The Montrose School which have a combined capacity for both commitments and detentions of 556 beds, and at four Boys' Forestry Camps with capacity of 140 in the western part of the state. The majority of youths placed in either detention or commitment in these facilities are adolescents who are alleged or adjudicated delinquents.

Although it is no longer legal to place a CINS in secure detention or commitment, the process of deinstitutionalizing status offenders is not complete, and a small number of CINS are still being placed in JSA institutions.*

In addition, the Maryland Children's Center with a capacity of 112, provides diagnostic and evaluation services for delinquents, CINS and occasionally CINA in a secure institutional setting. Under Maryland law, this facility is not classified as a detention or correctional facility.

JSA also operates a six bed, 48-hour hold-over facility in the Y.M.C.A. in Cumberland, Maryland. Funded by LEAA, the facility holds youth while they wait for court hearings or transportation to a distant detention center.

2. Juvenile Court

In each county in Maryland, except Montgomery County, the circuit court is the court exercising jurisdiction over all juvenile cases whether delinquents, CINS, or CINA. In Montgomery County the juvenile court exists within the District Court system, but the JSA staff perform all intake, probation, and aftercare functions as they do in all other jurisdictions. In eight counties and Baltimore City, Masters are employed on either a full-time or part-time basis to hear juvenile cases, but their findings must be confirmed by a juvenile judge. From time to time the Masters system has come under criticism for being inefficient, causing delays and duplication of work, and evidencing a "second

*The JSA Annual Report for 1976, Table 35 shows 15 CINS committed to the Maryland Training School, The Montrose School, and Boys' Forestry Camp. The same table lists 193 CINS detained at Waxter Children's Center, 59 at Boys' Village, 37 at Maryland Training School, and 31 at Montrose School for a total of 320 CINS detained during the fiscal year.

Maryland Juvenile Services Administration staff states that children adjudicated as CINS are not placed in the state correctional facilities: "These cases are statistical errors. The child found to be a CINS may also be found delinquent; however, in reporting his status only one category is reported. One will find a dual finding on these cases." JSA staff member, August 1977.

class" status of the juvenile court. Although proposals to end the Masters system throughout Maryland have not been implemented, Prince George's County has created two judge-ships and a family court structure to replace the work of Masters and Juvenile Judges in the circuit courts, and also hear other cases involving family problems. The circuit court judges who act as juvenile judges are appointed to the bench by the Governor and serve at least one year before standing for election. Subsequently, they must run for office as elected officials every 15 years.

The juvenile court has jurisdiction over all detention, adjudication, and dispositional decisions. By law only the juvenile court or JSA intake officer may authorize detention or shelter care prior to adjudication. The intake officer may detain a child only until the next available court day while a juvenile judge or Master may detain a youth for a maximum of 30 days prior to an adjudicatory hearing. Additional 30-day detention orders can be obtained upon application. If the JSA intake staff do not close a case at intake or provide services informally, they authorize a petition which is forwarded to the State's Attorney.

The court processes which follow are divided into two steps, an adjudicatory hearing and a dispositional hearing. The purpose of the adjudicatory hearing is to determine the truth of the allegations about the youth contained in the petition and his need for services. At this point, the Juvenile Court can waive jurisdiction to the adult criminal justice system in the case of certain juvenile delinquents, dismiss the petition, continue the case without finding, refer the youth to another agency, warn the youth, place him on probation without verdict, or sustain the petition and adjudicate the child.

In the event of adjudication, a dispositional hearing must be held to decide the program of treatment, training, or rehabilitation. The law allows only two types of alternatives for CINS and CINA. A child requiring supervision or assistance may be placed on probation or under supervision in his own home or in the custody or guardianship of some other person, or he may be committed to the custody of a local Department of Social Services, the Department of Health and Mental Hygiene, or a public or licensed private agency under the guardianship of the Juvenile Services Administration.

3. The Governor's Commission on Law Enforcement and the Administration of Justice

The Governor's Commission on Law Enforcement and the Administration of Justice is the State Planning Agency for

the allocation of LEAA funds. Its 1977 budget was \$7.3 million of which 25-33% was allocated to programs for juvenile delinquents. The Commission's priorities for program development include diversion services, shelter care facilities, regional detention centers, and community based residential and nonresidential treatment programs. Funding for 1978 will decrease by 15% from the 1977 funding level.

The Commission has been instrumental in the development of group homes and the youth development and delinquency prevention programs carried out in the 17 Youth Service Bureaus throughout the state. Almost all new programming in the juvenile justice system, including alternative school programs, diversion programs, shelter and detention facilities, have occurred as a result of federal funding from the Governor's Commission.

B. Service Delivery Systems and Agencies Outside the Juvenile Justice System

Given the complexity of emotional, behavioral, and educational problems that are common among juvenile offenders, the services of a number of agencies outside the juvenile justice system are called upon in providing treatment programs for CINS. The most important actors providing services which supplement or take the place of JSA services are the State Social Services Administration and its local departments, the Mental Retardation Administration, the Mental Hygiene Administration, and the Department of Education.

1. The Social Services Administration and Local Departments of Social Services

The Social Services Administration within the State Department of Human Resources is charged with the primary responsibility for providing casework and placement for CINA, or those youth who are abused, neglected, or without proper care and attention. The Administration also provides services for CINS committed to its local Departments of Social Services by the courts, particularly in those instances when the court disposition requests that day care, homemaker services, welfare counseling, family counseling or special health services be provided in the home. In FY 1976, 82 CINS were committed to local departments, and there may be more youths originally adjudicated as CINS whose designation was altered to CINA to enable a placement with DSS, according to JSA and SSA staff.

The Administration licenses its own purchase-of-care group homes and other residential facilities. In theory, either JSA or SSA can place a child in a facility licensed by the other, but differing fee schedules have led to some problems because JSA fees have been higher for most services. The agencies are now attempting to develop similar standards, licensing procedures, fee schedules, and common procedures

handling services provided by the private sector under purchase-of-care arrangements.

Care purchased by the local Departments of Social Services range from foster care and group home placements to institutions with structured psychiatric treatment programs. DSS has its greatest difficulty placing children with serious emotional problems or children who are socially maladjusted. Very difficult children are often placed out-of-state in specialized private facilities where the ceilings on fees that can be paid under purchase-of-care do not apply.

Staff from the local Departments of Social Services sometimes act as members of a diagnostic team which identifies a treatment plan and resources available to carry out the program. Local departments often handle dual commitments in cooperation with another agency whereby DSS pays the cost of basic care and social services and the Mental Retardation Administration, for example, pays the cost of services related to mental retardation.

2. The Mental Retardation Administration

The Mental Retardation Administration within the State Department of Health and Mental Hygiene operates six state residential facilities which serve only the mentally retarded and it also purchases private care for the retarded. If a CINS is tested and scores a 69 or lower on an IQ test, he can be committed by the court to the Mental Retardation Administration for evaluation at the Maryland Children's Center and additional treatment services. It has been the experience of the MRA that some CINS children who are labeled "mentally retarded" based on test scores are not retarded in any medical sense, but are socially and culturally deprived children who are functionally illiterate and should be receiving services through other state or local agencies.

3. The Mental Hygiene Administration

The Mental Hygiene Administration is that part of the State Department of Health and Mental Hygiene which provides community psychological and psychiatric services. Unlike JSA, DSS, and MRA, the Mental Hygiene Administration has no purchase-of-care monies at its disposal. Consequently, it provides all its services through state hospitals and Community Mental Health Centers which are funded jointly by state and local governments. The Community Mental Health Centers provide both diagnosis and treatment, but the program resources are limited and are available only one day a week in some localities.

CINS and CINA constitute approximately 15% of the Administration's clients. Some of these children may have been placed in state mental hospitals with adults because no other treatment resources are available. The Administration is in the process of developing the capability to provide mental health day treatment on an outpatient basis as a means of keeping children out of state mental hospitals and lowering the cost of mental health care. A significant number of "emotionally handicapped" Maryland children have been placed in specialized treatment programs outside the state. It is possible that some CINS and CINA are included in their numbers. In order to return these children to Maryland, a large number of specialized residential placements would have to be developed.

4. The State, County, and City Departments of Education

The State Department of Education provides support services to the county and city Departments of Education which have legal responsibility for the education of all youth in Maryland. Department of Education specialists act as consultants to JSA in evaluating the education programs in state institutions. "Low risk" children committed to training schools are allowed to attend public secondary schools after they are screened by the school staff to determine whether the child can function in a public school setting.

Maryland law specifically states that "social maladjustment" is not an educationally handicapping condition requiring special education. Although the schools do provide special programs for those children who meet their criteria for special education, and some local school systems have developed special programs for maladjusted youths, Juvenile Services Administration finds that many youth under their care are not considered eligible by the public schools for special education or alternative school programs, particularly in the case of disruptive youth. Disruptive children are frequently expelled from school, and are therefore difficult to maintain in community-based treatment programs which usually rely on the public schools for their education component. In addition, some schools view truancy as a problem to be referred to local Departments of Social Services. Due to the confusion over which departments or agencies actually have responsibility for the education of disruptive and truant children, a state task force has been established to consider how the Department of Education could fulfill its mandate to provide education for all children in the state.

III. State of Deinstitutionalization

A. State Background and Objectives

The objectives of the Maryland Juvenile Code and of the majority of persons working within the Juvenile Justice System or related agencies are clearly consistent with the objectives expressed by the federal JJDP Act of 1974. Both the development of community-based treatment and changes in Maryland law preceded the federal legislation. There were several reasons for the early development of community-based programs. According to state planning documents, the state revision of the juvenile code effective January 1, 1974, which prohibited the secure commitments and all detentions of CINS, speeded the process of community facilities development. A second major influence was the increased costs and demand placed on state institutions by the rapid increase in the total number of cases referred to the Juvenile Services Administration since 1968. (During fiscal 1968, 19,782 delinquents, CINS and CINA cases were handled by JSA intake staff, but by fiscal 1976, their numbers had grown to 58,044.) However, the most important factor identified was the belief shared by a growing number of professionals in the juvenile justice field that community-based treatments offer the most promising and efficient approach to reducing juvenile recidivism. To place a child in an institutional setting is to place a child in an artificial environment quite unrelated to the community society to which he will eventually return. Despite the commitment of professionals to the concept of least possible restrictive placement for treatment, the practical incentives provided by cost consideration and the law, and the considerable progress made in implementing the law, a number of problems remain to be overcome before Maryland is in complete compliance with its own laws or the JJDP Act of 1974. Inappropriate placements of all types of juveniles still occur where local attitudes are in conflict with the objectives of the law or officials are unaware of alternative resources; when agencies disagree about the best course of treatment for a juvenile offender; and because Maryland law and guidelines have arrived at an interpretation of permissible alternative placements which differs from the federal definitions released in the Spring of 1977.

After January 1, 1975, an alleged CINS could not be detained in jail or any other facility used to detain adults charged with criminal acts, or detained in a facility used to hold juveniles alleged to be or adjudicated as delinquent. The Juvenile Causes Statute was altered again in 1975 to forbid any detention of a CINS or CINA. Prior to court hearing a CINS taken into custody may be placed in a shelter care facility maintained or approved by DSS or JSA, or in a private home or shelter care facility approved by the court. In the 1976 legislative session, an emergency bill was passed which allowed the detention of alleged juvenile delinquents in jail until January 1, 1978 without altering the provisions affecting the detention of CINS.

The law regarding the institutionalization of CINS and CINA was apparently inadvertently changed by a 1975 revision of the code. Though the 1974 statute expressly forbids the confinement of CINS in training schools or similar facilities, the 1975 revision states only that "A child who is not delinquent may not be committed or transferred to a facility used for the confinement of delinquent children", thereby making it permissible under Maryland law to confine CINS in secure institutions operated solely for their use. In fact, no such institutions exist at present.

During the Spring, 1977 legislative session, a bill drafted by the Maryland Commission on Juvenile Justice had among its proposed revisions of the juvenile code a section closing the legal possibility of institutionalizing CINS or CINA. This bill did not become law, but it is our understanding that the proposed revisions will be introduced to the legislature for consideration again.

In the absence of any federal guidelines for defining detention and correctional facilities proscribed by the JJDP Act of 1974, Maryland developed its own definitions which bring one state institution and the majority of its private residential care institutions into conflict with the LEAA definitions circulated in Spring of 1977. The state diagnostic facility, the Maryland Children's Center, is a juvenile detention center under federal law on the grounds of its security, its size and institutional character, and the commingling of CINS with delinquents who constitute more than half the institution's population. The same problems will apply to the majority of private residential treatment programs where delinquent CINS, and CINA commingle. Maryland has defined its public training schools, camps, and detention centers as juvenile detention or correctional facilities, but has exempted all private residential treatment facilities from this classification. Specialized residential treatment centers are correctional facilities according to the federal definition by virtue of their size and the fact that they are not community-based, and the commingling of delinquent and CINS youths where delinquents constitute more than 50% of the population. Many group homes would also be affected because delinquents often make up more than half the population of these facilities. Strict compliance with federal law would require Maryland to undergo a considerable re-organization of its purchase of residential care.

B. Progress to Date

Maryland juvenile justice professionals report that one consequence of deinstitutionalizing status offenders has been a reduction in the number of youths referred to court intake and sent to adjudicatory hearings. They believe the legal change has encouraged police, schools, and parents in many cases, to either ignore behavior that could cause a youth to be labeled a CINS or attempt to find counseling or other help without coming to court. This situation is in contrast to the increased case rate and proportion of court hearings held for juvenile delinquents. Between fiscal 1974 and 1976 the pattern of court intake and adjudicatory petitions prepared is opposite for CINS and delinquents:

NUMBER OF DELINQUENTS AND CINS CASES HANDLED BY INTAKE AND THE PROPORTION HANDLED FORMALLY*

	Delinquents Cases		CINS Cases	
	<u>Rf. to Intake</u>	<u>Formal Hearing</u>	<u>Rf. to Intake</u>	<u>Formal Hearings</u>
FY 1974	38,360	37%	6,815	29%
FY 1975	48,360	36%	6,429	26%
FY 1976	49,798	40%	6,133	21%

The intake figures for juvenile delinquents represent an increase in the delinquent case rate per thousand juveniles from 37 in 1974 to 49 in 1976, while the CINS case rate per thousand juveniles has dropped from 7 to 6 during the same period. At the same time, the proportion of CINS who were likely to have the court order a commitment or placement was nearly twice as great as the proportion of delinquents committed or placed.

DELINQUENTS AND CINS CASES COMMITTED OR PLACED, FY 1975 and 1976 AS PROPORTION OF CASES HANDLED BY INTAKE**

Delinquents			CINS	
<u>1975</u>	<u>1976</u>		<u>1975</u>	<u>1976</u>
18%	20%	No Adjudication	4%	4%
		Adjudication		
11%	13%	a) suspension, probation, supervision, referral	10%	7%
4%	4%	b) commitment or placement	9%	7%

*JSA Annual Reports for FYs 1974-1976, Table 9.

**Calculated from JSA Annual Reports, Fiscal Years 1975, 1976, Table 16

Thus, the number of delinquency referrals have increased in recent years while the CINS referrals have dropped, and the proportion of delinquents who appear before a juvenile judge or master is greater than the proportion of CINS, a CINS referred to court is more likely to be placed outside his home than is a delinquent. Because similar statistics are not available for the years prior to FY 1975, it is not possible to say how the decline in the percentage of CINS placed or committed outside their own homes compares to earlier years, before the 1974 legislation deinstitutionalizing CINS.

The details of CINS cases adjudicated during fiscal 1976 are as follows:

ADJUDICATION AND DISPOSITION OF CINS DURING FY 1976*

No Adjudication

Petition Withdrawn, Dismissed, Warned, Adjusted or Counselled, Jurisdiction Waived, Case continued Without Funding, Stet, Probation Without Verdict and Referred to Another Agency, Restitution or Fine.	262
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Adjudication

Probation, Supervision, or Custody Awarded	447
Committed to JSA Group Homes or Purchase-of-Care	356
Committed to Training School or Forestry Camp	21
Committed to Mental Institution, or referred to Psychiatric Care, or Mental Retardation Administration	16

<u>Other</u>	101
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<u>TOTAL</u>	1,285
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*JSA Annual Report, 1976, Table 16.

Because over two-thirds of CINS handled by Juvenile Court intake had their cases closed or disapproved at that stage by JSA intake staff, petitions resulting in adjudicatory hearings were prepared for only 20% of all intake referrals. For those CINS who appeared before a juvenile court judge or Master, 20% were not adjudicated, 35% were placed on probation or supervision in their own homes or in the custody of another adult, and 28% were removed from their homes and were committed to a JSA residential community placement. Approximately 7% of CINS referred to court intake were removed from their homes and committed to either community treatment programs under the auspices of JSA or the Department of Social Services, or committed to a mental institution.

The majority of CINS placed outside their homes in FY 1975 and FY 1976 resided in private purchase of care facilities. Since the 1974 legislation prohibiting the detention or commitments of CINS, Maryland has made considerable progress in reducing the number of CINS detained or committed to state institutions as shown on the following table:

NUMBER OF CINS COMMITTED OR DETAINED IN SECURE FACILITIES*

<u>YEAR</u>	<u>Training Schools and Detention Centers</u>			<u>Jails</u> Det.	<u>Total</u>
	Detentions	Committments	Total		
FY 1973	1868	690	2558	N.A.	2558+
FY 1974	829	171	1000	N.A.	1000+
**FY 1975	369	24	393	155	548
**FY 1976	320	15	355	155	490

*Commitment and detention figures from JSA Annual Reports, FY 1973, Tables 28 & 33; FY 1974, Tables 29 & 34, FY 1975, Tables 30 & 35, and FY 1976, Table 35. Figures may include Interstate Compact Cases. Jail detention figures from the Maryland Commission on Juvenile Justice: 1977 Fiscal Report, p. 36.

The number of CINS committed or detained may be higher than shown on the table if the reason for all admissions to state institutions were known. For 681 youths admitted to state institutions in FY 1976, the offense is shown as "other."

**During FY 1975 and 1976, JSA Annual Reports show CINS committed to the Maryland Training School, The Montrose School, and Boys' Forestry Camps, and detained at the same three institutions as well as the Waxter Children's Center and Boys' Village.

As was pointed out in the footnote on page 5, JSA staff do not agree with the JSA Annual Report figures showing the detention and commitment of CINS in juvenile correctional facilities during FYs 1975 and 1976. Nevertheless, based on the principle of "the best evidence" rule, the figures are used throughout the case study for the purpose of reviewing progress, and calculating the cost impact of deinstitutionalization.

The table on page 14 shows 155 CINS detained in jails during FYs 1975 and 1976. Detention of CINS in jails has ended in the four largest counties in the state and in Baltimore City, but remains a problem in the ocean resort area on the Eastern Shore where alternatives to jails are not available. Worcester County was responsible for detaining most CINS in jail and the length of their detention is reported not to exceed 16 hours.

There are also a large number of CINS held on an average of 21 days for evaluation at the secure diagnostic facility, the Maryland Children's Center. Between fiscal 1973 and 1976 the Center has evaluated approximately 1,200 to 1,300 youths per year, most of them delinquents. The number of CINS referred to the Center during the past three fiscal years has remained relatively constant.

NUMBER OF CINS REFERRED TO SECURE EVALUATION

Year	Maryland Children's Center
FY 1973	568
FY 1974	409
FY 1975	411
FY 1976	400

The number of alternative community based residential placements made during the same period in JSA owned, operated, or licensed facilities are shown on the following table. The figures include delinquents, CINS, and a small number of CINA. Not shown are the CINS who may be placed through DSS purchase-of-care contracts.

DELINQUENTS, CINS, AND CINA IN JSA COMMUNITY RESIDENTIAL PLACEMENTS*

<u>Year</u>	<u>Good Shephard</u>	<u>Purchase-of-Care Residential</u>		<u>Emergency</u>	<u>State-Owned Group Homes</u>	<u>Youth Residence Ctr.</u>	<u>Total</u>
FY 1973	85	850	1,068		82	35	2,120
FY 1974	86	1,184	1,987		76	35	3,368
FY 1975	91	1,067	2,794		45	22	4,019
FY 1976	98	1,109	3,012		61	24	4,304

Juvenile Services records do not show how many of the youths in the above placements were CINS. However, their April, 1977 records show 45% of private residential purchase of care placements or 332 placements being used by CINS.

Although there is little information available on the total number and characteristics of CINS placed in private facilities in and out of state, JSA records do show the primary offense of youths referred to intake, proceeding to formal hearings, committed to JSA purchase of care, and placed in secure evaluation, detention, or commitment. These figures are helpful in understanding that services and treatments available to CINS vary according to the category of offense.

TRUANTS, RUNAWAYS, AND UNGOVERNABLE YOUTHS AT EACH INTAKE STAGE AS PROPORTION OF CINS REFERRED TO INTAKE FY 1976 **

	Total Rf. to Intake	Disapproved/ Closed	Informal	Formal
Truants	20%	67%	20%	13%
Runaways	39%	78%	13%	9%
Ungovernables	41%	58%	29%	13%
	N=6,133	N=4,141	N=707	N=1,285

*JSA Annual Report FY 1976, Table 23

** Based on JSA Annual Report FY 1976, Tables 15 and 20.

Truants

In fiscal 1976 the smallest number of CINS referred to court intake were truants (1229 or 20%). A somewhat smaller proportion of these youths were likely to be closed at intake than runaways, and about one-third of those referred were either counselled informally or proceeded to an adjudicatory hearing. Historically, truants have been least likely to be placed in a secure state facility:

COMPARISON OF PROPORTION OF TRUANTS, RUNAWAYS, AND UNGOVERNABLE YOUTHS PLACED IN STATE JUVENILE INSTITUTIONS FOR DETENTION, EVALUATION, OR CONFINEMENT, FY 1973 and FY 1976*

CINS In Secure Detention, Evaluation, Confinement		
	<u>FY 1973</u>	<u>FY 1976</u>
Truants	5%	2%
Runaways	49%	53%
Ungovernables	46%	45%
	100%	100%
	N = 3126	N = 735

Before Maryland's deinstitutionalization legislation, truants represented 5% of the institutional population of CINS in FY 1973. In FY 1976, the figure was 2%.

Runaways

Nearly 40% of all FY 1976 referrals were runaways, but over three-fourths had their cases disapproved or closed at intake. Despite the fact that a smaller proportion of this sub-group of CINS were counseled informally or seen by a juvenile judge or Master, they were the most likely to be placed in secure detention or commitments in state institutions. Of all runaways referred to the court in FY 1976, 383 were placed in state institutions, usually for a period of secure detention. They represented just over half of the population of CINS in secure state facilities.

Ungovernable Youths

Although the proportion of ungovernable children referred to intake was approximately the same as the proportion of runaways, (40%),

*Based on JSA Annual Reports FY 1973, Tables 28 and 33; and FY 1976, Table 35.

ungovernable youths were the least likely to have their cases closed at intake. Of the ungovernables referred, 58% were turned away from the court compared to two-thirds of truants and over three-fourths of runaways. Ungovernable children were almost as likely as runaways to find themselves in a secure placement, though unlike runaways, the overwhelming majority of the 334 securely held ungovernable youths were placed in the Maryland Children's Center for evaluation.

In looking at these figures it is important to remember that the JSA classification into runaways, truants, and ungovernable youths is based on the major reason for referral. JSA records also show that the number of additional complaints lodged against CINS exceeded the number of primary complaints, suggesting that the categories above actually overlap. The impressions of the JSA staff interviewed confirm the statistical picture drawn of the flow of status offenders through the system. They commented that large numbers of runaways were simply referred back to their families, sometimes with referrals to community counseling services rather than being handled in court, and also that truants tended to be sent back to school and schools encouraged to view their situation as an education, not a juvenile justice, problem. There seemed to be general agreement that the CINS who received community placement now, typically an "ungovernable" child, is far more difficult to work with and treat than any other type of juvenile with problems.

It was the profile of the ungovernable child drawn by those interviewed that was used to distinguish between CINS and juvenile delinquents. Agreeing that CINS and delinquent populations overlapped to some degree in their family characteristics, and problems in school, those interviewed frequently made distinctions between CINS and delinquents. They report that delinquents are aware that they have done something wrong, are less likely to act out, and less likely to require a placement outside their own homes. The CINS child was characterized as often manipulative, unwilling to see any wrong-doing in his behavior, and coming from families very difficult or unwilling to cooperate with social service workers. Further, runaways are described as sometimes having very good reasons for trying to get away from their homes.

Before considering the current service needs of CINS in Maryland, it is useful to review the changes in services and treatments that have taken place since the state deinstitutionalized status offenders. In 1973 the fiscal year prior to legislative change, there were 6965 CINS referred to court intake of whom fewer than a third were closed at intake. Of all CINS seen by court intake that year, 45% spent some time in a secure facility for evaluation, detention, or commitment and treatment. One state institution for boys, The Victor Cullen School, operated almost exclusively for CINS. 82% of its 1973 commitment and detention population were CINS and the largest single group of status offenders

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were ungovernable youths. The education program within the School was well known for its success in attracting and holding the interest of boys at the School and improving their academic performance. As a result of deinstitutionalization, the School was closed to use by JSA on January 1, 1974. Community residential placements were already available in 1973. In the fiscal year approximately 2,000 youths were placed in these programs with about half the placements made up of short-term emergency shelter care. The proportion of CINS in these facilities is not known. It is difficult to say what other services and resources were available outside the secure and non-secure residential treatment programs.

By FY 1976 the number of CINS appearing at court intake decreased to 6133, and nearly two-thirds were turned away at intake. Of all CINS referred to court intake that year, 12% spent some time in secure JSA institutions, and an additional 3% were detained in jails, probably over night. Community based residential placements available primarily to CINS and delinquents increased dramatically to approximately 4,300, but most of the increase was for short-term emergency care placement. The net increase in longer term residential facilities was 210 placements. By April of 1977, 45% of the 739 youths in JSA longer term residential purchase-of-care placements were CINS. The nonresidential service network is described below in Section IV, but it is difficult to pin-point the number of CINS utilizing these services.

If we ignore for the moment the detentions and short-term emergency placements and concentrate on the number of those held in secure or longer-term community-based residential programs in the two periods, it appears that a much smaller proportion of CINS are placed in residential care than previously.

CINS IN SECURE AND COMMUNITY-BASED
RESIDENTIAL PLACEMENTS

	<u>FY 1973</u>	<u>FY 1976</u>
In Secure Confinement	690	15
In Longer Term Res. Purchase-of-Care	<u>400*</u>	<u>499*</u>
Total (% of Intake)	1090 (16%)	514 (8%)

*Estimated using the ratio of CINS to other juveniles in purchase-of-care April 1977.

If the purchase of-care figures are at all reasonable for those years, Maryland is treating on a longer-term residential placement basis half the number of CINS it did before deinstitutionalization. The reasons for this could be that half of the residential

placements were not really appropriate in the first place, that insufficient facilities are available, or that services are needed but provided on a day-treatment basis without removing a CINS from his home. Unfortunately, the number of CINS currently receiving day treatment in their homes is not known.

IV. Service Needs

Youth service workers in Maryland find that status offenders need the same range and variety of services as other troubled youths. Several people distinguished between the service needs of CINS and delinquents by stating that a greater proportion of CINS needed psychological and psychiatric services, and residential placements outside their homes. Although the state would like to expand many of its service programs, the existing range of services for CINS and other troubled youth includes all services listed by those interviewed as necessary services for CINS. The service system can be divided into residential and nonresidential services.

A. Community-Based Residential Placements

Both JSA owned and operated facilities and private facilities are available for community-based residential care and treatment usually in a "family" setting. A small number of placements are available in three state-owned group homes; the group home for girls has a capacity of 10 and the two homes for boys, have a combined capacity of 25. The Maryland Youth Residence Center is operated by JSA for treatment of delinquent or CINS boys who are twelve years of age or younger at the time of admission. During fiscal 1976, the Youth Residence Center reported 24 admissions.* All four of these facilities are located in Baltimore City.

Privately operated residential facilities are available through purchase-of-care. JSA licenses and develops standards for these facilities. Over 95% of residential community placements (4,219 youths in fiscal 1976) were in purchase-of-care facilities which include specialized treatment facilities, more than 40 private group homes, foster care, placements at the Good Shepherd Center and emergency shelter care provided by private families in their own homes. Nearly three-fourths of all purchase-of-care placements during that year were short-term, usually between 10 days and 30 days in emergency shelter care. JSA also purchases structured shelter care from Caithness, a Montgomery County organization as an alternative to placing a youth in detention. Caithness provides intensive supervision on a 24-hour basis. During the next five fiscal years, JSA plans to purchase more of this type of care. In Prince George's and Montgomery Counties, JSA purchases shelter care from facilities staffed by resident counselors for 10-14 youth at a time. Several group homes also provide limited shelter care in some parts of the state.

The remaining residential placements were generally much longer term, and some of the placements in specialized institutions offering psychiatrically-oriented programs were available only in out-of-state institutions. The Good Shepherd Center in Baltimore County is one

* JSA Annual Report FY 1976, p. 42.

example of a specialized residential treatment center for delinquents or CINS in Maryland. It has a rated capacity of 120 girls with emotional or behavior disorders. The Center offers comprehensive treatment for girls and concurrent services to the families through social services, psychiatric consultation, medical and dental services, psychological testing, education services, including special education if required, and family counseling.

B. Nonresidential Community-Based Service Programs

There are three types of non-residential community-based services available to juvenile offenders: direct services performed by JSA staff; services purchased from the private sector; and services offered by local community agencies. The Juvenile Services Administration provides direct services to youths through Probation/Intensive Probation, and Aftercare. After a youth is placed by a court order on probation, JSA juvenile counselors develop a treatment plan based on their assessment of the child and family situation, offer counseling, referrals to special services, and supervision as required under the court order. Similar services are provided under the Intensive Probation Program with the distinction between intensive and ordinary probation being the more serious offense of the youth placed in the intensive program, and the effort made to match the youth with a JSA counselor whose talents are particularly suited to working with the probationer. In both types of probation, the counselor is available to his client on a 24-hour a day basis.

At the time a child is committed to a state training school, he is assigned an aftercare counselor whose role is to visit the child each month and plan for the period when the child is released. The counselor interviews the child at least once a week for two months following his release from training school and evaluates the necessity for continuing close supervision or completely releasing the child from JSA counseling.

Another group of nonresidential, day treatment services are provided by JSA through services purchased from the private sector. These include diversion programs, community diagnostic/clinical services, counseling, and remedial, special and vocational education for delinquents under court supervision at the Youth Service Center in Baltimore City, a center initially funded by LEAA. Day treatment services are also available at the Good Shepherd Center.

Diversion programs are the alternative to processing a child through court by offering intensive counseling approximately three hours per week. The aim of the program is to prevent a reoccurrence of the juvenile offense that resulted in the referral to JSA intake. The counselor develops an individual treatment plan which generally includes individual and family counseling, and information and referral to such community services as job counseling or remedial educational services.

Because of budgetary limitations in the past, JSA has limited the purchase of nonresidential services to youths who remain within their homes, but using an LEAA nonresidential care supplement grant, JSA has also purchased supportive services for youth placed in foster care and shelter care in Prince George's County and Baltimore City. JSA would like to develop similar programs in other areas of the state. LEAA funds would be used to develop these programs. An alternative school and counseling program serving 30 youths a year has been established in Washington County for children with academic and behavioral problems. Alternative schools also exist in Baltimore and Allegheny Counties.

The type of purchase-of-care supportive services bought from the private sector typically include tutoring, family counseling, psychotherapy, education for drug abusers, or other services which can be provided to a child in his own home rather than removing him to a community residential placement.

The remaining type of nonresidential community-based services are provided by 17 local community agencies, the Youth Service Bureaus. The initial funding for these youth development and delinquency prevention programs came from LEAA. Three fourths of the operating costs are now provided by JSA and the remainder by local communities. The types of services and activities available to delinquents, CINS, and other youths include counseling, crisis intervention, information and referral, tutoring, recreation activities, job placement assistance, and drug education. JSA plans to develop seven more bureaus by 1979 and an additional twenty by 1983, contingent upon the State Legislature appropriating funds for their development.

V. Gaps in Service Delivery

From our review of state planning documents and field research, three major problem areas stand out in the existing service network for CINS: the first involves issues of interagency coordination, especially as it affects CINS with particularly difficult behavioral problems, the second area is the universally agreed upon lack of sufficient community-based mental health services; and the third area involves a number of policy and definitional problems surrounding the use of community-based facilities.

A. Interagency Coordination

Representatives from all state agencies interviewed complained of the courts committing to their custody children who they feel should receive social services from another agency. The type of child described by each agency was similar: he comes from a deprived background, terribly behind in school, perhaps functionally illiterate, is emotionally disturbed, and socially disruptive. JSA, DSS, the schools, and the Mental Retardation Administration all state that they are not the appropriate agency to help such a child. The JSA state Executive Plan states, for example:

Current experience indicates that Juvenile Services is getting more disturbed youth referred for community-based placement than in the past. Because these youngsters are aggressive and assaultive, cannot function in a public school setting, and run away, they are more difficult to maintain in the community and require treatment services beyond the scope of many of the facilities within the State of Maryland. These youngsters could more appropriately be labeled as children in need of assistance (CINA), but because of the scarcity of resources and their technical involvement with delinquent type behavior, they are being adjudicated to be CINS or delinquent. The problem is that there is no single agency that is capable of providing the service that this group of youngsters need

Because resources are not available within the state, these youngsters are placed in facilities outside Maryland. The monitoring of these facilities is extremely difficult simply because of their location.*

In an average month, the number of Maryland children in out-of-state facilities is close to one thousand, most of them placed by the Department of Education, while JSA and SSA account for about 300

*JSA State Executive Plan, FY 1979-1983, p.22

placements. The annual cost of this purchase of special education services in residential settings for physically and emotionally handicapped children exceeds \$3 million a year.*

The Maryland Commission on Juvenile Justice and JSA have both recommended that the relevant departments work together to devise a plan for providing the needed services in Maryland. The State also has created a task force to consider the impact on the Department of Education of its educating all children, including the handicapped and socially maladjusted.

It is possible that coordination problems among agencies are most serious in Baltimore City, the only major urban area in the State. Our interviews in Kent and Montgomery Counties reveal a high level of interagency cooperation and coordination despite the diversity and complexity of the service network for juveniles. Where strong personal relationships do not exist among personnel from various agencies, it may be easier to place a child in an out-of-state institution rather than assign responsibility for carrying out a treatment plan.

Those interviewed suggested a number of mechanisms for improving coordination, ranging from creation of a family court, or removal of JSA from the Department of Health and Mental Hygiene, giving it responsibility for all juvenile services, to producing clear definitions of responsibility and jurisdiction for each agency in the service system.

Whatever course the State follows to promote interagency coordination, the juveniles most likely to be affected are disruptive and maladjusted CINS and CINA who are so often institutionalized out of state.

B. Mental Health Services for Adolescents

Closely connected to the problem of difficult children with so many needs that no one agency wants him, is the problem of lack of mental health services for adolescents. Although Juvenile Services Administration has developed community-based screening, diagnostic, and short-term treatment programs in most areas of the state, those interviewed during field research perceived an acute shortage of mental health services, several commenting that their ability to diagnose and prepare good treatment plans had outstripped their ability to see the plan carried out. In addition, more community-based diagnostic services would probably be necessary in order to end CINS evaluations at the Maryland Children's Center.

*Maryland Commission on Juvenile Justice: 1977 Final Report. p. 45

C. Gaps in Community-Based Services

Nearly all those interviewed in Maryland suggested that the State needs more community-based facilities for juvenile offenders, but they did not necessarily agree about what services were needed. There are a number of problems and unresolved issues which affect the development of community-based services for CINS.

1. Non-Secure Emergency Placements

As the JSA figures for CINS committed or detained in secure facilities show, a small number of CINS are still being placed in short-term detention in State juvenile institutions and jails, and also held in a secure facility for diagnostic procedures. A few juvenile judges and masters feel that some form of secure institutional placements is essential for a small number of CINS who are self-destructive, or who will simply run away if placed in group homes and foster care until a court hearing. Several regretted the loss of Victor Cullen School and its successful education program, since it is difficult to keep disruptive children in Maryland public schools. At the very least, some judges and masters would like to have available a secure facility where CINS could "cool off" from an explosive family situation. JSA staff also feel frustrated by lack of facilities which force a difficult CINS to hold still until he calms down, but they were more likely to think in terms of community structured shelter care, a staff-intensive home for 10 to 14 children with 24-hour supervision for CINS in order to end detentions in detention centers, and jails. At present, the service alternatives to detention are limited to relatively unsupervised community placements.

Despite the need for more structured shelter care to supplement the one facility available in Montgomery County, State planners have also found that "there is also a problem of substantial overuse or inappropriate use of some existing facilities " for detention. They estimate that only 10% of all juveniles referred to court need to be detained while waiting for a community placement or for the protection of the community.* In FY 1976, 14% of CINS referred to Court were detained in some form of secure facility, 490 in jails or state institutions, and 400 evaluated in the Maryland Children's Center.

*Maryland Comprehensive State Plan for Law Enforcement and Criminal Justice, 1976, p.813.

State planners attribute these inappropriate detentions to insufficient JSA intake staff who are unable to provide 24 hour intake coverage in person. The Governor's Commission has funded fully 24-hour intake coverage programs in two counties, and will extend the programs if successful.

2. Group Homes and Foster Care

(a) The State Plan identifies four counties and Baltimore City as areas needing more group homes. Lack of facilities in these localities are a result of financial problems and neighborhood fear of group homes and consequent restrictive zoning. Some group homes have not been administered in a cost-effective manner or developed sufficient funding support so that in some "costs approach or exceed the cost of institutional care in Maryland."*

(b) Even in those areas where there are sufficient foster care and group home slots, JSA has been concerned about the ability of foster home parents to provide supervision to particularly difficult CINS. Although the Governor's Commission has funded training programs for people providing foster and shelter care, the training sessions have been poorly attended. Additional development in this area would be very useful for two purposes: foster care provides one of the least restrictive and family-oriented types of placement, and is also a good deal less expensive than group home care.

(c) A study of a sample of Maryland group homes by the Survey and Planning Center of the National Council on Crime and Delinquency in 1974 identified considerable differences in policies and practices. Across the State, the variations in length of stay, cost and range of treatment programs, and available funding sources were substantial. Admitting policies have also varied by jurisdiction; in some localities, group homes have been under-utilized, and in others, group homes have been used almost exclusively for status offenders which runs counter to the State policy of using group home placements as an alternative to institutionalization of delinquents, CINS, and CINA.

*Maryland Comprehensive State Plan for Law Enforcement and Criminal Justice, 1976, p. 821.

(d) Planners have also identified a need to develop centralized recordkeeping, monitoring, evaluation and program review of group homes in order to assess whether the homes provide services well integrated with the State's needs and are sufficiently accountable to JSA.

3. Day Treatment Programs

Day treatment service programs are even less expensive than community residential placements in group homes or foster care, and allow a youth to remain with his family, but access to day treatment services, outpatient services, and family counseling appears to be limited in Maryland. However, there was some impatience expressed with talk of "treatments" and "counseling" for juveniles, suggesting the alternative schools, vocational education, and help finding jobs would be much more valuable services for CINS. At present, the largest existing program of this type at the Youth Service Center in Baltimore is available only to delinquents. The Governor's Commission has funded vocational programs for CINS in Baltimore County and Baltimore City.

State Planning documents provide the least detailed information on day treatment services, so that it is difficult to pinpoint exactly what services are available to CINS, their geographical distribution, and the number of CINS utilizing these services.

VI. Cost and Funding Implications

Maryland began to deinstitutionalize status offenders six months before its law became effective on January 1, 1974, and sharply reduced the number of CINS in state correctional facilities over a two year period. By FY 1975 the state had decreased the number of CINS detained by 80%* and the number committed for treatment by 97%.

In order to examine the costs of this process and the change in demand for services, we have used FY 1973 as a base year, assuming that the number of CINS placed that year approximate the number who would have been institutionalized in subsequent years without a legal change, and further, that the number of CINS affected are the difference between the FY 1975 and FY 1973 detentions and commitments.

For fiscal years 1974-1975, the cost impacts have been described as specifically as possible in the absence of detailed information about the number of CINS actually placed in community programs, and the costs of services during those years. For FY 1976, the cost impact of completing the process has been calculated.

A. Comparison of the Cost of Secure and Non-Secure Detention

Using the current costs of institutional detention and alternative community placements to calculate cost impacts shows a considerable cost difference. The comparison is as follows:

COST COMPARISON OF INSTITUTIONAL DETENTION AND SHELTER CARE, FY 1977

<u>Placement</u>	<u>Capacity</u>	<u>Per Diem Cost/Youth</u>	<u>Annual Cost/Youth</u>
Training Schools & Detention Centers	792	\$33 - \$38	\$12,000 - \$14,000
Emergency Shelter Care	N.A.	\$10	\$3,650**

*The reduction in detentions would probably be even greater if the number of status offenders in jail in FY 73 were known and included in the calculation.

**The \$3,650 annual cost per youth for shelter care is the maximum paid by JSA for shelter. This figure may be misleading, however, because some local governments contribute to the operating costs of community-based facilities. Montgomery County pays a substantial portion of the operating costs of its community-based facilities; Anne Arundel provides approximately \$25,000 - \$30,000 towards the operating costs of three group homes and one shelter; Prince George's County also contributes to operating costs. A few counties provide very small amounts, but Baltimore City does not contribute any funds to community-based facilities.

We have estimated the number of days of shelter care needed during FY 1974 and 1975 by subtracting the number of detentions in FY 1975 from the base level year, FY 1973. Detentions during these years were:

CINS DETAINED IN TRAINING SCHOOLS AND DETENTION CENTERS

FY 1973	1868
FY 1974	829
FY 1975	369
FY 1976	320

Therefore the number of CINS not placed in detention during FY 1974 and 1975 was about 1499 youths. Reducing this figure by the same amount as the reduction in CINS referrals to court leaves 1379 CINS who were not placed in detention during FY 1974 and 1975. It is possible that these youths were placed in emergency shelter care for a period of up to 30 days since the total number of placements for those two fiscal years was 4,781. Had all 1379 CINS been placed in shelter care in lieu of secure detention, they would have represented only 28% of all such placements. If shelter care was purchased for 30 days for the estimated 1379 CINS, 41,370 days of care would have been required, at a cost of \$10 per day. The total cost of \$413,370 for shelter care compares to a cost of \$1,477,950 (41,370 x \$35) for the same number of days in detention in a state correctional institution.

JSA realized a cost savings from closing down the Victor Cullen School which was used for detention and commitments of both CINS and delinquents. The cost savings from closing Victor Cullen is reflected in the decrease in the JSA budget for state correctional facilities from \$11,330,290 in 1973 to \$10,512,767 in 1975 even though the absolute number of commitments and detentions of all juveniles rose during those fiscal years. None of the other facilities where CINS were detained closed down units or closed completely.

The impact of ending all detentions in FY 1976 would have been an additional cost burden to JSA without any savings. State juvenile institutions currently holding CINS are overcrowded and unlikely to close any of their units. If 30 days of shelter care had been purchased for each of the 320 CINS detained in state correctional facilities in FY 1976, a total of 9,600 days of shelter care would have been needed for a total added cost of \$96,000. The current cost of holding 320 CINS in secure detention for 30 days is \$35 x 9600 or \$336,000.

The costs of ending the detention of CINS in jails has not been calculated for the period of fiscal year 1974 for which no figures are available. We have estimated that the cost of ending the remaining jail detentions on the Eastern Shore would be negligible by assuming that many of these detentions are inappropriate and other services are not required and that in those cases requiring purchase of shelter care, an overnight stay would be sufficient because the reported length of stay of youths in jails is about 16 hours.

B. The Cost Impact of Ending Secure Commitments

The cost of alternative residential community placements varies considerably depending on the degree of specialized care provided:

COMPARISON OF THE COST OF SECURE AND COMMUNITY BASED RESIDENTIAL PLACEMENTS

<u>Placement</u>	<u>Per Diem Cost/Youth</u>	<u>Annual Cost/Youth</u>
State Correctional Institutions	\$33-\$38	\$12,000 - \$14,000
The Good Shepherd Center	\$40	\$14,400
Purchase of Residential Care*		
a) "Super" Specialized Treatment	\$40	\$14,400
b) Full Rate Centers	\$27	\$ 9,950
c) Group Homes	\$23	\$ 8,280
d) Foster Care	\$ 7	\$ 2,400

The cost of highly specialized centers exceeds the cost of institutional placements but the number of youths actually placed in specialized care is very limited. In April of 1977, for example, only 17 out of 739 purchase of care placements were in the "super" category. The most frequently used placement was in group homes and the second most common was foster care.

The cost savings to JSA of decreasing the commitment of CINS by 97% between 1973 and 1975 came from closing the Victor Cullen School. The School accounted for 325 of the CINS in institutional commitments during FY 1973 and 28 in FY 1974. The total number of CINS in commitments in recent years were:

CINS COMMITTED IN SECURE INSTITUTIONS, FY 1973-FY 1976

FY 1973	690
FY 1974	171
FY 1975	24
FY 1976	15

By subtracting the number of commitments in 1975 from the number for 1973, (690) and reducing the figure by the same amount as the decline

*Again the annual costs per youth for purchase of residential care do not take account of local government contributions.

in CINS referred to intake, we are left with an estimate of 613 CINS who were not institutionalized in FYs 1974 and 1975. It is possible that many of these youths were placed in group homes and foster care since that number would represent only 27% of the 2251 purchase of care residential placements during those fiscal years. The average length of stay for those placed in community residential placements may have been slightly longer than the stay for those committed to correctional institutions: in FY 1974 the average length of commitments for all youths in institutions varied from 6 to 7½ months; a 1974 study of a sample of Maryland group homes prepared by the National Council on Crime and Delinquency reported an average length of stay of 5.7 months, but average stays in foster care reported to be much longer. Interviewees also believed that average length of stay in group homes was longer than the figures reported for 1974. Given the lower costs of maintaining status offenders in group homes and foster care, even for somewhat longer average stays, JSA probably realized indirect savings by drastically reducing the number of CINS in institutional commitments. The only direct savings involved followed from closing Victor Cullen School.

The cost of ending all institutional commitments of CINS at present would impose an added cost on JSA without any further cost savings. For the 15 CINS in institutions in FY 1976, whose average length of stay was 6 months*, the cost of placing them in group homes for the same period would be approximately \$75,000. Because all 15 CINS committed to state institutions in 1976 were runaways, it may be that the community based alternative is structured shelter care and not group homes, a placement which would lower the cost estimate to \$27,000.

C. The Cost Impact of Deinstitutionalization

The net cost of deinstitutionalization in Maryland has probably been minimal. If increased costs have been incurred, the overall increase has probably not been great. This statement does not reflect the change in distribution of costs resulting from the development of community-based alternatives; some local governments have chosen to increase their costs for juvenile services by making substantial contributions to the operating costs of community-based facilities.

Although the Juvenile Services Administration realized a direct cost savings by closing the Victor Cullen School, it did not close other institutions where CINS were formerly confined. The spaces no longer used by CINS are now utilized by juvenile delinquents. It is possible to argue that JSA has reduced the rate of the incremental cost increases associated with the institutional placements of delinquents by making spaces available without building new institutions.

*Six months was the average length of stay for all juveniles in state correctional institutions in FY 1976 and may not be accurate for the small number of committed CINS.

VII. Obstacles and Issues

A. Data Collection and Monitoring Problems

Inaccuracies in information collected about troubled youths and lack of knowledge about youth service programs exists on two levels. Although JSA already has an impressive data base, it lacks important information about some of its clients and also needs to increase its capability for monitoring the large number of privately run community-based programs throughout the state. At the local level, there are gaps in knowledge about what programs are actually available to youthful offenders.

1. JSA Information and Monitoring Systems

JSA staff believe that some of the material displayed in their annual reports does not accurately reflect the placements in state juvenile institutions. The present system of data collection uses "cases" rather than individuals as the basis of its counting system, making it possible for individuals to be double counted if they are handled by court intake workers more than once during a year. The administration is in the process of preparing a new data collection system to improve its planning and evaluation capabilities.

The need for an improved system of information collection has stemmed not only from lack of adequate information about juveniles in JSA owned and operated facilities, but also a lack of information about and ability to coordinate programs operated by the private sector. The rapid growth in programs that provide services to troubled youth in Maryland has not been accompanied by development of comprehensive or coordinated system of service delivery and review. The fragmentation of responsibility for troubled youth among so many state, local and private agencies has made it difficult for JSA to keep track of what is happening to youths who come into contact with the Juvenile Justice system, particularly in cases when a child does not fall neatly into the categories created by law.

2. Lack of Program Information at the Local Level

Inadequate information about existing service programs for youth have also caused problems at the local level. Privately run programs for youth have been developed in ignorance of already existing services, or without any effort to integrate new services with existing ones. These problems are most serious in Baltimore City where juvenile problems are also the most serious. Ignorance of existing services has led to inappropriate placement decisions on the part of law enforcement officials or others responsible for referrals. In response to this problem, the Comprehensive State Plan suggests that JSA prepare a comprehensive resource manual to disseminate program information.

B. The Cost and Service Impacts of Compliance with LEAA Definitions.

The Maryland Children's Center, state-owned group homes, and many JSA licensed purchase-of-care special treatment centers, group homes, and a few foster homes would be labeled detention or correctional facilities under the May 20, 1977 definition of Special Requirements for Participation in Funding under the JJDP Act of 1974. Restructuring state institutional and purchase-of-care services would probably impose heavy costs on the Juvenile Services Administration.

Aside from the costs involved, some youth service workers would also be opposed to increasing the number of CINS in group homes to fifty percent or more. Prior to the 1977 LEAA definitions of juvenile detention and correctional facilities, State planners had decided to develop specific intake criteria for group homes to avoid under-use or exclusive placements of CINS in group homes. Group home parents interviewed in one locality were dismayed by the prospect of ending commingling of delinquents and CINS in their group home because their experience has been that their treatment programs have been more successful when delinquents are in the majority, largely because they are less likely to act out and be uncooperative than CINS, consequently offering a better model of behavior than CINS are able to provide for each other. It is not clear what group home intake policies will be developed in the wake of recently circulated LEAA definitions, since Maryland has not had sufficient time to respond.

C. Interagency Coordination

State juvenile services planning documents take note of the lack of overall planning and coordination among the large number of public and private providers of services to youth.

Although coordinating mechanisms exist, they have not prevented serious difficulties in providing services to status offenders who are particularly disruptive and troublesome. The courts have committed to JSA a number of CINS and other youth who need special remedial education and mental health services which are not available in the community.

In addition, state planning documents do not indicate how planning for public and private facilities development is related to a policy for least restrictive placements for CINS. If the monthly figures for the proportion of CINS in residential purchase-of-care are representative, about 8% of CINS referred to court intake are being placed in longer-term residential community placements. It is not clear whether this level of placements outside the family is necessary, or whether these placements reflect the difficulty of providing day treatment and supervision services to a child remaining with his family, difficulties that are partly a consequence of the fragmented responsibility for troubled youth in Maryland. The 1977 Maryland Commission on Juvenile Justice proposed legislation which addressed this problem by specifying

a list of placement alternatives for the court to consider beginning with the least restrictive alternative of returning a youth to the custody of his parents. If these provisions became law, they would replace the vague direction to the court in existing legislation to dispose a case in the "best interest of the child." Under the proposed law, it is possible that Juvenile Services would decide to develop more non-residential day treatment services and place less emphasis on group home and foster home placements for CINS.