Rep. Weyler, Rock. 14 Rep. Wallner, Merr. 19 Rep. Erf, Hills. 28 Rep. Hoell, Merr. 27 March 6, 2023 2023-0767h 07/10

Amendment to HB 49-FN-A

Amend the bill by replacing all after the enacting clause with the following:

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- 1 Statement of Findings. The general court finds that:
- I. Placement in corrections settings can be harmful to children and lead to increased delinquency and adult criminal behavior. It should therefore be reserved for those circumstances in which the safety of a child or of the community requires such confinement.
- II. Placement of children who are not serious violent offenders in settings other than the Sununu youth services center (SYSC) complies with The Families First Act, P.L. 115-123, and the New Hampshire system of care established pursuant to 2019; 44 (SB 14), which prioritize community-based treatment of children.
- III. Placement of children in corrections settings outside the state of New Hampshire undermines effective treatment. This act is in furtherance of these goals.
- 2 Department of Health and Human Services; Sununu Youth Services Center; Construction and Operation of a Replacement Secure Facility.
- I. The department of health and human services shall be responsible to construct a secured treatment facility to replace the current Sununu youth services center (SYSC). The capacity of the facility shall be determined using data-driven analysis of SYSC residential trends, state demographics trends and regional trends in juvenile involvement in violent crime and organized crime. In no case shall the facility exceed a physical capacity of 18 beds with a plan to operate 12 beds. The department shall consult with the community selected for the location and operation of any new facility, as well as any municipality bordering the selected community. The department shall, to the extent practicable, implement any reasonable requests by the communities to ensure the safe operation of the facility, implement a payment in lieu of taxes arrangement to prevent the shifting of costs to local taxpayers, and ensure co-operation with the prospective community.
- II. The facility shall not be administered by any non-governmental entity. The facility shall be owned, administered and operated by the department of health and human services with support and shared services contracts as appropriate. The facility shall be designed to meet the unique needs of youth who are at the facility pursuant to RSA 169-B:14, detention; RSA 169-B:19, commitment; RSA 169-B:24, transfer to superior court; RSA 169-B:32 or RSA 651:17-a, service of adult sentence of incarceration at the youth development center; and RSA 169-A, the interstate

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- 1 compact on juveniles. Upon opening, the facility shall be referred to as the juvenile treatment center 2 (JTC) as identified in RSA 169-B and RSA 621. The facility shall have the capability for alternative 3 flexible use when the census so permits. The facility shall not admit children other than those 4 specified in this section. 5 III. The facility and program shall be designed to include: 6 (a) A physical design that complements therapeutic and trauma-informed care of 7 children, including a home-like interior and exterior to the maximum extent practicable. 8 (b) Staff visibility and proximity to children, including administrative offices built within 9 the secured facility in proximity to children and staff, to the maximum extent practicable. 10 (c) Capacity to provide services to meet the medical, physical, and behavioral health 11 needs of all potentially eligible residents if appropriate for the child. 12 (d) Space for no more than 18 beds, including space with flexibility to meet the need for safety and security, crisis stabilization, admissions, and discharges for all children. The operational 13 14 support plan shall be funded for 12 residents. 15 (e) Adequate space to meet the educational needs of all children including children with 16 special education needs, while using virtual educational support services if appropriate for the child. 17 (f) Adequate space for indoor and outdoor recreation. 18 (g) Capacity to meet the nutritional needs of all children. 19 (h) Necessary elements to be architecturally secure and equipped with video surveillance 20 in compliance with RSA 169-B:15-c. 21 (i) Operations may utilize virtual and shared services when consistent with the child's 22education or treatment plan and appropriate to effectively meet the needs of a particular child or 23 children. 24 (j) Staffing ratios which shall not exceed those supported by national accrediting bodies. 25 Strategic downsizing considerations as published in the Council of Juvenile 26 Correctional Administrators Toolkit: Facility Closure and Strategic Downsizing of Juvenile Justice 27 Systems by the Council of Juvenile Justice Administrators (2018). 28 IV. The facility programming and operations shall include: 29 (a) The development of staff qualifications and standard job descriptions comprising 30 required licensing or skill attainment. Staff qualifications shall be designed to ensure the provision 31 of treatment to children with behavioral health challenges through the implementation of trauma 32 informed care. Job description requirements, where appropriate shall include self and group 33 protection, training in trauma informed care to address challenging behaviors, including the use of 34 de-escalation techniques.
 - (b) Use of evidence-based practices, as defined in RSA 170-G:1, V-a, selected to match the needs of the population served at the facility.

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(c) Utilization of the uniform assessment, as specified in RSA 170-G:4-e, for all detained and committed youth to understand treatment needs and determine if a different level of care is indicated to meet the youth's needs, and where problem behavior appears patterned, a functional behavior analysis to inform effective behavioral interventions.

- (d) Provision of care management services by a care management entity, as established in RSA 135-F:4, to begin immediate wraparound support upon admission to plan for discharge.
- (e) Provision of frequent visitation opportunities with family, opportunities to include family in appropriate activities and daily access to family through telephonic or video conferencing.
- (f) Provision of educational programing and staffing that meets the individualized educational needs of each child, including children with special education needs, creates meaningful educator-child pairings, maintains connections with sending school districts, and which includes availability of Hi-SET preparation and testing as appropriate. Virtual educational opportunities shall be leveraged appropriately to help meet the residents' needs.
- (g) Integration of clinical sessions and recreational large muscle movement activities throughout the day.
- (h) Access by the office of the child advocate, in real-time, as established in RSA 21-V:4, II, to the electronic case management system used by the facility, regular access to youth placed in the facility under RSA 21-V:4, III, and video surveillance and general access to the facility pursuant to RSA 21-V:2, VII.
- (i) Provision of adequate security to maintain the safety of staff and residents as well as the safety of the surrounding community and the general public.
- (j) Training that emphasizes the treatment of youth with behavioral health challenges using approaches that include the employment of de-escalation techniques and that recognizes the risk that children may have considerable trauma histories, and that is otherwise applicable to the facility.
- (k) Procedures for supporting children in the community with flexible assignments based upon census changes.
- V. The department of health and human services shall begin to implement the programming changes in subparagraphs IV(a) through (k) without regard to whether children are at the SYSC or the new facility as soon as reasonably practicable.
- VI. The department of health and human services shall submit quarterly progress reports to the joint legislative oversight committee on health and human services, established by RSA 126-A:13, and to the office of the child advocate established under RSA 21-V beginning no later than 60 days after the passage of this act, until such time as the facility is operational. Each quarterly report shall include a statement indicating whether the reported progress is sufficient to meet the accepted completion deadline for the opening of the facility. In the event that sufficient progress to meet this deadline has not been made, the progress report shall include the reasons for any projected

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- delay in meeting the deadline, a description of the efforts being undertaken to minimize any delay in the development and opening of the facility and projected completion date. In addition, the quarterly progress reports shall include the following information:
 - (a) Progress towards retaining an architectural consultant to design the plan for the facility;
 - (b) Progress towards completion of the design for the facility;

- 7 (c) Progress towards contracting with the company that will construct the replacement 8 facility;
 - (d) The anticipated date construction of the replacement facility will be completed; and
 - (e) The anticipated date by which the replacement facility will be operational.
 - VII. The governor and council, using the final report of the commission established in RSA 169-B:48, shall exercise the decision to finalize the capacity and site selection of the replacement center in consultation with the senate president, speaker of the house, and the affected community.
 - VIII. The governor, with the approval of the fiscal committee of the general court, may delay the project completion date for construction delays or other unforeseen circumstances provided any such delay be no more than one year.
 - 3 Sununu Youth Services Center; Architect Procurement. Amend 2023, 1:4 to read as follows:
 - 1:4 Department of Health and Human Services; Sununu Youth Services Center; Construction and Operation of a Replacement Secure Facility. The department of health and human services, in collaboration with the department of administrative services, shall issue a request to procure a qualified architect [on or beforeMarch 1, 2023] within 60 days of the effective date of this act, and shall collaborate to issue a request for proposals for a contractor to build the resulting construction project on a time line supporting the use of American Rescue Plan Act of 2021, Public Law 117-2 funds or any other federal funds. The SYSC shall immediately be closed for detention or admission of any child when a replacement facility is sufficiently completed that children can be legally and safely housed there.
 - 4 Possession and Relinquishment of the Sununu Youth Services Center (SYSC). As of the date of the opening of the youth development center set forth in section 2 of this act, and notwithstanding RSA 4:40, the department of administrative services shall take possession of the entire property currently housing the SYSC on South River Road in Manchester, New Hampshire. The department shall relinquish the property and any revenues received shall be deposited in the general fund. The department shall consult with the city of Manchester, the New Hampshire department of business and economic affairs, and other organizations, as appropriate, prior to any sale of the property. In relinquishing the property, the return of the property to an entity that will enhance the tax and business tax rolls of the city of Manchester and the state of New Hampshire shall be a high priority.

36 Any relinquishment of the SYSC shall be approved by the governor and council.

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- 5 Appropriation; Construction and Operation of a Replacement Secure Facility. The sum of \$21,600,000 for the fiscal year ending June 30, 2023 is hereby appropriated to the department of health and human services for the design and construction of the new secured youth development facility, as described in section 2 of this act. Such funds shall prioritize use of federal funds, be nonlapsing and continually appropriated to the department for the purposes of this act, and shall not be transferred or used for any other purpose. Of this amount, the governor shall determine if any remaining discretionary funds appropriated in the American Rescue Plan Act of 2021, Public Law 117-2 or any other federal funds can be used for this purpose and any remainder shall be general funds. The governor is authorized to draw a warrant for the general fund share of said sum out of any money in the treasury not otherwise appropriated.
 - 6 Juvenile Treatment Center; Forecasted Operating Budget of a Replacement Facility.
- I. The operating budget of the juvenile treatment center shall be designed to be commensurate with the average cost per child to operate a similar juvenile facility in New England.
- II. On at least a biennial basis, the operating budget of the juvenile treatment center shall be adjusted based on the average census for the previous biennium.
- 7 New Paragraphs; New Hampshire Youth Development Center; Administration. Amend RSA 621:1 by inserting after paragraph III the following new paragraph:
- IV. In furtherance of the creation of a trauma informed care treatment environment, the director of the replacement facility shall possess at least the following qualifications:
- (a) An advanced degree in clinical practice of psychology, nursing, social work, or medicine;
- (b) Experience in the implementation of trauma informed care in congregate settings; and
 - (c) Experience in trauma informed care of juveniles.
 - 8 Delinquent Children; Dispositional Hearing. Amend RSA 169-B:19, I(j) to read as follows:
- (j) Commit the minor to the custody of the department of health and human services for the remainder of minority. Commitment under this subparagraph may only be made following written findings of fact by the court, supported by clear and convincing evidence, that commitment is necessary to protect the safety of the minor or of the community, and may only be made if the minor has not waived the right to counsel at any stage of the proceedings. If there is a diagnosis or other evidence that a minor committed under this subparagraph may have a serious emotional disturbance or other behavioral health disorder, the minor shall, with the consent of the minor and the minor's family, be referred to a care management entity pursuant to RSA 135-F:4, III. The care management entity shall develop and oversee the implementation of a care plan for the minor, intended to reduce the period of commitment. Commitment may not be based on a finding of contempt of court if the minor has waived counsel in the contempt proceeding or at any stage of the proceedings from which the contempt arises. Commitment may include, but is not limited to,

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placement by the department of health and human services at a facility certified for the commitment of minors pursuant to RSA 169-B:19, VI, or administrative release to parole pursuant to RSA 621:19, or administrative release consistent with the cap on youth development center population, provided that the appropriate juvenile probation and parole officer is notified. Commitment under this subparagraph shall [not be ordered as a disposition for a violation of RSA 262 or 637, possession of a controlled drug without intent to sell under RSA 318 B, or violations of RSA 634, 635, 641, or 644, which would be a misdemeanor if committed by an adult. However, commitment may be ordered under this subparagraph for any offense which would be a felony or class A misdemeanor if committed by an adult if the minor has previously been adjudicated under this chapter for at least 3 offenses which would be felonies or class A misdemeanors if committed by an adult. A court shall only commit a minor based on previous adjudications if it finds by clear and convincing evidence that each of the prior offenses relied upon was not part of a common scheme or factual transaction with any of the other offenses relied upon, that the adjudications of all of the prior offenses occurred before the date of the offense for which the minor is before the court, and that the minor was represented by counsel at each stage of the prior proceedings following arraignment.] only be ordered as a disposition for:

- (1) First degree murder, second degree murder, attempted murder, manslaughter, negligent homicide under RSA 630:3, II, first degree assault, second degree assault, except when the allegation is a violation of RSA 631:2, I(d), felonious sexual assault, aggravated felonious sexual assault, kidnapping, criminal restraint, robbery punishable as a class A felony, burglary while armed or involving the infliction of bodily harm under RSA 635:1, II, or arson punishable as a felony; or
- (2) Pursuant to a plea agreement entered into by a minor with consultation of counsel, and the court makes express findings that this disposition is in the best interest of the minor.
- 9 New Subparagraph; Delinquent Children; Dispositional Hearing. Amend RSA 169-B:19, I by inserting after subparagraph (l) the following new subparagraph:
- (m)(1) Notwithstanding the provisions of RSA 169-B:19, I(j), a court may commit the minor to the custody of the department of health and human services for the remainder of minority if the minor is found delinquent:
 - (A) For an offense which would be a felony if committed by an adult; or
- (B) For any offense which would be a felony or class A misdemeanor if committed by an adult, if the minor has previously been adjudicated under this chapter for at least 3 offenses within the previous 12 months, which would be felonies or class A misdemeanors if committed by an adult. A court shall only commit a minor based on previous adjudications if it finds by clear and convincing evidence that each of the prior offenses relied upon was not part of a common scheme or

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factual transaction with any of the other offenses relied upon, that the adjudications of all of the prior offenses occurred before the date of the offense for which the minor is before the court.

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- (2) In utilizing subparagraphs (1)(A) or (B), the court shall first find that there is no placement or set of supervision and treatment services other than secure confinement that will protect the public from a substantial risk of serious bodily injury or substantial risk of felony property crime. A court's finding pursuant to this subparagraph shall only be sufficient to support secure confinement if it is made by clear and convincing evidence following either a stipulation by the parties or an evidentiary hearing wherein the court considers reliable evidence. Further, the court's findings shall include written, case-specific findings which identify the evidence relied upon and the basis for the determination that secure confinement is necessary. Commitment under this subparagraph may only be made if the minor has not waived the right to counsel at any stage of the If there is a diagnosis or other evidence that a minor committed under this proceedings. subparagraph may have a serious emotional disturbance or other behavioral health disorder, the minor shall, with the consent of the minor and the minor's family, be referred to a care management entity pursuant to RSA 135-F:4, III. The care management entity shall develop and oversee the implementation of a care plan for the minor, intended to reduce the period of commitment. Commitment may include, but is not limited to, placement by the department of health and human services at a facility certified for the commitment of minors pursuant to RSA 169-B:19, VI, administrative release to parole pursuant to RSA 621:19, or administrative release consistent with the cap on youth development center population under RSA 621:10, provided that the appropriate juvenile probation and parole officer is notified.
 - 10 Youth Development Center; Department's Duties. Amend RSA 621:12, III to read as follows:
- III. The commissioner shall provide a quarterly report to the fiscal committee of the general court of the average daily census, [and] the estimated monthly cost per resident at the Sununu youth services center, including those funds used from accounting units not directly associated with the Sununu youth services center, highest level of charge for each commitment or detention, and the recidivism rate for the facility.
- 11 New Paragraph; Delinquent Children; Definitions. Amend RSA 169-B:2 by inserting after paragraph XV the following new paragraph:
- XVI. "Trauma informed care" means a program, organization, or system that realizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, families, staff, and other individuals involved with the system, and responds by fully integrating knowledge about trauma into policies, procedures, and practices and seeks to actively resist retraumatization. Trauma informed care also follows the following principles: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, voice and choice, and cultural, historical, and gender issues.

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- 1 12 Applicability. RSA 169-B:19, as amended by sections 7 and 8 of this act, shall apply to cases 2 pending as of the effective date of this act in which a dispositional order has not yet been ordered.
- 3 13 Effective Date.
- I. Sections 8 and 9 of this act shall take effect 60 days after its passage.
- 5 II. The remainder of this act shall take effect upon its passage.

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2023-0767h

AMENDED ANALYSIS

This bill sets parameters for the construction and operation of a new youth secure facility to replace the Sununu Youth Services Center (SYSC), makes an appropriation thereof, sets forth requirements around the disposition of the current SYSC property, and amends the law surrounding the dispositional hearings of delinquent children.