

Introduction

This document is written in response to the June 2026 Office of the Youth Ombudsperson's (OYO) report regarding the Department of Human Services (DHS) ongoing assessment of concerns arising from Abraxas South Mountain.

DHS Background and OYO Collaboration

DHS, through the City, contracts with service providers to deliver residential placement services. These facilities serve Philadelphia youth who are adjudicated as delinquent or dependent. DHS monitors these providers through a robust monitoring infrastructure managed by our Performance Management and Technology (PMT) Division. Provider monitoring includes annual evaluations to assess provider performance and compliance with applicable laws and regulations. It also includes investigating "service concerns": these are any incidents, practices, or conditions that reflect a failure to meet applicable contractual requirements, licensing standards, or DHS quality benchmarks, that do not rise to the level of a serious incident. Service concerns are individualized and case-specific, so a viable service concern requires a concrete allegation supported with sufficient detail, such as identified individuals, dates, or specific incidents, to enable a meaningful assessment. Service concern investigations are conducted by our Service Concerns Unit, which conducts case-by-case assessments to address contract, program, and/or service delivery quality issues.

Service concern assessments are fact driven. They require analysts to gather relevant facts by interviewing youth and staff, gathering data, visiting facilities, and reviewing youth and facility files. Analysts apply those facts to the provider's contract and the relevant Pennsylvania regulations to determine, given all relevant facts and circumstances, whether the evidence supports the alleged service concern. When the evidence does not support the allegation, the service concern is considered "not validated." When the evidence supports the allegation, the service concern is considered "validated," and PMT requires the provider to implement a Corrective Action Plan (CAP). Validated service concerns can be the basis for DHS to discontinue contracting with a provider.

From early in OYO's inception, PMT has coordinated its efforts with the OYO to assist the OYO in its oversight of youth residential care facilities. PMT and the OYO established a joint protocol which was finalized on April 9, 2024, specifying how OYO would monitor PMT's assessments. Through the protocol, PMT: notifies OYO of service concerns and serious incidents; receives service concern referrals from the OYO; provides notice to the OYO of upcoming visits to facilities so that the OYO may accompany PMT should it wish to observe; provides OYO copies of documents related to ongoing service concern investigations; and meets with the OYO on a bi-monthly basis to discuss ongoing matters.

PMT coordinates and collaborates with OYO in good faith to meet the expectations set forth in the protocol in several respects. The OYO staff who attend interviews are allotted unrestricted time to ask interviewees questions. PMT's interview questions are often reviewed by OYO staff before the interview occurs. PMT staff meet with OYO staff on a

frequent, ongoing basis to discuss the merits of specific service concerns, the applicable regulations or legal requirements, logistics, and investigative findings. PMT has also rescheduled its investigative tasks, such as interviews and facility visits, to accommodate the OYO's requests.

Despite these extensive efforts at coordination, it is not always possible to accommodate the OYO's schedule for joint visits or ensure there are equal number of OYO and PMT staff at such visits. The Corrective Action Plan (CAP) and monitoring process for providers is part of DHS' continuous quality improvement process and framework which is not subject to the OYO's review and approval before submission to a provider.

The Home Rule Charter amendment (and Executive Order preceding it) provides that the OYO may gather information independently by conducting interviews, reviewing records, and visiting residential placement facilities. That authority is advisory in nature: it exists so that the OYO can develop an informed basis for its recommendations. The OYO has suggested that it cannot "investigate" because it lacks the contractual authority to issue corrective action plans or the ability to regulate providers. But neither the Home Rule Charter nor the Executive Order conditions the OYO's information-gathering function on any such authority, because the two serve different functions. Gathering information supports the OYO's advisory recommendations; issuing corrective action plans is an exercise of DHS' contractual authority. The absence of CAP authority does not limit the OYO's ability to gather the information it needs to advise.

DHS is committed to collaborating with the OYO to support its oversight of youth residential placement facilities and its role in providing recommendations regarding the quality of care at those facilities. The recent Home Rule Charter amendment establishing the OYO as a permanent body presents an opportunity to revisit the existing protocol. DHS looks forward to working with the OYO to update the protocol in a way that reflects the charter change and strengthens the OYO's advisory mission.

DHS Response to OYO Inquiry

DHS received an inquiry letter from the OYO on March 13, 2025, noting several concerns at Abraxas South Mountain. The inquiry described concerns of political indoctrination, failure to administer medication and report a medical injury, failure to notify parent of a medical injury, and failure to help youth keep ties to family and community. A joint PMT/OYO visit occurred with the identified youth during which he was unable to corroborate the concerns made in the initial inquiry. However, the youth raised additional concerns which led to another inquiry on May 7, 2025. OYO and PMT conducted staff interviews and meetings with Abraxas Leadership. Following the interview with the youth, PMT also collected and reviewed the following documents:

1. Any incident or injury reports related to youths' injuries, including details about treatment provided and timeline of parental notification.

2. Medication logs and treatment plans, that document youth prescribed medication, the facility’s protocol for administering medication, and an explanation for any missed medication management.
3. Abraxas Policies, Handouts and Trainings, including Diversity and Inclusion training and Policies.
4. Youth Medication Logs, Youth Safety Plans, Family Contact and Visit Logs and Infractions

As a result of the interviews with staff and youth, as well as a review of the documentation, the following determinations were made.

Concern	Determination	Outcome
<p>Negligence of Staff Parent reported youth did not receive his required medication.</p>	<p>Validated</p>	<p>Medication not sent from prior placement resulting in a lapse of medication management for the identified youth.</p>
<p>Culture, Race, or Gender Concerns Youth alleged that staff used racial slurs toward Black residents, that the facility lacked staff diversity and cultural competency, and that a Muslim peer was denied religious accommodations such as a prayer rug and fasting during Ramadan.</p>	<p>Continuing to assess</p>	
<p>Questionable Provider Policy/Practice Concerns were raised regarding communication and notification protocols. In addition, the facility’s visitation policy limits visits to one hour, which the parent reported as a barrier given travel time.</p>	<p>Continuing to assess</p>	
<p>Other Concerns Allegations included barriers to maintaining family ties, such as phone calls being withheld as punishment, threats to disconnect calls if youth disclosed facility conditions, restrictions on snacks as discipline, mealtime periods</p>	<p>Continuing to assess</p>	

<p>limited to four minutes, and staff discouraging or obstructing youth from filing grievances. Youth further alleged inappropriate staff conduct, including spitting on residents.</p>		
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PMT Timeline

March 2025

OYO Abraxas Inquiry assigned.

April 2025

PMT and OYO interviewed subject youth. The youth was interviewed at a different provider location as they were discharged from Abraxas.

May 2025

OYO sent a new Inquiry for Abraxas with updated concerns as a result of new information.

June 2025

PMT and OYO met with Abraxas for a scheduled one- hour meeting. PMT participated for two hours. At the time PMT left the meeting as the assigned staff had to transition to another meeting.

PMT reviewed the Resident Handbook.

August 2025

PMT received and reviewed additional information related to the handbook, policies, and interviews.

November 2025

OYO and PMT met to plan a joint site visit, assign interview roles, and review interview questions.

December 2025

OYO and PMT conducted a joint site visit at Abraxas to interview staff and youth.

January 2026

PMT uploaded staff interview notes.

PMT issued CAP for Abraxas for validated concern for staff negligence.

PMT received Abraxas's response to CAP.

March 2026

CAP uploaded for OYO.

OYO sent a new inquiry with similar allegations of discrimination. According to the inquiry letter, an anonymous youth alleged that Abraxas staff displayed favoritism, extended the length of stay for youth the staff disliked, and youth are not allowed to wear religious attire and attend religious services.

Inquiry Assigned to PMT Analyst.

PMT and OYO met to discuss the Abraxas inquiry and determine next steps.

May 2026

Site visit scheduled for May 2026 was rescheduled by agreement of the OYO and PMT offices. The site visit will occur in June 2026.

PMT uploaded Assignment sheet for Abraxas.

PMT Findings

The OYO's initial inquiry letter, dated March 13, 2025, alleged that staff failed to administer medication and failed to notify family of a child's medical condition. Those allegations were assessed as a service concern. The assessment process included a site visit on April 12, 2025, an interview with the youth on April 12, 2025, and interviews with Abraxas staff on June 4, 2025. Based on the evidence gathered during the assessment, PMT validated the service concern for staff negligence. A Corrective Action Plan (CAP) was completed by Abraxas on January 23, 2026, with monitoring by PMT.

The letter also alleged that the youth had "different [political] views" since arriving at Abraxas but explained that the youth's family could "not give clear and specific examples of this concern." The letter referred to staff diversity concerns and "questions whether youth of color are receiving culturally competent care." The letter further stated that the family's visits at Abraxas were limited to one hour. PMT and OYO interviewed the youth who submitted the complaint. During the interview, the youth denied being subjected to discrimination, and stated that unknown, unspecified youth may have received different treatment by unknown staff. The youth did not identify peers who suffered discrimination, did not identify staff who committed discrimination, did not describe specific examples of discrimination, and did not offer any dates or timelines during which discrimination occurred. Based on this information, PMT will continue to assess whether discrimination occurred.

The OYO sent a second inquiry letter on May 07, 2025, based on the interview with the same youth described above. The letter described several general grievances. According to the OYO, the youth alleged that Abraxas staff were “racist and disrespectful,” used racial slurs towards youth, and did not understand the youth’s identity. The youth also alleged that they were “frequently punished,” and that staff reportedly disconnected youth’s calls with family because the youth complained about their conditions. The youth also alleged that Abraxas staff used unsafe or improper restraint techniques. The letter, like the interview it was based on, lacked the specifics needed to open a service concern at that time; however, PMT would continue to assess the concerns.

On June 4, 2025, PMT and OYO conducted a joint meeting with Abraxas leadership. During the meeting, PMT gathered the following information about Abraxas Treatment Facility, which houses 60 youth (45 from Pennsylvania and 15 from out of state). Facility leadership reported that staff received diversity, supervisory, and quarterly training, in addition to daily shift briefings.

During the meeting, Abraxas reported there are currently 16 practicing Muslim youth at their facility. Families may provide or youth can request prayer materials such as Qur’ans and prayer rugs. During Ramadan, youth are given larger meals in the morning and evening. The facility acknowledged that they do not have a formal religious policy nor did they have an Imam on site. PMT will monitor Abraxas compliance with ensuring religious autonomy.

Abraxas leadership reported that families receive a packet outlining visitation, including biweekly in-person visits, weekly one-hour phone calls and virtual visits. For families traveling over three hours, Abraxas offers support, including gas cards, transit tickets, and hotel stays. It appears that Abraxas’ policies regarding visitation are restrictive, particularly due to distance; therefore, PMT will discuss further with Abraxas’ leadership to develop a policy that supports more meaningful family visits.

DHS Response to the Abraxas Report’s Recommendations

Response to OYO Recommendation #1: Validate Identified Service Concerns and Require Corrective Action

PMT will not adopt OYO’s recommendation to validate the additional identified service concerns, at this time, as we are continuing to assess the following: racial and religious discrimination, the inappropriate use of restraints, visitation policy, and the extended length of stay.

Response to OYO Recommendation #2: Implement Enhanced Monitoring of Abraxas South Mountain

PMT will enhance monitoring of Abraxas South Mountain. A joint site visit with OYO and PMT will occur in June 2026.

Response to OYO Recommendation #3: Require Revision of Outdated or Overly Restrictive Policies

DHS accepts OYO's recommendation to require revisions of outdated or overly restrictive policies. DHS will work with Abraxas South Mountain to conduct a comprehensive review of its Policies & Procedures Manual, including the Resident Handbook and Rights sections, to ensure alignment with PA's 3800 regulations and trauma-informed care practices.

As part of this review, PMT will require the facility to:

- Revise policies to align with PA's 3800 regulations and DHS' Scope of Services
- Ensure written policies accurately reflect current practices
- Clearly articulate youth rights and staff responsibilities
- Provide updated written policies to youth, staff, parents and guardians
- Conduct staff training on all revised policies

Response to OYO Recommendation #4: Require Ongoing Submission and Implementation Monitoring

DHS accepts OYO's recommendation to require all contracted providers, including Abraxas South Mountain, to submit updated policy manuals on a consistent basis as part of contract compliance. As part of the existing evaluation and service concern processes, DHS does review certain policies and related documents to ensure compliance with standards and regulations. PMT will ensure through the evaluation processes that staff are trained.

Response to OYO Recommendation #5: Strengthen Service Concern Assessment Practices

DHS accepts OYO's recommendation to strengthen the service concern assessment practices. PMT's current procedure includes interviews with the youth, staff, and leadership; policy and document review; and a site visit to tour the facility—all of which are included in the OYO's recommendation.

Conclusion:

DHS remains committed to our continued partnership with OYO.