

Juvenile Justice Workgroup

Friday, March 12, 2021

1:00 PM - 3:00 PM

Zoom Webinar

Workgroup Purpose: This workgroup focused on supporting the implementation of Senate Bill (SB) 823 Juvenile Justice Realignment, with CCJBH staff securing a contractor to develop a Juvenile Justice Evidence-Based Practices and Programs Compendium and Toolkit in which the workgroup participants helped to inform and provide their expertise.

Council Member Advisors:

Mack Jenkins, *Chief Probation Officer (Retired), San Diego County Probation, Council member Council on Criminal Justice and Behavioral Health, (CCJBH)*

Danitza Pantoja, *Psy.D, School Psychologist, Antelope Valley Union High School, Council member, Council on Criminal Justice and Behavioral Health, (CCJBH)*

Panelists:

Stephanie Welch, *MSW, Deputy Secretary of Behavioral Health, California Health and Human Services Agency*

Heather Bowlds, *Psy.D, Director, Division of Juvenile Justice, California Department of Corrections and Rehabilitation*

John Prince, *Deputy Director, County Facilities Construction Division, Board of State and Community Corrections (BSCC)*

Beth Gong, *Field Representative, Facilities Standards and Operations Division, BSCC*

Brian Richart, *El Dorado County Chief Probation Officer, Chief Probation Officers of California (CPOC)*

CCJBH Staff:

Brenda Grealish, *Executive Officer, Council on Criminal Justice and Behavioral Health, (CCJBH)*

I. Welcome & Introductions

Brenda Grealish welcomed all participants to the meeting and reviewed the agenda.

II. California Health and Human Service Agency's Office of Youth and Community Restoration (OYCR):

Stephanie Welch, *MSW, Deputy Secretary of Behavioral Health, California Health and Human Services Agency*

Stephanie Welch expressed that the Council is a critical partner in helping launch, and she provided background on, the OYCR. Many changes took place last fall, especially with COVID. One of the most significant was SB 823, which was approved by the Legislature and signed by the Governor. The bill repealed provisions that would have created the Department of Youth and Community Restoration and put forth a policy change that shifted the responsibilities of the Division of Juvenile Justice (DJJ) to community supervision. Rather than a department, there will now be an office within the California Health and Human Service Agency that is to be established by June 1, 2021. This office, the OYCR, will focus on researching the best practices of rehabilitation and supporting the delivery of trauma informed and developmentally appropriate services for youth in the juvenile justice system. The advisory body for OYCR will consist of experts to give advice on the specific population and help counties be successful in serving them. The Child Welfare Council established a committee to provide recommendations to the OYCR in December 2020 and grew their vision with stakeholder input. The OYCR committee will advise on policies, programs, and approaches to improve youth outcomes, reduce youth detention, and reduce recidivism. Agency staff is supporting the committee in the interim, but eventually it will be run by the OYCR staff when the office opens later this year.

The statute outlines the responsibility of the OYCR to:

1. Promote trauma responsive, culturally informed service.
2. Identify and disseminate best practices and assess efficacy of programs.
3. Review local Juvenile Justice Realignment Grants (funds that go to the county to serve the realigned population) to ensure the plans contain all necessary elements and if not offer Technical Assistance and support to make all improvements.
4. Develop policy recommendations to improve outcomes and integrate programs and services to support delinquent youth.
5. Establish and operate Ombudsperson roles and functions. They will be receiving, reviewing, referring and potentially resolving any issues or concerns that come up, in collaboration with our local partners.

A Budget Change Proposal was submitted to request resources for staff and contract services to fulfill the duties and responsibilities outlined in the statute, and contract funds to procure subject matter expertise. The OYCR will consist of Executive Leadership; Legal Counsel; a County Coordination Unit (staff who will get to know various different counties, review plans and listen to technical assistance needs); a Policy, Research and Operations Unit (staff who will track data trends with the Office of Data Innovation and execute plans and reports for submission to the Legislature); and Administrative Support.

The primary focus of the OYCR will be ensuring the success of the realignment of DJJ. We care about the kids and want to make sure they get the services they need locally

so they don't graduate further into the justice system. We also want to support our county implementation partners and make sure we have the proper capacity to do so.

III. Division of Juvenile Justice, California Department of Corrections and Rehabilitation:

Heather Bowlds, Psy.D, Director, Division of Juvenile Justice, California Department of Corrections and Rehabilitation

Dr. Heather Bowlds provided updates from DJJ. She stated that SB 823 aligns youth back to the counties, which will cease the commitment of youth to DJJ on July 1, 2021, and lead to the closure of the DJJ facilities on June 30, 2023. DJJ is focused on downsizing operations and working with county partners and judicial counsel to determine realignment for the youth who cannot discharge prior to June 30, 2023. The focus will be continuing care for the youth until the last possible day and working with staff to prepare for the closure.

As of March 12, 2021, the total DJJ population is 695, with intake packets beginning to decrease. There are 666 males, 517 are in core units, 35 are in mental health units, 70 are in Sex and Behavior Treatment Program units, and 44 are in Pinegrove Camp. There are also 29 girls, 12 are in core units and 17 are in mental health units. It has been a challenge to project the population because of how COVID has effected courts. DJJ is paying close attention to indeterminate sentencing, where the youth will have their first chance to go in front of parole board to return home dependent on their treatment goals being met and progress of treatment and programing. A plan must be made for youth whose indeterminate sentencing date is after June 30, 2023, but who won't be released upon DJJ closing, and how the county will be able to accommodate these individuals.

Q&A with Councilmember Advisors:

Q: Chief Mack Jenkins asked to whom the OYCR is to advise on policies and programs. Who was that advising court?

A: Ms. Welch stated the entity is not stated in the statue, but they report annually to the Legislature and are part of the Administration. They will also be working directly with the counties as they are the implementers of the work, and will provide technical assistance to the counties specific to their realignment plans. All of the work that happens at DJJ, especially around vocational training, will need to be transferred to a local level since these kids weren't being served at a local level before. The OYCR will be under the leadership of an executive, hopefully somebody who is knowledgeable in this area and can lead the office in an effective way.

Q: Chief Jenkins asked, "Can you provide the Council with an offense breakdown of the 695 youth in DJJ in terms of their committing offenses or orders? Where they score in terms of the risk and need assessment used by DJJ and if there is data on the criminogenic or delinquent needs? If you have the ability to extract the need domains from the 695 youth, it can inform and influence the decisions that need to

be made to ensure appropriate level of services are available and given at the county level, or that gaps are identified.”

A: Dr. Bowlds said she can provide the offense breakdown. They are working with CPOC to streamline data requests and looking at admission data to inform discussions of possible gaps. A tool called the California Youth Assessment Screening Inventory is a risk and needs assessment that includes static and dynamic data on initial assessments to determine possible static risk or protective factors. It is difficult to pull information from the current data system for big groups as it is generally used for individual inquiries. The level of care for the core population is separated to low risk/low need or high risk/high need. It is important to share information on the population that cannot discharge from DJJ on an individual basis for the continuum of care. DJJ is working with CPOC to provide as much information as possible on their population and what the counties need.

***** PUBLIC COMMENT*****

Q: “Hello and thank you for allowing me to speak. I just have a question. I know I am a little late on joining these workgroups, but I was just wondering... I know a lot of the juvenile halls are closed already (I work for an agency that use to take probation) We really haven’t seen as great of a number of these kids come to us as we were, so where are these kids going? And where are they getting services to go back into the community? And what happens to the kids? I know probation and the consequences it can give are kind of limited, so what’s happening with the kids right now? I had a son who kept going in and out of juvenile hall and I felt there was some type of support, but now the parents don’t have any support. So I’m curious, what’s going to happen from now till all of this is implemented? Thank you.”

A: Ms. Grealish responded that probation will be speaking later and asked Dr. Bowlds if she would like to share what is happening from the State perspective. Dr. Bowlds said traditionally DJJ is for the placement for youth with higher needs or higher risk, which is a very small percentage of the overall juvenile justice system. In terms of this realignment, the focus of the conversations with OYCR and BSCC has been how to make sure services are available for this population at the county level. CPOC will be able to speak more specifically to all the work they are doing. The population admitted to DJJ and juvenile crime have gone down due to a bigger focus on diversion and prevention.

Q: “How many [of the DJJ youth] are in the foster care system? On release, will they be going back to the system? And how many will be left to live on their own?”

A: Dr. Bowlds said she doesn’t have the specific foster care numbers and that data are difficult to capture because, when youth come to DJJ, they are switched from the dependency court to the juvenile court, so DJJ is reliant on any information from the court, county, or talking to the youth about their history with the foster care system. Some youth do need to benefit of being part of the foster care system, and DJJ tries to connect them upon release and discharge. Upon discharge from DJJ, a reentry plan is created with county partners to form recommendations based on location, treatment needs, follow up care, and the family situation. The Juvenile Parole Board will then determine whether the youth has completed everything expected from them to be discharged and returned to the county of commitment for a reentry hearing where the level of supervision will be determined. Realignment is a different conversation than discharge and it is one that DJJ is beginning to have with the county partners because these youth are in the middle of their treatment and not necessarily ready to discharge. Maintaining a smooth continuum of care when they are changing from DJJ jurisdiction to a local jurisdiction is one of the questions being addressed.

Q: “What does the supervision of these youth look like? And if youth violate any of their provisions what would be the next step?”

A: Dr. Bowlds stated those are excellent questions, but would be more suitable for the CPOC partners to answer.

IV. Board of State and Community Corrections (BSCC)

John Prince, *Deputy Director, County Facilities Construction Division, Board of State and Community Corrections*

Beth Gong, *Field Representative, Facilities Standards and Operations Division, Board of State and Community Corrections*

John Prince introduced himself and his colleague, Beth Gong, and stated they will be talking about the Request for Information issues by the BSCC and the upcoming Request for Applications (RFA) for the \$9.6 million Youth Programs and Facilities Grant program of SB 823. The \$9.6 million was set aside for BSCC to award one time grants to counties for infrastructure related needs and improvements to assist in the development of a local continuum of care. In November 2020, the Board approved the formation of a working group, which developed a Request for Information Survey. The survey requested information from counties about their intent to house youth after June 30, 2021, programs being developed, infrastructure needs, and the anticipated number of youth to be housed. The counties were asked to respond in January 2021, and 57 of the 58 counties have responded. The results can be found in the [Summary of Findings Document](#). For the youth population who can no longer be committed to DJJ, counties reported a lack of capacity to serve the youth in one more of the following high need categories: females, sex offenders, or the seriously mentally ill; and that they intend to refer these youth to one of the

12 counties who will create regional hubs for appropriate treatment and placement. The proposed RFA would allocate grant resources for infrastructure needs of counties who can provide facility and treatment space for referrals from other counties that lack the specialized capacity, which was indicated as a substantial need in the survey results. The needs noted by counties were separation of youth by age, modified treatment space, and specialized programming. The RFA will make \$4 million available for up to four projects, one in each of the established high need areas, to develop regional hubs that serve youth referred by other counties, and the remaining \$5.12 million will be distributed to other counties to support infrastructure improvements. The current timeline suggests that the RFA will be approved at the BSCC Board Meeting on April 8th, contract applications will be due to BSCC on May 7th, the Board will then review and award recommendations on June 10th, and the grant period will run from June 10, 2021 – June 1, 2024. After the grant period is over, a report will be made to the Legislature detailing how the money was spent.

Beth Gong added that she is a field representative and an inspector of 24 counties. One positive of the short timeline for SB 823 is that it follows behind the Title 15 regulation revision that occurred from 2017-2018, and became effective January 1, 2019. Time, effort and change for agencies occurred in that time, and an importance was placed on trauma informed care, culturally relevant and appropriate programming, screening process, intake, and case planning. SB 823 will focus on transition planning for older youth and supplying necessary resources as they leave a facility and return back to the community. Probation departments will emphasize after care supervision to link youth to resources and community based organizations to continue any kind of treatment needs upon release.

Q&A with Councilmember Advisors

Q: Dr. Danitza Pantoja asked how the regional hubs will work. If a county is awarded a grant for a high needs group, will other counties refer their high needs population to the closest county offering those services?

A: John Prince responded the details are still being worked out and the number of kids received by the county will be part of the grant agreement. For example, if there is only one female hub then they may have to accept youth from all over the state, but the goal of the regional hubs is that kids are able to stay close to home. Beth Gong added that Chief Richart will speak to this in reference to CPOC. In the last committee meeting, there was talk about consortiums and county agreements, so CPOC is working towards that and understands the intent of SB 823 was to keep kids as local as possible.

Q: Chief Jenkins asked about the Title 15 revision and when they became effective.

A: Ms. Gong responded that the CCR Title 15 and Title 24 regulations guide the conditions of confinement and became effective January 1, 2019.

Q: Chief Jenkins asked if there are highlights to the revisions and if significant changes were made.

A: Ms. Gong responded that significant changes were made. A year was spent training agencies and they are moving in a great direction, way past treatment, in terms of the expectations for probation departments. She stated that she will forward the highlights of the changes to CCJBH. The focus is placed on treatment, the importance of medical and behavioral health screening, and involvement in care while in custody. Title 15 referred to youth in custody as “minors” for a long time, but have finally adapted the use of “youth”. An avenue under the Welfare and Institutions Codes § 208.5 allowed some juvenile facilities to house youths until they were 21 and they had programming around post-secondary education and vocational training for the older population. New regulations allow for progressive care of the older population, not just youth under 18.

Q: Chief Jenkins stated that there are still many, maybe outside the juvenile justice system, who continue to ascribe an overly punitive approach to probation departments when that is long in the past and so the changes described really focus on the original intent of the juvenile justice system being the welfare of the child.

A: Beth Gong said the SB 823 process is exciting because the Juvenile Justice Coordinating Council involvement is bringing together subject matter experts to review these plans for DJJ realignment. Central Valley County just hired one full time and three part time clinicians, as well as a peer review counselor, which is a new approach many other agencies are also taking because of this new population.

*****PUBLIC COMMENT*****

Q: As a youth incarcerated in Kern County, I am very passionate about the work being done and how progressive it is. Timelist Group started inside prison walls and now we have housing and other things to help kids. But one thing I was going to talk about with Elizabeth is that I think they need care inside, as well as before they get home, and that’s something that we do. We are inside the prisons now, but we are actually trying to get into the youth program more to actually be able to do case management work to get the assessments that Mr. Jenkins was talking about and actually help in that form to grow in. That’s one thing that we believe in because, like I said, 90% of our people are lived experience: our work force is lived experience, our housing is lived experience. People that have this ability to communicate with people in a different voice saying, ‘Hey. You know, I lived that.’ They’ll be like, ‘What do you mean you lived that? You don’t look like you lived that. You look like an executive. You don’t know.’ But it’s how you carry yourself and that’s one thing that I’m passionate about is being open to help people and I see what changed. Like you said, it changed over the years. I remember when they use to say just CDC, now they say CDCR. Rehabilitation, that’s one thing that they had to add because now you’re starting to have programs inside the prison, and outside, and people don’t

have that care that always comes up. You've touched on that and I appreciate that, thank you so much."

Q: I apologize if I missed this, but do we know how many of the youth are seriously mentally ill?

A: Dr. Bowlds stated that 35 are in the mental health unit and there are two levels of care within the unit: the residential unit and the intensive behavioral treatment unit. The intensive behavioral treatment unit is for youth experiencing the most acute type of mental health symptoms, but not being treated at a licensed level of care. The youth may be experiencing intense mania, psychosis or self-harming behavior. There are 9 youth currently in the intensive behavioral treatment unit and the rest of the 35 are in the residential unit.

Q: Will there be any type of assistance or support for the families of the children, as well as maybe some type of relocation assistance when gang-involved, or are these issues going to be redirected to the county?

A: Dr. Bowlds responded that those issues will be redirected to the counties. Currently if a youth expresses concern about going back to their county, we work with our county partners at their reentry hearings. In terms of realignment, we will have similar discussions on a case by case basis. Once DJJ is closed and we are focused more on the care at a local level, CPOC will be able to address how they will be working with the families and looking at those questions.

A: Chief Jenkins referred back to a previous question regarding the next steps if youth violate their provisions. He answered saying, even before SB 823, the supervision and monitoring of youth after they left the DJJ facility was transferred to the local probation department, so that won't be a new part of this transition and is already in place. Chief Richart should be able to speak specifically to that. Probation departments will be incorporating new partnership, using the Juvenile Justice Coordinating Councils, to employ the evidence based practices to address the needs of the youth as they leave. The desire of youth to relocate because of gang will fall squarely at the county level.

V. CCJBH's Juvenile Justice Request for Proposal (RFP) Update:

Brenda Grealish, *Executive Officer, Council on Criminal Justice and Behavioral Health*

Brenda Grealish provided an update on CCJBH's Juvenile Justice RFP. It was first discussed in the November Juvenile Justice Workgroup and updates were provided in December and January Full Council Meetings. The RFP is an evidence based practices and programs compendium and toolkit to support county work and be able to address the needs of the SB 823 DJJ realignment youth. The project needs a contractor to do an environmental scan identifying the best practices and evidence based programs that have been effective in serving these youth. The toolkit will be a key resource for county's probation, child welfare, and behavioral health departments

as they work to build the local infrastructure and figure out how to identify and understand the population of these youth and their needs. We are looking to create and sustain cross system partnerships, ensuring screening and assessments are done for behavioral health, including trauma, and addressing criminogenic needs. The behavioral health and juvenile justice fields are still learning about each other and working to understanding each other. On the juvenile justice side, working to understand behavioral health screening, assessment and treatment, and on the behavioral health side, understanding criminogenic risk and need assessments and how they can be addressed in a comprehensive, collaborative treatment plan. From a school system prospective, the use of a multi-tier system of support to improve outcomes for youth in the justice system is necessary. We need to identify available data to establish baselines and track treatment over time, and also look at process outcomes to be able to improve the systems that serve these kids. As well as, identifying funding streams in place for these youth to be able to optimize funding. The RFP contract start date will be at the beginning of the new fiscal year (07/01/2021).

***** PUBLIC COMMENT*****

Q: What is the expected deliverable date of the toolkit?

A: Ms. Grealish stated the RFP will establish the length of time. They are hoping to have the evidence based practices compendium done in the first year of the contract and maybe starting the work on the toolkit into the second year. It will be a three year contract. If there is funding available they hope to have training and technical assistance, but it is currently unknown whether there will be enough funding to do that. At a minimum, there will be a training plan available so that counties will know what training is needed.

Q: How are we going to assist with recidivism without moving them directly into the county adult system? Making sure they get services to assist.

A: Ms. Grealish clarified the question as “How do we prevent them from going further into the system and make sure they get services to assist?” She stated they are trying to make it very service intensive to prevent any escalation or further involvement in the justice system.

Q: An emphasis on substance use services post discharge because this is among the main causes of recidivism.

A: Ms. Grealish thanked the participant for providing the statement and said they are doing behavioral health and making sure substance use disorder is tackled.

*****Change in agenda order because the meeting is running ahead of time *****

VI. Next Steps

Brenda Grealish, Executive Officer, *Council on Criminal Justice and Behavioral Health*

The meeting minutes for the last Juvenile Justice Workgroup will be posted online by Monday and emailed out when they are ready.

The Council voted to have the DJJ realignment population be the focus of the work for calendar year 2021, with the RFP being the biggest deliverable. The annual Legislative Report is usually discussed later in the year (November last year), but it puts everyone in a pinch to do reviews. The CCJBH staff has backed up the time frame and is looking to have a draft of the report complete by August 2021 and routed for reviews and feedback in September, so recommendations would need to be received by June. Any thoughts or ideas on how to structure the June workgroup meeting or any additional recommendations? Last year there was an extensive list of recommendations on both the DJJ realignment youth and all youth involved in the juvenile justice system.

Q&A with Councilmember Advisors

- Q:** Dr. Danitza Pantoja stated that the other workgroups have been very helpful in preparation for the RFP and focusing on realignment and hopes to focus on continuing to complete the end of year goals that have been established.
- A:** Ms. Grealish stated last year was very ambitious and even going into this year. CCJBH's team is "small but mighty" and they are very excited to have the funds to be able to do the compendium and toolkit and support SB 823.
- Q:** Dr. Pantoja stated the toolkit itself is not only going to help with realignment, but will also help support counties in general. It will influence all juveniles involved in the system in terms of evidence based practices and supporting juveniles in different tiers.
- A:** Ms. Grealish stated from the school of mental and behavioral health has quite a few investments in the budget. The Mental Health Services Oversight and Accountability Committee has been working to bridge behavioral health and school mental health. The Department of Health Care Services also has proposals in the budget for the school mental health and bringing behavioral health and Medi-Cal managed care plans into schools.
- Q:** Dr. Pantoja said something to consider is the transition from justice involvement to career or vocational training, that DJJ focuses on now, to help reduce recidivism. The programs help juveniles have purpose and career opportunity. The Department of Rehabilitation may be able to offer resources, such as career opportunities, for juveniles with mental health needs. There has been a dramatic change from three years ago when Antelope Valley Union High School District had probation officers on campus and there is a noticeable change from punitive to more supportive services

for students. A probation officer, mental health support and the school were involved in an Individualized Education Program meeting for a youth who was getting ready to graduate and turning 18 to aid in the transition and providing a community of care.

*****PUBLIC COMMENT*****

Q: “I want to share my perspective as a mother of a juvenile and as peer support with mental health services in LA county. I think that what you just said is that we need to get the managed health care system involved because I was one of those parents. Most of the services that are being provided, both for mental health and substance abuse, in LA County are Medi-Cal based and because I had private insurance I couldn’t access any of those services. My managed care limited me to only 20 therapy sessions a year and there was nothing else out there. So if we can get these medical providers to also be part of this, I think that’s very important. There are some working parents who are barely making it and since they have a job and they have insurance they fall into this category. I also wanted to highlight, and hopefully you can support this, in this budget we should also provide some type of assistance for parents or caregivers because if nothing changes in the home, no matter how much a child tries, he is not going to be able to do it. We don’t have some type of support for caregivers who are actually wanting to make a change and there should be something in the budget for that as well. And with the school system, I definitely agree with that because the problem was that a couple of years ago the transition of money and who was going to pay for these services in the school was moved from the county department straight into the school districts and for most of the school districts it, especially the smaller ones, it’s hard to provide the services because of their budget and with COVID it is getting worse. How can we assist the school’s needs directly in making sure that any money that goes to the schools goes directly into mental health and not to other areas? I know they are going to be receiving money right now through COVID. We asked this question to Senator Borgeas the other day who said the schools were going to receive money, but it was going to be up to the school to decide where they were going to use the money. We were trying to move it to mental health, but if the school district finds a need somewhere else it’s not going to be used in mental health and we need funding specifically for mental health. Thank you.”

VII. Chief Probation Officers of California (CPOC):

Brian Richart, *El Dorado County Chief Probation Officer, Chief Probation Officers of California (CPOC)*

Brian Richart introduced himself as the Chief Probation Officer for El Dorado County, the past president of CPOC, and the president when SB 823 was passed. He stated CPOC has taken on a coordinating role for the 58 jurisdictions response to SB 823 in collaboration with the Administration and the Legislature. The leading values and core principles of prior conversations follow the same concerns of other entities: to create a better response for youth that receive long term detention commitments from

the courts. An increase in adult commitments of high risk youth could be an unintended consequence of SB 823 if a meaningful and robust system is not created to present the courts and prosecutors with other alternatives. We'd like to see a reduction in the use of adult court for our youth, and create confidence in prosecutors and courts so they know that, when a youth is sent into this commitment environment, they are getting an accountability measure, as well as a full rehabilitative factor, that's being responsibly taken care of by the probation department system statewide. We also want to avoid net widening, and don't want to create a situation where courts find it more palatable to go towards increasingly severe consequences, or a more restrictive environment, when there are still alternatives available that are currently used by probation. The new system will not have the stigma of sending kids off to State, so we don't want courts to see local long term commitments as an acceptable path when other options are available. We want to breed consistency across the jurisdictions, so geographic location of the delinquency doesn't determine consequence or level of service. Counties have varying level of need for the DJJ, some haven't used it in the past decade and others are fairly high users. A concern is how to balance the needs of the various communities with the resources that exist and how to resolve the tension of not building too much, but building enough. A replacement for the centralized system is being built and diffused across the state, which creates the problem of the resources that were previously contained in one entity now need to be spread across 58 counties.

CDCR and the DJJ have shared demographic information with CPOC to get a better understanding of what services need to be available for the counties come July when DJJ intake is stopped. The DJJ population is 96% male and the 4% female. The average age of the DJJ population is 19 years old, but ranges from 13-24. The system was traditionally designed for youth 13-17 years old, but needs to be drafted to support older youth and blend the two populations without having to build new facilities or create unintended consequences for the existing population served in our communities. In 2019, the average length of stay for youth in the DJJ facility was 28 months, with a range of 21-48 months. It is not uncommon for juvenile hall to house youth for an extended period of time, especially youth that were being considered for adult court or going through adult prosecution in criminal court, but it is typically a very small number of youth who stay more than a year. An environment must be created to house a youth for three or four years who committed first degree murder or only two years for other delinquencies, while still providing the same robust experience to both groups.

Services and appropriate housing locations will need to be provided to specialized populations, such as sex offenders, females, arson, youth who are underdeveloped in maturity, and youth who are very mature. El Dorado County is looking at the possibility of a regional sex offender treatment program in South Lake Tahoe, but the available resources for treatment and programming need to be considered to ensure

the program is worthy of sending youth and removing them from their county/region into a different environment, while making sure El Dorado County still has the resources to treat their own youth. Approximately 10-13 counties are looking at providing regionalized services, which will be a necessary resource because even a jurisdiction the size of Sacramento County won't be able to provide a robust program for its general population and a specialized population.

Traditionally middle and high school services are provided to youth through the Office of Education, but the scope of services will need to be expanded to include post high school and into college or workforce development to match the services currently offered by DJJ. El Dorado County has a relationship with the local community college for youth to attend remotely, and some who attended on-site prior to COVID, to build their college resume. Other youth have engaged in vocational programming outside the facility or services are brought into the facility. DJJ services were very robust in this area, and counties will need to provide services for their older population transition into an adult life. DJJ does a great job of workforce development and vocational education, so probation will have to become more versed in that discipline before we can say that we have replaced that missing piece as it goes offline with something just as valuable, and hopefully more valuable.

We want to create a seamless continuum, but we don't want the realigned population to absorb all of the resources available to the rest of the continuum, nor do we want the scope of this population to grow. In our existing continuum, we have kids on the low end of the system, as well as kids much deeper into the system with higher needs and higher risk, and we don't want to take away our ability to divert and provide services for the youth that are in the system now. We must be cognizant of the risk of taking from our existing services in order to provide new services and be mindful of that as build the new system.

There are two types of populations currently being served at DJJ: the general and specialized populations. The general population are typically high risk/high need youth due to the delinquencies involved or not being successfully rehabilitated through the services the county can provide, so the courts turn to DJJ for additional rehabilitative services. The specialized population, such as El Dorado's sex offender treatment program, is for the lower risk/low need youth, but as youth go up the scale towards high risk/high need they are turned to the DJJ to provide necessary services. When taking on the entirety of the continuum, we have to make sure we have the services available for the general and specialized populations.

In terms of county solutions, each jurisdiction will fall into one of three categories: partner, host or independent. An independent county, such as Los Angeles, San Diego, San Bernardino, or Riverside, will be able to take the whole population that would have been sent to DJJ and internally build services with the resources they are receiving. They may not need to go shopping for services because they can handle the specialized and general population successfully. Host counties may be able to

take youth from other counties, such as the previous situation described with El Dorado, where they can take regional youth for a sex offender treatment program and provide 10-15 beds. A need for two or three more specialized programs throughout the State may be necessary to take on the entirety of the population, but we don't want five or seven of those programs and the possibility of a competitive market. We need the correct balance of need and resources to provide for the population. Partner counties will need all services because they don't have any facilities and will need a contract with a host county for services requested by the court for a youth who would otherwise have gone to DJJ. A fourth potential category would be a hybrid model. For example, Sacramento County may be able to provide their own services, so they would be an independent county largely, but they may not be able to build a robust program for the occasional youth of a specialized population who is committed to the county. The hybrid county would be shopping out for a bed for a particular service they can't offer, while still providing treatment for the residents of their county.

A number of implementations and considerations have been made for when DJJ does close. One of them is being able to support program capacity availability to replace the loss of the State level piece of the continuum. We know the number of beds and what service are needed, but that number will be ebbing and flowing at any given time so we need to be flexible to those needs. We likely won't be well prepared for that on July 1, but we know the system will evolve dramatically over the first couple years of service revision. Another consideration is the equal access to services. Previously when a kid was sent to the State it was known that a certain level of service would be accessible because they're in a single environment, but now we don't want to create a situation where if you send a kid to the sex offender program in El Dorado or Sonoma you are getting a different type, or value, of service. We also want to avoid establishing too few or too many individual county programs. When we are diffusing out the resources, we will have to be careful to make sure there is balance in the system. In incentivizing collaboration, we want to make sure this is a system that is working together and not a system working independently of each other by not sharing resources or information. We also want to mitigate the notion that county borders are a problem and make sure borders don't stand in the way of a youth from a particular county getting necessary services.

The previous considerations lead to a notion of the need for a clearing house, proposed by CPOC to interested stakeholders, around the development of a consortium. It would establish an independent organization with a board of directors who would begin to solve the issues through a clearing house methodology. They would be the arbiter of services and could theoretically begin to create a balance between need and service provision by channeling dollars to areas where the highest level of need exists, serving as the hub for communication and building memorandums of understanding for agreements between counties for consistent understanding. All counties would be members of the consortium and would pay into

it in order to ensure that even if beds aren't full, they are still funded so the capacity and staff to provide services is available when needed. The consortium would be able to flush out potential problems and is gaining interest with large county and State level stakeholders. The idea is not to reconstruct a DJJ or a body that carries decision making authority or provides direct services, but just coordinate services and identify and solve problems that arise.

Q&A with Council Member Advisors

- Q:** Chief Jenkins showed support for the consortium. He stated that he had previously asked Dr. Bowlde if there was an ability, through their existing risk data, to present the assessed needs of the current population through a macro perspective. The 695 youth aren't all being transitioned, but they are a reflection on the courts of who previously needed to be served at the DJJ level and will now be served locally. Chief Jenkins shared a fear that there will be guesses of what the needs are and thus what the services are, rather than the utilization of the practices to help tell us the needs of the population that would have been transitioning to the DJJ, but are now staying locally. The use of a consortium, as well as culling the risk and need data, to identify where the needs are and using the consortium to inventory where the services are and how to provide the most efficient delivery of the services.
- A:** Chief Richart responded the upside of not being part of a State entity is that it allows for more flexibility to address needs on a local level. The downside is that we are not well coordinated at times when it comes to a single delivery of services or a single point of data collection. There are 58 different data repositories that don't speak to each other. CPOC often fills the gap of not being under a single State entity, but they won't be able to fill this need ongoing, so something else needs to be created. CPOC is representative of the Chiefs, but a group representing the kids was needed. The idea for this consortium was born from the needs for other consortiums within probation in the past and was given a life a few months ago, but as it begins to be developed the need for such a group becomes more evident and people realize the difficulty with individual counties replacing a single entity (DJJ).

*****PUBLIC COMMENT*****

- Q:** In terms of supervision of the youth who are now going to remain at the local level, what will this supervision look like if these youth violate any of their provisions? And what would be the next step?
- A:** Chief Richart answered saying the provision of the Legislation currently under draft is the notion that youth who violate can be returned to a secure environment if needed. It is very clear in the drafting of the language, and in our philosophy, that return to custody would be the last of any options used. We currently provide parole services for youth out of DJJ, so we commonly engage with that population and this will just be an expansion. We do not want to return kids to an exordial environment, we want to keep them in the community. In, fact the rate at which youth are going back into institutions, for how long, and for what purpose, will be metrics that we pay attention

to. It will have to be to meet a rehabilitative goal, not as a consequence of not following the rules.

Q: Will there be any special programs to deal with Commercial Sexual Exploitation of Children (CSEC) youth who can be confused with sexualized behaviors?”

A: Chief Richart stated consideration for youth that have been trafficked or sexually abused is often a component of youth who have engaged in sexual offending, so that is part of any sex offender treatment curriculum. There will probably not be a specialized CSEC program because no youth will be committed to a long term commitment program as a result of CSEC involvement. We don't treat that as delinquent activity any more. We treat it as an effect of being sexually abused and sexual trauma (and other traumas). In fact, I don't remember a kid being housed in a secure detention environment in the recent past that was involved as a CSEC youth, unless it was for their own protection to get them into a treatment environment as soon as possible, and to secure their movements so we didn't lose them back to the CSEC environment.

Q: Can we make sure there is a mental health court put into the system in order to address some of the youth's special needs?

A: Chief Richart responded that there are behavioral health courts in many jurisdictions, but it won't be a component of SB 823. It is a component in many jurisdictions and addresses specialized treatment needs such as substance use disorder or behavioral health issues. Nothing different will be done as a result of SB 823, but we know a lot of the youth who wind up being committed to DJJ now, and will be committed to programs in the future, have high needs when it comes to behavioral health, so all of our programs will need to have robust behavioral health interventions. Locally, I just hired a new behavioral health coordinator in my department and we have made the strategic decision to no longer contract for behavioral health services out of our community and are bringing our services in-house. I will also be hiring two new clinicians on top of that position and, if we go down the road of providing a sex offender treatment program, all of the staff that provide services will receive specialized training and be on staff full time to provide those service directly.

Q: Are the youth involved at all in the creation of the local and universal services provided?”

A: Chief Richart responded that right now every county is responsible for drafting its local plan through the Juvenile Justice Coordinating Council. The sub-committees that were ordered by SB 823 have been developing a plan in each jurisdiction and the youth with lived experience in our system are involved in the sub-committees. In El Dorado County's sub-committee, there are three youth and several family members who have used the provided services, as well as a variety of community-based organizations that work with the population locally that are contributing to the development of the plans.

VIII. Adjourn

Ms. Grealish thanked everyone for coming and for staying a bit longer to answer questions. Monica Campos will schedule meetings with Dr. Pantoja and Chief Jenkins to plan for the next meeting on June 11, 2021, from 1:00-3:00. The next Full Council meeting will be April 30, 2021 from 2:00 PM - 4:30 PM. We hope to have your continued interest and participation in meetings as we think about these important issues pertaining to our youth in the juvenile justice system.