



Juvenile Justice Transformation: Progress to Date

5th Annual CSA Conference

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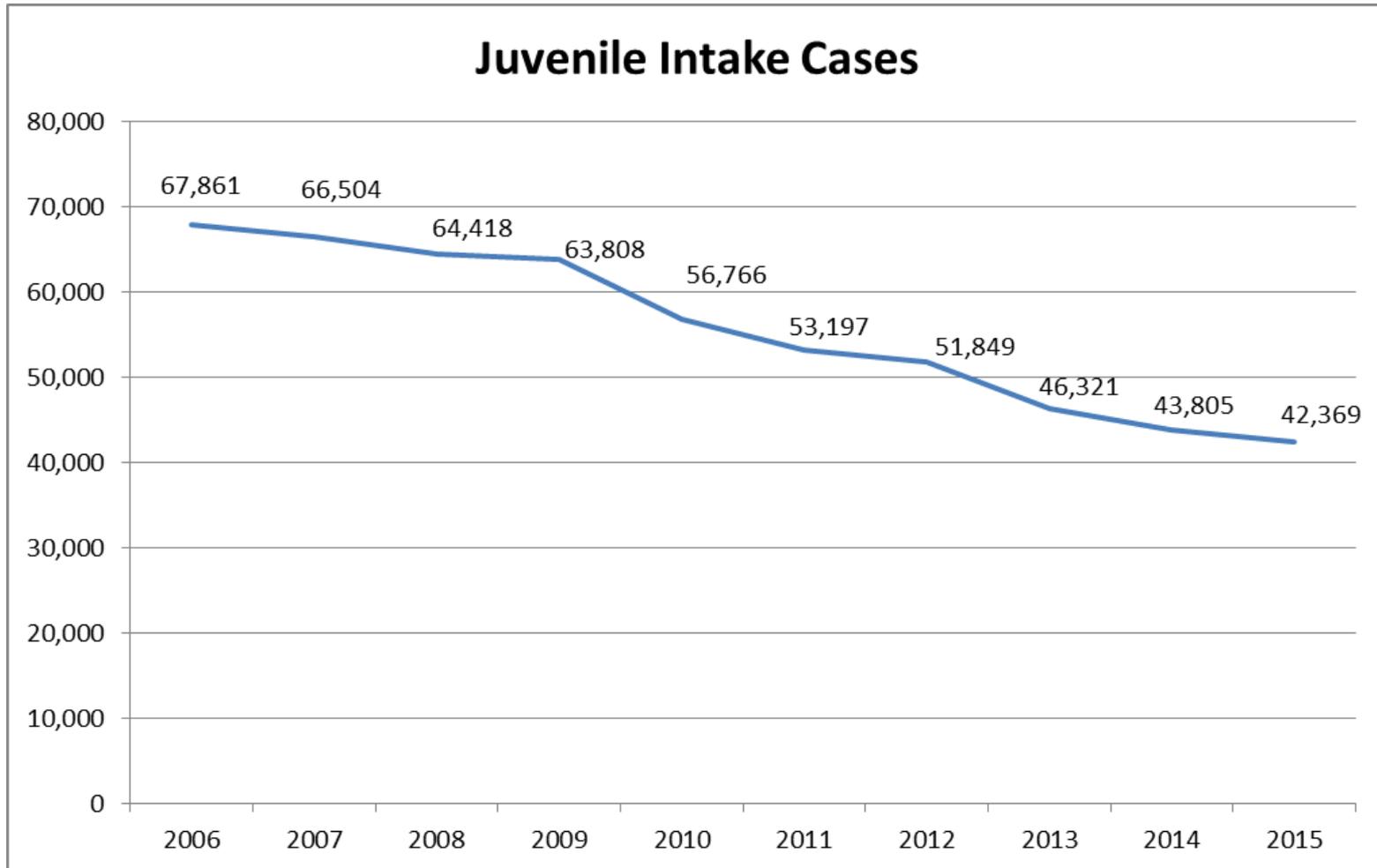
Transformation Presentation Agenda



- **Background**
- **Transformation Progress**
- **Next Steps**
- **Video on Community Treatment Model**

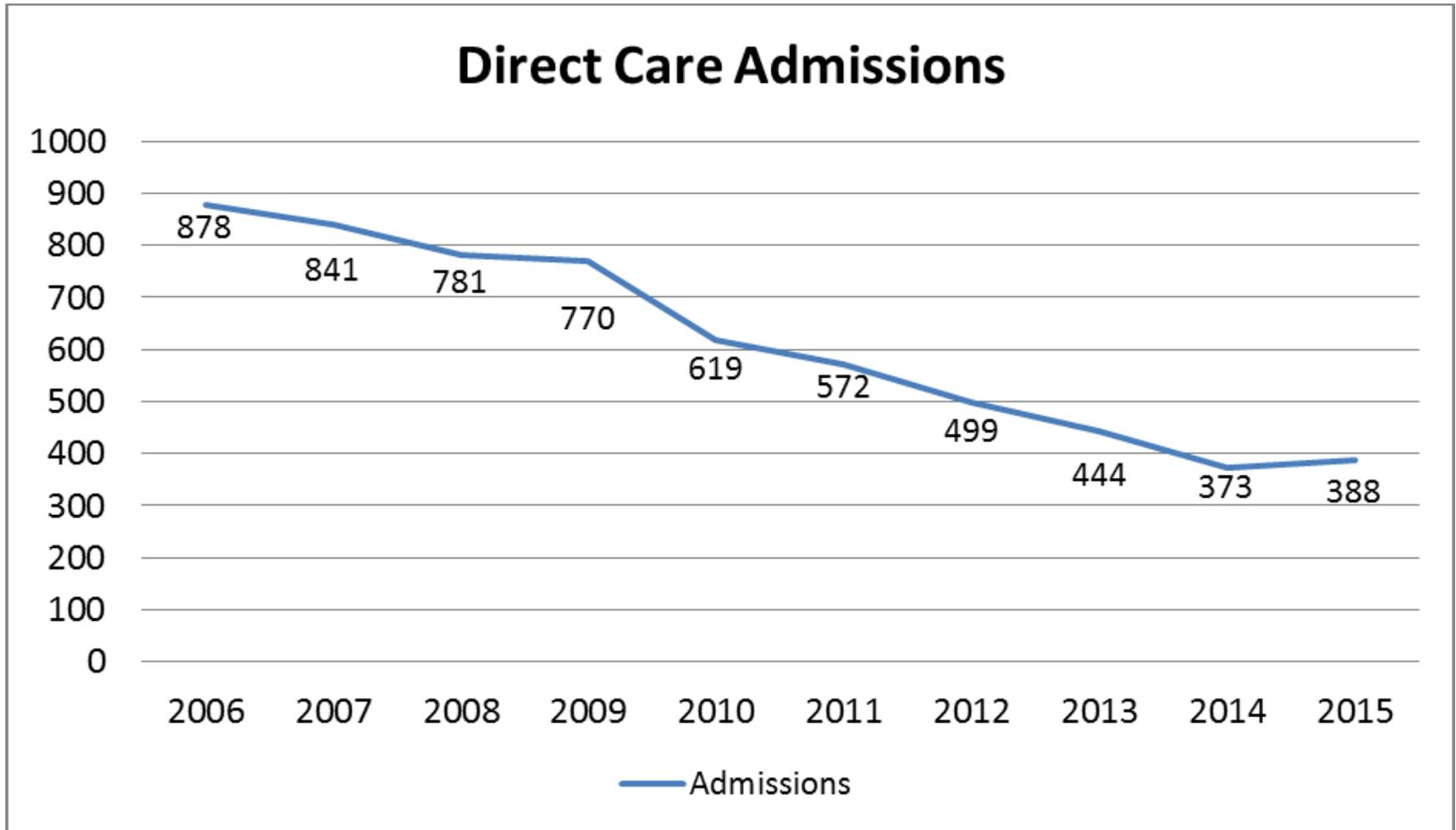


**Intake cases have decreased by
37.6% (25,492 cases) since FY 2006.**





Admissions to direct care* have decreased by 55.8% (490 juveniles) since FY 2006.



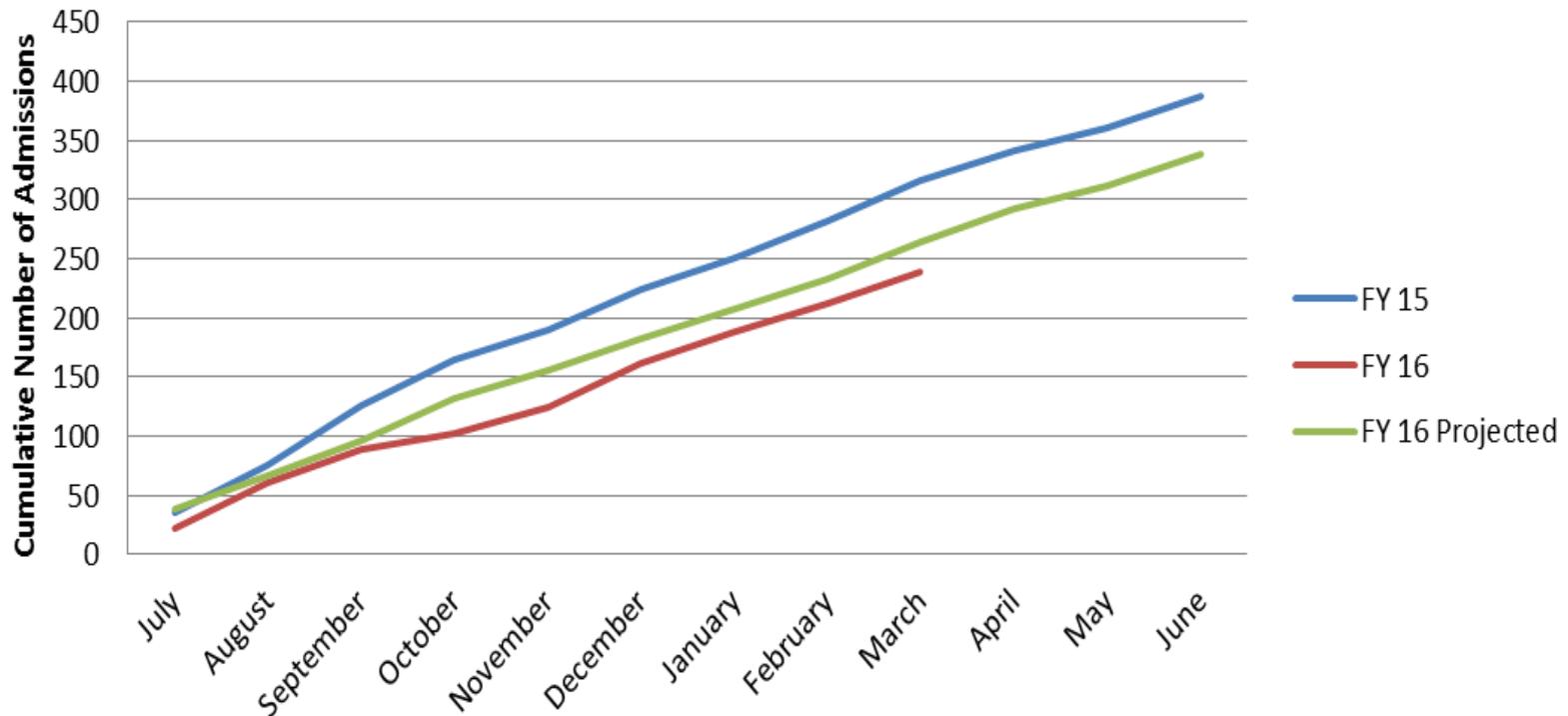
* The direct care population includes all committed juveniles regardless of placement.



Admission Trends FY 2015 through FY 2016*



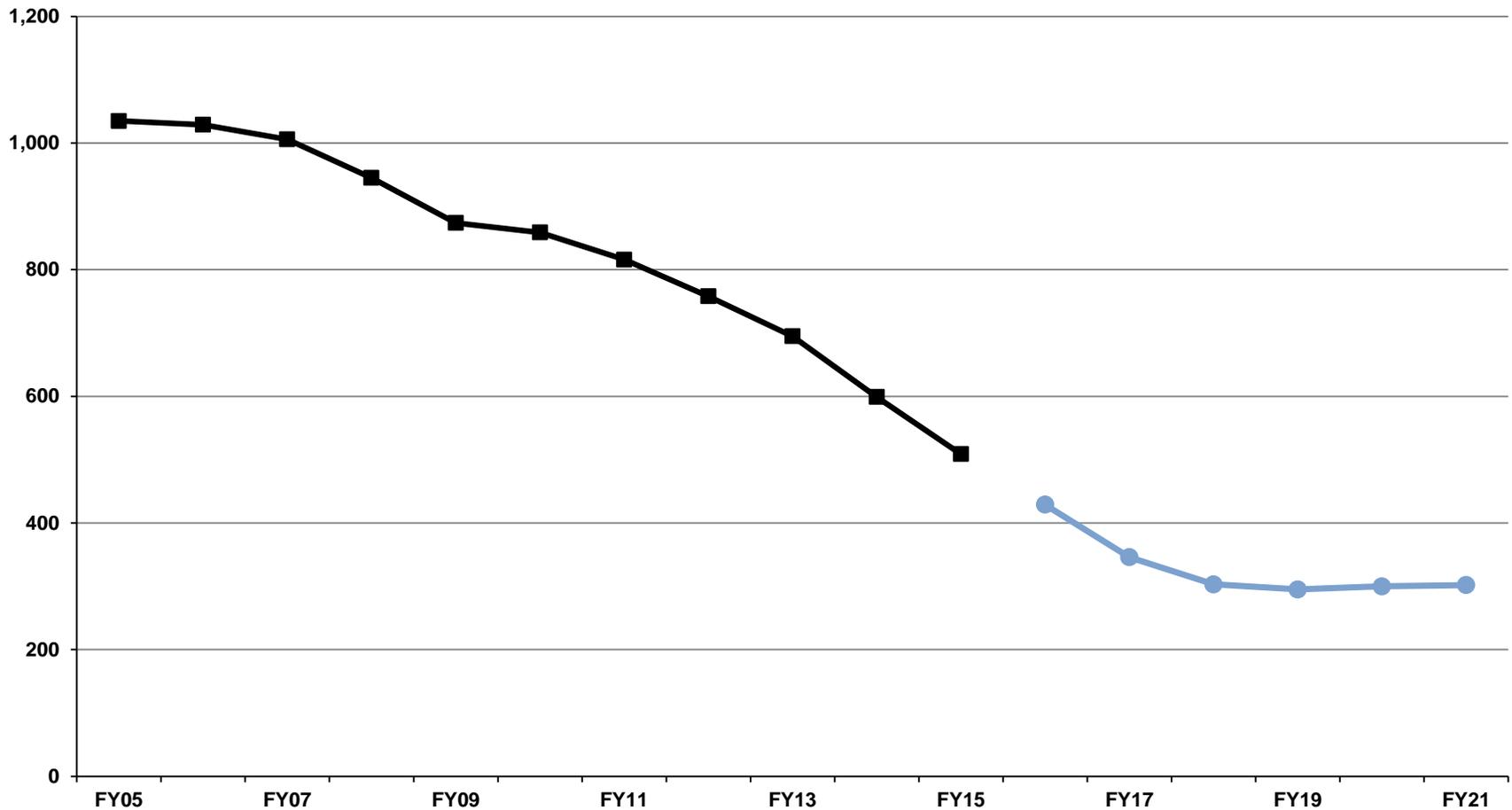
Cumulative Direct Care Admissions, FY 2015 - 2016



* Admission data for March was captured on March 31, 2016 and, therefore, are incomplete.



Juvenile Direct Care Population Forecast (FY Average)





Most Serious Committing Offense by Severity*

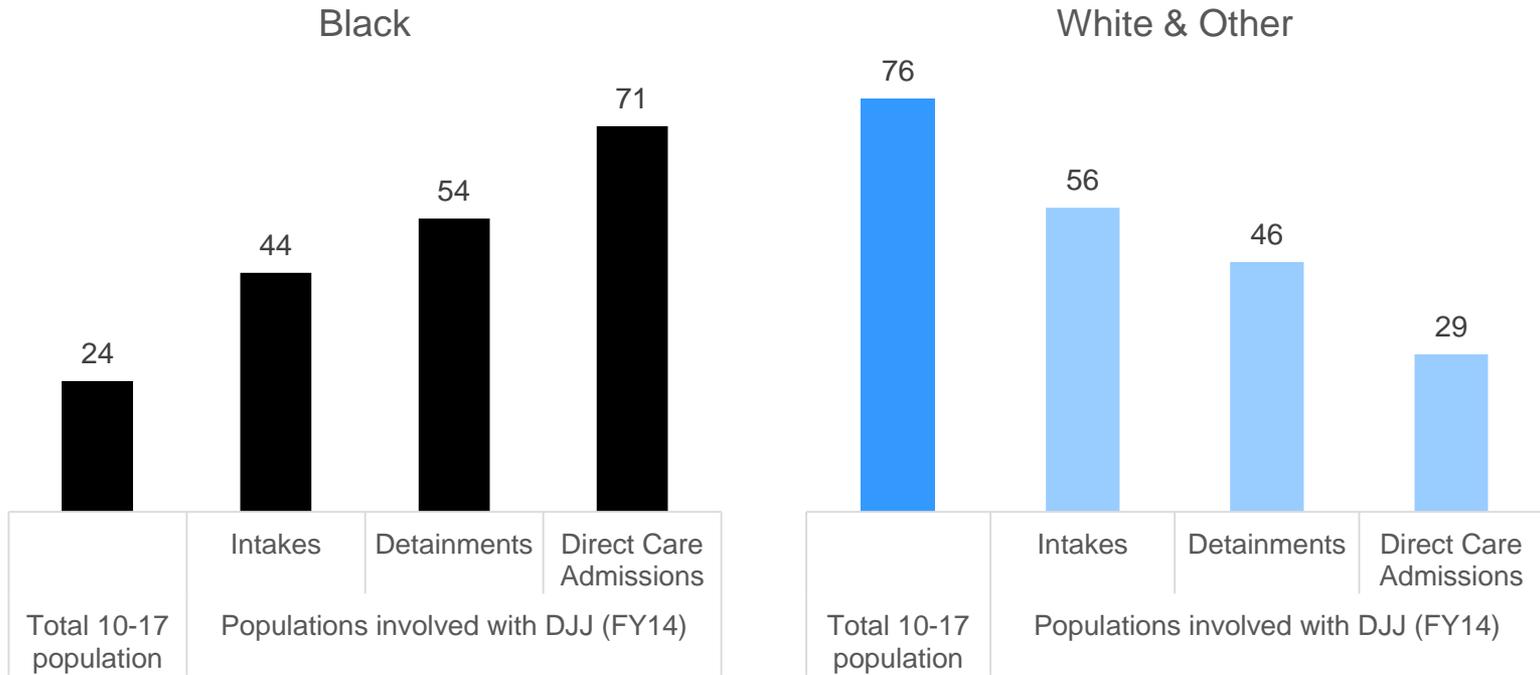


Offense Severity	2011	2012	2013	2014	2015
Felony Against Persons	50.5%	50.7%	45.7%	50.1%	53.4%
Felony Weapons/Narcotics	2.6%	4.0%	2.5%	4.8%	2.6%
Other Felony	28.8%	32.7%	32.9%	29.8%	29.6%
C1 Misdemeanor Against Persons	8.2%	5.4%	5.6%	6.7%	6.7%
Other C1 Misdemeanor	5.8%	4.8%	7.2%	5.1%	5.2%
Parole Violation	3.8%	2.4%	6.1%	3.5%	2.6%

* Percentages do not add to 100% because categories with small percentages are not displayed.



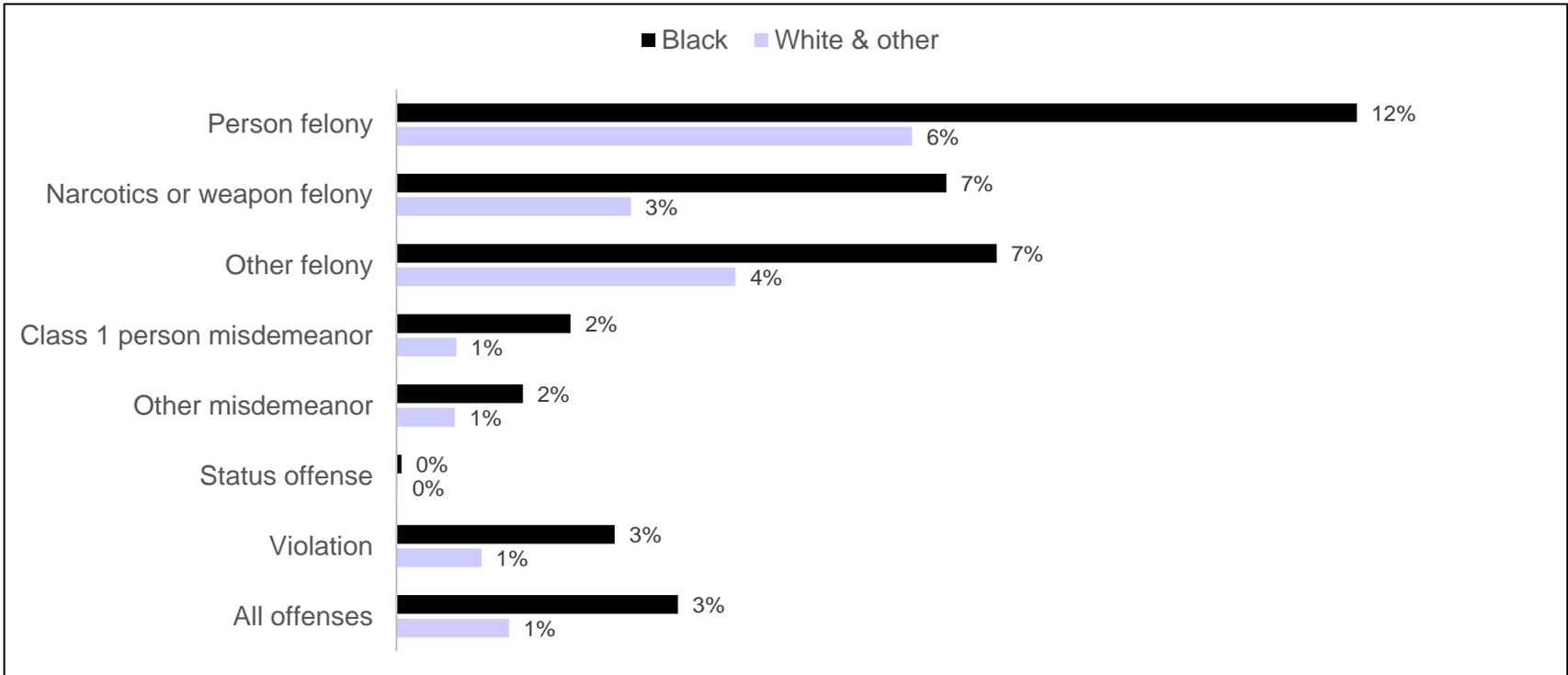
African-American youth overrepresented at every stage of the system.



Percent of FY 2012 through FY 2013 juvenile intake cases that received a commitment to direct care by the end of FY 2014. One youth may be committed on the basis of multiple intake complaints. Hispanic ethnicity is not consistently identified in the intake case data, so the cases categorized as “Black” or “White & other” may include Hispanic youth.



African-American youth committed at twice the rate of other youth.



Percent of FY 2012 through FY 2013 juvenile intake cases that received a commitment to direct care by the end of FY 2014. One youth may be committed on the basis of multiple intake complaints. Hispanic ethnicity is not consistently identified in the intake case data, so the cases categorized as “Black” or “White & other” may include Hispanic youth.

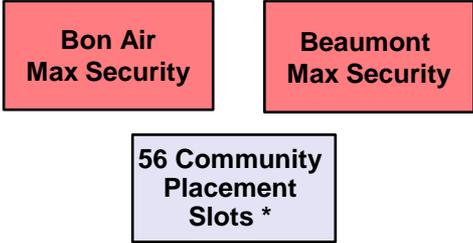
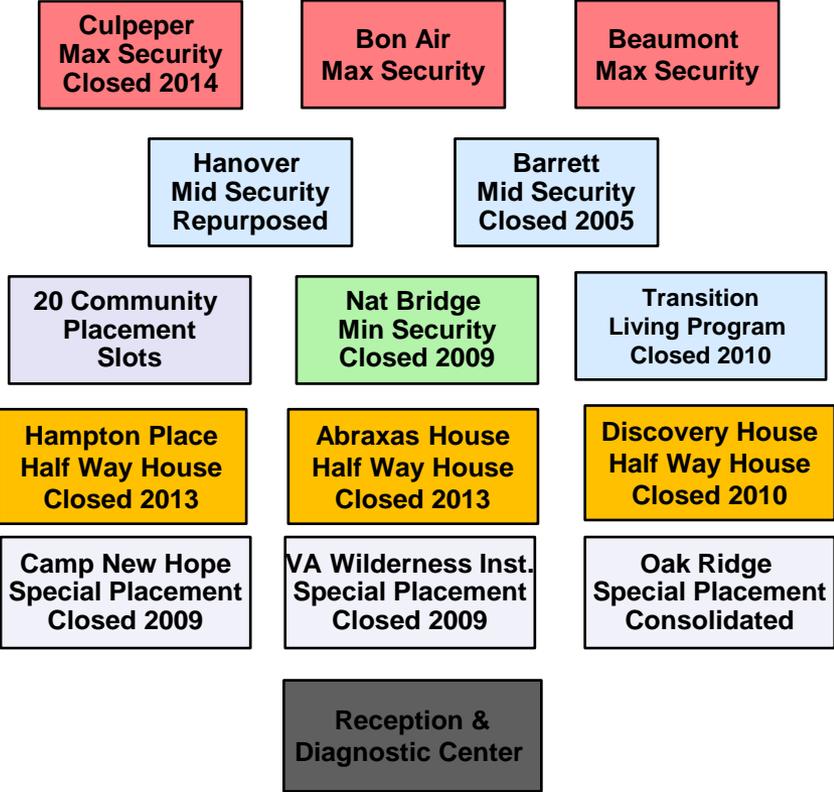


Budget cuts eliminated the continuum of alternatives



Virginia 2005

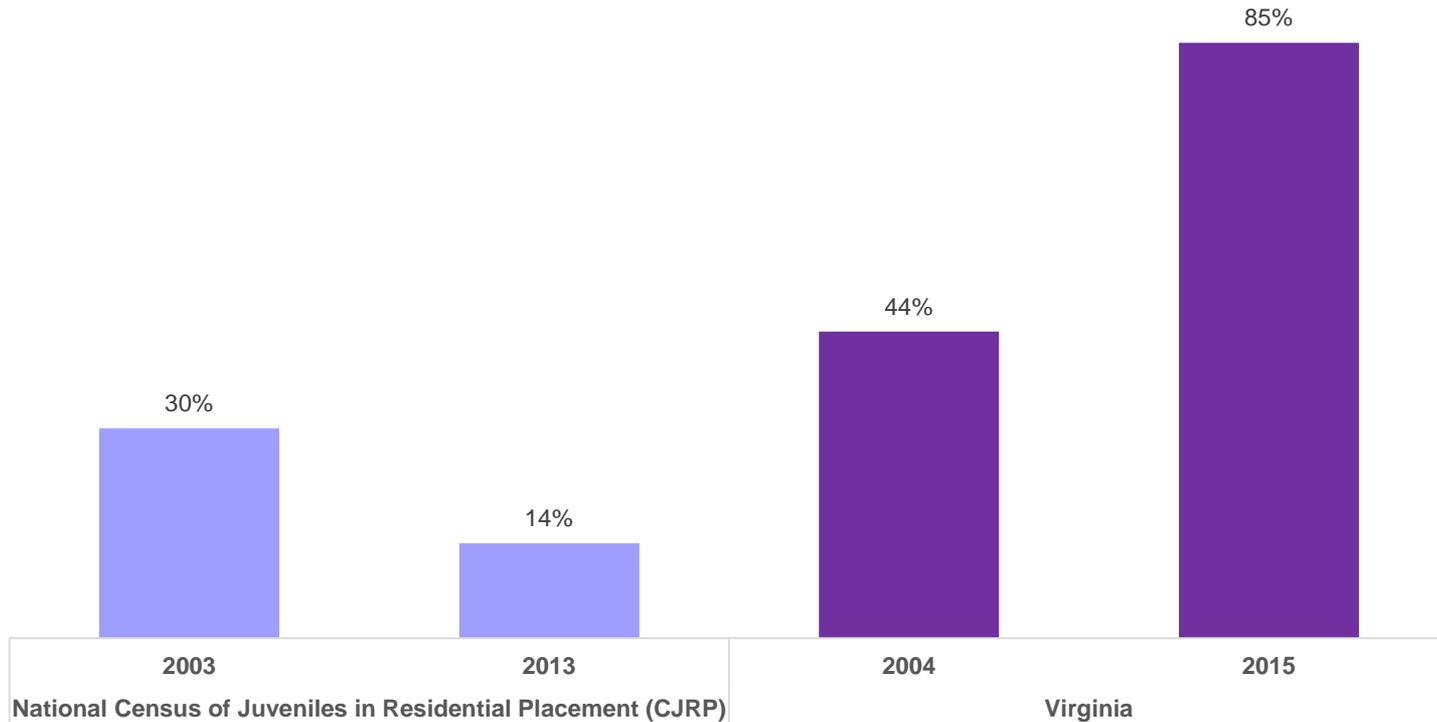
Virginia 2016



* Includes Community Placement Programs. Detention Reentry beds are not included.



VA's use of large facilities out of step with national trends



- Share of committed youth housed in facilities with more than 200 beds
- Share of Direct Care capacity in facilities with more than 200 beds



Current Outcomes



- **High recidivism**
- **Racial disproportionality**
- **1,500 juveniles (approx. 23%) released from direct care in last 10 years were serving a Department of Corrections (DOC) sentence as of December 31, 2015.**

1,500 = > \$150,000,000 in juvenile rehabilitation

1,500 = \$42,000,000 in DOC annual expense*

* Virginia DOC Management Information Summary Annual Report, 2015, p.14



DJJ Transformation Plan



Reduce

- Use data and evidence to modify length of stay (LOS) policy
- Uniform, effective, and data-driven probation practices
- Develop more alternative placements for committed juveniles

Reform

- Convert juvenile correctional center (JCC) units to Community Treatment Model
- Improve educational and vocational programming
- Improve family engagement
- Enhance reentry planning and parole services

Replace

- Expand the array of placement alternatives by reinvesting correctional savings
- Develop a Statewide Continuum of Services
- Build two new facilities that are safer, closer, smaller in scale, and built for treatment to replace current JCC's



Transformation Progress: Reduce



- **New LOS Guidelines, Effective October 15, 2015**
- **Expansion of Community Placement Program and other Alternatives**
- **Population Decline**
- **Court Service Unit (CSU) Practice Improvement**



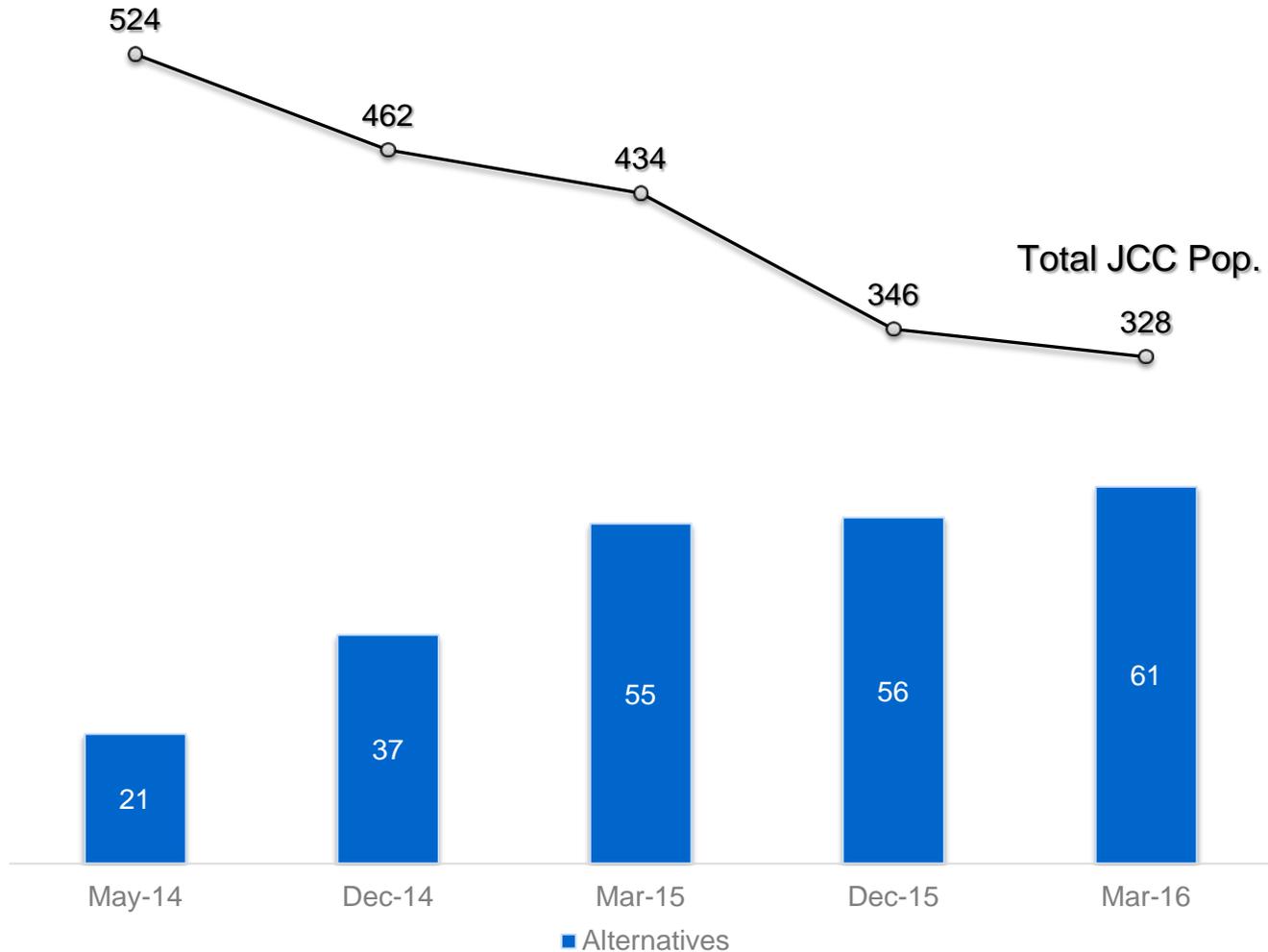
Transformation Progress: CSU Improvement



- **Retraining on existing tools and skill building training to provide or coordinate interventions**
- **Partnerships with local CSB's**
- **More diversion alternatives**
- **Stronger connection with JCCs**
- **Stronger connections with other CSUs**



The JCC population has fallen by 37% since May 2014; the population in JCC alternatives has tripled.





Transformation Progress: Reform



- **Converted 9 JCC units to the Community Treatment Model (108 residents)**
- **Improved educational programming, and strengthened vocational and job certification**
- **Funding and providing transportation for family visits to Beaumont and Bon Air JCCs and community placement programs (CPPs)**



Transformation Progress: Reentry Reform



- **One of six states to receive an OJJDP Planning Grant in 2014 to reform the reentry system**
- **One of three states to receive an OJJDP implementation grant to improve reentry planning procedures to include greater family involvement**
- **New Reentry Procedures**



Transformation Progress: Replace



- **Closed the Reception and Diagnostic Center on June 30, 2015**
- **Contracted for a new apartment living program in Virginia Beach (8 beds)**
- **Issued a Request for Proposal (RFP) for Residential Placement for Girls**
- **Issued an RFP for Regional Care Coordinators**
- **Contract for seven CPPs for boys and one for girls as of July 1, 2016 (73 total beds)**



Transformation Progress: Replace



- **Governor's Proposed Budget**

- Funding for two new, smaller, and treatment-oriented facilities (Chesapeake and Hanover)
- Reinvestment authority

- **Final Budget:**

- Reinvestment Authority
- Interagency Taskforce to study DJJ capital needs **(requires input from Judiciary)**
- Funding for Chesapeake (after interim report) and planning for second site.



Classrooms Not Courtrooms



- **Administration-wide initiative to stem the flow of young people from schools to court**
 - Training initiatives
 - Delineation of school and resource officer roles
 - Focus on positive behavioral supports in schools
 - Better data sharing and collecting
 - Policy change



DJJ Intake Data



	2013-2014 School Year	2014-2015 School Year	2015-2016 School Year <i>through March</i>
Diversions of First-Time Truancy Complaints	<p>Overall: 20% of first-time truancy complaint were diverted.</p> <p>Non-white juveniles: 19% of first-time truancy complaint were diverted.</p>	<p>Overall: 19% of first-time truancy complaint were diverted.</p> <p>Non-white juveniles: 18% of first-time truancy complaint were diverted.</p>	<p>Overall: 20% of first-time truancy complaint were diverted.</p> <p>Non-white juveniles: 17% of first-time truancy complaint were diverted.</p>
School-Based Intake Complaints*	N/A (Data was not yet collected.)	Between 2/1/15 and 8/31/15, 10.2% of juvenile intake complaints were made by School Officials (6.5%) or SRO (3.6%) petitioners.	16.7% of juvenile intake complaints were made by School Officials (10.7%) or SRO (6.0%) petitioners.



Additional/Future Initiatives:



- **Agency-wide communication skill building**
- **Development of a Dispositional Decision-Making Matrix**
 - Multiple opportunities for stakeholder input
 - Gradual roll-out and likely regional variations
- **Development of statewide continuum**
- **Addressing racial disproportionality**
- **VJCCA Reform**
- **Violence Prevention**



Court Service Units Intake, Probation & Parole

Michael G Morton
Regional Program Manager
Eastern Region



Court Service Units Transformation Activities



- Intake and Diversion
- Diversion Data
- Decision Making
- Alternatives to Detention
- DJJ Decision Making Tools
 - Detention Assessment Instrument (DAI)
 - Youth Assessment Screening Instrument (YASI)
 - Disposition Matrix



Intake and Diversion



- Intake is the front gate and Intake Officers are the “gate keepers”
- Research indicates low risk youth reoffend at much lower levels, even with no intervention. In fact an over-response can do more harm than good.
- For those reasons we must increase diversion, with risk assessment guiding our diversion decision-making.



Intake and Diversion



- Current Use of Diversion Varies Across CSUs.
- FY 2015 Diversion Data:
 - Approximately 57,000 total complaints
 - 80% were diversion eligible
 - Only 16% of those were diverted
- Failure to divert low risk cases can inadvertently increase risk.

(Source: Data Resource Guide, FY2015, page 22)



Decision Making



- There are many key-decision points in our system. Some of our most important decisions, including whether to formally charge and whether to deprive young people of their liberty occur at CSU Intake.
- When making such important decisions it is important that we do so using structured, objective means.
- DJJ's decision-making approach includes a collection of standardized instruments and tools that assess risk, promote safety, and guide decisions. These tools are intended to promote consistency, equity, and the use of the least restrictive level of legal intervention and environment to achieve public safety.



Alternatives to Detention



- Intake Officers have the authority to release, place youth in an alternative to detention, or place in secure detention

- Continuum of Alternatives:
 - Outreach
 - EM/GPS
 - Day/Evening Reporting Center
 - Shelter Care



Decision-Making Tools



- Detention Assessment Instrument (DAI) and the Youth Assessment & Screening Instrument (YASI).
- The YASI includes both a Pre-Screen and a Full Assessment.
- Tools are intended to help ensure the right youths, receive the right interventions at the right time.
- Our tools should also help us to differentiate between young people with social, child welfare and treatment needs and young people who pose a risk to public safety.



Detention Assessment Instrument (DAI)



- DAI was implemented in 2002 in the 32 State operated Court Service Units and 3 locally operated Court Service Units.
- The Detention Assessment Instrument indicates whether juveniles eligible for pre-dispositional detention should be released to parents or other appropriate persons, placed in a detention alternative, or detained.
- The Detention Assessment Instrument was developed through a consensus approach and allows for mandatory and discretionary overrides.
- The DAI was validated in 2007 by Scott Reiner, Jared Miller, and Tripti Gangal.



Detention Assessment Instrument (DAI)



- Our responsibilities in making Detention placement decisions are some of our most important decisions.
- Being detention eligible (by Code) is not the same as being detention appropriate.
- Detention and other secure environments come with inherent dangers and disconnect juveniles from family, school, service providers, pro-social activities and more. Secure detention also increases risk.
- We must reserve secure detention for juveniles who pose a risk to public safety or a risk of flight.



Youth Assessment Screening Instrument (YASI)



- DJJ uses the Youth Assessment & Screening Instrument to assess risk to reoffend.
- The YASI has two versions, a condensed pre-screen version and a full assessment.

Pre-Screen		Youth Assessment & Screening Instrument			
Name:	<input type="text" value="Last"/> <input type="text" value="First"/>	JTS #	<input type="text"/>	Date Administered	<input type="text" value="MM/DD/YYYY"/>
DOB	<input type="text" value="MM/DD/YYYY"/> <input type="radio"/> Male <input type="radio"/> Female	CSU	<input type="text"/>	Officer	<input type="text"/>
Type:	<input type="radio"/> Probation	<input type="radio"/> Direct Care /Commitment	<input type="radio"/> Referred to Court (outcome pending)	<input type="radio"/> Diversion With informal Supervision	<input type="radio"/> Diversion Without Informal Supervision
Section 1 <i>Legal History ~ Pre-Screen</i>					



YASI Pre-Screen



- The YASI Pre-screen includes a minimum of high predictive static & dynamic items (about 30).
- The items yield classifications of “low”, “moderate”, and “high” risk of future delinquent behavior.
- The YASI Pre-screen can be used at Intake to inform Diversion decisions.
- The YASI Pre-Screen is intended to rapidly identify “low” risk cases that can be diverted and “moderate” and “high” risk cases that require further assessment or intervention.



YASI Full Assessment



- The Youth Assessment and Screening Instrument (YASI™) is an innovative model that assesses risk, needs and protective factors in youth populations.
- Measures both risk and strengths in juvenile populations as well as other high risk youth.
- Measures protective factors to help case workers build on the strengths of youth to buffer the negative impact of risk.
- Includes a case planning component designed to help case workers identify and monitor the priority targets for behavior change.
- Produces results quickly and efficiently through web-based software that also guides the user through case plan development.
- Provides an attractive visual method for presenting and sharing assessment results.



YASI Full Assessment



Domains Assessed:

1. Legal History
2. Family
3. School
4. Community/Peers
5. Alcohol/Drugs
6. Mental Health
7. Violence/Aggression
8. Consequential Thinking Skills
9. Attitudes/Beliefs
10. Employment/Use of Free Time



Disposition Matrix

On the Horizon



Key Points of the Disposition Matrix:

- The matrix places youth along a continuum of disposition options and community options. The intensity of Court Service Unit services increases as the risk level and offense severity increases.
- Low-Risk Offenders remain in the community with minimal intervention
- Moderate-Risk Offenders are typically placed in more structured community programs
- High Risk offenders receive probation supervision with evidenced based practices and treatment programs (EPICS, ART, T4C, FFT, MST)
- Residential Placement reserved for the highest risk offenders with violent offenses



Community Placement Program (CPP)

a Partnership Between the
Virginia Department of Juvenile Justice and
the local Juvenile Detention Facilities

Kathy Kirven

Central Admissions & Placement Counselor

CPP Overview

What is the Community Placement Program?

- Partnership with local detention facilities
- Small and highly structured residential placement with community re-integration planning
- Residents remain in direct care during stay
- Focus on skill development and developing competency in education, job readiness, life and social skills.

CPP Overview

Which detention centers will participate?

Rappahannock – Fredericksburg

Blue Ridge - Charlottesville

Chesapeake - Tidewater

VA Beach – Tidewater

Merrimac – Williamsburg

Shenandoah – Staunton

Chesterfield-Central Region

CPP Overview

Who is eligible for placement in CPP?

- Males
- Preferably at least 16 up to 20.6
- Both frontend and backend of commitment
- Low to moderate risk; high risk with protective factors
- No longer than a 12 month LOS
- No active DOC or jail time

CPP Overview

- Referral Process
 - Front-end youth:
 - CAP committee
 - Intake & Assessment Phase
 - CSU input
 - Staffing: if youth identified as possible CPP candidate, the case management review process initiates
 - CAP referrals go directly to CCRC
 - Pending intakes in the community

CPP Overview

- **Referral Process**

- Back-end youth

- Treatment teams identify youth who have 3 or more months left to serve on their LOS, completed treatment, stable behavior
 - Follows case management review process at the facility level
 - Treatment Team-ICRC-CCRC

CPP Overview

- Referral Process
 - CCRC reviews all referrals brought forward; CCRC meets every Tuesday
 - **If** approved, a CPP packet will be forwarded via email to the CPP
 - Education & Medical will regularly send information directly to the respective departments
 - CAP case manager will assist with any follow-up, questions and coordinate transfer with CPP

CAP Overview

What Is CAP?

Who works in the CAP unit and what is each person's role?

What information is received as part of the commitment packet?

CAP Overview

How long are juveniles in the intake units?

What happens while juveniles are in the intake units?

What information is collected at intake and what forms are used to document that information?

What evaluations/tests/assessments are completed while the juvenile is in the intake unit?

CAP Overview

CAP Staffing:

When is the staffing held?

Who is invited?

Who is present?

What is the goal/purpose?

What decisions are made during the staffing process?

How are staffing decisions made?

How are POs involved in the staffing?

How are parents/guardians involved in the staffing?

Who is notified about staffing decisions and how are notifications made?

CAP Overview

ICRC:

What is ICRC?

When are ICRC meetings held?

When is an ICRC meeting required?

What forms are necessary?

Who can participate and who is required to participate?

CAP Overview

CCRC:

- What is CCRC?
- When are CCRC meetings held?
- When is a CCRC meeting required?
- What forms are necessary?
- Who can participate and who is required to participate?

CPP Overview

- **New Length of stay Guidelines**
 - Data driven, research based
 - LOS is driven by risk and needs as delineated by the YASI/current committing offense
 - Previous LOS twice the national average
 - Recidivism rates high-longer a youth person stayed in direct care, correlated to increase in recidivism—diminished return

CPP Overview

- **Assignment of Treatment needs**
 - Aggression Management
 - Substance Abuse

Individual therapy

Medication Management

MHSTPs

Documentation in BADGE



Community Placement Programs

**Sara Jones, Treatment Coordinator
Merrimac Juvenile Detention Center**



Integrated Model



- Programming is based upon the integrated community model. All CPP's emphasize a positive peer culture and are designed and structured to create a safe environment for social learning and change.
- Integrated model involves the implementation of evidence-based principles, organizational development, and collaboration.
- Intensive learning experience in which behaviors, attitudes, values, and emotions are continually monitored, and corrected or reinforced as part of the daily regime.
- Through the use of teaching and role modeling, trial and error learning, and constructive criticism, residents experience re-socialization along with growth in competence, confidence, and self-efficacy.



Program Requirements



- **Highly structured/disciplined program.**
- **Focuses on skill development and developing competency in the areas of education, job readiness, life and social skills.**
- **Includes reentry planning for seamless transition to the community.**
- **Individualized service planning (YASI/CRCP).**



JDC Provides



- **Room and Board**
- **24/7 Supervision**
- **Basic Services**
- **Routine basic medical services**
- **Transportation**
- **Surveillance and Monitoring while away from the facility**
- **Visitation**



Available Services



- **Anger management**
- **Substance abuse relapse**
- **Life skills**
- **Employability services to include job seeking and job keeping skills**
- **Community service**
- **Recreational and leisure time activities.**

(Services differ based on locality – i.e. Merrimac utilizes CBT [21 groups per week], Aggression Replacement Training [Skillstreaming, Anger Management, and Moral Reasoning], and Girls Circle).



Mandated Services



- **Monthly Progress Reports and Final Discharge Report**
- **Educational Services**
 - In-house state certified educational program.
 - IEP adherence, when applicable.
 - Post-secondary education opportunities, if applicable.
 - Graduates and those over 18 require access to vocational classes or employability and independent living skills curriculum.



Collaboration



- **DJJ** – JCC Counselor, CAP Unit, CCRC, Mental Health Staff, Medical Staff, Education Staff, Re-Entry Specialist
- **CSU** – Probation Officer, Parole Officer, CSU Supervisor
- **CPP** – Program Supervisor, Case Manager, Therapist, Line Staff, Mental Health Staff, Education Staff, Medical Staff, and Administration
- **Client(s)** – Resident, Parents/Guardians
- **Service Providers** – Therapists, SA Counselor, Aggression Management Counselor, Mentors, Life Skills Coach, any 294 approved vendors.
- **Miscellaneous** – DSS, CSB, Volunteers, DMV, VEC, etc.



Reentry Planning



- **Service Completion Notification**
- **30 day release notification to DJJ and Parole Officer**
- **MHSTP Follow-up**
- **Re-Enrollment Process**
- **Transfer of Services to Community**
 - Medication Management, Medicaid Reinstatement
 - In-Home Services
 - Counseling (Individual/Family)
 - GPS/Electronic Monitoring
 - Birth Certificate and Identification Card
- **Job Applications**
- **Parole Supervision**
- **Release Notification from DJJ**

DJJ'S MISSION, VISION & VALUES

- **MISSION** – Protect the public by preparing court-involved youth to be successful citizens.
- **VISION** – Commitment to excellence in public safety by providing effective interventions that improve the lives of youth, strengthening both families and communities.
- **VALUES** – Knowledge, Professionalism, Respect, Integrity, Dedication and Effective Communication.

Virginia Department of
Juvenile Justice

One Team.

New Ideas.

Extraordinary Purpose.



DJJ'S REENTRY SYSTEM REFORM

where we've been

- 2010 4 Year Reentry Strategic Plan
- 2011 Video visitation
- 2012 Comprehensive Reentry Case Planning
- 2012 Reentry to Education and Employment Project
- 2012 Mentoring Project
- 2012 DMV2 Go
- 2013 Medicaid Pre-release applications

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DJJ'S REENTRY SYSTEM REFORM

where are we now

- 2014 2nd Chance Planning Grant awarded
- 2014 Reentry Taskforce
- 2014 Assessment completed by Evidence Based Associates
- 2015 Assessment Findings and Recommendations released
- 2015 2nd Chance Implementation Grant awarded
- 2015 Family Engagement System
- 2016 Draft DJJ Reentry and Intervention Manual

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DJJ'S REENTRY SYSTEM REFORM

where are we going

MAKING THE SYSTEM WORK

- 2016 DJJ Reentry & Intervention Manual for Committed Youth
- 2016 Family Partnership Framework for direct care youth & families
- 2016 Evidence based system
- 2017 Increased positive outcomes for youth and families
- 2018 Reduction in recidivism

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DJJ'S REENTRY SYSTEM REFORM

How do we get there

1. Supervision, service and resource allocation based on validated risk and needs assessments

- YASI fidelity
- Supervision dosage
- Individualized case plans
- Appropriate service matching

*Core Principles for Reducing Recidivism and Improving
Other Outcomes in the JJ System (NRRC, CSG, 2014)*

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DJJ'S REENTRY SYSTEM REFORM

How do we get there

2. Adopt and effectively implement programs and services demonstrated to reduce recidivism and improve outcomes, and evaluate performance and improvements.
- Focus on research based programs and services
 - Practice effective service delivery
 - Collect data
 - Focus on positive outcomes vs recidivism

Core Principles for Reducing Recidivism and Improving Other Outcomes in the JJ System (NRRC, CSG, 2014)

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DJJ'S REENTRY SYSTEM REFORM

How do we get there

3. Employ a coordinated approach across service systems
 - Know the customer (s)
 - Know the community
 - Build relationships with local partners

Core Principles for Reducing Recidivism and Improving Other Outcomes in the JJ System (NRRC, CSG, 2014)

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DJJ'S REENTRY SYSTEM REFORM

How do we get there

4. Tailor policies, programs and supervision to reflect needs of adolescents
 - Children are not mini adults
 - Understand missed opportunities during critical stages of development
 - Reinforce family engagement
 - Promote and support positive behavior and interactions
 - Focus on accountability vs punishment

Core Principles for Reducing Recidivism and Improving Other Outcomes in the JJ System (NRRC, CSG, 2014)

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DJJ'S REENTRY SYSTEM REFORM Current Partnerships

- Transportation Assistance Program
- Video visitation
- Shared Network Access Points
- DMV identification and on campus testing center
- Foster care MOA DSS/DJJ
- Medicaid pre-application & in-hospitalization coverage

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DJJ'S REENTRY SYSTEM REFORM

What do you need to know?

As a result of the Reentry Reform we are focusing on 3 main areas to better serve kids and families.

1. Comprehensive, consistent and individualized case planning
2. Family Decision Making model
3. Increased interagency partnerships

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JUVENILE JUSTICE TRANSFORMATION

For more information, visit the DJJ web site: www.djj.virginia.gov

- DJJ Families
- DJJ Resources
- DJJ News
- Community Model [access it here on our Vimeo account.](#)

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