



# Lancaster County Youth Intervention Center



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The Youth Intervention Center is under the direction of Drew Fredericks and is located on the Sunnyside Peninsula at 235 Circle Avenue in Lancaster, Pennsylvania. The Center provides both detention and shelter care services for males and females from the ages of 10 to 18. Detention program has a 48 bed capacity, the Shelter program has a 36 bed capacity, and P.U.L.S.E. Weekend Program has a 12 bed capacity. The Youth Intervention Center is licensed by the Pennsylvania Department of Human Services and abides by their regulations. The Center is also a member of the Juvenile Detention Centers and Alternative Programs (JDCAP), the Northeast Juvenile Detention Coalition (NJDC), and the National Partnership for Juvenile Services (NPJS).

Historical records indicate that the first facility dedicated to housing delinquent children was built in 1799. An Almshouse was built at 900 East King Street, currently the location of the Children and Youth Agency. The Almshouse not only housed delinquent children but also housed those who were poor, immoral, mentally ill, and criminal as defined in that era. These residents were expected to work the grounds of the farm or the stone quarry in order to offset their expenses. The focus at that time was not on rehabilitation or education.

Turning the clock ahead more than 200 years brings us to Barnes Hall. Constructed in 1963 and named after the County's first probation officer, Edgar R. Barnes, Barnes Hall was designed as a group home setting for the delinquent youth of Lancaster County. Due to the deterioration of Barnes Hall, and the need for more space in order to accommodate the rising juvenile crime rate in our area, on March 9, 2002, the Youth Intervention Center opened its doors to serve the citizens of Lancaster County.

The Youth Intervention Center's Detention program provides temporary custody for alleged and adjudicated male and female residents from the ages of 10 to 18. The mission of juvenile detention is the temporary and safe custody of juveniles who are accused of conduct subject to the jurisdiction of the court who require a restricted environment for their own, or the community's protection, while pending legal action. The facility's Shelter care program provides temporary and emergency care for alleged and adjudicated dependant and less at risk delinquent male and female residents from the ages of 10 to 18.

Daily life for both Detention and Shelter residents is highly structured, focusing on year-round schooling, structured recreational activities, voluntary religious services, psycho-educational programming, family interaction, and countless dedicated volunteers from throughout Lancaster County. The goal of the facility's programming is to provide the residents with a positive environment full of diverse, structured, and life enhancing activities. Residents also receive a full spectrum of services such as comprehensive medical and dental care, mental health care, and counseling, just to name a few.

The facility's Community Intervention Services program offers both "eye-opening" and educational presentations about juvenile delinquency, juvenile justice system, and what the results are from poor decision-making. These presentations are free to interested parents, schools, and organizations.

The Youth Intervention Center has been honored with multiple statewide awards for excellence in staffing, programming, and leadership.

# **P.U.L.S.E.**

Providing Uplifting Learning Skills to Excel

## **Weekend Program**

The mission of the P.U.L.S.E program is to provide short-term, research/evidence-based treatment heavily reliant on Cognitive Behavioral Therapy and Motivational Interviewing to male youth in Lancaster County. Youth who participate in the program are identified as low to moderate risk based on the Youth Level of Service/Case Management Inventory (YLS/CMI). The instrument identifies risk, need, and responsivity factors as well as strengths and protective factors. The Program Coordinator will work with Juvenile Probation/Children and Youth Agency, the client, and the family to incorporate the data from the YLS/CMI into a holistic plan that builds upon strengths and addresses areas related to recidivism thereby enhancing success and prevention of future delinquent/criminal behavior.

P.U.L.S.E participants will receive treatment on a weekend-long basis for 5 consecutive weekends that will foster repairing harm to victims, restoring the health and welfare of communities, and enable juveniles to become productive and law-abiding members of their communities, consistent with BARJ Principles already in existence. Comprehensive Case Plans will link assessments with services aimed to improve competencies and reduce the risk to reoffend. Participants will be allotted time for school work and community service projects. The schedule will be highly structured, while allowing flexibility to meet each participant's needs.

The parents/guardians of the P.U.L.S.E participants are encouraged to participate in the program to ensure a continuity of care. The parent/guardian and the participant will attend a Family Intake Meeting in order to establish a clear understanding of the dynamics surrounding the participant's behaviors. In addition, the parent will briefly speak to the Program Coordinator every Friday and Sunday to discuss progress and concerns. The family will participate in a family program during one of the weekends. This will give the parents/guardians and the child an opportunity to examine the child's behavior and have an open conversation about the changes that need to occur in order to promote healthy growth. Finally, the parents/guardians will attend a Graduation Ceremony at on the last Sunday to acknowledge the participant's accomplishments throughout the program.

Many youth involved in the juvenile justice system are lacking in prosocial skills. P.U.L.S.E participants will complete the Forward Thinking Curriculum from The Change Companies. They will focus on What Got Me Here?, Handling Difficult Feelings, Relationships and Communication, Responsible Behavior, and Victim Awareness. In addition, they will create an Individual Change Plan that will guide them throughout the five weeks.

# **P.U.L.S.E.**

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## **Evening Treatment Center**

The Evening Treatment Center (ETC) serves adolescents who are involved with the Office of Juvenile Probation or the Children and Youth Agency. The program is offered to males and females ages 13-18. Participants can be referred to the program in three ways: recommended by a Juvenile Probation Officer while the youth is awaiting adjudication/disposition, court-ordered by Juvenile Probation after disposition or recommended by a Children and Youth Caseworker. Participants will be transported to the program after school and then transported home at 8:30pm as long as they live within a 12 mile radius of the facility. The length of the program will be determined by the participant's treatment needs. The participant's goals, program length, and groups will be determined based on recommendations from the Juvenile Probation Officer or Children and Youth Caseworker, consultation with the parents/guardians, and results of various assessments. The ETC participants will participate in evidence based programs, as well as psycho-educational groups. The following evidence based programs will be offered: Aggression Replacement Training, Thinking for a Change, Strengthening Families, and Alternatives. In addition, participants

will be able to participate in the following psycho-educational groups: Employment Skills Development, Life Skills Development, Coping Strategies, Relationship Skills, and Therapeutic Group Discussion. While at the program, participants will receive an evening meal and snack. They will be given time to complete their homework, as well as recreation time.

## **Frequently Asked Questions**

### **What type of facility are you? (Federal, State, Local, or Private)**

We are a County-owned and operated facility that provides Detention and Shelter services with the mission of providing temporary safe and secure care for alleged delinquent juveniles and dependent juveniles of Lancaster County. For all juveniles, the center provides protection for the community and the child.

The Youth Intervention Center is licensed by the [Pennsylvania Department of Human Services](#) and abides by their regulations. The Center is also a member of the [Juvenile Detention Centers and Alternative Programs \(JDCAP\)](#) and the [National Partnership for Juvenile Services \(NPJS\)](#).

### **How is the facility and its programs funded?**

The County share for operating the Detention program is 50%, with the other 50% reimbursed through Federal and State monies.

The County share for operating the Shelter program and P.U.L.S.E weekend program is 10%, with the other 90% reimbursed through Federal and State monies.

### **What is the number of staffing on during 1<sup>st</sup> Shift, 2<sup>nd</sup> Shift, & 3<sup>rd</sup> Shift?**

Our Detention staffing patterns are population driving and based upon Department of Public Welfare regulations which state that there must be 1 staff member present for every 6 residents during waking hours and 1 staff member present for every 12 residents during sleeping hours.

Our Shelter staffing patterns are population driving and based upon Department of Public Welfare regulations which state that there must be 1 staff member present for every 8 residents during waking hours and 1 staff member present for every 12 residents during sleeping hours.

### **How many juveniles are housed in your facility?**

There are 60 beds in Detention, 24 beds in the Shelter, and 12 beds for our P.U.L.S.E. weekend program.

## What types of crimes are committed by the juveniles housed in the facility?

### Detention

According to the Juvenile Act, composed by the [Juvenile Court Judges' Commission \(JCJC\)](#), a **delinquent act** is defined as follows:

1. The term means an act designated a crime under the law of this Commonwealth, or of another state if the act occurred in that state, or under Federal law, or under local ordinances.
2. The term shall not include:
  - a. The crime of murder.
  - b. Any of the following prohibited conduct where the child was 15 years of age or older at the time of the alleged conduct, and a deadly weapon as defined in 18 Pa.C.S. § 2301 (relating to definitions) was used during the commission of the offense, which, if committed by an adult, would be classified as:
    - i. Rape
    - ii. Involuntary deviate sexual intercourse
    - iii. Aggravated assault
    - iv. Robbery
    - v. Robbery of motor vehicle
    - vi. Aggravated indecent assault
    - vii. Kidnapping
    - viii. Voluntary manslaughter
    - ix. An attempt, conspiracy, or solicitation to commit murder or any of these crimes
  - c. Any of the following prohibited conduct where the child was 15 years of age or older at the time of the alleged conduct, and has been previously adjudicated delinquent of any of the following prohibited conduct, which, if committed by an adult would be classified as:
    - i. Rape
    - ii. Involuntary deviate sexual intercourse
    - iii. Robbery
    - iv. Robbery of motor vehicle
    - v. Aggravated indecent assault
    - vi. Kidnapping
    - vii. Voluntary manslaughter
    - viii. An attempt, conspiracy, or solicitation to commit murder or any of these crimes
  - d. Summary offenses, unless the child fails to comply with a lawful sentence imposed there under, in which event notice of such fact shall be certified to the court.
  - e. A crime committed by a child who has been found guilty in a criminal proceeding for other than a summary offense.

### Shelter

According to the Juvenile Act, composed by the [Juvenile Court Judges' Commission \(JCJC\)](#), a **dependent child** is a child who:

1. is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his physical, mental, or emotional health, or morals;
2. has been placed for care or adoption in violation of law;
3. has been abandoned by his parents, guardian, or other custodian;
4. is without parent, guardian, or legal guardian;
5. while subject to compulsory school attendance is habitually and without justification truant from school;
6. has committed a specific act or acts of habitual disobedience of the reasonable and lawful commands of his parent, guardian, or other custodian and who is ungovernable and found to be in need of care, treatment, or supervision;
7. is under the age of ten years and has committed a delinquent act;

8. has been formally adjudicated dependant, and is under the jurisdiction of the court, subject to its conditions or placements and who commits an act which is defined as ungovernable as in #6;
9. has been referred pursuant to section 6323 of the Juvenile Act (relating to informal adjustment) and who commits an act which is defined ungovernable as in #6.

### **When was your facility started?**

Please visit the following link for a detailed history of juvenile justice in Lancaster County:  
<http://web.co.lancaster.pa.us/DocumentCenter/View/511>

### **Why was it started?**

Please visit the following link for a detailed history of juvenile justice in Lancaster County:  
<http://web.co.lancaster.pa.us/DocumentCenter/View/511>

### **Who started the facility?**

Please visit the following link for a detailed history of juvenile justice in Lancaster County:  
<http://web.co.lancaster.pa.us/DocumentCenter/View/511>

### **What type of training do you require the staffing to have?**

All employees are required to have a **minimum** of forty (40) training hours every year. Our training cycle runs from October 1<sup>st</sup> of one year, until September 30<sup>th</sup> of the next. All employees must have their forty (40) hours of training by the end of September.

## **Department of Human Services Chapter 3800 Regulations**

### **§ 3800.58. Staff training**

- (a) Prior to working with children, each staff person who will have regular and significant direct contact with children, including part-time and temporary staff persons and volunteers, shall have an orientation to the person's specific duties and responsibilities and the policies and procedures of the facility, including reportable incident reporting, discipline, care and management of children, medication administration and use of restrictive procedures.
- (b) Prior to working alone with children and within 120 calendar days after the date of hire, the director and each full-time, part-time and temporary staff person who will have regular and significant direct contact with children, shall have at least 30 hours of training to include at least the following areas:
  - (1) The requirements of this chapter.
  - (2) 23 Pa.C.S. §§ 6301—6385 (relating to child protective services law) and Chapter 3490 (relating to protective services).
  - (3) Fire safety.
  - (4) First aid, Heimlich techniques, cardiopulmonary resuscitation and universal precautions.
  - (5) Crisis intervention, behavior management and suicide prevention.
  - (6) Health and other special issues affecting the population.
- (c) If a staff person has completed the training required in subsection (b) within 12 months prior to the staff person's date of hire, the requirement for training in subsection (b) does not apply.
- (d) After initial training, the director and each full-time, part-time and temporary staff person, who will have regular and significant direct contact with children, shall have at least 40 hours of training annually relating to the care and management of children. This requirement for annual training does not apply for the initial year of employment.
- (e) Each staff person who will have regular and significant direct contact with children, shall complete training in first aid, Heimlich techniques and cardiopulmonary resuscitation at least every year. If a staff person has a formal certification from a recognized health care organization which is valid for more than 1 year, retraining is not required until expiration of the certification.

- (f) Training in first aid, Heimlich techniques and cardiopulmonary resuscitation shall be completed by an individual certified as a trainer by a hospital or other recognized health care organization.
- (g) Training in fire safety shall be completed by a fire safety expert or, in facilities serving 20 or fewer children, by a staff person trained by a fire safety expert. Videotapes prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.
- (h) A record of training including the person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

**What is the average length of stay (days) for juveniles housed in the facility?**

<b>2008 Average Length of Stay – Detention</b>											
January 2008	February 2008	March 2008	April 2008	May 2008	June 2008	July 2008	August 2008	September 2008	October 2008	November 2008	December 2008
14.26	15.99	14.54	11.03	13.58	13.74	14.7	14.46	14.22	12.18	14.1	14.0
<b>2009 Average Length of Stay – Detention</b>											
January 2009	February 2009	March 2009	April 2009	May 2009	June 2009	July 2009	August 2009	September 2009	October 2009	November 2009	December 2009
13.54	12.45	12.19	13.68	13.76	12.15	10.76	14.33	12.32	15.17	13.41	12.96
<b>2010 Average Length of Stay – Detention</b>											
January 2010	February 2010	March 2010	April 2010	May 2010	June 2010	July 2010	August 2010	September 2010	October 2010	November 2010	December 2010
11.33	11.75	11.76	9.57	13.75	12.40	13.90	13.13	9.83	13.57	13.64	13.43
<b>2011 Average Length of Stay – Detention</b>											
January 2011	February 2011	March 2011	April 2011	May 2011	June 2011	July 2011	August 2011	September 2011	October 2011	November 2011	December 2011
11.27	12.46	13.72	12.21	13.27	13.18	14.05	11.33	13.71	14.26	14.64	14.85
<b>2012 Average Length of Stay – Detention</b>											
January 2012	February 2012	March 2012	April 2012	May 2012	June 2012	July 2012	August 2012	September 2012	October 2012	November 2012	December 2012
15.95	13.92	12.42	12.34	13.59	12.87	16.24	14.15	14.69	16.38	13.68	16.49
<b>2013 Average Length of Stay – Detention</b>											
January 2013	February 2013	March 2013	April 2013	May 2013	June 2013	July 2013	August 2013	September 2013	October 2013	November 2013	December 2013
14.85	13.27	13.19	13.79	12.59	15.17	13.1	11.74	12.66	12.91	16.52	16.66
<b>2014 Average Length of Stay – Detention</b>											
January 2014	February 2014	March 2014	April 2014	May 2014	June 2014	July 2014	August 2014	September 2014	October 2014	November 2014	December 2014
13.20	11.98	13.0	12.07	16.23	15.02	13.87	14.69	14.06	12.18	15.0	14.83
<b>2015 Average Length of Stay – Detention</b>											
January 2015	February 2015	March 2015	April 2015	May 2015	June 2015	July 2015	August 2015	September 2015	October 2015	November 2015	December 2015
15.47	13.94	14.8	13.9	13.75	11.84	12.52	12.71	14.45	11.41	10.29	12.10

<b>2008 Average Length of Stay – Shelter</b>											
January 2008	February 2008	March 2008	April 2008	May 2008	June 2008	July 2008	August 2008	September 2008	October 2008	November 2008	December 2008
20.87	15.63	16.41	17.0	18.5	17.89	18.64	18.62	19.61	15.48	18.65	18.23
<b>2009 Average Length of Stay – Shelter</b>											
January 2009	February 2009	March 2009	April 2009	May 2009	June 2009	July 2009	August 2009	September 2009	October 2009	November 2009	December 2009
18.59	18.11	19.05	19.09	21.89	20.3	15.08	16.37	20.29	14.03	17.73	14.65
<b>2010 Average Length of Stay – Shelter</b>											
January 2010	February 2010	March 2010	April 2010	May 2010	June 2010	July 2010	August 2010	September 2010	October 2010	November 2010	December 2010
17.33	14.43	14.93	16.10	17.20	16.90	20.28	17.63	17.02	19.45	18.30	15.28
<b>2011 Average Length of Stay – Shelter</b>											
January 2011	February 2011	March 2011	April 2011	May 2011	June 2011	July 2011	August 2011	September 2011	October 2011	November 2011	December 2011
15.53	15.15	13.52	16.94	16.79	17.26	16.93	12.29	17.72	19.53	16.09	21.29
<b>2012 Average Length of Stay – Shelter</b>											
January 2012	February 2012	March 2012	April 2012	May 2012	June 2012	July 2012	August 2012	September 2012	October 2012	November 2012	December 2012
16.32	18.43	17.26	19.75	18.52	16.8	19.7	18.18	20.1	18.14	15.59	15.45
<b>2013 Average Length of Stay – Shelter</b>											
January 2013	February 2013	March 2013	April 2013	May 2013	June 2013	July 2013	August 2013	September 2013	October 2013	November 2013	December 2013
19.34	16.86	16.82	17.74	18.9	19.86	15.2	17.63	24.4	19.41	14.96	17.64
<b>2014 Average Length of Stay – Shelter</b>											
January 2014	February 2014	March 2014	April 2014	May 2014	June 2014	July 2014	August 2014	September 2014	October 2014	November 2014	December 2014
19.0	15.35	16.33	20.75	19.28	14.96	22.84	21.0	20.1	18.68	18.66	23.25
<b>2015 Average Length of Stay – Shelter</b>											
January 2015	February 2015	March 2015	April 2015	May 2015	June 2015	July 2015	August 2015	September 2015	October 2015	November 2015	December 2015
17.75	19.83	20.68	18.9	20.32	15.7	21.51	17.05	16.65	16.65	18.20	14.65

**How do you as a facility measure success and failure?**

We measure our success on the number, or lack thereof, of incidents. If there were no incidents at the end of a shift, then we were successful.

We also consider a low employee turnover rate a success. The turnover rate statewide in this field is 40%, ours is 12%. I want people to enjoy where they work, regardless of the negativity they must deal with on a daily basis.



## **Do you offer any services to the community?**

We offer three different intervention programs for concerned parents/guardians and educational organizations.

### **Operation Deterrence**

This experience is ideal for parents whose child has been displaying inappropriate behavior, but has not yet entered into the juvenile justice system. This experience shows them where the results of their poor decision-making could lead. Loss of freedom is the key message that will be delivered to the child. There is no exposure to the current residents at the Youth Intervention Center. This experience is free for interested parents.

### **Eye-Opening Experience**

This experience is ideal for parents whose child has been displaying inappropriate behavior, but has not yet entered into the juvenile justice system through an arrest. This experience shows them where the results of poor decision-making could lead. Loss of freedom is the key message that will be delivered to the child. A PowerPoint presentation can be given at your school that talks about loss of freedom, and the consequences of poor decision-making. The goal of the program is to prevent delinquency before it even starts, in an informative way. This experience is free for interested schools and organizations.

### **The Educational Experience**

This presentation is for educational classes, or groups, who are interested in learning more about juvenile delinquency, juvenile justice, and detention and shelter-care at the Youth Intervention Center. This presentation can be held at the Youth Intervention Center, or off-site at the group's meeting place. Group size at the Youth Intervention Center is limited to 25 people at the maximum. This experience is free for educational organizations.

## **What type of programming and services do you offer to the residents?**

When a resident is admitted to our facility, they will have entered into an extremely structured, disciplined, and educational environment. Upon wake up each day, a resident will experience hygiene, year-round schooling, year-round recreational activities, voluntary religious services, psycho-educational groups, and opportunities for family interaction. Our residents' daily routine is loaded with positive, structured, and life-building programming.

### **Educational Services**

Upon admission, each resident will be given an educational screening and assessment in order to gauge their educational needs. Our school program is provided year-round through the School District of Lancaster. The educational program is culturally sensitive and reflects the racial and ethnic diversity of the community.

### **Typical Classroom**





## **Religious Programming**

Our religious program contains a diverse variety of volunteer church groups that accommodate the religious needs of our residents. Our facility has a full-time chaplain and two part-time chaplain assistants, along with over seventeen volunteer church groups. Participation in religious activities is voluntary for our residents.

## **Family Interaction and Support**

Our program provides visitation, mail, and telephone services with the goal of promoting appropriate support, interaction, and involvement with family members.

## **Mental Health Assessment**

Our in-house Case Manager assesses and identifies the mental health needs of our residents. In addition, she also runs our psycho-educational programs. Some of the topics include:

- Drug and Alcohol Issues
- Anger Control
- Communication Skills
- Living and Coping with Mental Illness
- Fatherhood Initiative
- Travel
- Preventing Abuse
- Dance Therapy
- Music Therapy
- Victim Impact
- Combating Prejudices and Hatred

## **Health Services**

Our medical department is accredited by National Commission on Correctional Health Care (*NCCHC*).

We have four full-time LPNs, one full-time RN, and two on-call physicians around the clock that provide routine medical examinations, diagnosis and treatment of medical issues, emergency dental diagnosis and treatment, and medication management services.

Upon arrival to our facility, all juveniles undergo a Receiving Screening and Suicide Assessment within one (*1*) hour of arrival.

All juveniles receive a complete Health Assessment by Nursing within twenty-four (*24*) hours. A physical is performed by a Provider (*PA or CRNP*) within ninety-six (*96*) hours of arrival. A dental exam is performed within thirty (*30*) days, with a cleaning completed every six (*6*) months.

The intake process also includes a Vision and a Hearing Screening, a PPD, and Sick Cell Screening for all African American juveniles.

All juveniles who arrive on medications, have those medications continued and are seen by either the MD or the Psychiatrist (*or Psychiatric CRNP*). All juveniles also have the opportunity to request a visit with any Provider at any time by submitting a Sick Call request or making a verbal request to the Medical Department.

When a juvenile is being discharged from the Youth Intervention Center, a “Discharge Summary/Release Information” form will accompany the juvenile along with the remainder of their medications. The “Discharge Summary/Release Information” form includes the following information:

- medical history
- medication list
- TB test and lab results
- pending Medical appointments
- all other pertinent information

Upon release, the juvenile and/or responsible party and a member of the Medical Department will sign the “Discharge Summary/Release Information” form. One copy of this form is given to the juvenile and another copy is placed in the medical chart.

When a juvenile is being transferred to another facility, a copy of their History & Physical, Psych. notes, lab results, and dental exams is also included. An updated vaccine record is also included, when available.

### **Recreational Programming**

Our Program Coordinator provides a structured recreational program that includes a variety of activities that promote physical and mental health. Some of these programs include:

- Physical Education
- Nutritional Programs
- Pet Therapy
- Girl Scouts
- Master Gardening Program
- Art Classes
- Smart Angler Program (*Pennsylvania Fish & Boat Commission*)
- And many more...

### **Give me your personal insight and opinion on the operation and practices of your facility? Is there more you would like to do?**

We believe in teamwork, consistency, and structure. We have extremely detailed policies and procedures that must be adhered to. Incidents occur because of a failure to following policy and procedure and cutting corners.

We believe in staff input. Every policy is open for discussion; in fact, we expect staff to critique our policies. Nothing is perfect. There is always room for improvement.

We also believe in staff involvement. We have numerous committees, conduct monthly off-site activities, and bi-weekly prize drawings. Each August, we have our annual employee/family cookout and facility awards presentation.