

# NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Jim Pillen, Governor

December 15, 2023

The Honorable Jim Pillen  
Governor of Nebraska  
State Capitol Room 2316  
Lincoln, NE 68509

Mr. Brandon Metzler  
Clerk of the Legislature  
State Capitol Room 2018  
Lincoln, NE 68509

Subject: Annual Physical Review of State Institutions

Dear Governor Pillen and Mr. Metzler:

Attached please find the Department's Annual Physical Review of State Institutions. The institutions listed below have been included in this report:

Behavioral Health: Hospitals or other licensed institutions

- Lincoln Regional Center
- Norfolk Regional Center
- Whitehall Psychiatric Residential Treatment Facility

Developmental Disabilities Institutions

- Beatrice State Developmental Center

Children & Family Services: Youth Rehabilitation and Treatment Centers

- Hastings
- Kearney
- Lincoln

Sincerely,

A handwritten signature in blue ink, appearing to read "Tony Green".

Tony Green, Director, Division of Developmental Disabilities  
Interim Director, Division of Children and Family Services  
Interim Director, Division of Behavioral Health

Attachment

# Department of Health and Human Services

## Annual Physical Review of State Institutions

**December 2023**

# Behavioral Health Institutions

## Lincoln Regional Center (LRC) – Physical Site Review

On October 18, 2023, a physical site review of the Lincoln Regional Center (LRC) was conducted. During the review, LRC personnel indicated that many renovations are planned, have been scheduled, or are already underway throughout the campus, adding that most renovations will only be complete after the end of the reporting period.

Several updates and replacements of fencing and entertainment fixtures to protect the newer televisions were present throughout campus, with staff indicating that others are planned for replacement or update. Some areas contained newer, better-kept furniture, while others were dated or needed replacement. During the visit, only one active remodel was observed: an employee breakroom in Building 3 (Female Unit). LRC reports a total of 318 cameras with 29 of those being either added or replaced within the last year.

Building 3 houses the female population. Only one living unit in this building was reviewed due to a patient's treatment needs causing potential safety concerns. Of the observed areas, it was found that the recreational yard is dated and contains rusted benches. Due to the remodel of the staff break room, furnishings, and equipment were being stored in the female's wellness center, preventing access or use of the room for its intended purpose. There was an "out of order" sign on a handicap-accessible restroom in the front lobby of the building. While the unit had the general presentation of cleanliness, light fixtures and furnishings need replacement. Frosted privacy glass in several areas needs re-application/updating.

Building 5, housing male individuals with pending criminal charges and awaiting competency determinations, contained a more correctional-style function than other buildings. New fencing has been added to the recreational areas to allow for separation and more room for activities. Chipped paint and rust were evident on doors throughout this building. Systemic staffing shortages caused one living unit to be vacant.

Building 9 is the Administration building; upon entering, it was found clean and working well; newer furnishings and fixtures were observed in the main lobby and have been well maintained. Facility personnel indicated that the open staff work area would be remodeled soon.

Building 10 houses medium-custody male individuals and contains a Café type setting on the lower level that is currently inactive and listed as an area for future renovation. The floor of a lower-level door leading to the recreation yard has cracked tiles, and in the yard, the conditions of a basketball hoop and yard furnishings are poor. Personnel advised that there are plans to install smaller linked fencing in the recreation yard. The upper-level living unit had a strong odor, sleeping quarters were in disarray, and presented with slightly poor sanitation. Throughout the building, carpets/flooring are in poor condition, and in various spots, water damage was visible on the ceiling tiles, as well as excessive dirt and rust on ceiling vents.

Building 14 operates as a residential unit. Overall, this unit was cleaner, more spacious, well-furnished, and more comfortable than all other living units on campus. The sleeping quarters are much larger and contain a more home-like atmosphere. The basement had a large recreational area for wellness,

containing more equipment and recreational options than the other units. There was observable wear and tear to some of the weightlifting equipment in the form of rips or tears in the padding that could present bacterial issues. The basement exhibited slightly chipped/cracked flooring and visible rusted pipes from the ceiling.

Overall, the grounds were well-kept and a source of pride for the facility groundskeepers. There is an arboretum that is visually pleasing and therapeutic to the overall atmosphere of the facility. The exterior of the buildings is dated but presented as being in good condition. The tour showed no observable programming, activities, or interaction with patients/residents. Most activities viewed were of youth roaming living units, sleeping in bed, or watching television. The unit activity centers contained minimal resources for engagement outside of television, the occasional billiards table, or a bookshelf. Residents did not interact with the facility staff on the tour or present as engaged or outwardly happy in their settings. A surveillance system is present throughout the facility, with only recorded footage available.

Campus-wide upgrades comprised 12 new AED machines ordered and dispersed, receipt of new vitals machines, digital staff radios, and the installation of new ligature-free grievance boxes across the campus. The following information regarding campus constructional upgrades that have been completed or are planned to be completed in each specific building:

- Building 3:
  - Planned: Replace building furniture 10/31/2023
  - Planned: Remodel of staff break room 11/27/2023
  - Planned: New fencing in yard area, plans to install occupational whirlpool 11/30/2023
  - Completed: Designation of Mother's Room, windows frosted, and furniture ordered
  - Completed: Fire panel upgraded, and ligature free construction project
- Building 5:
  - Planned: New air conditioner units project completed 11/06/2023
  - Planned: Upgrades and new badge readers, ligature free shelving, new living unit furniture ordered for replacement, fire system panel upgraded, and fencing project
  - Completed: Mother's Room frosted windows replaced, staff breakroom remodel and furniture ordered, ligature-free construction project and remodel, upgrades to fencing
- Building 9:
  - Planned: Remodel of open staff work area
- Building 10:
  - Planned: Installation of an occupational whirlpool, remodel of the canteen kitchen, new furniture for Mother's Room ordered, ligature-free tables and chairs ordered, flush mounted/recessed lighting in S/R rooms ordered
  - Completed: Remodel of the seclusion/restraint rooms, fire system panel upgrade, ligature-free construction project and television enclosure added to patient TV room
- Building 14:
  - Planned: Designate space for a Mother's Room and order of new furniture
  - Completed: Fire System Panel upgrade

## LRC DATA/TRENDS

The tables below show inspection data and staffing trends for LRC for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
NE State Fire Marshal Occupancy Permit (Bldg. 5)	11/09/2022	None	Issued
NE State Fire Marshal Occupancy Permit (Bldg. 10)	05/02/2023	None	Issued
DHHS Licensure Unit Survey – Investigation	08/08/2023	Revision needed for policies/documentation to meet the Standards	Corrected/Passed
Centers of Medicare and Medicaid Services CLIA (UA's) Exp 08/31/2024	09/01/2022	None	Certificate of Waiver
Division of Public Health Renewal Card for Substance Abuse Use Treatment Center	Exp 09/30/2024	None	Issued
DHHS Licensure Unit Survey	10/04/2023	None	Passed
DHHS Licensure Unit Survey/Investigation	10/05/2023	None	Passed
3E Electrical Engineering & Equipment Co Inspections (Bldg.3)	12/01/2022 01/21/2023 05/17/2023	None	Passed
3E Electrical Engineering & Equipment Co Inspections (Bldg. 5)	12/01/2022 02/21/2023 05/11/2023	None	Passed
3E Electrical Engineering & Equipment Co Inspections (Bldg. 10)	12/01/2022 02/21/2023 05/12/2023	None	Passed
3E Electrical Engineering & Equipment Co Inspections (Bldg. 11)	02/21/2023 05/09/2023 05/16/2023	None	Passed
3E Electrical Engineering & Equipment Co. Inspections (Bldg.14)	02/21/2023 05/09/2023 02/21/2023	None	Passed
NFPA Fire Alarm & Sprinkler Inspection Certificate (Bldg. 5)	09/29/2023	None	Passed
NFPA Fire Alarm & Sprinkler Inspection Certificate (Bldg.10)	09/29/2023	None	Passed
NFPA Sprinkler Inspection, Testing, and Maintenance (Bldg.14)	01/26/2023 06/29/2023 09/29/2023	None	Passed
Protex Central Inc. Tested on Alarm Initiating Devices and Circuit Information	09/12/2023	None	Passed
NFPA Fire Alarm & Sprinkler Inspection Certificate (#3)	09/29/2023	None	Passed

Fire Extinguisher Inspections (All Bldgs.)	09/22/2023	None	Passed
NFPA Testing of appliances in kitchens and canteen (Bldgs. 5/10/14)	02/9/2023 08/21/2023	None	Passed
NFPA Fire Alarm & Sprinkler Inspection Certificate (Bldgs. 3/5/10)	01/27/2023 06/29/2023 09/29/2023	None	Passed
TKE: Elevator Inspection/Services (Bldgs. 3/5/14)	01/20/2023 07/31/2023 11/04/2023	None (Maintenance of Elevator Hydraulics)	Completed/Passed
TKE: Elevator Inspection/Services (Bldg. 14)	01/01/2023	None	Passed
TKE: Elevator Inspection/Services (Bldg. 5)	01/17/2023	None	Passed
NFPA Semi-Annual Fire Alarm & Generators Tests (Bldg. 11)	02/20/2023	Deficiency Summaries not provided	
NFPA Semi-Annual Fire Alarm & Generators Tests (Bldg. 9)	02/22/2023		Completed
NFPA Semi-Annual Fire Alarm & Generators Tests (Bldg. 3)	02/23/2023		Completed
NFPA Semi-Annual Fire Alarm & Generators Tests (Bldg. 3/5/14)	02/24/2023		Completed
NFPA Semi-Annual Fire Alarm & Generators Tests (All Bldgs.)	10/17/2023		Completed
NE State Fire Marshal Boiler Inspection Division	06/13/2023	None	4 Buildings Passed
LWS Lincoln Water System: Backflow Preventer Tests (Bldg. 3/5/10)	10/02/2022 10/05/2022	None	Passed

<b>STAFFING INFORMATION</b>	
Number of Positions Allotted (as of 10/31/2023)	607
Number of Positions Filled (as of 10/31/2023)	504
Number of Positions Vacant (as of 10/31/2023)	103
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	1.7%
Aggregate Turnover Rate (12/1/2022 – 10/31/2023) **	18.2%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	69

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.

## Norfolk Regional Center (NRC) – Physical Site Review

A site review of the Norfolk Regional Center (NRC) was conducted on November 17th, 2023. The facility indicated a current population of 82 patients with a 111 capacity. The only systemic issue identified during this review was a kitchen hood range fire suppression replacement project that limited what types of food the facility could serve the population. While the food limitations were minor, they did present some minor inconveniences. The facility anticipated the completion of this project to be in December 2023. The facility functions all within one building that is extremely large and spacious. The sanitation and conditions, both internal and external, were optimal, given the age of the building. Though it was clear some areas were dated, the facility has made evident efforts to update and upkeep the overall building. The grounds were groomed and kept in good order. The outdoor recreational areas could benefit from replacements of the furnishings. However, the outdoor recreational areas' current condition has been expanded and provides ample room for activities. It was clear that updates to the equipment, systems, and furnishings were the facility's top priority. The overall atmosphere of the facility was welcoming and warm, from the patients to the staff.

The facility has a vast array of activities for patients to enjoy. There was equipment for leisure activities, such as woodworking, loom weaving, pottery, leather working, video games, art, and cooking. There is a main gym where patients can enjoy weightlifting, and elliptical machines are available in almost every unit. The facility houses an on-site, fully operational pharmacy that runs a community program to provide medications to qualified individuals. A small library/media center is within the facility, and any books not provided on-site can be requested and borrowed from the local community library. The facility has an area that can house staff on-site for overnight accommodations if necessary due to inclement weather or for out-of-town staff who travel. Finally, the facility partners with the University of South Dakota to provide paid internships for mental health practitioners and those seeking a master's in social work.

Within this reporting period, NRC staff detailed a fruitful and busy year regarding completed projects. Some consisted of minor projects like re-tubing two boilers, general maintenance repairs to the electrical and chiller rooms, and general maintenance upkeep. At the same time, other significant projects ranged from purchasing all new staff radios and a new radio repeater for the whole facility, almost all new weightlifting equipment, several new commercial grade washing machines, new living unit furniture for every unit, a microphone installed in the group therapy room to accommodate the adjoining intern/supervisory viewing room, as well as all new staff computers throughout the whole facility. NRC moved the controlled shut-off function for the kiln outside its secured area to allow staff easy access to the function without being exposed to excessive heat. The facility has an ongoing project for dead tree removal across campus and has completed some repairs to the employee parking lot that included concrete resurfacing as well as the addition of a walking bridge and railing across the parking partitions that had resulted in several trips and falls in the past during inclement weather. NRC also plans to add another walking bridge in the employee parking lot. Fire pull stations within the units were moved from the common areas to the staff control stations to prevent unnecessary activation from the patients.

The facility has plans for additional improvements. One of those plans involves the 14 Norix-style bed frames they received to replace the old metal bed frames; those are scheduled for installation at the beginning of the new year. Other plans include renovating the Safety and Security Center's shower, which currently does not house patients but is functional should the need arise. The surveillance system for the facility consists of 268 cameras, 11 new additions, and 41 new cameras that replaced existing models.

## NRC DATA/TRENDS

The below tables show the inspection data and staffing trends for NRC for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
NE State Fire Marshal Fire Alarm Tests	1/1/2023	None	Passed
NE State Fire Marshal Elevator Div. Conveyance Comp Sheet	1/24/2023	Fail Relief test records (Bldg. 2, Bldg. 16)	Passed
General Fire & Safety Inspection	1/24/2023	None	Passed
Midwest Sprinkler Co. Inspection	1/25/2023	None	Passed
3E Electrical Engineering & Equip Tests	2/9/2023	None	Passed
NE State Fire Marshal Boiler Inspection	3/10/2023	None	Passed
NE Rural Water Association Tests	4/26/2023	None	Passed
3E Electrical Engineering & Equip	5/22/2023	None (Quarterly Inspection of Caterpillar)	Passed
NRC Environment Inspections	5/31/2023	None (1 West)	Passed
NE State Fire Marshal FA Test	7/10/2023	None (Maintenance Shop and Bldg. 16)	Passed
Midwest Sprinkler Co. Quarterly report	7/24/2023	None	Passed
3E Electrical Engineering & Equip	8/17/2023	None (Quarterly Inspection of Caterpillar)	Passed
DHHS Public Health Survey/Investigation	9/13/2023	None	Compliant
DHHS Licensure Unit	9/13/2023	None	Compliant
Midwest Sprinkler Co. Inspection	10/18/2023	None	Passed
Back Flow Device Test Report	10/24/2023	None (Boiler Room Powerhouse)	Passed



<b>STAFFING INFORMATION</b>	
Number of Positions Allotted (as of 10/31/2023)	250
Number of Positions Filled (as of 10/31/2023)	220
Number of Positions Vacant (as of 10/31/2023)	30
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	1.6%
Aggregate Turnover Rate (12/1/2022 – 10/31/2023) **	17.4%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	2

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.

## Whitehall PRTF – Physical Site Review

The Whitehall Psychiatric Residential Treatment Facility (PRTF) site review occurred on October 10th, 2023. During this review, the tour included visits to the Tab Building (Administration), Knight House (programming/dining), Morton School, the gym within the NDCS training academy building, and the three living units. The external conditions of the structures were in relatively good order.

The grounds surrounding the campus were well groomed, given the youth's excessive use of recreational space. However, there are severe gaps between the sidewalks and grass throughout, and the facility indicated that they have been actively working to fill those gaps to eradicate the trip hazard. The sidewalks themselves presented with occasional cracking, resulting in uneven walking paths. Whitehall foresees completion of repairs to the sidewalks in the next year after the other major projects with the grounds and facility buildings are complete. The facility recently ended a contract with an external groundskeeping contractor, and facility maintenance personnel will fill the role until a new contractor is secured.

Other projects Whitehall staff discussed as complete for the reporting period were replacing living unit furniture, facility-wide tree removal, and new roofing to the Tab and Maintenance buildings. There are plans to complete foundational repairs to both substance abuse units, Knight House and the Morton School building, that have begun to settle and are beginning to present with structural issues. This project is scheduled to start following the sidewalk project and is expected to be finished after the end of this reporting period. Additional dead tree removal around campus will continue as an ongoing project.

The PRTF does not currently utilize the Mansion located on the campus, and there are no plans to incorporate it within the program. Additionally, a vacant cottage on campus is scheduled for demolition. The review noted general wear and tear, with much of the facility appearing dated and needing renovation. Newer furniture was presentable and assisted in improving the presentation of the cottages. Other general concerns observed were rusted or dented ceiling vents, peeling privacy film on windows in the youth rooms, utilization of duct tape in place of privacy film on some windows, broken or missing cove lining, three different leaky basements, and cracks in the foundation of the buildings previously identified. A toilet, not secured to the floor, was labeled as “out of order,” which left the unit with access to only one restroom.

A few items or equipment within the units could need replacement, such as the billiards table for leisure activities and the kitchen utensils and other equipment. However, the facility had recently replaced the

laundry machines in the cottages and a refrigerator in one unit. Whitehall solely utilizes the gym in a building owned by the Department of Corrections, which needs to be updated. The flooring is concrete and heavily worn with faded paint and needs renovation.

Morton School was well-equipped and did not present with any significant issues. While dated, the administrative building was in good working order, functional, and showed no significant issues. The facility is equipped with 36 cameras located in the living units only. The administration has set a goal of installing more cameras in the Tab and school buildings and would also like to see cameras placed periodically outside to monitor youth recreation and campus escorts. At the time of the review, the camera project process had yet to begin. No systemic issues were observed nor acknowledged for Whitehall PRTF during the review.

## Whitehall PRTF DATA/TRENDS

The below tables show the inspection data and staffing trends for Whitehall for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
NE Dept. of Environment and Energy, Child Care Facility Evaluation	2/21/2023	6 deficiencies	Passed
NE Dept. of Education Approval Letter for 2023-24 School year	5/8/2023	None	Issued
DHHS Division of Public Health Survey	5/23/2023	8 deficiencies	Passed
Center for Medicare and Medicaid Services, Clinical Laboratory Improvement	01/14/2023	Certificate of Waiver for CLIA (UA's)	Issued
Lincoln Water System Back Flow Preventer Test Inspections	3/03/2023	None (17 Areas)	Passed
NE State Fire Marshal Agency Boiler Inspection Division	4/21/2023	None	Passed
State of NE Hydraulic Elevator Safety Test and Inspection Witness Report	10/11/2023	None	Passed
Fire Alarm and Life Safety System Inspection	3/03/2023	None (11 Area)	Passed
NE State Fire Marshal Fire Alarm Test	9/18/2023	None (8 Areas)	Passed
Summit Fire Protection Fire Extinguishers	10/10/2023	None (Service Checks)	Passed
NE State Fire Marshal Fire Alarm Test	9/18/2023	None (8 Areas)	Passed
Summit Fire Protection Fire Extinguishers	10/10/2023	None (Service Checks)	Passed
3E Electrical Engineering & Equipment Co. Inspections	12/07/2022	None	Passed
3E Electrical Engineering & Equipment Co. Inspections	02/22/2023	None	Passed

<b>STAFFING INFORMATION</b>	
Number of Positions Allotted (as of 10/31/2023)	42
Number of Positions Filled (as of 10/31/2023)	32
Number of Positions Vacant (as of 10/31/2023)	10
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	0.8%
Aggregate Turnover Rate (12/1/2022 –10/31/2023) **	9.7%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	2

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.

# Developmental Disabilities Institution

## Beatrice State Development Center (BSDC) – Physical Site Review

A visit to the Beatrice State Development Center (BSDC) took place on October 17th, 2023. It was disclosed that the facility had completed foundational repairs to three cottages, the kitchen building, and the Chapel during the reporting period. The final building needing foundational repairs is the food service building, which was scheduled for completion before the end of the reporting period. Other projects that have been completed to improve conditions of the facility during the reporting period are repairs to the therapeutic pool within the Carstens Center, installation of water heaters in the power plant, replacement of the fire alarms, and repair of the air handler supply fan in the educational (D) building, and the finishing touches for Cottage 412 for paint, flooring, and ceiling walls were complete.

The maintenance crew indicated that much of their work consists of preventative maintenance that require general work orders for repairs with a 72-hour completion rate; major remodel or construction projects are typically outsourced. The equipment and furnishings personally owned by the individuals within the program are not repaired or monitored by the maintenance department. Repairs are specific to state-owned property; however, personal furnishings and equipment are well maintained and repaired or replaced as deemed appropriate for those within BDSC care and by the appropriate individuals.

Upkeep and maintenance on the buildings are excellent, though many are 45 years old or older. The newest construction was the greenhouse, ten years ago. While dated, the facility was clean and contained a warm, home-like quality throughout. There are notes of general wear and tear consistent with the age of the buildings. At the time of the visit, the Residential State building (1451) did not appear to have received any significant remodeling or repairs, as indicated in the previous year's report.

A few buildings on campus remain vacant, with no completion of demolition within the reporting period. DAS officially lists buildings B, C, and T as Vacant Buildings and Excess Land (VBEL). No official determinations for the Lake Street Apartments or L-building have been made.

The immense grounds are well maintained and cared for, with minimal hazards noted. The individuals receiving care actively participated in programming, welcomed, and showed great enthusiasm for their activities. Their interactions with those around them were pleasant and happy. No systemic issues were found that would negatively affect facility operations. BSDC is an open campus facility available to the public and currently has no video surveillance system.

## BSDC DATA/TRENDS

The below tables show the inspection data and staffing trends for BSDC for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
ICF/DD Licensure Renewal (Bldg. 400 & Solar Cottages)	2/6/2023	None	Issued
NE State Fire Marshal Occupancy Permit (Bldgs. 402, 404, 406, 408)	3/6/2023	None	Issued
NE State Fire Marshal Safety Survey/Inspection	3/6/2023	32 – corrected	Completed
NE State Fire Marshal Occupancy Permit (Solar Cottages)	1/24/2023	None	Issued
DHHS CMS Licensure Survey	1/24/2023 2/14/2023	4 – corrected	Complete
DHHS Public Health Survey	12/7/2022 12/27/2022	1 - corrected	Pass
	1/21/2023 1/31/2023	4 - corrected	
	05/31/2023 6/2/2023	1 – corrected	
Semi-Annual Generator Tests (Bldg. 27)	02/01/2023	None	Complete
Semi-Annual Generator Tests (Bldg. 4)	02/01/2023	None	Complete
Semi-Annual Generator Tests (Bldg. 25)	02/02/2023	None	Complete
Semi-Annual Generator Tests (Bldg. 15)	02/02/2023	None	Complete
Annual Backflow Inspections (All areas)	02/14/2023	None	Pass
Annual Backflow Preventer Test (Bldgs. 4,5,7,12,15,22,27,17)	03/13/2023	None	Complete
Semi-Annual Generator Test (Bldg. 5)	03/29/2023	None	Pass
Solar Cottages Semi-Annual Generator Test	03/29/2023	None	Complete
Semi-Annual NFPA Sprinkler Inspections	03/27/2023 03/28/2023 03/29/2023	None (19 buildings)	Pass
State Cottages Semi-Annual Generator Test	3/30/2023	None	Complete
Sheridan Cottages Semi-Annual Generator Test	03/30/2023	None	Complete
NFPA Fire Alarm Testing (Units 411- 416,418,420,422,424)	05/22/2023	None (10 buildings)	100%
NFPA Fire Alarm Tests	05/23/2023	None (8 buildings)	100%
NFPA Fire Alarm Tests (B Bldg.)	05/24/2023	Control Unit Failure	Failed
NFPA Fire Alarm Tests	05/24/2023	None (4 buildings)	100%
Quarterly NFPA Sprinkler Inspections	06/12/2023	None (19 buildings)	Pass

	06/14/2023		
Annual NFPA Sprinkler Inspections	09/26/2023 09/27/2023	None (18 buildings)	Pass
NFPA Extinguisher Inspections (L – Bldg.)	12/13/2022	7 Failed / 9 Pass	56%
NFPA Extinguisher Inspections (Units 411,413,414,415,418,420,422,424)		None	100%
NFPA Extinguisher Inspections (# 416)		2 Failed / 0 Pass	0%
NFPA Extinguisher Inspections (# 412)		1 Failed / 1 Pass	50%
NFPA Extinguisher Inspections (Y-Bldg.)	12/14/2022	2 Failed / 35 Pass	95%
NFPA Extinguisher Inspections (Food Service)		2 Failed / 20 Pass	91%
NFPA Extinguisher Inspections (Administration)		4 Failed / 37 Pass	90%
NFPA Extinguisher Inspections (B-Bldg.)		None	100%
NFPA Extinguisher Inspections (C-Bldg.)		None	100%
NFPA Extinguisher Inspections (Carstens Center)		3 Failed / 9 Pass	75%
NFPA Extinguisher Inspections (Chapel)		None	100%
NFPA Extinguisher Inspections (T-Bldg.)		None	100%
NFPA Extinguisher Inspections (Power Plant)		1 Failed / 3 Pass	75%
NFPA Extinguisher Inspections (W. Wing)		12/15/2022	1 Failed / 19 Pass
NFPA Extinguisher Inspections (F-Bldg.)	5 Failed / 8 Pass		62%
NFPA Extinguisher Inspections (D-Bldg.)	1 Failed / 17 Pass		94%
NFPA Extinguisher Inspections (Laundry)	6 Failed / 25 Pass		81%
NFPA Suppression System Inspections (#103, 104, 205, 206, 311)	5/22/2023	None	100%
NFPA Suppression System Inspections (#402, 406, 404, 408)	5/24/2023	None	100%

### STAFFING INFORMATION

Number of Positions Allotted (as of 10/31/2023)	257
Number of Positions Filled (as of 10/31/2023)	221
Number of Positions Vacant (as of 10/31/2023)	36
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	2.3%
Aggregate Turnover Rate (12/1/2022 –10/31/2023) **	25.6%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	25

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.

# Children & Family Services Institutions

## YRTC-Hastings – Physical Site Review

The Youth Rehabilitation and Treatment Center (YRTC) - Hastings was visited for a site review on November 6th, 2023. During the visit, all buildings were in good working condition internally and externally. The facility only occupies and utilizes a small portion of the grounds for normal operations, but overall, the surrounding grounds were in good order. Minor gaps between the sidewalks and grass that could present a safety hazard were noted. Many of the property's grounds are underutilized and would benefit from expansion.

There were several notes regarding general wear and tear throughout the facility. However, the most potentially concerning building was the Chapel, which the facility uses as a recreational space. The building appeared in good condition externally but presented with issues internally. The floor was cracked and uneven, and the paint had faded. Internally, the side of the windows had been boarded with thick sheetrock that had started forming cracks from recreational impact. The internal foundation contains cracks on the building's east side and upper levels. The lower eastside areas utilized for storage present hazards as the equipment prevents the fire exit from being accessed in an emergency. There are plans to update the upper level to implement more shelving to provide increased storage capacity to dissipate the accessibility blocks near the exits and stairways.

Aside from the Chapel, the general wear and tear or conditional concerns noted throughout the facility during the on-site review are as follows: Foundational cracks in buildings 5 (Administration), 6 (Chapel), and 27 (Programming). Dirty vents or water damage in ceiling tiles surrounding the vents in buildings 5, 27, 28 (Unit A), and 29 (Unit B). A leaking garden hose outside of building 28 is causing a buildup of corrosion on the side of the building. The range hood in the kitchen was dirty, which was noted as a deficiency during their last kitchen inspection. Building 27's staff restroom vacancy sign was broken and did not indicate properly when in use. The living units only have individual chairs in the communal living area as the facility was experiencing numerous boundary and security issues between the youth and the previous living furniture. The furnishings, equipment, and security systems are actively in place and used at the facility and appear in good working order.

This facility recently constructed a greenhouse next to the Chapel for the female youth. There have been some growing pains associated with this project's development and implementation process, but the facility foresees full functionality in time for the next planting season. The only other significant improvements noted were the construction of a shed outside of one living unit to provide coverage and insulation to the unit's heating unit from the natural elements and a current dead tree removal project that will not be complete before the end of the reporting period.

YRTC-Hastings has a wide array of video surveillance cameras throughout the facility, and the number of cameras has increased yearly since opening in 2021. Initially, the facility started with 69 cameras and will bring that number to 111 by the end of the reporting period. During the on-site review, it was noted that no camera exists in the vocational kitchen used for youth programming activities. No systemic issues were observed or acknowledged at this facility during the review.

## YRTC-Hastings DATA/TRENDS

The below tables show the inspection data and staffing trends for YRTC-Hastings for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
Annual Flow Test	12/2/2022	None	Pass
Annual NE State Fire Marshal Inspection Report	04/20/2023	None	Pass
Backflow Prevention Assembly Test	6/2/2023	None	Pass
Generator Commissioning Test	03/01/2023	None	Pass
NE Dept. of Environment and Energy Food Establishment Evaluation	3/28/2023	Clean the mounted fan in dish room of Kitchen	Pass
NE State Fire Marshal Fire Sprinkler Inspection	7/5/2023	None	Pass
Quarterly Generator Inspection (Building 27-29)	1/26/2023	None	Pass
Quarterly Lift Station Inspection	1/26/2023	None	Pass
Semi-Annual Hood Fire Suppression System Inspection	9/7/2023	None	Pass

STAFFING INFORMATION	
Number of Positions Allotted (as of 10/31/2023)	82
Number of Positions Filled (as of 10/31/2023)	64
Number of Positions Vacant (as of 10/31/2023)	18
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	3.8%
Aggregate Turnover Rate (12/1/2022 – 10/31/2023) **	41.7%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	33

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.



## YRTC-Kearney – Physical Site Review

The Youth Rehabilitation and Treatment Center (YRTC) - Kearney was visited for a physical site review on November 1st, 2023. The site visit consisted of a tour of eight buildings. The buildings toured were the Administration (Dodge), the school (Kearney West High), the Chapel, the Dining/Warehouse/Laundry (BDR), the Dickson Behavioral Stabilization Unit (DBSU), the Vocational Building, and the four living units (Bryant, Washington, Creighton, and Lincoln). The grounds at YRTC-Kearney were presentable and well cared for. No significant concerns were noted with the groundskeeping or general conditions of the sidewalks, fixtures, or external building structures. The facility did not present any systemic issues during the review. The Morton Living Unit, previously used as a living unit and office space, is now vacant and being considered for demolition. The facility is working towards adding one to two new living unit buildings that will replace the use of all other current living units on the grounds.

The living units are all bay-style dorms with sleeping arrangements on the upper level, day rooms, and community-style bathroom areas downstairs. Conditions in the living units were decent, aside from general wear and tear or sanitary conditions consistent with the age and gender of the populations served. There were severe gouges and breaks in the edging of the stairs leading to the upper levels of the units that could pose a threat to safety, causing possible trips or falls. The facility indicated that two of the windows in the living units were replaced in the past year, along with approximately 80 light fixtures. Staff stated that a partition was placed in a bathing area in one living unit to provide more privacy. In another unit, there was an inoperable television; the facility indicated that a new one had been ordered.

The Dickson Unit (DBSU), utilized for behavioral stabilization and confinement of the youth population was noted to be more correctional in nature and the most secure unit of the facility. This building presented as more dated than the others and would benefit from a general renovation and a deep cleaning of all youth rooms. However, the surveillance and security systems appeared to be in good working order for the purposes of the building.

All other areas within the facility presented with acceptable and proper sanitation. The school building was spacious and had no significant internal or external concerns regarding conditions. The only area worth noting for the school would be the replacement or repair of some weightlifting equipment in the weight room, as the rips in padding could present poor health conditions for bacterial issues. The vocational building was partially used for storage but had recreational equipment set up in the same areas for youth, which could present safety concerns if allowed in the same areas as the equipment storage.

Throughout this past year, the facility has yet to undergo significant projects other than those listed above, general maintenance upkeep, and dead tree removal as it prepares for the possibility of the Morton building demolition and one to two new building constructions. The facility completed a security surveillance system upgrade that included the addition of 41 new cameras, bringing the total to 198, thus providing more vantage points and eradicating blind spots within the facility.

## YRTC-Kearney DATA/TRENDS

The below tables show the inspection data and staffing trends for YRTC-Kearney for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
American Correctional Association Audit	8/5/2023	3 non-compliant standards recommended	99.1%
		None: All non-compliant recommendations overturned	100%
Annual Boiler House Generator Inspection	8/2/2023	None	Pass
Annual Bryant-Creighton Living Units Generator Inspection	8/7/2023	None	Pass
Annual Dickson Behavioral Stabilization Unit Generator Inspection	8/2/2023	None	Pass
Annual Gomez Hall Generator Inspection	8/7/2023	None	Pass
Annual Lincoln-Washington Living Units Generator Inspection	8/7/2023	Block heater is inoperative, and battery needs replaced	Pass
Annual Morton Living Unit Generator Inspection	8/8/2023	None	Pass
Annual NE State Fire Marshal Boiler Inspection	4/14/2023	None	Pass
Annual NE State Fire Marshal Elevator Inspection	5/10/2023	None	Pass
Annual NE State Fire Marshal Inspection Report	2/09/2023	None	Pass
NE Dept. of Environment and Energy Food Establishment Evaluation	10/4/2023	Employees must wash hands when changing tasks. Clean mounted can opener. Clean floor fan screens. Clean mold around walk-in door frames and clean floor of walk-in units. Dispensing utensils stored with handles above salt container.	Pass
NE State Fire Marshal Fire Alarm Test Report	4/27/2023	None	Pass
NE State Fire Marshal Fire Sprinkler Inspection	8/1/2023	None	Pass
Semi-Annual Fire Suppression Inspection (Data Room)	10/6/2023	None	Pass
Semi-Annual Hood Fire Suppression System Inspection	4/25/2023	None	Pass

<b>STAFFING INFORMATION</b>	
Number of Positions Allotted (as of 10/31/2023)	183
Number of Positions Filled (as of 10/31/2023)	105
Number of Positions Vacant (as of 10/31/2023)	78
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	4.2%
Aggregate Turnover Rate (12/1/2022 – 10/31/2023) **	46.2%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	77

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.

## YRTC-Lincoln – Physical Site Review

The Youth Rehabilitation and Treatment Center (YRTC) - Lincoln was visited for a site review on September 21st, 2023. Only areas occupied by YRTC-Lincoln were observed, as the Lancaster County Youth Services Detention Center occupies the same building. The tour included viewing the Administration, Medical, Intake/Reception, Dining, Library, Life Skills, gymnasium, School (J-Pod), two living unit pods (Echo and Foxtrot), and the multi-use area between those pods.

The outside state of the overall building was presentable and observed to be in good condition. The grounds located within the perimeter fence were well cared for but lacked recreational equipment or resources for activities. The enclosed outdoor area within the living unit contained a single basketball hoop but was equally sparse regarding resources. However, it was in good condition outside of general wear and tear. The facility reports having 95 cameras between the YRTC-Lincoln-owned system and the cameras for shared areas with the county detention center.

The shared spaces within the facility are the general hallways, Administration, Medical, Life Skills, Dining, Intake/Reception, gymnasium, and the library. The responsibility for conditions within these areas falls to the county for general repair, renovation, and upkeep. The review of these areas showed signs of heavy foot traffic and daily use but remained in relatively good condition. The gymnasium had broken light fixtures with duct tape holding them together and some damage/scuffing to the mats surrounding the walls from daily use. No other significant concerns for repair outside of general wear and tear were present in these areas.

YRTC-Lincoln solely occupies the J-Pod area and houses the facility's teaching, nursing, and compliance staff. It contains one large, main open area for school to occur. The youth restroom had the remnants of a paper towel dispenser that presented a ligature risk for youth, calcium buildup, and an air vent that needed cleaning. A washer and dryer in this area are unused by YRTC-Lincoln but looked to have excessive calcium buildup on the floor surrounding the equipment. The carpet leading to J-Pod must be replaced; water damage was visible on several ceiling tiles.

The area between the Foxtrot and Echo Pods, known as the multi-use area, was in good condition and presented with quality sanitation. The youth restroom needed deep cleaning in this area. This area's storage closet was heavily used, obstructing the fire sprinkler and the electrical box holding the valve controls.

The living units for the male youth (Foxtrot) had general wear and tear consistent with heavy use—restrooms within each room's sleeping quarters presented with heavy calcium buildup and poor sanitation. The shroud/cover for a hydraulic door closer was broken, exposing the metal of the closer, and needs replacement. The female unit (Echo) was in better sanitary condition but contained two cracked windows on the doors of the youth rooms. The facility presented no systemic issues in this review other than lacking control of facility conditions within the shared space.

## YRTC-Lincoln DATA/TRENDS

The below tables show the inspection data and staffing trends for YRTC-Lincoln for the period of December 1, 2022, through October 31, 2023.

### Inspection/Accreditation Data

TYPE	DATE	DEFICIENCIES	RESULTS
City Bureau of Fire Prevention Operational Permit	01/23/2023 EXP. 12/31/2023	None	Issued
NE State Fire Marshal Sprinkler Inspection/Backflow Testing	01/23/2023	None	Completed
NE State Fire Marshal Midwest Alarm Testing	03/29/2023	Note: System in trouble due to construction	Completed/Passed
Lancaster County Health Dept. Environmental Health Inspection	08/18/2023	Proper holding temperatures Ware washing facilities, installed, maintained, use, test strips	Completed
City of Lincoln Operational Permit Inspection	10/05/2023	None	Completed/Passed
NE State Fire Marshal Boiler Inspection	11/1/2023	Repairs/Adjustments required to Burner/Pilot before certificate is issued	Corrected/Passed

STAFFING INFORMATION	
Number of Positions Allotted (as of 10/31/2023)	92
Number of Positions Filled (as of 10/31/2023)	44
Number of Positions Vacant (as of 10/31/2023)	48
Monthly Turnover Rate (12/1/2022 – 10/31/2023) *	3.6%
Aggregate Turnover Rate (12/1/2022 – 10/31/2023) **	39.6%
Aggregate Staff Assaults (12/1/2022 – 10/31/2023)	31

\* Average monthly turnover rate for the indicated period

\*\* Total number of separations during the given period divisible by the average number of employees.