

**Office of the Child Advocate**  
**Report to**  
**Oversight Commission on**  
**Children's Services**

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Child Advocate, Cassandra Sanchez

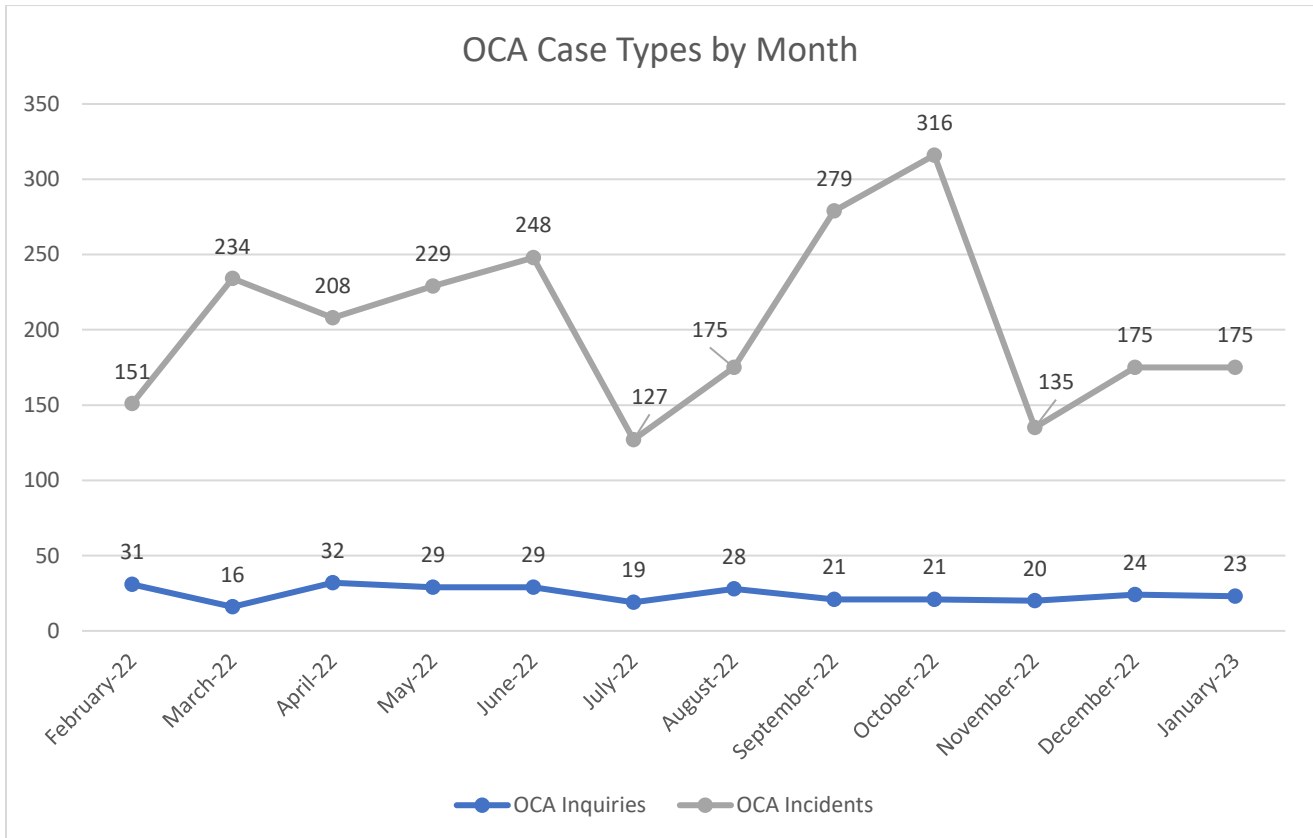
February 17, 2023

## Total OCA Cases Opened – Rolling 12 Months

2/1/22 - 1/31/23

Month	OCA Inquiries	OCA Incidents
February-22	31	151
March-22	16	234
April-22	32	208
May-22	29	229
June-22	29	248
July-22	19	127
August-22	28	175
September-22	21	279
October-22	21	316
November-22	20	135
December-22	24	175
January-23	23	175
<b>Total Inquiries:</b>	<b>293</b>	<b>Total Incidents:</b>
		<b>2452</b>

**Total Cases:** 2745



### OCA Case Explanation

- Inquiries to the OCA include phone calls, emails, and cases opened from in-person meetings with children, providers, and stakeholders.
- Incidents include all critical incident reports from DCYF, restraint and seclusion reports from residential programs and SYSC, missing children reports, DCYF special investigations unit (SIU) investigations, and law enforcement notifications.

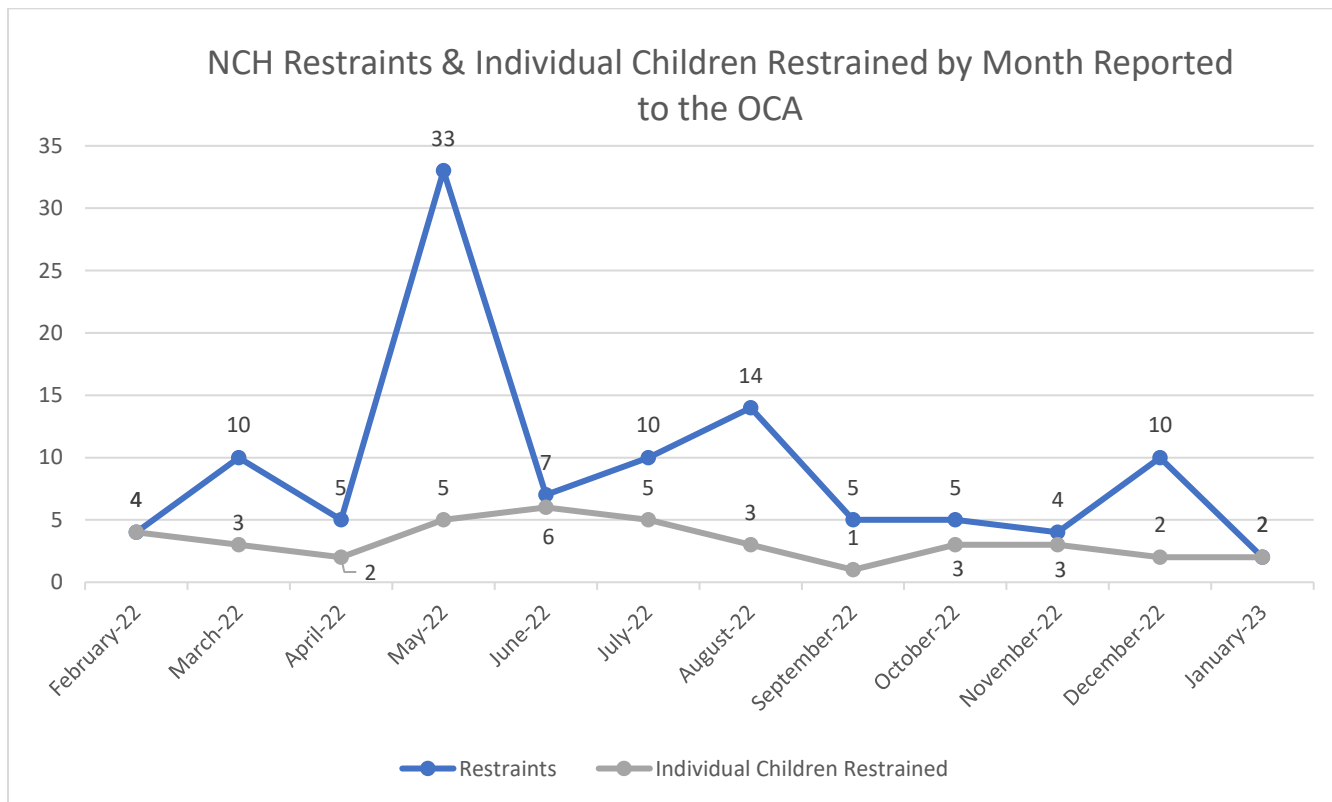
## Nashua Children's Home Restraints Reported to the OCA

2/1/22 – 1/31/23

Month	Restraints	Individual Children	Est Population*	% Restrained Est
February-22	4	4	30	13%
March-22	10	3	32	9%
April-22	5	2	33	6%
May-22	33	5	33	15%
June-22	7	6	33	18%
July-22	10	5	30	17%
August-22	14	3	30	10%
September-22	5	1	31	3%
October-22	5	3	33	9%
November-22	4	3	32	9%
December-22	10	2	32	6%
January-23	2	2	31	6%

**Total: 109**

\*Population data estimated from DCYF Result Oriented Management (ROM) reports. Represents number of DCYF involved children placed at a facility on the last day of the period. Entries and discharges are not captured so this data may undercount total children in the facility during the month.



### Nashua Children's Home (NCH)

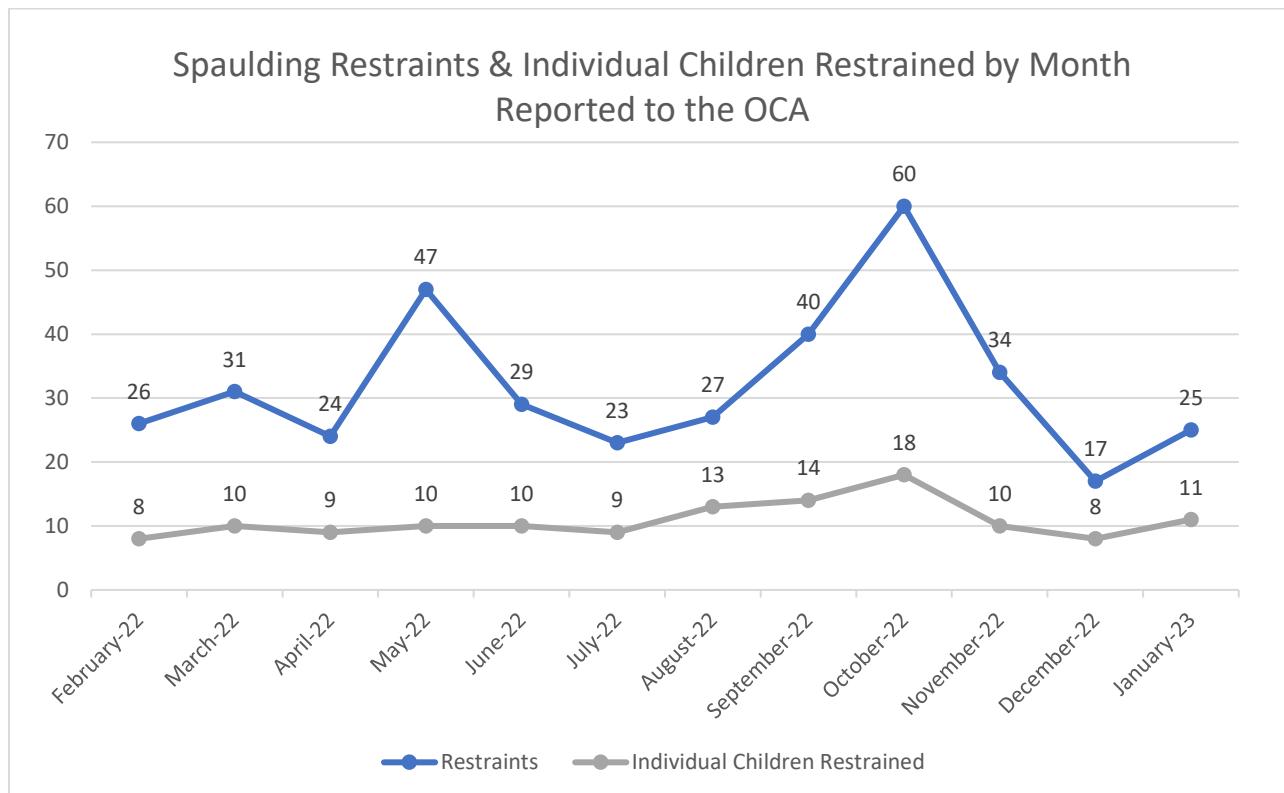
- NCH is a level 2 program which indicates that children placed there should have lower-level acuity and therapeutic needs. The milieu staff ratio is 1:4.
- The OCA will be receiving "Quiet Room" data via quarterly reports from NCH. We have viewed quiet room hours previously and voiced concern for this practice at the facility, but do not have data to share at this time.

## Spaulding Restraints Reported to the OCA

2/1/22 - 1/31/23

Month	Restraints	Individual Children	Est. Population*	% Restrained Est.
February-22	26	8	35	23%
March-22	31	10	34	29%
April-22	24	9	34	26%
May-22	47	10	40	25%
June-22	29	10	42	24%
July-22	23	9	44	20%
August-22	27	13	43	30%
September-22	40	14	42	33%
October-22	60	18	39	46%
November-22	34	10	39	26%
December-22	17	8	32	25%
January-23	25	11	34	32%
<b>Total:</b>	<b>383</b>			

\*Population data estimated from DCYF Result Oriented Management (ROM) reports. Represents number of DCYF involved children placed at a facility on the last day of the period. Entries and discharges are not captured so this data may undercount total children in the facility during the month.



### Spaulding Academy and Family Services (Spaulding)

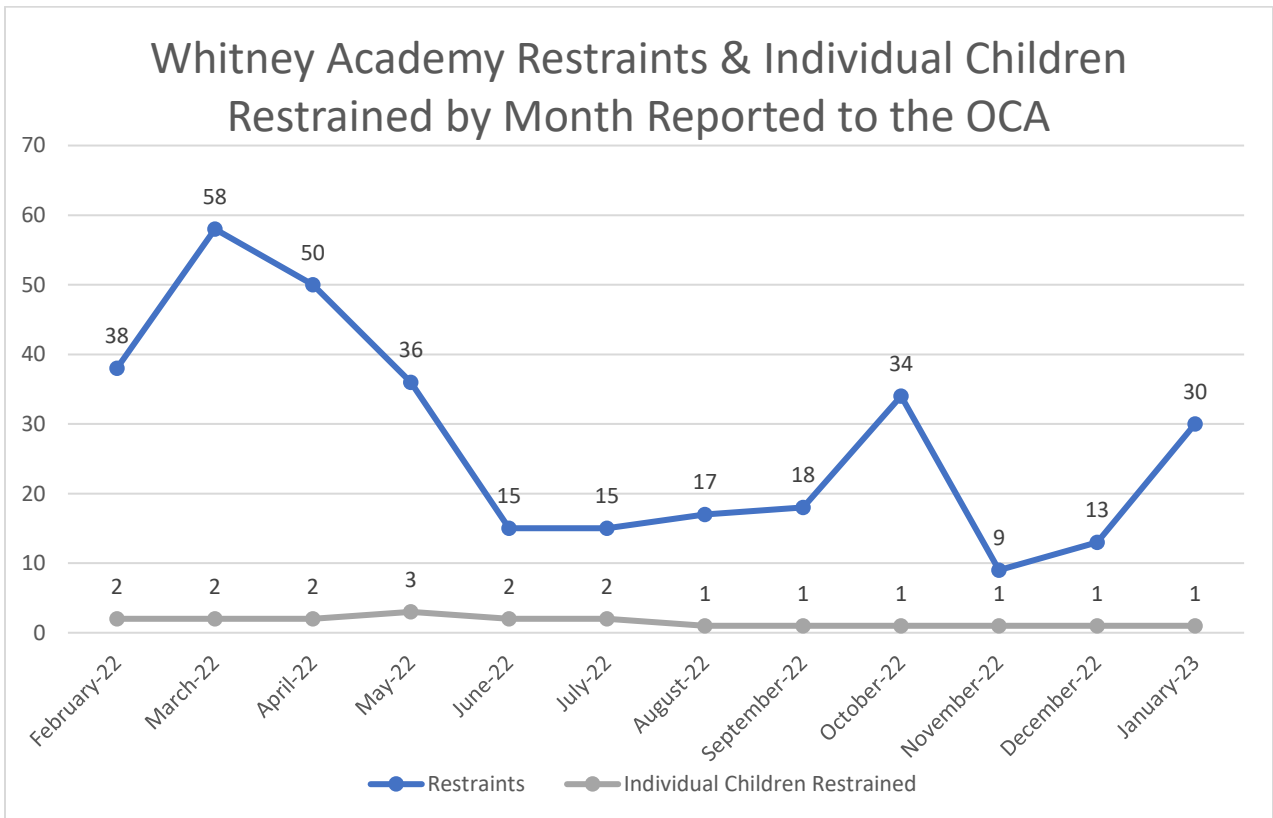
- Spaulding restraints include all programs; Spaulding has one level 2 program and three level 3 programs. At this time the OCA does not have the ability to separate out data for each program given the format in which reports are shared and the limitations of our Case Management System (CMS).
- Spaulding does not use prone restraint. They do have a room called the “Calming Space” but report that it is not used for seclusion rather to allow children space away from the milieu.

## Whitney Academy Restraints Reported to the OCA

2/1/22 - 1/31/23

Month	Restraints	Individual Children Restrained	Est. Population*	Est. % Restrained
February-22	38	2	7	29%
March-22	58	2	7	29%
April-22	50	2	6	33%
May-22	36	3	6	50%
June-22	15	2	6	33%
July-22	15	2	6	33%
August-22	17	1	6	17%
September-22	18	1	6	17%
October-22	34	1	6	17%
November-22	9	1	6	17%
December-22	13	1	6	17%
January-23	30	1	6	17%
<b>Total:</b>	<b>333</b>			

\*Population data estimated from DCYF Result Oriented Management (ROM) reports. Represents number of DCYF involved children placed at a facility on the last day of the period. Entries and discharges are not captured so this data may undercount total children in the facility during the month.



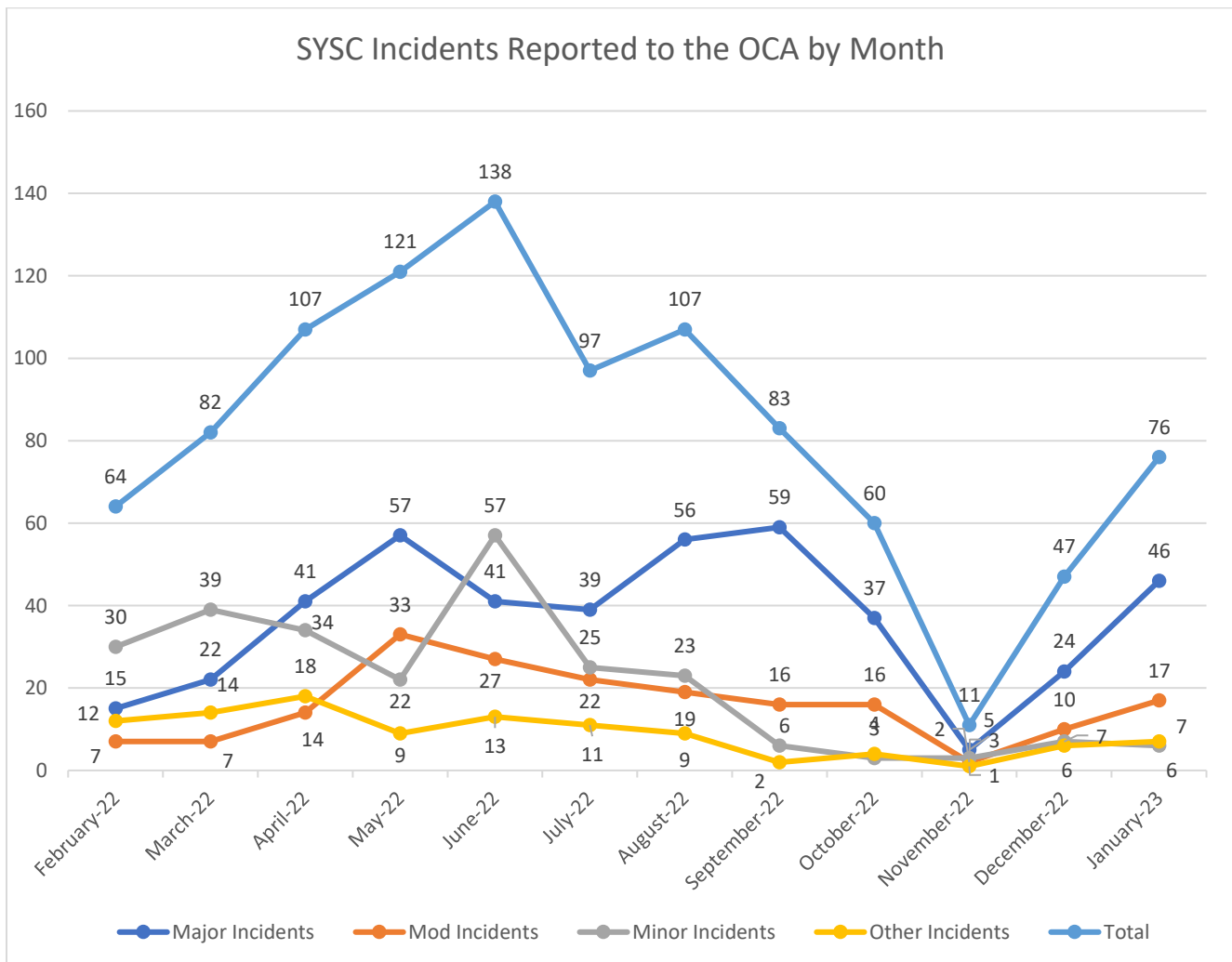
### Whitney Academy (Whitney)

- Whitney is a level 3 intensive program which indicates that children placed there have higher therapeutic needs and require additional supports and higher-level supervision. The milieu staff ratio is 1:2.
- Although Whitney Academy is located in Massachusetts, the above restraint data is specific to NH children. Prone Restraint is currently used at Whitney Academy, and they have what they call a “Time Out” room.

## SYSC Incidents Reported to the OCA

2/1/22 – 1/31/23

Month	Major Incidents	Mod Incidents	Minor Incidents	Other Incidents	Total
February-22	15	7	30	12	<b>64</b>
March-22	22	7	39	14	<b>82</b>
April-22	41	14	34	18	<b>107</b>
May-22	57	33	22	9	<b>121</b>
June-22	41	27	57	13	<b>138</b>
July-22	39	22	25	11	<b>97</b>
August-22	56	19	23	9	<b>107</b>
September-22	59	16	6	2	<b>83</b>
October-22	37	16	3	4	<b>60</b>
November-22	5	2	3	1	<b>11</b>
December-22	24	10	7	6	<b>47</b>
January-23	46	17	6	7	<b>76</b>
<b>Totals:</b>	<b>442</b>	<b>190</b>	<b>255</b>	<b>106</b>	<b>993</b>



## SYSC Incidents Involving Restraints or Seclusions

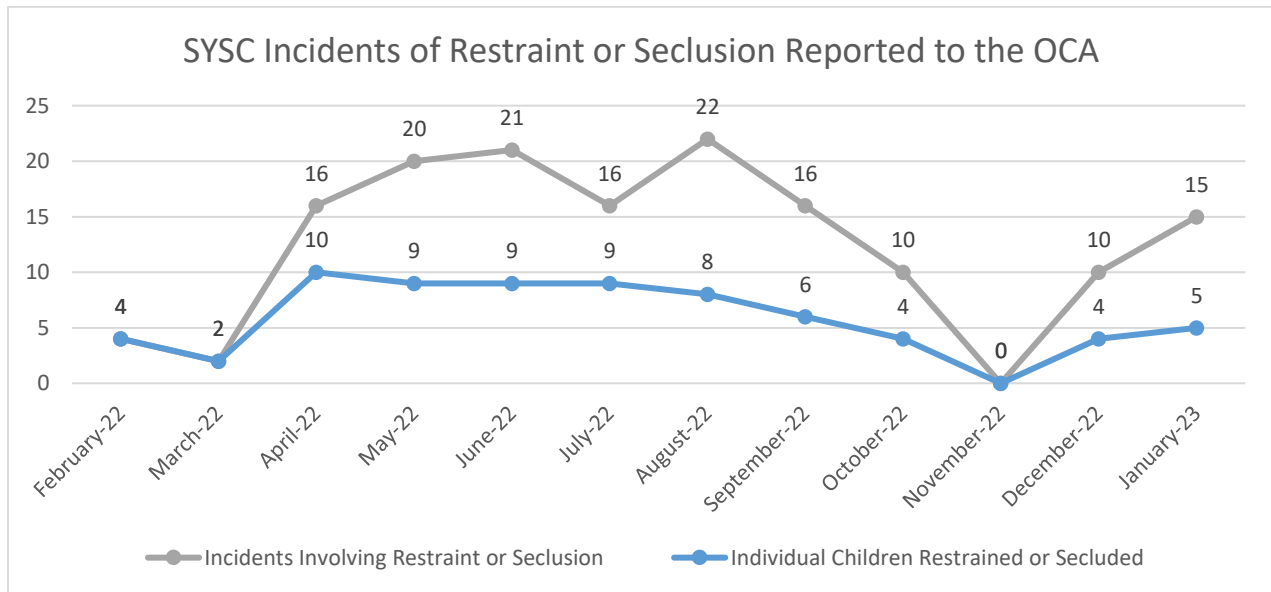
2/1/22 – 1/31/23

Type	# Of Incidents	% of Incidents
Restraints	80	8%
Seclusions	29	3%
Restraint & Seclusion	43	4%
<b>Totals:</b>	<b>152</b>	<b>15%</b>

## SYSC Incidents Involving Restraints or Seclusions by Month

2/1/22 – 1/31/23

Month	Restraint/Seclusion	Individual Children
February-22	4	4
March-22	2	2
April-22	16	10
May-22	20	9
June-22	21	9
July-22	16	9
August-22	22	8
September-22	16	6
October-22	10	4
November-22	0	0
December-22	10	4
January-23	15	5
<b>Totals:</b>	<b>152</b>	



### Sununu Youth Services Center (SYSC)

- The OCA engages in monthly meetings with the psychologist at SYSC to check in on specific children and discuss clinical offerings. There have been additional clinical groups offered.
- In November 2022, the census was particularly low with just 5 children. During this time the OCA observed the application of therapeutic programming. The clinicians were able to provide individualized therapeutic care, ensuring youth counselors understood how to implement treatment plans on the units and children had access to coping skills during times of need. Data supports the effectiveness of this approach with 0 restraint and/or seclusions and minimal incident reports.