



Juvenile Justice Transformation Virginia First Cities Presentation October 30, 2015

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The Virginia Department of Juvenile Justice



DJJ operates, supervises or audits

- 34 Court Service Units (CSUs) -including 2 that are locally operated
- 2 Juvenile Correctional Centers (JCCs)
 - Beaumont JCC (Powhatan County)
 - Bon Air JCC (Chesterfield County)
- 18 Group Homes
- 24 Locally Operated Juvenile Detention Centers



Total Number of Juveniles Under Supervision

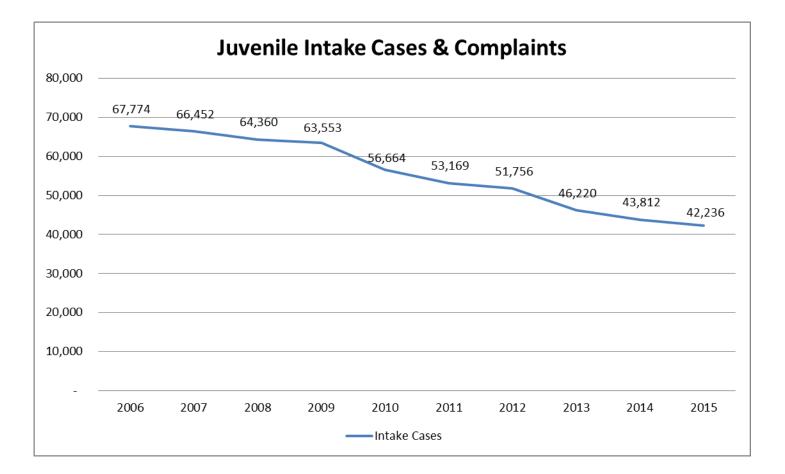


- There were an average of 5,871 juveniles per day under DJJ supervision (probation, direct care, or parole) in FY 2014.
 - -4,988 on active probation supervision
 - 599 in direct care
 - 284 on active parole supervision



Intake cases have decreased by 37.7% (25,538 cases) from FY 2006 to FY 2015.

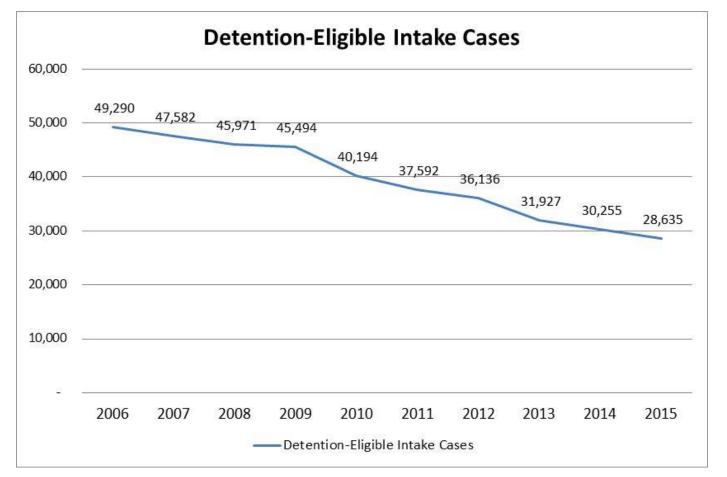






Felony and Class 1 misdemeanor intakes decreased 41.9% between FY 2006 and FY 2015.

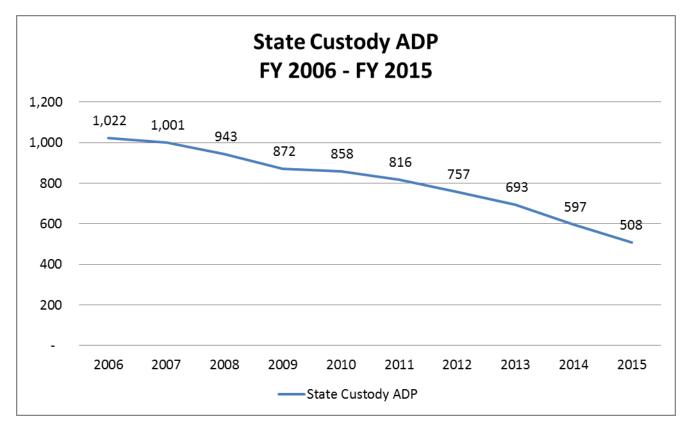






The State Custody Population has decreased by 514 residents since FY 2006 (50.3%).

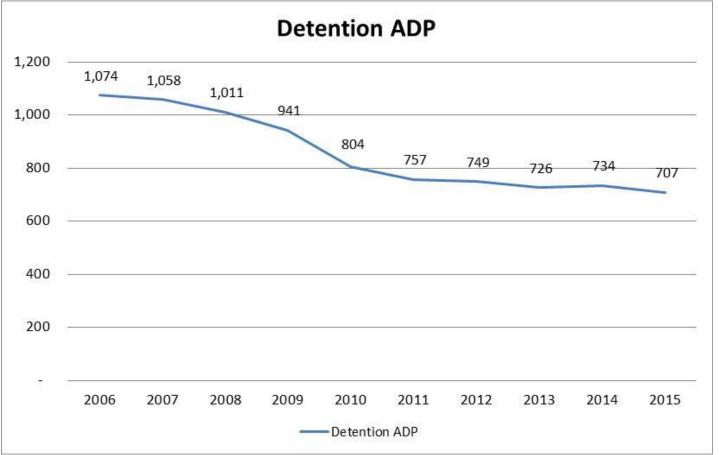






Local detention population decreased by 34.2% (50 juveniles) between FY 2006 and FY 2015.



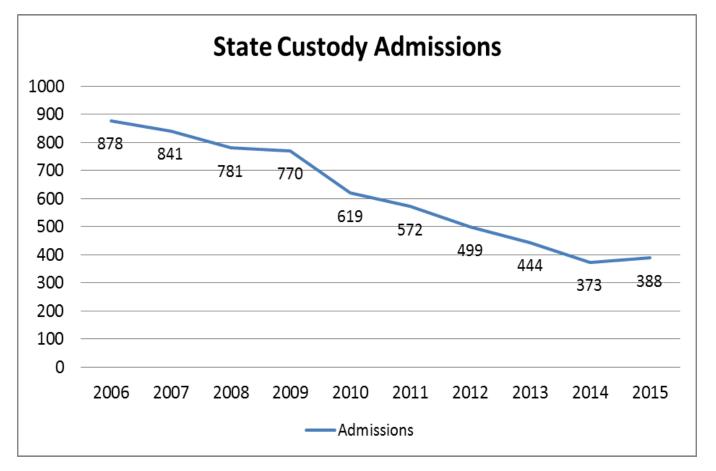


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Admissions to State Custody have decreased by 490 juveniles since FY 2006 (55.8%).







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.



Significant Trauma Exposure



Out of all FY 2014 Admissions:

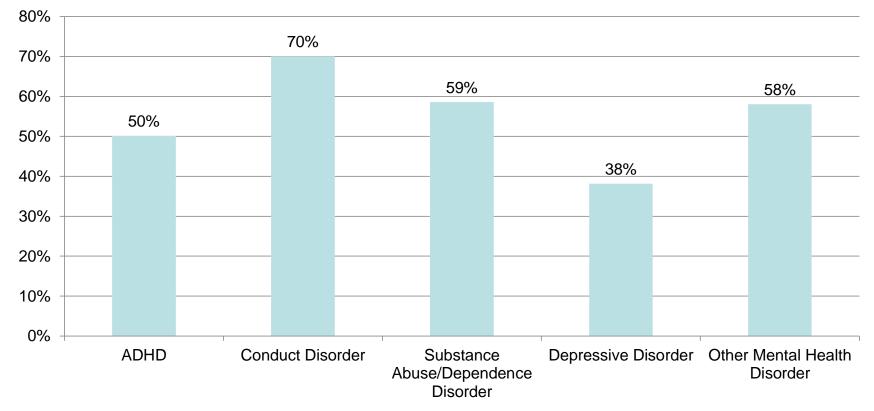
- 59% physical assault/abuse (24% by family member)
- 58% parent criminal activity
- 46% parent incarceration
- 39% parent substance abuse
- 20% parent death
- 16% family domestic violence
- 14% sexual assault/abuse (7% by family member)
- 13% self injurious behavior (SIB) or suicidal
 - 89% reported at least one of the above.
 - 50% reported three or more of the above.



Prevalence of Mental Health Disorders



Direct Care Admissions with Significant Symptoms of Mental Health Disorders, FY 2014



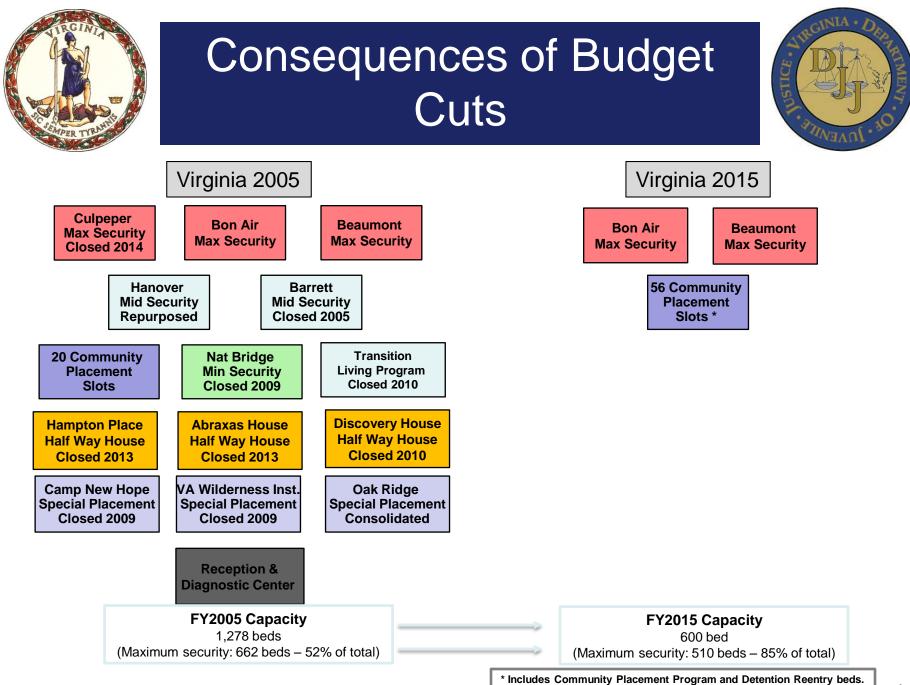


Pervasive Educational Challenges



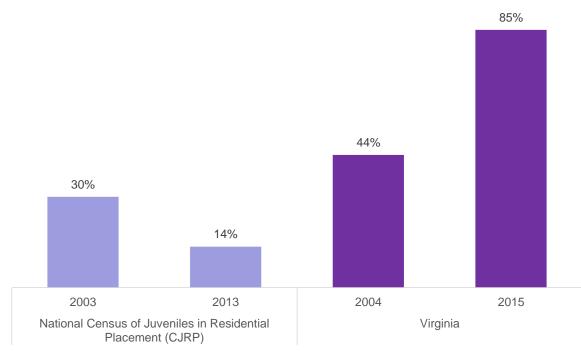
Educational Statistics on FY 2014 Admissions:

- Average grade last completed was 8th grade (average age at admission was 16)
- Average IQ was 87 (General population IQ is 100)
- 37% designated as special education
- 44% had moderate or severe school attendance problems in the community





Nationally, use of Large Facilities is Trending Downward – but has Gone up in Virginia.



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 Facilities







Community Placement Program Locales and Slots



- Virginia Beach 20
- Chesapeake 10
- Merrimac 5 (Williamsburg)
- Rappahanock 8 (Fredericksburg)
- Blue Ridge 8 (Charlottesville)
- Shenandoah 8 (Staunton)

5 floating beds.



Approximate Cost Per Direct Care Bed (FY 2015)



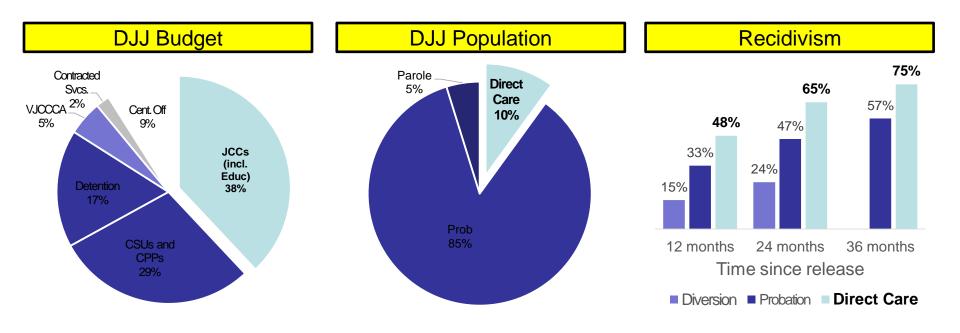
	Approximate Expenditures	ADP	Approximate Per Capita
JCC Operations	\$69,156,790	467	\$148,214
CPPs	\$3,159,483	36	\$87,650



Disproportionate Expenditures & Results



38% of our General Fund Budget is used to confine approximately 10% of the children we serve, of whom 75% are rearrested within 3 years of release from our facilities.





Two Administrations' Assessments & Findings



- Facilities are too big, too old, and too distant
- No continuum (One size fits all)
- High cost
- Low success for youth in system
- Local variation in practices and services
- Inconsistent reentry planning and services
- Lack of family engagement



DJJ Transformation Plan



Reduce

Right-size the JCC population

Divert low and moderate risk youth away from the JCCs and use data and evidence to modify LOS policy.

Enhance re-entry planning and parole services to reduce recidivism

Boost aid & technical assistance support to localities

Reform

Change the JCC operational model

Transition JCC units to a teambased, treatment model

Implement short-term changes to improve educational/ vocational programming; and increase family contact

Develop a DJJ-wide family engagement framework

Replace

Move to a new platform for providing secure custody and treatment for the highest-risk youth

Expand the array of JCC alternatives for youth committed to DJJ by reinvesting correctional savings.

Build new facilities that are safer, closer to home, smaller in scale, more financially viable, and more compatible with the new therapeutic model



REINVESTMENT (4th R)



- Funded through correctional savings
- Expansion of Community Placement Program
- Regional equity and access to continuum of evidence-based services
- Partner with localities and private providers
- Reform VJCCA and 294 funding approaches.



Appropriations Request



Preserve current operational budget

 To reinvest and rebuild continuum of evidence-based programs across Commonwealth.

New capital funding

 To build smaller, cost-effective, geographically appropriate facilities