IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF PUERTO RICO

THE UNITED STATES OF AMERICA

Plaintiff,

v. CIVIL ACTION NO. 94-2080 CC

COMMONWEALTH OF PUERTO RICO

Defendants,

INFORMATIVE MOTION TO FILE THE MONITOR'S QUARTERLY REPORT

TO THE HONORABLE COURT:

Today, the Monitor submits the Monitor's First Quarter Report for 2013. The report covers the months of January through March 2013. This report consists of an introductory statement by the Monitor, along with the compliance ratings tables and special reports by the Monitor's consultants.

WHEREFORE, the Monitor respectfully requests that this Honorable Court grant this motion and accept the attached report.

Respectfully Submitted,

s/ F. Warren Benton

F. Warren Benton
Monitor, United States v. Commonwealth of Puerto Rico
Calle Mayaguez # 212,
Esquina Nueva,
San Juan, PR 00917

Certificate of Service

I HEREBY CERTIFY that this 29th day of May, 2013, I electronically filed the forgoing with the Clerk of the Court using the CM/ECF system, which will simultaneously serve notice of such filing to counsel of record to their registered electronic mail addresses.

Respectfully Submitted,

s/ F. Warren Benton

F. Warren Benton
Monitor
Office of the Monitor, U.S. v. Commonwealth of Puerto Rico
USACPR Monitoring Inc.
Calle Mayaguez # 212, Esquina Nueva, San Juan, PR 00917
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Monitor's Quarterly Report
First Quarter 2013

United States v. Commonwealth of Puerto Rico, Civil No. 94-2080 (CCC)

The following is the Monitor's First Quarter Report for 2013. The report is in two parts – a narrative overview, along with a set of tables classifying the status of compliance with each provision. The narrative supplements the tables, describing recent events and accomplishments, reviews the results of some of the on-site monitoring tours, and examining particular compliance problems and pending issues. The narrative section does not comment on every category of provisions in every quarterly report.

Document Attachment A:	Consultant Report on Staffing Compliance
Document Attachment B:	Consultant Report on Classification
Document Attachment C:	Report on Incidents and Understaffing
Document Attachment D:	Abuse Referrals Tracking Report
Document Attachment E:	Abuse Referral Case Assessment Report
Document Attachment F:	Consultant Report on Facilities
Document Attachment G:	Minutes of the May Monitor's Conference
Document Attachment H:	Curriculum Vitae of Marelli Colon-Emeric, M.D.
Document Attachment I:	Chronology of Site Visits
Separate Attachment One:	Table of Compliance Ratings

Staffing: The report on staffing compliance shows that the percentage of compliance with staffing requirements on the 6:00 am – 2:00 pm shift was as follows: CD Bayamon – 36%, Humacao – 10% and Villalba 14%. For on the 2:00 pm to 10:00 pm shift, compliance was: CD Bayamon – 30%, Humacao – 9% and Villalba 10%.

At the Monitor's Conference in May, Secretary Negron announced that 100 additional youth service officers be employed in December and another 100 in February.

Paragraph 77 on Use of Force: In response to a long-standing request by Monitor's Consultant David Bogard, the Monitor commends the parties for the joint motion to clarify and amend Paragraph 77 of the Settlement Agreement. (Docket #1081) The revision clarifies the circumstances under which force and/or restraint may be used, and clarifies the reporting expectations after the incident. The Monitor recommends without reservation that the Court approve the most-needed clarification, so that policy development, training and implementation can proceed expeditiously.

Monitor's Conference in early May: The minutes of the Monitor's Conference are attached as Document G. The Monitor's believes that the Conference signals an important adjustment in the posture of the parties where, for many of the provisions there will be a more collaborative and cooperative approach for the achievement and recognition of compliance.

Monitor's Mental Health and Special Education Consultants: The Monitor's mental health adns pecial education consultants, L. Thomas Kucharski, Ph.D. and Peter Leone, Ph.D. and both announced their resignations, occasioned by professional and personal circumstances. The Monitor appreciates their skilled and insightful service. Following a search, the Monitor has appointed, with the assent of both parties, Marelli Colon-Emeric, M.D. as the new consultant for Mental Health. She is an exceptionally qualified and experienced board-certified child psychiatrist. She has professional experience with youth corrections in Puerto Rico, and she presently resides in Puerto Rico. Her experience will enhance her understanding of the complex mental health issues in the case, and the fact that she resides in Puerto Rico will reduce one area of travel expense in the Monitor's Office at a time when expenditure efficiencies are especially important for the Commonwealth.

With respect to a Special Education consultant, the Monitor's plan is ask Victor Herbert, Ed.D. the Monitor's Training consultant who has been working with Peter Leone, to assume the special education monitoring responsibilities along with Dr. Colon-Emeric. They both have education, qualification and experience in special education. This will enable the Monitor's Office to function with one fewer consultant without a reduction in expertise.

Respectfully Submitted,

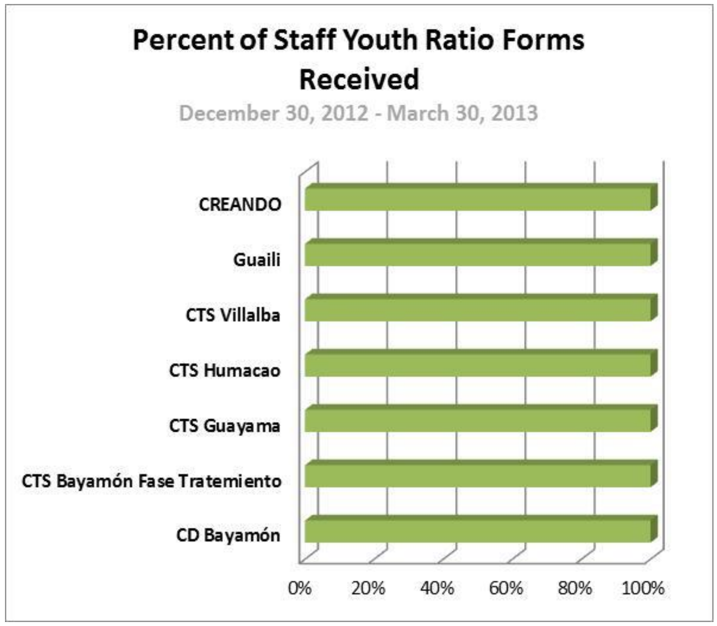
F. Warren Benton, Ph.D.
Monitor

Document Attachment A:
Consultant Robert Dugan Report on Staffing

DCR Staffing Quarterly Report: December 30, 2012 – March 30, 2013
Prepared by Bob Dugan: Office of the Monitor: April 13, 2013

Background:
The following report provides information on Staff Youth Ratio forms that were provided to the consultant for the period of December 30, 2012 thru March 30, 2013. As of the Saturday, April 13, 2013 the following forms have been submitted.

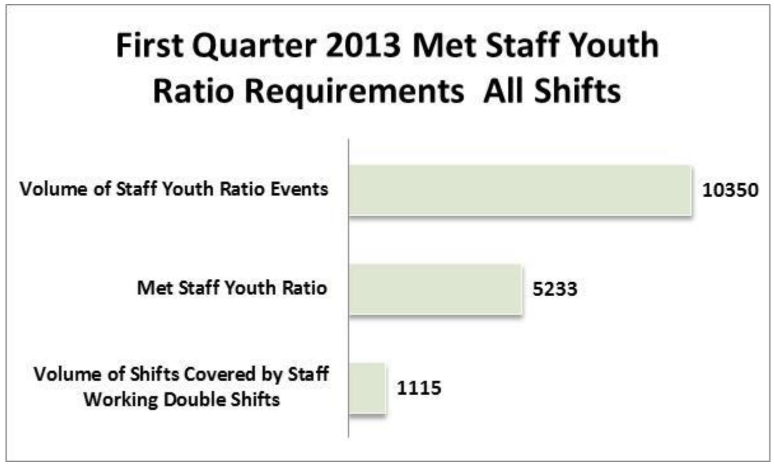
Facilities	Volume of Weeks of Staff Youth Ratio Forms Requested	Volume of Staff Youth Ratio Forms Received
CD Bayamón	13	13
CTS Bayamón Fase Tratemiento	13	13
CTS Guayama	13	13
CTS Humacao	13	13
CTS Villalba	13	13
Guaili	13	13
CREANDO	4	4
Totals	82	82



DCR submitted a total of 82 facility staff youth ratio forms for the seven operational facilities requiring staff youth ratios, allowing for 100% of the staff youth ratio forms being available for analysis. DCR has consistently been providing all requested Staff Youth Ratio forms used for monitoring and reporting. CREANDO was operational for four weeks of the first quarter reporting period. The table displaying the date that staff youth ratio forms were received is on page 15 of this report.

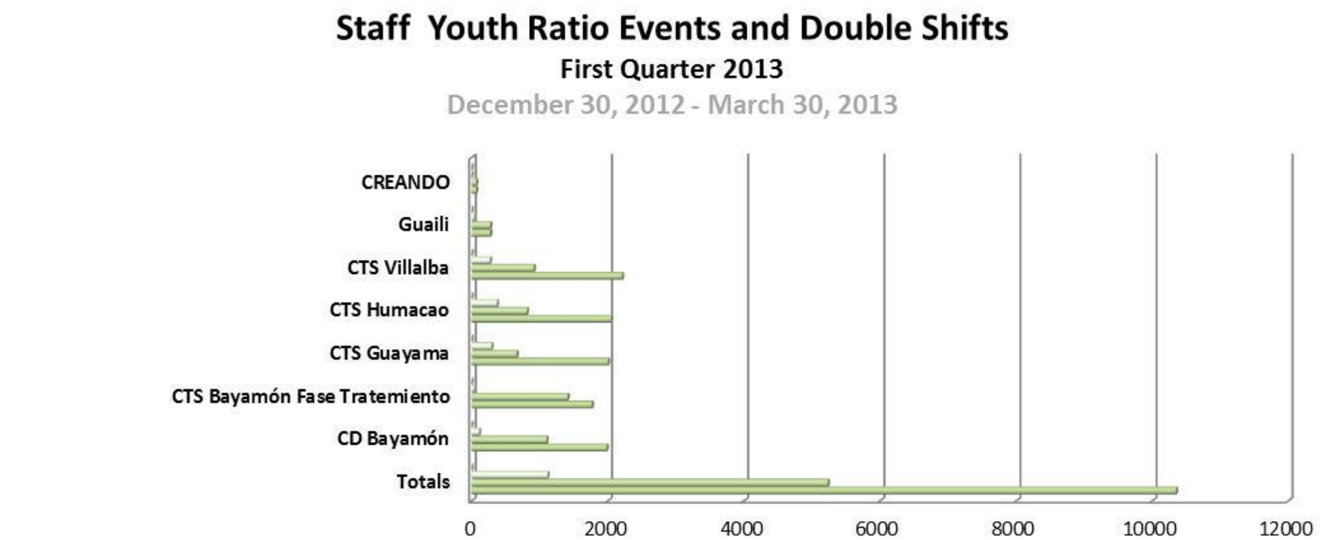
DCR Staff Youth Ratio Averages:

During the First Quarter 2013 reporting period (December 30, 2012 thru March 30, 2013), DCR documented a total of 10,350 shift / unit events that required staff to youth supervision. This is a decrease of 572 staff youth supervision events since the Fourth Quarter of 2012 (10,922 events). Of the 10,350 shift / unit events, 5233 of the events (50.6%) were supervised with the required staff youth ratios, the same percentage of events as the Fourth Quarter of 2012.



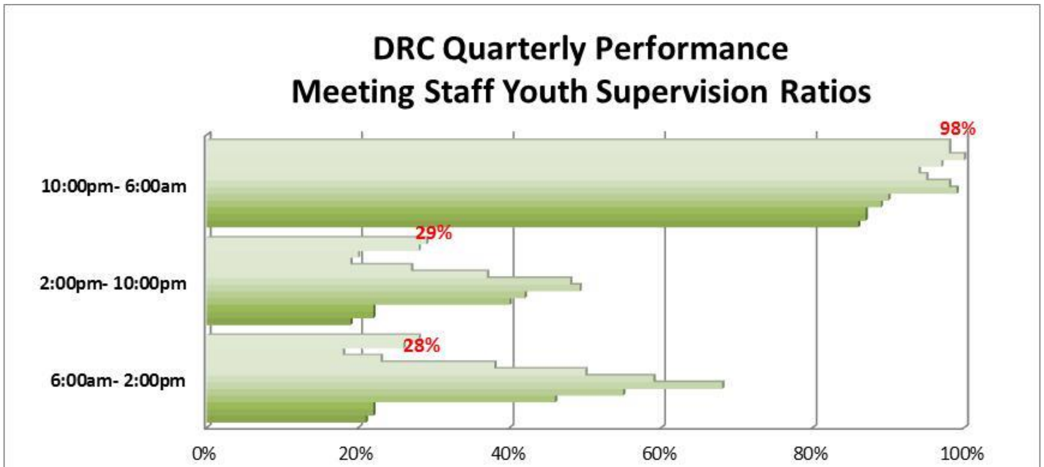
Of the 5233 staffing events meeting the required staff youth ratio, 3274 (63%) of the staffing events occurred on the 10:00 PM – 6:00 AM shift.

The First Quarter Report provides additional data on the volume of staff that are working double shifts in order to meet the reported staff youth ratios. For the 2013 First Quarter, 1115 of the 10,350 (11%) staff youth ratio events were covered by staff working a double shift. This is a 2% increase of volume of shifts requiring staff to work a double shift since the Fourth Quarter 2012 reporting period.



	Totals	CD Bayamón	CTS Bayamón Fase Tratemiento	CTS Guayama	CTS Humacao	CTS Villalba	Guaili	CREANDO
Percentage of Shifts Covered by Staff Working Double Shift	11%	5%	2%	15%	18%	12%	14%	0%
Volume of Shifts Covered by Staff Working a Double Shift	1115	109	36	291	372	268	39	0
Met Staff Youth Ratio	5233	1100	1409	661	811	913	273	66
Volume of Staff Youth Ratio Supervision Events	10350	1983	1766	2004	2048	2210	273	66

The following chart represents the DCR agency Staff Youth Ratio averages by shift for the last thirteen quarters through March 30, 2013:



	6:00am- 2:00pm	2:00pm- 10:00pm	10:00pm- 6:00am
1st Quarter 2013	28%	29%	98%
4th Quarter 2012	26%	28%	98%
3rd Quarter 2012	18%	20%	100%
2nd Quarter 2012	23%	19%	97%
1st Quarter 2012	38%	27%	94%
4th Quarter 2011	50%	37%	95%
3rd Quarter 2011	59%	48%	98%
2nd Quarter 2011	68%	49%	99%
1st Quarter 2011	55%	42%	90%
4th Quarter 2010	46%	40%	89%
3rd Quarter 2010	22%	22%	87%
2nd Quarter 2010	22%	22%	87%
1st Quarter 2010	21%	19%	86%

The First Quarter of 2013 has resulted in following performance in meeting required Staff Youth Ratios during waking hours:

- 6:00 am- 2:00 pm shift: 28% of events, 2% increase
- 2:00 pm- 10:00 pm shift: 29% of events, 1% increase
- 10:00 pm- 2:00 am shift: 96% of events, 2% decrease

<u>DCR Agency 1:1 Supervision Events:</u>

From the First Quarter of 2010 through the Third Quarter of 2012, there had been a continual reduction in the volume of youth designated for 1:1 supervision.

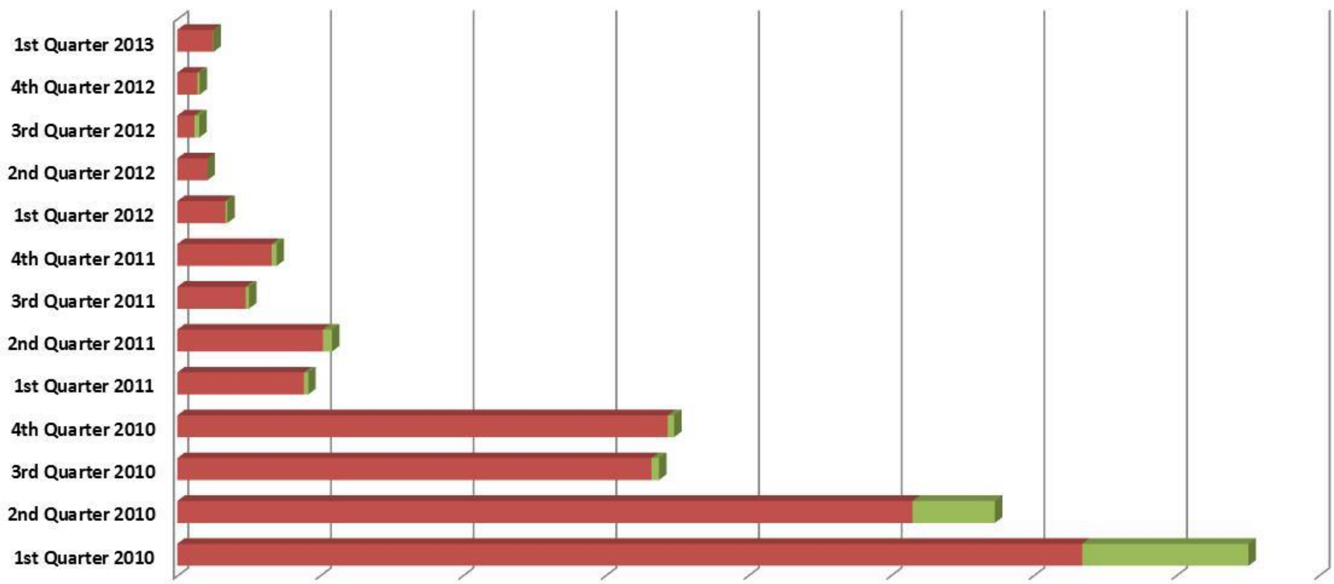
The First Quarter of 2013 reporting period indicates a continuing increase in the volume of 1:1 supervision events reported:

- 3171 events 1st Quarter 2010
- 2577 events 2nd Quarter 2010
- 1662 events 3rd Quarter 2010
- 1719 events 4th Quarter 2010
- 444 events 1st Quarter 2011
- 510 events 2nd Quarter 2011
- 240 events 3rd Quarter 2011
- 331 events 4th Quarter 2011
- 169 events 1st Quarter 2012
- 106 events 2nd Quarter 2012
- 60 events 3rd Quarter 2012
- 71 events 4th Quarter 2012
- 126 events 1st Quarter 2013

Correspondingly, the First Quarter of 2013 has a decrease in the volume of these events without required 1:1 supervision, 1 event:

- 583 events 1st Quarter 2010
- 288 events 2nd Quarter 2010
- 26 events 3rd Quarter 2010
- 22 events 4th Quarter 2010
- 15 events 1st Quarter 2011
- 32 events 2nd Quarter 2011
- 11 events 3rd Quarter 2011
- 17 events 4th Quarter 2011
- 6 events 1st Quarter 2012
- 0 events 2nd Quarter 2012
- 17 events 3rd Quarter 2012
- 7 events 4th Quarter 2012
- 1 events 1st Quarter 2013

DRC 1:1 Supervision Events by Quarters

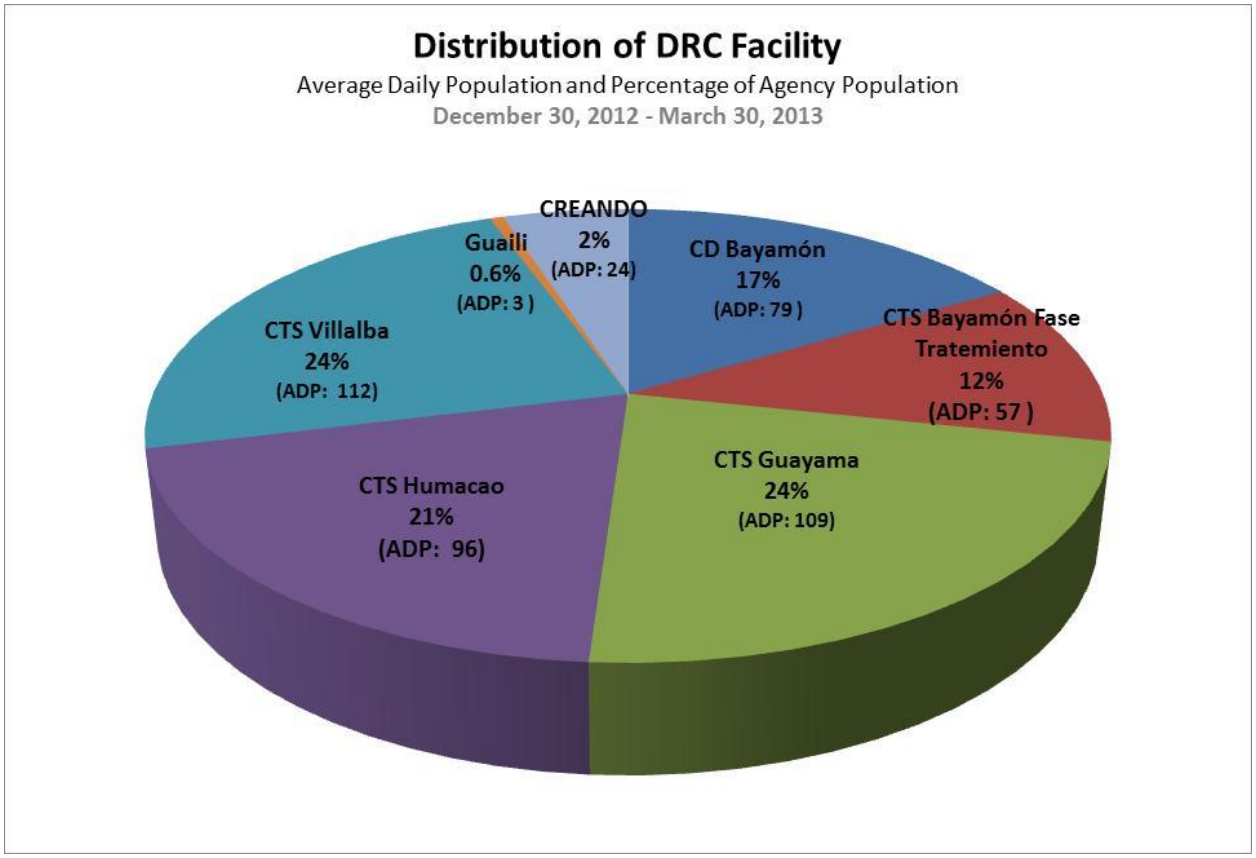


	1st Quarter 2010	2nd Quarter 2010	3rd Quarter 2010	4th Quarter 2010	1st Quarter 2011	2nd Quarter 2011	3rd Quarter 2011	4th Quarter 2011	1st Quarter 2012	2nd Quarter 2012	3rd Quarter 2012	4th Quarter 2012	1st Quarter 2013
Percentage of Events Without 1:1 Supervision	18%	11%	2%	1%	3%	6%	5%	5%	4%	0%	28%	10%	1%
Volume of 1:1 Staff Youth Supervision Events	3171	2577	1662	1719	444	510	240	331	169	106	60	71	126
Volume Events Without 1:1 Supervision	583	288	26	22	15	32	11	17	6	0	17	7	1

DCR Average Daily Population:

Analysis of Staff Youth Ratio forms displays staffing information compared to facility average daily population (ADP). Facility average daily population was computed from the weekly Staff Youth Ratio forms by averaging the 6:00-2:00 shift facility population on the first Monday of each of the thirteen reporting weeks.

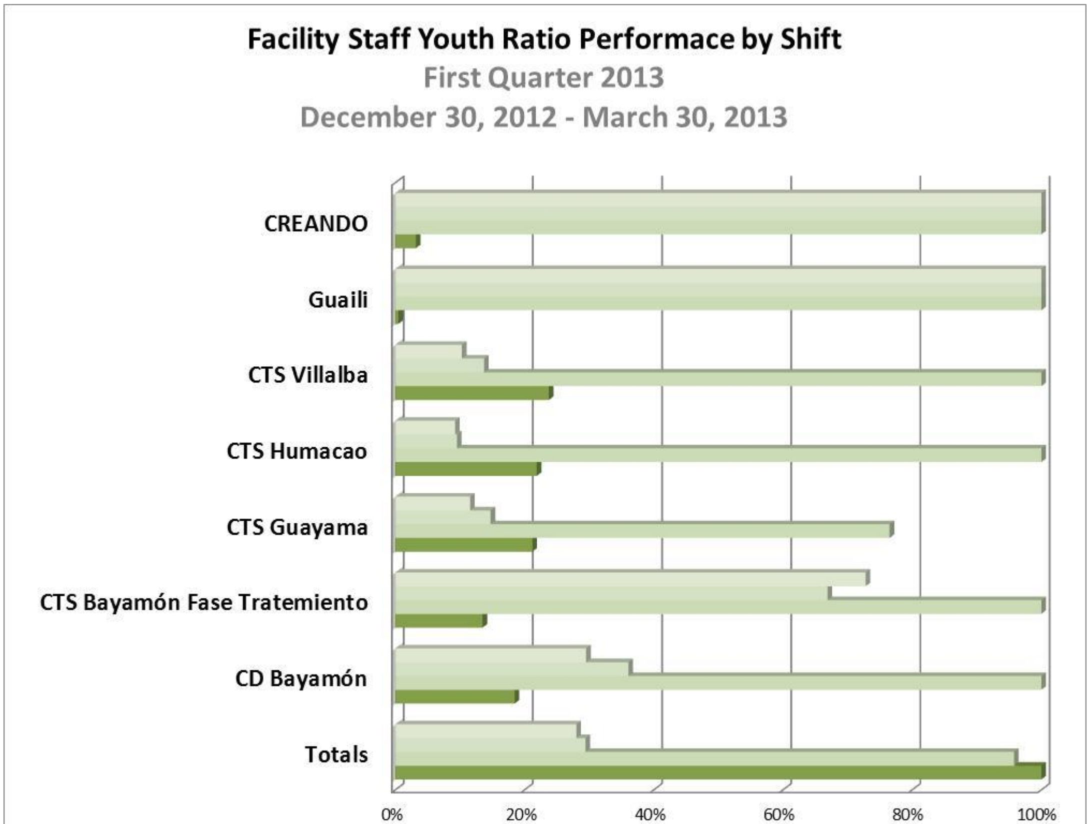
The table below displays each facility's average daily population for the reporting cycle (December 30, 2012 thru March 30, 2013) as well as the proportionate facility youth population that each facility contributes to the agency average daily population.



<u>Facility Staff Youth Ratio Performance by Shift:</u>

The staff youth ratio analysis below represents the staffing information received for the period from (December 30, 2012 thru March 30, 2013; 13 weeks). The dark green bar for each facility represents the proportionate average daily population that facility contributes to the DCR average daily population. The table of average daily population can be found on page 15 of this report.

During the First Quarter reporting period (December 30, 2012 thru March 30, 2013), CTS Guayama, CTS Humacao and CTS Villalba have the largest volume of deficiencies meeting the staffing youth ratio, representing 67% of the DCR youth population.



	Totals	CD Bayamón	CTS Bayamón Fase Tratemiento	CTS Guayama	CTS Humacao	CTS Villalba	Guaili	CREANDO
Met Staff Youth Ratio 2:00- 10:00 Events	28%	30%	73%	12%	9%	10%	100%	100%
Met Staff Youth Ratio 6:00 - 2:00 Events	29%	36%	67%	15%	10%	14%	100%	100%
Met Staff Youth Ratio 10:00 - 6:00 Events	96%	100%	100%	77%	100%	100%	100%	100%
Percentage of DRC Agency Population	100%	18.5%	13.5%	21.2%	21.9%	23.8%	0.4%	3.2%

CD Bayamón Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Level 5 Facility: DCR has CD Bayamon as a detention center, classified as a Level 5 facility.

At this time all of the detention youth population is expected to meet the following Staff Youth ratios:

- **A Staff Youth Ratio of 1:8 during 6:00 AM - 2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM-6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

- **Volume of Staff Youth Ratio Events: 1983**
- **Volume of Staffing Events with Staff Working a Double Shift: 109 (5%)**

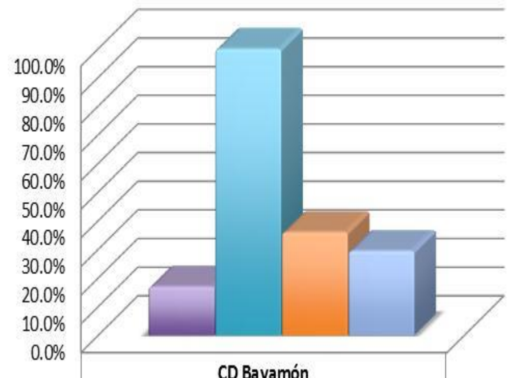
The First Quarter of 2013 Staff Youth Ratio requirements display the following characteristics:

- **10:00pm - 6:00am: 100% required staff youth ratio, a 2% increase**
- **6:00 am – 2:00 pm: a 10% increase since 2012 Fourth Quarter reporting**
- **2:00 pm – 10:00 pm: a 5% increase since 2012 Fourth Quarter reporting**

Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 92

CD Bayamón
Percent of Unit Events Meeting Staff Youth Ratio

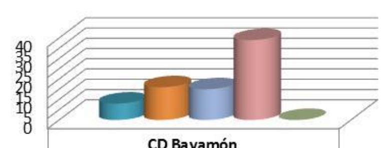


	CD Bayamón
Percentage of AIJ Agency Population	17.1%
Percentage of Time Met Staff Youth Ratio 10:00 - 6:00	100%
Percentage of Time Met Staff Youth Ratio 6:00 - 2:00	36%
Percentage of Time Met Staff Youth Ratio 2:00- 10:00	30%

39 youth supervision events for the First Quarter of 2013

Volume of 1:1 Events Without Required staffing during reporting period: **0**

CD Bayamón
1:1 Supervision Events



	CD Bayamón
Youth Assigned 1:1 Staff Youth Supervision 10:00 - 6:00	8
Youth Assigned 1:1 Staff Youth Supervision 6:00 - 2:00	16
Youth Assigned 1:1 Staff Youth Supervision 2:00- 10:00	15
Total Youth Assigned 1:1 Staff Youth Supervision Events: First Quarter 2013	39
Volume of Events without 1:1 Supervision	0

CTS Bayamón Fase Tratemiento Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Level 4 and 5 Facility: The youth placed at CTS Bayamón Fase Tratemiento, are in one of two Puertas units; one of two MER units; or one of Nivel IV units; or one of three Program Arbitraje units. At this time all for these youth populations are expected to meet the following Staff Youth ratios:

- **A Staff Youth Ratio of 1:8 during 6:00 AM - 2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM- 6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

- **Volume of Staff Youth Ratio Events: 1766**
- **Volume of Staffing Events with Staff Working a Double Shift: 36 (2%)**

The First Quarter of 2013 Staff Youth Ratio requirements display the following characteristics:

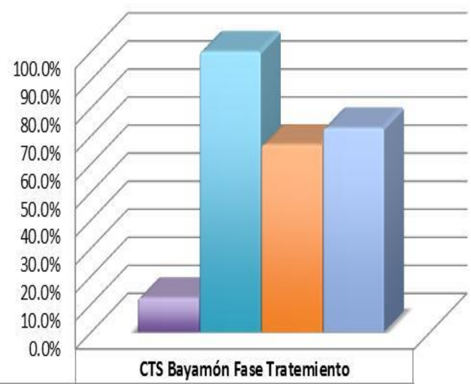
- **10:00pm- 6:00am: maintained 100% required staff youth ratio**
- **6:00 am – 2:00 pm: a 16% increase in meeting staff youth ratio requirements since the Fourth Quarter reporting**
- **2:00 pm – 10:00 pm: a 5% increase in meeting staff youth ratio requirements since the Fourth Quarter reporting**

Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 9

CTS Bayamón Fase Tratemiento

Percent of Unit Events Meeting Staff Youth Ratio

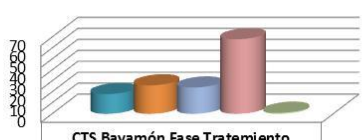


	CTS Bayamón Fase Tratemiento
Percentage of All Agency Population	12.3%
Percentage of Time Met Staff Youth Ratio 10:00 - 6:00	100%
Percentage of Time Met Staff Youth Ratio 6:00 - 2:00	67%
Percentage of Time Met Staff Youth Ratio 2:00- 10:00	73%

68 youth supervision events for the First Quarter of 2013

Volume of 1:1 Events Without Required staffing during reporting period: **1**

CTS Bayamón Fase Tratemiento
1:1 Supervision Events



	CTS Bayamón Fase Tratemiento
Youth Assigned 1:1 Staff Youth Supervision 10:00 - 6:00	18
Youth Assigned 1:1 Staff Youth Supervision 6:00 - 2:00	26
Youth Assigned 1:1 Staff Youth Supervision 2:00- 10:00	24
Total Youth Assigned 1:1 Staff Youth Supervision Events: First Quarter 2013	68
Volume of Events without 1:1 Supervision	1

CTS Guayama Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Both a Level 2 and 3 Facility:
Guayama staff youth ratio is being analyzed as follows:

- **A Staff Youth Ratio of 1:8 during 6:00 AM -2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM - 6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

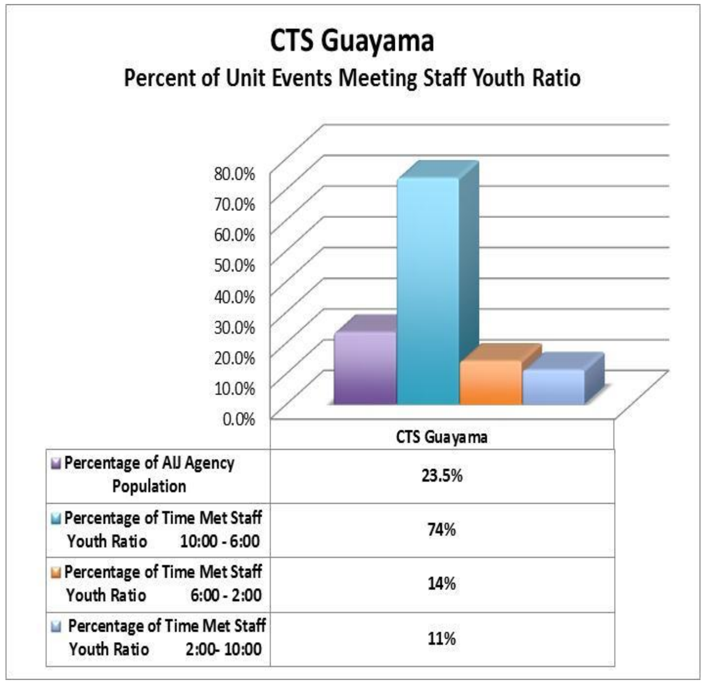
- **Volume of Staff Youth Ratio Events: 1845**
- **Volume of Staffing Events with Staff Working a Double Shift: 291 (16%)**

The First Quarter of 2013 Staff Youth Ratio requirements display the following characteristics:

- **10:00pm- 6:00am: 11% decrease since 2012 Fourth Quarter reporting period**
- **6:00 am – 2:00 pm: a 2% increase since 2012 Fourth Quarter reporting**
- **2:00 pm – 10:00 pm: a 1% increase since 2012 Fourth Quarter reporting**

Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 92



6 youth supervision events for the First Quarter of 2013

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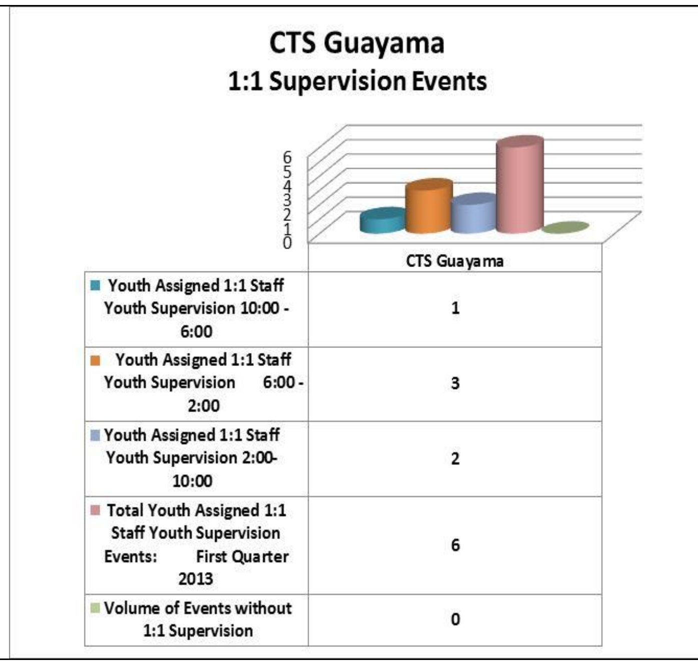
Volume of 1:1 Events Without Required staffing during reporting period: **0**



CTS Humacao Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Level 4 Facility:

- **A Staff Youth Ratio of 1:8 during 6:00 AM-2:00 PM and 2:00 PM -10:00 PM and**
- **A Staff Youth Ratio of 1:16 during 10:00 PM -6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

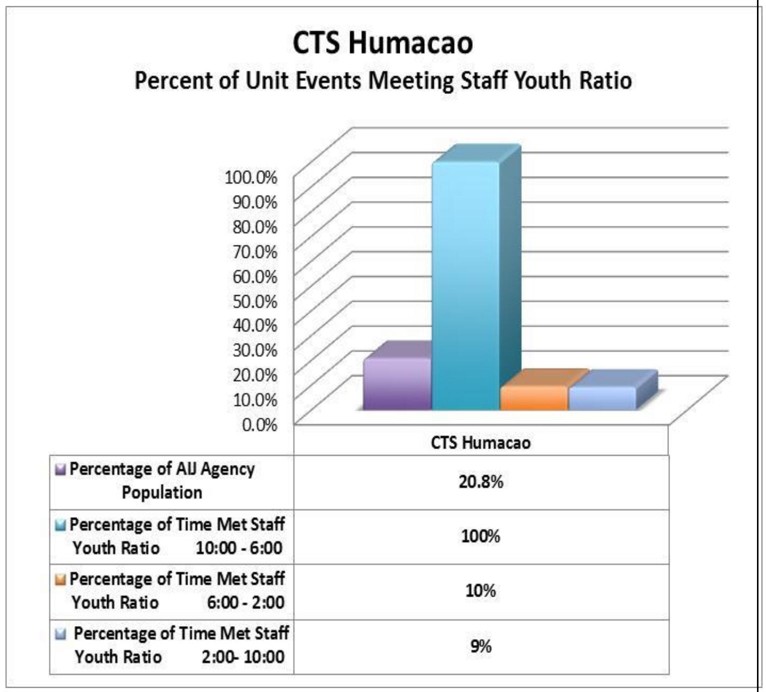
- **Volume of Staff Youth Ratio Events: 2048**
- **Volume of Staffing Events with Staff Working a Double Shift: 372 (18%)**

The First Quarter of 2013 Staff Youth Ratio requirements display the following characteristics:

- **10:00pm- 6:00am: maintained at 100%**
- **6:00 am – 2:00 pm: a 5% decrease since 2012 Fourth Quarter reporting**
- **2:00 pm – 10:00 pm: a 2% decrease since 2012 Fourth Quarter reporting**

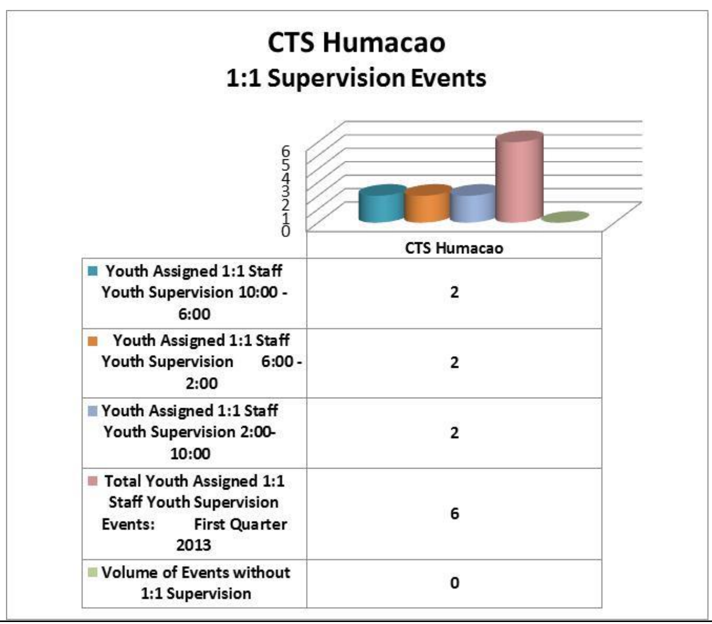
Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 92



6 youth supervision events for the First Quarter of 2013

Volume of 1:1 Events Without Required staffing during reporting period:	**0**



CTS Villalba Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Level 5 Facility:

- **A Staff Youth Ratio of 1:8 during 6:00 AM - 2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM -6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

- **Volume of Staff Youth Ratio Events: 2210**
- **Volume of Staffing Events with Staff Working a Double Shift: 168 (12%)**

The First Quarter of 2013 Staff Youth Ratio requirements display the following characteristics:

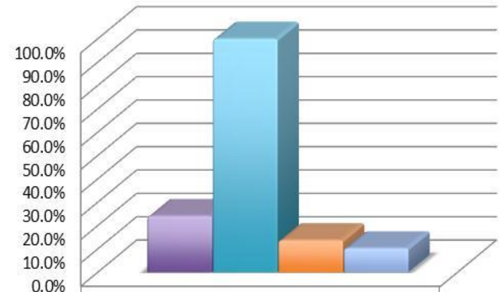
- **10:00pm- 6:00am: maintained at 100%**
- **6:00 am – 2:00 pm: a 1% increase since 2012 Fourth Quarter reporting**
- **2:00 pm – 10:00 pm: a 5% decrease since 2012 Fourth Quarter reporting**

Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 92

CTS Villalba

Percent of Unit Events Meeting Staff Youth Ratio



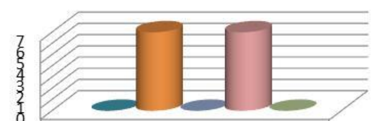
	CTS Villalba
Percentage of All Agency Population	24.1%
Percentage of Time Met Staff Youth Ratio 10:00 - 6:00	100%
Percentage of Time Met Staff Youth Ratio 6:00 - 2:00	14%
Percentage of Time Met Staff Youth Ratio 2:00- 10:00	10%

7 youth supervision events for the First Quarter of 2013

Volume of 1:1 Events Without Required staffing during reporting period: 0

CTS Villalba

1:1 Supervision Events



	CTS Villalba
Youth Assigned 1:1 Staff Youth Supervision 10:00 - 6:00	0
Youth Assigned 1:1 Staff Youth Supervision 6:00 - 2:00	7
Youth Assigned 1:1 Staff Youth Supervision 2:00- 10:00	0
Total Youth Assigned 1:1 Staff Youth Supervision Events: First Quarter 2013	7
Volume of Events without 1:1 Supervision	0

Guaili Staff Youth Ratio Analysis:

December 30, 2012 thru March 30, 2013

Level 2 Facility:

- **A Staff Youth Ratio of 1:8 during 6:00 AM - 2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM -6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 13 of 13 requested

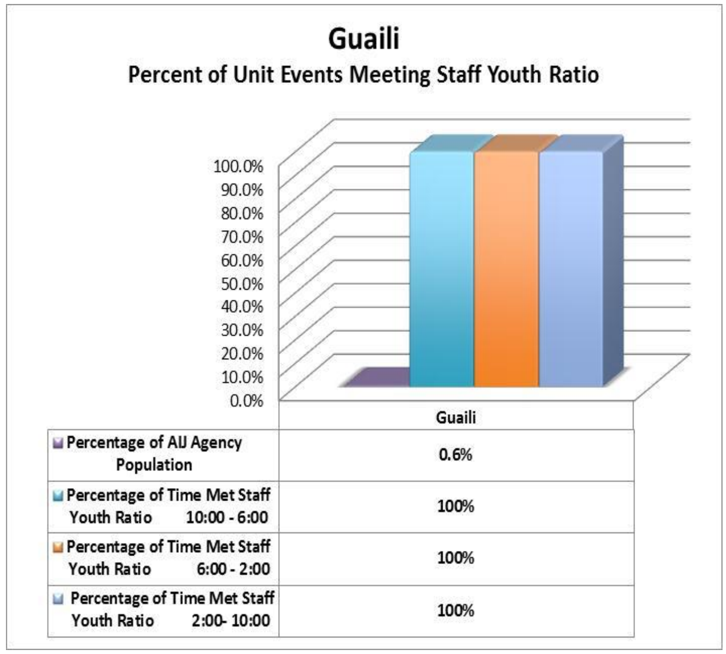
- **Volume of Staff Youth Ratio Events: 273**
- **Volume of Staffing Events with Staff Working a Double Shift: 39 (14%)**

Guaili has maintained Staff Youth Ratio expectations for all thirteen quarters of 2010, 2011, 2012 and first quarter 2013 reporting periods.

Guaili represents 0.6% of the DCR institutional population.

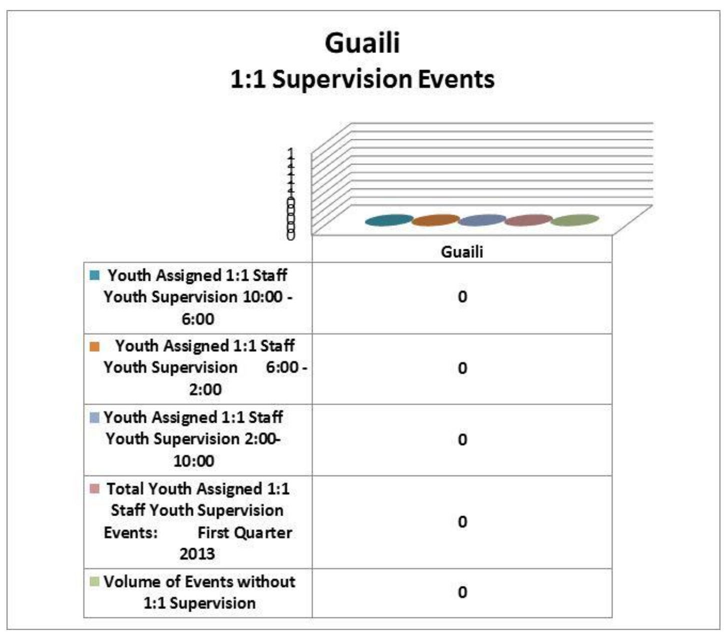
Volume of Weeks Analyzed: 13

Volume of Days Analyzed: 92



Guaili reported no youth on 1:1 supervision for the Fourth Quarter.

Volume of 1:1 Events Without Required staffing during reporting period: **0**



CREANDO Staff Youth Ratio Analysis:

September 30, 2012 thru November 20, 2012

Level 2 Facility:

- **A Staff Youth Ratio of 1:8 during 6:00 AM - 2:00 PM and 2:00 PM -10:00 PM**
- **A Staff Youth Ratio of 1:16 during 10:00 PM -6:00 AM**

Percent of Forms Available: 100%
Volume of Weeks Analyzed: 4 of 4 requested

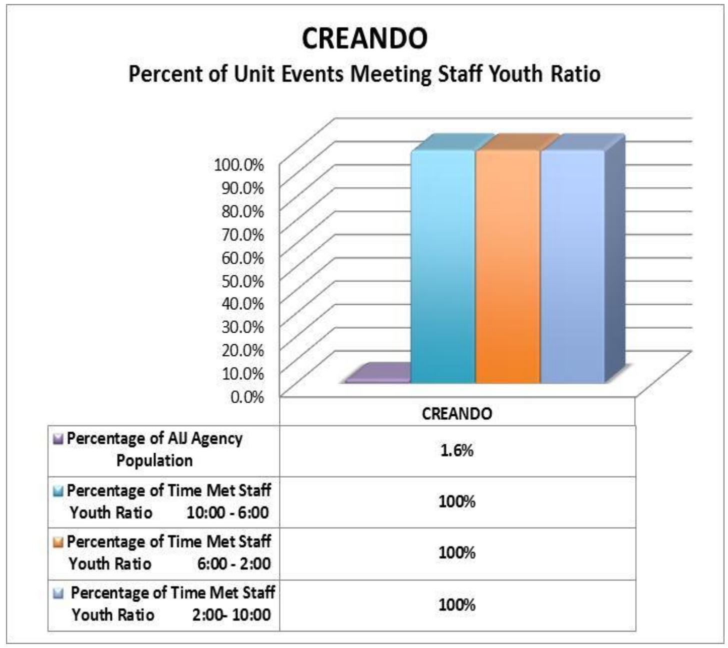
- **Volume of Staff Youth Ratio Events: 66**
- **Volume of Staffing Events with Staff Working a Double Shift: 0 (0%)**

For the First Quarter reporting period, CREANDO was in operation from March 9, 2013 for 22 days of the reporting period.

CREANDO represents 1.6% of the DCR institutional population.

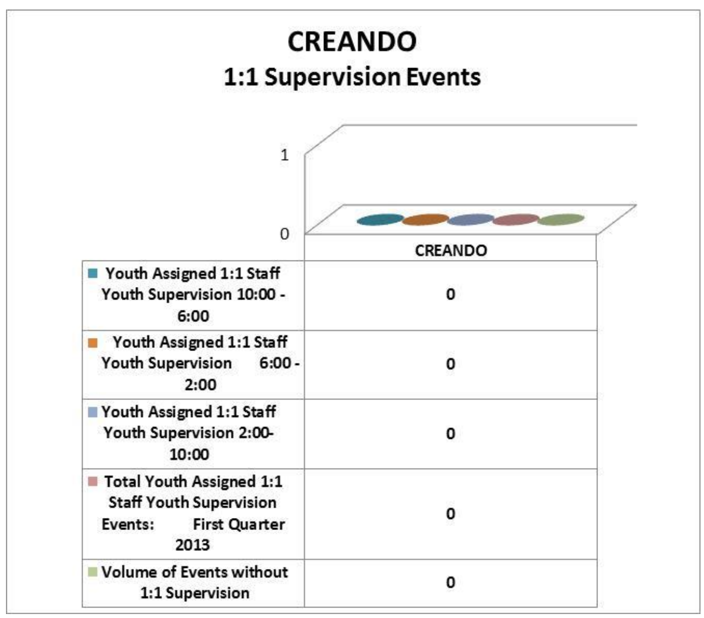
Volume of Weeks Analyzed: 4

Volume of Days Analyzed: 22



CREANDO reported no youth on 1:1 supervision for the Fourth Quarter.

Average volume of youth assigned 1:1 staff youth supervision per reported day:	**0**
Volume of 1:1 Events Without Required staffing during reporting period:	**0**



<u>Facility Table of Shift Compliance with Staff Youth Ratio:</u>

First Quarter 2013 Staff Youth Ratio Performance by Shift	Percent of Staff Youth Ratio Forms Received	Percentage of AIJ Agency Population	Percentage of Time Met Staff Youth Ratio 10:00 - 6:00	Percentage of Time Met Staff Youth Ratio 6:00 - 2:00	Percentage of Time Met Staff Youth Ratio 2:00- 10:00	Average Daily Population
CD Bayamón	100%	17.1%	100%	36%	30%	79
CTS Bayamón Fase Tratemiento	100%	12.3%	100%	67%	73%	57
CTS Guayama	100%	23.5%	77%	15%	12%	109
CTS Humacao	100%	20.8%	100%	10%	9%	96
CTS Villalba	100%	24.1%	100%	14%	10%	112
Guaili	100%	0.6%	100%	100%	100%	3
CREANDO	100%	1.6%	100%	100%	100%	24

Facility Table of Assignment of 1:1 Supervision by Day:

First Quarter 2013 Youth Assigned 1:1 Supervision	Percent of Staff Youth Ratio Forms Received	Percentage of DRC Agency Population	Youth Assigned 1:1 Staff Youth Supervision 10:00 - 6:00	Youth Assigned 1:1 Staff Youth Supervision 6:00 - 2:00	Youth Assigned 1:1 Staff Youth Supervision 2:00- 10:00	Total Youth Assigned 1:1 Staff Youth Supervision Events: Fourth Quarter 2012
CD Bayamón	100%	17.1%	8	16	15	39
CTS Bayamón Fase Tratemiento	100%	12.3%	18	26	24	68
CTS Guayama	100%	23.5%	1	3	2	6
CTS Humacao	100%	20.8%	2	2	2	6
CTS Villalba	100%	24.1%	0	7	0	7
Guaili	100%	0.6%	0	0	0	0
CREANDO	100%	1.6%	0	0	0	0
Totals	100%	100.0%	29	54	43	126

Table of Date of Receipt of Facility Staff Youth Ratio Form:

Date	CD Bayamon	CTS Bayamón Fase Tratamiento	CTS Guayama	CTS Humacao	CTS Villalba	Guaili	Program CREANDO
December 30, 2012 - January 5, 2013	4/5/2013	2/8/2013	1/25/2013	3/22/2013	2/8/2013	2/8/2013	NA
January 6 - 12, 2013	4/9/2013	4/5/2013	1/25/2013	2/12/2013	3/22/2013	1/25/2013	NA
January 13 - 19, 2013	4/5/2013	4/5/2013	1/25/2013	2/12/2013	1/25/2013	1/25/2013	NA
January 20- 26, 2013	4/5/2013	2/14/2013	4/11/2013	2/12/2013	4/12/2013	2/14/2013	NA
January 27 - February 2, 2013	4/5/2013	4/9/2013	4/5/2013	2/12/2013	2/14/2013	2/14/2013	NA
February 3 -9, 2013	4/8/2013	4/9/2013	4/12/2013	2/14/2013	4/9/2013	2/14/2013	NA
February 10-16, 2013	4/5/2013	4/5/2013	4/12/2013	3/28/2013	4/9/2013	3/28/2013	NA
February 17 -23, 2013	4/5/2013	4/9/2013	4/5/2013	3/28/2013	4/9/2013	3/28/2013	NA
February 24 - March 2, 2013	4/5/2013	4/9/2013	4/9/2013	4/5/2013	4/5/2013	3/28/2013	NA
March 3- 9, 2013	4/9/2013	4/12/2013		4/5/2013	4/9/2013	3/22/2013	4/5/2013
March 10 - 16, 2013	4/5/2013	4/5/2013	4/5/2013	3/22/2013	4/5/2013	3/22/2013	4/5/2013
March 17- 23, 2013	4/9/2013	4/9/2013	4/5/2013	4/5/2013	4/5/2013	3/28/2013	4/9/2013
March 24- March 30, 2013	4/9/2013	4/8/2013	4/11/2013	4/5/2013	4/8/2013	4/5/2013	4/8/2013
	13	13	12	13	13	13	4
Volume of Forms Submitted	100.00%	100.00%	92.31%	100.00%	100.00%	100.00%	100.00%

Table of Date of Facility Average Daily Population Based on Monday AM Weekly Count:

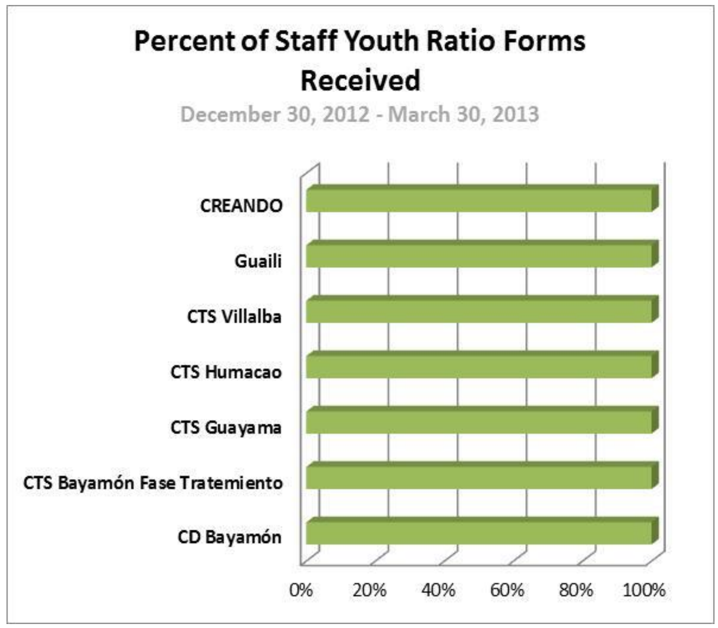
Dates of Reporting Period	CD Bayamon	CTS Bayamón Fase Tratamiento	CTS Guayama	CTS Humacao	CTS Villalba	Guaili	Program CREANDO
December 30, 2012 - January 5, 2013	87	59	108	102	113	3	NA
January 6 - 12, 2013	86	52	107	97	112	3	NA
January 13 - 19, 2013	95	52	111	104	113	3	NA
January 20- 26, 2013	94	47	105	102	113	3	NA
January 27 - February 2, 2013	82	47	109	103	113	3	NA
February 3 -9, 2013	81	49	110	98	113	2	NA
February 10-16, 2013	78	49	116	93	110	3	NA
February 17 -23, 2013	81	50	114	93	113	2	NA
February 24 - March 2, 2013	60	71	119	91	112	2	NA
March 3- 9, 2013	67	67	116	96	112	2	24
March 10 - 16, 2013	74	65	103	93	107	2	24
March 17- 23, 2013	70	65	100	91	110	3	24
March 24- March 30, 2013	72	67	97	88	110	3	24
Totals	1027	740	1415	1251	1451	34	96
Percentage of AIJ Agency Population	17%	12%	24%	21%	24%	1%	2%

Document Attachment B:
Consultant Robert Dugan Report on Classification

DCR Staffing Quarterly Report: December 30, 2012 – March 30, 2013
Prepared by Bob Dugan: Office of the Monitor: April 13, 2013

Background:
The following report provides information on Staff Youth Ratio forms that were provided to the consultant for the period of December 30, 2012 thru March 30, 2013. As of the Saturday, April 13, 2013 the following forms have been submitted.

Facilities	Volume of Weeks of Staff Youth Ratio Forms Requested	Volume of Staff Youth Ratio Forms Received
CD Bayamón	13	13
CTS Bayamón Fase Tratemiento	13	13
CTS Guayama	13	13
CTS Humacao	13	13
CTS Villalba	13	13
Guaili	13	13
CREANDO	4	4
Totals	82	82



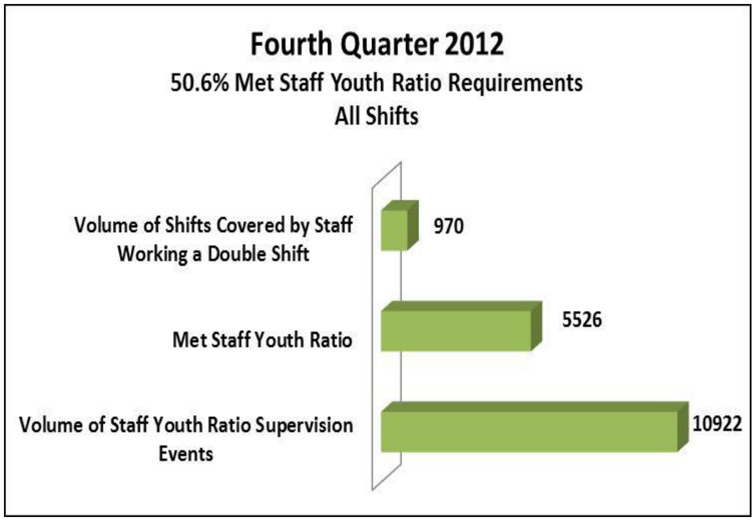
DCR submitted a total of 82 facility staff youth ratio forms for the seven operational facilities requiring staff youth ratios, allowing for 100% of the staff youth ratio forms being available for analysis. DCR has consistently been providing all requested Staff Youth Ratio forms used for monitoring and reporting. CREANDO was operational for four weeks of the first quarter reporting period. The table displaying the date that staff youth ratio forms were received is on page 15 of this report.

DCR Staff Youth Ratio Averages:

During the First Quarter 2013 reporting period (December 30, 2012 thru March 30, 2013), DCR documented a total of 10,350 shift / unit events that required staff to youth supervision. This is a decrease of 572 staff youth supervision events since the Fourth Quarter of 2012 (10,922 events).

Of the 10,350 shift / unit events, 5233 of the events (50.6%) were supervised with the required staff youth ratios, the same percentage of events as the Fourth Quarter of 2012.

Of the 5233 staffing events meeting the required staff youth ratio, 3274 (63%) of the staffing events occurred on the 10:00 PM – 6:00 AM shift.



The First Quarter Report provides additional data on the volume of staff that are working double shifts in order to meet the reported staff youth ratios. For the 2013 First Quarter, 1115 of the 10,350 (11%) staff youth ratio events were covered by staff working a double shift. This is a 2% increase of volume of shifts requiring staff to work a double shift since the Fourth Quarter 2012 reporting period.

Document Attachment C:
Report on Incidents and Understaffing
January- March 2013

The following is a table of incidents that took place at times and in locations where the required levels of staffing coverage, as specified by Paragraph 48, were not in place.

There is a possibility that some cases are missing from this table, and the Monitor's Office is assessing this possibility. If there turn out to be missing cases, the parties will be informed and an updated table will be included in the next QR.

For each of these cases, the number of youth service officers present in the housing unit did not meeting the ratio requirement of Paragraph 48, which is the same requirement as standard 115.313 of the Prison Rape Elimination Act.

Jan. 4	CTS Guayama	13-001	Afternoon	Allegedly, a couple of juveniles begun to fight after having lunch in the module's common area	1 officer, 16 juveniles
Jan. 10	CTS Humacao	13-004	Afternoon	Allegedly, two juveniles were hit by a youth officer. One of them was lacerations in his neck and the other in his nose. The incident occurred in Living Unit II-B	1 officer, 15 juveniles
Jan. 10	CD Humacao	13-005	Afternoon	Allegedly, a juvenile in Transitional Measure was hit by other juvenile when the youth officer opened his room door to provide him dinner. The incident occurred in Living Unit II-B	1 officer, 8 juveniles
Jan. 19	CTS Villalba	13-011	Afternoon	Allegedly, a group of juveniles were fighting in the bathroom area. The incident occurred in Living Unit B-1.	1 officer, 14 juveniles
Jan. 20	CTS Guayama	13-012	Night	Allegedly, a group of juveniles hit another juvenile in Living Unit 8.	1 officer, 11 juveniles
Jan. 26	CD Bayamón	13-015	Night	Allegedly, a juvenile took another juvenile to the bathroom area, put him a towel over his head and put a shank into his neck. The incident occurred in Living Unit Charlie II.	1 officer, 11 juveniles
Jan. 31	CD Bayamón	13-017	Night	Allegedly, a juvenile was taken to the bathroom area by other juveniles, sit him, put a towel or blanket over his head and hit him in different parts of his body. The incident occurred in Living Unit Alpha I.	1 officer, 13 juveniles
Feb. 5	CTS Villalba	13-021	Afternoon	A juvenile was assaulted by a group of juveniles with shanks and a piece of a razor blade. A photo in the Mistreatment Allegation Form (284) shows a juvenile with a deep cut in one of his fore arm and minor cuts in his face, including a possible	1 officer, 11 juveniles

				fracture in his nose. The victim was taken to an emergency room.	
Feb. 5	CTS Villalba	13-023	Morning	Allegedly, a group of juveniles start a fight among them while they were in recreation. Juveniles from Living Units A-2, B-2 and B-1 participated of the incident.	2 officer, 60 juveniles
Feb. 4	CTS Guayama	13-029	Night	Allegedly, a living unit leader ordered a group of youths to hit another youth while the youth officer was being distracted by other juvenile.	2 officer, 20 juveniles
Feb. 9	CTS Guayama	13-026	Afternoon	Allegedly, a group of juveniles hit another youth in Living Unit III.	1 officer, 14 juveniles
Feb. 10	CTS Villalba	13-027	Night	Allegedly, a juvenile was threatened by other youths with a piece of a razor blade and also hit with a soap bar inside a blanket. The victim also was kicked by other juveniles. The incident occurred inside the living unit.	1 officer, 15 juveniles
Feb. 27	CTS Bayamón	13-043	Afternoon	A juvenile in preventive watch cuthimself. Allegedly, no youth officer went to see him during the shift.	1 officer, 12 juveniles
Mar. 4	CTS Guayama	12-045	Afternoon	Allegedly, a juvenile was hit by a bunch of juveniles during a fight. The incident occurred in Living Unit V.	1 officer, 16 juveniles
Mar. 7	CD Bayamón	13-047	Night	Allegedly, a juvenile was hit but isn't clear if the perpetrator was another youth or a youth officer. The incident occurred in the living unit.	1 officer, 12 juveniles.
Mar. 12	CD Bayamón	13-055	Afternoon	Allegedly, a juvenile in therapeutic observation was hit by another youth while he was talking with the youth officer. The incident occurred in Living Unit Delta I.	1 officer, 13 juveniles
Mar. 18	CD Bayamón	13-056	Morning	Allegedly, a living unit leader sent a youth, in different occasions to molest another juvenile. The incident occurred in the living unit, apparently when the youth officer assigned was not inside the module.	0 officer, 13 juveniles
Mar. 17	CD Bayamón	13-059	Afternoon	Allegedly, a juvenile took another youth to the bathroom area and hit him in his head multiple times. The officer was in the module but, apparently did not see or heard the incident.	1 officer, 13 juveniles
Mar. 19	CTS Huamacao	13-061	Afternoon	Allegedly, a juvenile was hit and sprayed with "pepper spray" by a youth officer without any reason. The incident occurred in the living unit during lunch time.	1 officer, 11 juveniles

Document Attachment D:
Abuse Referrals Tracking Report

The following tables summarize statistics about case management for the four quarters of 2012. The underlying source of the information is the tracking database maintained by AIJ along with other records.

The first table summarizes overall incident statistics, and then describes the incidents suicide and self-mutilation incidents known to mental health staff. Many of these do not warrant abuse allegations.

Statistics for 2012-2013		2012-2nd	2012-3rd	2012-4th	2013-1st
Incidents		188	158	187	178
	Suicidal Incidents	25	13	14	14
	Self-Mutilation Incidents	46	26	28	28
Suicidal Incidents (From M/H Records)		25	13	14	14
	Youth Involved	24	13	11	13
	Cases involving ideation only	23	12	13	13
	Cases involving suicide intention	1	0	0	0
	Cases w/ ambulatory treatment	23	13	12	13
	Cases with hospitalization	2	0	2	1
	Cases leading to death	0	0	0	0
	Cases with 284a report filed	0	0	1	0
Self-Mutilations Incidents (MH records)		46	26	28	28
	Youth Involved	39	21	25	14
	Cases requiring sutures	1	0	0	0
	Cases requiring hospitalization	2	0	0	0
	Cases leading to death	0	0	0	0
	Cases with a 284a report filed	7	2	3	2

The above cases come from mental health records. AIG has implemented a screening procedure and instrument that diverts the investigation of some incidents from the Paragraph 78 process to a recently developed mental health process. Of the 178 suicide and self-mutilation incidents for the fourth quarter, two resulted in a Paragraph 78a abuse referral. The remaining cases were to be referred to the mental health process.

The second table concerns incidents that warranted abuse referrals.

Statistics for 2012-2013		2012-2nd	2012-3rd	2012-4th	2013-1st
284 A Incidents		85	81	81	66
	Level Two Incidents	68	61	69	51
	Referrals to SAISC	68	61	69	51
	Suicide Ideation/Attempt	0	0	1	0
	Self-Mutilation Idea/Attempt	7	4	3	2
	Youth-to-Youth Incidents	55	53	42	34
	Youth-to-Youth Injuries	26	18	37	17
	Youth-to-Youth with External Care	14	12	10	14
	Youth-to-Youth Sexual	5	5	3	2
	Youth-to-Youth Sexual w/ Injury	0	0	0	0
	Staff-to-Youth Incidents	30	28	38	32
	Staff-to-Youth Injuries	10	13	16	11
	Staff-to-Youth with External Care	1	5	1	7
	Staff-to-Youth Sexual	0	2	1	1
	Staff-to-Youth Sexual with Injury	0	0	0	0
	SOU 284A Interventions	3	1	4	2
	284A with Item 5 completed	75	70	65	56
	284A with Staffing Compliance	41	56	42	39

The next table summarizes initial case management.

Statistics for 2012-2013		2012-2nd	2012-3rd	2012-4th	2013-1st
Initial Case Management					
	284A percent with admin actions	88%	86%	90%	90%
	284A Within 24 hours	86%	95%	99%	94%
	284A Within 72 hours	8%	5%	1%	99%
	284B or Local Report Within 5 days	N/A	N/A	N/A	N/A
	284B or Local Report Within 15 days	N/A	N/A	N/A	N/A
	284B or Local Report Within 20 days	44%	66%	83%	80%

The 20-day completion rate for local investigations is gradually improving.

The following table concerns referrals and investigations of cases to and by OISC, which is the new title for the investigation unit previously referred to as "SAISC."

Statistics for 2012-2013		2012-2nd	2012-3rd	2012-4th	2013-1st
OISC					
	Cases Referred from this quarter	57	63	69	51
	Referred Within 1 day	26	30	41	42
	Referred Within 3 days	20	9	15	1
	Referred Within 10 Days	11	24	13	8
	Referred Within 20 Days	0	0	0	0

Paragraph 78.c requires that cases are to be provided to the OISC investigator responsible for the facility involved within 24 hours of knowledge of the incident. There appears to be an improvement in the timely referral of cases to OISC.

The following table summarizes the SAISC investigation durations for the cases involved.

Statistics for 2012-2013		2012-2nd	2012-3rd	2012-4th	2013-1st
OISC Investigation Durations					
	Completed in less than 10 workdays	0	0	0	0
	Completed in 11-20 workdays	1	1	2	1
	Completed in 21-30 workdays	1	0	6	0
	Completed in 31-45 workdays	2	7	1	0
	Completed in more than 45 workdays	7	0	0	2
	Completed in a subsequent quarter	54	44	60	27
	Not completed yet.	65	43	54	66
	Returned for Further investigation	7	2	1	0
	Further Investigation Completed	3	4	0	0

Paragraph 78.e requires that OISC complete investigations within 30 days. For the first quarter of 2013, there were 51 cases referred to OISC, and 1 was completed within the 30-day limit specified in Paragraph 78.e. OISC reports that another 2 were completed within more than 45 work days and another 27 were completed in a subsequent quarter.

None of the cases initially completed by OISC were returned by the Commonwealth Department of Justice for further investigation.

The following table summarizes the decisions and actions taken in cases that do not involve criminal charges.

Statistics for 2012-2013	2012-2nd	2012-3rd	2012-4th	2013-1st
Administrative Determinations				
Cases with youth discipline referrals	60	90	74	46
Cases with youth discipline actions	45	67	41	37
Cases with youth no discipline actions	13	23	29	9
Cases staff/youth with determinations	0	2	0	0
Cases recommending personnel actions	0	5	0	0
Determinations Completed - Prior Qtr	13	0	0	43
Recmd Personnel Action – prior Qtr	5	0	0	61

Because the some cases are still in process, administrative determinations and actions may be taken in the future. The table will be updated for each quarter in future Quarterly Reports.

The following table concerns prosecutorial determinations. Because cases are still in process, it can take several quarters for the final determinations to be made.

Statistics for 2012-2013	2012-2nd	2012-3rd	2012-4th	2013-1st
Prosecutorial Determinations	1	0	0	0
Cases with no determinations	0	0	2	0
Cases with decision not to prosecute	3	1	0	2
Cases with referral for prosecution	0	0	0	5
Total cases documented				

Document Attachment E:
Abuse Referral Case Assessment Report
January-March 2013

The Monitor's Office has developed an instrument to assess how abuse allegation cases are investigated and managed. This instrument is designed to assess whether a sample of cases meet the quality and timeliness criteria in the Settlement Agreement. It consists of six parts which are to be completed by different participating agencies in the investigation process. The six parts are:

- A. Initial Reporting and Investigation (completed by the facility where the incident is alleged to have taken place.
- B. Police and Prosecutorial Investigation (to be completed by the Puerto Rico Department of Justice in consultation and coordination with the Puerto Rico Police and the prosecutors within the Department of Justice.)
- C. Facility Investigation (to be completed by UEMNI)
- D. SAISC Investigation (to be completed by SAISC)
- E. Case Tracking and Outcomes (to be completed by the Puerto Rico Department of Justice.)
- F. Monitor's Office Assessment

For each item in the instrument, an answer of "Y" or "NA" (not applicable) is intended to mean that there was compliance or an absence of non-compliance with the requirements of the Settlement Agreement. An answer of "N" indicates that a substantive or timeliness criterion was not met.

As the instrument is fully implemented, sampling will be determined by the Monitor's Office and may vary from quarter to quarter as to the types of cases selected. The general approach is that at the end of each quarter, the Monitor's Office will provide a list of 25-50 cases for which the instrument is to be completed and transmitted to the Monitor's Office within one week of receipt of the list of cases. These cases will involve incidents that took place during the quarter previous to the most recent quarter. For example, for March-April-May, the cases will be selected from January-February-March. This will provide sufficient time for investigations to be completed and final determinations to be made.

Note: In each table, the numbers refer to number of "Y" cases that were rated as compliant with respect to the topic. Thus "20 of 21" means that 20 of the 21 cases were rated as complying with the provision requirement.

The first table relates to initial incident reporting.

Case Assessment Instrument – Section A – Initial Reporting		
Assessment Criterion	**Status Y/N/NA**	**Comment**
A.1 Was the incident promptly reported?	Y-29, N-6	The percentage for this report is 83%. The percentage in the last Quarterly Report was 97%.
A.2 Were appropriate administrative actions taken to protect the victim(s)?	Y-35	The percentage for this report is 100%. The percentage in the last Quarterly Report was 97%.
A.3 If injury was suspected, was the victim promptly evaluated for injury by health care personnel?	Y-34, N-1	The percentage for this report is 97%. The percentage in the last Quarterly Report was 97%.
A.4 Was evidence preserved?	Y-6, N/A-29	The percentage for this report is 17%. The percentage in the last Quarterly Report was 27% In this reporting period 22 Level II cases were selected.
A.5 Was investigation initiated promptly?	Y-33, N-2	The percentage for this report is 94%. The percentage in the last Quarterly Report was 100%.
A.6 Was the 284-A filed within 24 hours?	Y-27, N-8	The percentage for this report is 77%. The percentage in the last Quarterly Report was 92%. **Reduced Compliance**
A.7 Did the reporting official file an incident report before the end of shift?	Y-26, N-4, N/A-5	The percentage for this report is 74%. The percentage in the last Quarterly Report was 100%. **Reduced Compliance**
A.8 If this was a serious incident, was SAISC notified within 24 hours?	Y-31, N-4	The percentage for this report is 89%. The percentage in the last Quarterly Report was 97%.
A.9 Was the AIJ preliminary investigation reported within 24 hours to the Police Department, the Department of Family Services, the Department of Corrections, and the AIJ Administration.	Y-27, N-8	The percentage for this report is 77%. The percentage in the last Quarterly Report was 94%. **Reduced Compliance**
A.10 Were any youths suspected as perpetrators separated from the victim(s)?	Y-13, N-6, N/A-16	The percentage for this report is 37%. The percentage in the last Quarterly Report was 64% **Reduced Compliance**
A.11 If the case was serious, were the police notified that the case was serious within 24 hours?	Y-31, N-4	The percentage for this report is 89%. The percentage in the last Quarterly Report was 97%
A.12 Did the initial investigation accurately list all youth and staff witnesses?	Y-26, N-2, N/A-7	The percentage for this report is 74%. The percentage for the last Quarterly Report was 70%.
A.13 Did all staff witness's document what they knew or saw before the end of shift?	Y-35	The percentage for this report is 100%. The percentage in the last Quarterly Report was 100%.

A.14 If there was timeliness non-compliance, was related to shortage of staffing?	Y-3, N-13, N/A-19	The percentage for this report is 1%. The percentage in the last report was 28%. A low percentage is a positive fact.
A.15 At the location of the incident at the time of the incident, was staffing compliant with Settlement Agreement requirements?	Y-12, N-13, N/A-2, Blank-8	The percentage for this report is 34%. The percentage in the last Quarterly Report was 33%

Case Assessment Instrument – Section B – Police and Prosecutorial Investigation		
Assessment Criterion	**Status Y/N/NA**	**Comment**
B.1 Was the incident report received from the facility within 24 hours of the time recorded as the point of knowledge of the incident?	Y-24, N-1, N/A-4	For this reporting period the PRDOJ sent information related to 29 of the selected cases.
B.2 If the case was considered serious by the facility where the incident took place, were the police contacted within 24 hours?	Y-23, N-1, N/A-4, Blank-1	
B3. Were PRPD expectations met for promptly initiating an investigation?	Y-28, N-1	
B.4 Did PRPD investigators determine that evidence was appropriately preserved?	Y-16, N/A-13	
B.5 If prosecutors communicated an intent to proceed criminally, was AIJ informed to delay any compelled interview of the subject until the criminal investigation was completed?		The PRDOJ sent a table with information related to 19 of the selected cases. From that amount 13 cases were closed or terminated by the police agent or the prosecutors, 4 cases were not filed by the prosecutors, and 2 did not have complaint numbers.
B.6 Were PRPD expectations met for timeliness in completing the investigation?	Y-22, N-1, N/A-4, Blank-2	
B.7 Was completion of the investigation documented?	Y-22, N-2, N/A-4, Blank-1	
B.8 If there was timeliness non-compliance, was related to shortage of staffing?	Y-11, N-8, N/A-9, Blank-1	

Case Assessment Instrument – Section C – Facility Investigation		
Assessment Criterion	**Status Y/N/NA**	**Comment**
C.1 If there were potential injuries, did the investigation include photographs of visible injuries?	Y- 30, N-3, Blank-2	The percentage for this report is 86%. The percentage in the last Quarterly Report was 80%.
C.2 Was there a personal interview of the victim(s) with a record of the questions and answers?	Y-17, N/A-18	The percentage for this report is 49%. The percentage in the last Quarterly Report was 53%.
C.3 Was there a personal interview of the alleged perpetrator(s) with a record of the questions and answers?	Y-11, N/A-24	The percentage for this report is less than 31%. The percentage in the last Quarterly Report was 50%. **Reduced Compliance**
C.4 Was physical evidence preserved and documented?	Y-2, N-1, N/A-27, Blank-5	The percentage for this report is less than 1%. The percentage in the last Quarterly Report was than 1%.
C.5. If the incident was classified as Level I, was the investigation completed within 20 calendar days?	Y-10, N-2, N/A-23	The percentage for this report is 28%. The percentage in the last report was 44%. Twenty two cases were classified as Level II.
C.6 Was the completion of the investigation documented in the tracking database?	Y-35	The percentage for this report is 100%. The percentage in the last report was 100% The agency has a manual database.
C.7 If there was timeliness non-compliance, was related to shortage of staffing?	N/A-33, Blank-2	The answers do not represent the facilities real situation.

Case Assessment Instrument – Section D – OISC Investigation		
NOTE: Completed only for Level II cases.		
Assessment Criterion	**Status Y/N/NA**	**Comment**
D.1 If the case was a Level II case, was the referral received by SAISC within 24 hours?	Y-14, N-8	The percentage for this report is 63%. The information in the last Quarterly Report was 98%. **Reduced Compliance**
D.2 Did SAISC complete (and transmit to AIJ and the PRDOJ) an investigation within 30 calendar days of the receipt of the initial referral by SAISC?	Y-5, N-17	The percentage for this report is 23 %. The information in the last Quarterly Report less than 1%. **Improved Compliance**
D.3 Did the investigation meet SAISC's standards for investigation quality?	Y-21, Blank-1	The percentage for this report is 95%. The information in the last Quarterly Report was 98%.
D.4 Did the investigation provide a description of the alleged incident, including all involved persons and witnesses and their role?	Y-21, Blank-1	The percentage for this report is 95%. The information in the last Quarterly Report was 98%.
D.5 Did the investigation provide a description and assessment of all relevant evidence?	Y-21, Blank-1	The percentage for this report is 95%. The information in the last Quarterly Report was 98%.
D.6 Did the investigation provide proposed findings?	Blank-22	The percentage for this report is 0%. The information in the last Quarterly Report was 87%. **Reduced Compliance**
D.7 If there was timeliness non-compliance, was it related to shortage of staffing?	N-18, Blank-4	According to the information provided 18% of the cases were not completed on time due to lack of staff. In the last Quarterly Report the percentage was 19%.
D.8 Did SAISC completed the investigation within 30 days of receipt of the referral?	___	Not provided

Case Assessment Instrument – Section E – Case Tracking and Outcomes		
Assessment Criterion	**Status Y/N/NA**	**Comment**
E.1 At the time of the assessment of this case with this instrument, was the tracking database complete for this case?	N	The tracking database was not updated during this quarter. A manual version was maintained that provides for very limited analysis and reporting.
E.2 Was the initial investigation (284-A) faxed within 24 hour?		
E.3 Was the facility investigation completed within 20 days?		
E.4 If the incident was serious (involving allegations of: abuse; neglect; excessive use of force; death; mistreatment; staff-on-juvenile assaults; injury requiring treatment by a licensed medical practitioner; sexual misconduct; exploitation of a juvenile's property; and commission of a felony by a staff person or juvenile) was SAISC notified and the case referred within 24 hours?		
E.5 If applicable, was a SAISC investigation completed and transmitted to PRDOJ within 30 days of receipt by SAISC?		
E.6 Did AIJ reach an administrative determination concerning the case which is documented in the tracking database?		
E.7 Is there a document demonstrating review, by PRDOJ prosecutors of the PRPD investigation, which documents a prosecutorial determination as to whether to prosecute or not?		
E.8 If there was timeliness non-compliance, was is related to shortage of staffing?		

Case Assessment Instrument – Section F – Monitor's Office Assessment		
Assessment Criterion	**Status Y/N/NA**	**Comment**
F.1 Does the Monitor's Office confirms the timeliness facts as asserted in Page A?	Y-30, N-5	All the cases were reviewed and the Monitor's Office confirmed the information provided by the facilities 85% of the cases. The percentage in the last Quarterly Report was 91%.
F.2 Does the Monitor's Office confirms the timeliness facts as asserted in Page B?		For the first time the PRPD sent most of the information required. Twenty nine cases were sent and evaluated.
F.3 Does the Monitor's Office confirms the timeliness facts as asserted in Page C?	Y-31, N-4	The percentage for this report is 89%. The percentage in the last Quarterly Report was 92%.
F.4 Does the Monitor's Office confirms the timeliness facts as asserted in Page D?	Y-20, N-2	The percentage for this report is 90%. The percentage for the last Quarterly Report was 100%.
F.5 Does the Monitor's Office confirms the timeliness facts as asserted in Page E?		The Information was not provided.
F.6 Does the Monitor's Office confirms the investigation quality as asserted in page B?		For the first time the PRPD sent most of the information required. Twenty nine cases were sent and evaluated.
F.7 Does the Monitor's Office confirms the investigation quality as asserted in page C?	Y-31, N-4	The percentage for this report is 89 %. This percentage only means that the Monitor's Office confirms the information provided by the facilities not a percentage of compliance.
F.8 Does the Monitor's Office confirmed the investigation quality as asserted in page D?	Y-20, N-2	The percentage for this report is 90%. This percentage only means that the Monitor's Office confirms the information provided by OISC not a percentage of compliance.

Document Attachment F: Consultant Report on Facilities

United States of America v. Commonwealth of Puerto Rico
Quarterly Report
Prepared by Monitor's Consultant Curtiss Pulitzer
April, 2013

Site Visits to CD Bayamon, CTS Villalba, CTS Guayama and Meetings with DCR

This report reflects my site visits, accompanied by Javier Burgos and Ricardo Blanco our Deputy Monitors, for the above referenced facilities on February 13^{th} and 14^{th}, 2013. Below are a list of positive developments as well as persistent and new problems and maintenance issues that still remain to be addressed at many of the facilities. Unfortunately, at CTS Bayamon, there were many new air conditioning problems (**25 air conditioning units were broken**). On a positive note, many of the roof leaks at Humacao have been repaired due to a roof repair project underway at Humacao.

CTS Villalba (114 juveniles; at 95% occupancy)

I toured the facility with Pedro Ostaloza (the western region FMO director for DCR) and Raymond Pagan, and Alberto Collazo, the Physical Plant manager. The physical plant at Villalba appeared to be in generally good condition and all the housing units had been painted and all were very clean from a housekeeping perspective. While roof leaks had never been a serious issue here, as in Humacao, they are proliferating and could be very problematic if not fixed quickly. Broken air conditioning units are still a major problem and non-functioning electronic locks were another other source of concern. In addition, one of the motors in the cistern that serves the fire sprinkler system was not working correctly and could be a life safety concern in the vent of a fire.

Of greater concern are the security systems not working properly including the CCTV systems. This helped contribute to a major escape last year. On a very positive note, I had recommended during my last site visit that staff replace the non-security screws in faucets with security screws. ***I was very pleased to see that this has been completed.*** In addition, due to a broken sprinkler head in Vivienda D1, the sprinkler system risers were temporarily turned off. The sprinkler head was being fixed while I was touring the facility. The issues observed are described below for each of the Housing units in the order they were toured.

Vivienda D1:

- Due to roof leaks, the mold that had been reported in my May report and that was developing in the corner of the dayroom ceilings has gotten considerably worse. DCR said they would be sending in a team to survey all the mold conditions at Villalba.
- The A/C was still not working due to waiting for parts. The maintenance contractor was working on the units while I was there. The A/C was fixed in

rooms F131-134 and F218-221 but was not working in rooms 126-128 and 211-214.
- None of the intercoms that allow a juvenile to call for assistance to the housing unit control either to be allowed out of their rooms at night to facilitate access the toilet facilities or to call for assistance in an emergency were functioning. According the YDO's the intercoms have not worked for two years. This is apparently the case in all if the housing units

Vivienda D2:

- Due to roof leaks the mold that been developing in the corner of the dayroom ceilings was getting worse.
- The A/C was working well.

Vivienda C1:

- Due to roof leaks mold was developing in the corner of the dayroom ceilings. The mold in this pod was similar to what I observed in Housing Unit C.
- The A/C was working well
- I tested an exit door and the mini-control room released the door in under 10 seconds

Vivienda C2:

- Due to roof leaks mold was developing in the corner of the dayroom ceilings
- While the A/C had been fixed in rooms F139-142 and F 222-225 it was broken again. The air conditioning was not working well in the dayroom and in cells F145 – F147 and F225 – F232. The air handler seemed to be working but not the compressor.

Vivienda B1:

- Due to roof leaks mold was developing in the corner of the dayroom ceilings, but there was less mold growing in this pod than in C and D.
- The air conditioning had been fixed and was working well in the dayroom and in room C-147.
- The electronic locks were not working in rooms E 231 and in E 229. 224 had been fixed. DCR said they would send in 2 technicians to fix all broken locks.
- I tested both fire exit doors in this pod and door 149A could still ***not be opened electronically*** by the housing unit mini control officer.

Vivienda B2:

- Due to roof leaks mold was developing in the corner of the dayroom ceilings, but there was less mold growing in this pod as well.

- The A/C compressor was ***still broken*** on one side of the pod affecting rooms 157-159 and 233-236. Supposedly this was a thermostat problem that was being addressed.
- I tested fire exit door 167 and it was opened quickly by the mini control room officer. The vegetation in the fire exit path was still cleared.

Vivienda A1:

- Due to roof leaks mold was developing in the corner of the dayroom ceilings, and was bad here but again not as bad as in C and D.
- The air conditioning was working in the dayroom but not in rooms 106-109 and 201-204. The air handler appeared to be working but not the compressor.
- I tested fire exit door 116A and it was opened quickly by the mini control room officer however there was much dirt and dust around the door frame indicating to me that the exit door had not been opened and tested in quite some time.

Vivienda A2:

- Due to roof leaks some mold was developing in the corner of the dayroom ceilings. This unit had the least mold of all the housing areas that I toured.
- The A/C was working well, one of the few units without A/C problems.
- Room E 218 had water leaking into the room as did rooms E221. In the latter case, the water leaks were coming from the A/C units on the roof
- I spot checked fire exit door 125B and the housing unit mini control officer was able to quickly open the door electronically
- I observed that several of the sprinkler heads were missing their protective covers that direct the water from the sprinkler head as well as their escutcheon plates. I had asked Pedro to verify the validity of this observation several months ago and still have not received a reply.

In touring other locations I noted that part of the insulation in the Gym was hanging down loose from the ceiling which could cause injury to both juveniles and staff should it fall. This is fixable as was done in Humacao. DCR has examined this problem and I am waiting to hear about what repairs are planned. Also, the water leaking from the roof on to gym floor over the bleacher area ***had been fixed***.

In addition, the air conditioning in the admission, central control and the social work area were still working well***.*** While there may be problems with the security panels in the housing areas, the ones in Central Control do appear to be working.

I recommend that a complete security system audit be conducted in conjunction with an operational security audit to determine how security can be improved at Villalba.

CD Bayamon

There were 83 juveniles in CD Bayamon on the day of my site visit. In addition there were 12 juveniles in the yellow housing unit and 12 in the orange housing unit in CTS Bayamon. I was accompanied on my tour by one of the two fire safety coordinators, Betancourt and the physical plant manager Henrick Harbar as well as Pedro Gilberto.

The main problems at CD Bayamon still concern are air conditioning problems, broken plumbing fixtures, and a lack of hot water in many of the module showers. A major source of the air conditioning problems is the poor service being provided by the air conditioning vendor who has the maintenance contract for Bayamon. In addition, while many of the bathrooms were painted in the past 3 months they were already in poor condition. As I have recommended in the past, the special epoxy paint that is being used in showers and bathrooms in the Blue building at CTS Bayamon and in Guayama need to be used in CD Bayamon and the other facilities. I also observed that many of the new mattresses that AIJ had purchased in compliance with the Settlement Agreement have been damaged by the juveniles and that they have resorted to the old foam mattresses in many of the rooms which are a clear fire hazard. I was told 72 new fire retardant mattresses were on order. I was also informed that all the housing units were to be painted and that repairs to all bathrooms were planned. On a positive note, the intercoms from the rooms to the housing unit mini-controls were still working well.

Key problems and improvements that I observed include the following:

Module A-1 (10 juveniles)
- There was only partial A/C in the dayroom and no A/C in rooms 99-102 and 103-106.
- The hot water in the shower took 3 minutes to get to a lukewarm state
- The faucet handles had not yet been replaced with security screws

Module A-2 (10 juveniles)
- There was only partial A/C in the dayroom and no A/C in rooms 110-113 and 118-121.
- The hot water in the showers was working
- The faucet handles had not yet been replaced with security screws

Module B-1 (7 juveniles)
- **There was *no* A/C in the dayroom and *no* A/C in any of the rooms. This situation is unacceptable. In all the years that I have monitored the juvenile facilities, I have never encountered a total failure of the air conditioning system in a juvenile living area.**
- The faucet handles had not yet been replaced with security screws

Module B-2 (10 juveniles)
- There was adequate A/C in the dayroom and no A/C in rooms 083-086 and 090-093.
- There was no hot water in one shower
- The faucet handles had not yet been replaced with security screws

Module C-1 (9 juveniles)

- The A/C was working in the dayroom but not in rooms 019-022 and 027-030
- The hot water in the showers was working
- The door handle was missing to the pod door entering into C1
- The faucet handles had not yet been replaced with security screws
- The segregation cell adjacent to the module (Quarto 14) had a broken sprinkler head that a juvenile housed there had just broken a half hour before my arrival. Accordingly, the sprinkler system had been shut off temporarily to the adjacent modules
- I tested 2 emergency exit doors and the officer was able to release them form the control booth in under 10 seconds which was very excellent. However, there were no room labels on the exit doors I tested nor were there door handles to enable them to be reclosed and secured.

Module C-2 (14 juveniles)

- There was adequate A/C in the dayroom and no A/C in rooms 019-022 and 027-030.
- The hot water was working in the showers
- The faucet handles had not yet been replaced with security screws

Module D-1 (9 juveniles)

- The A/C was working in the dayroom as well as in the rooms. This was the ***only*** module where there were no air conditioning problems.
- The hot water in the showers was working
- The faucet handles had not yet been replaced with security screws

Module D-2 (12 juveniles)

- There A/C in the dayroom was working marginally and there was no A/C in rooms 047-049 and 027-030.
- There was no hot water in the showers
- The faucet handles had not yet been replaced with security screws
- I tested 2 emergency exit doors and the officer was able to release them form the control booth in under 10 seconds which was very excellent. There were no door handles on one of the exit doors

CTS Guayama

My primary goal at Guayama was to see the installation of new fire panels and to see if new procedures had been implemented since my last visit. I was very pleased to see the progress that had been made. Of the 15 campus buildings, 10 had new fire alarm panels. In 5 others (Housing units 2, 3, 4, 5 and Administration) the facility was waiting for funding to complete the work. The facility was waiting to complete all 15 buildings before asking the fire department to certify all the panels.

Other observations included:

- The showers and bathroom areas are still holding up well with the new treatment applied to those areas based on my recommendations.
- In Unit 3, a handicap ramp was installed in the back of the unit to facilitate emergency egress.
- The floors in the step down unit still have not been fixed.
- The officers throughout the facility now have the keys to the social workers offices where several fire alarm panels are located to be able to reset the panels if necessary. This was a recommendation I made during my last site visit.
- The facility wants to convert part of Unit 2 for juveniles returning from the community to prevent drugs and contraband from entering the facility. I raised several issues pertaining to egress and life safety that need to be addresses before any conversions can commence.
- In Units 7 and 8 the smoke detectors were not annunciating but the fire alarms were working.

Systemwide Plumbing Report

There has been positive improvement from the last quarter with 18 observed broken fixtures versus 29 last quarter. There has been a steady decrease in the number of broken fixtures since 2012 when there were 50 in the first quarter, a high of 81in the second quarter, 58 in the third quarter and down to 29 in the last quarter of 2012. The current figure is two-thirds of last quarter's. The biggest improvement was at Guayama which went from 9 broken fixtures last quarter to 2 this quarter. The remaining facilities all saw slight drops with the exception of CTS Bayamon that went up from 1 to 2 broken fixtures. CD Bayamon continues to make improvements dropping from 22 broken fixtures in the middle of 2012 to 5 broken fixtures last quarter and now down to 3. The data was collected in mid-April of this year and is summarized below:

- CD Bayamon - 3
- CTS Bayamon -2 (Blue, Orange and Yellow units)
- Guali - 0
- Guayama -2
- Humacao - 9
- Villalba - 2
- Creando - 0

The full summary appears on the following page by facility. There are also some general comments regarding observations made during the facility tours to capture the plumbing statistics.

Plumbing Conditions Summary

January - April 2013

Facility	Modules	Toilets			Urinals			Showers			Sinks			Drink Water	Hot water available		Summary of Broken Fixtures
	in use	# toilets	# broken	# available	# urinals	# broken	# available	# showers	# broken	# available	# sinks	# broken	# available		(yes/no)	Comments	
CTS Guayama	7 of 9	14	0	14	8	0	8	21	2	19	21	0	21	ok	yes	Two modules used for administrative purposes. No security screws. Facility clean, 1 A/C unit (8) out of order some ripe mattresses	**2**
CTS Humacao	7 of 8	28	1	27	28	4	24	28	2	26	28	2	26	ok	partially	Unit I-B closed for remodeling, some A/C units out of order, some rooms' doors only works manually.	**9**
CTS Villalba	8 of 8	32	1	31	32	0	32	32	1	31	32	0	32	ok	yes	Roof leaks in living units, 1 emergency door only works manually, 3 A/C units our of order, 5 rooms' doors not working	**2**
CD Bayamon	8 of 8	34	0	34	24	1	23	24	0	24	33	2	31	ok	no hot water Delta - II	Roof leaks, A/C in Bravo II out of order, no security screws.	**3**
CTS Bayamon	7 of 11	133	1	132	0	0	0	15	0	15	135	1	134	ok	yes	Security screws were installed. Gates in working conditions. Clean facility.	**2**
Guali	1	4	0	4	0	0	0	4	0	4	4	0	4	ok	yes	none	**0**
CREANDO	0	0	0	0	0	0	0	0	0	0	0	0	0			NO YOUTHS IN THIS QR	**0**
Totals	38 of 45	245	3	242	92	5	87	124	5	119	253	5	248				**18**

Document Attachment G: Monitor's Conference Minutes

United States v. Puerto Rico
Monitor's Conference - May 1-2, 2013

MINUTES

Wednesday May 1

9:00 Counsel Discussions

9:30 Statement by Secretary Negron

- Interested in community-based system
- Quality control unit – used to exist and is now being started again
- Institute for training employees is to be re-established – will not depend on the adult system academy

11:00 Facilities (Pulitzer)

- Luis Ortiz and Pedro Santiago are now assigned to youth corrections
- Maintenance continues to be an issue. Specific facility issues include
    - AC at Villalba
    - Electrification of doors at Humacao
    - Need for security cameras

12:30 Working Lunch – Monitor's Office provides pizza or sandwiches

- CPR to hire 100 additional officers for December 2013 and 100 more in the first quarter of 2014
- Agreement to develop an estimate of total positions needed for compliance

2:00 Training and Special Education (Herbert and Colon)

- The case assessment pilot has been done – now ready to start full project in August
- Could not tell who was filling out some of the forms, and whether MH filled it out.
    - Need date and name of person filling it out.
- Concordance of IEP with frequencies with treatment in MH
    - May be need to update IEP when MH has changed
- Side effects addendum groups inappropriate medications.
    - Need to update the forms
- Training reports have not been provided since 2011

- CPR is reconstituting the Academy
- CPR will provide to Victor Herbert the training stats for 2012

3:00 Classification - Dugan

- Of 285 detention admissions, 85% were classified as low, and none were classified as high.
- We need norm-calibrated age-appropriate evidence-based classification system.
- Over the past 6 months, when youths were assigned based on their classification level, incidents have declined. This suggests we are moving in the right direction.
- Efrain Afanador: comparing July-December 2010 to July-December 2012, aggression incidents were down 139 to 45; automutilation incidents were down from 26 to 2. But other incidents increased from 64 to 161.

Thursday May 2

8:30 Operations - Bogard

- Large-scale incidents - 8 or more youths in fights – are a problem. At Humacao 1st quarter there were 4 incidents, Villalba 3, CD Bayamon, 2, Guayama, 2 and Ponce 1. The number is a concern, also the reporting is insufficient.
- Need for the cameras – a well-designed system is needed – Humacao and Villalba are the highest priority
- Problem of youth leaders using intimidation and threat. Facility Directors acknowledge that youth are running the housing units. They can tell who the leader is in each module. We need to fashion a response to this.
- Relatively large numbers of youth ask for "transitional measures." Typically these are the deposed leaders, or victims of the leaders. Youth say they want to be in a room alone to be safe. During the first quarter there were 40 youth in TM – most at Humacao and Ponce Girls. Fewer at Villalba because Villalba ships to Humacao.
- Understaffing and larger scale incidents result in escalations of force to intervene. At Humacao there were 70 applications of OC in the past quarter, as well as use of physical restraints at Villalba and CD Bayamon. Increased use of TM makes delivery of services more complex.
- This also raises questions about classification – does the current system identify the illegitimate leaders and the leader dynamic? Should the classification system allow for a classification-based response to deal with the leaders?
- Benton asked assent of parties that DB and BD develop with CPS officials a special management proposal. Parties agree. DB and BD will meet with CPR counterparts on May 22nd and 23rd.

10:00 Paragraph 78 – Benton with Bogard and Dugan

- Police reports are now coming in.

- 19 new agents have been recruited for OISC and 10 have been assigned to youth cases. The other 8 are available if needed
- There are now only 14 open old cases

12:30 Mental Health – Marelli Colon

- Introduction of new Monitor's Consultant Marelli Colon

Document Attachment H: Curriculum Vitae of Marelli Colon-Emeric, M.D.

CURRICULUM VITAE

MARELLI COLÓN-EMERIC, M.D.

San Juan Arthritis and Research Center, Inc.
#652 Muñoz Rivera Ave. – El Monte Mall – Suite 2010
San Juan, Puerto Rico 00918

<u>Employment</u>:

Private Practice
Forensic evaluations
San Juan Arthritis and Research Center, Inc.
San Juan, P.R. (2002 –present date)

Clinical Assistant Professor
Department of Psychiatry
Ponce School of Medicine
Ponce, P.R. (2009- present)

MAPI Institute - Consultant
Linguistic validation and culturally adapted Spanish translations ensuring their cross-cultural equivalence of the Mini International Neuropsychiatric Interview instrument (M.I.N.I., M.I.N.I. PLUS) Including versions for Chile, Mexico, Argentina and Puerto Rico among other Spanish speaking countries
Lyon, France (2009- present)

APS
Clinical Psychiatrist
Vieques and Culebra, P.R. (2011-2012)

Optimind
Medical Director
Canovanas, P.R. (2011-2012)

Medical Director
Inspira Therapeutic Foster Care program
San Juan, P.R. (2008)

Medical Director
Community Cornerstone
Therapeutic Foster Care

	Río Piedras, P.R. (2004-2006)
Employment:	Associate Medical Director First Hospital Corporation Río Piedras, PR (2005-2006)
	Associate Medical Director Child and Adolescent Services First Hospital Panamericano Cidra, P.R. (2004-2006)
	Medical Director Puerto Rico Adolescent Training School Río Grande, P.R. (2002 - 2006)
	Pediatric Obesity Clinic Hospital Auxilio Mutuo San Juan, P.R. (2003-2004)
	Pediatric Subspecialties Clinic Hospital Auxilio Mutuo San Juan, P.R. (2003-2004)
	Atlanta Area Family Psychiatry Clinic Private Practice Atlanta, Georgia (2000 - 2002)
	Clinical Assistant Professor University of South Florida, College of Medicine Tampa, Florida (1999- 2000)
Postgraduate Education:	Fellowship in Child and Adolescent Psychiatry Emory University School of Medicine Atlanta, Georgia (1997-1999)
	General Psychiatry Residency University of South Florida College of Medicine Tampa, Florida (1994-1997)
Medical Education:	University of Puerto Rico, School of Medicine Doctor of Medicine Río Piedras, Puerto Rico (1990-1994)
Medical Licensure:	Georgia: 1998 Florida: 1999 Puerto Rico: 2002

Board Certification: Diplomate of the American Board of Psychiatry and Neurology (2000)
Diplomate of the American Board of Child and Adolescent Psychiatry (2004)

Undergraduate Education: University of Puerto Rico
Bachelor of Science in General Sciences
Río Piedras, Puerto Rico (1987-1990)

Honors and Awards: America's Top Psychiatrists
National Research Council (2002, 2003, 2004)

Strathmore's Who's Who Among America's Psychiatrists (2002)

Selected as a "Mini-Fellow" for the American Psychiatry Association's Program for Minority Research Training in Psychiatry. (1996)

Wyeth-Ayerst Resident Reporter to the American Psychiatric Association National Meeting in New York City, New York. (1996)

Magna Cum Laude Graduate of the University of Puerto Rico (1994)

Beta Beta Beta Biology Honor Society at the University of Puerto Rico (1987-1990)

Dean's List at the University of Puerto Rico (1987-1990)

Second Place at the Literary Competition (short story division) at the University of Puerto Rico (1987)

Board/Committee Memberships and other activities:

Reach for Success
Non-profit Organization
Provide's Vieques youth resources & opportunities to achieve educational, professional and economic success
Board of Directors
Vieques, P.R. (2013-present)

ADHD Advisory Board
Pfizer
San Juan, P.R. (2012)

Fundación A-Mar

Non-profit Organization
For the prevention and management of burns
Board of Directors
San Juan, P.R. (2011-present)

Vieques Educado y Saludable (VES)
Non-profit Organization
Objective is to improve the quality of life
of the Vieques community
Vieques, P.R. (2011- present)

Revista Mi Pediatra y Familia
Editorial Committee
Ponce, P.R. (2008- present)

Fundación de Enfermedades Reumáticas (FER)
Non-profit organization
Mental Health Consultant
Rheumatological diseases
San Juan, P.R. (2012-present)

Fundación de Enfermedades Reumáticas (FER)
Non-profit organization
Board Of Directors
Head of Childhood Committee and Mental Health
Rheumatological diseases
San Juan, P.R. (2009-2012)

Childhood Development Committee
Fondos Unidos, P.R. (2009-present)

Mental Health and Homeless Committee
Senado de P.R. (2009- present)

RISE Support Program
Improve the quality of life of people living with Rheumatoid Arthritis
Wellness Expert Consultant
San Francisco, CA (2008-2011)

Rise Webcasts / Teleconferences
Mental Health Expert
Snow – Companies
Williamsburg, Virgina (2009-2011)

RISE LPOP
Host and Wellness Speaker

Puerto Rico, New Jersey, Iowa, Texas, San Francisco and Florida among other states
(2009-2011)

RISE Summit Meeting
Rheumatoid Arthritis Patient Ambassador
Publications Summit
Program Medical Lead
San Francisco, CA (2009)

M.I.N.I.
Mini International Neuropsychiatric Interview instrument
(M.I.N.I., M.I.N.I. PLUS)
Spanish Translations
Tampa, Florida (1995- 1999)

University of South Florida Department of Psychiatry
Residency Education Committee (1996-1997)

University of South Florida Department of Psychiatry
Research Committee (1996-1997)

Co-Chairman of the Florida Psychiatry Society's
Residency Education Committee.(1995-1997)

University of South Florida Department of Psychiatry
Resident Recruitment Committee (1995-1996)

Organization Committee for the Congress of Scientific
Investigation held at the University of Puerto Rico School
of Medicine (1990-1991)

<u>Presentations:</u> Multiple presentations, Workshops, television and radio interviews, magazine and newspaper publications and web interviews on different topics, including but not limited to:
The emotional impact of living with chronic illnesses, living with arthritis, dealing with stress, motivational and leadership workshops; violence, pediatric obesity, self-esteem, warning signs of depression, disruptive disorders, autism, impact of peer pressure, divorce and custody, forensic psychiatry, mental health law in Puerto Rico, Parental Alienation Syndrome, effects of bullying, DSM IV, Mental Health Needs of Foster Care Children, Parenting in a Technological Era, Handling Disruptive disorders in the Classroom, Translation and linguistic issues encountered in psychiatric diagnostic interviews, Recognizing Mental Illness, Seasonal Affective Disorder, Recognizing the Warning Signs of Suicide, Laws that impact the access to treatment, Warning Signs of Adolescent Substance Abuse, effects of child abuse, crisis intervention, Eating disorders, anxiety disorders in children, autism and the DSM V, psychiatric emergencies, disaster preparation, preparing your children emotionally for a disaster

Lectures and Workshops to: judges, court social workers, prosecutors, Department of Family and Social Services, Senate of Puerto Rico, Puerto Rico School of Law, Psychiatry residents, Psychology students, Child and Adolescent Psychiatry fellows, Physicians – different specialties, Nutritionists, Communities, Churches, school teachers and students among others.

Clinical Research:	Several clinical trials on Depression, Bipolar Disorder in adolescents, Rheumatoid Arthritis, Osteoporosis, Osteoarthritis, Fibromyalgia, Lupus (!999 – present)
Extracurricular activities:	Associate Producer and actress Arlequin Theater Company (1987-present)
	Actress Arlequin Theater Company (1975- present)
Languages:	English and Spanish

Document Attachment I: Site Visit Chronology

The Monitor's Office has conducted site visits to several facilities in order to assess conditions and operations, and to inform the process of developing monitoring protocols and in developing recommendations for improvements where needed. In addition, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco continue to make site visits to follow up the joint monitoring process and to assess conditions that may formally or informally come to their attention. The following is a list of the site visits conducted with participation by officials of the Monitor's Office.

January 15, 2013:	Consultants David Bogard, Robert Dugan, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco site visit to CDT Ponce Girls and "Guaili".
January 15, 2013:	Consultants David Bogard, Robert Dugan, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco site visit to CTS Villalba.
January 16, 2013:	Consultants David Bogard, Robert Dugan, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco site visit to CTS Humacao.
January 24, 2013:	Associate Monitor Ricardo Blanco site visit to CTS Bayamon.
January 24, 2013:	Associate Monitor Ricardo Blanco site visit to CD Bayamon.
February 14, 2013:	Consultant Curtiss Pulitzer, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco Site visit to CTS Villalba.
February 14, 2013:	Consultant Curtiss Pulitzer, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco Site visit to CTS Guayama.
March 6, 2013:	Consultants David Bogard and Associate Monitor Ricardo Blanco site visit to CTS Humacao.
March 7, 2013:	Consultants David Bogard, Deputy Monitor Javier Burgos and Associate Monitor Ricardo Blanco Site visit to CTS Guayama.

THE UNITED STATES OF AMERICA

Plaintiff,

v. CIVIL ACTION NO. 94-2080 CC

COMMONWEALTH OF PUERTO RICO

Defendants,

Monitor's Compliance Ratings
First Quarter 2013

Provision	P	S	R	T	D	G	Comment
Compliance Category and Rating Definitions							
Compliance Category P	This category concerns Policy Compliance as required by Settlement Agreement paragraph 45. "Y" means that there are sufficient written policies and procedures in place so that, if they were implemented, compliance would be achieved. A "Y" also means that there are no policies and procedures in place that are inconsistent with the provision.						
Compliance Category S	This category concerns Staffing Compliance as required by Settlement Agreement paragraph 48. "Y" means that there are sufficient authorized and filled positions so that compliance could be achieved. Temporary vacancies are acceptable, provided that functional coverage is provided while the position is vacant, and the process of replacing the employee proceeds promptly.						
Compliance Category R	This category concerns Resource Compliance as required by Consent Order paragraph 44. "Y" means that there are sufficient funds, equipment and supplies and space that compliance can be achieved.						
Compliance Category T	This category concerns Training Compliance as required by Settlement Agreement paragraph 45. "Y" means that the necessary training has been provided, and that the training informs the employees as to how to implement the provision involved.						
Compliance Category D	This category concerns Documentation Compliance as required by Settlement Agreement paragraph 101. "Y" means that there is procedures and forms in place and in use to document whether compliance is being achieved or not. A "Y" can be assigned when the documentation accurately shows non-compliance.						
Compliance Category G	This category concerns General Compliance - the overall achievement of compliance with the provision involved.						
Compliance Rating Definitions	**"Y"** means that compliance is achieved. **"N"** means that compliance is not yet achieved. **"#"** means that the Monitor has not determined whether compliance has been achieved or not. **"I"** means that the category is inapplicable to the provision involved.						

Provision	P	S	R	T	D	G	Comment
Facility Provisions							
C.O. 41: Within ninety (90) days of the filing of this Consent Order, Defendants shall repair all defective plumbing in the facilities in this case. The defective plumbing shall be repaired first at Mayaguez, Ponce Industrial, Ponce Detention and Humacao.	N	N	N	#	#	N	Compliance with this provision will be impossible to achieve under the current AIJ/DCR operating procedures and policies as it pertains to maintenance. Key issues are a lack of sufficient numbers of maintenance personnel coupled with an arcane procurement process for parts. The defendants concur with this assessment through numerous conversations with the monitor's office. Based on recent conversations the agency appears to be developing a plan to address plumbing and maintenance repairs in a more timely manner. There has been positive improvement from the last quarter with 18 observed broken fixtures versus 29 last quarter. There has been a steady decrease in the number of broken fixtures since 2012 when there were 50 in the first quarter, a high of 81in the second quarter, 58 in the third quarter and down to 29 in the last quarter of 2012. The current figure is two-thirds of last quarter's. The biggest improvement was at Guayama which went from 9 broken fixtures last quarter to 2 this quarter. The remaining facilities all saw slight drops with the exception of CTS Bayamon that went up from 1 to 2 broken fixtures. CD Bayamon continues to make improvements dropping from 22 broken fixtures in the middle of 2012 to 5 broken fixtures last quarter and now down to 3. Below are the figures for this quarter: • CD Bayamon - 3 • CTS Bayamon - 2 (Blue, Orange and Yellow units) • Guali - 0 • Guayama - 2 • Humacao - 11 • Villalba – 3 • Creando - 0 See my primary compliance report for the details on plumbing repairs.
S.A. 29. Each new facility shall be built in accordance with: (1) the American Correctional Association's (hereinafter "ACA") standards in effect at the time of the construction; (2) the Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101-12213 and 47 U.S.C. §§ 225 and 611, and the regulations thereunder; and (3) all Commonwealth fire codes and regulations.	Y	I	N	Y	N	N	The defendants have closed several older facilities that had serious fire and life safety code violations as well as non-compliance with ACA standards and ADA regulations. Accordingly, AIJ/DCR is close to compliance with this provision pending the availability of additional resources to both document compliance as well complete necessary repairs and/or renovations to allow full compliance with this provision. It is recommended that an audit be conducted to determine how ADA compliance can be achieved.

Provision	P	S	R	T	D	G	Comment
S.A.31. Existing facilities expected to be occupied by juveniles beyond Fiscal Year 1996-1997 shall conform to applicable federal, state and/or local building codes.	N	I	N	N	N	N	There are still life and fire safety violations that have not been remedied to date. In addition, the staff responsible for maintaining code and fire safety for facilities still lack sufficient training and understanding of the requirements of this provision. Furthermore, the Commonwealth has not allocated sufficient resources to allow compliance of this provision.
S.A. 34. In order to properly equip and swiftly evacuate the facilities in the event of a fire or other emergency, in each facility, Defendants shall provide sufficient staff with appropriate keys to unlock exit doors in all buildings occupied by juveniles. The keys shall be color coded and notched or otherwise readily identifiable. Defendants shall also store a backup set of emergency keys at a place accessible at all times to staff on duty on all shifts.	Y	#	#	#	N	N	While all facilities have emergency keys that are readily available for use in an emergency, the monitor's office has found that in many instances the keys are not properly color coded or notched. Also, there is no systematic approach to storing or issuing the correct keys in an emergency. The AIJ Fire Safety Officer has been working on a plan to rectify this. When that plan is completed, the monitor's office will review it and oversee its proper implementation. The electrification of the cell doors at Humacao will help achieve compliance with this provision by reducing the number of keys needed for emergency exiting. AIJ/DCR needs to ensure sufficient staff, with proper communication to staff in the living units, are working in the Housing Control stations on all shifts to operate the control panels to remotely unlock all doors. In addition, until Humacao's doors have been converted to remotely controlled electronic locks , there must be 2 staff available at all times to manually unlock the rooms in a fire emergency.
S.A. 35. Defendants agree that designated exit doors in all facilities will be maintained in operable condition and shall be readily unlocked in case of an emergency.	Y	#	N	#	Y	N	Non-compliance with the resource designation in this provision relates to the lack of staff and funds in regards to maintenance and repair of all exit doors as well as current maintenance procedures and procurement policies. There are sufficient resources to conduct regular checks and monthly reports by each facility's fire safety coordinators and that is being performed and documented. The monitor's office is waiting to see the monthly automated results from the fire safety officer as the exit door checks are supposed to be documented in AIJ's new data and tracking system.

Provision	P	S	R	T	D	G	Comment
S.A. 37. AIJ policy shall ensure safety for juveniles and staff by requiring compliance with fire safety code requirements. Specific emergency plans shall be developed and copies made available to staff members. There shall be ongoing training programs and emergency procedures shall be reviewed and updated annually.	Y	Y	Y	N	#	N	Pedro Santiago the AIJ Fire Safety Officer has been providing regular training in all emergency procedures to the fire safety coordinators and appropriate A IJ staff. The adequacy of the training still needs to be reviewed by Victor Herbert. However, it appears that current training needs to be improved in witnessing erratic performance of several of the Fire Safety Coordinators at each facility over the past 15 months.

Provision	P	S	R	T	D	G	Comment
Policies and Procedures							
S.A. 45. Within one year of the approval of this agreement by the Court, Defendants agree to provide an agency policy and procedure manual governing all operational aspects of the institutions. Within eighteen months of the approval of this agreement by the Court, Defendants shall further insure that the facilities are strictly operated within these policies and procedures and that all staff have been trained accordingly.	N					N	In the rest of this table, policies and procedures are rated as a compliance problem for many of the provisions in this case.
Staffing							
S.A. 48. Defendants shall ensure that the facilities have sufficient direct care staff to implement all terms of this agreement. Direct care staff supervise and participate in recreational, leisure and treatment activities with the juveniles. Compliance can be demonstrated in either of two ways.	N	N	N	N	Y	N	For the 2nd quarter of 2012, all of the facilities submitted the staffing compliance reports, with the exception of one form from CD Bayamon. Agency meeting staffing ratio requirements: 6:00 am- 2:00 pm shift: 18% of events, 5% reduction 2:00 pm- 10:00 pm shift: 20% of events, 1% increase 10:00 pm- 2:00 am shift: 100% of events, 3% increase Guaili has met 100% staff youth ratio requirements for ten consecutive quarters. There has been a continual reduction in Staff Youth Ratio compliance during the last two 2011 and 1st and 2nd reporting quarter of 2012 . See the 2012 2nd QR narrative for more information about staffing compliance. This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Sections 115.313.
January 2009 Stipulation Paragraph 1: All necessary steps shall be taken immediately to ensure the reasonable safety of youth by providing adequate supervision of youth in all facilities operated by, or on behalf of, the Defendants.	Y	N	N	N	N	N	This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Sections 115.313, 115.364

Provision	P	S	R	T	D	G	Comment
January 2009 Stipulation Paragraph 2: All necessary steps shall be taken to provide sufficient direct care staff to implement the Consent Decree and adequately supervise youth, pursuant to Paragraph 48, as amended by Court Order dated M ay 15, 2007 (Dkt. #719), ~~by hiring qualified direct care staff, beginning with fifty (50) direct care staff within thirty (30) days of this Order, and fifty (50) additional direct care staff every thirty (30) days, until Defendants achieve the goal to provide adequate supervision of youth in all facilities.~~	N	N	N	N	N	N	The requirement that 50 YSOs be hired each month was terminated by the Court on September 13, 2011 (Docket 991) The commonwealth reported at the May 2013 Monitor's Conference that they intended to hire 100 new YSOs for December 2013 and 100 new YSO for February 2013.
January 2009 Stipulation Paragraph 3: Defendants will include as direct care staff all social workers assigned to its institutions, once such staff receive forty (40) hours of pre-service training, pursuant to Paragraph 49 of the Consent Decree. The same shall also receive annual training as direct care staff, pursuant to Paragraph 50 of the Consent Decree.	#	#	#	#	#	#	The Commonwealth has decided not to employ this provision to enhance coverage.
January 2009 Stipulation Paragraph 4: All persons hired to comply with Paragraph 48 shall be sufficiently trained, pursuant to Paragraph 49 of the Consent Decree, before being deployed. Defendants shall deploy all duly trained direct care staff, pursuant to Paragraph 49, to juvenile facilities in a timely manner.	Y	N	N	#	N	N	The new YSOs have been deployed to youth corrections facilities.
January 2009 Stipulation Paragraph 5: On the fifth day of every thirty-day period commensurate with the Order approving this Stipulation, Defendants shall submit a report to the Monitor and the United States providing the following: a. the number of current direct care staff, by position classification, at each facility; b. the number of qualified direct care staff hired during the previous period; c. the number of hired direct care staf f in the previous period who were hired and have received pre-service training, pursuant to Paragraph 49; and d. the juvenile facilities where the direct care staff who were hired in the previous quarter and have received pre-service training, pursuant to Paragraph 49, have been deployed or assigned.	Y	Y	Y	Y	Y	Y	The reports are being provided. However, they are not reporting compliance with the other parts of the stipulation.

Provision	P	S	R	T	D	G	Comment
Training							
S.A. 50. Defendants shall ensure that current and new facility direct care staff are sufficiently well-trained to implement the terms of this agreement. Each direct care staff, whether current or new, shall receive at least forty (40) hours of training per year by qualified personnel to include, but not be limited to, the following areas: CPR (cardiopulmonary resuscitation); recognition of and interaction with suicidal and/or self-mutilating juveniles; recognition of the symptoms of drug withdrawal; administering medicine; recognizing the side-effects of medications commonly administered at the facility; HIV related issues; use-of-force regulations; strategies to manage juveniles' inappropriate conduct; counseling techniques and communication skills; use of positive reinforcement and praise; and fire prevention and emergency procedures, including the fire evacuation plan, the use of keys, and the use of fire extinguishers.	Y	N	N	I	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Sections 115.332, 115.334, and 115.335. • Training reports have not been provided since 2011. • The Commonwealth is reconstituting the Training Academy for youth corrections.
Classification							
S.A. 52. At both the detention phase and following commitment, Defendants shall establish objective methods to ensure that juveniles are classified and placed in the least restrictive placement possible, consistent with public safety. Defendants shall validate objective methods within one year of their initial use and once a year thereafter and revise, if necessary, according to the findings of the validation process.	N	#	#	#	#	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.341 and 115.342. • DCR is undertaking a validation study of committed and detention youth . Staff have been trained on the youth detention classification instrument. Documentation has been provided for the classification of youth for detention for the months of the 2nd quarter. • The second quarter CD Bayamón admission classification resulted in 378 admissions, of which 302 (80%) are classified as low; 64 (17%) are classified as moderate; 2 (1%) are classified as severe; and 5 (1%) were court releases.

Provision	P	S	R	T	D	G	Comment
Mental Health and Substance Abuse Treatment							
S.A. 59. Defendants, specifically the Department of Health (ASSMCA), shall provide an individualized treatment and rehabilitation plan, including services provided by AIJ psychiatrists, psychologists, and social workers, for each juvenile with a substance abuse problem.	N	N	Y	#	N	N	Review of the medical records and observation of a treatment team meeting revealed that the treatment planning process is markedly deficient. The team meeting was not attended by the psychiatrist, no treatment needs were identified, the youths were all reported to be "stable". The types and frequency of substance abuse difficulties were noted but the treatable psychological deficits that lead to and support substance abuse were not identified or discussed.
C.O. 29: Defendants shall maintain an adequate 48 bed residential mental health treatment program which provides services in accordance with accepted professional standards, for juveniles confined in the facilities in this case in need of such services as determined by a qualified child and adolescent psychiatrist as part of a qualified interdisciplinary mental health team.	N	N	N	#	N	N	Defendants moved on December 17th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.
C.O. 30: Defendants provide adequate qualified staff members for the residential treatment program, which include a child psychiatrist, psychologist, occupational therapist, social workers and nurses.							• Defendants moved on October 5th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.
C.O. 34. Within 160 days of the filing of this Consent Decree, Defendants shall train all staff whose responsibilities include supervision of the juveniles regarding the effective recognition of suicidal and/or self-mutilating behaviors.							• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.335..
C.O. 36. Within 120 days of the filing of this consent Order, Defendant Juvenile Institutions Administration shall provide continuous psychiatric and psychology service to juveniles in need of such services in the facilities in this case either by employing or contracting with sufficient numbers of adequately trained psychologists or psychiatrists, or by contracting with private entities for provision of such services. The continuous psychiatric and psychological services to juveniles in need of such services to include at a minimum, a thorough psychiatric evaluation. The continuous psychiatric and psychological services to juveniles in need of such services to include at a minimum diagnostic tests before prescription of behavior-modifying medications.	N	N	#	N	N	N	• Psychologist hours had been cut from 35 to 30 hours. Youth are not adequately assessed. • Treatment plans are not individualized and treatment progress not assessed and documented. • Policy is deficient in terms of the procedures for documenting progress. Given the deficient assessment practices policies will need to be developed that include enhanced assessment. • Assessment is seriously deficient with many youth being diagnosed as free of mental health concerns. • Because the evaluation of youth is so deficient, appropriate treatment services are not being provided.

Provision	P	S	R	T	D	G	Comment
S.A .62. In addition to the mental health staff required by ¶ 36 of the Consent Order approved by the Court in this case in October 1994, Defendants shall provide ambulatory psychiatric services by a team. This team shall be composed of a child psychiatrist, a child psychologist and a social work counselor. All mental health care personnel shall have written job descriptions and meet applicable Commonwealth licensure and/or certification requirements. Defendants, specifically AIJ, will provide for residential treatment and, if needed, in-patient hospitalization for those cases where such service is needed.							• Defendants moved on October 5th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.
S.A. 63. For each juvenile who expresses suicidal or self-mutilating ideation or intent while incarcerated, staff shall immediately inform a member of the health care staff. Health care staff shall immediately complete a mental health screening to include suicide or self-mutilation ideation for the juvenile. For each juvenile for whom the screening indicates active suicidal or self-mutilating intent, a psychiatrist shall immediately examine the juvenile. The juvenile, if ever isolated, shall be under constant watch. Defendants shall develop written policies and procedures to reduce the risk of suicidal behavior by providing screening for all juveniles at all points of entry or re-entry to AIJ's facilities and/or programs and by providing mechanisms for the assessment, monitoring, intervention and referral of juveniles who have been identified as representing a potential risk of severe harm to themselves. Treatment will be provided consistent with accepted professional standards.	Y	#	N	N	N	N	• The current staffing for mental health professionals does not make it possible for a psychiatrist to "immediately evaluate" the youth. This is an overly stringent requirement. Youth should be evaluated immediately by n medical staff and placed on Therapeutic observation and seen by the psychiatrist or psychologist within 8 hours. This generally occurs. However, recent site visits revealed numerous youth isolated reportedly for reasons other than MH concerns. Many of these youth had serious MH concerns with automutilation being common. Minimal MH treatment is being provided these youth. Because youth with MH difficulties are poorly assesses and not identified treatment is not provided in accordance with accepted professional standards.
S.A. 66. An AIJ child and/or adolescent psychiatrist shall develop a protocol for the use of psychotropic medication by other physicians. A training program will complement this protocol. A child and/or adolescent psychiatrist will be available on an on-call basis at all times.							• Defendants moved on October 5th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.
S.A. 67. Defendants shall obtain specific informed consent from a juvenile's parent or legal guardian or from the state court for the use of psychotropic medication for each juvenile on such medication. All psychotropic medications will be prescribed by a licensed psychiatrist and/or physician. All psychotropic medication will be reviewed and approved by an AIJ child psychiatrist. In all cases, the family of any juvenile taking psychotropic medication will be informed in writing by the family's case manager.							• Defendants moved on October 5th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.
S.A. 71. Stimulants, tranquilizers, and psychopharmacological drugs shall only be used as deemed medically necessary and shall not be administered for punishment.	#	N	Y	#	#	N	• Defendants moved on October 5th for this provision to be dismissed. See the Monitor's upcoming PLRA Report for information about compliance with this provision.

Provision	P	S	R	T	D	G	Comment
S.A. 72. All juveniles receiving emergency psychotropic medication shall be seen at least once during each of the next three shifts by a nurse and within twenty-four (24) hours by a physician to reassess their mental status and medication side effects. Nurses and doctors shall document their findings regarding adverse side effects in the juvenile's medical record. If the juvenile's condition is deteriorating, a psychiatrist shall be immediately notified.	Y	Y	Y	Y	N	N	In instances where emergency medication was used adequate follow-up of the youth and documentation of the youth's response to the medication is lacking.
S.A. 73. Defendants, specifically AIJ, shall design a program that promotes behavior modification by emphasizing positive reinforcement techniques. Defendants, specifically AIJ, shall provide all juveniles with an individualized treatment plan identifying each juvenile's problems, including medical needs, and establishing individual therapeutic goals for the juvenile and providing for group and/or individual counseling addressing the problems identified. Defendants, specifically AIJ, shall implement all individualized treatment plans.	N	N	N	N	N	N	The AIJ Behavior Management program is seriously deficient. Currently youth receive points on a daily basis for prosocial behavior. However, the reward schedule is so poor that youth need to save up points for an entire month in order to get the Nintendo for the weekend. Youth report that frequently when they try to exchange points for items like pizza or a movie that these are not available due to budget limitations. This undermines the entire rationale for a BM program where rewards in reasonable frequency and quantity are needed to promote positive behavior.

Provision	P	S	R	T	D	G	Comment
Discipline							
S.A. 74. Defendants shall specify the rules of the facilities with a complete list of possible punishments for violations of such rules in the handbook described in ¶ 47 above. Written notice of any rule violation, a hearing before a facility staff person not involved in the investigation of the violation, and an appeal to the facility director shall be provided to a juvenile prior to any punishment being imposed, except that Defendants may administratively segregate a juvenile in emergency or life-threatening situations. In the event of an emergency, when circumstances make it inappropriate to hold a hearing prior to segregation, a hearing shall take place within forty-eight (48) hours from the time of segregation.	N	N	Y	N	Y	N	• Significant improvement has been observed relative to the first component of this provision. It appears that most youths are receiving handbooks admission to the system and then again in the admissions area of the institutions upon transfer. In addition, several institutions have implemented methods to make handbooks fully accessible to youths in the dayrooms by placing them in folders affixed to the wall, by insuring that a copy of the handbook is located on the ledge of the dayroom glass facing the mini control (CTS and CD Bayamon), or by placing the relevant pages behind plexiglass affixed to the dayroom wall (Guayama). I recently recommended that the Guayama approach was the most reliable one and should be adopted systemwide to work in concert with the distribution of handbooks to insure that youths have adequate notice of rules and potential sanctions. • DCR has indicated that several recommendations made by me in my September 2012 report on the hearing process component of this provision have recently been implemented. This will require further documentation and monitoring to determine whether compliance can be asserted. • DCR has provided me with a revised policy # 15.5 addressing what I previously noted was the unacceptable practice of transferring youth who have assaulted others to a higher custody facility with no disciplinary hearing and no accountability. Although DCR could have elected to hold hearings before transfer and even to use the pre-hearing segregation process set forth in P74, the policy instead reflects a reasonable approach to holding hearings at the higher custody facility with evidence and, if necessary, witnesses obtained from the previous facility. I will monitor whether this process is working in practice, commensurate with the dictates of P74.

Provision	P	S	R	T	D	G	Comment
S.A. 77. No corporal punishment shall be imposed on any juvenile. The use of physical force by staff shall be limited to instances of justifiable self-defense, protection of others, and prevention of escapes. Defendants agree that under no circumstances shall restraints be used as a form of punishment. In cases where restraints are necessary to prevent a juvenile from causing serious bodily harm to himself or to another, the facility director or his/her designee must approve the use of restraints before they are applied. **Revised Language for Submission to the Court**: In no event is physical force justifiable as punishment on any juvenile. The use of physical force by staff, including the use of restraints, shall be limited to instances of justifiable self-defense, protection of self and others, to maintain or regain control of an area of the facility, including the justifiable protection of significant property from damage; and prevention of escapes; and then only when other less severe alternatives are insufficient. A written report is prepared following all uses of force and is submitted to administrative staff for review. When force, including restraint, is used to protect a youth from self, this must be immediately referred to the medical area for medical and mental health evaluation and any necessary treatment.	N	N	I	N	N	N	• The parties have now reached agreement relative to modified language for this provision. DCR needs to modify policy 9.18 to reflect these changes. • In October 2012 I discussed with DCR staff (and documented in my 2012 Q3and Q4 reports) the need for four revisions to Policy 9.18. I am not aware of these changes being made • There continues to be improvements in quarterly reporting of use of force data. Incident reports are still not consistently distinguishing between victims and aggressors and use of force is frequently being <u>over</u>-reported (especially when large numbers of youth were involved or present). • Due to the general confusion concerning the new Post-use of force Infirmary log, this form is being modified to insure that any required information is readily available or observable by nursing personnel, with no input from security staff. Once it is re-issued, this log must be completed by infirmary staff as an independent source of documentation. • Some facilities (e.g., Humacao) have started differentiating in Incident Reports between staff who use force (check marks) and those who witness it (T). This needs to be addressed in policy or administrative order and adopted system wide. • I have continued concerns about high frequency of use of OC at Humacao. The absence of security cameras, particularly in Humacao and Villalba, makes documentation of events and meaningful review of use of force incidents most difficult. This is a true challenge in the incidents involving large numbers of youth where officers frequently report using force on larger numbers of youth that they actually did and cannot reliably report on what force was used against which specific youths.

Provision	P	S	R	T	D	G	Comment
Abuse and Maltreatment Investigation and Management							
S.A. 78.a Defendants shall take prompt administrative action in response to allegations of abuse and mistreatment, including steps to protect and treat the victim, steps to preserve evidence and initiate investigation, steps to isolate, separate, and sanction youth and/or staff involved in misconduct or criminal conduct. Defendants' policies, procedures, and practices shall clearly define all incidents that must be reported, to include, at a minimum, allegations of: abuse, mistreatment, neglect, excessive use of force, inappropriate use of restraints, sexual misconduct, and assaults. Defendants shall provide for confidential means of reporting suspected abuse and mistreatment, without fear of retaliation for making such report.	Y	N	N	#	N	N	This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Sections 115.321, 115.322, 115.361, 115.362, 115.264, 115.366, 115.367, 115.368, and 115.371. Policies have been updated to comply with this provision. The Quarterly Case Assessments in the main part of the report consistently reveal the following problem areas: • Evidence is rarely preserved. • Suspected youth are separated from their victim(s) less than half of the time.
S.A. 78.b All Defendants' staff or contractors who are involved in, witness, or discover an incident (or evidence of abuse or mistreatment, in the case of a health care worker) shall document the incident or evidence in writing in a standardized incident report. The report shall be submitted to the reporter's supervisor or other designated staff person before the reporter leaves the facility following shift change. The report shall include all relevant details regarding the incident, including a description of the events leading to and immediately following the incident; date, time, and place; all persons involved, including alleged victim(s) and all witnesses; how the incident was detected; reporter's name and signature; and date and time the report form was completed.	Y	Y	Y	#	N	N	This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Sections 115.361 and 115.364. The timeliness of initial reporting appears to have improved, but statistics are not yet available to assess whether compliance has been achieved. In the future, a compliance review will be necessary to determine whether they are completed with consistent timeliness and quality.

Provision	P	S	R	T	D	G	Comment
S.A. 78.c Within 24 hours of knowledge of a potential abuse incident, the report shall be transmitted to the Commonwealth Police for investigation, the Department of Family Services for statistical reporting, the Department of Corrections, and the AIJ administration. For serious incidents involving allegations of: abuse; neglect; excessive use of force; death; mistreatment; staff-on-juvenile assaults; injury requiring treatment by a licensed medical practitioner; sexual misconduct; exploitation of a juvenile's property; and commission of a felony by a staff person or juvenile, the AIJ administration shall also notify SAISC within 24 hours of knowledge of the potential incident, and 1 hour for any juvenile death, and SAISC shall conduct an administrative investigation.	Y	Y	Y	#	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.371. • The timeliness of initial reporting by AIJ, based on AIJ records, has been high. • The Commonwealth Police do not respond to the Monitor's information requests for case analysis information. • Cases are promptly referred to SAISC.
S.A.78.d Within 24 hours, AIJ shall prepare and forward a copy of each incident report together with the AIJ preliminary investigation to the Police Department, the Department of Family Services, the Department of Corrections, and the AIJ Administration. Every 30 calendar days, AIJ, SAISC and the Commonwealth Police shall report to the Defendant Department of Justice and AIJ the status of each investigation including final determinations and associated administrative and criminal actions. Defendants shall implement appropriate policies, procedures, and practices to ensure that incidents are promptly, thoroughly, and objectively investigated. AIJ, SAISC, and Defendant Department of Justice shall consult throughout an investigation. If Defendant Department of Justice indicates an intent to proceed criminally, any compelled interview of the subject staff shall be delayed until Defendant Department of Justice concludes the criminal investigation, but all other aspects of the investigation shall proceed. Defendant Department of Justice shall review and investigate allegations of serious incidents following a preliminary investigation by the Puerto Rico Police Department.	N	#	#	#	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.371. • Documentation is insufficient concerning the implementation of investigations by the Commonwealth Police. The Commonwealth Police do not respond to the Monitor's information requests. See the Attachment to the QR concerning Abuse Referral Case Assessments. The Monitor infers that the Commonwealth Police lack a procedure or policy to comply.

Provision	**P**	**S**	**R**	**T**	**D**	**G**	**Comment**
S.A. 78.e Administrative investigations of serious incidents shall be conducted by SAISC and completed within 30 days of SAISC's receipt of the referral. Administrative investigation of incidents classified as less serious may be conducted internally by appropriate facility staff and shall be completed within 20 days of witnessing or discovering an incident.	Y	#	#	#	N	N	• For the entire year 2010, there were 208 cases referred to OISC, and only 10 were completed within the 30-day limit specified in Paragraph 78.e. • For the 3rd quarter of 2011, no cases were completed within 30 days. • It appears from the tracking statistics that the substantial majority of serious cases referred to SAISC are not investigated on a timely basis.
S.A. 78.f Defendants shall implement investigation standards in conformance with applicable law, including, at a minimum: photographing visible injuries; preserving and analyzing evidence; conducting separate, face-to-face, private interviews of the alleged victim, perpetrator, and all possible witnesses, with a record of the questions and answers. Whenever there is reason to believe that a juvenile may have been subjected to physical sexual abuse, the juvenile shall be examined promptly by outside health care personnel with special training and experience in conducting such assessments.	N	N	Y	#	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.371. • No process is in place to assess whether compliance is achieved with respect to investigation quality. • No standards have been formally adopted.
S.A. 78.g Every administrative investigation shall result in a written report explicitly providing: a description of the alleged incident, including all involved persons and witnesses and their role; a description and assessment of all relevant evidence; and proposed findings. Defendants shall ensure that there are sufficient numbers of demonstrably competent staff to timely complete competent and thorough administrative investigations. Responsibilities of investigators shall be clearly designated.	N	N	Y	#	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.371. • No process is in place to assess whether compliance is achieved with respect to these aspects of investigation quality.
S.A. 78.h AIJ shall conduct case management, for tracking which includes identification of findings and outcomes and dates of stages of case processing, and for oversight of further administrative actions including analysis to identify and implement corrective actions designed to avoid recurrence of incidents. At the conclusion of an administrative investigation, SAISC shall provide copies of the investigation report to AIJ and Defendant Department of Justice. AIJ's quality assurance personnel shall analyze the report and, as appropriate, identify corrective action to address operational, systemic, or other problems identified in the report and ensure that such action is taken.	N	N	Y	#	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.365. • Case tracking is inconsistent and incomplete. • The case tracking information system has not been updated at all during 2008. • AIJ lacks staffing and resources to do meaningful analysis of cases

Provision	P	S	R	T	D	G	Comment
S.A. 78.i Any employee, staff member or contractor who is criminally charged for offenses involving the abuse or mistreatment of juveniles, excessive force on juveniles, sexual misconduct with juveniles, or any other offense relating to the safety and welfare of juveniles, shall be immediately separated from having contact with detained or committed juveniles, including removal of any such person from exercising supervisory authority over any staff in AIJ facilities, while the criminal investigation or process is pending. Defendants may take additional administrative actions as they deem appropriate.	Y	Y	Y	Y	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.362, 115.364, 115.366 and 115.367. • AIJ policies comply with this provision. • Policies and procedures require separation based on substantiated allegations, which is a higher standard of performance than required in this provision. • It appears that criminal charges had been filed against three AIJ employees in relation to an alleged assault on a youth on September 10, 2009. The fact of the charges was not reported and compliance with the separation requirements of the December 2006 order has also not been established.
Separation Order, of December 4, 2006: Any employee, staff member, or contractor who is criminally charged in the future for offenses involving the abuse or mistreatment of juveniles, excessive use of force on juveniles, sexual misconduct with juveniles, or any other offense relating to the safety and welfare of juveniles, shall be immediately separated from having contact with detained or committed juveniles, including the removal of any such person from exercising supervisory authority over any staff in AIJ facilities, while the criminal investigation or process is pending.	N	Y	Y	N	N	N	• This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.362, 115.364, 115.366 and 115.367.

Provision	P	S	R	T	D	G	Comment
Protection and Isolation							
S.A. 79. Juveniles shall be placed in isolation only when the juvenile poses a serious and immediate physical danger to himself or others and only after less restrictive methods of restraint have failed. Isolation cells shall be suicide resistant. Isolation may be imposed only with the approval of the facility director or acting facility director. Any juvenile placed in isolation shall be afforded living conditions approximating those available to the general juvenile population. Except as provided in ¶ 91 of this agreement, juveniles in isolation shall be visually checked by staff at least every fifteen (15) minutes and the exact time of the check must be recorded each time. Juveniles in isolation shall be seen by a masters level social worker within three (3) hours of being placed in isolation. Juveniles in isolation shall be seen by a psychologist within eight (8) hours of being placed in isolation and every twenty-four (24) hours thereafter to assess the further need of isolation. Juveniles in isolation shall be seen by his/her case manager as soon as possible and at least once every twenty-four (24) hours thereafter. A log shall be kept which contains daily entries on each juvenile in isolation, including the date and time of placement in isolation, who authorized the isolation, the name of the person(s) visiting the juvenile, the frequency of the checks by all staff, the juvenile's behavior at the time of the check, the person authorizing the release from isolation, and the time and date of the release. Juveniles shall be released from isolation as soon as the juvenile no longer poses a serious and immediate danger to himself or others.	N	#	#	#	N	N	• This provision is related to both Discipline and Mental Health. The meaning and application of the provision continues to be unresolved. • There is no evidence to suggest that mental health isolation is being used for disciplinary purposes and AIJ policy prohibits this. This provision requires policies, actions and/or conditions that are also required by Part 115 of Title 28 of the Code of Federal Regulations Section 115.342.

Provision	P	S	R	T	D	G	Comment
S.A. 80. The terms of this agreement relating to safety, crowding, health, hygiene, food, education, recreation and access to courts shall not be revoked or limited for any juvenile in protective custody.	N	N	#	N	N	N	• A careful review of this provision, as it relates to youth on both protective custody and transitional measures status is currently in progress. Field work was conducted the week of April 13-17 and I will prepare a report in the next few weeks. Access to education continues to be the primary area of non-compliance, although there are also safety issues raised by inconsistent and unacceptable methods of making and documenting 15 minute safety and security checks and others related to access to recreation. • Room check logs used to document 15 minute safety rounds, are not being completed accurately or consistently. Bob Dugan and I have made a number of recommendations to improve the design and utilization of these logs, including redefining 15 minute checks, proper documentation of missed checks, adding observation codes, and placement of logs on or next to room doors. Nelson Echevarria at Humacao has recently completed the design a new version of this critical form, which appears to address the concerns that we have highlighted. Once a new form is adopted, staff need to be trained in its use and the entire process of 15 minute checks needs to be incorporated into an administrative directive or policy17.20. • CD Bayamon staff are not leaving mini-control to conduct 15 minute observations at CD Bayamon are being conducted by staff posted inside mini-controls who cannot make the kinds of required observations. This is not acceptable. • Long-term PC housing continues to be a problem at Ponce Girls, with youth typically housed in the admissions area. • Concerns that youth disciplined for violating rules are housed in admissions on TM status • There continues to be substantial confusion between PC and Transitional Measures.

Provision	P	S	R	T	D	G	Comment
Education and Vocational Services							
S.A. 81. Defendants, specifically the Department of Education, shall provide academic and/or vocational education services to all juveniles confined in any facility for two weeks or more, equivalent to the number of hours the juveniles would have received within the public education system. Specifically, this education shall be provided 5 (five) days per week, 6 (six) hours per day, 10 (ten) months per year. AIJ shall provide adequate instructional materials and space for educational services. Defendants shall employ an adequate number of qualified and experienced teachers to provide these services.	Y	N	R	I	Y	N	The AIJ facilities began the school year in August 2011 more fully staffed than in recent years. By the end of September, AIJ had only three teacher vacancies in the system. One of the three vacancies was due to the death of one of the teachers.
S.A. 86a. Defendants, specifically the Department of Education, shall abide by all mandatory requirements and time frames set forth under the Individuals with Disabilities Education Act, 20 USC §§ 1401 et seq. Defendants shall screen juveniles for physical and learning disabilities.	Y	Y	Y	I	N	N	The Commonwealth does not maintain a systematic audit of this provision. The Monitor's Office will review such documentation when it is provided. Compliance with 86a requires compliance with 86b.
S.A. 86b. The screening shall include questions about whether the juvenile has been previously identified by the public school system as having an educational disability, previous educational history, and a sufficient medical review to determine whether certain educational disabilities are present, such as hearing impairments, including deafness, speech or language impairments, visual impairments, including blindness, mental retardation, or serious emotional disturbances adversely affecting educational performance.	Y	Y	Y	I	N	N	The Commonwealth does not maintain a systematic audit of this provision. The Monitor's Office will review such documentation when it is provided. Compliance with 86b requires compliance with 86a.

Provision	P	S	R	T	D	G	Comment
S.A. 87. If a juvenile has been previously identified as having an educational disability, Defendants shall immediately request that the appropriate school district provide a copy of the juvenile's individualized education plan ("IEP"). Defendants shall assess the adequacy of the juvenile's IEP and either implement it as written if it is an adequate plan or, if the IEP is inadequate, rewrite the plan to make it adequate, and then implement the revised IEP.	Y	Y	Y	I	N	N	With the addition of a facilitator from the Department of Education, AIJ has improved its ability to obtain students' prior school records. Document reviews during site visits indicate that teachers meet, assess students prior IEPs and modify them as necessary. However, a systematic review of the records has not been provided by the Commonwealth to the Monitor's Office.
S.A. 90. Defendants shall provide appropriate services for juveniles eligible for special education and related services. Defendants shall provide each such juvenile with educational instruction specially designed to meet the unique needs of the juvenile, supported by such services as are necessary to permit the juvenile to benefit from the instruction. Defendants shall coordinate such individualized educational services with regular education programs and activities.	Y	Y	Y	I	Y	N	• Visits to each institution, interviews with youth at Humacao, and examination of unit logs and education records showed that students in transition or protective custody were not receiving the services specified in their IEPs.
S.A. 91. Qualified professionals shall develop and implement an IEP reasonably calculated to provide educational benefits for every juvenile identified as having a disability. When appropriate, the IEP shall include a vocational component.	Y	Y	Y	I	N	N	• Certified special education teachers, many of them new to the profession, provide education services to youth. All vocational education positions were filled during this reporting period. • Special education students were enrolled in vocational courses consistent with their IEP recommendations. • In the July review of IEPs at Bayamon,, in the majority of cases reviewed, the IEP recommendations for mental health services were not being implemented.
S.A. 93. Services provided pursuant to IEPs shall be provided year round. Defendants shall ensure that juveniles with educational disabilities receive a full day of instruction five (5) days a week.	#	N	N	I	N	N	Students eligible for special education services, like other students in DCR, do not receive services from the end of May to the beginning of August.
S.A. 94. Juveniles shall not be excluded from services to be provided pursuant to IEPs based on a propensity for violence or self-inflicted harm or based on vulnerability. Juveniles in isolation or other disciplinary settings have a right to special education. If required for institutional security, services provided pursuant to IEPs may be provided in settings other than a classroom.	N	N	N	I	N	N	• A recent review of services provided for youth in isolation, referred to as youth in transition or protective custody, showed that youth are not receiving services comparable to youth who are not in isolation. (See also comment for S.A. 90). • Youth in isolation receive some services, some days but often materials are delivered to the housing units and students revieve minimal or no direct services from teachers.

Provision	P	S	R	T	D	G	Comment
S.A. 95. When an IEP is ineffective, Defendants shall timely modify the IEP.	Y	Y	Y	I	N	N	• All special education positions are filled. • Visits to Humacao and Bayamon CTS indicated that teachers were periodically reviewing students' IEP. • A systematic assessment has not yet been completed by the Commonwealth and provided to the Monitor's Office for review.
Funding and Implementation							
C.O. 43 Until this order if fully implemented, Defendants shall submit to the Legislature of the Commonwealth each fiscal year a report wherein the requirement sums of money will be established so as to implement this Consent order.	Y	Y	N		N	N	• The Commonwealth legal position is that the required report is the agency budget request. The budget request is not routinely provided to the Monitor or the United States. • Since the budget is insufficient to implement the requirements of the decree, the Monitor infers that the request was also insufficient.