

Juvenile Justice Transformation

January 17, 2018
Andrew K. Block, Jr.
Director



Virginia Department of
Juvenile Justice

Agenda



- Recap of 2016 Legislative Decisions
- Overview of progress to date
- Discussion of need for further legislative action on capital plan

Why Did We Seek Change in 2016?



Separate consultant reports to the previous and current administrations recommended replacing the outdated juvenile correctional centers (JCCs) with smaller, safer, and more cost-effective facilities. Findings included:

- JCCs are too big, too old, too distant, and too expensive.
- JCC programming and operational model is ineffective.
- No continuum of placements (one size fits all).
- The rate of success is low.
- Inconsistent reentry planning and services, and uneven local practices and treatment alternatives.
- Inadequate family engagement.

**CONCLUSION: VIRGINIA NEEDED TO TRANSFORM AND REPLACE
BEAUMONT AND BON AIR.**

More Reason for Change: Budget Cuts



- Reductions Taken in FY2013 and FY2014 (\$26 Million and 482 Positions)
- Reductions Taken in FY2015 and FY2016 (\$8.6 Million and 42 Positions)
- VJCCA Funding 2002 to Present: \$29.5 million to \$10.3 million.



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 JCC units to Community Treatment Model (CTM)

Improve educational and vocational programming

Improve family engagement

Enhance reentry planning and parole services

Replace

Expand the array of commitment placement alternatives by reinvesting correctional savings

Develop a statewide continuum of services

Build new facilities that are safer, closer, smaller in scale, and designed for treatment to replace current JCCs



2016 Authorization

- Authorization to maintain and reinvest savings into state continuum of treatment programs and alternative placements.
- Authorization to close Beaumont.
- Establishment of Task Force on JCCs
- Capital allocation to:
 - Build two new, smaller JCCs in Central Virginia and Hampton Roads to replace Bon Air JCC, including:
 - Funding for design and construction of a new, small, treatment-focused facility in Chesapeake
 - Planning money for same kind of facility in Central Virginia
 - 152 beds between two facilities

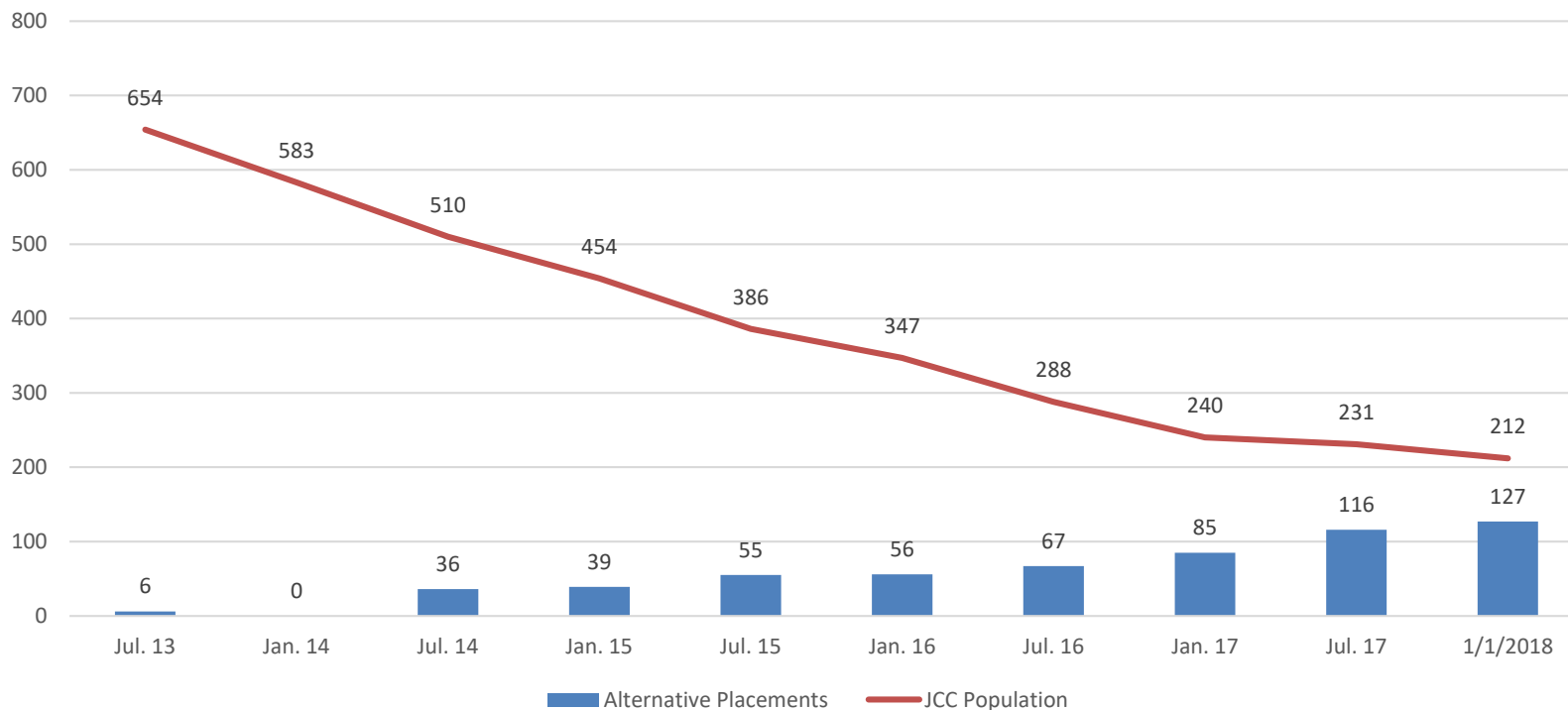
\$16.1 million in Capital Outlay funds for Bon Air JCC projects were returned to offset the cost of the new proposed facilities

Transformation Progress: Reduce



- Strengthened probation practices and procedures
- Reduced direct care lengths of stay
- Established alternative placements
 - 9 Community Placement Programs (CPPs) with 89 dedicated beds
 - 14 detention centers w/ detention re-entry programs
 - Regional Service Coordinators (RSCs) building a continuum of community-based services

Transformation Progress: Reduce



- The JCC population has decreased 68%.
- As of 1/1/18, over one-third of the direct care population was in an alternative placement.

Transformation Progress: Reform – Residential Services



- Community Treatment Model (CTM) at Bon Air JCC
- Family Engagement
 - Video visitation
 - Transportation
 - Revised visitation procedures
- Reentry Reform
- Student Government Association

Transformation Progress: Reform – Education



With no new funding we have improved education:

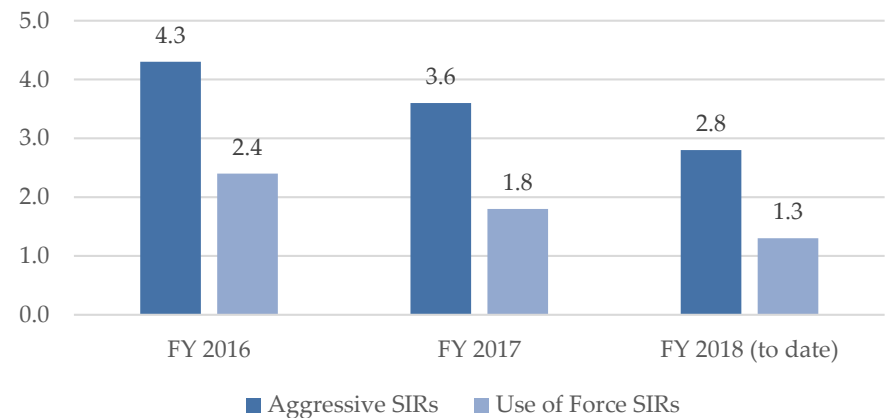
- More highly qualified teachers
- Higher rates of standard and advanced diplomas
 - 90% of eligible seniors graduated in 2016-17
- Improved SOL pass rates
- Special education compliance and performance improvements
- Post-Graduate Academy and more college classes
 - 22 students completed college courses in Fall 2017 (no courses offered in 2014; four courses offered in Fall 2017)
 - 60 credentials earned in 2016-17

Work to Date has Demonstrated Outcomes: Safety and Savings



- Workmen's Compensation - Costs Incurred
 - CY 15 = \$ 1,402,116
 - CY 16 = \$ 619,778
 - CY 17 = \$ 423,357
- CSU Vacancies
 - 8/31/14 = 91
 - 11/30/17 = 50
- Staff Grievances
 - CY 13 = 99
 - CY 16 = 36
 - CY 17 = 30

Rate of Serious Incident Reports Per Youth, FY 2016 - 2018



Transformation Progress: Replace

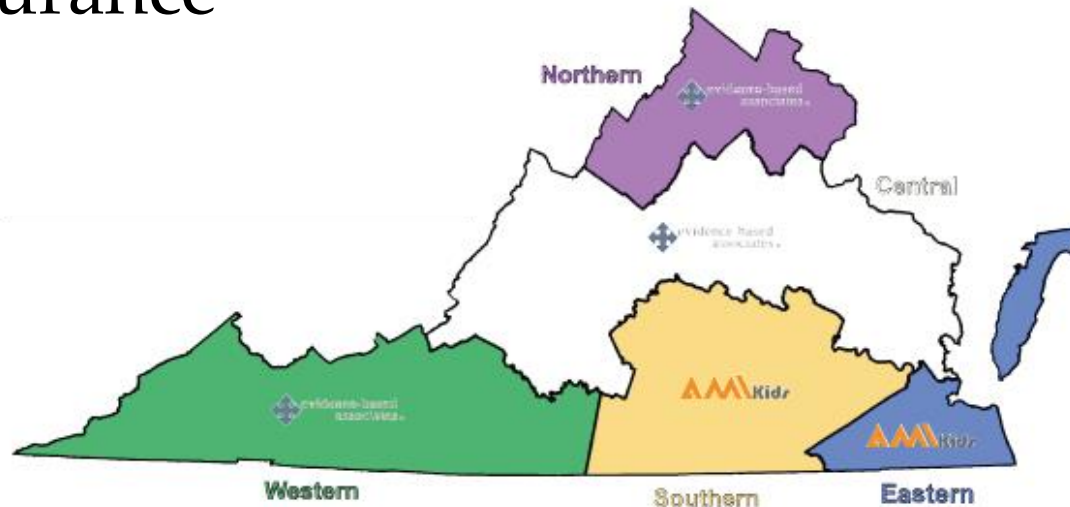


- Consolidation of JCCs by closing Beaumont in June 2017
- Alternative placement options
 - 9 CPPs with 89 dedicated beds
 - 13 detention re-entry programs
 - A continuum of community-based services
 - Services initiated January 1, 2017
 - 124 direct service providers, including 26 out-of-home options

Transformation Progress: Regional Service Coordinators



- New Service Delivery Model:
 - Service coordination / centralized referrals
 - Centralized billing and reporting
 - Performance measurement and quality assurance

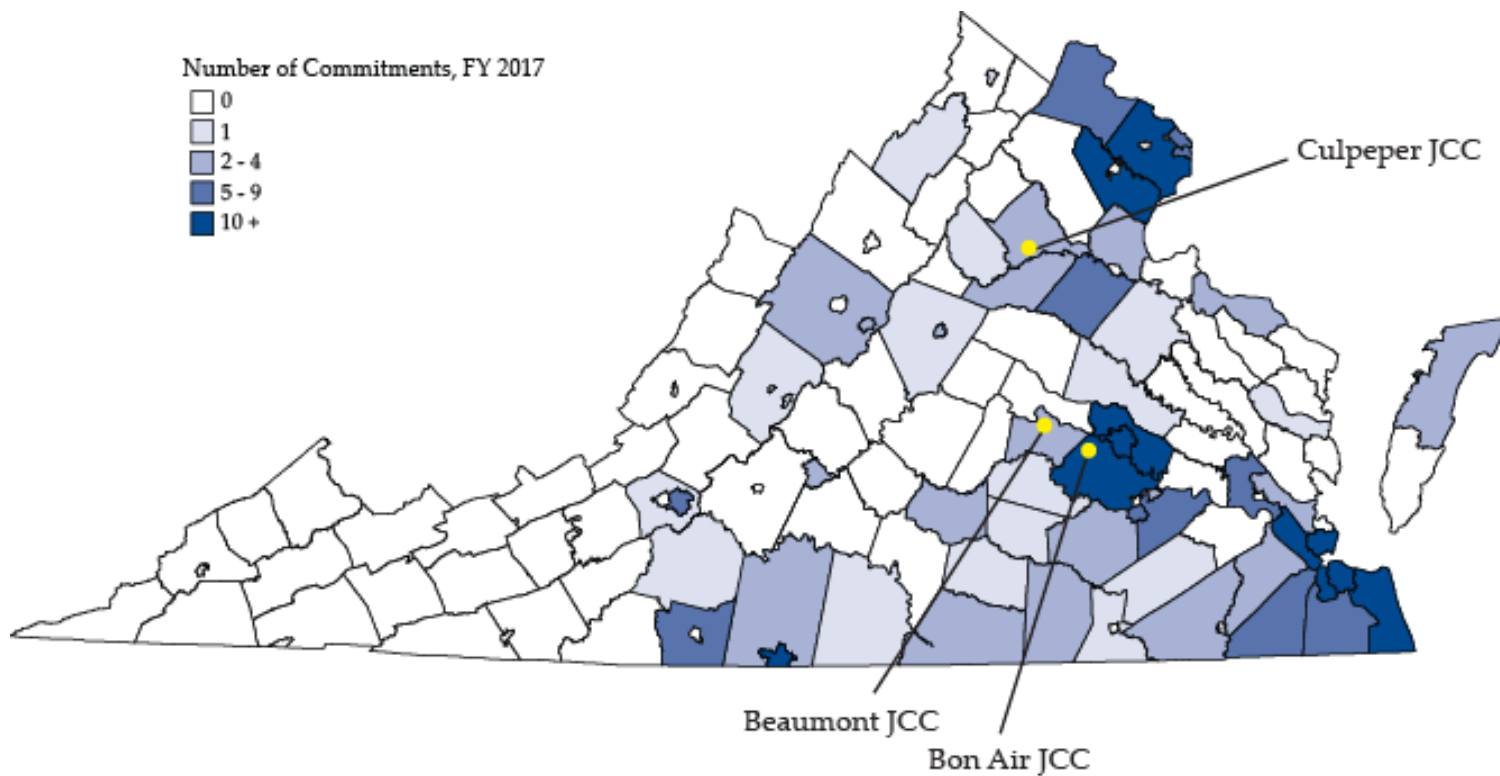


Statewide Service Expansion in 2017

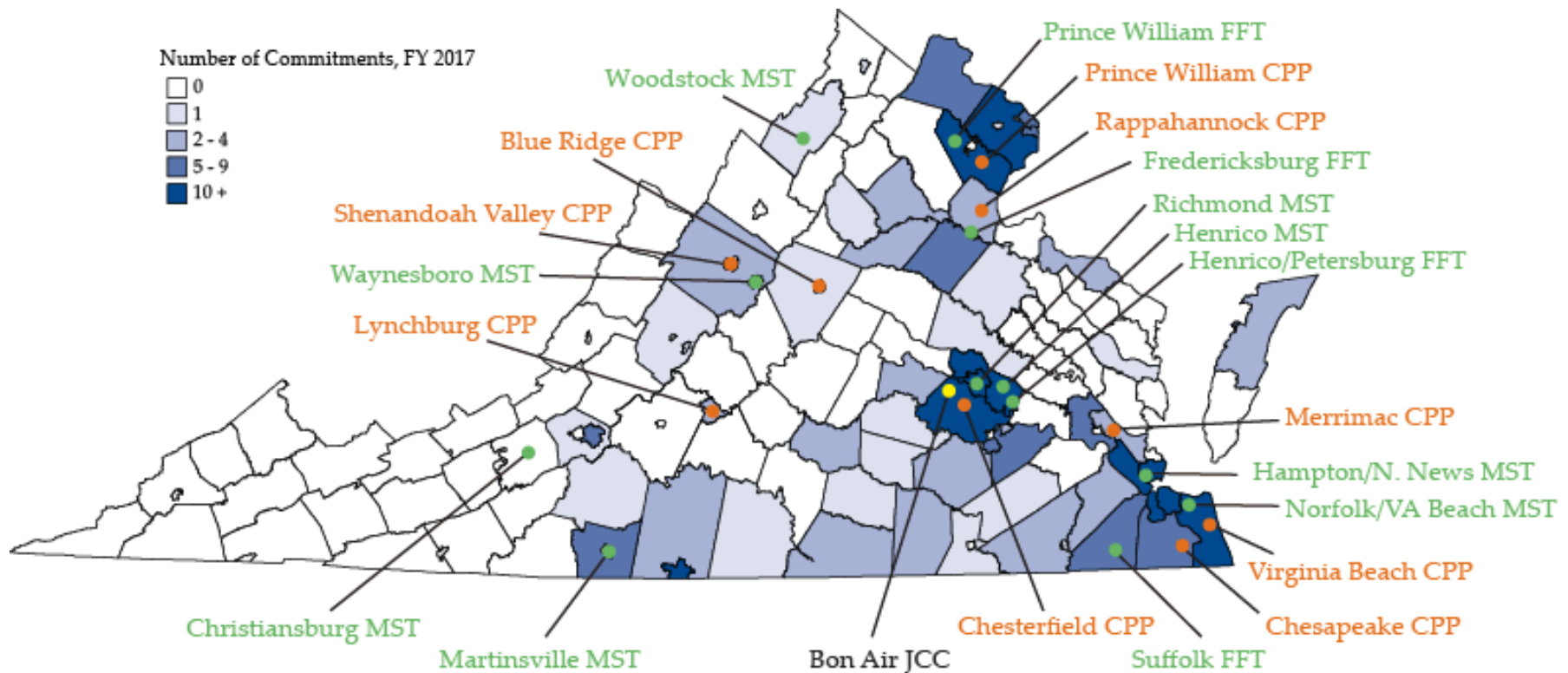


- 124 direct service providers have joined the RSC network.
- Almost 1,000 unduplicated youth have been referred for services.
- 4,838 monthly services and assessments provided.
- Highly rated, family-focused, evidence-based programs **only available in 2 jurisdictions** at beginning of year **are now serving > 100 jurisdictions.**

Direct Care Placement Options on January 1, 2014



Current Direct Care Placement Options

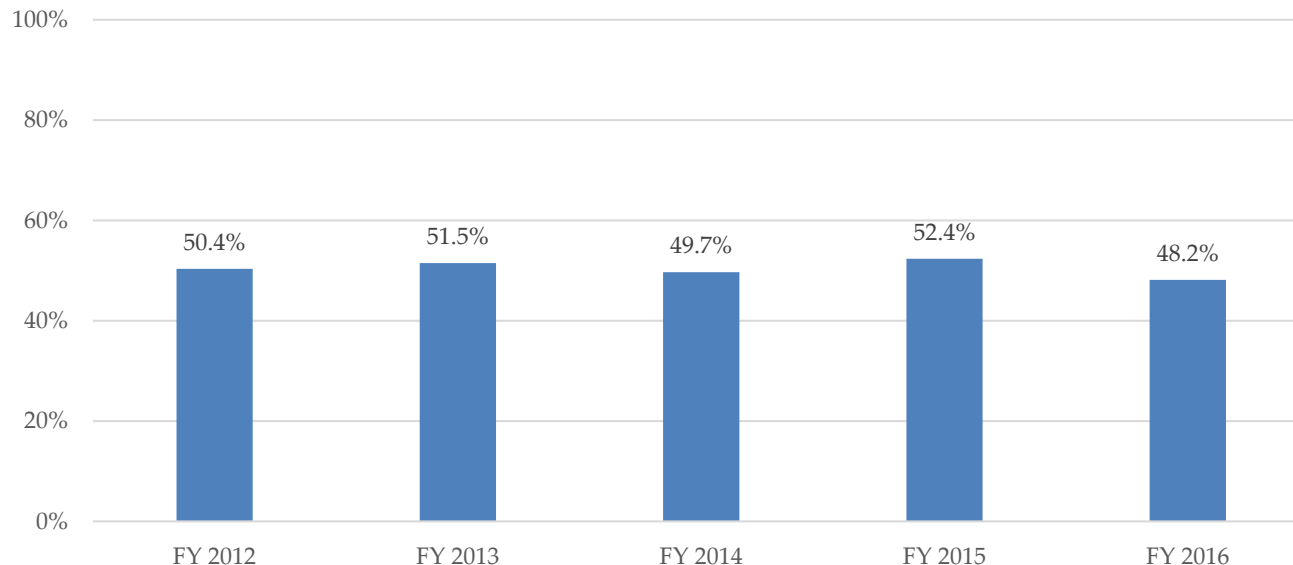




Recidivism

Too early in Transformation for recidivism outcomes, but FY 2016 re-arrest rates decreased slightly.

12-Month Re-arrest Rates for Direct Care Releases



Comparison to VADOC



- VADOC calculates recidivism differently than DJJ (Reincarceration = return to state facility)
- Using same methodology:
 - DJJ direct care releases, like VADOC's, have single digit 12-month reincarceration rates (VADOC: 4.7%; DJJ: 8.1%)
 - DJJ and VADOC 36-month reincarceration rates are similar (VADOC: 22.4%; DJJ: 26.3%)
- Average age of release
 - VADOC: 37.5 years old; DJJ: 17.8 years old

Capital Plan Still Requires Action



- Chesapeake City Council, after two years of support, declined to transfer land.
- Task Force recommended additional new facility for Central Virginia on the existing campus at Bon Air.

Options for Hampton Roads Facility



1. Isle of Wight County (County Owned)

- Good location to serve region
- 60 bed state facility with no local detention center.
- Cost increase over original Chesapeake pool planning of between \$900K and \$2.7 M depending on final agreements.

2. Saint Brides Chesapeake City (DOC Owned)

- Faster to complete and good location
- 60 bed state facility with no local detention center
- On DOC campus (but sight and sound separation)
- Projected cost increase of \$1.4M over pool planning target



Our Proposal

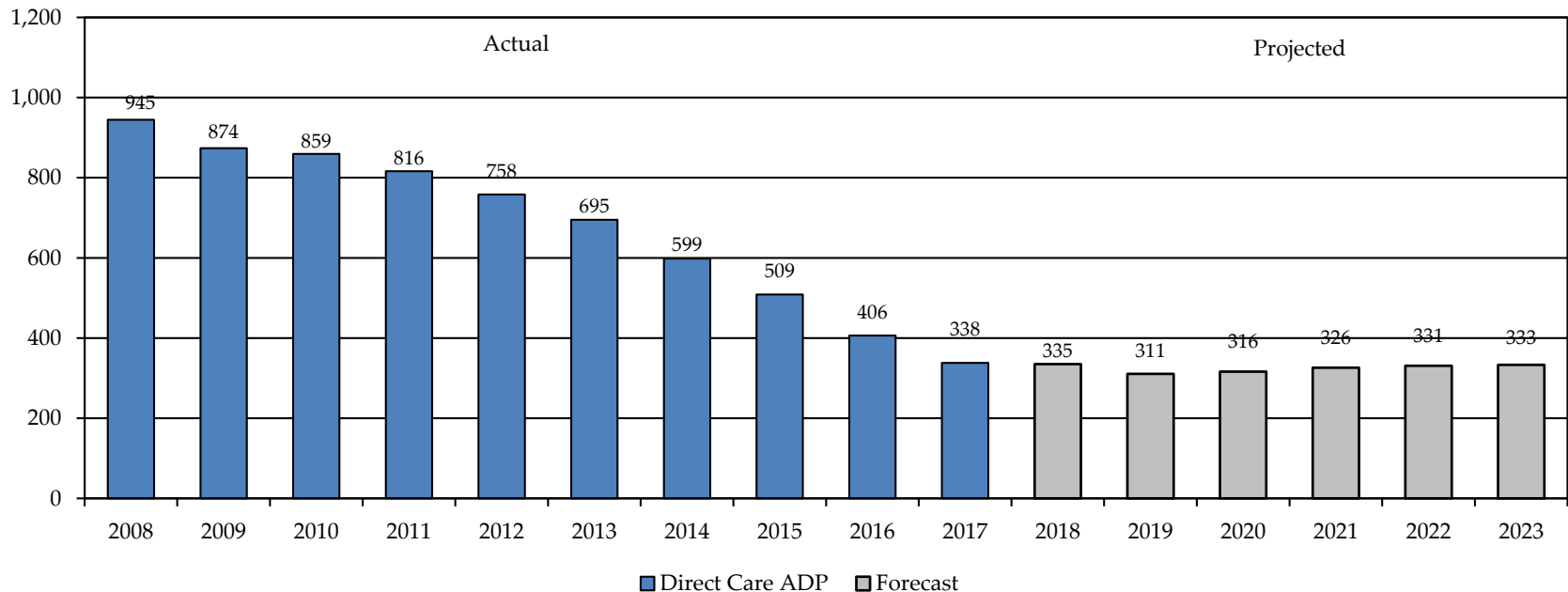
- Maintain the current Operational Budget.
- Authorize and fund the construction of a 60-bed facility in Isle of Wight County with funds previously allocated to building in Chesapeake.
- Authorize design and future construction of a 96-bed facility on Bon Air campus.

The Proposal is Realistic



- Projected completion of construction of new facility in Hampton Roads: early 2020.
- Projected Average Daily Population by 2020: Approximately 300-330 (total committed population).
- Continuum: At least 180 community-based alternatives (secure and non-secure) will be in place by then.
- Detention Utilization: 89 CPP beds are in place, with more alternatives in development.

Direct Care Population Forecast



- The actual average daily population (ADP) in the first half of FY 2018 is one juvenile lower than projected.

The Proposal will Improve Public Safety



- **Proximity:** Almost three times more youth will be within an hour's drive of their homes than in current JCCs leading to better reentry and family engagement.
- **Safer Facilities:** New facilities will be designed for rehabilitation and education with smaller population; smaller units; modern technology for both education and safety; and dedicated treatment space.
- **Safer Communities:** DJJ can develop more services, supports, and alternatives for communities across the Commonwealth.
- **More Successful Youth:** The new continuum of services, including the new facilities, will drive down DJJ's high recidivism rates, protecting the public and reducing future victimization.

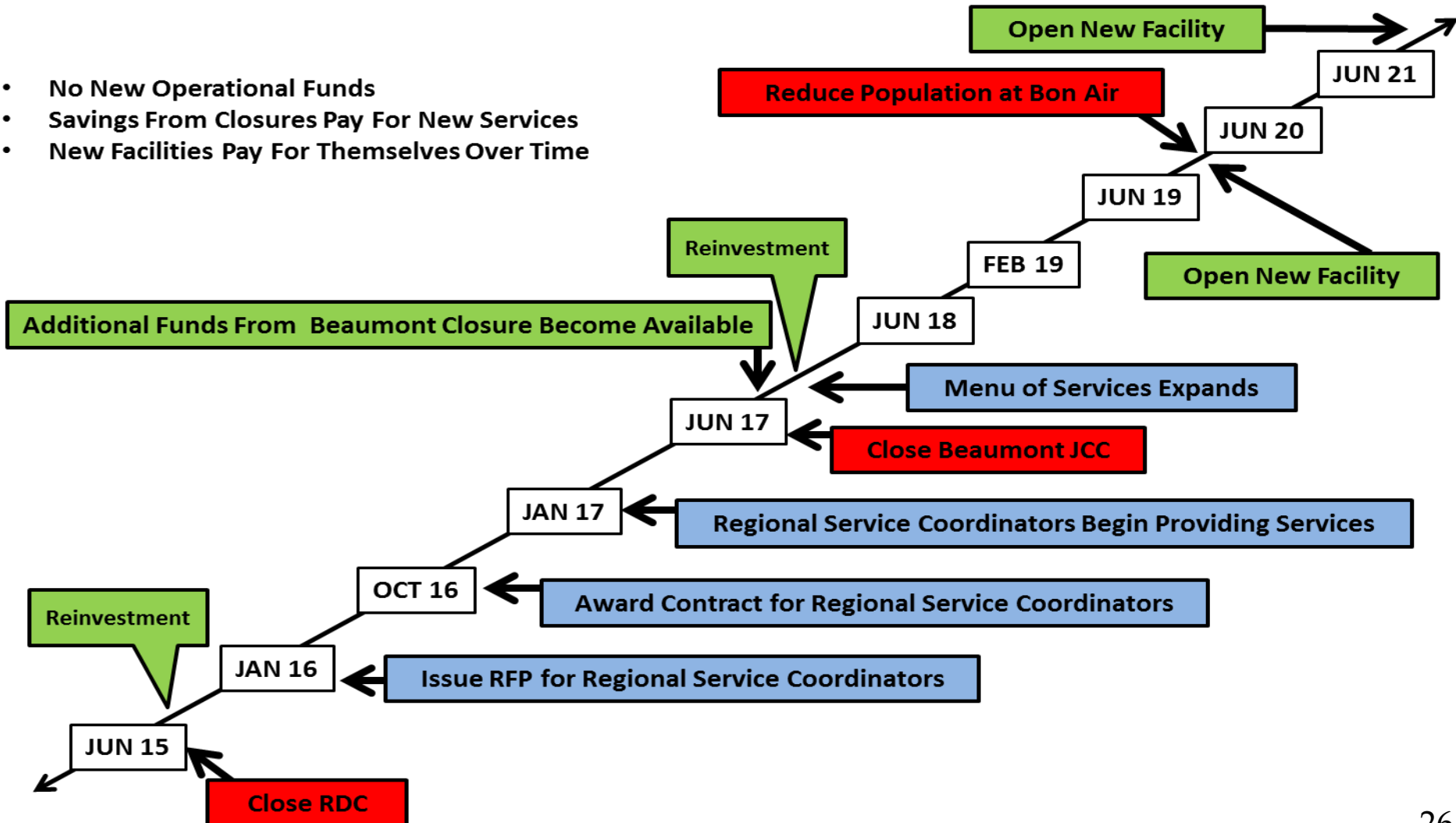


Failing to Act has Costs

- Continued maintenance and repair of aging infrastructure.
- Postponing inevitable and costlier replacement.
- Ongoing challenges for youth, families, and communities to which they return
- Operating one large facility reduces community reinvestment.

Transformation Timeline

- No New Operational Funds
- Savings From Closures Pay For New Services
- New Facilities Pay For Themselves Over Time





Conclusion

- DJJ Transformation has made great progress.
 - Institutional reform and statewide service expansion with no new operating funds
 - Better outcomes/opportunities for staff, youth, taxpayers, and communities
- Supporting revised capital request will continue progress, and be good for public safety, good for youth, good for taxpayers.