## Update on DJJ Transformation and Continuum of Services

Presentation to the:

8<sup>th</sup> Annual Commonwealth of Virginia CSA Conference "Resiliency: Achieving The Possible" Hotel Roanoke and Conference Center

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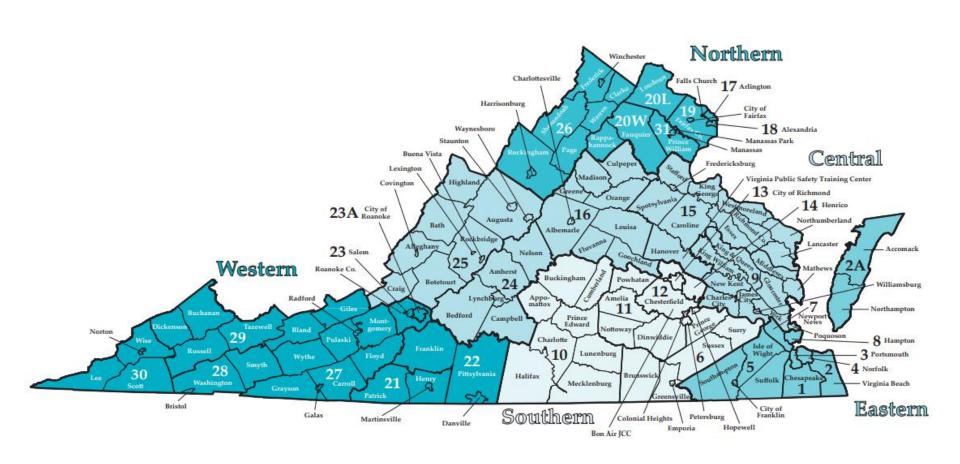
Virginia Department of Juvenile Justice



- About DJJ
- Strategic Framework / Core Principles
- Transformation and Practice Improvements
  - Implementation of 8 Evidence-Based Principles
  - Right Youth Right Intervention Right Time
  - Introduction of Standardized Dispositional Matrix
  - Build Out of Continuum of Services



## **About DJJ: Regional Map**





# DJJ Strategic Framework: Core Principles

- SAFETY
- CONNECTION
- PURPOSE
- FAIRNESS



### **DJJ Transformation**

- REDUCE
- REFORM
- REPLACE
- REINVEST
- SUSTAIN



### 8 Evidence-Based Principles

- 1) RISK SCREENING
- 2) Enhance Intrinsic Motivation
- 3) Target Interventions

  Risk Need Responsivity

  Dosage Treatment
- 4) Skill Train / Use CBI
- 5) Positive Reinforcement
- 6) Support in Natural Communities
- 7) Measure Relevant Process Practices
- 8) Provide Measurement Feedback



### RNR Model

**RISK** 

**WHO** 

Target Moderate to High Risk Offenders **NEED** 

**WHAT** 

Target
criminogenic
needs to reduce
risk for recidivism

**RESPONSIVITY** 

HOW

Use of CBI
Approaches
Match
mode/style of
service to client

**FIDELITY** 

**HOW WELL** 

Deliver probation intervention and treatment services as designed

Right Youth - Right Intervention - Right Time



### **Structured Decision Making Tools**

- Adverse Childhood Experiences (ACE)
- Detention Assessment Instrument (DAI)
- Youth Assessment & Screening Instrument (YASI)
  - Level and Length of Supervision
  - Case Plan Development
  - Targeting of Internal and Contracted Interventions
  - Direct Care Length of Stay
- (Coming Soon) Standardized Dispositional Matrix



### **HOW DOES THE SDM FUNCTION?**

- Will allow DJJ to evaluate our dispositional recommendation practices.
- Will allow DJJ to compare dispositional trends over time, across Court Service Units, and localities.
- Will provide an opportunity for collaboration
- Will not replace the assessment expertise and creativity of Probation Officers.



In 2016, NCCD conducted an analysis of youth with similar legal histories and petitioned offenses who were commitment eligible juveniles to assess the fairness, equity and reliability our disposition recommendations.

#### Three key insights:

- 1. Inconsistent dispositions based on geography
- 2. Inconsistent dispositions based on race
- 3. Inconsistent dispositions by Court Service Units



### WHO BUILT THE SDM TOOL?

The process utilized the combined expertise of a wide range of

Court stakeholders and DJJ staff.

- Judges,
- \* Attorneys,
- **❖** Probation Officers,
- DJJ Leaders

Risk Level (based on YASI)	Offense Category*						
	Class 1 Misdemeanor Non-Person	Class 1 Misdemeanor Person	Felony Non-Person	Felony Person	Violent Juvenile Felony		
Low	Level 1 or 2	Level 1 or 2	Level 1 or 2	Level 2 or 3	Level 3 or 4		
Moderate	Level 1 or 2	Level 1, 2 or 3	Level 2 or 3	Level 3, 4 or 5	Level 3, 4 or 5		
High	Level 2 or 3	Level 2 or 3	Level 3 or 4	Level 3, 4 or 5	Level 3, 4 or 5		

- The NCCD 2016 disposition data analysis disposition profiles were used to facilitate the SDM Tool Development workgroups.
- The work group developed the SDM tool through a consensusbuilding, data-informed process.



### **Exclusion Case Types and SDM Case Types**

Class I Misdemeanors
Felonies

**CHINS** 

**Sex Offenses** 

**Technical Violations** 

Summoned
Traffic Offenses

Gaming, Fishing, Wildlife Offenses

Violations of Local Ordinances'

**Circuit Court** 

SDM PROCESS

**Current Court Process** 



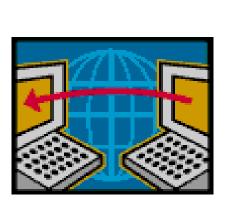
#### **Least Restrictive To Most Restrictive Level of Supervision**

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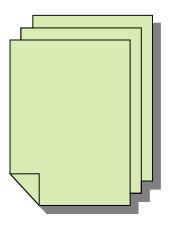
### WHO IS RESPONSIBLE











**PROBATION OFFICERS** 



## DJJ's Growing Continuum of Programs and Services

#### Continuum of Contracted Services and Interventions

(Funded by VJCCCA, CSA, and Medicaid and Contracted through DJJ's Regional Service Coordination Model)

Outpatient Mental Health or Substance Abuse Assessments & Services

Psychoeducational

oyment

Intensive, Home-Based Family Therapy (e.g. MST & FFT) Inpatient Mental Health or Substance Abuse Services / Residential Treatment Center

Monitoring Services (e.g. Electronic Monitoring)



## DJJ's Growing Continuum of Programs and Services

- VJCCCA
  - Diversion / Early Intervention
  - Pre-Adjud./Pre-Dispo (Detention Alternatives)
- CSU Delivered Interventions
  - Diversion plans executed by Intake
  - CBIs delivered by CSUs
- MOAs: Government to Government
  - CSB Positions at 20 CSUs
  - CPPs and Detention Re-Entry
- Regional Service Coordination Service Delivery Model
  - Array of contracted services for juvenile on probation/parole
  - Residential for age 18+ and in direct care status/direct care step-down



- In January 2017, DJJ launched a new service delivery model to process referrals for portions of a statewide continuum of services.
- No longer contract directly with providers
- Hired two companies to serve as regional service coordinators.
- AMI: Eastern and Southern Regions

• EBA: Northern, Central, Western Regions

Eastern



#### Goals:

- Eliminate "Justice By Geography" / Ensure Basic Service-Provision
- Expand the Provider Network
- Increase Providers Across a Continuum of Evidence (innovative → emerging → promising → effective → exemplary)
- Introduce Additional Family-Based Models
- Transfer Service Coordination Responsibilities from DJJ Staff
- Improve Efficiency of Processes
- Increase Capacity to Monitor Compliance and Quality



### Regional Service Coordination Role Includes:

- Contracts with a Network of Direct Service Providers
- Service Coordination and Centralized Referral Processing
- Centralized Billing and Reporting
- Service Gap Analysis
- Implementation of New Services
- Implementation of Evidence-Based Models
- Developing and Tracking Performance Measures
- Conducting Quality Assurance Monitoring of Providers



- Community-Based Services Primarily for Youth on Probation / Parole
  - Assessments
  - Case Management
  - Monitoring Services
  - Non-Clinical Services
  - Clinical Services (across a Spectrum of Evidence)
- Residential Services for Committed Youth and Paroled Youth Age 18+
  - Residential Treatment Centers (9) and Group Homes (8)
  - Independent Living



### **RSC Service Delivery Model Update**

- Direct Service Providers (DSPs): More than 150 DSPs are part of the RSC provider network
- Referrals Processed: FY 2018, 2,333 referral packets processed
- MST and FFT Available in 85%) jurisdictions
- TF-CBT: Available in at least 72% jurisdictions
- HFW: Available in at least 88% jurisdictions
- Placement Options: At least 8 group homes and 9 residential treatment centers available as contracted direct care placements

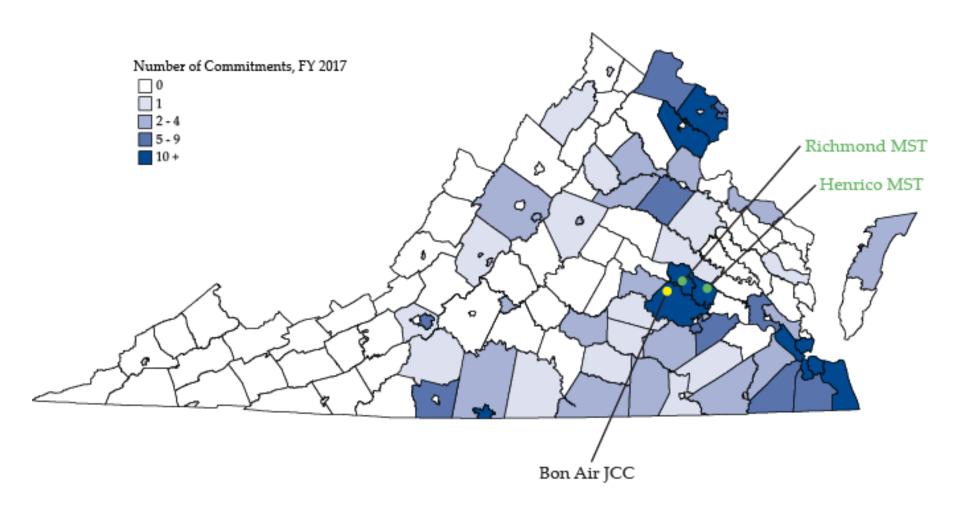
## Introduction of Evidence-Based Models of Family Intervention: MST & FFT



- Prior to October 1, 2017:
  - -Multi-Systemic Therapy (MST) was available in only two localities
  - -Functional Family Therapy (FFT) was not available in Virginia.
- During the last quarter of CY'17, DJJ launched 6 MST teams & 4 FFT teams.
  - RFPs written and published to select providers
  - 12 teams statewide (10 DJJ launched teams and two existing teams)
  - DJJ provided start-up funds for training and licensing
  - reach 112 of 133 localities statewide (90 min catchment area)
  - in addition to DJJ's launch, Horizon CSB relaunched a MST team (#13)
  - combined daily capacity to serve nearly 300 families.
  - Variable utilization across teams; statewide utilization 74%
  - Protocols established for access by non-DJJ funders

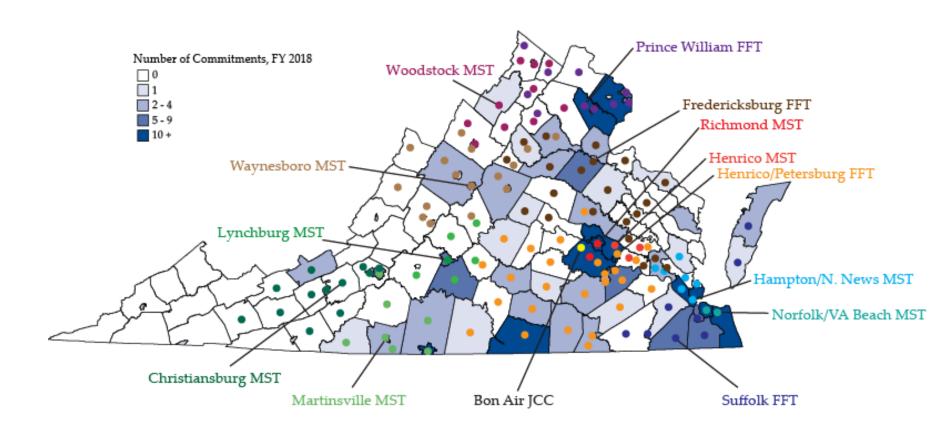


### Map of MST and FFT Locations, FY 2017



### Map of MST and FFT Locations, FY 2018

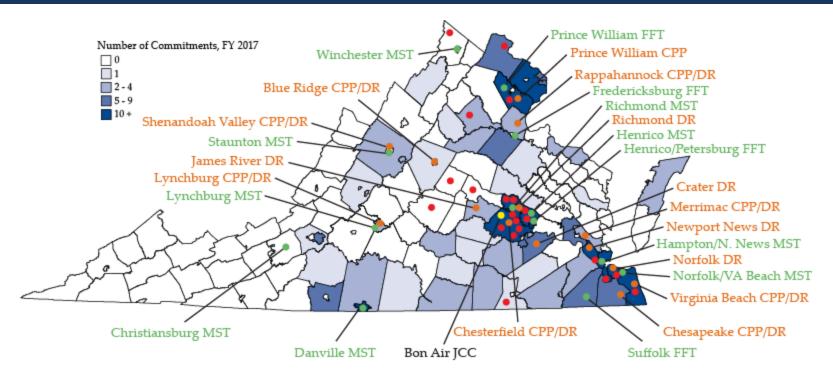




<sup>\*</sup> Other EBPs available through the RSC Model include: HFW and TFCBT



# Direct Care Alternative Placement Options



ChildHelp - Culpeper Community Solutions - VA Beach Elk Hill Farm - Goochland Elk Hill (Amani House) - Chesterfield Elk Hill (Spring Garden) - Fluvanna Hallmark Youth Care - Henrico Harbor Point Beh. Health - Portsmouth Intercept (Baby Steps) - Chesterfield Intercept (Fresh Start) - Chesterfield Intercept Youth Services - Richmond Jackson Feild Beh. Health - Greensville Life Services Inc./New Haven - Henrico Newport News Beh. Health - N. News North Spring Beh. Health - Loudoun Paramount Youth Services - Norfolk St. Joseph's Villa (Crisis Center) - Henrico Timber Ridge School (Level C) - Frederick UMFS (Level C) - Richmond VA Home for Boys & Girls (DSS lic.) - Henrico VA Keys School (DSS/DOE lic.) - Buckingham Youth for Tomorrow - Prince William

### **Next Steps**



- Continued Focused on Evidence-Based Principles
- Service Continuum
  - Service Gap Analysis / Potential Expansion
  - Identify Additional EB Models for Adoption (Data-Driven / Strategic Selection)
  - Focus on QI / QA and Fidelity Monitoring
- Additional Opportunities for Cross-Agency Partnerships and Collaboration
  - FFPSA
  - DBHDS Redesign

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