

KATHYHOCHUL Governor DAMIA HARRISMADDEN, Ed.D., MBA, M.S. Commissioner

April 16, 2025

Thomas DiNapoli, State Comptroller Office of the State Comptroller 110 State Street Albany, N.Y. 12236

Re: Audit 2023-S-15 – 180 Day Response to the Report

Dear Comptroller DiNapoli:

On behalf of the New York State Office of Children and Family Services (OCFS) and pursuant to Executive Law section 170, please find the 180-day update pertaining to OCFS' response to the Office of the State Comptroller's (OSC) recommendations detailed in audit report 2023-S-15 entitled "Oversight of Juvenile Detention Facilities (Outside New York City)." OSC's stated objective was to determine whether OCFS "adequately oversees juvenile justice facilities for youth placed in local detention facilities to ensure they meet State regulations for the health and safety of juveniles and staff." The audit covered the period from October 2018 through January 2024 and contained three key findings and recommendations.

OCFS reviewed OSC's findings and recommendations with OCFS detention oversight staff members and detention providers. OCFS is dedicated to supporting local detention providers in improving the conditions in facilities to ensure that all staff and youth remain safe. As part of continuous quality assurance, OCFS is committed to regularly reviewing and refining its policies and practices to improve outcomes in detention facilities. In furtherance of these objectives, the OCFS Division of Youth Development and Partnerships for Success (YDAPS) has made changes to its oversight practices and is in the process of creating new procedures in collaboration with the field. OCFS is committed to its review and refinement of both policy and practice on an ongoing basis to improve outcomes for youth and staff.

OSC Recommendations: Clarify, communicate, and where practicable, standardize procedures for oversight of local juvenile detention facilities to increase assurance that facilities:

- Comply with regulations related to completing required assessments, documentation, and staff training.
- Adhere to policies and procedures for documenting and reviewing incidents involving restraints.
- Implement corrective actions as directed in performance improvement plans.

OCFS Response: OCFS has implemented several changes to the oversight process to address the recommendations above:

OCFS created a template to standardize oversight for secure and specialized detention facilities, which
it began using in January of 2025. This instrument includes an annual schedule for the review of all
regulations as well as a monthly checklist. In addition to enhanced enforcement, this process
establishes a greater level of consistency between facilities and between the assigned staff. OCFS is in

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the process of creating a similar instrument for nonsecure detention facilities, which was implemented on April 1, 2025. In addition, OCFS will review and update its regulations as needed.

- OCFS created a personnel file review tracker, which it began utilizing in November 2024. This tool
 tracks the personnel process and reviews initial and annual training records to ensure training
 mandates are being met at facilities.
- OCFS created and implemented a form for use by all staff in October 2024. This form will be used to track the creation of Corrective Action Plans (CAPs) and Performance Improvement Plans (PIPs) and document in a uniform manner when issues have been resolved. This helps to clarify the processes to enhance monitoring activities and close out CAPs/PIPs.
- OCFS collaborated with the NYS Justice Center to provide training to staff at all detention facilities
 regarding background check procedures. OCFS will be utilizing the above referenced personnel file
 review tracker to monitor compliance with the background check process.

In collaboration with the facilities, OCFS created a universal intake template that includes all of the required elements for screening of new admissions. The form itself will be optional, but the elements will be required at each facility.

OCFS appreciates the opportunity to provide an update regarding our continued efforts in these areas. Please contact our office with any questions or concerns regarding this response.

Sincerely,

Dr. DaMia Harris-Madden, MBA, M.S.

Commissioner

Cc: Dr. Nina Aledort, Deputy Commissioner

a Mia Havis - Madden

Laura Darman, Executive Deputy Commissioner

Nicholas Steinbock-Pratt, General Counsel

Christopher Schall, Director of Audit and Quality Control

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