

STATE OF NEBRASKA
Office of Public Counsel/Ombudsman

ANNUAL REPORT

Neb. Rev. Stat. § 83-104
Review of Nebraska State Institutions

December 11, 2023

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ABBREVIATIONS

American Correctional Association	ACA
Beatrice State Development Center	BSDC
Center for Medicare and Medicaid Services	CMS
Hastings Regional Center	HRC
Intermediate Care Facility for Individuals with Intellectual or Developmental Disabilities	ICF-IDD
Lancaster County Youth Services Center	LCYS
Lincoln Regional Center	LRC
Mental Health Substance Use	MHSU
Missouri Youth Services Institute	MYSI
Nebraska Department of Health and Human Services	DHHS
Norfolk Regional Center	NRC
Office of Public Counsel/Ombudsman	OPC
Performance-Based Standards Project Psychiatric Residential Treatment Facility	PbS Project PRTF
Youth Rehabilitation and Treatment Center	YRTC

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INTRODUCTION

Background

Neb. Rev. Stat. § 83-104, passed by the Nebraska Legislature in July 2020, requires the Office of Public Counsel/Ombudsman (OPC) to conduct an annual physical review of the following state institutions within the Nebraska Department of Health and Human Services (DHHS):

1. The Youth Rehabilitation and Treatment Center – Geneva;¹
2. The Youth Rehabilitation and Treatment Center – Kearney;
3. Any other facility operated and utilized as Youth Rehabilitation and Treatment Center under state law;
4. The Hastings Regional Center;
5. The Lincoln Regional Center;
6. The Norfolk Regional Center; and
7. The Beatrice State Development Center.

Neb. Rev. Stat. § 83-104(2) further requires the OPC to report to the Legislature on the conditions of the facilities on or before December 15 each year beginning in 2021, for the period beginning with December 1 of the prior year through November 30 of the current year. Neb. Rev. Stat. § 83-104(2) continues by requiring that each report shall, for each institution, include findings and observations from the annual physical review; recent inspection reports regarding the facility; staffing information; reports received by the OPC; and any systemic issues identified.

Prior to Neb. Rev. Stat. § 83-104's requirements in 2021, OPC staff generally visited state institutions as a result of individual complaints or reports to the OPC or identification of specific systems issues. The statutory reporting requirement was part of the Legislature's response to the crisis at Youth Rehabilitation and Treatment Center (YRTC) at Geneva in August 2019, in which the female youth there suddenly needed to be relocated to YRTC-Kearney, due to the unsafe conditions at YRTC-Geneva.² In the year leading up to the crisis, the OPC received a total of three complaints regarding YRTC-Geneva, and none were about the facility's conditions.

In January 2020, the Legislature's Health and Human Services Committee issued a report with several recommendations, including requiring an annual facilities review and subsequent report

¹ YRTC-G campus has been closed by DHHS, and the girls program has moved to the Hastings campus, previously used by the Hastings Regional Center program.

² State of Nebraska, Office of Public Counsel/Ombudsman and Office of Inspector General of Nebraska Child Welfare, "The Deterioration and Closure of Geneva Youth Rehabilitation and Treatment Center, Special Report of Investigation," January 5, 2021, https://nebraskalegislature.gov/pdf/reports/public_counsel/Geneva_Special_Report_2021.pdf.

to the Legislature by the OPC.³ Legislative Bill 1144 was introduced with such requirements in January 2020, passed by the Legislature on July 31, 2020, and signed by Governor Pete Ricketts on August 11, 2020. In the past, this report aimed to assist the Legislature in improving state institutions, including YRTCs, through highlighting current conditions, efforts towards improvement, and opportunities for improvement. As discussed below, there were several limitations in reporting this year.

This report is organized by grouping institutions under the headings “Behavioral Health,” which includes hospitals or other licensed facilities, and “Office of Juvenile Services,” which includes the YRTCs in Hastings, Kearney, and Lincoln. Behavioral Health facilities statutorily⁴ fall within the DHHS Division of Developmental Disabilities and DHHS Division of Behavioral Health. Beatrice State Development Center (BSDC) falls under the DHHS Division of Developmental Disabilities, and Lincoln Regional Center (LRC) and Norfolk Regional Center (NRC) are under the DHHS Division of Behavioral Health. Within LRC’s organization is the adolescent psychiatric residential treatment facility (PRTF) at Whitehall. The Office of Juvenile Services is statutorily within the DHHS Division of Children and Family Services.

Limitations

While the statutory intent regarding this report is to provide summaries of observations and documentation review related to conditions of each of the state institutions, these observations and reviews were limited this year by DHHS, as the OPC was allowed only public access to the facilities in regard to the OPC’s annual inspection tours of the facilities. In addition, this report is without the requested data outlined in Neb. Rev. Stat. § 83-104 from DHHS.⁵ Therefore, this report will be abbreviated from prior annual reports. Licensing information that could be located on public access websites is included and cited.

Upon the onboarding of the new Deputy Public Counsel for Institutions on June 1, 2023, site visits occurred at all DHHS facilities, with the exception of Whitehall campus. The new Deputy Public Counsel for Institutions made these initial visits to become familiar with the general layout of the facilities, facility programming, and to build relationships with the facility administrators and their management teams. Normally, in order to accurately report the conditions of the facilities in the annual report, the OPC, including the Deputy Public Counsel for Institutions, schedules annual inspection tours of each facility during early fall, but no inspection tours occurred this year. DHHS limited the OPC to public access. The OPC needs access to more than what the public would have access to in order to comply with the statutory requirements of the OPC’s reporting obligation, and DHHS denied such access. The Deputy Public Counsel for Institutions was unable to return to the DHHS facilities in the fall to conduct a more thorough inspection to include all buildings and aspects of the facilities.

³ Nebraska Legislature Health and Human Services Committee, “Report to the Nebraska Legislature on the Youth Rehabilitation and Treatment Centers,” Jan. 22, 2020, p. 47, https://nebraskalegislature.gov/pdf/reports/committee/health/yrtc_2020.pdf.

⁴ Neb. Rev. Stat. § 81-3116.

⁵ See attached email received from DHHS regarding the annual inspection tours and requested data.

In addition, several data requests were made to DHHS about other aspects of the facilities such as staffing, construction projects, assaults, and capacity, as done in prior years for this report. For the first time, this data was not provided, therefore, the OPC is unable to report this information as statutorily required. Consequently, the report will be limited to observations made during prior, less focused site visits and will provide trend data of the required reporting points from the past three year’s reports for comparison purposes. The report shall also provide a summary of the complaints received by the OPC over the past year. However, since August the OPC has been limited in the information received by DHHS regarding those complaints.

A critical component of ombudsmandry identified by the United States Ombudsman Association Standards of Practice is to coordinate with respective government agencies to “develop of range of responsible options to resolve problems and facilitate discussion to identify the best options”. Under current circumstances, with only limited contact or communication allowed or reciprocated by DHHS, the typical review and analytical process and verification of complaints has been hindered.

Complaints Involving Facilities to OPC

Residents of the facilities, their loved ones, staff, and members of the public may file complaints with the OPC throughout the year. For the period of December 1, 2022 through November 30, 2023, the OPC received 98 complaints regarding DHHS institutions. The following table demonstrates the number of complaints received for each facility for this period, as well as the three prior years. (See Table 1.)

Table 1

Complaints to OPC regarding Facilities in Neb. Rev. Stat. § 83-104				
Facility	Number of Complaints			
	2020	2021	2022	2023
LRC	73	44	54	65
NRC	64	71	39	26
YRTC-Kearney	14	4	5	1
YRTC-Lincoln	2	2	3	3
YRTC-Hastings / Geneva	9	8	1	1
BSDC	2	3	1	2
Whitehall	1	1	0	0
Total Complaints	165	133	104	98

Concerns Identified

While our office was unable to obtain the current reporting year’s data regarding staffing rates for the facilities directly from DHHS, the OPC is under the impression that staffing remains to be a major concern in most of the DHHS facilities, resulting in high stress and staff overtime rates

in some facilities. While it is believed that most of the DHHS facilities are struggling with staffing concerns as we have seen in recent years, the most prevalent of shortages appears to be occurring at LRC.

The OPC received complaints involving such things as patient/resident and staff safety, extended length of time in restraints, DHHS hotline reporting inconsistencies, staff overtime, and inconsistencies with the internal grievance processes. Follow-up responses from DHHS regarding the typical review, and analytical process and verification of complaints was inconsistent, or often unresponsive. Therefore, the OPC is unable to understand if the complaints are true.

Reported Assaults

For the current reporting period, the requested data regarding staff assaults was not provided by DHHS as it had been done in previous years. However, the table below shows the number of staff assaults provided by DHHS in each respective year and reported in the three prior OPC annual institution reports. (See Table 2.)

Table 2

Reported Assaults				
Facility	Number of Assaults			
	2020	2021	2022	2023
LRC	63	51	93	Information not provided
NRC	20	11	8	Information not provided
YRTC-Kearney	97	57	46	Information not provided
YRTC-Lincoln	19	22	11	Information not provided
YRTC-Hastings / Geneva	0	8	18	Information not provided
BSDC	41	26	22	Information not provided
Whitehall	N/A	0	0	Information not provided
Total Reported Assaults	259	175	198	Information not provided

BEHAVIORAL HEALTH FACILITIES

BEATRICE STATE DEVELOPMENT CENTER (BSDC)

BSDC is an intermediate care facility for individuals with intellectual or developmental disabilities (ICF-IDD). It is a 24-hour state and federally-funded residential treatment institution divided into individually-licensed ICF-IDDs within a larger, 130-year old campus. BSDC falls under the DHHS Division of Developmental Disabilities.

BSDC provides comprehensive, specialized medical, psychological, and developmental services to adults. The campus is comprised of many buildings, including structures to meet individuals' housing, medical, dining, religious, and recreation needs, as well as administrative services. Individuals residing at BSDC generally live in one of the ten cottages, which have a home-like feel. Most units have separate bedrooms, bathrooms, a kitchen, a common area, and a laundry room. BSDC also has a Crisis Stabilization and Community Reintegration Program, in which individuals stay in one of four designated apartments for a temporary period between 30 and 180 days. This program aims to intake individuals from the community, provide them with treatment, habilitation, and stabilization, and then prepare them for transitioning back to the community stabilized.

The last known licensed capacity total for BSDC was 169. For the reporting period, the average monthly census and average monthly patient days are unknown.

Complaints to OPC regarding BSDC

For the period of December 1, 2022 through November 30, 2023, the OPC received two complaints regarding BSDC. Due to the limitations in the OPC's ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.⁶

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility and related information by DHHS.

BSDC Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been provided in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year and reported in the three prior OPC annual institution reports. (See Table 3.)

⁶ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Table 3

BSDC Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	138 for FY21	420 for FY22	410 for FY23	Information not provided
Number of Positions Filled	115	205	235	Information not provided
Number of Positions Vacant	40	215	175	Information not provided
Monthly Turnover Rate	N/A	3%	1.2%	Information not provided
Aggregate Turnover Rate	8.4 Long-term / 14.8 Crisis	32%	13.5%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for BSDC.

COVID Update

COVID-related updates for the current statutory reporting period are unknown as the request for updates was declined by DHHS.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

The BSDC Certification of Licensure is active at the time of this report.⁷

Concerns Identified

During the 2022 annual inspection tour it was observed that Building L could possibly be repurposed and remodeled into a skilled nursing facility to serve the needs of BSDC's population. Due to the OPC's inability to conduct the annual inspection tour as so declined by DHHS for the current reporting period, it is unknown at this time if this option has been explored by DHHS.

⁷ Licensure information was found at this website link: <https://www.nebraska.gov/LISSearch/search.cgi>

LINCOLN REGIONAL CENTER (LRC)

LRC is a 250-bed hospital licensed as a Mental Health Substance Use (MHSU) Treatment Center and Psychiatric Hospital and accredited by the Joint Commission, the accreditation body for the Center for Medicare and Medicaid Services (CMS). LRC provides general and forensic psychiatric services and sex offender treatment for individuals in need of specialized psychiatric services in a highly structured setting. Psychiatric services are conducted with the goal of helping individuals achieve stability and transition back to the community. Patients at LRC must meet involuntary admission criteria and are referred by the Mental Health Boards or courts. LRC provides treatment for convicted sex offenders and those committed under an inpatient mental health board order for sex offender treatment. A transition program works towards successful reentry to the community with appropriate safeguards

LRC, which originally opened in 1870, sits on a 107-acre campus. The campus is comprised of several different buildings to meet individuals' housing, dining, medical services, administrative services, religious functions, and recreation needs. Buildings 3, 5, 10, and 14 serve as the main buildings where patients reside and receive treatment.

Building 3 currently houses female patients in need of acute care or forensic services and competency restoration. Building 5 is a forensic unit for male patients suspected of having mental illness that affects their competency and who have pending criminal court cases. Most of Building 5's patients have been deemed by the courts as "not competent to stand trial" and have been admitted to LRC for competency restoration treatment. Building 5 also houses some patients who have been referred by the State Mental Health Boards and newly admitted male patients being evaluated for placement. Building 10 houses males receiving acute psychological care, the on-site dental office, the main library, and cafeteria.

Building 14 is divided into four units, each with a different programming focus: one program for patients who have sexually offended, one designed for individuals transitioning from general psychological care, one for patients who have completed treatment in Building 5, and one for acute individuals who need extra assistance in making connections in the community.

The licensed capacity total for LRC is 242. For the current reporting period, the average monthly census and average monthly patient days are unknown.

Complaints to OPC regarding LRC

For the period of December 1, 2022 through November 30, 2023, the OPC received 65 complaints regarding LRC. Similar to previous years, the complaints involved concerns about medical treatment; programming and treatment plans; patient requests for outside psychological evaluations; issues with staff regarding overtime and safety concerns; and placement at LRC off of the waiting list. No indication has been made to the OPC anything has changed or improved.

Facility Inspection

A detailed site inspection was not conducted by the OPC.⁸

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS.

LRC Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. The information is included to reflect on the reported staffing trends. (See Table 4.)

Table 4

LRC Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	626 for FY21	609 for FY22	624 for FY23	Information not provided
Number of Positions Filled	505	422	533	Information not provided
Number of Positions Vacant	121	187	91	Information not provided
Monthly Turnover Rate	N/A	2%	1.6%	Information not provided
Aggregate Turnover Rate	19%	26%	17.6%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for LRC.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

⁸ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

The LRC Certification of Licensure is active at the time of this report.⁹

Concerns Identified

Safety: In the 2022 report, the OPC described safety and security concerns while visiting LRC, specifically in regards to camera coverage and access/keys. The OPC noted incomplete camera coverage and staff carrying a number of physical keys, which could pose challenges for security of patients and staff if an incident arose and difficulties in quickly responding to an emergency. The OPC recommended reviewing the safety and security of each building, including how the buildings, bedrooms, offices, and other spaces are accessed and who has access to each, where camera coverage deficiencies exist, and how to alleviate those deficiencies. It is unknown if this review of the safety and security of each building as recommended has occurred.

Assaults on Staff: In addition to the safety concerns described above, numerous reports of staff injury due to assaults have been made in particular at LRC. The reasons reported for the perceived high rate of staff assaults include staff access to functional radios are limited, shift staff shortages, staff working a high rate of overtime hours, and concerns with the current physical intervention models being utilized at LRC.

As explained in this report in 2022, and shown in the chart on page 10, there were 93 assaults on staff, which was an increase from the previous year, up from the 53 staff assaults reported in the previous year. It should be noted that staff injury incidents occurring during the application of patient seclusion or restraints are not considered assaults and are referred to as “seclusion or restraint-related injury incidents” by LRC. During the 2022 reporting period, 143 such incidents occurred.

Although it is difficult to determine if the rate of staff assaults is increasing or decreasing due to the unreported data to the OPC regarding staff assaults by DHHS, the OPC has received several complaints in regard to the assaults and staff and patients feeling unsafe during the current reporting period.

Critical Staff Vacancies: While all institutions in this report seem to continue to experience challenges with staffing and retention based on complaints received by the OPC, LRC seems to be struggling more than the other facilities. However the data regarding staff vacancies and turnover rates in the current reporting period requested by the OPC was declined by DHHS.

The complaints received by the OPC include an extensive amount of overtime hours, including mandatory overtime, nurses covering tech positions, and schedules that do not allow for regular

⁹ Licensure information was found at this website link: <https://www.nebraska.gov/LISSearch/search.cgi>

breaks. Reporting individuals have also shared concerns regarding multiple patients on individual staffing plans that may involve a patient to staffing ration of 1:1 or 2:1, which reporting complainants have indicated is higher than prior years.

Capacity of LRC: The need for bed space at LRC cannot keep up with demand, especially for individuals waiting for competency evaluations and restoration treatment. The OPC has a unique perspective into this demand, as it receives complaints from individuals served by both LRC and the county jail system. The OPC will continue to monitor this trend, as well as any policy developments aimed at alleviating the waitlist for LRC, especially for competency evaluations and restoration treatment.

The data regarding LRC capacity and occupancy requested by the OPC for this reporting period was declined by DHHS. No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

NORFOLK REGIONAL CENTER (NRC)

NRC is a 120-bed, Joint Commission-accredited state psychiatric hospital. Established in 1885, NRC currently provides the first phase of the Nebraska Sex Offender Treatment Program, a three phase program designed to reduce dangerousness and risk of re-offense. The treatment received at NRC prepares individuals for the second and third phases of the program, which are provided at LRC.

The NRC campus is secure and enclosed within a fence. The main building on campus, a three-story brick structure, houses all patient services. This main building has spaces for patients' dining, housing, medical, religious, recreation, and programming needs, as well as space for administrative services. There is also a maintenance building, basketball court, picnic/shelter area, and a courtyard/garden area.

The data regarding NRC capacity and occupancy requested by the OPC for this reporting period was declined by DHHS.

Complaints to OPC regarding NRC

For the period of December 1, 2022 through November 30, 2023, the OPC received 26 complaints regarding NRC. Similar to previous years, the complaints dealt with numerous topics, including treatment plans, levels of restrictions, lack of time allowed outside, property issues, and staff concerns. Due to the limitations in the OPC's ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.¹⁰

¹⁰ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS.

NRC Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. (See Table 5.)

Table 5

NRC Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	206 for FY21	245 for FY22	253 for FY23	Information not provided
Number of Positions Filled	167	188	214	Information not provided
Number of Positions Vacant	39	57	39	Information not provided
Monthly Turnover Rate	N/A	2%	1.6%	Information not provided
Aggregate Turnover Rate	20%	22%	17.2%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for NRC.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS per OPC request.

The NRC Certification of Licensure is active status at the time the report.¹¹

¹¹ Licensure information was found at this website link: <https://www.nebraska.gov/LISSearch/search.cgi>

Concerns Identified

Safety and Security: In regards to the safety and security of both staff and patients, the identified areas of concern for OPC staff in observations made in the prior reporting period were the lack of windows on the doors in offices, group spaces, and conference rooms. This was further concerning considering that only 50% of cameras were installed as planned. Camera footage was only reviewed when there was an incident or allegations made. Similar to LRC, the OPC recommended NRC review how bedrooms, offices, common rooms, and other spaces are accessed and who has access to each, where camera coverage deficiencies exist, and how to alleviate those deficiencies.

Due to the OPC's inability to conduct the annual inspection tour as so declined by DHHS for the current reporting period, it is unknown at this time if the safety and security concerns described above at NRC have been properly addressed. No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

WHITEHALL

Whitehall helps adolescents manage their mental health challenges through person-centered care. Until recently, Whitehall focused on treating male adolescents who have sexually offended. However, in the fall of 2020, the Hastings Juvenile Chemical Dependency Program was relocated from the former Hastings Regional Center (HRC) to Whitehall. There are now currently two distinct programming offerings on the Whitehall campus: treatment for youth who sexually harm and the substance use program.

Youth are referred to Whitehall by the Courts and Juvenile Probation, DHHS, or self-referred by a family member. An interdisciplinary team that includes mental health and medical practitioners, social workers, substance use counselors, and other professionals, diagnoses and plans treatment for the youth.

The Whitehall campus is comprised of several different buildings and areas to meet youth's housing, educational, recreation, and dining needs. Youth are housed according to the program in which they participate.

Whitehall is a PRTF licensed and accredited as part of LRC, and is considered an extension of LRC, which is a Joint Commission-accredited state psychiatric hospital. Whitehall is licensed and meets statutory requirements as a MHSU Treatment Center and is licensed by the DHHS Division of Public Health as a residential child-caring agency.

The data regarding Whitehall capacity and occupancy requested by the OPC for this reporting period was declined by DHHS.

Complaints to OPC regarding Whitehall

For the period of December 1, 2022 through November 30, 2023, the OPC received no complaints regarding Whitehall. Due to the limitations in the OPC’s ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.¹²

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS.

Whitehall Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. (See Table 6.)

Table 6

Whitehall Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	58 for FY21	59 for FY22	47 for FY23	Information not provided
Number of Positions Filled	57	46	36	Information not provided
Number of Positions Vacant	1	13	11	Information not provided
Monthly Turnover Rate	N/A	2%	1.4%	Information not provided
Aggregate Turnover Rate	N/A	26%	15.1%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for Whitehall.

¹² DHHS limited OPC’s facility access for the 2023 annual inspection tour to public access only.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

The Whitehall Certification of Licensure is active at the time of this report.¹³

Concerns Identified

Condition of Living Units: In 2022 the OPC reported that in order for youth living at Whitehall to be successful, improvements should be seriously considered for the living units. The OPC noted that living units were very dated in their furnishings. The window coverings needed to be replaced, and some of the windows were covered with film or tape, which should be evaluated. The closets, specifically the hanging rod, appeared unsafe and to present a ligature risk. The bathrooms additionally needed remodeling and updating, including the handrails which could pose a ligature risk. The OPC is unable to report on any updates to these concerns due to lack of access to the facility.

No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

OFFICE OF JUVENILE SERVICES

The Office of Juvenile Services within the DHHS Division of Children and Families operates the YRTCs, which are 24-hour state institutions to serve youth within Nebraska's juvenile justice system. There are currently YRTCs in Hastings, Lincoln, and Kearney; there is no longer a YRTC in Geneva. The mission of the YRTCs "is to help youth live better lives through effective services, giving youth the chance to become law abiding citizens."¹⁴

On August 19, 2019, female youth from former YRTC-Geneva were relocated to YRTC-Kearney after conditions on the Geneva campus were deemed insufficient, and the youth could no longer be cared for there. YRTC-Kearney was never intended to be home to the girls' YRTC program. Instead, the former HRC has been repurposed to operate as YRTC-Hastings for female youth.

¹³ Licensure information was found at this website link: <https://www.nebraska.gov/LISSearch/search.cgi>

¹⁴ Neb. Dept. of Health & Human Services, "Youth Rehabilitation," 2022, <https://dhhs.ne.gov/pages/YRTC-Facilities.aspx>.

YRTC-HASTINGS

YRTC-Hastings serves female youth by providing evidence-based cognitive, behavioral, and skill-building programming, as well as individual therapy for mental health, behavioral health, and substance use needs. YRTC-Hastings includes educational programming as part of a youth's treatment plan and an on-campus junior/senior high school.

YRTC-Hastings sits on a large, open campus comprised of a number of buildings, including an administration building, a chapel used as a gym/recreation area, a school building that includes a kitchen and dining area, and two living units/cottages. Youth are not allowed to have any contact with the youth living in the unit other from the one in which they live.

YRTC-Hastings is accredited with the ACA and is also a member of the Council for Juvenile Correctional Administrators' Performance-Based Standards (PbS) Project, a model which utilizes national standards and performance outcome measures to improve conditions of confinement and treatment in residential facilities.

The data regarding YRTC-Hastings capacity and occupancy requested by the OPC for this reporting period was declined by DHHS.

Complaints to OPC regarding YRTC-Hastings

For the period of December 1, 2022 through November 30, 2023, the OPC received one complaint regarding YRTC-Hastings. Due to the limitations in the OPC's ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.¹⁵

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS.

YRTC-Hastings Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. The information is included to reflect on the reported staffing trends. (See Table 7.)

¹⁵ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Table 7

YRTC-Hastings Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	83 for FY21	116 for FY22	118 for FY23	Information not provided
Number of Positions Filled	64	72	81	Information not provided
Number of Positions Vacant	19	39	37	Information not provided
Monthly Turnover Rate	N/A	3%	2.2%	Information not provided
Aggregate Turnover Rate	23%	38%	24.4%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for YRTC-Hastings.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

Concerns Identified

Policies to Deter Elopement: Through observations made in 2022, OPC staff observed YRTC-Hastings staff following youth and staff on a Polaris vehicle between buildings, and staff in a van monitoring youth near the housing units. While the concern about elopement is justified, the OPC expressed concerns about the potential psychological impacts on female youth of having them personally escorted by staff while being followed from building to building by another staff member on a Polaris and, as was the case when OPC staff visited, monitored by staff looking out from a dark van. Furthermore, OPC staff observed that no contact/view between the two units was allowed, and the therapeutic reasons for this were unclear. The OPC recommended examining policies to deter elopement in light of trauma-informed best practices in the 2022 annual institutions report.

Room Confinement: When OPC staff visited in the afternoon on November 10, 2022, at least three youth were in room confinement and sleeping. The OPC noted concerns about whether the use of room confinement was following therapeutic best practices, whether it was disrupting the youth's educational or programming progress, and whether better efforts could be made to engage youth in room confinement, especially if they must be alone in their room for a long period of time. During a site visit that occurred with OPC in June of 2023, this practice seemed to be actively in place.

No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

YRTC- LINCOLN

YRTC-Lincoln serves high-acuity male and female youth who require more intensive and individualized interventions, such as targeted behavioral and trauma-based programming. Established in 2020, it is a newer facility. Youth enter the YRTC system through either YRTC-Hastings or YRTC-Kearney. YRTC-Lincoln provides a different, more secure physical structure than YRTC-Hastings or YRTC-Kearney.

At YRTC-Lincoln's start, DHHS entered into a 5-year contract with Lancaster County to lease space within the Lancaster County Youth Services Center (LCYSC). LCYSC provides for detention of youth being processed through the juvenile justice system or youth adjudicated or ordered by an adult criminal court to serve a specified time frame. Food and maintenance are also sourced through LCYSC. However, the youth populations of each facility do not mix.

YRTC-Lincoln consists of one main building on a closed campus with a fence. This building is comprised of a secure living area for male youth, a secure living area for female youth, a day room, a school room, a library, a medical room, a group/kitchen room, a gym, a visitation room, and an outside fenced in, grassy area.

YRTC-Lincoln underwent initial ACA accreditation in 2022 and was a participant in the PbS Project according to reporting done by DHHS in 2022.

From December 1, 2021 to October 31, 2022, YRTC-Lincoln had a rated capacity of 20 and an average facility population of 6.6 individuals. No new information has been provided to the OPC by DHHS during this reporting period.

Complaints to OPC regarding YRTC-Lincoln

For the period of December 1, 2022 through November 30, 2023, the OPC received three complaints regarding YRTC-Lincoln. Due to the limitations in the OPC's ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.¹⁶

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS.

YRTC-Lincoln Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. The information is included to reflect on the reported staffing trends. (See Table 8.)

Table 8

YRTC-Lincoln Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	53 for FY21	56 for FY22	100 for FY23	Information not provided
Number of Positions Filled	47	50	52	Information not provided
Number of Positions Vacant	6	8	48	Information not provided
Monthly Turnover Rate	N/A	4%	2.8%	Information not provided
Aggregate Turnover Rate	N/A	42%	31.3%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for YRTC-Lincoln.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

¹⁶ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

Concerns Identified

Shared Facility/Services with LCYS: In 2022, the OPC observed that, while it appeared the program at YRTC-Lincoln was operating successfully, the facility atmosphere – which is one of a detention center/jail-like setting – did not fit well with the intensive treatment model/program in which the youth at YRTC-Lincoln are participating.

No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

YRTC-KEARNEY

YRTC-Kearney serves male youth committed to DHHS Office of Juvenile Services. Youth receive evidence-based behavioral and skill-building programming and individual therapy for mental health, behavioral health, and substance use needs. YRTC-Kearney also operates an on-campus junior/senior high school where youth may earn their high school diploma.

YRTC-Kearney sits on a large, fenced-in campus with a number of buildings. These buildings include an administration building, Dixon Building (which houses newly-admitted youth, youth in seclusion/room confinement, and the transitional living unit), the Bryant, Lincoln, and Washington cottages (living units), the Creighton cottage (which includes the medical office), a woodworking building, a dining hall, a chapel, and a school building that includes a gym, weight room, and pool. Each cottage has a similar interior layout with a game/recreation area, bathroom/showers, and a TV/multi-purpose room on the first floor and barrack-style living quarters and a congregate restroom on the second floor.

YRTC-Kearney has a long history of ACA accreditation and is a member of the PbS Project.

From December 1, 2022 to October 31, 2023, YRTC-Lincoln's rated capacity and the average facility population is unknown, as this requested information was declined by the DHHS.

Complaints to OPC regarding YRTC-Kearney

For the period of December 1, 2022 through November 30, 2023, the OPC received one complaint regarding YRTC-Kearney. Due to the limitations in the OPC's ability to review, analyze and verify complaints, systemic issues are undetermined.

Facility Inspection

A detailed site inspection was not conducted by the OPC.¹⁷

¹⁷ DHHS limited OPC's facility access for the 2023 annual inspection tour to public access only.

Major Projects/Improvements

Progress on any major projects or improvements for the current statutory reporting period is unknown due to limitation to access of the facility by DHHS. It is unknown what progress has been made on the facility improvements or construction of two additional units as funding was approved for by the Legislature in 2022.

YRTC-Kearney Staffing

For the current reporting period, the requested data regarding staffing was not provided by DHHS as it had been done in previous years. However, the table below shows the staffing numbers provided by DHHS in each respective year, and reported in the three prior OPC annual institution reports. The information is included to reflect on the reported staffing trends. (See Table 9.)

Table 9

YRTC-Kearney Staffing – Permanent and Temporary Staff				
	2020 (as of 10/31/20)	2021 (as of 10/31/21)	2022 (as of 10/31/22)	2023 (as of 10/31/23)
Number of Positions Needed in HR Staffing Plan	255 for FY21	258 for FY22	260 for FY23	Information not provided
Number of Positions Filled	153	133	156	Information not provided
Number of Positions Vacant	102	125	104	Information not provided
Monthly Turnover Rate	N/A	3%	1.6%	Information not provided
Aggregate Turnover Rate	32%	35%	17.7%	Information not provided

Staff Assaults

As explained in the staff assault section of this report on page 10 depicting the total number of assaults in each facility for reporting 2020-2022, the OPC did not receive the current number of staff assaults as requested for YRTC-Kearney.

COVID Update

COVID-related updates for the current statutory reporting period are unknown, as the request for updates was declined by DHHS.

Recent Licensure and Inspection Reports

Annual inspection reports for the current statutory reporting period were not received from DHHS.

Concerns Identified

Condition of Living Units and Bathrooms: In 2022, it was believed that YRTC-Kearney would be breaking ground for two new living units, as funds were appropriated in the 2022 legislative session. However, as of August when the OPC was last on-site, construction had not begun. Additionally, while these new units are a step in the right direction, the other living units need substantial work to create a suitable environment for the youth living at YRTC-Kearney, as they showed significant wear and tear at the 2022 inspection visit.

Due to the OPC's inability to conduct the annual inspection tour as so declined by DHHS for the current reporting period, it is unknown at this time if the concerns described above at YRTC-Kearney have been properly addressed. No indication has been made to the OPC anything has changed or improved regarding the concerns listed above.

ATTACHMENTS



Kelli Schadwinkel <kschadwinkel@leg.ne.gov>

Facility Visits

Barrett, Nicole <Nicole.Barrett@nebraska.gov>
To: Kelli Schadwinkel <kschadwinkel@leg.ne.gov>

Fri, Sep 8, 2023 at 12:48 PM

Hi, Kelli,

My week is going well; hope yours is, too!

Our agency is in receipt of your request to arrange a time to conduct a physical review of the state institutions operated by the Department of Health and Human Services (DHHS). This year DHHS will be conducting its own review of all Youth Rehabilitation and Treatment Centers, the Beatrice State Developmental Center and both the Lincoln and Norfolk Regional Centers. DHHS will file a report with the Legislature detailing the outcome of each facility's review. The legislative report submitted by DHHS will include the information required by Neb. Rev. Stat. § 83-104.

DHHS facility administration would be happy to provide any individual from your office with a tour of our facilities, just as we would any member of the public. Such a tour would allow your team the opportunity to learn about any updates or changes to the facilities and the programming provided. Our agency welcomes a request for a facility tour from anyone in your office and such a tour would be akin to tours provided to the public. At this time, the Department is unable to provide individuals from your office with unfettered access to the facility or the individuals receiving treatment in each facility.

Regarding your outstanding request, we will be able to accommodate 10 people on each tour therefore I will work with you to arrange dates that work for your team and the Legislative Fiscal Office (if possible). Are there any dates of the week that are better than others or any specific dates that you would like me to steer clear of? I'll ask LFO the same question and check with our facilities. I will then reach back out with possible dates. Hopefully we can get those all finalized next week.

In the future, to arrange a tour of any DHHS facility please contact my office at [REDACTED] or 402-471-3655. We will coordinate with the appropriate facilities to arrange a date and time to accommodate your office's request for a tour.

Thanks,

Nicole

Nicole M. Barrett, JD | *Director*

OFFICE OF LEGISLATIVE SERVICES

Nebraska Department of Health and Human Services

OFFICE: 402-471-3655 CELL: [REDACTED]

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