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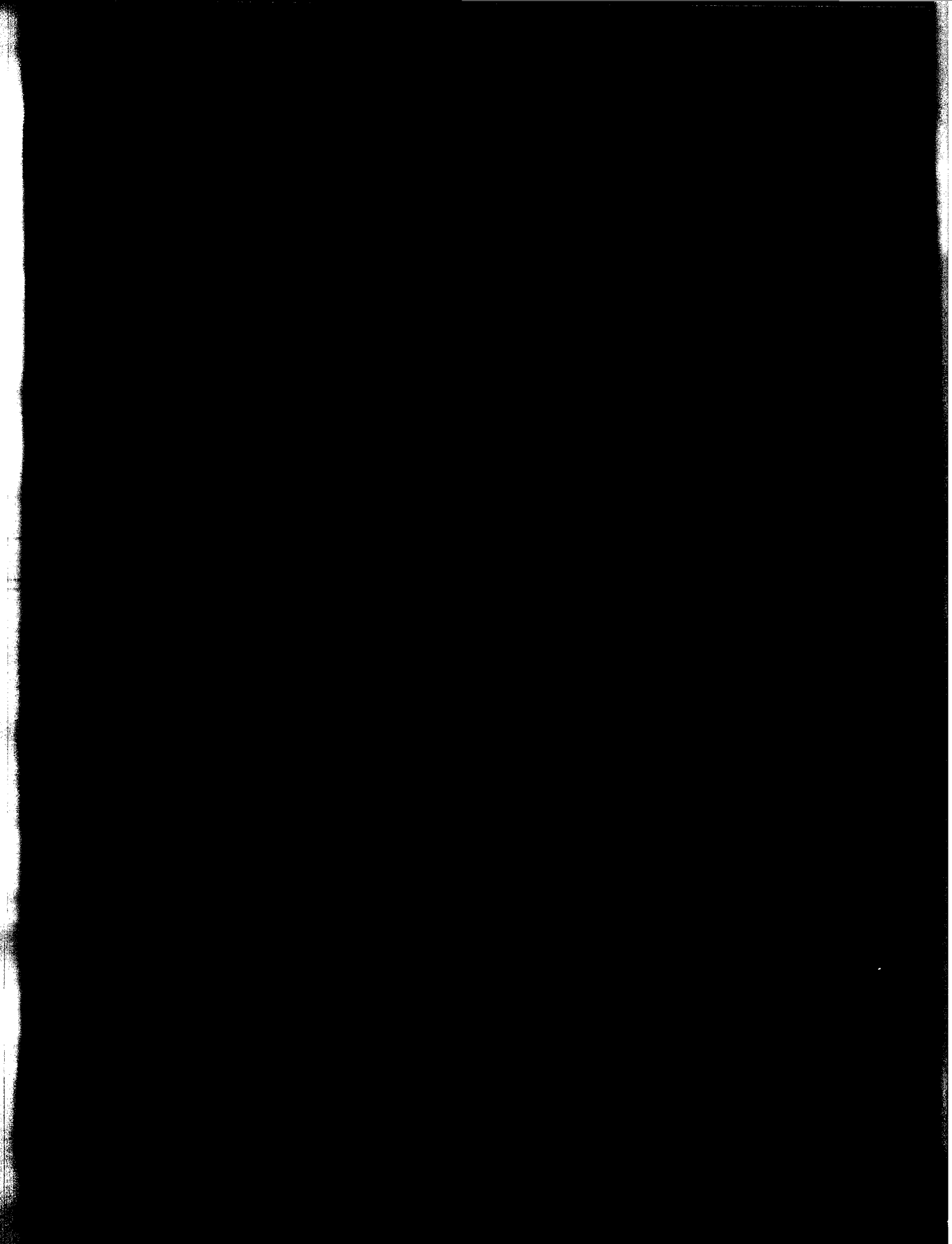
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**INSTITUTIONAL PROGRAMS FOR JUVENILES**

(Colorado - Legislative Council)  
Report To The  
Colorado General Assembly

Research Publication No. 95  
November, 1964

**OFFICERS**  
Rep. C. P. (Doc) Lamb  
Chairman  
Sen. Fay DeBerard  
Vice Chairman

**STAFF**  
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Janet Wilson  
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# COLORADO GENERAL ASSEMBLY



## LEGISLATIVE COUNCIL

ROOM 341, STATE CAPITOL  
DENVER 2, COLORADO  
222-9911—EXTENSION 2285

November 24, 1964

### MEMBERS

Lt. Gov. Robert L. Knous  
Sen. William E. Bledsoe  
Sen. Edward J. Byrne  
Sen. Frank L. Gill  
Sen. Floyd Oliver

Speaker John D. Vanderhoof  
Rep. Joseph V. Calabrese  
Rep. John L. Kane  
Rep. William O. Lennox  
Rep. John W. Nichols  
Rep. Clarence H. Quinlan

To Members of the Forty-fifth Colorado General Assembly:

In accordance with the provisions of House Joint Resolution No. 1030, 1964 regular session, the Legislative Council submits the accompanying report and recommendations prepared by its Committee on State Institutions.

This report and recommendations were approved by the Council at its meeting on November 23, 1964, for transmission to the members of the Forty-fifth regular Assembly. However, the Council voted not to endorse the recommendation of the committee that "counties be required to share the cost of the boys' and girls' schools in order to create a community awareness of the problem in this area."

Respectfully submitted,

C. P. (Doc) Lamb  
Chairman

**OFFICERS**

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Chairman  
Sen. Fay DeBerard  
Vice Chairman

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**COLORADO GENERAL ASSEMBLY**



**LEGISLATIVE COUNCIL**

ROOM 341, STATE CAPITOL  
DENVER 2, COLORADO  
222-9911—EXTENSION 2285

November 16, 1964

**MEMBERS**

Lt. Gov. Robert L. Knous  
Sen. William E. Bledsoe  
Sen. Edward J. Byrne  
Sen. Frank L. Gill  
Sen. Floyd Oliver

Speaker John D. Vanderhoof  
Rep. Joseph V. Calabrese  
Rep. John L. Kane  
Rep. William O. Lennox  
Rep. John W. Nichols  
Rep. Clarence H. Quinlan

Representative C. P. Lamb, Chairman  
Colorado Legislative Council  
Room 341, State Capitol  
Denver, Colorado

Dear Mr. Chairman:

Your committee appointed to study and review the department of institutions, the programs administered by the department, and laws relating to children has completed its assignment for 1964 and submits the accompanying report and recommendations thereon.

These recommendations include several involving legislative action in the 1965 session. In addition, the committee recommends that the Legislative Council publish an index to the children's laws of Colorado for broad distribution to all interested individuals and groups within this state.

Respectfully submitted,

William O. Lennox, Chairman  
Committee on State Institutions

WOL/mp

## FOREWORD

Under the provisions of House Joint Resolution No. 1030, 1964 regular session, the Legislative Council was directed to appoint a committee to study and review the Department of Institutions, the programs administered by the department, and laws relating to children. Members of the committee created under this directive included Representative William O. Lennox, chairman; Representative Kathleen Littler, vice chairman; Senators William E. Bledsoe, Edwin S. Lamm, Roland L. Mapelli, and L. P. Strain, and Representatives Joseph V. Calabrese, Seiji Horiuchi, Elizabeth E. Pellet, Ted Rubin, and Ruth S. Stockton. Representative C. P. Lamb, chairman of the Legislative Council, also served as an ex officio member of the committee.

The committee held seven days of meetings during 1964, beginning with an organizational meeting on April 4th. The purpose of these meetings was to review in some detail the programs and operations within the State Department of Institutions and the foster home care program within the Welfare Department's Child Welfare Division. In this connection, the committee and staff are especially grateful to the following officials for their cooperation and assistance:

Department of Institutions -- Mr. David A. Hamil, director; Mr. Matt McBride, executive assistance; Dr. Hans M. Schapire, chief of psychiatric services; Dr. Alan M. Kraft, director, Fort Logan Mental Health Center; Dr. Charles E. Meredith, superintendent, Colorado State Hospital; Dr. Leonardo Garcia-Bunuel, director of clinical services, Colorado State Hospital; Mr. Bernard Stone, assistant director of clinical services, Colorado State Hospital; Mr. James E. Howell, director of home living and training, Colorado State Hospital; Mr. Richard Heath, assistant superintendent for administration, Colorado State Hospital; Dr. Wesley D. White, chief of mental retardation; Mr. Mylton L. Kennedy, chief of youth services; Mr. Goodrich Walton, executive assistant, division of youth services; Mr. Ruben Gurule, juvenile delinquency prevention consultant; Mr. Richard S. Douglass, director of juvenile parole division; Mr. Edward Grout, director of adult parole division; Warden Harry C. Tinsley, chief of corrections; Mr. Kenneth Joos, director, State Children's Home; and Mr. Marvin Meyers, coordinator, community services for the mentally retarded and seriously handicapped.

Department of Public Welfare -- Miss Marie C. Smith, director, and Mrs. Juanita V. Perkins, assistant director, child welfare division.

University of Colorado -- Professor Homer H. Clark, Jr., School of Law; and Drs. William L. Finzer, Gaston E. Blom, and David G. Prough, School of Medicine's Department of Psychiatry.

Miss Clair T. Sippel, secretary of the Legislative Reference Office, and Mr. Phillip E. Jones, senior research analyst, and Mr. Roger M. Weber, research assistant, also furnished the committee with staff assistance.

Lyle C. Kyle  
Director

November 16, 1964

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## RECOMMENDATIONS OF STATE INSTITUTIONS COMMITTEE

Under the provisions of House Joint Resolution No. 1030, 1964 regular session, the Legislative Council's committee on State Institutions was directed to study and review the Department of Institutions, the programs administered by the department, and the laws relating to children, including the prospects of revising and clarifying these laws. With these directives in mind, the committee began an intensive review of the various programs for juveniles within the Department of Institutions and the closely-related foster care program within the Department of Public Welfare, and undertook a preliminary exploration of a project to codify the laws of Colorado relating to children.

Colorado's growth in population in the past decade and a half has brought accompanying problems in the state's institutional and welfare programs, as well as in other areas of state and local government. Of particular significance to this committee has been the resultant problems and programs relating to juveniles. The accompanying report reviews a number of these programs and the problems being encountered thereunder. On the basis of its study in 1964, the committee is submitting the following recommendations as matters most urgently requiring legislative action.

### Boys' and Girls' Schools

Overcrowding and a diminishing average length of stay represents a major problem, especially at Lookout Mountain School for Boys. In order to correct this and other problems at the boys' and girls' schools, the committee recommends:

1. That the maximum age limit for juveniles be reduced from 18 to 16.
2. That the maximum age for girls admitted to the Mount View Girls' School be reduced to age 18 at the time the new women's correctional facility is completed at Canon City.
3. That counties be required to share the costs of the boys' and girls' schools in order to create a community awareness of the problem in this area.
4. That a plan be developed for a second youth camp for boys to relieve the population pressures at the boys' school as the committee believes that the facilities at the Lookout Mountain School for Boys should not be expanded.
5. That favorable action be taken on the budget request for revamping the sewage system at the Mount View Girls' School.
6. That group homes for the after-care of boys and girls released from state institutions, including the boys' and girls' schools, be developed under the administration of the State Department of Public Welfare.

## Juvenile Parole

The number of juvenile parole cases in Colorado has increased dramatically over the past years, and no leveling off point is predicted in the foreseeable future. The committee believes assistance to the state's program of juvenile parole should be provided in two respects and therefore recommends:

1. That the membership of the Juvenile Parole Board be changed to include five members appointed by the Governor from the staffs of the State Department of Welfare, State Department of Education, State Department of Institutions, State Department of Employment, and State Department of Rehabilitation, and that staff representatives from the boys' and girls' schools be made non-voting ex officio board members.
2. That the staff of the juvenile parole division be increased so that greater effectiveness can be obtained under this program.

## Juvenile Delinquency Prevention Program

Despite the fact that a requested appropriation for a juvenile delinquency prevention program was omitted from the budget approved by the General Assembly for fiscal year 1964-65, such a program was started in the Department of Institutions. The committee reviewed this program during 1964 and reached the conclusion that this program provides nothing that local agencies could not do themselves, should they so desire, and is consequently superfluous and unnecessary at the present time. The committee therefore recommends that the position of juvenile delinquency prevention coordinator be abolished within the Department of Institutions.

## State Mental Retardation Services

State mental retardation services are provided through the State Homes and Training Schools at Wheat Ridge and Grand Junction; the Fort Logan Annex; Colorado State Hospital; and community centers under the provisions of House Bill No. 1090, 1964 session. Because the community centers have been operating under H.B. 1090 only for a short period of time, the committee believes that not enough experience has been gained for it to make any recommendations or detailed comments. In regard to the other services, however, the committee recommends:

1. That the mental retardation rehabilitation program at Fort Logan be re-established and funded, with this program being extended to include participants from all state institutions, including the State Hospital at Pueblo and boys' and girls' schools, and not just participants from the state homes and training schools. A total of 108 eligible persons are reported by the Department of Institutions as being available for participation in this program, which is designed to rehabilitate the participants so that they no longer need to be kept in a state institution.
2. That a comprehensive program for mental retardation at Colorado State Hospital be funded, and that the General Assembly reach

a decision on whether additional beds should be provided at the state homes and training schools or at Pueblo, and/or whether the services required for mentally-retarded persons not presently in these institutions should be purchased.

State Children's Home

The committee has reviewed at some length the present program of the State Children's Home and various proposals relating to the use of this facility. The committee recognizes that serious problems exist which led to the proposals submitted for committee consideration by the Child Welfare Advisory Committee and the Department of Institutions; however, the committee makes the following recommendation on the basis that the most serious problem should be met first:

1. The State Children's Home should remain in the Division of Youth Services, State Department of Institutions, and should move in the direction of psychiatric orientation in view of the fact that a substantial number of its residents suffer from significant emotional disturbances.

2. The State Children's Home should add the following professional staff to the existing staffing pattern in order to provide in-service training to cottage counselors, teachers, caseworkers, etc., to provide better and more comprehensive diagnostic services, to provide treatment so that more children can be placed sooner, and to evaluate and make recommendations for staff, program physical plant development, and statutory revisions:

1 Psychiatrist I	\$14,220
1 Clinical Psychologist	7,920
2 Sr. Social Workers	13,680
2 Social Workers	12,408
1 Director of Social Services	9,168
1 Recreational Therapy Director	6,840
1 Recreational Therapist	5,364
3 Clerk - Steno	<u>10,872</u>
TOTAL	\$80,472

The position of Supervisor of Recreation could be abolished.  
1965-66 cost: \$ 6,282

The cost of the additional staff  
1965-66: \$74,190

Foster Home Placement Program

A major problem involved with the foster home placement program results from the fact that county costs for welfare are increasing to such an extent that 19 "hardship" counties in 1964 were making either the maximum mill levy or more than the maximum mill levy for welfare purposes. These 19 counties are Archuleta, Clear Creek, Conejos, Costilla, Delta, Denver, El Paso, Gilpin, Huerfano, Larimer, Las Animas, Montezuma, Montrose, Otero, Pueblo, Rio Grande, Saguache, San Juan,

and Weld. To meet this problem, the committee recommends that the costs of the foster home placement program be shared 80 per cent by the state and 20 per cent by the counties, instead of the present 50-50 financing formula.

### Police Protective Association

At the request of the Police Protective Association of Colorado, the committee met with association representatives to discuss changes in laws relating to juveniles. As a result of this discussion, the committee recommends the following changes to reduce the juvenile delinquency problem:

1. That the law be revised to provide that the publication or release of names in juvenile cases would be automatic unless, for good cause, the court decides that there should be no publicity.
2. That the state's joyriding statute be repealed so that instead of being subject to a misdemeanor penalty, offenders would be subject to a felony conviction.

### Laws Relating to Children

The committee has prepared an index to Colorado's laws relating to children and a summary outline of the contents of these laws. The committee recommends that the Legislative Council reproduce this index as a separate publication in a reduced size designed to fit as an insert to Volume 8 of the 1963 Colorado Revised Statutes. A sufficient number of copies of this publication should be prepared in order to provide copies for all interested individuals and groups within the state. Further, the Legislative Council should recommend to the Committee on Statutory Revision that this alphabetical index be included as a part of the 1966 Supplement to the 1963 C.R.S., as corrected for changes made in the 1965 and 1966 sessions. The committee also believes that the summary outline of the laws relating to children should serve as the beginning point for a codification study of these laws in 1965 and 1966.

### Further Study Needed

The foregoing recommendations include those matters where the committee believes legislative action is most urgently required. The committee realizes, however, that the scope of the problems connected with our institutional and juvenile programs is so great that continuing study is needed. Consequently, the committee recommends that the General Assembly direct the Legislative Council to appoint a committee to conduct studies in the 1965-66 biennium concerning the codification of laws relating to children; community mental health clinics; children's diagnostic services; juvenile probation services; the Adult Parole Board, with a view toward creation of a full-time parole board in conjunction with accompanying necessary revision of the state's sentencing laws; and state mental retardation services, including medical and behavioral research programs in the prevention of mental retardation, the genetic counseling of parents, and programs of pre-natal and natal care for indigent mothers.

## PROGRAMS FOR JUVENILES

Since the establishment of the Legislative Council in 1953, the problems of juveniles in Colorado have received continuing review. Since 1954, the Legislative Council has issued eight publications relating to juveniles: No. 2, Index of Children's Laws; No. 13, Laws Relating to Children; No. 19, Comic Books; No. 25, Juveniles in Trouble: Probation-Parole-Mental Health; No. 42, Juvenile Mental Health -- Programs and needs; No. 59, Progress Report on ...Children's Laws; No. 70, Licensing and Regulation of Child Care Facilities; and No. 83, Colorado Institutional Programs.

These publications and continuing studies illustrate Colorado's concern and interest in providing for the children of this state, and the fundamental belief that for a healthy, dynamic society, each generation must recognize its responsibilities to the future by providing for the needs of today's children. To do otherwise would invite adult problems tomorrow of such magnitude that the chances of correction would be quite limited and the accompanying costs, merely in terms of costs for welfare aid and penal and mental institutional care, could be staggering.

The current Committee on State Institutions has continued to devote legislative attention to various aspects of programs for juveniles in Colorado. Last year, in its report for consideration in the 1964 session, the committee developed information and recommendations on mental retardation and mental health programs, the State Children's Home, facilities and programs for delinquents, and juvenile commitment and transfer laws. This year the committee continued its consideration of these matters and expanded its study to include other programs involving juveniles within the State Department of Institutions, as well as a preliminary exploration of a project to codify the laws of Colorado relating to children.

### Institutions Department Programs

During the ten-year period between 1950 and 1960, the population of Colorado increased 32.4 per cent, but the population of those under age 18 increased 54.7 per cent. In this same decade, the total population of the Denver Metropolitan Area increased 51.8 per cent, while the population of those under age 18 increased 95.0 per cent, including an increase of 103.1 per cent for boys and girls between ages 10 and 18.

During the same decade, the number of commitments to the Look-out Mountain School for Boys rose from annual figure of 217 to 340, an increase of 56 per cent, and the number of commitments to the Mount View Girls' School jumped from 82 annually to 149 for an increase of about 82 per cent. The number of boys and girls placed on parole almost tripled, increasing from 275 to 749.

As of the close of 1963, nearly 8,000 boys and girls under 18 years of age were involved in various departmental programs, as follows:

<u>Wholly state financed --</u>	<u>Number</u>
Lookout Mountain School for Boys	365
Mount View Girls' School	136
State Children's Home	415
Juvenile Parole	884
Homes and Training Schools	
Wheat Ridge	465
Grand Junction	370
Fort Logan Annex	14
Reformatory	89
Penitentiary	22
Adult Parole	29
Colorado State Hospital	256
Colorado General Hospital	9
University of Colorado Clinic	<u>252</u>
Subtotal	3,306
<u>Partly subsidized by state --</u>	
Community Mental Health Clinics	1,472
Probation (nine counties)	<u>3,000</u>
Subtotal	4,472
Total	7,778

In addition to these children, there were another 296 boys and girls under age 18 on the critical waiting list for admittance to the State Homes and Training Schools at Wheat Ridge and Grand Junction. An additional 294 boys and girls under age 18 were on waiting lists for treatment at community mental health clinics and the clinic at the University of Colorado Medical Center.

A general review of the activities involved in programs within the Department of Institutions is presented in the following sections, along with the problems reported for each program. Over-all, the department reports the basic problem to be insufficient community-based facilities and services in Colorado to provide care and treatment for children at home and at an early stage, i.e., a program for the prevention and control of disturbances of children at the community level before they need to be placed in institutions.

#### Lookout Mountain School for Boys

In recent years, there have been significant changes in the ideas and attitudes of people in Colorado toward juvenile delinquency in general, and toward the youthful offender and how he should be handled in particular. The Department of Institutions reports that the Lookout Mountain School for Boys has attempted to be responsive to these changes of attitude toward the care of the youthful offender, and this growth and development may be noted in the following departmental summarization of the program and activities at the boys' school.

A Boy's Day at LMSB. For younger boys, the week day begins at 7:00 a.m. when they wash, dress, and put their cottage in order before they leave for breakfast at 7:30. Older boys in other cottages

arise at 6:00 a.m. and go to breakfast at 6:30. All of the boys gather in the auditorium for a short assembly at 8:00 a.m. From there, they disperse to classrooms, vocational shops, or work details to which they have been assigned.

The noon meal is served at 11:45 a.m. and 12:15 p.m. in the central dining room. Younger boys participate in the regular academic program all day and return to school after the early lunch. Older boys attend classes only half a day and are in a vocational or work area the other half of the day. They change from one program to the other after the late lunch, at 12:45 p.m.

At 4:00 p.m., all boys gather in formation on the central mall, weather permitting, to take part in the daily retreat ceremony when the national and state flags are lowered. It is at this time that the boys leave their classroom teachers and work supervisors with whom they have been during the day and join their Senior Cottage Counselor (who is on duty from 4:00 p.m. until midnight) for the evening activities in their respective cottages or elsewhere on the campus.

Supper is served at 4:30 p.m. and 5:30 p.m., after which the boys go to the athletic field, the gymnasium, or the swimming pool; or if they happen not to be scheduled for these activities, they play games, read, watch television, or work at a variety of arts and crafts projects in their cottage until bedtime at 9:30 p.m.

Monday evenings are reserved for haircuts for those who need them and for a thorough cleaning of the cottage building. And Wednesday and Saturday nights, the boys see the latest full-length feature movie available. Throughout the year, groups of boys leave the campus in the evening with their cottage counselors to attend basketball, football, baseball, hockey, swimming events, and other community-sponsored affairs in the Denver Metropolitan Area. Many musical, entertainment, and educational groups from the community come to the campus to perform for the boys.

Saturdays and holidays are usually full days of recreation, picnics, and other like events. Sundays are taken up by church services in the Chapel in the morning and visits from parents and relatives in the afternoon.

Orientation. All newly admitted boys immediately go to the Reception-Orientation Cottage and remain there for a two-week period. It is during this period that they meet the key members of the staff, who go to the cottage and meet in discussion groups with the boys. The orientation program is designed partly to reduce or relieve anxiety, fears and resentment with which new boys often enter the institution. It is also designed to acquaint the new boy with the School and its program and with the staff.

Staffing Committee. The first day the boy arrives he meets the caseworker to whom he will be assigned throughout his institutional stay. After the first interview, the caseworker sends out letters of inquiry in order to obtain information upon which to build a social case history on each boy. At the end of the two-week orientation program, each boy meets the program planning group called the staffing

committee, whose membership includes the supervisors of group life, special (social) services, and education, and the school's psychologist.

This group studies the case history as it has been compiled to date and plans the boys' program and assignments. Each boy's case is reviewed by the staffing committee from time to time to make needed changes in a boy's program, or to consider the caseworker's recommendations for home visits, leaves of absence, off-campus jobs, and for presentation of the case to the Juvenile Parole Board.

Education. The over-all educational program is made up of two main areas of activity -- the academic classroom and the vocational training area.

The academic program of the Lookout Mountain School is a multi-purpose program of education designed to be remedial in nature, while providing for a wide range of needs in terms of retardation or emotional handicaps of varying degrees. The school is divided into two levels.

The first level is a lower school which provides for the educational needs of boys 10 to 14.6 years of age and attempts to work with achievement from primary level through junior high school. A boy is placed in any one of five remedial steps, his placement being based on his reading achievement scores as ascertained by the school psychologist. He can move up a step on the recommendation of his teacher. Each boy is given credit at the public school level from which he came, thus enabling him to make the transition back into the public school upon parole.

The subjects offered in the lower program are English, mathematics, spelling, penmanship, reading, social studies, music, general science, and physical education.

The second level is an upper school providing for the needs of boys of ages ranging from 14.7 to 18.0. The work offered in the upper school is by grade levels 8th to 10th, with a few boys being assigned on a special basis to the 11th and 12th grades. For older boys who are severely retarded, i.e., four years or more, there is a special class in remedial work going back to levels of work where these students stopped achieving.

In the upper school the offering consists of social studies, English, mathematics and science. Extra credit can be gained in general shop or print shop and vocational agriculture where study and practical application are utilized.

The school is staffed by 14 teachers and a principal. All teachers are certified under the requirements of the Colorado State Department of Education.

The vocational training area is really a pre-vocational program. Since the age range of boys admitted to the School is from ten to 18 years, only a relatively small number of them will be able to enter even a semi-skilled occupation upon their release. Consequently, the aim of the vocational training activities is to provide an introduction to a few particular occupations and to provide a few basic theories and skills.



The school's print shop is fairly well equipped; and while the equipment is mostly of the aged and second-hand variety, boys assigned there do learn the basics of what goes on in a small, commercial shop in the community. A certified vocational instructor teaches both theory and practice to approximately 15 boys in the morning and another 15 in the afternoon.

The general shop, also under the direction of a qualified manual arts teacher, teaches the fundamentals of wood and metal work to approximately the same number of boys and produces some small articles of furniture in addition to many hobby projects.

The shoe and leather shop is responsible for repairing all of the boys' shoes and other leather articles, in addition to working on hobby items such as purses, wallets, belts, and briefcases.

A trained vocational agriculture teacher handles the vocational agriculture program in which about 20 boys learn about farm maintenance, dairy operation, the care and feeding of stock, and the growing of a few basic crops.

Group Life. The group life department comprises approximately half of the total staff of the school. The major portion of these are the 63 cottage counselors who supervise the boys' work, play, and leisure-time activities. These counselors are responsible for carrying on the vital "home" or "group living" portion of the school's program in such a way that it will complement the total treatment aims and goals of the school.

The department is responsible for many administrative functions of the institution, particularly in relation to movement of the boys. The group life department also is responsible for the important supportive services in the area of clothing, laundry, linen and cottage supplies, and shoe repair. Each of these areas train boys to accomplish most of the work load.

This department plans and accomplishes the recreational, athletic, entertainment, arts and crafts, and special programs related to the productive use of leisure-time activities. A recreation director and an assistant are in charge of this program.

Recreation Program. The total recreation program is carried on in two phases. A formal physical education program is presented throughout the day by a physical education teacher assigned to the academic school who works primarily with the smaller, all-day school boys.

The recreation director and his assistant are responsible for the regularly-scheduled recreation program after 4:00 p.m. and on week-ends and holidays. This phase of the total program includes intramural basketball, touch football, swimming, baseball, volley ball, and track during the appropriate season. The school also enters two teams in Jefferson County Little League Baseball Program in the summer time.

Special Services. The special services department is staffed by a principal social worker, who acts as the supervisor of the depart-

ment; a clinical psychologist, a psychologist, five rehabilitation counselors; a psychiatrist, one-half day each week; and three clerical staff members.

The function of this department is to help each boy better understand himself, to give supportive counseling, and to guide the boys' program in the school so that he can gain maximum benefit from his experiences.

The special services department works closely with the academic school, the Group Life Department, and other school staff so that all phases of the boys' progress are recorded and evaluated and so that other staff members may be involved in the total treatment effort with each boy.

The special services department also provides for the medical care of the students. Two nurses, a part-time physician, and a part-time dentist provide entrance physical examinations and routine medical and dental care for all students. Boys requiring more than routine clinical care are referred to the University of Colorado Medical Center for treatment.

Student Activities. Weekend visits are regularly scheduled in order to give boys contacts with their family which will help prepare them for a successful return to their home. Boys who have made a satisfactory adjustment at the school are selected for special off-campus trips, under careful supervision, to ball games, rodeos, movies, and circuses, when tickets are available.

A program coordinated with Colorado University supplies C.U. student sponsors for assigned LMSB boys. These boys go with their sponsors to such activities as bowling, movies, hiking, church services, etc. A newly-established program, which was started in January 1964, is a similar sponsorship program with the Denver Knights of Columbus. This program is intended to offer a boy new experiences in family life and personal relationships.

The Golden, Colorado, Junior Chamber of Commerce sponsors the scout troop at the boys' school. Two members of the junior chamber serve as scoutmaster and assistant scoutmaster. The scouting program is aimed at the 12, 13, and 14-year-old boys with hope of introducing them to scouting while at the boys' school, and then introducing them to the community scouting program when they are paroled.

The religious program at the boys' school is directed by a part-time Catholic chaplain and a full-time Protestant chaplain. Sunday services and religious instruction and counseling are the basic components of their programs. Seminary students from the St. Thomas Seminary instruct catechism classes, and some of the boys participate in a retreat at Sedalia each year. Volunteers from the Golden area aid the Protestant chaplain in Sunday School instruction. A Protestant retreat was held for the first time in 1963.

The student activities program is based on the feeling that this institution is a part of the community, that the school and its boys should participate in community activities, and that the community, in turn, should be interested in the school and the boys and should

participate in the school's various activities. Reducing the feeling on the part of many boys that they are social rejects is an essential element in treatment.

Most recently, Department of Institutions Director David Hamil has initiated a monthly program involving community leaders. On the fourth Tuesday evening of each month, Mr. Hamil brings a prominent local, state or national citizen to LMSB to talk with the total population of boys in the school auditorium.

Recent Developments. In the last three years, there has been a major shift of emphasis in the administration and operation of the boys' school from custodial care to a more boy-oriented treatment approach. This shift has resulted in the growth and development of a number of important techniques and programs, which are enumerated in the following list:

1. The basic purposes of the institution in terms of care and treatment of pre-adolescent and adolescent delinquent boys has now been defined and made familiar to staff through a program of in-service training.
2. A comprehensive program of internal staff communications, involving written order and memo books, staff meetings on three levels, individual staff conferences, and monthly progress reports, has resulted in a better coordinated and a more consistent treatment effort.
3. A new two-week program of orientation for new boys entering the school has been developed, and recently the techniques of role playing and pantomime have been included to aid in the reduction of initial anxiety and resistance on the part of the newcomer.
4. Diagnostic techniques, including the administration of a more inclusive battery of psychological tests and measurements, have been improved.
5. The techniques of the program planning committee have been improved and strengthened.
6. Social case work procedures have been streamlined and strengthened, and more useful, meaningful case reporting has resulted.
7. A program of psychiatric consultation or seminars involving staff members on a training basis has developed.
8. The first ongoing program of group therapy is now underway.
9. An existing program of weekend home visits and trial leaves has been improved and expanded.
10. A varied cottage activities program including arts and crafts aimed at teaching the constructive use of leisure time has been developed.
11. A new, revitalized boy-oriented philosophy has been developing in the academic school program where now both short and long-term meaningful, educational goals are being evolved, probably for the first time in the history of the academic school. The academic program is now remedially oriented, and students are placed in an ungraded special education program according to their present level of achievement.

12. A specialized treatment cottage for the mentally-retarded and brain-damaged children has been developed with a husband-and-wife cottage parent team.
13. A specialized treatment cottage for the severely neurotic, anxiety-ridden boy involving group therapy and other special treatment techniques has been developed.
14. A firm policy rejecting the use of physical force in handling boys has been developed, thus eliminating almost entirely the atmosphere of fear and brutality that once existed.
15. The discipline program has been completely changed and brought into focus with the treatment goals of the institution. A professional clinically-oriented adjustment committee has been formed, eliminating handling of major problems by individual staff members, thus insuring better uniformity and consistency of approach.
16. A new vocational agriculture training program has been approved by the State Department of Education and has become a part of the school's expanding vocational training effort. An auto mechanic training program and driver education training program are in the planning stage and will begin soon.
17. The supervision of the boys has been strengthened and approved, and vandalism to state property has been markedly reduced. This has also resulted in a dramatic reduction in the number of unplanned, impulsive run-aways.
18. Religious education and counseling has been developed and expanded.
19. A new gymnasium facility has been completed, and a vastly improved, professionally guided recreation program is in the process of being developed.
20. A more relaxed and less tension-marked atmosphere and a much more friendly and effective individual relationship between boys and staff members has been developed.

Youth Camp. Construction of the youth camp on the Golden Gate Canon Road about one and one-half miles inside Gilpin County is underway as scheduled, and occupancy is expected by April 1, 1965. This camp is planned as a year-round operation, and timber and brush clearing will be the major activities in its first year of operation, followed by road and trail improvements. Ultimately, picnic and camping sites will be built by the boys, with the technical aspects of the work projects being handled by the Game, Fish, and Parks Department.

There are 2,300 acres of land involved over-all in the area where the camp is being built, and a complete facility for 48 boys will be located there. Moreover, as the department pointed out, this facility is being built for what it would cost to construct two dormitories for the same number of boys at the Lookout Mountain School. The department also reported that the camp has two main advantages: (1) it will be located close to the Lookout Mountain School, and (2) it will be located near a large population center where the activities of the camp can become well known.

The camp is designed to help develop aspects of responsibilities for the boys, and the department wants to have an "open" camp where the boys will have to develop their own self-discipline. The department will select boys for the camp who indicate they have achieved a certain feeling of security within themselves, from 15 to 17 years of age, and some pre-parolees; no "weak" boys or arsonists or habitual runaways will be selected.

Problems. Nothing approaching the real potential effectiveness of the various program improvements has been reached or will be reached as long as the number of commitments to the Lookout Mountain School for Boys continues to increase at a rate which results in an ever-decreasing average length of stay as boys are pushed out of the institution and back to the community to make room for new ones. In this connection, the average length of stay at Lookout Mountain School for Boys was 7.13 months in 1949-50; in 1959-60, or ten years later, it was 4.93 months; and in 1963-64, it was 3.44 months. The 1963-64 operational capacity at the school, or the number of beds for residents, was 300 beds, with an additional 38 disciplinary and infirmary beds being available. During the last months of 1963 there were times when there were more than 350 boys physically present at the school.

The department also concludes that a comprehensive program of prevention at the community level must be developed and supported or Colorado will soon find itself, as other states have, in the position of being unable to build correctional institutions fast enough to accommodate commitments.

### Mount View Girls' School

There were 158 girls physically present and being cared for at the Mount View Girls' School on April 20, 1964. There are 134 regular beds, in individual bedrooms in residence cottages at the girls' school. In addition to these regular beds, there are nine sick beds in the infirmary, five intake beds, and one maximum security-safety room. To accommodate more than 139 girls at the MVGS it is necessary to assign sick beds as permanent beds and also to place beds or mattresses in linen rooms, staff rooms, and recreation areas. Nineteen girls were assigned to such beds on April 20, 1964.

General Program. Each girl is brought to the MVGS on an order from a Colorado county or juvenile court. When a girl is brought to the MVGS, she is placed in the receiving unit, which is the infirmary. There she is checked for contagious diseases and infections and isolated from the other girls for a period of a week. If anything infectious or contagious is detected, she is treated until cured.

During the week the girl is in the receiving unit she has a complete physical examination. She is also given psychological, educational achievement and other tests and her social and public school records are compiled by the special services staff. At the end of a week, if she has no medical problems, she is transferred to the school's receiving cottage. From there she is assigned to a tentative program until her intake conference is held, which is normally within six weeks after admission. During these six weeks, a complete evaluation is made of her case, and at the intake conference all pertinent data are reviewed by staff heads and a permanent program is assigned.

If a girl develops problems, they are discussed at adjustment review meetings which are held on a weekly basis with all staff heads present. All decisions in such cases are group decisions and all department heads are familiar with each case and cooperate in handling it in a consistent manner. At the end of six months, a case conference is held for each girl to see what progress has been made. If adjustment has not been satisfactory, a revised program is placed into effect and the girl's case is reviewed again in two months.

If adjustment has been satisfactory, parole plans are started. The girl's name is submitted for parole review at least one month previous to consideration date, so that the Juvenile Parole Division will have time to check home and community conditions. When the girl does come up for parole, there is a complete report from MVGS on her institutional record and a written recommendation from the Juvenile Parole Division. On the basis of these reports, the Juvenile Parole Board makes its decision.

In a few cases, when it is considered to be in the best interest of an individual girl, parole consideration may be given before six months, but the average time for parole consideration, in 1963-64, was ten and a half months from time of commitment. Without exception, girls' cases are reviewed in six months.

If a girl who has been placed on parole is brought back to MVGS on a revocation or suspension, she again goes through the entire intake process, with the exception of re-running psychological tests, unless a need is indicated. Another program is established for her then, usually within a week. Case conferences on returnees are held four months following return.

A Girl's Day at Mount View Girls' School. On week days, girls arise at 6:30 a.m., bathe, clean their rooms, and have breakfast. Following breakfast they return to their rooms to get ready for school. The few girls who do not attend school stay in the cottage and do the washing, ironing, and cooking. Girls who do not attend school include those who are ill or under discipline, and some who are over 16 and prefer not to do academic work. The latter are given work assignments in place of school work. Some girls who are considered emotionally disturbed may stay at home to work in the cottage or in the yard, and some girls are allowed to go outside of the school on work assignments by the day. The people who employ these latter girls pick them up at 9:00 a.m. at the school and return them at 5:00 p.m.

Daily, prior to going to school, girls may report to the infirmary for medication or treatment. The physician is at the infirmary all day Friday to check girls who have anything wrong with them and to examine newly-admitted girls. The dentist is present on Wednesdays and the optometrist on Sundays. On these days the girls may have dental, medical or eye examinations by appointment.

Girls return from school to their cottages for lunch between 12:00 and 1:00 o'clock. At 4:45 p.m., school is dismissed and the girls, upon returning to their cottages, change to get ready for dinner and for the evening. All girls go to dinner about 5:15 p.m. When they have finished eating, they may attend choir practice, modern dancing practice, or participate in regular recreation programs at

their cottages -- inside or outside. Inter-cottage activities include softball and basketball. Other activities are roller skating and art classes. Girls who do not participate in organized activities may spend their time in their rooms sewing, studying, reading, or in the cottage watching television.

Assignments in the cottages for kitchen and other work are rotated. About 60 per cent of the girls receive these assignments.

Saturday and Sunday schedules are different from the weekday schedule. Saturday's program includes special cleaning of individual rooms and of the cottages -- inside and out-- and ground work. Each girl is assigned either a task in house or yard work. After lunch, the girls go to a movie which is scheduled each Saturday afternoon. Following the movie they are served dinner and then have recreation in the cottages or watch television.

Girls have the responsibility of landscaping around their individual cottages. The school has received a Sears grant for flowers and many of the girls are in this program of planting and tending flower gardens. Also, members of the Mile Hi Garden Club come once a month to teach corsage making, flower arranging, etc.

Academic Program. Girls are assigned to classes in the academic school on the basis of academic achievement tests. Among courses offered are reading, English, social studies, mathematics on the lower levels, sciences, music, typing, and physical education. Most of the girls are placed in unclassified grades because of the differences in the level of performance. The average girl at the school is two years' retarded academically. Many of the girls have no intention of returning to public school, and most of the girls do not plan to finish high school. Although MVGS offers an academic program that seems similar to a public school program, it is primarily remedial and the basic intent is to try to make up deficiencies in academic achievements of the individual girls so that some of them will at least be able to do arithmetic and to read and write when they are released, and others may be able to resume their regular academic program in the public schools.

When individual girls are academically outstanding and are not behavior problems, they are allowed to live at the MVGS and attend a public school. One or two girls have been accepted at Bear Creek Public School (Jefferson County R-1 School District) and have gone on to college after being paroled.

Many girls committed to the girls' school are not interested in academic work, and, in fact, may be sent to MVGS for truancy. Many are dropouts on commitment. Yet, because of individual attention, many become interested in school and are able to make at least a marginal adjustment in a public school when they leave MVGS.

Regular gym classes under a full-time gym teacher are conducted in connection with the school program. Girls attend health classes and learn fundamentals of basketball, volleyball, shuffleboard, badminton, track, and gymnastics.

Inservice training programs are being carried on for the teachers. Weekly meetings have been held for the past two years, and training sessions have been held to correlate and integrate social services' recommendations.

Special Services Department. The special services professional staff consists of a supervisor, a social worker, a clinical psychologist a part-time psychiatrist, and a student social work trainee. In addition to a complete evaluation by the special services department, each girl is given an examination by the school psychiatrist. Because of shortage of psychiatric time, present plans are to limit future psychiatric examinations to girls who show symptoms of emotional or mental illness.

Individual or group therapy is offered to girls who need and wish to have it. In the spring of 1964, 103 girls, or about 66 per cent of the girls, were receiving therapy either in groups or on an individual basis.

If a girl who becomes emotionally upset, or shows symptoms of psychiatric illnesses, is checked by the psychiatrist and is diagnosed as being psychotic, she is transferred to the State Hospital. In some cases, an emotionally-disturbed or psychotic girl is kept at the girls' school if it is felt this will be more beneficial for her than a transfer and if she does not present a serious management problem. If a girl is found to be seriously mentally deficient, a request is made to have her transferred to Ridge or Grand Junction. If she is thought to be a pseudo-retardate, then consideration is given to transferring her to the Ridge Annex at Fort Logan.

All parents of the girls are invited to talk with the supervisor of special services as soon after the girl is admitted as possible in order to obtain additional information about the girl, to acquaint the parents with the program at the school, and to get them involved in some part of the treatment program of their girl. Two types of such services available to the parents are family counseling (work with the parents and the girl as a family unit), and group parental counseling, in which four or five sets of parents are brought together to talk over mutual problems. This program is carried on a one-evening-a-week basis and has been established only in recent months.

A closer working relationship has been developed in the last two years between the special services staff members and the cottage mothers and the teachers. This development has greatly improved handling of girls on a consistent and informed basis.

Record keeping in this department has been greatly improved in the last three years and now offers readily available data for research and for current reports.

Music Program. Music is one area in which the girls can feel a real achievement, especially when they can perform in public and get genuine acclaim for it. At MVGS, music has proved to be stronger than any other factor in positive motivation of girls. Their desire to do a good job in a choral group helps in their general adjustment. Consequently, emphasis on a musical program has always been strong at the school.



Recreation. A comprehensive recreational program is available to all of the girls. The school team belongs to the Girls Softball Association of Jefferson County. Basketball teams have played outside girls' teams, and there is intramural basketball and softball competition. Other activities include rollerskating, arts and crafts, modern dancing, gymnastics, folk dancing, drill teams, cheerleading, ballroom dancing, folk song festival, and recreation in the cottages.

Religious Program. The new Chapel of Faith is never locked, and the girls can go there in groups or singly as they feel a need.

There are two religions represented at the MVGS -- Protestant and Catholic. (There have been no girls of Jewish faith sent to the school in at least 30 years.) Both Catholic and Protestant chaplains serve the school. There is Mass for the Catholic girls and Protestant services for the Protestant girls on Sunday. There is also Catholic and Protestant religious instruction on Thursdays.

On Sundays, the entire student body attends Sunday School directed by the director of the girls' school. The Sunday School meeting is non-denominational and affords the girls an opportunity to meet with the school's director. They may ask questions and carry on group discussions with her personally on matters of any nature that they choose to bring up. This helps to keep the girls in touch with the director, and she with them.

Special Program. One of the special activities of the school is the Big Sister Program. Colorado University girls work with the staff of the MVGS in this program, which involves 75 girls from the school.

The Big Sisters take their Little Sisters to visit sororities, to attend football games and movies, and on shopping, rollerskating, horseback riding and hiking excursions. Girls in this program are permitted to be off campus for several hours at a time.

Beauty School. Prior to 1958 there was a cosmetology class at the school. This program will be resumed soon in a new, modern cosmetology room. Credits earned in this program will be accepted at a regular cosmetology school anywhere in the state. This activity will make it possible for the girls to have their hair done, and, at the same time, it will provide training for the girls enrolled in this course. This will be the main subject offered in the area of vocational training, although all girls are given routine training in domestic arts, both in classrooms and in cottages, and in secretarial work.

Leaves of Absence. Girls are given home visits of from a few hours to a week-end as rewards for good behavior and as a device for maintaining good morale and for testing the girl's readiness to be paroled.

Leaves of absence, which last for longer than a week-end visit, are given as a pre-parole placement after it has been determined by careful consideration that the girl has a good chance of succeeding on such a placement. All girls on such placements are placed under the supervision of a Juvenile Parole Agent.

Problems. One of the major problems consists of the overcrowding of girls at the school. Another problem reported to the committee is that the sewage system at the school needs to be revamped, although the health department believes that it is not a dangerous health hazard at this time.

As a suggestion for legislative consideration, the department recommended that the age limit for girls at the Mount View School be reduced from 22 to 18. Nationally, the department reported, most states generally set the maximum age for a girls' school through age 17 and a few even limit the girls to age 15.

### State Mental Retardation Services

State mental retardation services are provided through the department's state homes and training schools at Wheat Ridge and Grand Junction; the Fort Logan Annex; community centers under the provisions of House Bill No. 1090, 1964 session; and Colorado State Hospital.

The State Homes and Training Schools and the Fort Logan Annex are caring for some 850 boys and girls 18 years of age and younger. Another 250 are on the critical waiting list for admission to the schools, and requests for admissions reach the department at the rate of two or three each working day. However, not all of these requests result in additions to the waiting lists, and an appreciable number are able to be cared for through the developing community center programs. In fact, one child has been returned from the Grand Junction school and two from Wheat Ridge to the community program in Boulder.

The Division of Mental Retardation reports that the over-all number of retarded in Colorado is somewhere between 60,000 and 100,000. Of this number, approximately 2,400 would fall into the profoundly-retarded group with I.Q.'s below 20 or 25. Approximately another 6,600 would fall into the severely-retarded category with I.Q. ranges between 20 or 25 and 40. The balance are in the moderate, mild, or borderline ranges of intelligence.

Through the developing community programs, the division hopes that those other than the profoundly and severely retarded will be largely cared for in their home communities, and, further, that large numbers of the severely retarded can be kept for a period of years in the local communities before institutional care is necessary. However, the state must continue to plan for residential care for the profoundly retarded and a number of the severely retarded.

Since no new facilities are being built at the State Home and Training Schools at the present time which will have a noticeable effect upon the growing waiting list, and since it is usually from two and one half to three years after a legislative appropriation has been made before facilities may be occupied, the division expects that there will be an acute waiting list in Colorado exceeding 1,000 by 1967, and unless new facilities are forthcoming, the division estimates this list will grow to more than 1,500 by the early 1970's. This projection is dependent upon a strong community center oriented program which could

provide for those not in the more severely and profoundly retarded categories at the local level, and it includes the expectation that many of the severely retarded will be cared for outside of institutions in the community center programs during the early years of their lives.

In regard to the community center program, the General Assembly authorized two centers for the mentally retarded as a pilot program in 1963. On the basis of the success of this pilot program, House Bill No. 1090 was adopted in the 1964 session. Under this bill, the Department of Institutions is purchasing services for the mentally retarded through community-incorporated boards from public or private non-profit sheltered workshops, pre-school nurseries, day-care training centers, school districts, etc. In other words, this program is designed as a means to utilize all existing and available resources at state and local levels so as to provide a more effective network of services to assist retarded persons in their own communities. As these interested groups are brought together so that all the resources at the local level can be utilized with maximum effectiveness, perspective is gained in all groups and the community centers can then see the gaps and duplications in the services provided.

Since the passage of H.B. 1090, community boards have been or are being incorporated in Adams, Arapahoe, Denver, El Paso, Fremont, Jefferson, Larimer, Prowers, Pueblo, and Sedgwick counties. Boards were already established in Boulder County and the San Juan Basin under the 1963 pilot program.

Under the 1964 law, the department is expecting to assist communities to provide services for 450 to 600 children during 1964-65. However, the department reports that there is new and expanded interest and unanticipated growth of this program -- even communities never before interested are moving toward incorporation of community boards.

The department plans that almost all community center instructors will be hired from the local area, and most teachers in the trainable program under the Department of Education will continue to provide their services, but they will be under the jurisdiction of the community center program. New centers and those centers expanding their services under the new program will, of course, have to hire additional teachers. Presently, most boards will run their programs to coincide with the regular school year, but by 1965-66 some boards will have year-round or summer programs as well.

Only those children who cannot participate in a regular school program, vocational rehabilitation programs, and special educational programs are eligible for community center admission, and admissions are handled by the incorporated boards, not by the department.

The department received \$200,000 in appropriations to operate the program for fiscal year 1964-65, and the department reported that this is sufficient to reimburse the centers up to \$500 per year for each retardate, or an amount not to exceed one-half of the annual cost of any training program per retardate, exclusive of capital construction and subsistence, whichever is less. The department is giving preference to school age, trainable children, but it will also reimburse services for retardates of pre-school and post-school ages. Although there is no limitation in the law as to whom the department may or may not

assist, the department, for the first year only, believes that it is wise to aid those centers already in existence so as to get them firmly established. The \$200,000 appropriation will probably be exhausted by the end of the fiscal year, but no community is expected to receive less than its fair share.

In terms of the over-all mental retardation problem, the department reported that recent research has proven that environmental influences play a large part in the development of borderline and mildly retarded individuals. Whenever children grow up in situations which are economically and socially depressed, where there are psychological influences within the home which adversely affect the mental development of the individual, or when the home is so intellectually impoverished that there is no normal, reasonable stimulation offered the child, a condition is produced which is termed familial retardation. Using a crude index of the number of 18-year-old males rejected from Selective Service for mental retardation in Colorado, it would appear that five per cent of the state's population is so affected.

Further statistics indicate that the incidents of mental retardation are far greater among families where the pregnant mother fails to have proper pre-natal care, or where there is not proper care given at the time of birth. Other current research indicates that if stimulating day care and nursery experiences were given to children from families who are culturally, socially, and economically deprived, the incidents of retardation can be dramatically cut.

Approximately 0.45 per cent of the population is retarded because of biological-genetic factors. Since these biologically and genetically caused retardates are usually in the profoundly and severely retarded categories, and are the ones who most frequently end up in a state institution, the department believes that state government has a major role in encouraging the dissemination of knowledge in these fields and seeing that proper parent counseling is carried out.

### Colorado State Hospital

Children's Program. Prior to 1961 there was no specific program for children in existence at Colorado State Hospital. During these earlier years the admission of children constituted an extremely small proportion of all admissions. One child under age 18 was admitted in 1957, five children in 1958, nine children in 1959, and 16 children in 1960. In 1961 an attempt was made to set aside two wards for children. Staff specially interested in working with young people were transferred to this unit. Almost immediately community agencies having the responsibility of working with emotionally disturbed children began utilizing this new resource. As a result, admissions of children during 1961 totaled 62, nearly quadrupling the admissions of the previous year.

In order to meet this sudden and unexpected rise in the children's population, a Children's Day Center was established in July 1962, located at the hospital farm three miles west of the hospital campus. Admissions then increased to 80 in 1962 and soon climbed to 180 in 1963.

One of the reasons for establishing the Children's Day Center away from the hospital campus was to afford the children greater freedom and larger selection of outdoor activities than would be possible on the hospital grounds. In addition to this, contact between promiscuous girls and sociopathic adult male patients would be kept at a minimum.

In January of 1964, the Children's Day Center was transferred from the hospital farm to the southwest corner of the hospital campus. This was a result of the decision that the farm and farm operation would be turned over to the State Penitentiary as an honor farm. This transfer allowed the hospital administration to effect economies in the operation of the hospital and gave Colorado an honor farm to provide healthy and productive occupations for prisoners.

The present Children's Day Center includes three wards. These wards offer more rooms than were available at the farm setting, although some negative factors are inherent in this move. The availability of more rooms has permitted the establishment of smaller classrooms so that the number of children can be limited to eight per teacher, which ratio more closely approximates the national standard for special education classes. The proximal situation of the present Children's Day Center also allows for easy accessibility to other hospital wards. Consequently, the attendance at the Children's Day Center has increased about 10 per cent since the move, and currently consists of 110 children (100 full time, i.e., 12 hours, and ten part time).

On the negative side, the move back to the hospital campus places limitations on the outside recreational areas available. Most of these areas must be shared with other patients. There is also the increased potential for children to get into difficulties with adult patients. This has meant closer supervision of children during recess periods and the resultant use of staff decreases the treatment effectiveness of the center.

In April of 1964, there were approximately 140 children at Colorado State Hospital, age 16 years and under. It is this age group which is being served by the Children's Day Center. Of this group there are about 30 children who do not participate in the Children's Day Center program. These are children who are too retarded or regressed for the day center, or who have behavior which is so uncontrollable they cannot be handled in an open setting. A beginning program for these youngsters is in operation. The hospital is utilizing adult patients whose recovery permits them to use their teaching skills, under supervision, to act as tutors and teach these children so that they do not continue to regress. In the case of these 30 children, if their behavior comes under control through medication and psychotherapy, they are transferred to the Children's Day Center for more intensive treatment.

The diagnostic categories of the children who are hospitalized at the Colorado State Hospital approximate the following:

Percentage of  
Children Patients

Diagnostic Category

50%  
27%  
18%  
5%

Psychoneurotic reaction  
Psychotic reaction  
Character disorders  
Mentally deficient

The Children's Day Center program involves the use of the team concept in providing all activities in which a child is involved. Analytically-oriented therapy, both individual and group, is provided to all children. About 20 children are seen in individual psychotherapy. Present staffing permits treatment to be individualized for each child. Recreational therapy consists of the popular recreational activities such as baseball, volleyball, and other games. Occupational therapy consists of programs planned around leisure-time activities such as leather craft, woodworking, painting, etc. In each of these two programs relationship therapy (i.e., socialization or re-socialization) is stressed.

A child is admitted to Colorado State Hospital by county court commitment, voluntary admission, short-term involuntary commitment (i.e., 30 to 90 days Confine and Treat Order), Executive Order of Transfer (e.g., from another state facility), or by transfer through the Department of Institutions.

Children entering the hospital during the usual working hours (8:00 a.m. to 5:00 p.m.) are seen at the Admissions Office by a psychiatrist from the Children's Day Center. On hours other than these, or when emergencies occur, the psychiatrist is reached at his home. He may then report to the Admissions Office and complete the admission procedure for the child. Following examination at the admission office by the psychiatrist from the center, the team leader of the division to which the child will be assigned is contacted. Necessary information is transmitted to the division team leader, and he then arranges to have the child picked up and taken to his ward.

Approximately half of the children come to Colorado State Hospital from the Denver Tri-County area -- Denver, Adams, Arapahoe, and Jefferson counties. (This figure excludes the transfers from Lookout Mountain School for Boys and Mount View School for Girls.) El Paso County accounts for 15 per cent of the admissions and Pueblo County for eight per cent.

As mentioned earlier, the present program of the Children's Day Center is being carried out on three wards located on the South campus of the hospital. Temporary architectural changes, new paint and other minor modifications have transformed these wards into fairly satisfactory quarters for treating our emotionally disturbed children. These quarters will be utilized until the new Children's Center, being built in the Northwestern corner of Colorado State Hospital grounds, is completed in March 1965.

The new Children's Center will consist of three double cottages and one large clinical-school building. Each double cottage will house a total of 20 children, with half of them on an upper level and the other ten children on a lower level. The resultant 60 beds will pro-

vide 24-hour housing for slightly less than half the children already in residence at Colorado State Hospital. The hospital plans to place all children under age 13 in the cottages and to continue housing the remainder of the older children on wards in much the same manner as is being done at the present time.

The clinical-school building will contain offices and classrooms necessary to provide a daily treatment program for 100 children. The plans for this building are designed so that the structure could be expanded 150 per cent if necessary. There is ample space for outdoor recreational areas, as well as room for building additional cottages if funds become available.

One area of particular concern at the hospital consists of the children presently hospitalized in the maximum security division. Patients occupying this area comprise all district court commitments and the "criminally insane." In April of 1964, there were 26 patients under 18 years of age in this division, and ten of these patients were under 16 years of age.

The hospital has a small program in the initial phase of development for these children. A child psychiatrist and a social group worker provide therapy for the ten children under 16 years of age; this therapy consists of one and one-half hours of group therapy weekly. This treatment consists of both verbal (discussion therapy) and activity (painting, games, etc.) groups. These aggressive youngsters require a great deal of release for their hyperactivity and anger.

One major problem which the hospital director reported involves the post-hospital placement of children who can derive no further benefit from being hospitalized. This is an age-old problem and is not limited to this institution or this state. Some children come from very sick family situations to which they cannot return. The director believes that an intermediate placement for the child to go to upon leaving the hospital before he can eventually return to his own home and family must be developed. There are not enough foster care or group placement facilities available to the hospital for placement of this group of children.

The director stated that the hospital is more than familiar with the problem that foster homes are not interested in opening their doors to acting-out adolescents who have been previously hospitalized. While many areas of the state have an absolute dearth of this kind of facility, even those who do have these facilities seem to be somewhat reluctant to take children who have been stigmatized by hospitalization. The hospital is not a licensed child placement agency and must rely upon the services of the child welfare people at the state level to help solve this rather difficult problem of post-hospital placement where the child's own home cannot be considered an adequate resource.

Clinics which are partially supported by the Department of Institutions are being of increasing help to the hospital in serving the needs of children when they do leave. It is to be hoped that this kind of cooperation will go forward with those clinics which already exist and certainly with community clinics which may be proposed to be established in the future.

In the whole area of laws affecting children in institutions, there are three areas that seem to present great problems to the hospital:

(1) Problems are created because of lack of uniformity in the statutes with respect to age, depending on whether the child is considered delinquent, defective, or mentally ill.

(2) The present legislative definition, particularly as it affects a mentally ill child, is difficult in application, and there appears to be a need for a more comprehensive legislative definition of mental deficiency and mental illness, particularly with respect to children.

(3) That retarded and mentally ill children should be handled through legal adjudication and commitment procedures as they are now handled raises problems, since it seems impossible to procure a proper diagnostic evaluation of either of these two conditions in most areas of the state. Many of the more isolated areas simply do not have the professional persons available who might evaluate these children properly. Unfortunately, these same areas appear to be completely unaware that there is a Children's Diagnostic Center at the Medical School, which was originally created for their express use.

Research. It is felt at Colorado State Hospital that the general area of research with regard to the treatment of children is very much neglected at the present time. Research at the present time seems to be limited largely to the collection of statistics and little else. Two grants which are currently in process may enable the hospital to give more attention to research in this matter of the treatment of children, as follows:

(1) Hospital Improvement Project -- The Colorado State Hospital has made an application to the National Institute of Mental Health for a \$100,000 hospital improvement project grant. This project would provide a pilot program which will develop a short-term intensive treatment unit for a selected group of emotionally-disturbed children within the five to twelve-year age range. This project will utilize four residences located on the hospital grounds which were formerly used to house hospital staff members and their families. Four children will reside in each house, thereby creating a more "normal" family simulated environment. These children will attend public school and will become as much a part of the community as possible. The aims of the project are to prevent children from becoming "institutionalized"; to develop techniques of treatment; training of staff; criteria for patient selection; new ways of utilizing community resources; and, finally, to integrate this intensive treatment unit into the program of the Colorado State Hospital's Children's Center after its completion in 1965.

(2) Hospital In-Service Training Project -- Another application has been made for a \$25,000 mental health training grant. The proposed program will be a combination of continued training and in-service training. It will provide specialized training for some nursing faculty personnel already engaged in teaching psychiatric technicians, as well as in-service training for a group of psychiatric technicians. This particular grant is designed to train personnel intensively in



methods to be used in the care and treatment of seriously-disturbed children.

Program for the Retarded. The problem of the mentally retarded at the state hospital is not new or newly recognized. It is a situation which most probably existed when the first 70 patients occupied the first units at the hospital in 1879. It is safe to assume that a fair percentage of this initial group were retarded rather than mentally ill.

The crux of the problem of the retarded at the state hospital centers around the fact that the state has been fortunate enough to progress from a custodial-type facility, offering little more than "room and board," to a leading psychiatric treatment center with the emphasis being on therapy and rehabilitation in its many forms. The hospital is not designed as a residential treatment center for the retarded nor are its treatment and rehabilitation programs geared to the intellect of the retarded. According to law the state hospital's primary function is the treatment and care of those with psychiatric or addiction problems and not the training and care of the retarded.

As of April 1964, there were 587 patients at the hospital diagnosed as mentally retarded. This number is 13.4 per cent of the hospital's total patient population. There may well be more as diagnoses are changed in the light of recent improvements in diagnostic techniques.

Inasmuch as Colorado has two facilities designed solely for the care of the retarded, one might easily ask, "Why does the hospital have this problem?" Actually, the hospital had many retardates on its rolls long before the Ridge State Home and Training School was opened in 1909. The problems families and communities face today with retardates are no different today than they were 50 years ago. Hence, when a serious situation arises and the state schools are filled to capacity, the families and courts have no alternative but to admit the person to the state hospital.

Colorado is not alone in this situation -- almost every state in the Union is in the same condition -- but Colorado has done more than just to recognize the problem. In November of 1963, a Department of Mental Retardation Services was created at the hospital. The director of this department was charged with the responsibility of surveying the retarded population and to organize and administer a program specifically for the retarded within the present framework of the hospital.

This department visualizes its first organized efforts to be very similar to the present program of the Children's Center. This indicates that the retardates would continue to reside in their geographic divisions and would be taken daily into a special program being centered around special education (academic) classes; vocational educational classes; individual and group therapy; occupational therapy; industrial therapy; and recreational therapy. Once such a program is successfully operating, the second phase would be the development of a specialized division such as the hospital has in the Geriatrics and Alcoholic Treatment Center. At some point, the hospital administration believes, the state must think in terms of a third separate and distinct

facility for the retarded -- the Ridge School to serve the Denver Metropolitan Area, the Grand Junction School to serve the Western Slope, and the third facility to serve the Eastern Slope and plains areas. The Eastern Slope and plains areas have approximately 25 per cent of the state's population, a number which may be felt sufficient to justify the existence of the third state school.

Further, the Colorado State Hospital land could be considered as a location for a new training school for the retarded. Common utilities could be furnished such as light, heat, and power. This ought to be of new, functional and safe construction, designed to meet program needs. Separate administration and distinctive staff trained to work intensively with the retarded and to do research in the problems of retardation would be needed. Staff could not be provided by depleting Colorado State Hospital resources.

### State Children's Home

The Committee on State Institutions began a review in 1963 of the program and problems of the State Children's Home in Denver. During its study, information was developed on the background and changing programs at the home, as well as previous studies and recommendations in connection with the State Children's Home, as reported in "Colorado Institutional Programs," Research Publication No. 83 of the Colorado Legislative Council, December 1963.

The committee continued its study of the State Children's Home in 1964 by reviewing two proposals for the future operation and program of this facility -- one from the Advisory Committee to the Child Welfare Division of the State Department of Public Welfare, and the other from the State Department of Institutions.

Child Welfare Advisory Committee Proposal. "The State Children's Home was created in 1895 as a home for dependent children. There have been certain changes in program focus throughout the years. As an example, at one time it was for children of sound mind and body who were dependent upon the public for support. Later, it was for dependent children regardless of their physical condition. In more recent years emphasis was placed on an adoption program for infants.

"Following a study made, first by the U.S. Children's Bureau and later by the Child Welfare League of America, legislation was enacted prohibiting placement of children under seven years of age in the home without approval of the superintendent.

"Psychiatrists and psychologists, as well as social workers, today find that different types of placement are needed for children of different ages and with different types of social problems. Infants and young children develop better in a foster boarding home where they have individual care provided by foster parents. Older children often adjust better in a group setting. These are children who have been so rejected by their own parents they are not able to accept substitute parents. Therefore, a child placement agency today must provide, either through its own resources or through purchase of care, different types of placement. Long-time institutional care for dependent children is outmoded.

"Legislative action taken in 1936 created the Child Welfare Division within the Department of Public Welfare and charged the department with the responsibility to administer or supervise child welfare activities and to cooperate with the Children's Bureau of the U.S. Department of Health, Education, and Welfare in establishing, extending and strengthening child welfare services. It also charged county departments of public welfare with the care and treatment of dependent and handicapped children.

"In carrying out its responsibility, the Child Welfare Division has, through the county departments of public welfare, developed a program of services to children in their own homes as well as foster care. The departments of public welfare now have over 1,100 approved foster homes in the state specializing in different types of care. In addition to this, about one-fourth of the children placed outside their own homes are in different types of private institutions with the state and county purchasing this service.

"There is need today for group care for older children. The State Children's Home can provide this badly-needed service. The Child Welfare Division needs additional group facilities for older children. The State Children's Home would meet this need. It is recommended by the Advisory Committee of the Child Welfare Division that the State Children's Home be placed under the State Department of Public Welfare as part of the child welfare program.

"In the development of such a facility within the Child Welfare Division, consideration would be given to a well-defined intake policy where only children in need of the type of care provided would be accepted. A well-qualified social service staff under good supervision would need to be employed, and local resources would be used to the maximum. Children should not be kept in this facility indefinitely. Placement could well range from one to four years.

"Children should not be committed to the institution, but service should be requested by county departments of public welfare, the same as is requested from any other facility, and the county department should pay a certain percentage of the cost just as they do for service requested from other facilities.

"A follow-up study by the United States Children's Bureau seems indicated at this time to determine how many of the children placed in the home within the last year could have been cared for in their own communities, and, also, the number in need of group care, and the number awaiting placement in a facility such as the Children's Home but who cannot be placed therein because of lack of adequate space."

Institutions Department Proposal. "At present (June 26, 1964) there are 140 children in residence at the State Children's Home. An analysis of these cases shows that these boys and girls are almost all significantly emotionally disturbed. It also shows that most of them have appeared before the various county courts of the state on charges of delinquency. Finally, it shows that these 140 boys and girls have needs which are not being met on the local level and which cannot be adequately met in other existing institutions. These boys and girls are not so disturbed that they cannot attend public school or that they need intensive treatment such as is afforded at the State Hospital or

will be in the new Fort Logan children's facility. It is also true that they are not the kind of delinquents who can benefit from a primarily correctional setting such as LMSB or MVGS.

"During the 1963 calendar year, 63 boys and girls were received at the Children's Home from various counties of the state. Of these, 52 had appeared before a court on a delinquency charge. Most of them had experienced placements in foster care and had proved not to be amenable to adjustment in this kind of a setting.

"It becomes obvious from these facts that the Children's Home is not what most people think it is -- a state institution for dependent children 'of sound mind and body.' Rather, it is a treatment facility, and the only one in existence at present, which has children in its care who are primarily between the ages of 12 and 18 and who have been found by competent diagnosis to be multiple-problem adolescents with needs for specific types of psychiatric care and treatment.

"It is proposed, therefore, that the Legislative Council Committee on State Institutions consider designating this facility as a psychiatric facility, and it is suggested that it be administratively transferred from the Division of Youth Services to the Division of Psychiatry in the Department of Institutions, and that appropriations be made for a staff which may adequately deal with and treat the problems which exist in the present population at the Children's Home and which continue to be committed to the Children's Home from the various courts in the state.

"At the present time there are some children at the home who are there primarily because of dependency and who have a minimum psychiatric problem. It is anticipated that within the near future the care of this type of child would be phased out and that the function of the facility would be entirely for the care of special problem adolescents whose problems are not being met at the present time. Dependent children are primarily the responsibility of the child welfare agencies of the state and such children in the future would be taken care of by the Division of Child Welfare.

"Children who are both dependent and in need of psychiatric care would be the responsibility of the Children's Home facility until such time as their psychiatric problems were resolved, at which time their supervision would revert to the child welfare agencies.

"It is thought that, in the initial phase of such an acknowledged change of function, this facility would necessitate both diagnostic and treatment services, but as time went on the diagnostic functions would be phased out and would be assumed by the Colorado Diagnostic Center and local mental health centers. Undoubtedly, certain cases, evaluated by the staff of the new children's unit at Fort Logan Mental Health Center, would be found to be more suitable for care at the Children's Home facility than at Fort Logan.

"With this acknowledged change of function it is probable that the name of the facility should be changed so that it would more accurately reflect the nature of the services rendered."

Since the meeting of the committee at which the foregoing report was submitted, the department continued to study the proposal that the State Children's Home be converted to a psychiatric facility and subsequently submitted the following:

"1) The Children's Home should remain in the Division of Youth Services, State Department of Institutions. To administratively change the Children's Home to the Division of Psychiatry would necessitate a total program change and subject the Children's Home to sudden and abrupt changes.

"2) The Children's Home should move in the direction of psychiatric orientation in view of the fact that so many of its residents suffer from significant emotional disturbances.

"3) The Children's Home should add the following professional staff to the existing staffing pattern in order to provide in-service training to cottage counselors, teachers, caseworkers, etc., to provide better and more comprehensive diagnostic services, to provide treatment so that more children could be placed sooner, evaluate and make recommendations for staff, program, physical plant development and statutory revisions.

1 Psychiatrist I	\$14,220
1 Clinical Psychologist	7,920
2 Sr. Social Workers	13,680
2 Social Workers	12,408
1 Director of Social Services	9,168
1 Recreational Therapy Director	6,840
1 Recreational Therapist	5,364
3 Clerk - Steno	<u>10,872</u>
TOTAL	\$80,472

The position of Supervisor of Recreation could be abolished. 1965-66 cost: \$ 6,282

The cost of the additional staff 1965-66: \$74,190"

### Community Mental Health Centers

The Department of Institutions is assigned the duty of coordinating the community mental health center program. By coordinating, it was meant that the department would assume several roles, including partially financing the centers, coordinating their activities, and assisting other communities to form new clinics.

Two years ago there were 14 clinics in Colorado; now there are 19. The centers vary in size, shape, and number of services provided. Some centers are large, full-time centers, while others, such as in the San Luis Valley, are small, part-time centers. The small centers must be operated on a part-time basis because the population density is low and it is difficult to recruit the necessary personnel for the centers in these areas.

The centers are community centers in that they require community services. Although three centers are administered by local boards of

health, most of the boards are composed of labor leaders, teachers, nurses, doctors, and laymen. These boards have admission and other policy-making powers, and they work closely with the center's director, who is usually a psychiatrist.

The state provides 50 per cent of a community center's per capita cost and the center must match the state's contribution. However, the state provides up to 70 per cent of a center's funds during the first three years of its existence, and at least five clinics are benefiting from this provision.

Appropriations to the department for community centers have risen over the past few years. For fiscal year 1961-62, \$251,000 was appropriated to the department for the partial financing of the centers. For fiscal year 1963-64, \$478,000 was appropriated. Because of this increase, many centers have been able to add to their staffs and to increase the services offered.

During fiscal year 1962-63, 2,683 children were treated or evaluated by community centers. This number exceeded 3,300 during fiscal year 1963-64.

The department reported that the community centers are doing an excellent job within the limitations of available manpower and money, but most of them operate only part time -- in some cases rendering only a token service. The result in many cases is disillusionment on the part of the citizens of the community because the center is not able to meet their needs. Most centers have long waiting lists and treatment may therefore not be available at the most opportune time.

In addition, the lack of many community resources badly hampers the center's staff in implementation of recommendations based on best professional judgment. In particular, children who should be removed from an unhealthy home situation can often not be placed because of the unavailability of foster homes, group foster homes, or residential treatment centers.

### Juvenile Parole Board

The Division of Juvenile Parole serves as the administrative agency for the Juvenile Parole Board and supervises all juveniles on parole from the Lookout Mountain School for Boys and the Mount View Girls' School. The Juvenile Parole Board has the authority to parole a boy or girl from these institutions, as well as the authority to revoke parole and to discharge a boy or girl from parole and the control of the Department of Institutions.

The Juvenile Parole Board was established in 1959. Previous to that time, paroles were administered by the staff at Lookout Mountain School for Boys and by the governing board at Mount View Girls' School. Membership of the Juvenile Parole Board consists of five members appointed by the Governor from the staff of the State Department of Welfare, State Department of Education, State Department of Institutions, Lookout Mountain School for Boys, and Mount View Girls' School.

The number of cases reviewed by the board has increased steadily since it was established. In fiscal year 1959-60, the board reviewed 1,389 cases and for fiscal year 1962-63 the number had increased to 1,855 cases. The average monthly caseload of the board was about 100 to 110 cases reviewed in its first year of operation, but in December of 1963 the board reviewed 220 cases.

Similar to the increase in the number of cases reviewed, the percentage of revocations compared to paroles granted has risen from 30 per cent in 1959-60 to about 40 per cent in 1963-64 for the boys' school and from 20 per cent in 1959-60 to about 25 per cent in 1963-64 for the girls' school.

The board is required by law to meet at least once a month, but because of the increase in its workload the board is meeting twice a month -- one day a month at the boys' school and one day at the girls' school. Holding more frequent meetings presents serious problems to board members who as state employees have a difficult time even taking two days each month from their regular jobs, not including the advance preparation time required for these meetings.

It has been suggested that consideration be given to establishing a board membership of paid persons not holding state jobs. Another suggestion is that if the membership of the board is to continue to consist of state employees, it would be better to have a member appointed from the Department of Employment and the Department of Rehabilitation instead of two members from the boys' school and girls' school.

It was also suggested that perhaps the state should establish a full-time parole board to handle both juvenile and adult parolees in place of the two part-time boards which the state uses at the present time. The committee pursued this matter with representatives of both the adult and juvenile parole boards, including a review of practices in other states. The representatives of these two groups agreed that the concept of a full-time parole board may need to be developed eventually in Colorado, but separate boards are necessary for juvenile and adult cases and it would be preferable to continue with part-time boards in Colorado, at least for the time being.

#### Juvenile Delinquency Prevention Program

The director of a preliminary juvenile delinquency prevention and control program met with the committee to review the status of this project. Although an appropriation of \$27,000 to \$28,000 had been requested for this program for fiscal year 1964-65, these funds were not included in the general appropriations act passed in the 1964 regular session. The director informed the committee that the program needs little financing as it is primarily a program to coordinate the efforts of the many already-existing agencies.

A Denver Advisory Board composed of people who are knowledgeable in the field of juvenile delinquency and crime and who represent a cross section of juvenile agencies has been developed. The primary reason for the advisory board is to secure the cooperation of all agencies in the Denver area in finding the common ground on which to

build a local, community-centered program as an alternative to institutional commitment and in securing the cooperation of civic and social groups in this endeavor. The director pointed out to the committee that this board is making the first joint effort in the state by all agencies to alleviate the pressures on state institutions by developing a sound basic program of activities geared to a juvenile prevention and control program in the community.

The director also reported that efforts are not only being made in the Denver area, but advisory units are being developed in Lamar, Greeley, Pueblo, and Trinidad. Their function will be the same as the Denver Advisory Board, i.e., developing complete agency cooperation and alternative community programs to commitment. The director concluded that this is a pioneer program for the state of Colorado, but it is one that has proven its value in other states in the savings of human resources and the tax dollar.

### Foster Home Placement Program

The committee also reviewed the foster home placement program within the State Department of Public Welfare. The director of the Child Welfare Division reported that there are more than 1,100 foster homes in the state, including different types of foster homes for children who need different types of care. There are 400 homes for infants, with no more than two babies being in any one home at any one time. Also, there are more than 600 homes designed for temporary care, and there are about 200 homes designed to care for emotionally-disturbed children.

The division is establishing facilities for group care for the older children, or those 12 years of age and over. It is trying to get more counties to establish this type of home, and it is also trying to get foster home parents in the past -- those with experience -- to participate in this program.

Services are purchased by the department for those children who cannot otherwise afford them, and the department makes an evaluation of the facilities available to provide these services. For example, last year the department had 150 children who needed placement in a residential treatment center and some were sent for treatment to facilities in Texas, Missouri, and California. The department pays \$600 per month for each child receiving these services, and the length of time they remain under treatment averages about three and one-half years a child. However, the director added, when these children are released, they are able to live in the community, and some very able children have been and are involved in this program.

In regard to the Juvenile Compact, the director informed the committee that more than 30 states, including Colorado, have entered into this agreement for the placement of delinquent children on parole and probation in other than their "home" state. More and more children are coming to Colorado under this compact who are dependent children, but the home state assumes financial responsibility for foster home placement in these cases.



One major problem is that county costs for welfare are increasing and there are now 19 "hardship" counties, or counties which are making the maximum mill levy for welfare purposes. One reason for this is that more children are ready to be taken out of an institution and placed in a foster home, and it therefore costs more for the counties than it did in the past when these children stayed in the institutions. That is, these children are no longer being kept at complete state expense as they are being moved back to their communities where the counties have to share the expense for their care, and some counties do not have the financial resources to assume this burden.

### Index to Children's Laws

The committee began preliminary consideration of a proposal to codify the laws pertaining to children in this state by reviewing past efforts in this direction. Professor Homer H. Clark, Jr., of the University of Colorado School of Law, who had assisted with previous studies on this subject, reported the results of these efforts to the committee.

The committee agreed that the first step in eventually revising and codifying laws pertaining to children would be the compilation of an index to the present laws. Under the supervision and direction of Professor Clark, such an index was prepared for the committee. This index is divided into two parts. The first part consists of an alphabetical index to the children's laws, referring to the appropriate sections in the Colorado Revised Statutes. The second part consists of an outline of all of the children's laws from the Colorado Rules of Civil Procedure, the Colorado Constitution, and the Colorado statutes. In this outline, the attempt was made to state briefly, and in non-technical language so far as possible, the subject of each statute.

### Police Protective Association of Colorado

At the request of the Police Protective Association of Colorado, the committee met with association representatives to discuss changes in laws relating to juveniles. These representatives included Chief of Police Spencer Garrett, Aurora; Chief of Police Roy Harper, Pueblo; Captain Sherman Nielson, Greeley; Lieutenant Jess Garred, Colorado Springs; Sergeant Vern Wilson, Colorado Springs; and Detective Richard Brown, Denver.

Chief Harper stated that juvenile delinquency presents a serious problem in most of Colorado's local governments, and a few statutory changes could help to reduce this problem. The association representatives recommended the following changes:

1. Teachers should be allowed to discipline children without requiring that another adult be present and teachers should not be subject to assault and battery charges in such cases.
2. The age limit for juveniles -- 18 years of age -- is a primary cause of juvenile problems as it includes the 16 and 17-year-

old delinquents who can be, and sometimes are, just as malicious as adult offenders. One way in which law enforcement and judicial officers could deal more effectively with these older juvenile offenders would be to lower the age limit from 18 to 16 years of age.

3. Section 22-8-1(4), 1960 Permanent Supplement, should be revised to provide that the publication or release of names in juvenile cases would be automatic unless, for good cause, the court decides that there should be no publicity.

4. The state's joyriding statute should be repealed so that instead of being subject to a misdemeanor penalty, offenders would be subject to a felony conviction.

5. Steps should be taken to correct the "revolving door" policy at the Lookout Mountain School for Boys. (Perhaps lowering the age limits for juveniles to 16 would help this situation.)