MERRIMAC CENTER

Middle Peninsula Juvenile Detention Commission

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FY 2022 ANNUAL REPORT



THE MIDDLE PENINSULA JUVENILE DETENTION COMMISSION ANNUAL REPORT TO THE COMMISSION Fiscal Year 2022

Mission Statement

Juvenile Detention is the temporary and safe custody of juveniles who are accused of conduct subject to the jurisdiction of the court who require a restricted environment for their own or the community's protection while pending legal action or serving a sentence.

Further, juvenile detention provides a wide range of helpful services that support the juvenile's physical, emotional, and social development.

Helpful services minimally include education, recreation, counseling, nutrition, medical and health care services, visitation, communication, and continuous supervision. Juvenile detention includes a system of observation that complements the helpful services and reports findings.

The Middle Peninsula Juvenile Detention Commission was authorized by the General Assembly and formed in 1994. Seventeen counties and two cities joined the goal of building and operating a secure juvenile detention facility. (King George County withdrew from the Commission in December 2000 leaving our current membership at 18). At that time, these localities had no guaranteed access to secure juvenile detention beds. Local law enforcement officials were transporting juveniles to detention facilities and jails throughout the Commonwealth, some as far away as Bristol on the Tennessee border. This created substantial overtime costs and removed scarce law enforcement resources from the local communities. The courts were restricted in the dispensation of their responsibilities when they had no place to hold juveniles in need of confinement, either for public safety or for sanctions. Court staff spent untold hours looking for bed space. Family contact with detained juveniles was limited due to the distance of placements. Construction of a secure juvenile detention facility, the Merrimac Center, began in the summer of 1996. On December 23, 1997, the Merrimac Center admitted its first juvenile offender.

The Center is located on Route 143, five miles south of Williamsburg. The facility is licensed to house forty-eight youth, male and female, ages seven up to 21, who are under detention orders from a court of competent jurisdiction. The Center holds youth who are awaiting hearings in the courts as well as those who have been sentenced to detention as a sanction or for community-based treatment.

There are four housing units in the Center. One unit houses Community Placement Program (CPP) male residents and juveniles sentenced to detention for treatment (Post-dispositional/ "Post-D"), another is for older boys 16 and up, another is for boys 15 and younger, and the fourth unit houses CPP females. Both CPP units have dedicated staff. Pre-dispositional female program in a classroom and sleep on the female CPP unit. Unfortunately, since the global pandemic began

in early 2020, the younger and older boys have had to be combined on a unit in order to maintain a quarantine unit for residents who have arrived within the previous five days.

Licensure:

The Virginia Department of Juvenile Justice (DJJ) licenses the Center. Licensure is based on standards promulgated by the Department and the Standards for Interagency Regulation of Children's Residential Facilities. These standards address areas of programming, treatment, medical care, education, recreation, security, safety, food service, staffing, and the physical plant.

The Center is fully licensed through February 2023 with our next three-year audit being in September 2022.

A Day in Detention: January 15, 2022

On January 15, 2022, there were 26 juveniles in residence at the Merrimac Center; 16 were boys and six were girls. Five of the 18 participating localities had youth placed in the Center. There were four female and eight male DJJ CPP participants. Of the 22 youth in residence, 40% were being held pending action by the court. The other 60% had been adjudicated, were awaiting final disposition, awaiting placement, or serving their commitment status.

During the course of the day, there were no transports. There were no admissions or releases.

After a full day of activities, including inside recreation, community meetings, and therapeutic groups on restorative justice, all units participated in POD party for reaching their goals for the week and Super Saturday Clean up.

Statistics

Significantly down from last year, the Center admitted 197 juveniles and provided 9,761 childcare days in FY22. The average daily population was 27, as compared to 31 last year, including youth in state programs. The average daily population for the localities was down to 14 from 17 last year and the state juvenile average daily population was also 13, indicating that we are serving an equal amount of state-placed and local youth, making our state programs a very important financial resource for the Center. The average length of stay was 49 days. There were 143 males and 54 females admitted. The population ratio was 73% boys and 27% girls. Forty-seven juveniles were sentenced to detention with sentences ranging from one to 30 days. The contracted DJJ programs served 17 CPP males and 10 CPP females. CAP assessments were completed on 5 males and 7 females. There was 1 female resident served in the Re-Entry Program.

We have received numerous DJJ program youth sentenced as "serious offenders" for up to three years or until the age of 21. This population has changed the dynamics of the direct care of the youth including increasing medical/dental needs, the level of ongoing treatment, staff interventions, and the overall length of stay for the Center. As an ever-changing and maturing population, new challenges and rewards are created.

Charges ranged from murder, rape, arson, assault, robbery, possession of illegal substances, technical probation violations, and other miscellaneous juvenile offenses. The largest general categories of offenses were: 46 for contempt of court (23%), 40 for assault (20%), and 28 for burglary/larceny (14%).

Daily Activities:

The juveniles' time in detention should be as productive as possible. Since going to a combination of Cognitive Behavioral Training (CBT) and behavior modification in 2007, we have successfully incorporated this treatment modality while maintaining safety and security. Cognitive Behavior Theory has long been used in residential treatment programs. Evidenced-based research continues to show it to be effective in changing the thinking and behavior of at-risk youth in detention programs. This is a very structured program employing three groups per day plus weekly goals for targeted problematic behaviors. This is a positive approach to teaching new skills and behaviors as opposed to a punitive approach.

Group topics include moral decision-making, girls' growth, anger management, rational behavior training, goal setting, life skills training, restorative justice, risk management, and social skills training. Staff and youth utilize curriculum-based manuals for the majority of groups. The CPP programs also receive Aggression Replacement Training (ART), an evidence-based program, and Girl's Circle, a gender-responsive program. A licensed therapist with LaunchPad Counseling, an agency in Richmond, provided virtual substance abuse, family, and other targeted individual therapies for our CPP males. The CPP females receive therapeutic services, including substance abuse group and trauma-informed individual counseling through our in-house CPP Case Manager/Therapist.

The Center does not have television. A Netflix account is maintained where staff and residents may select educational and appropriately rated movies for weekend viewing. For special national events, which are positive cultural experiences, exceptions are sometimes made to allow residents to view these as they occur. They additionally view news sources for current event topics once a week.

The Center works with other agencies, volunteers, and community-based groups to supplement services. Previously, Good News Jail and Prison Ministries, a certified therapy dog program, a therapeutic drumming leader, William & Mary Mentors, Royal Rangers, and other individual volunteers provided a variety of character and skill-building opportunities for the youth. However, since March of 2020 all outside visitors were discontinued due the COVID-19 outbreak closing the Center to volunteers. However, we are fortunate to have a staff member able to lead our therapeutic drumming program without the help of a volunteer. Merrimac's drumming program not only allows for residents to learn about the African culture and how to play djembe drums, but also serves as an artistic outlet and promotes unity amongst the residents.

As in previous years, local churches continued to provide support throughout the year by providing holiday gifts, games, crafts and needed program supplies. Additionally, this year, Liberty Live Church continued to offer support to the residents and staff amid the COVID

Pandemic. Liberty Live Church members look forward to providing in-person services focused on youth when volunteers are permitted in the future.

We have been fortunate to have so many dedicated volunteers in the past; we are eager to invite them safely back into the Center when we can ensure their, our staffs', and our residents' health is protected.

Prior to March 2020, visitation for the residents was in-person for three hours per week. However, since the pandemic, face-to-face visitation, like volunteers, has been discontinued. The parents and guardians provide email addresses, so the residents are able to have virtual visitation. They are also allowed extra phone calls to family members to account for less face-toface time. We are currently making plans on welcoming families and volunteers back to the building and having family engagement events in the upcoming fiscal year.

Mental Health Services:

At the point of admission, each juvenile is administered the Massachusetts Youth Screening Instrument-2 (MAYSI-2), a self-report mental health screening instrument. The MAYSI-2 measures six scales. A "caution" means the resident needs services but is not in a critical state. A "warning" means that services are needed immediately. Many juveniles score a "caution" or "warning" on multiple scales. (The table below represents the percentage of 180 youth that scored within the "caution" or "warning" range for the particular scale upon their admission). Seventy-eight percent of residents were considered a "critical case." Seventy-four percent of youth reported that they are victims or witnesses of traumatic events: domestic violence, murder, physical or sexual abuse, etc.

			Traumatic	
	Caution	Warning	Experiences	
Scale	%	%	No %	Yes %
Alcohol/Drug Use	12%	11%		
Angry-Irritable	30%	15%		
Depressed-Anxious	30%	9%		
Somatic Complaints	39%	12%		
Suicide Ideation	6%	14%		
Thought				
Disturbance	24%	17%		
Traumatic				
Experiences			26%	74%

A significant portion of the resident population experience psychiatric problems. These cases require continuous assessment and monitoring. As of June 30, 2019, the previously funded case

management position employed by Colonial Behavioral Health (CBH) was eliminated by CBH therefore, our assigned CBH mental health therapist provides all of the assessments, crisis counseling, individual, group and family counseling, and case management services to the residents. A board-certified child psychiatrist, also employed by CBH, assesses youth for psychiatric needs and provides medication management weekly through tele-psychiatry.

The mental health clinician assesses residents who have scores on their admission mental health screenings indicating a potential mental health or substance abuse problem, who have been identified in the community as needing mental health services, and those referred by staff who have observed troublesome behavior. The clinician refers residents and families for services in the community, informs the Court of juvenile mental health needs, and works with the family and mental health system to obtain emergency hospitalization if needed. In FY22, only one call was made to emergency services and no residents were placed on a temporary detention order (TDO). All incidents related to suicidal threats, gestures, and ideations were handled by our mental health clinician through issuance of appropriate safety protocols. While we were able to address the immediate needs of these residents, detention homes are not the appropriate place to treat these youth. Having mental health counselors on site for the past fifteen years has contributed to improved management of mental health issues among the youth; however, the loss of the case management position has posed workload challenges.

Medical Services:

A full-time registered nurse provides daily medical services. Many direct care staff are certified as medication agents enabling them to administer medications and first aid when the nurse is off duty. We also employ an on-call registered nurse to provide services and assistance as needed. A contracted physician provides on-site medical services at least twice monthly, or as needed, and provides medical oversight. Local vendors provide emergency medical, dental care, and specialty consultation.

Each juvenile receives a physical screening at the time of admission and a more thorough assessment by the nurse within 72 hours of placement. Sick calls are taken twice a day to address resident medical needs. The most prevalent treatments are for headaches, colds, upper respiratory infections, sexually transmitted diseases, menstrual cramps, and evaluation and monitoring of psychotropic medications.

Additionally, we continued to consult with the Peninsula Health Department to obtain specific direction related to COVID-related concerns. We were also able to obtain rapid COVID test kits for our staff and residents and a Federal Emergency Management Agency (FEMA) grant of approximately \$10,000 to offset the high costs of personal protective equipment, disinfecting supplies, and the rapid testing equipment.

Education Program:

This year, school services continued to be virtual with the residents using Grad-Point on laptops with some teacher guidance. The Center's direct care staff partially filled the role of assisting the

residents with the schoolwork that was provided. Prior to the pandemic, the daily schedule for the juveniles included five and three-quarters hours of school per day.

The Williamsburg James City County School System employs the educational staff. Eight full-time teachers and an Art Therapist are assigned to the Center. These eight teachers, art therapist, an administrative assistant, and a principal delivered the educational program for the Center. This comprehensive, accredited educational program includes teaching all subjects and sending reports to the juvenile's home school. A computer cart and touch boards in each classroom support the program.

Juveniles receive credit for their attendance and for the work completed while in the detention center school. Standards of Learning (SOLs) are typically administered at the Center. Preparation and testing for the General Equivalence Diploma (GED) is also a part of the educational program. Merrimac has been approved as a GED testing site, so residents do not need to go into the community for this service, and the test can be given at any time. Over the past year, five students have received their GED and one received their high school diploma. The education program emphasizes reading skills and provides an extensive reading library. The York County and Williamsburg Regional Libraries, community groups, and citizens contribute books and magazine subscriptions for use by our residents. Education also continues to use WittFitt Stability Balls for one classroom to assist ADHD students with their focus and concentration.

The teachers are normally eleven-month employees, having the month of July off as their summer break. During June and August when regular public school is not in session, they provide an enrichment program to incorporate fun learning experiences into the educational experience.

The addition of the CPP programs at Merrimac has changed the landscape of our educational needs and offerings. The residents that are being detained locally to serve their commitment status for longer periods of time are typically older, not permitted by the court to leave the premises (as serious offenders), and many have completed their high school education/GED requirements. Our career-readiness specialist has been providing educational and vocational training opportunities to our post-secondary students. They are offered personalized educational resources and can pursue certifications, college degrees, and life skills training through online programs offered through Old Dominion University, Virginia Peninsula Community College, Tidewater Community College, the National Association of Sport Medicine, Penn Foster, Allison, and ToolingU. Post-Secondary students also work on career assessments, soft skills training, interview skills, and resume writing. College courses completed include Introduction to Business, Business Management, Law Enforcement, Biology, Human Services, Economics, and English Composition, to name a few. Post-secondary students have earned certifications in manufacturing, small engine repair, CPR, A+ Certification, and Pharmacy Tech. The CPP residents that have not yet completed their high school requirements participate in classes with their peers under the tutelage of Merrimac Education staff. All CPP residents are encouraged to search for jobs prior to release, in order to facilitate securing employment after

leaving the facility. Furthermore, the career readiness specialist assists post-secondary students with completing Casey Lifeskills assessments, college applications, and financial aid applications.

Treatment Programs:

Merrimac Center Programs have accounted for close to 50% of the facility population over the course of the year. We continue to offer several programs to include: CPP males, CPP females, DJJ (CAP) Intakes, and the Re-Entry Program; due to covid protocols, program design, and staffing issues the Post-D Program was placed on hiatus. Merrimac's CPP female program is the only CPP program for females in the Commonwealth.

Regarding our post-dispositional (post-d) program, because residents often participate in community activities and home-based services while in the program, it was put on hiatus to prevent health risks to residents and staff through the introduction of COVID-19 into the building. The Center plans to resume a Post-D Program for juveniles sentenced to 180 days when staffing permits. The program is co-ed and has a licensed capacity for fifteen placements. The treatment program manager works closely with court staff, residents, and their families, to identify needs and appropriate services to develop and implement individualized treatment plans. Designated program staff provide programming to address areas identified in treatment plans. Resident progress towards treatment goals is reviewed by the treatment team and the court every 30 days. A mental health clinician provides individual and group counseling, in conjunction with the treatment program manager who provides program participants with case management. The program includes opportunities for family engagement and coordinates transition services to help the residents and the families succeed after release.

Merrimac female CPP continues to raise our two baby Nigerian Dwarf Goats, Hersey and Oreo since August of 2019, and the male CPP has adopted a Veiled Chameleon, Pascal, and a Leopard Gecko, Quinn. The animal care programs have been very successful in teaching the CPP residents responsibility, empathy, cooperation, discipline, and problem-solving skills. Recognizing the value of animals and their therapeutic qualities, we want to continue to offer a unique care component to our programs.

Both the male and female CPP programs have operated at capacity or above throughout the year. The case manager for the male CPP program has continued to coordinate services (including individual and group substance abuse treatment and therapy offered by our contracted therapist from LaunchPad Counseling), provide Aggression Replacement Training (ART), host a drum circle twice monthly, and offer support and guidance for residents as they prepare to transition back into the community. Likewise, the female CPP program therapist/case manager provides ART, Girl's Circle (an evidence-based gender-specific program), individual and group substance abuse treatment, trauma-informed care, and transitional services to our female CPP population. The CPP residents, many from surrounding localities not normally served by our Center, acclimate well to the Merrimac culture of cognitive behavior training to change irrational thoughts and beliefs.

In an effort to provide work experiences for the long-term CPP residents, Merrimac has continued having several voluntary work opportunities available for residents. Applications and interviews are required prior to job placement within the facility. Positions continue to include the canteen manager, librarian, painter, laundry worker (provides laundry services for Community of Faith Missions and Merrimac), and assistant custodian. The Salad Bar Attendant requires ServeSafe certification; unfortunately, this position had to be temporarily discontinued due to COVID-related precautions.

Merrimac volunteered to pilot DJJ's Standardized Program Evaluation Protocol (SPEP). The SPEP is a validated, data-driven rating system for determining how well a program matches what research tells us is effective for that particular type of program in reducing the recidivism of juvenile offenders. SPEP scores are derived from evaluation of service type philosophy, quality of service delivery, amount of service/dosage, and the youth's risk to re-offend. Typically, SPEP will review three to four services but chose to review ten services at Merrimac as the pilot for DJJ/SPEP implementation. Following our full SPEP evaluation and summaries in April of 2022, we have collaborated with the DJJ lead SPEP Specialist to develop a continuous quality improvement (CQI) plan to identify goals and action steps to optimize our service effectiveness and recidivism reduction.

Food Service:

Four full-time staff comprise the food service program. All staff are required to maintain Food Service Manager Certification and/or attend training provided by the U.S. Department of Agriculture (USDA) and the Department of Juvenile Justice. The Department of Juvenile Justice conducts inspections, and the local Health Department, to ensure the menu meets nutritional standards, as well as health and sanitation regulations.

Mandated USDA menu changes required the Center's Kitchen Manager/Senior Cook to seek additional vendor resources and alternative food items. New menus were implemented, and the USDA reporting manual updated. The kitchen staff are required to complete an additional 8 hours of USDA-specific training in a calendar year. This training is being done via webinars to minimize costs. This past year, one cook resigned due to COVID-19-related family matters and her replacement was recruited from the York County school-division

With the Center entering its twenty-fifth year of operation, some of the heavily used kitchen equipment is starting to require repair. Several repairs have been made to the warm box and convection oven. This is an upcoming capital improvement issue.

The Center participates in the Department of Agriculture's School Food Lunch program. Meals must meet standards for nutritional value, fats, and calories. There were 30,660 meals served in FY22. The kitchen also prepares after school snacks, evening snacks, and accommodates special diets for the residents. Refreshments for special occasions and meetings are prepared, as well. Staff are currently afforded one meal per workday and a salad bar at lunch.

Management:

Financially, since the Commission switched to a five-year averaging payment method, income from the localities remains constant although member locality population was down. The revenue from the CPP and CAP programs continue under a renewal of the contract. Due to serving extra CPP and CAP youth, income from these programs was over the contracted amount by \$46,985, \$68,185 less than last fiscal year. At the end of the year, the unrestricted capital fund totaled \$1,254,521, which allowed for a carryover of funds to purchase needed capital assets. Additionally, the cash reserve fund totaled \$730,352. The cash reserve balance is in compliance with the Service Agreement requirement that there be a 60-day operating reserve maintained.

The Leadership Team comprised of the director, the deputy director, the operations/quality assurance manager, training manager, treatment program manager, supervisors, counselor III's, mental health, education, medical, and information technology leaders meet on a quarterly basis. These are productive planning and review sessions to ensure policy/procedure compliance and to better coordinate services while maintaining safety and security. These meetings also allow for open communication and input regarding various Center issues.

<u>Personnel</u>

Recruitment and retention of full-time staff has proven to be even more challenging in FY22. The primary reasons for direct care staff resigning include shift work schedules and, as an entry-level position, the availability of a multitude of other lucrative opportunities in the job market. Also, there was some turnover as a result of the pandemic, particularly related to child-care issues, but most staff have remained diligent in their responsibilities to provide safety, security, and top-notch services to our residents.

Full-time staff turnover rate was 28% in FY22, which is down from 34% in FY21. This is in line with averages currently seen across the state. The lower rate of turnover is due to the multitude of staff vacancies in which we were unable to hire qualified staff. Due to the staffing challenges, Merrimac has struggled to maintain a motivated team due to the need to work long hours and get drafted frequently to work 12-hour shifts. We finished the year with 60 total full time staff, including 28 direct care staff, 14 on-call staff, and 13 direct care staff vacancies eleven new staff were hired in FY22. Although the staff struggled with the challenges, the Commission approved a mid-year bonus to demonstrate their appreciation.

We use a variety of sources to advertise current positions, such as Indeed, Zip Recruiter, local government sites, our website, social media, and signage. We continue to use the 16pf Security Selection Report Tool as a screening instrument designed to assess potential employees' emotional adjustment, integrity/ control, intellectual efficiency, and interpersonal relations. Merrimac also requires a four-hour observation at the facility prior to hire to ensure that the potential staff member is comfortable in this environment.

Additionally, the deputy director resigned to pursue the opportunity of a superintendent position at another detention center. During this timeframe, a direct care supervisor filled in as acting deputy director. Because of the increased needs for training and recruitment, the Commission approved the addition of a training manager position. After several months, the previous deputy director returned to Merrimac, and the training manager position was filled.

Also, in FY 22 a compensation study was conducted to ensure that Merrimac staff salaries were competitive with the market. The finding was that most positions were not, and a large number of staff received an increase. The salary ranges were also reclassified and increased. The Commission also approved a five percent salary increase which the staff received prior to the end of the fiscal year. The Commission recognized the many challenges throughout the year congratulating the staff on a job well done.

In terms of overall staff morale, we have had dedicated employees who have reported to work consistently despite being a high-risk environment for COVID-19 in a congregate care facility. There was a significant uptick in staff and resident COVID positive cases in January as a result of the Omicron variant, but the Merrimac team pressed forward overcoming this challenge. Thankfully, Merrimac has not had to face any serious COVID-related health issues.

Throughout these trying, stressful, and uncertain times, staff fully realize that they are essential personnel and take their duties to protect and care for the youth very seriously. All staff have had to work long hours to cover for shortages and absences related to COVID-19. Staff have all been compliant with the ever-changing pandemic guidelines from the CDC, which the administration has consistently communicated to help ensure that staff feel safe.

Training:

Despite COVID-19, we were able to meet our training requirements for all staff utilizing a combination of smaller in-person staff trainings as well as self-study courses and virtual training sessions. Staff received required annual training for Handle with Care, CPR, First Aid, Medication Administration, Behavior Management, Suicide Intervention, Mandatory Child Abuse and Neglect Reporting, Professional Boundaries, Emergency Response, Fire Safety, and Blood Borne Pathogens. We also certified one additional staff member as a Gang Specialist.

We continue to facilitate two evidence-based programs, Girl's Circle and Aggression Replacement Training (ART), for our CPP residents. Fourteen additional staff were trained in ART. Additionally, two staff were trained as trainers of ART.

Prison Rape Elimination Act Policy:

It is the policy of the Merrimac Center to fully comply with the Prison Rape Elimination Act (PREA) of 2003 and the national standards promulgated by the United States Department of Justice to prevent, detect, and respond to prison rape under PREA, and to provide a safe, humane, and secure environment for all residents free of sexual abuse and sexual harassment.

PREA is a federal law established to support the elimination and prevention of sexual assault and sexual misconduct in correctional systems, including juvenile facilities. PREA addresses both resident-to-resident sexual assault and staff-to-resident sexual assault. Merrimac Center maintains a zero-tolerance policy for resident-on resident sexual assault, staff sexual misconduct and sexual harassment towards residents. Every allegation of sexual assault, misconduct, and harassment is thoroughly investigated, and all reports of sexual assault are referred to the James City County Police Department for criminal investigation.

When a resident first enters our intake area, a comprehensive educational process is started to provide initial and ongoing education explaining their rights to be free from sexual abuse and harassment. An assessment is conducted on all residents at the time of intake to determine their individual risk of victimization or predation using an objective measurement tool based on specific risk factors. The residents view a PREA video weekly to remind them of their right to be free from sexual abuse and harassment. Staff are educated on PREA standards regularly. Our next scheduled three-year audit is July of 2022.

Transportation:

The Commission provides all transportation once the juvenile is admitted to the detention facility. We are the only detention center of 24 facilities statewide to provide all transportation. Staffed by on-call employees, transportation is provided to court hearings, medical and counseling appointments, placement interviews, and to other residential placements. Transports increased this year despite the ongoing pandemic; the transportation staff safely performed over 350 transports with 180 being to court. Completed transports included 58 medical, 26 dental, 86 to resident employment, three to GED testing, and three to the Department of Motor Vehicles; 158 of those were for CPP youth. Over 16,000 miles were covered with an average of 55 miles per transport.

New audio-video surveillance systems were installed in the fleet vans. The new systems allow for better improved audio-video recording capabilities as well as GPS tracking and vehicle movement characteristic monitoring.

Facility Improvements:

The facility staff lounge was renovated to make the space a more staff comfortable area. New paint, flooring system, and creature comforts to include a new refrigerator, Keurig, and coffee bar were added to the space.

Dominion Resources built a substation across Rt 143 from the detention center. The power surges created difficulties for the electronic systems. A building surge protector was installed to prevent damage to sensitive equipment. Power surges have not been significant since the surge protector was installed.

Safety, Security, and Technology:

A COVID-19 response plan was initially developed in March of 2020 and has been revised several times since then to match CDC guidance for correctional facilities. The plans have incorporated

quarantining residents and mandatory mask-wearing for residents and staff. COVID screening of all new intakes, visitors, and staff have been ongoing, as well as temperature checks and, most recently, testing at intake. The residents were not permitted to intermingle for any reason. Intense disinfection of the facility has also continued, including the use of the Clorox 360 cleaning sprayer purchased in 2020.

There were no significant safety and security issues this past year. During the physical restraints of youth, there were a few staff injuries this year. These incidents included back strains, elbow, and knee injuries. Injuries to youth included sprains, minor cuts, and scrapes, generally because of recreational activities.

All incidents involving use of physical force, injury, or unusual circumstances are documented and reviewed by administrative staff. Incidents are reviewed with the staff involved to improve response, prevent future incidents, or to validate proper procedures. Physical restraints typically occur with the same 10% of the residents who have significant mental health issues that have not or cannot be treated by the mental health system due to limited community resources. In the past year, 29 residents were involved in 48 restraints. Thirty-one of the restraints involved CPP residents who are typically detained for longer periods than pre-dispositional youth on multiple and/or very serious charges whereas 17 restraints involved pre-dispositional residents. Eleven of the residents were female.

A surveillance system monitors activity inside and outside the building. Fifty cameras are recording around the clock. Intercom systems throughout the building allow continuous communication. Radios for designated staff are issued. Transportation staff utilizes individual cell phones. Audio/video recording systems are installed in transportation vehicles to protect juveniles and staff. Six additional cameras have been added to the facility, and thirteen older cameras were replaced. An additional POE (power over ethernet) network switch was added to our video surveillance network to support these new and upgraded cameras. Our older NVR (network video recorder) was replaced with a brand new Vicon Valerus system, giving us more reliable video storage for a greater length of time.

Financial Matters:

Local contributions for FY22 were \$1,256,648. Participating localities are billed quarterly. This year the Commission received state reimbursement funds of \$1,277,639 for operations and \$58,108 from the USDA School Food Lunch program. Also, received was \$2,200 from the Department of Juvenile Justice for state wards, \$,1,505,690 for community placement, \$18,800 for re-entry and \$37,275 for DJJ CAP assessments.

Grants:

In coordination with our education program, the Commission participated in the Schools and Libraries Universal Services Fund program. Through this program, we were able to receive a 90% discount on high-speed internet access. We also received an 85% discount on the purchase of a new network switch for the facility.

A Virginia Municipal League Grant was also received to purchase replacement pneumonic door locks for the secure area.

Public Relations:

Tours for the public, professional and civic groups, service agencies, schools, and governmental entities are typically conducted year-round. The York/Poquoson Citizen's Academy and LEAD Greater Williamsburg continue to be involved with visits to the Center; however, were canceled again this year due to COVID-19.

Working relationships with the DJJ, the courts, collateral service agencies, and other juvenile facilities have been positive and productive. Management and staff continued leadership roles in statewide advocacy organizations including the Virginia Juvenile Detention Association (VJDA), the Virginia Juvenile Justice Association (VJJA), and the Virginia Detention Association of Post-Dispositional Programs (VDAPP).

In an effort to display the innovation, progress, and successes of our program, staff, and residents, our Facebook page continues to be in operation. This allows us to share events, stories, and needs with the public.

Merrimac also has a positive working relationship with Virginia Peninsula Regional Jail which provides lawn care for and other resources with the Center.

SUMMARY:

The Center has fulfilled its mission this past year in providing a safe, secure environment for juveniles placed here by the courts. Education requirements and basic needs have been met, despite the pandemic. Intensive, structured, and evidenced-based programming is the strength of the Center, as well as providing opportunities for the juveniles to learn life skills, pro-social behavior, self-discipline, better decision-making, and personal responsibility. Our CBT and trauma-informed components continue to be strengthened, enabling staff to respond appropriately to the most difficult residents. Juveniles have presented a variety of issues including violent and self-destructive behaviors, substance abuse and mental health challenges, medical and dental needs, and special education needs.

Merrimac Center is an integral part of the juvenile justice community and active at the local and state levels. Merrimac continues to be a leader in working to improve mental health and substance abuse services, to improve operating standards, to identify new best-practice treatment programs, and to develop/implement effective staff training.

The Commission members continue to be active throughout the year in their efforts to provide financial support, guidance, and encouragement to improve services to our youth. We look forward to another year of providing quality services and care to our residents and to the communities we serve.