

March 7, 2025

Honorable John Roth
Chairman, Appropriations Subcommittee on Human Services
House Office Building
Lansing, MI 48933

Dear Chairman Roth:

I write to express my support for your committee's public hearings to discuss the challenges facing Michigan's juvenile delinquency system. As you are no doubt aware, my administration has been heavily focused on the shortage of state-licensed juvenile beds for delinquent youth. I have personally written to Governor Whitmer on this matter, and members of my administration have written to the leaders of the Michigan Department of Health and Human Services (DHHS) on a number of occasions outlining the systematic failure of DHHS to ensure adequate services to delinquent youth. Additionally, in March 2023, Wayne County's Deputy County Executive and Health Officer jointly testified at the Senate Judiciary Committee on this issue.

Although our discussions with the Governor's leadership team have been constructive, DHHS has made minimal operational progress to date and the department's inaction is directly creating a public safety problem in Wayne County. Most alarmingly, the lack of progress is depriving delinquent youth of the treatment services they badly need and to which they are legally entitled. It has been two years since our public testimony and the only fair description of the current situation is "completely unacceptable." DHHS should be held accountable for producing tangible results.

The County has directly witnessed DHHS systematically drive longstanding non-profit partners from the business of residential youth placement while providing no viable alternative. Wayne and other counties throughout the state have borne the weight of these state-initiated actions. During the past several years, we have routinely housed up to 30 or more children, who have been adjudicated; thereby found to have committed a delinquent act by a judge or magistrate, at the Wayne County Juvenile Detention Facility awaiting out-of-home placements.

This is in addition to the youth in our facility appropriately awaiting adjudication, which also tangibly impacts staffing ratios. Due to insufficient bed space, caused partly by the state's oversight, these children remain in detention. This situation represents a gross assault on irretrievable moments of their childhood. The time spent in the Juvenile Detention Facility does not count towards their sentence, rendering this period wasted and contributing to further negative behaviors, as they are acutely aware that their time is being squandered. Such conditions would never be tolerated in the adult system, where sentenced individuals are expected to begin serving their sentences without undue delay.

It has been more than three years since we raised these issues with DHHS. Unfortunately, despite their numerous promises, efforts to expand out-of-home placement capacity have yielded only minimal benefits.

I sincerely hope your fact-finding effort yields a robust public discussion regarding DHHS' commitment to vulnerable youth. Though our direct concern is the breakdown of the juvenile delinquency placement system, we are similarly worried about behavioral health and abuse/neglect services provided to our county's children. We are aware of challenges on those fronts as well and remain concerned that DHHS is not demonstrating the urgency to fix these critical problems.

We believe that three things are critical to ensure DHHS makes sustained progress toward resolving the longstanding problem of residential placement beds.

1. The House should appropriate funds to build new residential capacity and renovate existing facilities to add at least 200 new beds statewide.
2. The House should seek to ascertain how DHHS' regulatory practices have driven longstanding non-profit partners from the business of residential placements and precluded new partners from initiating these services.
3. The House should seek to ascertain whether DHHS has begun to place children who are adjudicated as PA 150 delinquent wards into out-of-state residential placements. If DHHS has elected to take this step, we believe this is a very risky and ill-advised strategy. We are far more supportive of steps to invest in reviving the state's once rich network of local residential placement agencies.
4. The legislature should schedule ongoing oversight hearings to ensure that DHHS is making progress to add new residential beds and reform its administrative practices that have led to so many ongoing program closures.
5. Is the State considering alternative treatment programs for 18-21 year old that ensure they are not placed in environments with minors, while addressing their specific needs as young adults?
6. Is DHHS evaluating or planning to revise its process for determining Central registry placement when a staff member has been involved in a restraint? Specifically, will there be considerations for a fair and just probationary period with restrictions, opportunities for staff to learn from mistakes or gain experience, and differentiation when the incident does not constitute clear abuse or neglect?
7. Is DHHS evaluating the criteria that residential placements use when denying youth admission based on problematic behavior? Many placements reject youth due to assaultive behavior; however, such behaviors must be assessed from a clinical perspective, considering the underlying causes. If a youth is continuously denied placement due to a persistent behavior, when and how will they have the opportunity to rehabilitate and receive the necessary treatment?

8. How is DHHS addressing the denial of admissions and acceptance of detained youth into inpatient facilities, including state-run hospitals? What steps are being taken to ensure that youth in need of intensive mental health treatment have access to appropriate care and placement?
9. What is DHHS's position regarding the increase over the past year in youth sent out of State for placement due to the limited number of in-state beds?
10. Licensing & Bed Capacity: Can DHHS clarify the specific licensing rules that limit the number of secure treatment beds statewide, and what steps, if any, are being taken to address capacity shortages that impact youth placement and safety?
11. What is DHHS's position on contracting for capacity and not per-diem?
12. Restraints & Safety Compliance: How does DHHS ensure that licensing regulations related to restraint use align with both federal guidelines and the practical safety needs of staff and youth in detention settings? Are there plans to revise these policies to improve operational effectiveness while maintaining compliance? The current licensing rules apply to Juvenile Justice facilities and facilities for abuse and neglect. Is there a plan to have separate rules for institutions that serve violent youth versus youth placed in institutions for abuse and neglect?
13. Considering the pressing shortage of residential treatment beds, what urgent measures is the state undertaking to expand residential treatment programs specifically for females?
14. Is the state actively involved in the Pre-Admission Reviews (PARs) process to ensure that evaluations and dispositions are determined reasonably and without bias? Specifically, how is the state addressing concerns related to detained youth, the presence of shackles, 2:1 staffing requirements, and other factors that may influence decision-making for inpatient hospitalization and treatment needs?
15. What initiatives will DHHS implement to provide alternative placements for dual wards detained in Juvenile Justice settings, ensuring their placements are tailored to their specific needs? Additionally, how will the DHHS prevent abused and neglected youth from being placed in Juvenile institutions or residential facilities solely due to a lack of family or appropriate housing?
16. Flexibility in Crisis Intervention Techniques: Does DHHS provide any flexibility within licensing regulations to allow staff to properly adjust and correct physical crisis intervention techniques in real time to ensure both youth and staff safety? If not, are there considerations to revise policies to allow necessary adjustments while maintaining compliance?

This is an urgent matter impacting vulnerable children all over the state of Michigan. Counties and courts have been impacted in every region of the state. It is time to take purposeful action and hold leaders accountable for resolving this issue, which has gone on far too long. Thank you for your consideration of the issues we have raised in this letter. I look forward to future discussions.

Sincerely,

Warren C. Evans
County Executive

CC: Hon. Matt Hall, Speaker of the House
Hon. Ranjeev Pouri, Minority Leader
Hon. Ann Bollin, Chair, House Appropriations Committee
Hon. Alabas Farhat, Vice-Chair, House Appropriations Committee
Sydney Brown, Clerk of the Committee