



COMMONWEALTH of VIRGINIA
Board of Juvenile Justice

BOARD MEETING

November 13, 2019

Main Street Centre, 600 East Main Street, 12th Floor, South Conference Room, Richmond

A G E N D A

9:30 a.m. Board Meeting

1. **CALL TO ORDER and INTRODUCTIONS**

2. **APPROVAL of June 19, 2019, MINUTES (Pages 4-16)**

3. **PUBLIC COMMENT**

4. **DIRECTOR'S CERTIFICATION ACTIONS (Pages 17-54)**

5. **OTHER BUSINESS**

A. Board Elections

B. (Pages 55-57) New River Valley Juvenile Detention Center Variance Extension
Kristen Peterson, Regulatory and Policy Coordinator, Department of Juvenile Justice

C. (Pages 58-92) Fiscal Year 2019 Human Research Report
Dhara Amin, Research Analyst, Department of Juvenile Justice

D. (Pages 93-108) Regulation Governing Minimum Standards for Research Involving Human Subjects or Records of the Department of Juvenile Justice; Requests Submitted through the Virginia Longitudinal Data Systems
Kristen Peterson, Regulatory and Policy Coordinator, Department of Juvenile Justice

E. (Pages 109-114) Juvenile Correctional Center Variance Extension and Corresponding Waiver
Kristen Peterson, Regulatory and Policy Coordinator, Department of Juvenile Justice

F. (Pages 115-117) Consideration of Request to Submit Notice of Intended Regulatory Action (NOIRA) for Regulation Governing State Reimbursement of Local Juvenile Residential Facility Costs
Kristen Peterson, Regulatory and Policy Coordinator, Department of Juvenile Justice

BOARD MEETING AGENDA

Page Two

G. (Pages 118-120) Consideration of Request to Submit NOIRA for Regulation Governing Mental Health Services Transition Plans for Incarcerated Juveniles

Kristen Peterson, Regulatory and Policy Coordinator, Department of Juvenile Justice

H. (Pages 121-128) Review of Board Bylaws

James Towey, Legislative and Regulatory Affairs Manager, Department of Juvenile Justice

I. (Pages 131-139) Standardized Disposition Matrix

Stephanie Garrison, Regional Program Manager, Department of Juvenile Justice

6. DIRECTOR REMARKS AND BOARD COMMENTS

7. 2020 MEETING DATES: TBD

8. ADJOURNMENT

GUIDELINES FOR PUBLIC COMMENT

1. The Board of Juvenile Justice is pleased to receive public comment at each of its regular meetings. In order to allow the Board sufficient time for its other business, the total time allotted to public comment will be limited to thirty (30) minutes at the beginning of the meeting with additional time allotted at the end of the meeting for individuals who have not had a chance to be heard. Speakers will be limited to 5 minutes each with shorter time frames provided at the Chair's discretion to accommodate large numbers of speakers.
2. Those wishing to speak to the Board are strongly encouraged to contact Wendy Hoffman at 804-588-3903 or wendy.hoffman@djj.virginia.gov three or more business days prior to the meeting. Persons not registered prior to the day of the Board meeting will speak after those who have pre-registered. Normally, speakers will be scheduled in the order that their requests are received. Where issues involving a variety of views are presented before the Board, the Board reserves the right to allocate the time available so as to insure that the Board hears from different points of view on any particular issue. Groups wishing to address a single subject are urged to designate a spokesperson. Speakers are urged to confine their comments to topics relevant to the Board's purview.
3. In order to make the limited time available most effective, speakers are urged to provide multiple written copies of their comments or other material amplifying their views. Please provide at least 15 written copies if you are able.

Jennifer Woolard, Chair
Tyren Frazier, Vice Chair
Dana G. Schrad, Secretary
Michael N. Herring
David R. Hines
Scott Kizner
Robyn Diehl McDougale
Quwanisha S. Roman
Robert Vilchez



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COMMONWEALTH of VIRGINIA
Board of Juvenile Justice
DRAFT MEETING MINUTES

June 19, 2019

Main Street Centre, 600 East Main Street, 12th Floor, South Conference Room
Richmond, Virginia 23219

Board Members Present: Tyren Frazier, Michael Herring, Scott Kizner, Robyn McDougale, Dana Schrad, and Jennifer Woolard

Board Members Absent: David Hines, Quwanisha Roman, and Robert "Tito" Vilchez

Department of Juvenile Justice (Department) Staff Present: Dhara Amin, Ken Bailey, Valerie Boykin, Juliet Buesing, Ken Davis, Jenna Easton, Katherine Farmer, Michael Favale, Wendy Hoffman, Joyce Holmon, Kristina McGuire, Mark Murphy, Margaret O'Shea (Attorney General's Office), Jamie Patten, Kristen Peterson, Jessica Schneider, Romilda Smith, Beth Stinnett, James Towey, and Angela Valentine

Guests Present: Jac Andrade (Legal Aid Justice Center), Marilyn Brown (Chesterfield County Juvenile Detention Center), Kerry Chilton (disAbility Law Center of Virginia), Aaron Danks (National Cancer Registrars Association), Adam Ebbin (Senate of Virginia), Jason Houtz (Fairfax County Juvenile Detention Center), Janea Mark (Legal Aid Justice Center), Lori Swain, Henry Watkins (Office of Senator Ebbin), and Amy Woolard (Legal Aid Justice Center)

CALL TO ORDER

Chairperson Jennifer Woolard called the meeting to order at 9:30 a.m.

INTRODUCTIONS

Chairperson Woolard welcomed all who were present and asked for introductions.

APPROVAL of May 6, 2019, MINUTES

The minutes of the May 6, 2019, Board meeting were provided for approval. On motion duly made by Robyn McDougale and seconded by Dana Schrad, the Board approved the minutes as presented.

PUBLIC COMMENT PERIOD

There was no public comment.

DIRECTOR'S CERTIFICATION ACTIONS

Ken Bailey, Certification Manager, Department

Included in the Board packet were the individual audit reports and a summary of the Director's certification actions completed on May 29, 2019.

The audit for the Fairfax Shelter Care II found three deficiencies. The Certification Unit completed their monitoring visits, and the facility was in compliance. Fairfax Shelter Care II was certified until May 10, 2022.

The New River Valley Juvenile Detention Home and Post-dispositional Program received a 100% compliance on their audit and was certified until June 11, 2022. The facility was provided a letter of congratulations from the Board Chair.

The audit for the Prince William County Juvenile Detention Center found seven deficiencies, with critical deficiencies such as missing documentation on serious incident reporting and employee volunteer background checks not done in a timely fashion. The Certification Unit completed their monitoring visits, and the facility was in compliance.

The audit for the Richmond Juvenile Detention Center and Post-dispositional Program found one deficiency dealing with sharps and syringes. This deficiency was immediately corrected, and the facility was in compliance.

REMARKS ON THE JUVENILE DETENTION CENTER REGULATION

Senator Adam P. Ebbin and Lori Swain (Senator Ebbin's Constituent)

Last General Assembly session, the Senate Committee on Rehabilitation and Social Services considered a Senate bill that would have required the Board of Juvenile Justice to promulgate regulations governing the housing of youth detained in a juvenile correctional facility pursuant to a contract with the federal government and not committed by a court of the Commonwealth. The bill had bipartisan support but ultimately failed to move out of committee.

Senator Ebbin is requesting a separate set of regulations for youth placed in secure detention centers by the federal Office of Refugee Resettlement (ORR). According to Senator Ebbin, ORR youth are different from the court-detained general detention population and are a special class due to the trauma suffered from gang violence in their home countries, being victims of sex trafficking, other experiences, and the potential for mental illness.

Specifically, Senator Ebbin is seeking separate standards that address the use of physical force and mechanical restraints that prohibit isolation, and that address other topics relating to the care of federal youth, such as staff training requirements, cognitive behavioral interventions, trauma informed care, cultural background implications, de-escalation techniques, mandates for bilingual staff, and culturally relevant programs.

Senator Ebbin discussed the Shenandoah Valley Juvenile Center (SVJC) lawsuit regarding its contract with the ORR alleging many inhumane practices. such as, not having bilingual staff and destroying incident records. Senator Ebbin asserted that the ORR youth were treated worse than other youth at the facility despite not being convicted or charged with a crime and was concerned with the risk of legal liability to Virginia and the locality operating the facility.

Senator Ebbin requested that the Department be given the same level of access to youth in facilities with third party contracts that they ordinarily have with other youth in facilities certified by the Department. Senator Ebbin also recommended additional standards for recordkeeping and provisions prohibiting the destruction of video footage of reported incidents.

Senator Ebbin introduced his constituent Lori Swain, who outlined her concerns regarding the allegations at the SVJC and discussed the US Senate and Governor's Office reports addressing various challenges with unaccompanied alien children (UAC). Ms. Swain noted that no ORR guidance documents or policies are available to facilities to handle these youth. According to Ms. Swain, Yellow County, California, another facility in the country that handles UAC has had success in their program. Ms. Swain noted her support of the legislation brought by Senator Ebbin and encouraged the Board to establish a separate set of certification requirements to support UAC in secure Virginia juvenile detention centers.

Chairperson Woolard thanked Ms. Swain and Senator Ebbin for their comments and remarked that the Board already had begun work to address some of Senator Ebbin's concerns. Ms. Kristen Peterson, the Department's Regulatory and Policy Coordinator, provided an update on the amended regulations the Board passed in the aftermath of the SVJC report. According to Ms. Peterson, the Board added language to the Regulations Governing Juvenile Secure Detention Centers requiring a juvenile detention center that enters into a written agreement with a separate entity, such as the federal government, to include in their agreement a provision subjecting the program to the Department's regulations and requiring them to give the Department access to their records and to the juveniles for purposes of certification. This provision is currently moving through the fast-track process. The Governor's Office approved the regulation on June 5, and it will be published in the *Virginia Register of Regulations* to undergo a 30-day public comment period. Assuming no triggering incidents occur that would prevent the Department from moving forward with the fast-track action, the provision will take effect on August 22.

The Board members discussed the issues brought by Senator Ebbin. Some Board members were concerned that the regulations do not go far enough in addressing Senator Ebbin's concerns, specifically dealing with training, competency, and trauma-informed care for this population. Ms.

Peterson said that, absent the proposed amendments moving through the fast-track process, the Department's Certification Unit does not have the authority or reach to address specific program requirements that Senator Ebbin detailed. Ms. Peterson added that the amended regulation will allow the Certification Unit to ensure facilities in third party contracts are complying with all the regulatory provisions. Ms. Peterson also stated that the affected juvenile detention center has amended its contract to reflect the proposed amendments.

Senator Ebbin concluded that this population should be regulated separately and reminded the Board that these children are different, and different regulations should be drafted for certifying these programs.

Chairperson Woolard informed Senator Ebbin that he will be contacted if this issue is put before the Board again.

VIRGINIA JUVENILE COMMUNITY CRIME CONTROL ACT (VJCCCA) PLAN APPROVALS Beth Stinnett, Statewide Program Coordinator, Department

VJCCCA was enacted in 1995 and authorizes the Department to administer funds to local government entities to design services and programs to respond to juvenile crime. All 133 cities and counties across the Commonwealth receive a state allocation. This is the beginning of the second year of the two-year biennium. Most localities are operating under biennial plans approved by the Department and the Board through June 30, 2020.

In the 1990s, many communities built new detention facilities and increased capacity. The intention now is for the Department to provide funding for detention alternatives, such as electronic monitoring, outreach detention, and daily reporting centers. In addition, funding can be used for early intervention programming for delinquent youth to be diverted for programming instead of placed on probation.

When VJCCCA began, the state share was nearly \$29 million, and through years of budget reduction, the state allocation is now \$10.3 million. Some localities still have a required Maintenance of Effort and local contributions. Total for state and local VJCCCA funding is \$23 million.

Participating localities identify a funds administrator and decide on services to be part of their plan. An initial formula grant is used based on the size of the community. Some localities receive as little as \$6,500 a year, and others receive several hundred thousand dollars a year. The amount of funding varies, which influences how the funds are spent. Some localities use the funds for detention alternatives, diversion, pro-social skills, skill-based groups, group homes, and behavioral services. Localities also can use funding to hire private provider agencies, contract for services, or hire local government staff to deliver services.

For the first time in many years, there will be changes to the program beginning July 1. The General Assembly passed House Bill 1771 that requires an addition to the VJCCCA allowable services: a new

category called prevention services. Traditionally, the funding could be used only for young people who enter the juvenile justice system by way of intake. This new category allows localities also to serve young people not involved in the juvenile justice system. The new law requires the department to have an evidence-based assessment tool to determine which young people should be served. Because this is the second year of the two-year biennium, at this time, only one locality has elected to add this new category to their plan. Most localities already have a plan that takes them through June 30, 2020. The Department is preparing for this new category by developing technical assistance, guidance documents, and implementation plans for the new law.

The Board packet contains a spreadsheet that lists each locality's plan type, programs and services, budget from the previous year's plan, and proposed changes. Localities may have been approved for only one year due to continued work with the Department on the plan, the addition of new categories of services or programs, the need for intensive supervision as the locality implements a new service or program, and high recidivism rates or low successful completion rates within the program or service. This would merit more work on the program to change the target population, staff development, or review the admission criteria. Twenty jurisdictions are a part of ten combined plans, and each has worked closely with its regional VJCCCA coordinators over the past year to enhance their plans.

Ms. Stinnett detailed a few highlights of the plan changes.

Hampton had a number of underutilized programs and was able to re-appropriate and budget for a new category, which will serve young people on probation suspended from school. Hampton hopes this program will reduce violations.

Martinsville would like to add a shelter care facility to serve youth in southwest Virginia as an alternative to detention. They have a zero budget and do not have full readiness. Martinsville is continuing work with the Certification Unit and others to prepare. The Department supports this addition.

Frederick County wants to be the first to add the prevention services category. Frederick County has an active juvenile judge who has taken an interest in this category and rallied the community. The locality has visited the Achievement Center in Washington, D. C., and is trying to replicate their program. The array of services will include prosocial engagement, educational programming, and behavioral health services.

Ms. Stinnett asked the Board to approve a motion for 20 localities, part of 10 combined plans, and adopt their plan for year two of the biennium that goes through June 2020.

On motion duly made by Robyn McDougale and seconded by Scott Kizner, the Board of Juvenile Justice approved the VJCCCA plans for the fiscal year 2020 for the following: Combined Plan for Frederick, Clarke, Winchester, and Manassas City; Combined Plan for Rockingham, Harrisonburg, Warren, Hampton, Newport News, and Norfolk; Combined Plan for Martinsville, Henry, Patrick,

and the City of Roanoke; and Combined Plan for York, James City, Gloucester, Williamsburg, Mathews, and Poquoson.

REQUEST EXTENSION OF VARIANCE APPLICABLE TO JUVENILE CORRECTIONAL CENTERS, SECURITY STAFF SUPERVISION OF RESIDENTS DURING TRANSPORTATION

Kristen Peterson, Regulatory and Policy Coordinator, Department

Ms. Peterson presented a request on behalf of the Bon Air Juvenile Correctional Center to extend the variance, originally approved by the Board in September 2016, to the regulatory requirement in Subsection A of 6VAC35-71-830 of the juvenile correctional center regulation. Currently, during the hours residents are awake, there must be at least one direct care staff member who is awake, on duty, and responsible for the supervision of every 10 residents, either on the premises or off campus participating in facility sponsored events. In order to be considered direct care staff, staff must be responsible primarily for maintaining the safety and well-being of the resident, implementing the behavior management program, and maintaining security of the facility.

The Department implemented the Community Treatment Model in 2015 and reclassified its direct care staff. The juvenile correctional officer position was divided into two separate classifications: resident specialist and security staff. The resident specialist has enhanced programmatic responsibilities to help facilitate the community treatment model and serve as a personal advocate for residents. The resident specialist is also responsible for security functions. The security staff primarily has security functions and is responsible for conducting perimeter checks, facility searches, and similar types of activities. Because of the existing definition of direct care staff, security staff are not authorized to be alone with residents outside the presence of direct care staff and are not responsible for implementing the behavior management program. As a result, security staff do not meet the definition of direct care staff.

In order to address this deficiency, in 2016, the Department asked the Board for a variance. The variance has been in place since September 19, 2016, and gives security staff the authority to supervise residents during emergency and routine transportation. Security staff can transport residents to medical appointments, court, or similar appointments. The proposed amendments to the JCC regulation that incorporate the concepts of the variance have not gone through the regulatory process and likely will not take effect before this variance expires. Therefore, the Department is requesting an extension of the variance for three years or until the regulation is amended, whichever occurs first.

A definition of security staff was incorporated as part of the existing variance and includes three separate positions: 1) security coordinator, 2) security manager, and 3) security specialist. Earlier this year, the Department retitled the security specialist position in order to address shortages that occur on the units with resident specialists I who fall under the direct care staff classification. In addition to the security related functions, the former security specialists now must assume temporarily the duties of a resident specialist I in the event of a vacancy or a shortage.

The Department is requesting that the Board extend the variance originally approved by the Board in September 2016 but modify it to address the changes the Department has recently undergone.

The proposed definition for security staff on page 56 of the Board packet includes resident specialists, security coordinators, and security managers. All other provisions in the proposed variance remain the same as the existing variance. There remain compelling reasons to continue to allow this variance. Primarily, the Board has already approved this concept when it approved proposed amendments to the regulation, which incorporated the variance language. Additionally, security staff receive the same 120 hours of initial training as direct care staff and the same 40 hours of retraining each year. Extending this variance will allow security staff to continue to transport residents and free up direct care staff to implement the community treatment model concepts.

On motion duly made by Jennifer Woolard and seconded by Michael Herring, pursuant to 6VAC35-20-92 of the Regulation Governing the Monitoring, Approval, and Certification of Juvenile Justice Programs and Facilities, the Board of Juvenile Justice approved an extension of the variance to the regulatory requirement provided in subsection A of 6VAC35-71-830 that requires at least one direct care staff member on duty and responsible for supervision of every 10 residents on the premises or participating in off-campus, facility-sponsored activities. This variance shall continue to authorize staff classified as security staff to actively supervise residents during routine and emergency transportation. This variance shall remain in effect until 6VAC35-71 is amended or for three years, whichever occurs first.

REQUEST TO AMEND REGULATION GOVERNING MINIMUM STANDARDS FOR JUVENILE INFORMATION REQUESTS FROM AND RESEARCH INVOLVING HUMAN SUBJECTS WITHIN THE DEPARTMENT OF JUVENILE JUSTICE (6VAC35-170) THROUGH THE FAST-TRACK REGULATORY PROCESS

Kristen Peterson, Regulatory and Policy Coordinator, Department

The Regulation Governing Minimum Standards for Juvenile Information Requests from and Research Involving Human Subjects within the Department governs the process for review, submission, and approval of research proposals and data requests to the Department. The Board amended this regulation in 2016. There are issues and provisions that have continued to cause confusion among the regulated community. As a result, the Department's Research Unit has recommended additional amendments to help with clarification.

Ms. Peterson reviewed the most important proposed amendments.

There are three definition changes. The existing definition for "human subject" fails to contemplate individuals who are under the guidance or supervision of Department-regulated facilities, such as juvenile detention centers and group homes. The recommendation of the Research Unit is to amend the regulation to clearly state that these provisions apply to entities regulated by the Department, such as juvenile detention centers and group homes.

The “human subject” definition also has been expanded to include staff and contractors, which will allow researchers to submit proposals or requests involving facility or program staff, rather than only residents. A similar change is proposed for the definition of “organizational unit.” The current definition applies only to Department-operated facilities and programs.

The existing regulation establishes requirements for two different committees. One of the committees is responsible for overseeing case-specific data requests. Another committee is responsible for reviewing human research proposals. The current regulation does not distinguish between the two committees. The recommendation is to add a definition for “internal committee,” which is responsible for overseeing case-specific data requests.

Section 55 is a new section that contains existing content. Language in Section 62 was repealed and moved to Section 55 for structural purposes and to improve the regulation.

Under the existing regulation in Section 65, researchers who seek or request external case-specific data must submit a Research Proposal Form and a Research Agreement Form. There is no provision in the existing regulation regarding the Confidentiality Agreement Form. The proposal adds a requirement that the Confidentiality Agreement also must be submitted when an external case-specific data request is made.

Under the existing regulation, certain identifiers must be removed from case-specific data requests before that information is transferred from the Department to the researcher including, for example, the individual’s name, social security number, date of birth, dates of admission, dates of release, account numbers, and direct care numbers. Under Subsection E of Section 65, the Department Director has the authority on a case-by-case basis to approve the dissemination of some data with a limited number of identifiers. Because some identifiers that must be stricken are not sensitive by their nature, the exception has become a rule, and the Director constantly must approve data requests with limited identifiers. The Research Unit has determined that some identifiers listed under this section are not sensitive by nature and are only sensitive when paired with other more sensitive data. Therefore, the recommendation is to remove from the list of identifiers that must be stricken certain identifiers, such as dates of admission, dates of release, and account numbers. Because email addresses often can serve as identifiers, the Department recommends adding them to the list of identifiers that must be stricken.

The Department recommended additional language in Section 70 to require that when a research proposal or request is submitted, the researcher must comply with the appropriate security and non-disclosure requirements. This addition is intended to ensure sensitive data is protected.

Section 80 deals with the statute that addresses human research and the provision of informed consent. The Department recommends additional language requiring that before a human research proposal request can be approved, informed consent must be provided by either the legally authorized representative or the human subject. This is consistent with current state law but is not explicit in the existing regulation.

Research proposals exempt from the human research process are noted in Section 90. For example, research conducted by the Department of Health on preventive disease investigations and some education-related research are exempt under the existing regulation. Section 90 omits exceptions to these exemptions that are set out in the federal regulations. The Research Unit has added those exceptions to the exemptions in Section 90.

In Section 100, there are certain endorsements researchers must obtain when conducting external research. For example, for student research, the student must obtain the endorsement of the academic advisor. If the research involves juvenile court records, the endorsement of the juvenile court judge for the applicable jurisdiction is required. The Research Unit recommended striking these requirements. Obtaining the endorsement of the academic advisor for student research is not necessary because typically, the student researcher is not the principal researcher. The academic advisor would be involved in the process. With respect to court service unit records, it is the court service unit director who is better equipped to provide the endorsement.

Section 185 addresses researcher noncompliance and provides that if a researcher deviates significantly from the approved proposal or if he fails to comply with statutory or regulatory requirements, the Department can restrict or terminate further research or prohibit the researcher from publishing the research results. The proposal adds an alternative that will allow the Department to bar the researcher from future studies with the Department.

Section 190 requires the Human Research Review Committee (HRRC) to provide an annual report to the Governor, General Assembly, and the Department Director that sets out and summarizes all of the research proposals approved by the HRRC. The Research Unit has recommended adding language consistent with the requirement in § 32.1-162.19 of the Code of Virginia, which requires the HRRC, in addition to completing that report, to ensure that an overview of the report is placed on the Department's website. The language was added to conform to state law.

State agencies are prohibited from incorporating into regulations by reference documents that the agency has created. There are provisions in the existing regulation that violate this requirement. The recommendation is to strike those provisions and add language into a new section, Section 230, which gives the Department the authority to establish written procedures to address or impose additional requirements regarding the submission and approval process. The Department also recommends new language directing that written procedures be established to outline the process for obtaining organizational unit endorsement. These written procedures must be published on the Department's website.

Ms. Peterson invited Dhara Amin, Research Analyst and Coordinator of External Research, Department, to respond to questions from the Board.

Board Member Schrad asked if the new requirement that research results be made public on the agency's website is helpful and whether the Board traditionally is made aware of outside research being conducted.

Ms. Amin answered that a report is presented to the Board on an annual basis summarizing all proposals submitted to the Department whether or not approved, still pending, not decided on, or rejected. The report also details significant findings in the research. This year's report will be presented to the Board at the November meeting.

Chairperson Woolard asked if the human research regulations have any implications with the changes to the federal Common Rule.

Ms. Amin explained that, out of the seven changes to the Common Rule that have been implemented or will be implemented in 2020, two impact the Department's process. The first is the elimination of continuing review, which is more for the Institutional Review Board (IRB). The HRRC has a separate safeguard and will continue its annual review to ensure researchers are handling their projects. The second involved making the informed consent clearer, shorter, and more concise. The Department already follows this practice; its informed consent forms are between sixth and eighth grade reading levels depending on the topic.

Chairperson Woolard questioned the Department's stringent requirements for approving research projects. The federal provisions require that the risks of research be reasonable in relation to the anticipated benefits. Section 150 of the regulation, however, requires the benefits of the research to outweigh the risks. Chairperson Woolard was concerned with this requirement given the fact that social science research often has no direct benefit to the subject but has implications for public policy and practice.

Ms. Amin responded that this requirement is consistent with statute.

Board Member Schrad asked how the director's exception allowing the dissemination of data with some identifiers on a case-by-case basis works and whether the justification is recorded.

Ms. Amin responded that the Department requires the researcher to justify why sensitive information or identifiable data is necessary on its proposal form.

On motion duly made by Robyn McDougle and seconded by Michael Herring, the Board of Juvenile Justice approved the proposed amendments to the Regulations Governing Minimum Standards for Juvenile Information Requests from and Research Involving Human Subjects within the Department of Juvenile Justice (6VAC35-170) as agreed upon at the June 19, 2019, Board meeting and granted the Department of Juvenile Justice permission to proceed with the filing of the regulatory package through the Fast-Track stage of the regulatory process.

LEGISLATIVE PROCESS

James Towey, Legislative and Regulatory Affairs Manager, Department

Mr. Towey provided a brief overview of the legislative process and explained his duty to visit court service units across the Commonwealth to provide a legislative update on laws that take effect on July 1 that could impact their units. During these visits, Mr. Towey discusses the Department's legislative process and the importance of obtaining input from the field because of their practical knowledge on the issues and statutes. The Department conducts research and analysis on potential legislative proposals in July. The Legislative Unit then drafts rationale and actual language for any legislative proposals the Department wants to move forward on.

The Legislative Unit ensures any proposals considered are not in conflict with state or federal law and decides if the proposal could be better handled through procedure or regulation. The unit also considers the likelihood of success for each legislative proposal. The Department holds internal discussions with the Director, and decisions are made on proposals to submit to the Secretary of Public Safety and Homeland Security. Nothing is done without the Secretary's authorization, who in turn receives his authorization from the Governor's policy team. The Department usually submits the agency legislative proposals by mid-to-late August. The Secretary meets with the Department to discuss the proposals and to prioritize. It is unclear whether the special session will affect the timeline of the legislative process this year. The Secretary selects the proposals and sends them to the Governor's policy team, who determines the Governor's legislative package. The Department is usually notified by November or December which legislative proposals have been approved and then the Department must recommend patrons. The Governor's policy team informs the Department about two weeks later on which patrons were accepted. Throughout the session, the Department cannot support or oppose legislation unless the Secretary authorizes it. The Governor's administration selects the bills to be vocally supported or opposed.

Mr. Towey invited the Board to provide their ideas and concepts. The Board is welcome to provide input on bills that might be harmful or helpful.

DIRECTOR COMMENTS

Valerie Boykin, Director, Department

Director Boykin was invited to present to the House Appropriations Committee on June 17. The committee asked Director Boykin for an update on transformation. Director Boykin thanked the committee for allowing the Department to use the funds from the closure of Beaumont Juvenile Correctional Center and the Reception and Diagnostic Center for reinvestments and informed them that it is too early to see results, but funding program services on the front end is the right direction.

Dr. Lisa Floyd announced that graduation was on Friday, June 21. The Division of Education has decided to hold two graduation ceremonies each year to accommodate the varying school completion dates. This semester, there are 50 graduates with advanced diplomas and only nine GEDs. There is a push towards diplomas instead of GEDs. New research shows that a GED is

equivalent to a drop out. The guest speaker for graduation is former NFL running back Howard Stevens, and there will be seven student speakers. An expected 275 parents and family members will attend the ceremony. When students finish school mid-year, they immediately enroll in post-secondary programming. On June 7, there was a post-secondary celebration for 69 youth, 79 certificates, and 148 college courses completed with credit earned. For the first time, the Department provided two scholarships through the Missouri Youth Services Institute for \$1,000 each and entered into a partnership with a Virginia foundation to provide \$2,500 each for two additional youth.

Deputy Director of Residential Services Joyce Holmon added that for the second year, the Department sponsored a senior class trip off campus, this year for 18 youth at Boomerang Air Sports.

Earlier in the year, Director Block announced the Department's formation of an Equity Workgroup. The Juvenile Delinquency and Prevention Act requires states to focus on disproportionate minority contact, and now more of the research is focused on racial and ethnic disparity. A growing trend is to look at race equity and inclusion. The Department launched this workgroup, co-chaired by Jenna Easton, Juvenile Detention Alternatives Initiative Coordinator, with representation from all divisions. The group's charge is to establish a uniform understanding of race, equity, and inclusion across all units within the Department, to adopt and embed practices and procedures that promote equity and inclusion, and to eliminate current practices that create disparities. The workgroup has had three meetings, and the initial work is to revise the Department's electronic data system and capture more information on race and ethnicity. This category uses census data, and the Department is trying to capture more of this type of information. Beginning in July, the Department will be capturing more of this data in its system.

In addition, the Department has partnered with the Department of Criminal Justice Services (DCJS), which has a grant with an organization to provide training and technical assistance on these issues. The Department is soliciting jurisdictions to create teams that might look at the data and see what the issues are in those localities. Overall, the data show more youth who penetrate the system in Virginia are youth of color. The Department is interested in the root causes and what can be done to change these statistics.

Director Boykin introduced the newest member of the Executive Team, Michael Favale, who was promoted to the Director of Policy and Legislation.

Director Boykin acknowledged and thanked three Board members whose terms expire at the end of this month. Chairperson Woolard, Board Member Herring, and Board Member Schrad. Ms. Boykin said that appointments are being considered, and the board will welcome new members in the fall.

BOARD COMMENTS

Board Member Kizner said that he is impressed by the professionalism and passion of the staff. Board Member Kizner learns a lot at meetings and gains a greater appreciation of the work the Department does for a population of terrific young people who made a bad decision. It is good to know that the Department is looking out for their best interests.

Chairperson Woolard expressed her pleasure at serving as the Board Chair, indicating that it had been an educational experience. Chairperson Woolard echoed Board Member Kizner's comments regarding the Department's commitment to the children and families it serves.

NEXT MEETING

The next Board meeting is scheduled for September 18, 2019, at Main Street Centre, 600 East Main Street, Richmond.

ADJOURNMENT

Chairperson Woolard adjourned the meeting at 11:05 a.m.

SUMMARY DEPARTMENT CERTIFICATION ACTIONS
July 2019

DEPARTMENT CERTIFICATION ACTION July 10, 2019: Approved the relocation of Fairfax Boys Probation House to 10650 Page Road and changed the name to Stepping Stones: A Therapeutic Journey for Boys. Approved the age range of 14 to 18 and set the capacity at 12. The current certification status will remain effective until July 13, 2020.

DEPARTMENT CERTIFICATION ACTION July 30, 2019: Certified Shenandoah Valley Juvenile Center until June 9, 2022, with a letter of congratulations for 100% compliance.
Pursuant to 6VAC35-20-100C.1, if the certification audit finds the program or facility in 100% compliance with all regulatory requirements, the director or designee shall certify the facility for three years.

DEPARTMENT CERTIFICATION ACTION July 30, 2019: Continued the current certification status of Summit Transitional Living Program until December 8, 2019, with a monitoring report from the Certification Unit.
Pursuant to 6VAC35-20-100C.3, if the certification audit finds the program or facility in less than 100% compliance with all critical regulatory requirements or less than 90% on all noncritical regulatory requirements or both, and a subsequent status report, completed prior to the certification action, finds 100% compliance on all critical regulatory requirements and 90% or greater compliance on all noncritical regulatory requirements, the program or facility shall be certified for a specified period of time, up to three years.

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the 16th Court Service Unit until September 13, 2022 with a status report from Regional Program Manager in June 2020.
Pursuant to 6VAC35-20-100C.3, if the certification audit finds the program or facility in less than 100% compliance with all critical regulatory requirements or less than 90% on all noncritical regulatory requirements or both, and a subsequent status report, completed prior to the certification action, finds 100% compliance on all critical regulatory requirements and 90% or greater compliance on all noncritical regulatory requirements, the program or facility shall be certified for a specified period of time, up to three years.

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the 26th District Court Service until July 19, 2022.
Pursuant to 6VAC35-20-100C.2, if the certification audit finds the program or facility in less than 100% compliance with all regulatory requirements and a subsequent status report, completed prior to the certification action, finds 100% compliance on all regulatory requirements, the director or designee shall certify the facility for a specific period of time, up to three years.

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the Chesterfield Juvenile Detention Center and Post-Dispositional Program until October 28, 2022.
Pursuant to 6VAC35-20-100C.2, if the certification audit finds the program or facility in less than 100% compliance with all regulatory requirements and a subsequent status report, completed prior to the certification action, finds 100% compliance on all regulatory requirements, the director or designee shall certify the facility for a specific period of time, up to three years.

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

Stepping Stones: A Therapeutic Journey for Boys
(formerly: Fairfax Boys Probation House)
10650 Page Avenue
(formerly: 4410 Shirley Gate Road)
Fairfax, VA 22030
(703) 591-0171
Misty Zdanski, Program Director
misty.zdanski@fairfaxcounty.gov

AUDIT DATES:

June 12, 2019

CERTIFICATION ANALYST:

Clarice T. Booker

CURRENT TERM OF CERTIFICATION:

July 14, 2017 – July 13, 2020

REGULATIONS AUDITED:

6VAC35-41 Regulation Governing Juvenile Group Homes

PREVIOUS AUDIT FINDINGS February 17, 2017

97.96% Compliance Rating
6VAC35-41-90 (B) Serious incident reports
6VAC35-41-300 (A) Orientation and training for volunteers or interns
6VAC35-41-460 (A) Maintenance of the buildings and grounds
6VAC35-41-565 (A) Vulnerable populations
6VAC35-41-850 (B) Daily log
6VAC35-41-860 (F) Individual service plan

CURRENT AUDIT FINDINGS – June 12, 2019:

Due to budget constraints the program was required to move out of its building at 4410 Shirley Gate Road and into a new site in a pod unit at Fairfax Juvenile Detention Home at 10650 Page Avenue. The area in the detention center formerly housed The Fairfax Less Secure Program, and later the Transitional Living Program. The area was renovated for Stepping Stones. On June 12, 2019 a physical plant and policies and procedures reviews were conducted. Fire and sanitation inspections were reviewed and there were no violations. The facility was found to be in compliance, and Fairfax administrators are awaiting regulatory approval to move to the new site.

DEPARTMENT CERTIFICATION ACTION July 10, 2019: Approved the relocation of Fairfax Boys Probation House to 10650 Page Road and changed the name to Stepping Stones: A Therapeutic Journey for Boys. Approved the age range of 14 to 18 and set the capacity at 12. The current certification status will remain effective until July 13, 2020.

TEAM MEMBERS:

Clarice T. Booker, Team Leader
John Adams, Central Office
Learna Harris, Central Office

POPULATION SERVED:

Stepping Stones: A therapeutic Journey for Boys (formerly, Fairfax Boys Probation House) is a community-based group home for at-risk adolescent males between the ages of 14 and 18. It has a capacity of 12 residents. The facility is operated by Fairfax County and serves residents and families from Fairfax County, Fairfax City and surrounding Northern Virginia jurisdictions..

PROGRAMS AND SERVICES PROVIDED:

Stepping Stones is a community- based residential treatment program for court-involved males. It offers residents a structured living situation designed to meet the treatment needs of adolescent males who can no longer acceptably control their behavior at home, at school, or in the community, but who can benefit from maintaining regular contact with their family and community.

In addition to all mandated services Stepping Stones provides the following at the facility:

- Individual, group, and family counseling designed to decrease criminogenic risk while increasing functional strengths
- Basic food preparation and sanitation skills
- Life and prosocial skills groups
- Recreation
- Gender specific psychoeducation
- Mental health and substance abuse counseling by licensed or certified staff
- Community supervision on outings, home passes and during the transition phase

Stepping Stones interacts with the community in obtaining such services as:

- Alcohol and drug services
- Mental health services
- Education on-site through Fairfax County Public Schools
- Boy Scouts of America
- Summer Reading Program
- Therapeutic Recreational Program
- Summer Academy

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

Shenandoah Valley Juvenile Center
300 Technology Drive
Staunton, Virginia 24401-3968
Phone # (540) 886-0729
Timothy Showalter, Executive Director
tshowalter@svjc.org

AUDIT DATES:

January 7-8, 2019

CERTIFICATION ANALYST:

Shelia L. Palmer

CURRENT TERM OF CERTIFICATION:

June 9, 2016-June 8, 2019

REGULATIONS AUDITED:

6VAC35-101 Regulation Governing Juvenile Secure Detention Centers

PREVIOUS AUDIT FINDINGS January 26-27, 2016:

99.31% Compliance Rating
6VAC35-101-530 (A). Control of perimeter.
6VAC35-101-770 (A). Recreation

CURRENT AUDIT FINDINGS:

100% Compliance Rating

DEPARTMENT CERTIFICATION ACTION July 30, 2019: Certified Shenandoah Valley Juvenile Center until June 9, 2022, with a letter of congratulations for 100% compliance.

Pursuant to 6VAC35-20-100C.1, if the certification audit finds the program or facility in 100% compliance with all regulatory requirements, the director or designee shall certify the facility for three years.

TEAM MEMBERS:

Shelia L. Palmer, Team Leader
Clarice Booker, Central Office
Deborah Hayes, Central Office
Mark Lewis, Central Office
John Adams, Central Office
Leah Nelson, Central Office
Paul Reaves, Lynchburg Juvenile Detention Center
Kiersten Thomas, Lynchburg Juvenile Detention Center
Shamika Massenburg, Henrico Juvenile Detention Center

POPULATION SERVED:

Shenandoah Valley Juvenile Center (SVJC) is a 58-bed secure detention center operated by the Shenandoah Valley Juvenile Center Commission. The members of the Commission include the

Counties of Augusta, Rockbridge, and Rockingham and Cities of Lexington, Harrisonburg, Staunton, and Waynesboro. The facility serves male and female residents ages seven through 17. The facility serves a pre-dispositional population, Re-entry youths and Community Placement Program (CPP- eight beds). The Shenandoah Valley Juvenile Center is designed around five ten-room pods (one pod accommodates 15-beds). Additionally, there is one three-bed pod primarily designated for female youth. The detention center has seven classrooms, a computer lab, and a gymnasium. Current admissions are by court order only. The program offers a highly structured environment that promotes safety and accountability, while offering skill development and a wide range of services to instill positive attitudes and competencies.

Secure detention care is one of the facets used in the total treatment process for the small minority of juveniles requiring secure custody. It is a specific kind of residential care needed for those juveniles coming in conflict with the law who require secure custody for their own protection or for the protection of the community. Since the purpose and accepted philosophy of the juvenile court is the rehabilitation of juveniles, the detention process must be geared to attain a constructive experience for those detained. The social casework concept of treatment must be an integral part of all phases of living within the detention setting.

The philosophy of SVJC focuses upon providing an effective short-term intervention type of program. Detention should begin the process of rehabilitation and lay the groundwork for later treatment. Above all, the detained juvenile should feel in the staff a warm acceptance of himself or herself and rejection only of their anti-social behavior. The staff's belief in the resident must be a belief in their best characteristics and, on the basis of this belief, in their capacity for change. The staff of SVJC is responsible for providing quality services for a client population that is in a state of crisis. Staff is trained and skilled to successfully provide services to individuals and groups of residents.

The program offers a highly structured environment that promotes safety and accountability while offering skill development and a wide range of services to instill positive attitudes and competencies. The Center provides an educational program under the auspices of the Virginia Department of Education and the City of Staunton School Board. Medical assessments, mental health, and psychiatric services are available on site.

In June 2009, the facility began to accept federal residents from the Office of Refugee Resettlement (ORR), Division of Unaccompanied Children Operations (DUCO). There are on average 20 Federal residents in the detention program. There are four fulltime case managers and four clinicians assigned to this group. They are paid with Federal grant money. All are fluent in Spanish. Prior to the audit, permission was obtained from the ORR for the audit team to review a sample of files for the Federal residents and to interview those residents. The interviews were positive and case files demonstrated no areas of noncompliance with DJJ Regulations.

PROGRAMS AND SERVICES PROVIDED:

In addition to all mandated services, Shenandoah Valley Juvenile Center interacts with the community in obtaining such services as:

Facility Provided:

- Behavior management;
- Case management;
- Education;
- Medical health services;

- Anger management;
- Substance abuse;
- Life skills;
- Mental health counseling;
- Recreation and physical education;
- Social/cultural activities; and
- Music and art therapy

Community (services offered by community agencies and resources):

- Mental health services by the Community Services Board;
 - Sex education program; and
 - Volunteers from various community groups
-

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

The Summit Transitional Living Program
3400 Newby's Bridge Road
Chesterfield, Virginia 23832
(804) 726-8690
Heather Ross, Director
hlrose@intercepthealth.com

AUDIT DATES:

April 30, 2019

CERTIFICATION ANALYST:

Mark Ivey Lewis

CURRENT TERM OF CERTIFICATION:

New Program

REGULATIONS AUDITED:

6VAC35-41 Regulation Governing Juvenile Group Homes and Halfway Houses

PREVIOUS AUDIT FINDINGS

New Program

CURRENT AUDIT FINDINGS – April 30, 2019:

6VAC35-41-180 (A). Employee and volunteer background checks. **CRITICAL**

6VAC35-41-1280 (F). Medication

6VAC35-41-1280 (H). Medication. **CRITICAL**

6VAC35-41-1280 (J). Medication. **CRITICAL**

6VAC35-41-1280 (M). Medication. **CRITICAL**

DEPARTMENT CERTIFICATION ACTION July 30, 2019: Continued the current certification status of Summit Transitional Living Program until December 8, 2019, with a monitoring report from the Certification Unit.

Pursuant to 6VAC35-20-100C.3, if the certification audit finds the program or facility in less than 100% compliance with all critical regulatory requirements or less than 90% on all noncritical regulatory requirements or both, and a subsequent status report, completed prior to the certification action, finds 100% compliance on all critical regulatory requirements and 90% or greater compliance on all noncritical regulatory requirements, the program or facility shall be certified for a specified period of time, up to three years.

TEAM MEMBERS:

Mark Ivey Lewis, Team Leader
Ken Bailey, Central Office
Clarice Booker, Central Office
Shelia Palmer, Central Office
Deborah Hayes, Central Office
Deidre Davis, Central Office
Spring Johnson, Piedmont Juvenile Detention Center
Cindy Hauschildt, New River Valley Juvenile Detention Center

POPULATION SERVED:

The Summit Transitional Living Program facility is a 3,000 sq. ft. residential home situated on 11-acres. This two-level home includes seven (7) total bedrooms (six single and 1 double), four (4) bathrooms, kitchen, living room, dining area, recreation room, access to laundry facilities and staff office. The property also has an additional 2,000 sq. ft. building, which contains for a career/resource room with a computer lab, space for family visitation and multi-use area for recreation and community meetings.

The Summit Transitional Living Program accepts males, ages 17.5 to 21 with a minimum IQ of 65, who are being discharged from a Department of Juvenile Justice commitment. Youth referred to and placed at the transitional living home will demonstrate various levels of risk to reoffend and commonly display the following behaviors and criminogenic and non-criminogenic needs:

1. Criminal history and propensity to commit crimes
2. History of running away from home, foster care, and/or residential placements
3. History of association with anti-social companions
4. Pro-criminal, risky thinking)
5. Antisocial personality such as impulsivity, poor emotional regulation and inadequate decision-making skills
6. Limited coping skills and low frustration toleration
7. Low educational achievement and history of poor school performance
8. History of low family affection/history of poor supervision
9. History of substance abuse
10. History of self-destructive behavior
11. History of mental health diagnoses (such as post-traumatic stress disorder, depression, Oppositional Defiance Disorder, and Attention Deficit Hyperactivity Disorder)
12. Low or limited functioning youth with a minimum IQ of 65
13. Lower levels of job readiness and independent living skills
14. Need for focused intensive transition and community reintegration services
15. History of trauma and exposure to violence
16. Impaired social functioning

PROGRAMS AND SERVICES PROVIDED:

The Summit Transitional Living Program provides the following services to the residents:

- Direct:
 - Aggression Replacement Training (ART)
 - Casey-Life Skills
 - YASI screening
 - Cognitive Behavioral Interventions (CBI)
 - Core Correctional Practices (CCP)
 - Motivational Interviewing
 - The Risk, Need, Responsivity (RNR) Model,
 - Understanding of the Youth Assessment & Screening Instrument (YASI),
 - DJJ's Assessment-Driven Case Planning Practices (Comprehensive Re-Entry Case Plan – CRCP)
 - DJJ's Community Model Utilized in the JCCs,
 - Behavioral Intervention

- Video conferencing for external services and communication (court, family visitation, telehealth)
 - Resource lab with computers and internet access
 - Individual and Family counseling
 - Supervision
 - Treatment planning
 - Psycho-educational groups on independent living skills, substance abuse education, AIDS and sexually transmitted diseases, victim sensitivity, self-esteem, parenting, decision making, anger management, and more
 - Career assessment
 - Employment skills
 - Education skills/support (Not to be confused with teaching. Courses can be accessed in the Resource center, but are NOT offered through/by The Summit)
 - Nutrition/Meal Planning
 - Community engagement
 - Identifying/strengthening relationships with natural supports
 - Facilitating visitation with family and natural supports
 - Transportation support
- Community:
 - Enrichment activities and programs – Various professional and community groups
 - Spiritual programs – Various local spiritual groups
 - AIDS and sexually transmitted disease – Various organizations and community groups such as, Planned Parenthood
 - Transportation
 - Parenting skills – Mentoring; Various community groups
 - Dental/Vision Care – Local provider of choice
 - Medical Care – Local provider of choice (assuming Medicaid or resident private insurance is accepted)
 - Literacy and Math - Local educational institutions; tutors; Penn Foster
 - Social Skills (Program and Community service)
 - Independent Living Skills – Programs identified on an as-needed basis
 - Experiences/Exposure
 - Community: (Services offered by community agencies and resources)
 - Out Patient Service – Additionally purchased service available through Intercept or identified provider of choice
 - ABEL Assessment Sexual Interest (AASI) Screen
 - Affinity 2.5 Sexual Interest Screen
 - Anger Management Intervention
 - Clinical Group
 - Crisis Stabilization
 - Dialectical Behavior Therapy Group
 - Face to Face Surveillance
 - Therapeutic Mentor
 - Family Centered Treatment
 - Gang Intervention

- GPS Electronic Monitoring
- Home-Based Services
- Individual, Group and Family Therapy and relapse prevention for Substance Abuse
- Individual, Group and Family Therapy for youth and relapse prevention with sexualized Behaviors
- Intensive In-Home Services
- Mental Health Skill Building
- Multi-Systemic Therapy
- Non Clinical Group
- Parenting Group
- Psychological Services
- Psycho-Sexual Evaluation
- Restorative Justice
- Seven Challenges Group for Substance Abuse
- Strengthening Families Program
- Substance Abuse Intensive Outpatient Program

**CORRECTIVE ACTION PLAN
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

FACILITY/PROGRAM: Summit Transitional Living Program

SUBMITTED BY: Heather Rose, Director

CERTIFICATION AUDIT DATES: April 30, 2019

CERTIFICATION ANALYST: Mark Ivey Lewis

Under Planned Corrective Action indicate; 1) The cause of the identified area of non-compliance. 2) The effect on the program. 3) Action that has been taken/will be taken to correct the standard cited. 4) Action that will be taken to ensure that the problem does not recur.

6VAC35-41-180 (A). Employee and volunteer background checks. CRITICAL

A. Except as provided in subsection B, all persons who (i) accept a position of employment at, (ii) volunteer on a regular basis and will be alone with a resident in the performance of their duties, or (iii) provide contractual services directly to a resident on a regular basis and will be alone with a resident in the performance of their duties in a juvenile residential facility shall undergo the following background checks, in accordance with § 63.2-1726 of the Code of Virginia, to ascertain whether there are criminal acts or other circumstances that would be detrimental to the safety of residents in the facility:

1. A reference check;
2. A criminal history check;
3. A fingerprint check with the Virginia State Police and Federal Bureau of Investigations

- (FBI);
4. A central registry check with Child Protective Services; and
 5. A driving record check if applicable to the individual's job duties.

Audit Finding:

Two of four new employee background checks reviewed had documentation that the employee started employment at the facility prior to the facility receiving the central registry check with Child Protective Services.

Program Response

Cause:

Policy noted that employees were able to work in training, without direct contact with residents while awaiting FBI/CPS results, as long as fingerprints had been received and reviewed by Human Resources.

Effect on Program:

Program was not in compliance with DJJ regulation, which allowed staff members to potentially have contact with residents prior to all background checks returned.

Planned Corrective Action:

Policy to be updated to ensure that all background checks, to include CPS and fingerprints are returned and reviewed by Human Resources prior to new employees beginning training.

Completion Date: 5/8/2019

Person Responsible:

Whitney Montgomery, Director of Human Resources; Amanda Burnette, Human Resources Compliance

Current Status on May 28, 2019: Not Determined

Summit Transitional Living Program has not hired any new employees since the last audit in April 30, 2019. Personnel procedures was revised stating that "no new employee may be allowed to work with residents or allowed on the Summit House property prior to receipt of all background check results".

6VAC35-41-1280 (F). Medication.

F. All medications shall be administered in accordance with the physician's or other prescriber's instructions and consistent with the requirements of § 54.2-2408 of the Code of Virginia and the Virginia

Audit Finding:

Three of five Medication Administration Records (MAR) reviewed had documentation that the following medications were not administered as prescribed:

- Resident 1

- Minocycline 100 mg was not administered on 4/25-29/19
- Resident 2
 - Cyproheptadine 4mg was not administered on 3/30/19 and 4/15/19 at 8:00 p.m.
 - Mirtazapine 45 mg was not administered on 3/30/19 at 8:00 p.m.
 - Trazodone 100 mg was not administered on 3/30/19 at 8:00 p.m.
 - Apidra (variable based on carbohydrate count) was not administered on 3/21/19, 3/30/19, and 4/5/19 at 6:00 p.m.
- Resident 3
 - Lamotrigine 200 mg was not administered on 3/7/19 at 8:00 a.m. and 3/30/19 at 8:00 p.m.
 - Vitamin D3 was not administered on 4/29/19 at 8:00 a.m.

Program Response

Cause:

Medication Administration Records (MAR's) for the three above named residents had missing documentation (blank spots in the MAR where staff failed to initial, per Medication Administration Policy/Procedure).

Effect on Program:

Without proper staff documentation for all medications administered, there is an increased likelihood of medication errors (dispensing), which could lead to significant medical issues.

Planned Corrective Action:

Utilize policy, as written, which includes daily review of the previous day's MARs by Program Manager or designee in order to catch documentation errors and correct, as well as final monthly review of MARs by Program Manager.

Completion Date:

5/6/2019

Person Responsible:

Eric Tyler, Program Manager

Current Status on May 28, 2019: Compliant

Two of two residents Medication Administration Records (MAR) reviewed had documentation that medication was being administered as prescribed:

6VAC35-41-1280 (H). Medication. CRITICAL

H. In the event of a medication incident or an adverse drug reaction, first aid shall be administered if indicated. Staff shall promptly contact a poison control center, pharmacist, nurse, or physician and shall take actions as directed. If the situation is not addressed in standing orders, the attending physician shall be notified as soon as possible and the actions taken by staff shall be documented. A medical incident shall mean an error made in administering a medication to a resident including the following: (i) a resident is given incorrect medication; (ii) medication is administered to an incorrect resident; (iii) an incorrect dosage is administered; (iv) medication is administered at a wrong time or not at all; and (v) the medication is administered through an

improper method. A medication error does not include a resident's refusal of appropriately offered medication.

Audit Finding:

Three of three applicable medical case files reviewed did not have documentation that a medication incident had occurred for the following:

- Resident 1
 - Minocycline 100 mg was not administered on 4/25-29/19
- Resident 2
 - Cyproheptadine 4mg was not administered on 3/30/19 and 4/15/19 at 8:00 p.m.
 - Mirtazapine 45 mg was not administered on 3/30/19 at 8:00 p.m.
 - Trazodone 100 mg was not administered on 3/30/19 at 8:00 p.m.
 - Apidra (variable based on carbohydrate count) was not administered on 3/21/19, 3/30/19, and 4/5/19 at 6:00 p.m.
- Resident 3
 - Lamotrigine 200 mg was not administered on 3/7/19 at 8:00 a.m. and 3/30/19 at 8:00 p.m.
 - Vitamin D3 was not administered on 4/29/19 at 8:00 a.m.

Program Response

Cause:

As noted above, Medication Administration Records (MAR's) for the three above named residents had missing documentation (blank spots in the MAR where staff failed to initial, per Medication Administration Policy/Procedure). Because MAR's were not initialed, it appears that residents did not receive medications and as such, incident reports should have been completed and were not.

Effect on Program:

There was no effect on the program at this time; however, failure to properly dispense medications may exacerbate psychiatric symptoms or chronic medical symptoms. It is expected that any medication error is documented with an incident report and appropriate parties are notified of the error, as well as being documented in the resident's medical record.

Planned Corrective Action:

Any medication error shall be documented as a Critical Incident and be noted in the resident's medical record. Program Manager shall meet with any staff members who have made medication errors, as defined by policy and provide corrective action, as needed.

Completion Date:

5/6/2019

Person Responsible:

Eric Tyler, Program Manager

Current Status on May 28, 2019: Compliant

Two of two medical case files reviewed had documentation when a medication incident had occurred.

6VAC35-41-1280 (J). Medication. CRITICAL

J. Medication refusals shall be documented including action taken by staff. The facility shall follow procedures for managing such refusals that shall address:

1. Manner by which medication refusals are documented, and
2. Physician follow-up, as appropriate.

Audit Finding:

Two of two applicable medical files reviewed did not have documentation of the action taken by staff for medication refusals.

Program Response

Cause:

Resident medication refusals were documented on the MAR correctly, with circled initials of staff, as well as the date, time, medication, and refusal documented on the back of the MAR. However, there was not a space for residents to sign any acknowledgement that they had been made aware of possible side effects/consequences of their refusal or any other applicable staff actions.

Effect on Program:

No effect on the program to date; however, there was a lack of evidence to show that residents had been counseled regarding potential side effects of refusing prescribed medications.

Planned Corrective Action:

Utilization of new form (Medication/Medical Treatment Refusal form) which indicates resident's acknowledgement/understanding of potential consequences for refusal of medications, medical treatments, and medical appointments. Additionally, if physician follow-up is indicated, this is to be listed on the form, as well.

Completion Date: 5/8/2019

Person Responsible:

Eric Tyler, Program Manager

Current Status on May 28, 2019: Not Determined

There were no incidents during the status review period in which a resident refused their medication.

6VAC35-41-1280 (M). Medication. CRITICAL

M. Syringes and other medical implements used for injecting or cutting skin shall be locked and inventoried in accordance with facility procedures.

Audit Finding:

There was no documentation that the syringes and other medical implements used for injecting or cutting skin which was located in a locked cabinet had been inventoried.

Program Response

Cause:

Medication Inventory Form did not include medical supplies.

Effect on Program:

No effect on the program; however, if "medical implements used for injecting or cutting skin" are not inventoried upon receipt, it is possible that future residents may use them for non-intended purposes such as to self-harm or induce harm on others.

Planned Corrective Action:

Medical Inventory sheet has been updated to include inventory of medications and medical supplies, to include medical implements used for injecting or cutting skin.

Completion Date:

5/8/2019

Person Responsible:

Eric Tyler, Program Manager

Current Status on May 28, 2019: Compliant

There was documentation that all the syringes and other medical implements used for injecting or cutting skin were being inventoried.

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

16th District Court Service Unit
407 E. High Street
Charlottesville, VA 22902
(434) 981-9970
Martha D. Carroll, CSU Director
martha.carroll@djj.virginia.gov

AUDIT DATES:

April 1-2, 2019

CERTIFICATION ANALYST:

Clarice T. Booker

CURRENT TERM OF CERTIFICATION:

September 13, 2016 – September 12, 2019

REGULATIONS AUDITED:

6VAC35-150 Regulations for Nonresidential Services Available to Juvenile and Domestic Relations District Courts

PREVIOUS AUDIT FINDINGS – April 11, 2016

99% Compliance Rating
6VAC35-150-310 (A). Post-dispositional detention

CURRENT AUDIT FINDINGS – April 2, 2019:

89% Compliance Rating
No deficiencies from previous audit.
6VAC35-150-290 Intake communication with detention
6VAC35-150-300 (A) Predispositionally placed juvenile
6VAC35-150-336 (A) Social histories
6VAC35-150-350 (A) Supervision plans for juveniles
6VAC35-150-410 (A) Commitment information
6VAC35-150-420 Contacts during juvenile's commitment

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the 16th Court Service Unit until September 13, 2022 with a status report from Regional Program Manager in June 2020.

Pursuant to 6VAC35-20-100C.3, if the certification audit finds the program or facility in less than 100% compliance with all critical regulatory requirements or less than 90% on all noncritical regulatory requirements or both, and a subsequent status report, completed prior to the certification action, finds 100% compliance on all critical regulatory requirements and 90% or greater compliance on all noncritical regulatory requirements, the program or facility shall be certified for a specified period of time, up to three years.

TEAM MEMBERS:

Clarice T. Booker, Team Leader
Bernadine Abernathy, 10th Court Service Unit (Appomattox)
Matt Bond, 14th Court Service Unit (Henrico)
Janie Grinnan, 26th Court Service Unit (Winchester)
Deborah Hayes, Central Office
Kevin Heller, 27th Court Service Unit (Pulaski)
Mark Lewis, Central Office
Sabrina Lewis, 13th Court Service Unit (Richmond)

Theresa McBride, 4th Court Service Unit (Norfolk)
Shelia Palmer, Central Office

POPULATION SERVED:

The 16th District Court Service Unit serves the Counties of Albemarle, Fluvanna, Goochland, Greene, Louisa, Madison, and Orange; the City of Charlottesville and the Town of Culpeper.

PROGRAMS AND SERVICES PROVIDED:

The 16th District Court Service Unit provides mandated services including:

- Intake
- Probation supervision
- Direct care and parole supervision
- Investigative reports

The Unit interacts with the community in obtaining such services as:

Community Attention Service

Teens GIVE (a supervised service-learning program)

Anger Management

Independent Living Skills

Shoplifting Program

Community Supervision Assessment (full bio/psycho/social/family assessment)

Community Supervision (case management services)

Family check-up

Decision Points

Community service work

Substance abuse assessment and treatment groups

Healthy Choices/Suicide Prevention

Parenting groups

Electronic monitoring

Thinking for a Change

Evidence Based Associates (EBA)

Casey Life Skills/Mentoring

Family Support Partners

Functional Family Therapy

Gang Intervention

Intensive Care Coordination

Home-based Services

Multi-Systemic Therapy

Certified Sex Offender Treatment

Psychosexual Evaluations

Psychological evaluations

Residential Services

Therapeutic Day Treatment

Translation/Interpretation

Trauma Assessment

Trauma-Focused Cognitive Behavioral Therapy

Vocational/Employment Services

**CORRECTIVE ACTION PLAN
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

FACILITY/PROGRAM: 16th District Court Service Unit (Charlottesville)

SUBMITTED BY: Martha D. Carroll

CERTIFICATION AUDIT DATES: April 1-2, 2019

CERTIFICATION ANALYST: Clarice T. Booker

Under Planned Corrective Action indicate; 1) The cause of the identified area of noncompliance. 2) The effect on the program. 3) Action that has been taken/will be taken to correct the standard cited. 4) Action that will be taken to ensure that the problem does not recur.

6VAC35-150-290 Intake communication with detention

When CSU staff facilitate the placement of a juvenile in detention, they shall give detention staff, by telephone, in writing, or by electronic means, no later than the time the juvenile arrives at the detention facility, the reason for detention and the offenses for which the juvenile is being detained including any ancillary offenses. CSU staff shall also give detention staff the following information when available and applicable: medical information; parents' or guardians' names, addresses and phone numbers; prior record as regards sexual offenses, violence against persons, or arson; suicide attempts or selfinjurious behaviors; gang membership and affiliation; and any other information as required by approved procedure.

Audit Finding:

The juvenile alert screen was not completed, printed and retained in the juvenile's case file in accordance with approved procedures in two out of three applicable case records reviewed.

Program Response

Cause:

The cause of the identified area of non-compliance was found to be in two different areas of our intake process. The first area identified is when a detention order is issued and the paperwork is sent to one of the warrant units within the district. When law enforcement executes the detention order on the youth after hours, they failed to contact our office to place the youth in detention. It was discovered detention centers were admitting the youth without contacting our office or on call officer. The second area identified is when no alerts were present. The practice was to document in the narrative no alerts, but the blank alert screen was not printed.

Effect on Program:

This area of non-compliance effected our program by not ensuring each youth who was detained was medically cleared to be placed in the facility. The 16th District CSU wants to ensure each youth is safe. By not screening the alerts for cases with outstanding detention orders, youth were put in jeopardy of being detained inappropriately when they needed to either be medically or psychologically cleared.

Planned Corrective Action:

On 05/31/19 the district held a mandatory training to discuss audit findings. Two major plans were discussed with the staff. The first is a new "Notification of Outstanding Detention Order" document created to be the cover sheet to all detention order packets. The notification document explains to each warrant unit in our district the requirement to contact the CSU or the on-call worker prior to placing the youth in detention. This document will ensure each youth who has an outstanding detention order gets screened and we can complete the alerts. The second corrective action plan is the district has updated the after-hours on call manual to give guidance on how to conduct the alerts. This will ensure every probation officer is aware of the requirements and the steps to take upon completing the alerts. In addition, during the mandatory training and in an email to the staff on 06/07/19, staff were reminded to write "no alerts reported" and print the screen for the file when no alerts are reported by the youth and parents/legal guardian. Furthermore, the intake supervisor will do monthly checks for all detained youths' cases to ensure alerts were completed and placed in the file. This will ensure cases are compliant with the rules as well as finding any other issues that are causing staff not to screen for the alerts.

Completion Date:

The training was conducted on 05/31/19 and an email was sent on 06/07/19. Also quarterly, the intake supervisor will do a district check on detained youth's files to ensure compliance.

Person Responsible:

Supervisor Marc Moore, Intake Supervisor

Current Status on August 19, 2019: Not compliant

The juvenile alert screen was not completed, printed and retained in the juvenile's case file in accordance with approved procedures in two out of three applicable case records reviewed.

6VAC35-150-300(A) Predispositionally placed juvenile

In accordance with approved procedures, a representative of the CSU shall make contact, either face-to-face or via videoconferencing, with each juvenile placed in predispositional detention, jail, or shelter care pursuant to § 16.1-248.1 of the Code of Virginia, within five days of the placement. A representative of the CSU shall make contact with the juvenile at least once every 10 days thereafter either face-to-face or by telephone or videoconferencing. All such contacts shall include direct communication between the CSU staff and the juvenile.

Audit Finding:

There was no documentation of contact within five days of placement in two out of three applicable case records reviewed. There was no documentation of contact at least once every ten days in one out of one applicable case records reviewed.

Program Response

Cause:

The staff at the 16th CSU were seeing youth on the day of the Court Hearing subsequent to being ordered to detention. Staff believed they were conducting a face-to face contact within the five-day requirement.

Effect on Program:

The 16th CSU was not in compliance and received a deficiency in this area. Juveniles who were detained may not have had timely contact with CSU staff, limiting their ability to obtain accurate information about the court process.

Planned Corrective Action:

The 16th CSU has implemented a new rotation of twice per week face-to-face contacts with juveniles for the Rappahanock and Blue Ridge Detention Centers. CSU staff will see youth both on Monday or Tuesdays, and on Thursdays or Fridays every week. The James River facility will be covered by staff on an as needed basis for face-to-face contacts by the probation officers in Goochland or Louisa.

Completion Date:

May 5, 2019

Person Responsible:

Christa Galleo, Marc Moore, Cecilia Gomez-Brown and Sarah Pendleton-Quinones

Current Status on August 19, 2019: Compliant

Three applicable case records were reviewed and all visits were conducted as required.

6VAC35-150-336 (A) Social histories

A social history shall be prepared in accordance with approved procedures (i) when ordered by the court, (ii) for each juvenile placed on probation supervision with the unit, (iii) for each juvenile committed to the Department, (iv) for each juvenile placed in a postdispositional detention program for more than 30 days pursuant to § 16.1-284.1 of the Code of Virginia, or (v) upon written request from another unit when accompanied by a court order. Social history reports shall include the following information:

1. Identifying and demographic information on the juvenile;
2. Current offense and prior court involvement;
3. Social, medical, psychological, and educational information about the juvenile;
4. Information about the family; and
5. Dispositional recommendations, if permitted by the court.

Audit Finding:

Post-dispositional social histories were not completed within the required timeframes in two out of four applicable reports reviewed.

Program Response

Cause:

Delays in completion of reports were impacted by probation officer vacancies in the Charlottesville office.

Effect on Program:

When social histories are not completed in a timely fashion, probation officers may lack valuable information necessary to serve children and families. Information necessary to identify and refer children to the appropriate service providers may be missing.

Planned Corrective Action:

When a social history is assigned, the date for submission of the report will be listed on the assignment cover sheet. Supervisors will review due dates in supervision meetings with probation staff at least twice monthly. OSS's will enter alerts on supervisors' calendars one week prior to report due date.

Completion Date:

06/01/19

Person Responsible:

Christa Galleo, Cecilia Gomez-Brown, Marc Moore and Sarah Pendleton-Quinones

Current Status on August 19, 2019: Compliant

Seven applicable social histories were reviewed and five of the seven were completed within the required timeframes.

6VAC35-150-350 (A) Supervision plans for juveniles

To provide for the public safety and address the needs of a juvenile and that juvenile's family, a juvenile shall be supervised according to a written individual supervision plan, developed in accordance with approved procedures and timeframes, that describes the range and nature of field and office contact with the juvenile, with the parents or guardians of the juvenile, and with other agencies or providers providing treatment or services.

Audit Finding:

Supervision plans were not completed within the required timeframes in three out of seven applicable case files reviewed.

The YASI reassessment was not completed within 180 days in three out of six applicable case records reviewed.

There was no 180-day review by the supervisor in three out of six applicable case records reviewed.

Program Response

Cause:

Supervision plans are required to be completed, with all signatures, within 45 days of a youth being placed on supervised probation. Several staff members were not aware all signatures had to be obtained within 45 days and were just developing the plan, obtaining signatures after the deadline. In addition, some staff were not developing the plan on time.

YASI reassessments are required to be completed within 180 days. Staff members were not consistent in completing reassessments on time. They were not keeping track of due dates, and despite the date of the reassessment being listed on every 90-day supervisory review, they were not reassessing as required. Due to missing 180-day YASI reassessments, the supervisor was not able to complete a 180-day review of the reassessment and plan.

Effect on Program:

Without timely supervision plans, assessments, and reassessments, staff are not able to appropriately provide for the public safety and address the needs of a juvenile and that juvenile's family. A juvenile's risk and criminogenic needs must be identified for supervision to be meaningful and to reduce recidivism.

Planned Corrective Action:

This standard was reviewed and discussed during a full staff meeting on May 31, 2019. Staff were provided with handouts listing and depicting Collaborative Casework Timeframes. The handouts provide guidance for supervision from day one through day 60. In addition, when cases are assigned, the supervisors are requiring the case plans to be submitted by the probation officer to the probation supervisor by day 30 for initial plans and day 150 for YASI reassessments and updated plans. This allows the probation officer 15 days to obtain the youth's and guardian's

signatures on initial plans and 30 days to obtain the youth's and guardian's signatures on updated plans. Upcoming due dates will continue to be highlighted on 90-day supervisory reviews and during regular supervision times with staff.

Completion Date:

This corrective action plan went into effect on May 31, 2019 and is ongoing.

Person Responsible:

CSU Director and Christa Galleo, Marc Moore, Cecilia Gomez-Brown and Sarah PendletonQuinones

Current Status on August 19, 2019:

Not compliant - Supervision plans were not completed within the required timeframes in three out of five applicable case files reviewed.

Compliant - The unit was compliant in completing YASI reassessments within 180 days, and the 180-day review by the supervisor, with six applicable case files reviewed.

6VAC35-150-410 (A) Commitment information

When a juvenile is committed to the Department, the juvenile may not be transported to the Reception and Diagnostic Center (RDC) until (i) the items and information required by the Code of Virginia and approved procedures have been received by RDC and (ii) the case is accepted by RDC.

Audit Finding:

There was no documentation of the initial family meeting in three out of seven applicable case records reviewed.

The Family Domain Cover Sheet of the Comprehensive Re-Entry Case Plan (CRCP) was not completed in three out of seven applicable case records reviewed.

Program Response

Cause:

Failed to properly complete family domain – cover sheet.
Probation Officer failed to make initial contact with family in first 5 days.

Effect on Program:

Youth's family contact information not available upon commitment to JCC, which might prevent visitation set up or contact with parents at initial acceptance to JCC.

Youth and family goals as well as release plans were not established, which causes concerns and delays for youth and family to plan for youth's release.

Planned Corrective Action:

PO's are to complete the family domain coversheet at the time of commitment packet or immediately upon having access to the BADGE document.

Meet with the family and youth at detention the next day and no later than the third day.

Completion Date:

Ongoing

Person Responsible:

Probation/Parole Staff and Christa Galleo, Marc Moore, Cecilia Gomez-Brown and Sarah Pendleton-Quinones

Current Status on August 19, 2019: Compliant

Five applicable case records were reviewed and the unit was compliant in documenting initial family meetings and completing the Family Domain Cover Sheet of the Comprehensive Re-Entry Case Plan.

6VAC35-150-420 Contacts during juvenile's commitment

During the period of a juvenile's commitment, a designated staff person shall make contact with the committed juvenile, the juvenile's parents, guardians, or other custodians, and the treatment staff at the juvenile's direct care placement as required by approved procedures. The procedures shall specify when contact must be face-to-face contact and when contacts may be made by video conferencing or by telephone.

Audit Finding:

Monthly contacts with the juvenile were not documented as a family progress note in three out of seven applicable case records reviewed.

There was no monthly face-to-face contact with the parent or legal guardian in two out of four applicable case records reviewed.

The PO did not convene a meeting with the juvenile, family and service providers within 30 days in two out of five applicable case records reviewed.

The YASI reassessment was not completed within 180 days in five out of seven applicable case records reviewed.

Case staffing were not conducted every 30 days in three out of six applicable case records reviewed.

Supervisory reviews were not completed every 90 days in three out of eight applicable case records reviewed.

Program Response

Cause:

Missed contacts and timely case reviews were impacted by vacant positions.

Effect on Program:

If parents are not seen regularly, they will not understand and be a part of their child's treatment planning. This may impact the child's progress and the success of their return to the community. Lack of case staffing might impact the identification of necessary services and hinder the PO's ability to provide best practices informed casework. It is also crucial for service providers to be included in meetings to ensure that treatment is focused on criminogenic needs. If YASI assessments are not completed, progress will not be identified, which would impact future service planning.

Planned Corrective Action:

Training was provided at an all-district staff meeting on 05/31/19. A parole team will be established for the district and begin meeting effective 07/01/19. It will include parole specialists, senior PO's and probation supervisors. This group will staff cases, audit files and develop unit procedures to ensure compliance. They will assist with implementation of new parole procedures when those are released to the field.

Completion Date:

June 1, 2019

Person Responsible: Parole Officers

PO Supervisors: Christa Galleo, Marc Moore, Cecilia Gomez-Brown and Sarah PendletonQuinones

Current Status on August 19, 2019:

Not Determinable – There were no applicable cases since the audit to determine compliance in the following:

Monthly contacts with the juvenile documented as family progress notes.

Monthly face to face contacts with the parent or legal guardian.

The PO convening a meeting with the juvenile, family and service providers within 30 days.

Compliant – 9 parole cases were reviewed. The unit was found in compliance with the following:

YASI reassessments were completed within 180 days in applicable case records reviewed.

Case staffing were completed every 30 days in applicable case records reviewed.

Supervisory reviews were completed every 90 days in applicable case records reviewed.

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

26th District Court Services Unit
26 Rouss Avenue, Suite 100
Winchester, Virginia 22601
(540) 722-7960
Peter Roussos, CSU Director
Peter.Roussos@djj.virginia.gov

AUDIT DATES:

February 26-27, 2019

CERTIFICATION ANALYST:

Clarice T. Booker

CURRENT TERM OF CERTIFICATION:

July 20, 2016 - July 19, 2019

REGULATIONS AUDITED:

6VAC35-150 Regulations for Nonresidential Services Available to Juvenile and Domestic Relations District Courts

PREVIOUS AUDIT FINDINGS – May 5, 2016:

94.34% Compliance Rating
6VAC35-150-290. Intake communication with detention
6VAC35-150-300 (A). Pre-Dispositionally placed juvenile.
6VAC35-150-336 (A). Social histories.

CURRENT AUDIT FINDINGS – February 27, 2019:

87.3% Compliance Rating
No repeated deficiencies from previous audit
Number of Deficiencies: Seven
6VAC35-150-110 (D) Volunteers and interns
6VAC35-150-300 (B) Pre-Dispositionally placed juvenile
6VAC35-150-336 (B) Social histories
6VAC35-150-350 (A) Supervision plans for juveniles
6VAC35-150-400 Notice of release from supervision
6VAC35-150-410 (A) Supervision plans for juveniles
6VAC35-150-420 Contacts during juvenile's commitment

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the 26th District Court Service until July 19, 2022.

Pursuant to 6VAC35-20-100C.2, if the certification audit finds the program or facility in less than 100% compliance with all regulatory requirements and a subsequent status report, completed prior to the certification action, finds 100% compliance on all regulatory requirements, the director or designee shall certify the facility for a specific period of time, up to three years.

TEAM MEMBERS:

Clarice T. Booker, Team Leader
Deborah Hayes, Central Office
Mark Lewis, Central Office
Sheila Palmer, Central Office
Mary Lynn Pitts, 20th Court Service Unit (Warrenton)

POPULATION SERVED:

The 26th District Court Service Unit serves the cities of Harrisonburg and Winchester and the counties of Frederick, Clarke, Rockingham, Page, Shenandoah, and Warren.

PROGRAMS AND SERVICES PROVIDED:

The 26th District Court Service Unit provides mandated services including:

- Intake
- Probation supervision
- Direct care and parole supervision
- Investigative reports

The Unit interacts with the community in obtaining such services as:

- Community Services Board
 - Comprehensive Services Act
 - Transitional Services (294 Funding)
 - Virginia Juvenile Community Crime Control Act (VJCCCA)
 - Intensive supervision
 - Substance abuse education and treatment
 - Anger management
 - Mentoring
 - In-home counseling
 - Supervision plan services
-

**CORRECTIVE ACTION PLAN
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

FACILITY/PROGRAM: 26th District Court Service Unit (Winchester)
SUBMITTED BY: Peter Roussos, Court Service Unit Director
CERTIFICATION AUDIT DATES: February 26-27, 2019
CERTIFICATION ANALYST: Clarice T. Booker

Under Planned Corrective Action indicate; 1) The cause of the identified area of noncompliance. 2) The effect on the program. 3) Action that has been taken/will be taken to correct the standard cited. 4) Action that will be taken to ensure that the problem does not recur.
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6VAC35-150-110 (D) Volunteers and interns

Volunteers and interns shall be registered with the Department.

Audit Finding:

Three out of four interns were not registered with the Department during the audit period.

Program Response

Cause:

Three of four interns were not added to the Volunteer/Intern registry because the 26th CSU was only granted "read only" access to this file even though access to this file to make

changes/additions was requested back on September 11, 2018. In this email request Ms. Myers was told that the information would be added for her. Please see attached copy of emails.

Effect on Program:

Anything that could jeopardize the safety or well-being of a CSU involved youth is of great concern to us. These standards are in place to protect youth.

Planned Corrective Action:

Access was granted to Ms. Myers to update the Volunteer Registry on March 5, 2019. On this date, all interns were added to the registry.

Completion Date:

March 5, 2019

Person Responsible:

Ms. Randi Myers

Current Status on August 20, 2019: Compliant

The Volunteer Registry was reviewed. Three volunteers were registered for FY 2019 and one volunteer registered for FY 2020.

6VAC35-150-300 (B) Predispositionally placed juvenile

The case of each predispositionally placed juvenile shall be reviewed at least every 10 days in accordance with approved procedures to determine whether there has been a material change sufficient to warrant recommending a change in placement.

Audit Finding:

There was no documentation of a 10-day review in three out of three applicable case records reviewed.

Program Response

Cause:

Depending on the venue of the offense, youth of the 26th CSU are detained in two different detention centers. The first one is Shenandoah Valley JDC located in Staunton and the second is Northwestern JDC in Winchester. It appears that in one case a youth supervised by the Harrisonburg office was detained in Winchester. Unfortunately, this was missed by the supervisor. On the second case, the supervisor was on approved leave and forgot to assign this task to another supervisor. The third case was the responsibility of this Director who in addition to his regular duties had to supervise the Winchester office which is the largest one in our District. The last statement is offered as an explanation and definitely not as an excuse.

Effect on Program:

It gives the impression that a youth could have been held in secure detention when a change of placement was available.

Planned Corrective Action:

Matter will be discussed in detail at the Management Team Meeting on March 20, 2019 and proper Corrective Action(s) will be finalized. (Completed on 3/20/19.)

Whenever a youth is detained, the assigned PO will notify Ms. Stephanie Welch, the

OSS of the Woodstock CSU office, and provide her with the: Name of Youth, JTS Number, Detaining FIPS, Admission Date, Detention Status (including placement in jail) and Next Hearing Date. The OSS will then forward this to the Management Team every Monday by noon. If that Monday happens to be a holiday this task will be completed by noon of the next day. When Ms. Welch is on leave this task will be assumed by Ms. Randi Myers, the Executive Secretary of the 26th CSU.

All CSU staff will be notified of this new procedure by March 29, 2019 through email from this director and by the supervisor of each office as a group or individually.

Completion Date:

March 29, 2019

Person Responsible:

CSU Director, initially and supervisors after that

Current Status on August 20, 2019: Compliant

Five applicable detentions were reviewed and the unit was compliant.

6VAC35-150-336 (B) Social histories

A social history shall be prepared in accordance with approved procedures (i) when ordered by the court, (ii) for each juvenile placed on probation supervision with the unit, (iii) for each juvenile committed to the Department, (iv) for each juvenile placed in a postdispositional detention program for more than 30 days pursuant to § 16.1-284.1 of the Code of Virginia, or (v) upon written request from another unit when accompanied by a court order. Social history reports shall include the following information:

1. Identifying and demographic information on the juvenile;
2. Current offense and prior court involvement;
3. Social, medical, psychological, and educational information about the juvenile;
4. Information about the family; and
5. Dispositional recommendations, if permitted by the court.

Audit Finding:

Postdispositional social history reports were not completed within the required timeframes in accordance with approved procedures in four out of nine applicable reports reviewed.

Program Response

Cause:

This Director erroneously interpreted the procedural memo granting requests for the extension of due dates for Social Histories. Unfortunately, the procedural memo clearly indicated that due dates for Pre-Dispositional Social Histories could be extended but not Post-Dispositional Social Histories.

Effect on Program:

By having all case specific information earlier, the supervising PO would be much more aware of facts and details, so appropriate services for the youth can be secured.

Planned Corrective Action:

Discuss matter in Management Team Meeting and formulate appropriate corrective action. This Director will inform entire district of this by email.

Completion Date:
March 29, 2019

Person Responsible:
CSU Director Roussos

Current Status on August 20, 2019: Compliant
Nine postdispositional social history reports were reviewed and all were compliant.

6VAC35-150-350 (A) Supervision plans for juveniles

To provide for the public safety and address the needs of a juvenile and that juvenile's family, a juvenile shall be supervised according to a written individual supervision plan, developed in accordance with approved procedures and timeframes, that describes the range and nature of field and office contact with the juvenile, with the parents or guardians of the juvenile, and with other agencies or providers providing treatment or services

Audit Finding:

The case narrative did not include entries indicating that the case plan was jointly developed by the probation officer, juvenile and family in accordance with approved procedures in six out of eight applicable case records reviewed.

Program Response

Cause:

Both veteran and less experienced POs forgot to document that the supervision plan was jointly developed by the right parties. The proper language was not included.

Effect on Program:

This gives the erroneous impression that the youth and family were not included in the development of the supervision plan.

Planned Corrective Action:

This matter will be discussed in detail with the Management Team. This Director will send an email to the entire District about this matter. Supervisor will review this matter in individual supervision sessions.

Completion Date:
March 29, 2019

Person Responsible:
Supervisors

Current Status on August 20, 2019: Compliant
Three applicable cases were reviewed and the case narrative included entries that the case plan was jointly developed by the probation officer, juvenile and family.

6VAC35-150-400 Notice of release from supervision

Notice of release from supervision shall be given in writing to the individual under the supervision of a CSU and to the parents or guardians of juveniles. Such notification shall be appropriately documented in the case record in accordance with approved procedures.

Audit Finding:

There was no documentation of the supervisor's approval in recommending releases from supervision to the court in accordance with approved procedures in two out of five case records reviewed.

Program Response

Cause:

All recommendations for the release of a youth from probation are discussed/staffed by the PO with his/her supervisor. It appears that missing was proper language documenting this in BADGE.

Effect on Program:

It gives the unfortunate impression that a recommendation for release from probation was a unilateral decision. Supervisor input is crucial when major decisions such as this are made.

Planned Corrective Action:

This matter will be discussed in Management Team meeting.

This Director will inform the entire District of the need to address this matter. Supervisors will further discuss this in individual supervision sessions. Additionally, this will be discussed by this Director with each Supervisor in individual supervision sessions. Finally, all cases that were recommended for release from probation between 3/29/19 and 5/29/19 will be forwarded to this Director who will review the case to ensure that this issue had been properly addressed and documented. The CSU Director will document this in BADGE.

Completion Date:

Ongoing from 3/29/19 to 5/29/19

Person Responsible:

Supervisors, Director

Current Status on August 20, 2019: Compliant

One applicable case was reviewed and there was documentation of the supervisor's approval in recommending the release.

6VAC35-150-410 (A) Supervision plans for juveniles

When a juvenile is committed to the Department, the juvenile may not be transported to the Reception and Diagnostic Center (RDC) until (i) the items and information required by the Code of Virginia and approved procedures have been received by RDC and (ii) the case is accepted by RDC.

Audit Finding:

The cover letter did not address the names of any known committed juveniles with whom contact with the newly committed juvenile may be problematic, and names of any committed family members in two out of four applicable case files reviewed.

Program Response

Cause:

Due to lack of communication some staff had used an outdated commitment letter format.

Effect on Program:

It could have easily caused safety/security issues for the Department while youth was in Direct Care.

Planned Corrective Action:

This matter will be discussed in Management Team meeting. This Director will inform the entire District of the need to address this matter. Supervisors will discuss this in individual supervision sessions. Furthermore, this will be discussed by this Director with each Supervisor in individual supervision sessions. Finally, in all cases of youth committed to DJJ between March 29 and May 29, 2019, the Probation Officer and Supervisor will forward the cover letter to this Director for his review. He will review the case and ensure that this issue had been properly addressed and documented. He will document this in BADGE.

Completion Date:

Ongoing from 3/29/19 to 5/29/19

Person Responsible:

Supervisors/Director

Current Status on August 20, 2019: Compliant

Three applicable commitment cover letters were reviewed and addressed the required information.

6VAC35-150-420 Contacts during juvenile's commitment

During the period of a juvenile's commitment, a designated staff person shall make contact with the committed juvenile, the juvenile's parents, guardians, or other custodians, and the treatment staff at the juvenile's direct care placement as required by approved procedures. The procedures shall specify when contact must be face-to-face contact and when contacts may be made by video conferencing or by telephone.

Audit Finding:

There was no documentation that all the required elements were reviewed during the monthly contact with the juvenile in six out of seven applicable case records reviewed.

There was no documentation of the monthly contact as a verbal family progress note in the Caseload Management module of BADGE in six out of seven applicable case records reviewed.

There was no documentation that one or more required elements were reviewed with the family during the monthly contact in four out of seven applicable case records reviewed.

Not all contacts were coded as family progress reports in five out of six applicable case records reviewed.

There was no documentation that the date for the following month was determined in each monthly contact in five out of six applicable case records reviewed.

There was no documentation that the CRCP was reviewed and revised within the required timeframes in three out of four applicable records reviewed.

There was no documentation that rules of parole were reviewed and signatures obtained prior to release from the JCC or alternative placement in three out of five applicable case records reviewed.

There was no documentation that the juvenile signed the CRCP prior to release from the facility in four out of five applicable case records reviewed.

There was no documentation that the parent or legal guardian signed the CRCP no later than five days following the juvenile's release in four out of five applicable case records reviewed.

Supervision was not provided in accordance with the parole supervision matrix and the CRCP in two out of five applicable case records reviewed.

Case staffings were not conducted within the required timeframes in four out of seven applicable case records reviewed.

Program Response

Cause:

We consider this a major failing on our part, from the PO to the Director. The complexity of the Re-Entry and Intervention Manual has not helped matters but ultimately it falls on our shoulders, especially mine.

Effect on Program:

It definitely gives the impression that the necessary work was not completed. Being familiar with the main Parole Officer of the 26th CSU prompts me to conclude that excellent case management took place by a professional who actually cares about her clients and their success. Unfortunately, incomplete documentation gives a completely different impression.

Planned Corrective Action:

The main Parole Officer of the 26th CSU will participate in the Northern Region Parole Group.

Completion date:

Next meeting has not been scheduled. Will be ongoing.

The 26th CSU will organize its own Parole Group. It will be led by Supervisor LeGrys and its membership will include all CSU staff presently supervising youth in Direct Care or Parole. The group will review in detail and discuss the 2016 "Re-Entry and Intervention Manual for Committed and Paroled Juveniles". The group will meet every 2 weeks.

Completion date:

Group will start meeting on April 15, 2019.

A request has been made for our main Parole Officer to attend the Parole/Residential Module portion of Basic Skills. This request was approved and Ms. Casarotti will attend the first available session which is scheduled for August 2019.

This CSU Director will organize a Parole training event for the entire Northern Region.

Completion Date:

May 1, 2019

The 26th CSU has created 8 Word documents that will be used as templates to enter into BADGE the types of contact outlined by the Re-Entry Manual. These templates include:

- a. Initial Family Meeting
- b. Initial Re-Entry Meeting
- c. CPCP Reviews
- d. Initial Staffing Meeting
- e. Contacts with the Family
- f. Contacts between the PO, Juvenile and Counselor
- g. Transition Re-Entry Meeting
- h. Thirty (30) days Prior to Release (Please see attached.)

Completion Date:

Please see above.

Person Responsible:

CSU Director, Supervisors

Current Status on August 20, 2019:

Not Determinable - There were no applicable cases since the audit to determine compliance in the following:

The CRCP was reviewed and revised within the required timeframes.

The rules of parole were reviewed and signatures obtained prior to release from the JCC or alternative placement.

The juvenile signed the CRCP prior to release from the facility .

The parent or legal guardian signed the CRCP no later than five days following the juvenile's release.

Compliant – The unit was found in compliance with the following:

All the required elements were reviewed during the monthly contact with the juvenile in two applicable case records reviewed.

There was documentation of the monthly contact as a verbal family progress note in two applicable case records reviewed.

There was documentation that all the required elements were reviewed with the family during monthly contacts in two applicable case records reviewed.

Contacts were coded as family progress reports in two applicable case records reviewed.

The date for the following month was determined in monthly contact meetings in two applicable case records reviewed.

Supervision was provided in accordance with the parole supervision matrix and the CRCP in three applicable case records reviewed.

Case staffings were completed every 30 days in applicable case records reviewed.

**CERTIFICATION AUDIT REPORT
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

PROGRAM AUDITED:

Chesterfield Juvenile Detention Home
9700 Krause Road
Chesterfield, Virginia 23832
Phone # (804) 748-1460
Marilyn Brown, Director
brownmag@chesterfield.gov

AUDIT DATES:

May 6-7, 2019

CERTIFICATION ANALYST:

Shelia L. Palmer

CURRENT TERM OF CERTIFICATION:

October 28, 2016-October 27, 2019

REGULATIONS AUDITED:

6VAC35-101 Regulation Governing Juvenile Secure Detention Centers

PREVIOUS AUDIT FINDINGS – May 17, 2016:

100% Compliance Rating

CURRENT AUDIT FINDINGS – May 7, 2019:

99.36% Compliance Rating

No repeated deficiencies from previous audit.

Number of deficiencies: Two

6VAC35-101-1060 (J). Medication. CRITICAL

6VAC35-101-1100(B) Room confinement and isolation

DEPARTMENT CERTIFICATION ACTION October 21, 2019: Certified the Chesterfield Juvenile Detention Center and Post-Dispositional Program until October 28, 2022.

Pursuant to 6VAC35-20-100C.2, if the certification audit finds the program or facility in less than 100% compliance with all regulatory requirements and a subsequent status report, completed prior to the certification action, finds 100% compliance on all regulatory requirements, the director or designee shall certify the facility for a specific period of time, up to three years.

TEAM MEMBERS:

Shelia L. Palmer, Team Leader
Clarice Booker, Central Office
Mark Lewis, Central Office
Deborah Hayes, Central Office
Deidre Davis, Central Office
John Adams, Central Office
Kelsey Wong, Shenandoah Valley JDC
Leviticus Bass, Prince Will County
James Doyle, Crater JDC
Larry Bynum, Prince William County JDC

PROGRAM DESCRIPTION

Chesterfield Juvenile Detention Home provides a highly structured program of care to meet the physical, educational, and medical needs of the juveniles detained. The safety and security of the community as well as the residents and staff of the detention home are the primary objectives.

Chesterfield Juvenile Detention Home recently adopted purpose statement is "To provide a safe, secure and supportive environment for court-involved youth with the goal of promoting individual growth through education and empowerment".

POPULATION SERVED:

The Chesterfield Juvenile Detention Home originally constructed in 1973 as a 33-bed facility but later expanded and renovated in 2003 with 90 beds, provides safe and secure housing of male and female juveniles age 7-17 pre-dispositional and post-dispositional before the courts in Chesterfield County and the City of Colonial Heights. The Chesterfield Juvenile Detention Home also serves the Department of Juvenile Justice with the Central Admission and Placement Unit (CAP) and the Community Placement Program (CPP). The facility also serves juveniles age 18 in the Post-Dispositional Program and the Community Placement Program. The Chesterfield Juvenile Detention Center has allotted eight beds for the Post-Dispositional Program and eight beds for the Community Placement Program.

PROGRAM AND SERVICES PROVIDED:

- Facility: (Services offered by facility staff)
- CJDH School Program
- Recreation
- Food Service
- Medical
- Behavior Management Program with 3 Levels (progressive incentives with higher levels)
- Psycho-Educational Groups conducted by CJDH Senior Mental Health Clinician, MHSS Mental Health Case Manager and youth supervisors
- Crisis Counseling and Support – Provided by both CJDH Senior Mental Health Clinician and Mental Health staff assigned to CJDH but employed by Chesterfield Department of Mental Health Support Services
- Reading Program
- Homework Period
- Structured Free Time (table games, cards, letter writing, phone calls)
- Specialized Programming for Summer Enrichment, Winter, and Spring Breaks (yoga, art, cooking, musical theatre, etc.)

- Community Placement Program:
 - Individual and Group Counseling
 - Moral Reconation Therapy (MRT)
 - Aggression Replacement Training (ART)
 - "Staying Quit" – substance abuse component of MRT
 - Therapeutic Fitness Program
 - Extended Visitations and Family Events
 - Special Events and Community-based Outings

- Post-d Program:
 - Individual and Group Counseling
 - Moral Reconciliation Therapy (MRT)
 - Aggression Replacement Treatment (ART)
 - "Staying Quit" – substance abuse component of MRT
 - Community Service
 - Parent Counseling
 - Therapeutic Fitness Program
 - Partnership with CSU to share cost of Family Resources Coordinator to allow transition/aftercare for post-d residents to begin 30 days prior to release and 90 days post-release
 - Extended Visitations and Family Events
 - Special Events and Community-based Outings
 - Furloughs

 - Community: (Services offered by community agencies and resources)
 - Crisis Counseling and Support – Mental Health staff assigned to CJDH but employed by Chesterfield Department of Mental Health Support Services
 - Library Activities– partnership with Chesterfield County Public Libraries
 - Activities provided by Volunteers (Church Groups) and Guest Speakers including AA (optional)
 - On-site STD testing and treatment – partnership with Chesterfield Health Department and Virginia Department of Health
 - Caring Canines – monthly visits from therapy dogs
-

**CORRECTIVE ACTION PLAN
TO THE
DEPARTMENT OF JUVENILE JUSTICE**

FACILITY/PROGRAM: Chesterfield Juvenile Detention Center

SUBMITTED BY: Marilyn G. Brown, Director

CERTIFICATION AUDIT DATES: May 6-7, 2019

CERTIFICATION ANALYST: Shelia L. Palmer

Under Planned Corrective Action indicate; 1) The cause of the identified area of non-compliance. 2) The effect on the program. 3) Action that has been taken/will be taken to correct the standard cited. 4) Action that will be taken to ensure that the problem does not recur.

6VAC35-101-1060 (J). Medication. CRITICAL

J. Medication refusals shall be documented including action taken by staff. The facility shall follow procedures for managing such refusals which shall address:

1. Manner by which medication refusals are documented; and
2. Physician follow-up, as appropriate.

Audit Finding: Non-Compliant

One of two applicable medication refusals reviewed did not have documentation of action taken by staff.

Program Response

Cause:

Our part-time nurse neglected to document that she had counseled the resident on the importance of taking his medications upon his refusing to do so.

Effect on Program:

There was no effect on the program as our nurses spend a great deal of time getting to know the children, engaging them in conversations around their well-being and the importance of taking their medications as prescribed.

Planned Corrective Action:

To ensure that our nurses as well as our staff who are authorized to administer medications document that they have discussed the implications of medication refusals with the residents, we have added a section to the Medication Aide Reviewer Checklist and the Medication Refusal Form for Nursing Staff that states:

- Youth was encouraged to take medication(s) as prescribed by provider and youth was counseled regarding benefits of medication compliance.
_____ (initials of staff)

Completion Date:

The changes to the forms went into effect June 12, 2019.

Person Responsible:

Denise Kelly, Nurse Supervisor

Current Status on August 5, 2019: Compliant

Three of three application medication refusals reviewed documented the action taken by staff.

6VAC35-101-1100(B) Room confinement and isolation

Whenever a resident is confined to a locked room, including but not limited to being placed in isolation, staff shall check the resident visually at least every 30 minutes and more often if indicated by the circumstances. Staff shall conduct a check at least every 15 minutes in accordance with approved procedures when the resident is on suicide watch.

Audit Finding: Non-Compliant

One or more 30 minute room checks were missing initials that room checks were made or were late in five out of 13 applicable confinement reports reviewed.

Program Response

Cause:

When Chesterfield JDC purchased the SoftTec JCS case management system several years ago, we were very excited to transition our room check system to their handheld mobile devices, so that the confirmation of the room checks would "live" in the same system as all of the resident information. We have been struggling with the handheld devices as the devices themselves have

malfunctioned and when the County rolls out operating system upgrades such as Windows 10, there are even more complications with compatibility issues. Because of these issues, we have maintained a back-up paper system. Unfortunately, while staff have been religiously conducting the room checks, they were not always getting credit due to download glitches or other malfunctions. Staff were late with a few room checks because they would have to return to the pod to pick up a new device when the one they originally had malfunctioned. The bottom line is that we did not have a reliable system that ensured our staff's success. We had been optimistic that upgraded devices and new software would address the reliability issues, but they have not at this point.

Effect on Program:

While the residents were being checked on, the documentation was not supporting that, and while there was no negative impact on the residents, the current redundant and unreliable system left us with incomplete documentation.

Planned Corrective Action:

We assembled a process improvement team, comprised of an administrator, our Quality Assurance Coordinator and two of our Shift Coordinators. The team did research, benchmarked with other facilities, and made a recommendation to administration that we adopted. Effective June 3, 2019, we transitioned to an all-paper documentation system. Individual room check sheets are placed on the resident's door for staff to document room checks as well as meals served, administrative visits, shower and hygiene time, medical staff checks, recreation time given, and any other pertinent information. Completed room check sheets are reviewed and then placed in the resident's file. We also built in a system for quality assurance checks which requires administrators and managers to cross-reference checks with camera footage and complete a QA form for each day of the week.

Completion Date:

June 3, 2019

Person Responsible:

Marilyn Brown, Director

Current Status on August 5, 2019: Compliant

Seven of seven confinement reports reviewed documented one or more 30-minute room checks with initials.



Valerie P. Boykin
Director

COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

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MEMORANDUM

TO: State Board of Juvenile Justice

FROM: Virginia Department of Juvenile Justice

SUBJECT: Request Extension of Variance Applicable to New River Valley Juvenile Detention Center;
Control Room

DATE November 13, 2019

I. SUMMARY OF ACTION REQUESTED

The Department of Juvenile Justice (the department) respectfully requests the State Board of Juvenile Justice (board) to approve an extension of the variance submitted on behalf of the New River Valley Juvenile Detention Center (New River). The board last approved a variance regarding this issue on January 7, 2014, effective through the end of 2019. New River is seeking an extension of the variance to exempt the facility and its staff from meeting the requirements applicable to secure juvenile detention centers regarding control centers set out in 6VAC35-101-520.

II. BACKGROUND

On January 7, 2014, the board granted New River an extension on the facility's existing variance to the regulatory requirement contained in 6VAC35-101-520. The regulation provides:

To maintain the internal security, a control center that is secured from residents' access shall be staffed 24 hours a day and shall integrate all external and internal security functions and communications networks.

According to the variance request, New River does not have a "control center" as contemplated in this regulatory provision and has not been able to meet the requirements of 6VAC35-101-520 for several years. The board granted New River a variance in order to allow the facility's continued operation without the mandated control center.

IV. RATIONALE

New River asserts that while the facility does not meet the existing requirements in 6VAC35-101-520, the facility's practices continue to comply with the spirit of the regulatory provision.

The purpose of the regulatory requirement, as set forth in the Department's Compliance Manual, is to "ensure that residents have a safe and secure environment." The regulation requires secure juvenile detention centers to accomplish this in part by each operating a secure control center that acts as a hub for the facility's internal and external security and communications functions. Each of the other 23 juvenile detention centers have more modern facilities with electronic locking and unlocking capability for gates and doors on the premises, closed circuit televisions and intercom devices for monitoring residents, and other communication devices, all of which are operated and monitored within the facility's central control room.

In contrast, since its inception in 1974, New River has never had a control center; therefore, its essential security and communications functions are accomplished using alternative means. The facility does not utilize an automated locking system for locking and unlocking doors and gates on the premises. Instead, staff, teachers, and in-house mental health workers each receive a set of work keys daily that operate internal doors within the facility, and staff are able to unlock and relock doors as needed. Except in emergencies, exterior doors are immediately accessible only to administrators. Keys are inventoried and controlled, and key rings are tamper proof and must be cut in order to replace or remove keys. Key sets that are not in use are stored in locked key cabinets, and staff must account for each key during security checks. Residents may not handle or touch keys or lock or unlock doors or cabinets within the facility.

Perimeter control is also the responsibility of staff on duty. When visitors approach the main or side intake entrance and ring the bell, it sounds throughout the entire facility. Reception staff handle public visitors through the front entrance during regular business hours. During off business hours or when individuals (e.g., law enforcement for intake) approach the side intake door, the Shift Supervisor on duty or his designee responds to the bell.

New River also has over 40 cameras strategically placed internally and externally throughout the premises, as well as numerous television monitors that shift supervisors, the superintendent, the deputy superintendent, the principal, and reception staff observe to monitor resident activity. In addition to video monitoring, the facility consistently meets and frequently exceeds the staffing ratios of 1:8 during resident waking hours and 1:16 during resident sleeping hours. Pursuant to the facility's written procedures, residents must remain in sight and sound supervision of staff while moving within the facility and always must be escorted by at least one staff member. Staff also supervise residents using an intercom system that is monitored 24 hours per day, seven days per week, and is accessible remotely via a wireless monitor that a floor staff carries.

Staff communication at New River is accomplished primarily through a two-way radio system that is used to coordinate resident movement, call for assistance, or indicate a change in staff presence. A multi-line telephone system also is available for contact with staff or the community, and if this system fails, staff can make outside calls to the community through the facility's emergency cell phone.

New River's current physical plant limitations make the establishment of a control center that complies with the regulatory requirements infeasible. Due to declining populations, the facility has postponed indefinitely its plan

to renovate the facility to add a control room that complies with regulation. Furthermore, the facility's procedures governing key control, communications, and staff supervision effectively eliminate the need for the control room and for its continued staffing. New River is able to carry out the functions of security and communications without having a secure control room.

III. PROPOSED VARIANCE

The proposal would extend the variance granted in 2014, which is set to expire on December 31, 2019. Under the proposed variance, New River Valley will be authorized to continue its current supervision protocol without renovating the facility to add a new room that "integrates all external and internal security functions and communication networks."

The language of the proposed variance is as follows:

6VAC35-101-520. Control center.

A. To maintain the internal security, a control center that is secured from residents' access shall be staffed 24 hours a day and shall integrate all external and internal security functions and communications networks.

B. The provisions of this section shall not apply to the New River Valley Juvenile Detention Home.

VI. DURATION OF VARIANCE

Because compliance with the existing regulatory requirement is contingent upon renovations to the facility, New River is requesting that the board renew the current variance on a permanent basis or until the facility undergoes renovations, whichever occurs first. The workgroup reviewing the Regulations Governing Juvenile Secure Detention Centers considered incorporating this exception into the proposed amendments; however, the committee ultimately declined this amendment because the circumstances are unique to New River and do not apply to other detention centers in Virginia.

**Department of Juvenile Justice
Human Research
FY 2019**

Regulations

On February 9, 2005, 6 VAC 35-170, *Minimum Standards for Research Involving Human Subjects or Records of the Department of Juvenile Justice*, adopted by the Board of Juvenile Justice, became effective. These regulations require the establishment of a Human Research Review Committee and set out the conditions required for approval of external research proposals. Select sections of the regulations are included below to provide an overview of the review process:

6VAC35-170-130. Human Research Review Committee

A. In accordance with § 32.1-162.19 of the Code of Virginia, the department shall establish a human research review committee composed of persons of various backgrounds to ensure the competent, complete and professional review of human research activities conducted or proposed to be conducted or authorized by the department. No member of the committee shall be directly involved in the proposed human research or have administrative approval authority over the proposed research except in connection with his role on the committee.

6VAC35-170-150. Committee review of human research proposals.

In reviewing the human research proposal, the committee will consider the potential benefits and risks to the human subjects, and shall recommend approval only when the benefits outweigh the risks. In addition, the committee shall recommend approval only when:

1. The methodology is adequate for the proposed research;
2. The research, if non-therapeutic, presents no more than a minimal risk to the human subjects;
3. The rights and welfare of the human subjects are adequately protected;
4. Appropriate provisions have been made to get informed consent from the human subjects, as detailed in 6VAC35-170-160;
5. The researchers are appropriately qualified;
6. The criteria and means for selecting human subjects are valid and equitable; and
7. The research complies with the requirements set out in this regulation and in applicable department policies and procedures.

6VAC35-170-50. Conditions for department approval of external research.

A. The department may approve research projects only when it determines, in its sole discretion, that:

1. The department has sufficient financial resources and staff to support the research project, and that on balance the benefits of the research justify the department's involvement;
2. The proposed research will not interfere significantly with department programs or operations, particularly those of the operating units that would participate in the proposed research; and
3. The proposed research is compatible with the purposes and goals of the juvenile justice system and with the department's organization, operations, and resources.

6 VAC 35-170-190. Committee reports required.

A. In accordance with § 66-10.1 of the Code of Virginia, the Human Research Review Committee shall submit to the Governor, the General Assembly, and the director at least annually a report on human research projects approved by the committee and the status of such research, including any significant deviations from the proposals as approved.

B. The committee shall also annually submit to the Board of Juvenile Justice the same report as required by subsection A.

Human Research Review Committee

During FY 2019, the Department of Juvenile Justice's (DJJ) Human Research Review Committee (HRRC) was comprised of members from various backgrounds.

- Jessica Schneider, Ph.D. (Chair) – Research Manager, DJJ
- Robin Binford-Weaver, Ph.D. – Director, Behavioral Services Unit, DJJ
- Vince Butaitis – Director, 15th Court Service Unit, DJJ
- Will Egan – Policy Analyst, Virginia Commission on Youth
- Michael Favale – Legislative & Policy Director, DJJ
- Alan Hullette – Superintendent, Roanoke Valley Juvenile Detention Center
- Rebecca Smith – Graduate Student, Virginia Commonwealth University
- Lara Todd – Education Administrative Hearings Specialist, DJJ

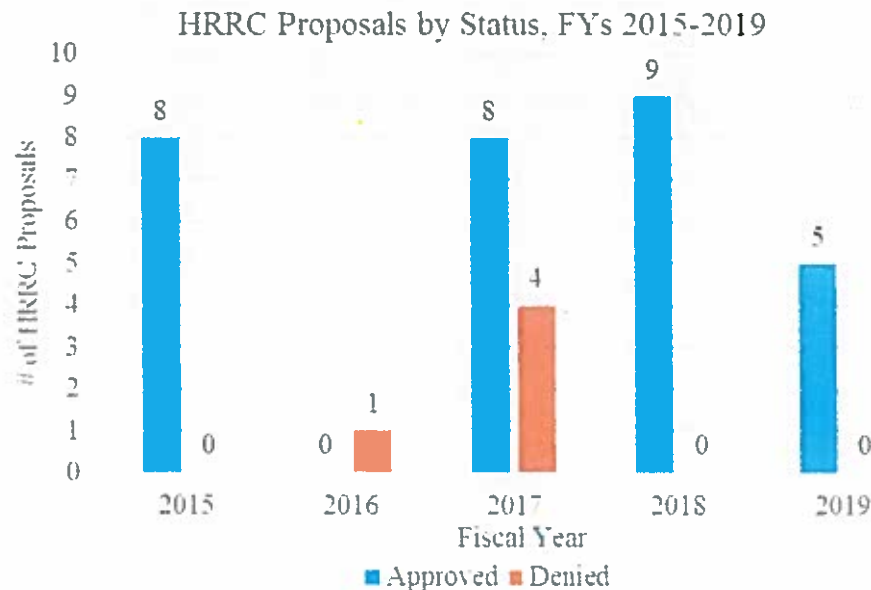
DJJ Research Analyst Dhara Amin, Ph.D., serves as the Coordinator of External Research.

In addition to reviewing the human subjects research studies as defined in the Regulations, a sub-committee of the HRRC reviews research proposals involving de-identified case-specific data. The following report includes research projects involving either human subjects or de-identified case-specific data.

In accordance with § 32.1-162.19, *Human research review committees*, an executive summary of completed projects can be found in Appendix A.

I. Research Proposals

In fiscal year (FY) 2019, DJJ received eight research proposals. Of these, the HRRC and the Director approved five. At the time of this report, two proposals were pending a review decision, one proposal was closed administratively, and no proposals were denied.



* The graph above represents the number of research proposals. Proposals were counted by the most recent submission date, including amendments.

* The two research proposals pending and one research proposal administratively closed in FY 2019 are not included in the graph above.

II. Active Studies

In addition to the studies approved in FY 2019, 19 research studies approved in previous years remained active. The 24 active studies are summarized below:

Evaluation of the Office of Juvenile Justice and Delinquency Prevention (OJJDP) FY 2010 Second Chance Act Juvenile Offender Reentry Demonstration Projects

Researcher: Akiva Liberman

Institution: Urban Institute

Approval Date: July 21, 2014 (first); May 5, 2015 (most recent)

The purpose of the study was to evaluate the implementation and outcomes of five OJJDP FY 2010 *Second Chance Act* juvenile demonstration programs, including the Tidewater, Virginia, Reentry Initiative. The researcher conducted implementation and cost analyses through process evaluations of program materials, evaluations on the use of evidence-based practices, interviews with staff and stakeholders, and focus groups with program participants and their parents. The researcher evaluated the impact of the program by interviewing youth within 45 days of release from a juvenile correctional center (JCC) and again within eight months of release. Outcome measures, including satisfaction levels, recidivism, and school data, were used to evaluate program impact and

performance. A draft of the final report was submitted to the National Institute of Justice (NIJ) in August 2019 and is pending approval. The results indicate that youth who participated in the Juvenile Second Chance Act projects had lower rearrest and conviction rates.

Development and Validation of an Actuarial Risk Assessment Tool for Juvenile Sex Offenders

Researcher: KiDeuk Kim

Institution: Urban Institute

Approval Date: February 9, 2015

The purpose of the study was to develop and validate a risk assessment tool for juvenile sex offenders and to examine the effects of sex offender intervention services provided in the JCCs. The researcher requested demographic, criminal history, treatment services, and Youth Assessment Screening Instrument (YASI) data from DJJ. Using this data, the researcher aimed to identify factors predictive of sexual offending among juvenile offenders and eventually develop a risk assessment. The researcher found that when one risk prediction model performed well in one setting, it often classified individuals in another setting differently (e.g., high risk individuals would be identified as low risk). The researcher recommended that DJJ avoid utilizing “off-the-shelf” assessment tools without extensive customization, including updating the weights of the various predictor variables. A risk assessment tool was not created nor provided by the researcher.

***Cognitive Behavioral Interventions for Medium- and High-Risk Juvenile Offenders:
Practitioner-Researcher Partnership Project***

Researcher: KiDeuk Kim

Institution: Urban Institute

Approval Date: April 17, 2015

The purpose of the study was to examine the implementation and impact of two treatment modalities, Aggression Replacement Therapy (ART) and modified Dialectical Behavior Therapy (DBT), on committed juveniles’ attitudes, behaviors, and recidivism. Juveniles designated as having an aggression management treatment need were randomly assigned to participate in one of the two treatment modalities. Staff members who provided treatment participated in interviews regarding their experiences and perceptions of the treatment modalities. There were 429 surveys collected from youth who participated. The researcher found that DBT moderately reduced rearrest rates; however, the differences were not statistically significant.

Examining Probation Outcomes and Changes in Risk

Researchers: JoAnn Lee, Faye Taxman, and Mark Murphy

Institution: George Mason University and DJJ

Approval Date: March 7, 2016

The purpose of the study is to examine the effects of juveniles’ risk-need profiles, changes in risk-need profiles, and services on juveniles’ probation outcomes. Juveniles’ risk-need profiles are the YASI risk and protective scores and legal, family, and substance use domain scores. The researchers will examine probation outcomes in the form of recidivism data for one full year. DJJ delivered data to the researchers on July 20, 2017, and an updated data set on June 29, 2018. As of June 2019, the researchers have begun to analyze the data.

Virginia Department of Juvenile Justice
Human Research, FY 2019

Neural Correlates of Adolescent Preferences and Perceptions of Risk

Researchers: Brooks King-Casas and Nina Lauharatanahirun (student)
Institution: Virginia Tech Carilion Research Institute
Approval Date: December 1, 2016

The purpose of the study was to examine how adolescents perceive risk and make decisions about risky behavior. The researchers recruited youth involved in any capacity with CSUs 23 and 23A. The researcher wanted to compare this sample to a sample of non-justice-involved youth of the same ages. Youth completed a series of psychological/behavioral questionnaires while undergoing a functional magnetic resonance imaging (fMRI) by trained technicians. While receiving the fMRI, youth completed risk perception and risky decision-making tasks. The fMRI detects cerebral blood flow to different brain regions during these tasks. As of January 2018, five youth have participated and completed the study. Due to recruitment issues, and because the grant expired, the researchers decided not to continue this study.

FY 2014 Evaluation of the Office of Victims of Crime Vision 21: Linking Systems of Care for Children and Youth State Demonstration – Service Provider Survey

Researchers: Sara Debus-Sherrill and Mary Spooner
Institution: ICF
Approval Date: January 19, 2017

The purpose of the study was to evaluate the implementation of Virginia's *Vision 21: Linking Systems of Care for Children and Youth* project. In order to obtain baseline data regarding the nature of needs and services prior to the implementation of the Vision 21 project, the researchers surveyed child-serving frontline staff at CSUs 16 and 28. The researchers wanted to administer these surveys again after the project has been fully implemented. The researchers emailed the online survey to a contact person at each pilot site. This email asked the contact person to share the survey with staff who provide direct services to children, youth, and families. The Service Provider Survey asked questions about the types of services provided by the organization, the demographics of the clients the organization serves, screening tools, interagency collaborations, and areas for improvement. ICF has received three survey responses from CSU 16 and three responses from CSU 28. The researchers closed the survey in March 2017 and do not intend to recruit at other CSUs.

Toward a Pedagogy of Possibility: Justice System Involved Youth Read and Write Alternative Texts

Researcher: Judith Dunkerly-Bean
Institution: Old Dominion University
Approval Date: March 20, 2017

The purpose of the study is to qualitatively examine how justice-involved youth living at the Tidewater Youth Services Crisis Center read, respond to, and create alternative texts, while also improving youths' reading and writing skills and motivations. In the present study, the researcher administers informal reading inventories to assess juveniles' reading level and interests and then assigns selected readings intended to improve reading comprehension, fluency, and vocabulary. The researcher also provides reading support and intervention to youth as needed. The researcher and juveniles then participate in group-based discussions about the reading. Finally, the juveniles respond to the text by creating their own alternative text, specifically a 'zine (magazine), or another self-selected representation of self-expression. The researcher focuses on helping juveniles improve

written literacy proficiencies as well as developing their identities as writers. The researcher also administers reading inventories to obtain post-intervention data for those juveniles that remained at the Crisis Center for a sufficient amount of time to collect post-data. As of March 2018, staff at the Tidewater Youth Services Crisis Center reported an increase in the amount of unprompted reading and writing by youth. The program is still active and was transformed into a collaborative venture with eligible youth.

FY 2014 Evaluation of the Office of Victims of Crime Vision 21: Linking Systems of Care for Children and Youth State Demonstration – Network Provider Survey

Researchers: Sara Debus-Sherrill and Mary Spooner

Institution: ICF

Approval Date: March 27, 2017

The purpose of the study was to evaluate the implementation of *Virginia's Vision 21: Linking Systems of Care for Children and Youth* project. In order to obtain baseline data regarding the nature of needs and services prior to the implementation of the Vision 21 project, the researchers sent the Network Provider Survey to a primary point of contact at both CSU 16 and CSU 28. The primary point of contact (or designee) was supposed to complete the survey, answer questions related to the agency's experience with the Vision 21 project (e.g., has your agency had regular meetings, do the benefits of participating in this project outweigh the drawbacks, does your agency provide/receive referrals from Vision 21 project partner agencies). The participating sites struggled with maintaining engagement with their stakeholders, collecting data, and completing tasks during the assigned timeframes. Consequently, the participating sites have not fully implemented the project. The researchers provided recommendations for how to continue to develop the current sites. The researchers do not intend to recruit at other CSUs.

Social and Psychological Predictors of Delinquency in Youth in the DJJ System

Researchers: Aradhana Bela Sood and Mark Murphy

Institution: Virginia Commonwealth University Health System and DJJ

Approval Date: May 18, 2017

The purpose of the study is to examine the demographic, social, and psychological characteristics that relate to juvenile delinquency and recidivism. The researchers are investigating the extent to which mentoring relationships mitigate and mental health issues exacerbate juvenile delinquency. The researchers are collecting data through case file reviews of committed juveniles and through data requests to DJJ. DJJ and the researchers are currently working to finalize and submit the data request. The researchers requested another year of recidivism data for their analyses.

Vision 21: Linking Systems of Care for Children and Youth

Researchers: Laurie Crawford

Institution: Virginia Commonwealth University

Approval Date: May 26, 2017; amended May 6, 2019

The purpose of the study is to pilot the Virginia Victimization Screen (VVS), a screening tool used to assess victimization, associated symptomatology, and protective factors, at CSUs 16 and 28. CSU directors selected DJJ staff to become VVS administrators. The VVS is utilized for all juveniles that are diverted or placed on probation with a moderate or high-risk YASI score. The VVS administrators also make referrals to appropriate partner agencies as needed. The researchers hope

to validate this screening tool by requesting case specific, de-identified data from other standard screening tools (i.e., YASI, Substance Abuse Subtle Screening Instrument, Adverse Childhood Experiences Questionnaire). In addition, VVS administrators meet with researchers for regular meetings that include ongoing technical assistance. During these meetings, the researchers invite DJJ staff to participate in pre- and post-surveys. The staff survey focuses on perceptions of cross-system collaborations. The first and second waves of the pilot program are complete. The researcher submitted an amendment to include CSU 18 in the next wave; however, the CSU elected not to participate. The researcher also submitted an amendment to expand the study to include CSU 13.

A Preliminary Analysis of Juvenile Length of Stay (LOS) and Recidivism

Researcher: Patrick Lowery

Institution: Virginia Commonwealth University

Approval Date: June 12, 2017

The purpose of the study was to evaluate what characteristics influence juveniles' placements on probation, commitment to DJJ with an indeterminate sentence, or commitment to DJJ with a determinate/blended sentence, as well as their LOS. The study examined the relationship between LOS and placement type on recidivism. The study also examined differences in the outcome variables as they relate to changes in the LOS Guidelines, which went into effect on October 15, 2015. The researcher requested existing de-identified, case-specific data for demographic information, most serious offense(s), placement decision, commitment type, LOS, YASI risk and protective scores, a subset of specific YASI items, and recidivism data. The researcher constructed a regression model to create a predicted LOS based on characteristics of the case and the juvenile, as well as a model to predict recidivism based on placement type, commitment type, and LOS. The researcher did not find racial disparities in LOS. The researcher found that high-risk males experienced the longest LOS compared to low- and moderate-risk males. The researcher recommended collecting data on plea agreements to better understand juveniles' LOSs.

Validation of Virginia's Juvenile Risk Assessment Instrument

Researchers: Hayley Cleary and Jessica Schneider (student)

Institution: Virginia Commonwealth University

Approval Date: July 6, 2017

The purpose of the study was to validate Virginia's juvenile risk assessment instrument, YASI. The researchers requested de-identified, case-specific data for juveniles placed on probation or parole between FY 2014 and FY 2016 in order to assess the predictive validity, equity by sex and race, and usability of the instrument in case planning. The researchers examined the accuracy of the tool for Virginia's population and staff's utilization of the tool in selecting service priority areas. Jessica Schneider was recused from DJJ's processing, review, and approval of this study due to her roles of DJJ Research Manager and external student researcher. The research study was completed in November 2018. The study found that the predictive validity of the overall and dynamic risk scores and levels was statistically equivalent for males and females. The *Community/Peers* and *Family* domains had stronger predictive validity for males than females. In addition, YASI in Virginia performed as expected in comparison to existing research on youth risk assessment instruments.

Juvenile Justice – Translational Research on Interventions for Adolescents in the Legal System (JJ-TRIALS) National Survey

Virginia Department of Juvenile Justice
Human Research, FY 2019

Researcher: Dr. Christy Scott
Institution: Chestnut Health Systems
Approval Date: November 1, 2017

The purpose of the study was to examine the needs and the availability of services for youth on community supervision. The researchers surveyed nine CSUs to gain insight into the current state of substance use, HIV and mental health screenings, assessment, prevention, and treatment for youth under community supervision. The survey consisted of several different parts that were completed by individuals with various roles within the system. For example, the survey had fact-based questions about available services, which could be completed by individuals in various roles. There were also opinion-based questions, which the CSU directors had to complete. The data collection was completed in January 2019. The nine CSUs had a response rate of 78%. The researcher found that only 28% of respondents collaborated with HIV/STI prevention providers. Of those who reported not collaborating with an HIV/STI prevention provider, the most common reasons included HIV/STI was not an issue (43%) or because a community provider did not exist (20%). The researcher identified a need for implementing improved data systems for youth information, their needs, and services across various disciplines.

Multi-State Validation of Youth Risk and Needs Assessments

Researchers: Zachary Hamilton
Institution: Washington State University
Approval Date: November 7, 2017

The purpose of the study is to first validate Virginia's juvenile risk assessment instrument, YASI, and then compare the tool's validity across multiple states that use the same or similar instruments. The researcher will weigh YASI fields and/or scores differentially based on locality in order to improve the tool's predictability. To do so, the researcher is requesting de-identified, case-specific data for all YASI items for juveniles placed on probation or released from direct care between FY 2013 and FY 2016, as well as demographic information, treatment information, and recidivism rates at multiple follow-up periods. The researcher is converting all variables in the data to be compatible with the scoring conventions of the multi-state project.

Chesterfield/Colonial Heights Juvenile Drug Court Evaluation

Researchers: Tara Kunkel
Institution: National Center for State Courts
Approval Date: November 28, 2017

The purpose of the study was to evaluate the effectiveness of drug court. To do so, the researcher compared the outcomes of juveniles who completed drug court in Chesterfield or Colonial Heights against juvenile offenders who were released from probation supervision between FY 2008 and FY 2011. The researcher requested demographic information, YASI items related to drug and alcohol use, and YASI items related to legal history in order to match juveniles on probation with juveniles from drug court. The researcher found that the drug court program performed well, as the overall recidivism rates were lower than the comparison group. Specifically, 41% of JDC participants were convicted of a new offense within 24 months of exiting the program. Approximately 36% of participants were convicted of at least one misdemeanor.

Evaluation of a Comprehensive Community-Level Approach to Youth Violence

Virginia Department of Juvenile Justice
Human Research, FY 2019

Researchers: Derek Chapman and Diane Bishop
Institution: Virginia Commonwealth University
Approval Date: November 28, 2017

The purpose of the study is part of a larger project aimed at learning more about youth violence in low-income neighborhoods of Richmond, Virginia. In the proposed study, the researchers will examine retrospective, de-identified data for juveniles between the ages of 10 and 24 who were associated with an intake case at CSU 13 between 2012 and 2016. The researchers are requesting data on intake decisions, juvenile demographics, offense information, DAI ranking, select YASI items, length of stay (if applicable), and recidivism rates. Since the researchers are interested in low-income neighborhoods of Richmond, such as Mosby Court, Gilpin Court, and Creighton Court, they are requesting individual block-level geographical data. The researchers trained the DJJ Research Unit staff on how to clean and geocode the data manually. The researchers identified the variables they need from DJJ and have submitted an amendment, which is currently pending.

Understanding Youth Engagement in the Plea Process

Researcher: Allison Redlich
Institution: George Mason University
Approval Date: February 1, 2018

The purpose of the study was to learn more about juveniles' engagement in the plea process by interviewing juvenile and adult offenders who accept a plea bargain. Prince William County CSU assisted the researcher by notifying her when plea hearings occurred for eligible juveniles (i.e., over age 14 and charged with a felony) so that the researcher could attend and recruit participants immediately after the hearing. In February 2019, the researcher notified the agency that the project will not continue due to recruitment issues.

Virginia Personal Responsibility Education Program Innovative Strategies (VPREIS)

Researcher: Amanda Dainis
Institution: James Madison University
Approval Date: February 20, 2018; amended: September 18, 2018; March 29, 2019

The purpose of the study is to evaluate the *Vision to You* program, an evidence-based teen pregnancy program. The program's main outcomes include the following: (i) to reduce the frequency of sexual activity; (ii) to reduce the number of sexual partners; and (iii) to increase contraceptive use among participants. Another goal of this project is to increase knowledge related to healthy sexual practices. The program is collaborating with seven juvenile detention centers throughout the state. Eligible youth are asked if they would like to participate, and the research staff collects parental consent information. Once the youth complete the online program, they have the opportunity to participate in three post-program surveys. Notably, youth can simply participate in the program or participate in the program and the surveys. The researcher submitted two amendments in order to incorporate questions recommended by the grant monitor. There have been 70 participants across seven juvenile detention centers. The researcher is continuing enrollment at the detention centers.

Youth Photography Focus Group

Researcher: Allison Chappell

Virginia Department of Juvenile Justice
Human Research, FY 2019

Institution: Old Dominion University
Approval Date: May 10, 2018

The purpose of the study was to evaluate a new photography class offered to court-involved youth in collaboration with the Norfolk CSU, Norfolk Public Library, and Old Dominion University. The researcher conducted a focus group for the participants enrolled in the photography course to evaluate the impact of a prosocial activity with engaged adults. In order to participate in the photography course, the youth must complete an application and a panel interview with the CSU and ODU staff. Using the Positive Youth Development model, the focus group questions gathered information regarding the participants' general attitude and outlook and their perceptions of the class, the library, their peers in the course, and the teacher. These questions assisted the research team in developing future pre- and post-course surveys that will be distributed in later offerings of the photograph course. This project also served as Mark Wood's (CSU #4 Parole Supervisor) JTI Capstone project. The researcher found the youth have a mainly positive perception of the photography course. Participants shared that they felt respected and some expressed feeling a family bond develop within the program.

Third National Survey of Youth in Custody (NSYC-3)

Researcher: David Cantor

Institution: Westat

Approval Date: June 14, 2018; amended: July 23, 2018

The purpose of the study is to collect data for the National Survey of Youth in Custody, as required to meet the mandates of the Prison Rape Elimination Act (PREA). The two primary objectives of the survey are to: (i) identify facilities with the highest and lowest rates of victimization, and (ii) provide data for the development of national standards for preventing sexual victimization in correctional facilities. This will be the third of four surveys. The researchers' sample frame includes either state-owned or operated facilities that hold at least 10 adjudicated youth (and the adjudicated youth comprise more than 25% of the total youth population in the facility) or contract facilities that house at least 10 adjudicated youth (including at least one state-placed adjudicated youth). DJJ and/or the selected detention centers will participate in the parental consent process in some form; however, in order to accommodate the selected facilities, the process and Westat's involvement may vary. Youth with parental consent who have been in the selected facility longer than four weeks will be invited to participate in the survey. The HRRC committee has voiced concern with the study's alternative questions as they are sensitive in nature and may make some youth uncomfortable. However, the committee also recognizes the inconvenience of requesting that Westat change their entire survey instrument for one state. Out of the 276 youth who were enrolled among the six facilities in Virginia, 164 youth participated in the survey. The Research Unit is currently in discussions with Westat about a possible protocol violation. Their progress reported that Spanish forms were utilized; however, Spanish forms were not submitted to HRRC to review nor approved for use in Virginia. The organization has stated that the Spanish would have been available upon request; however, the issue is that Spanish forms were never a part of the approved protocol.

Connection, Safety, Fairness, and Purpose: A Follow-Up Study

Researchers: Ryan Shanahan

Institution: Vera Institute

Approval Date: July 26, 2018

The purpose of the study was to provide a follow-up to the surveys the researcher administered to committed juveniles in 2015. The researcher administered surveys related to connection, safety, fairness, and purpose to juveniles and staff in the JCC. Residents were asked to provide the contact information for a family member whom the researcher could contact and potentially recruit to participate in a telephone interview. Once the surveys and interviews were completed, the researchers conducted collaborative research meetings with residents and staff at the JCC to discuss the findings and possible contributing factors for the findings. The researcher did not submit the required progress report. The Coordinator of External Research reached out to the researchers on multiple occasions but did not receive a response. DJJ was informed that the institution is undergoing a reorganization and is attempting to contact the appropriate research staff.

Process Evaluation of the Virginia Department of Juvenile Justice Regional Service Coordinator Model

Researchers: Kelly Murphy

Institution: Child Trends

Approval Date: August 10, 2018; amended: June 18, 2019

The purpose of the study is to conduct an in-depth evaluation of DJJ's Regional Service Coordinator (RSC) model. The goal of this project is to provide feedback and recommendations to DJJ. The study has three primary objectives: (i) conduct a process evaluation of the RSC model to understand the extent to which it is being implemented as intended; (ii) provide an initial assessment of the extent to which implementation of RSC model is associated with youth outcomes; and (iii) translate and disseminate findings to target audiences, such as DJJ, other systems that are interested in similar models, and stakeholders. This evaluation would be conducted over a period of four years, including a pilot study in the first year. The researchers conducted focus groups with staff members at three CSUs and one virtual focus group with five RSCs. The focus groups were recorded and transcribed for data analysis. The researchers met to revise their coding scheme, identify preliminary themes, and summarize their initial themes from the focus groups. An amendment for the second year was submitted.

Brief Alcohol and Dating Violence Prevention Program for Court-Involved Youth

Researchers: Christianne Esposito-Smythers and Caitlin Williams

Institution: George Mason University

Approval Date: August 22, 2018

The purpose of the study is to provide a dating violence and alcohol prevention program for court-involved youth. The researcher delivered a four-hour group workshop utilizing didactic instruction, motivational interviewing, and cognitive-behavioral skill building to increase skills and knowledge in order to avoid high-risk alcohol and dating violence situations. This study aims to (i) integrate materials from two existing, evidence-based prevention programs and develop manuals for the interventions, training, and fidelity and (ii) conduct a pilot to evaluate the therapeutic potential of the proposed program. The researchers conducted the focus groups but due to recruitment issues are considering expanding the recruitment efforts to alternative locations.

Resident and Staff Perceptions of Safety and Engagement with the Community Treatment Model (Part II)

Researchers: Sarah Jane Brubaker and Hayley Cleary
Institution: Virginia Commonwealth University
Approval Date: April 10, 2019

The purpose of the study is to conduct a follow-up to the researchers' original study. The researchers will examine perceptions of safety and levels of engagement among staff and youth under the Community Treatment Model (CTM), which has been fully implemented in the JCC. The researchers expanded the original study by including feedback from various DJJ staff. Furthermore, the study is being conducted again because the original study may have been impacted by the closure of one of the JCCs. Now that staff and youth have had time to become acquainted with the Bon Air JCC, the researchers hope to gain a better understanding of their current perceptions.

III. Proposed / Pending Studies

Juvenile Delinquency and Adult Gun Sales: Comparative Effect of Different Minimum Age Standards for Firearm Purchase

Researchers: Jeff Swanson
Institution: Duke University
Approval Date: N/A

The purpose of the proposed study is to conduct a comparative analysis of three southern states with different laws regarding juvenile delinquency records and the minimum age standards for gun sales. The researchers selected three states that have differing thresholds for the minimum age of gun purchase for people with juvenile criminal records. By working with multiple state agencies, the researchers plan to conduct a longitudinal comparison of gun-related adverse outcomes in order to provide an evaluation of the effectiveness of the minimum-age standards in preventing gun violence and suicide. Due to the collaborative nature of this study, the researchers are attempting to confirm details with other agencies prior to DJJ being able to approve the study.

Rigorous Evaluation of the Virginia Department of Juvenile Justice's Second Chance Act Reentry Reform

Researchers: Kelly Murphy
Institution: Child Trends
Approval Date: N/A

The purpose of the proposed study is to conduct an evaluation of DJJ's reentry reform efforts. The researcher aims to examine (i) the extent to which DJJ is implementing the recommendations developed during the Second Chance Act Juvenile Reentry Reform Planning Grant, (ii) the extent to which the agency's services align with the youth's needs, (iii) what the youth's participation in reentry services look like, and (iv) how the implementation of the reforms have impacted youth outcomes. This study is being funded by the NIJ. The proposed evaluation would be conducted over a four-year period, including a pilot period. The evaluation would include focus groups with various stakeholders, such as DJJ's Reentry Advocates, parole officers, JCC counselors, and more.

IV. Denied Proposals

No human research proposals were denied during this fiscal year.

V. Administratively Closed Proposals

Administratively closed proposals include proposal packets the Coordinator of External Research or the HRRC reviewed, but the agency did not hear back from the researcher(s) after providing feedback and/or requests for revisions.

Examining Change in Criminal Thinking in a Juvenile Probation Population

Researchers: Lee Cooper and Lauren Delk

Institution: Virginia Tech

Approval Date: N/A

The purpose of the proposed study is to examine the implementation of the EPICS model in probation programs and to determine whether EPICs changed youths' criminal thinking levels at CSU 27. Due to issues with the recruitment plan, the HRRC provided the researchers with feedback for consideration in December 2018. The researchers have not submitted a revised proposal; therefore, the proposal has been closed.

Appendix A: Executive Summaries of Completed Human Research Projects from the Researchers*

* Executive summaries are completed by the researchers, and the content is not revised by DJJ.

Chesterfield/Colonial Heights Juvenile Drug Court Evaluation's Executive Summary

Purpose

The Chesterfield/Colonial Heights Juvenile Drug Court (JDC) contracted with the National Center for State Courts to complete an evaluation designed to answer the following questions:

- What were the recidivism rates of Chesterfield/Colonial Heights Juvenile Drug Court participants during the study period?
- What demographic and programmatic factors impact the recidivism rates?
- How does treatment dosage and participant risk level impact recidivism?
- How does the use of detention as a sanction impact participant outcomes?
- How do the recidivism rates of Chesterfield/Colonial Heights Juvenile Drug Court participants compare to those of a matched comparison group of participants supervised by the Chesterfield/Colonial Heights Court Services Unit during the same time period?

To answer these questions, the NCSC evaluators examined participants who completed the JDC between 2008 and 2014 which allowed for a two-year, post-program follow-up period for all participants.

Summary/Takeaways

The findings from this report suggest that the Chesterfield/Colonial Heights Juvenile Drug Court is performing well as measured by relatively high rates of program completion and low rates of recidivism. Overall recidivism rates were lower than a matched comparison group, although the number of JDC participants and matched probation comparisons who had a new arrest or conviction within two years of exit did not differ significantly and is considered a small sample.

Description of Study Sample: The JDC study sample, including participants who exited between 2008 and 2014, consisted mostly of white males, 16 or 17 years old at entry who were moderate- or high-risk. Participants spent, on average, 13 months in the JDC program during which time they had an average of 71 treatment contacts, 111 office contacts, and 26.2 home visits. Most JDC participants had at least one positive drug or alcohol screen with the average number of positive tests being three during participation.

Successful Completion: Slightly less than half of the study sample successfully exited the JDC program. A binary logistic regression including participant gender, age at entry, race, number of positive drug screens while in the program, previous treatment participation, number of days detained in the program, and risk score revealed an effect of number of detention days, such that the likelihood of successful completion decreased as the number of days increased. As such, the 2010-2011 completion group had both (1) a higher rate of successful completion (64%) compared to the 2008-2009 and 2012-2014 groups (27% and 35%, respectively) and (2) a lower average number of detention days (36.9 days) compared to both of the other exit groups (2008-2009 averaged 84.4 days and 2012-2014 averaged 69.5 days).

In-Program Recidivism: Slightly less than one-quarter (23.4%) of the JDC participants were convicted of a new offense during program participation; 20.3% were convicted of at least one new misdemeanor and 4.7% were convicted of at least one new felony. Participants who had at least one new in-program conviction had 1.9 convictions on average; the average number of misdemeanor convictions (for those who had at least one) was 1.8; and the average number of felony convictions

(for those who had at least one) was 1.0. Overall, there were 28 in-program convictions; graduates accounted for only two (7.1%) in-program convictions and non-graduates accounted for 26 (92.9%) in-program convictions. The pattern was consistent in all year groups. Finally, the majority of in-program convictions were for property offenses.

Post-Program Recidivism: Approximately forty percent (40.6%) of the JDC participants were convicted of a new offense within two years of program exit; 35.9% of participants were convicted of at least one misdemeanor and 6.3% were convicted of at least one felony. JDC participants who had at least one post-program conviction had 2.7 convictions on average; the average number of misdemeanor convictions (for those who had at least one) was 1.9 and the average number of felony convictions was 1.3 (for those who had at least one). Overall, there were 69 post-program convictions; graduates accounted for 15 (21.7%) post-program convictions and non-graduates accounted for 54 (78.3%) post-program convictions. The pattern was consistent in all exit year groups, with non-graduates accounting for the vast majority of post-program convictions. The majority of post-program convictions were for public order offenses. Finally, a binary logistic regression including participant gender, age at entry, race, number of positive drug screens while in the program, previous treatment participation, number of days detained in the program, and risk score revealed no significant predictors of post-program conviction. It is possible that the small sample size coupled with the small number of recidivists does not have enough power to detect differences that may exist; testing the model with a larger sample would lead to more robust results.

Risk, Treatment Dosage, and Recidivism: Over two-thirds of the JDC participant sample was high-risk at entry. Within two years of program exit, nearly two-thirds of the high-risk participants were arrested for a new offense an average of 4.3 times compared to approximately one-third of moderate-risk participants who were arrested an average of 2.9 times. Moreover, almost half of the high-risk participants were convicted of a new offense within two years of exit compared to one-quarter of the moderate-risk participants. In addition, there was no significant difference between JDC participants who received low treatment contacts (as determined by a median split) and participants who received high treatment contacts in the average number of post-program arrests or convictions.

Impact of Detention on Outcomes: JDC participants received more days in detention for a technical violation (27.4 days on average) compared to detention received as a result of either a positive drug/alcohol screen or both a technical and drug-related violation occurring in the same incident. Overall, JDC participants spent 63.4 days in detention for sanctions while in the JDC program; participants who went on to graduate from the program spent significantly fewer days on average in detention (20.7 days) compared to non-graduates (93.9 days).

JDC Participant versus Matched Comparison – Recidivism: Utilizing a matched sample of juvenile probationers, the NCSC team assessed the effect of JDC participation on post-program/post-probation recidivism within two years of exit. Overall, JDC participants had lower rates of post-program arrests and post-program convictions compared to the matched probation sample, although the differences were not statistically significant. Larger sample sizes would give the comparison more power to detect any differences that may exist.

Recommendations/Next Steps

No recommendations were made as a result of this particular report. NCSC continues to work with the Chesterfield/Colonial Heights Juvenile Drug Court to improve compliance with best practices and grow their program census.

Development and Validation of an Actuarial Risk Assessment Tool for Juvenile Sex Offenders' Executive Summary

Purpose

The primary purpose of this project was to develop an actuarial risk assessment instrument that would effectively predict the risk of sexual recidivism among youth. In partnership with leading experts and five jurisdictions across the country (Florida, New York, Oregon, Pennsylvania, and Virginia), the Urban Institute has developed a prototype assessment tool, state-specific risk assessment models, and practical guidance for conducting risk assessment for sexual recidivism in juvenile justice settings. During the course of tool development and validation, state-specific risk models were developed and presented to stakeholders in each state. The project team then combined all available case-level data from the participating jurisdictions and developed a multi-state risk model.

Summary/Takeaways

Below is a list of key lessons learned from the project:

- Due to the low frequency of occurrence, predicting sexual recidivism among youth yields results that are highly sensitive to the research settings in which the models are developed. Adopting an off-the-shelf assessment tool, either public or commercial, should be avoided without extensive customization to local settings, which entails updating the list of predictors as well as their weights.
- When predicting sexual recidivism among youth, prior criminal history had the greatest predictive power. However, several dynamic factors, such as the extent of delinquent or positive peer association, impulsivity, school attendance and performance, remorseful feelings, mental health issues, and substance use, were also predictive of sexual recidivism even after controlling for prior criminal history. Although how those dynamic factors predicted sexual recidivism varied across hundreds of models tested in the current project, there was a sufficient empirical basis to suggest that any future work to improve the performance of risk assessment tools should further consider those dynamic factors.
- The use of machine learning (ML) algorithms holds high promise for improving our capacity to make data-driven, risk-based decisions for youth with a history of sexual offending. Throughout the current project, prediction models based on ML algorithms notably outperformed traditional prediction models. However, ML algorithms generally require a large volume of data to be optimally effective. They are also subject to over-fitting, which requires more rigorous testing and updating.
- How to determine cut points for risk levels has important implications, especially for sex offense risk assessment for youth. Because sexual recidivism rates are typically low (5% in our multi-state sample), without extensive tool customization, strategic planning, and consensus building among key stakeholders, it is highly likely to have a risk classification system that identifies someone unlikely to recidivate as “high-risk.” For example, if individuals in our sample with predicted probabilities in the 75th percentile or above are classified as high risk, that would not be out of keeping with current practice. However, on average, only 6.5% of them were rearrested for a sex offense within two years. In other words, 93.5% of them did not

recidivate sexually. This begs the question of whether that 75th percentile should be used as a threshold to separate high-risk individuals from the rest. The definition of “high-risk” should not be derived solely on the basis of statistical properties. Criminal and juvenile justice stakeholders must have an open conversation about how much “risk” is tolerable given their system capacity to effectively manage youth with a history of sexual offending. This also gives rise to the need to evaluate prediction models for their absolute risk estimates because current practice in risk assessment focuses primarily on how to rank order individuals by risk (i.e., statistical discrimination) without necessarily estimating their chance of recidivism more precisely (i.e., calibration).

Recommendations/Next Steps

- The project team had previously delivered a data presentation to DJJ staff on our risk models based on the dataset received from DJJ. Our risk prediction models showed more than adequate performance in identifying individuals likely to recidivate sexually. Should DJJ wish to adopt such an assessment tool to inform decisions around how to develop supervision and treatment plans for youth with a history of sexual offending, the project team will be happy to provide guidance on how to think about finalizing and implementing one of those risk models the project team developed for DJJ.
- The final report of this project is largely based on our overall lessons from the multi-state dataset on youth with a history of sexual offending and qualitative assessments of current practice and policy across all our partner jurisdictions. Findings and implications discussed in the final report are generally applicable to all our partner agencies and their youth populations, including DJJ. However, the accuracy and reliability of prediction models can markedly improve when customized to a particular setting and population to which the models are to be applied. As such, we recommend that DJJ use its own data to develop/validate/implement an actuarial decision-making process for supervision and treatment planning for youth who have sexually offended if DJJ finds it necessary to adopt such a decision-making system.

A Preliminary Analysis of Juvenile Length of Stay (LOS) and Recidivism's Executive Summary

Purpose

The purpose of the study was to provide a preliminary analysis was two-fold. The first purpose of the study is to explore the correlates of recidivism among a sample of adjudicated delinquent juveniles, and how legal factors, extralegal factors, and specifically YASI-based factors influenced re-arrest and re-conviction. Secondly, the purpose of the study was to explore how the actual length of stay varied in terms of risk and protective scores, legal factors, and extralegal factors among juveniles institutionalized in a direct care facility.

Summary/Takeaways

A number of important findings emerged among the two outcomes, which I will describe below:

Recidivism (measured as re-conviction):

- Person-based offenses, relative to any other offenses, having a YASI legal risk flag, being a non-white Hispanic juvenile, having the present offense being a felony, being a “chronic offender” (3+ previous intakes), and having a prior offense at an age earlier than 12, predicted the highest rates of re-conviction.
- Juveniles placed on probation, relative to those in direct care, and those with no prior offenses were significantly less likely to be reconvicted of a new offense.

Recidivism (measured as re-arrest):

- Black juveniles, males, juvenile with a present felony offense, a legal risk flag, a drug/alcohol risk flag, and an attitude risk flag were significantly more likely to be re-arrested.
- Juveniles sentenced to probation, with no prior offenses, with property offenses, and misdemeanors/status offenses were significantly less likely to be re-arrested.

Institutionalization and Length of Stay:

- No evidence of racial disparities in length of stay.
- Younger offenders appeared to experience longer stays in direct care relative to their older counterparts.
- Person-based offenses, among all other offenses, were associated with the longest length of stays in direct care.
- YASI Flags did not predict differing length of stays in any meaningful ways.
- Having high dynamic and overall risk scores predicted longer direct care stays. However, no level of a dynamic protective score influenced length of stay in a significant way.
- High risk males, relative to low/moderate risk males and females of any risk level experienced the longest lengths of stay.

Recommendations/Next Steps

Because a number of interesting findings arose, there are a number of future steps and recommendations. Relative to the present study, it may be important to explore race and community within the context of recidivism to see if there are community-based differences that enhance racial disparities. Moreover, to better understand length of stay, it is important to see how violations and other infractions within a direct care facility impact the length of stay. Regarding the counter-intuitive age finding – it is possible that infractions and violations, or committing more serious offenses may explain this. However, because we do not know that, this is a good next step going

forward. It may also be helpful to have data that is more longitudinal in nature – in other words, data from the initial arrest all the way until a juvenile is discharged from the juvenile justice system.

Moreover, there were certain things outside of the scope of the data that may help in explaining differences in recidivism, length of stay, and the juvenile justice process as a whole. I recommend the following for future data collection.

- Collecting data on plea, charge, and sentence bargaining among juvenile.
- Collecting data on the demographic characteristics (e.g., race/ethnicity, sex, age, legal background, law school) of the judges presiding over a juvenile's case(s), as well as other juvenile justice actors (e.g., whether the juvenile's attorney was appointed or privately retained).
- Merging neighborhood, county-level, or Court Service Unit (CSU) related data from data sources such as the American Community Survey to see how length of stay, recidivism, and various other outcomes within the juvenile justice system may vary between location and the characteristics of the neighborhood, county, region, or CSU.
- Collecting data on the use of judicial, statutory exclusion/discretionary, direct file, and reverse waivers of juveniles.

Juvenile Justice - Translational Research on Interventions for Adolescents in the Legal System (JJ-TRIALS) National Survey's Executive Summary

Purpose:

Youth involved in the juvenile justice system have high rates of substance use, mental health, and HIV risk behaviors and could benefit from access to evidence-based screening, assessment, prevention and treatment interventions related to them. While surveys have been conducted within U.S. detention centers regarding the needs of youth and their service utilization, little is known about the needs of and the availability of services for youth on community supervision. The objectives of the JJ-TRIALS national survey were to gain insights into the current state of substance use, HIV and mental health screening, assessment, prevention, and treatment for youth under community supervision and to determine how this changes over time. This was accomplished via a series of three surveys in a nationally representative sample of counties involving Community Supervision Agencies in the sampled counties, their primary Substance Use and Mental Health Providers and the Juvenile Court Judges with the largest docket of youth on community supervision.

Summary/Takeaways

- A total of 563 unduplicated surveys were collected from 173 community supervision agencies (85% response rate), 161 juvenile court judges (82% response rate), and 229 substance use and/or mental health treatment providers (82% response rate). Specifically to Virginia, out of the 9 counties sampled, surveys were returned from 7 community supervision agencies for a response rate of 78%. All of the results below are based on the national average of community supervision agencies.
- 100% of community supervision agencies across the country reported collaborating with external mental health treatment providers and substance use treatment providers. Almost all (93%) reported collaborating with the judiciary. Only 28% reported collaborating with HIV/STI prevention providers. For those with no collaboration with HIV/STI providers, the most common reasons given were this has not been an issue (43%) and no partner/provider exists in the community (20%).
- 51% of community supervision agencies directly provide screening for substance use while 99% refer youth to external agencies for this screening. Numbers were similar for mental health (55% directly, 98% referred). 31% of agencies directly screen youth for suicide risk, while 72% make referrals to external agencies. For HIV/STI risk behaviors, only 6% directly provide screening and only 11% refer out for screening. Of the community supervision agencies that directly administer a screener, 63% used an evidence-based screener.
- It was much less common for community supervision agencies to directly provide clinical assessment. 10% of agencies reported directly providing assessments on substance use, 6% on mental health, 5% on suicide risk, and 1% on HIV/STI risk. Community supervision agencies were much more likely to make referrals to external agencies to conduct these assessments (98% for mental health, 95% for substance use, 68% for suicide risk, and 13% for HIV/STI risk behavior). Of those community supervision agencies directly providing clinical assessments, 63% used an evidence-based assessment, 84% used clinical staff with bachelor's degrees or RN education or above to administer the assessments, and 100% used the assessment results to inform treatment plans.
- 6% of community supervision agencies provided substance use prevention services directly, 74% reported that these services were provided by external agencies, 21% said these were not available in their county, and 2% did not know if the services were available. Of the community

- supervision agencies directly providing substance use prevention, 70% used an evidence-based program.
- It was very rare for community supervision agencies to provide any type of HIV/STI prevention services (1% or less). These services were much more commonly provided by external agencies (76-78%). 9% of community supervision agencies reported that these services were not available in their county and 13-16% didn't know whether the services were available. When community supervision agencies did directly provide HIV/STI risk prevention programs, it was most commonly a locally developed program (91%).
 - Substance use treatment services were not commonly provided directly by community supervision agencies (0-7%). It was more common for these services to be provided by external agencies ranging from 43% for detoxification to 93% for outpatient. 25% of agencies or greater reported that the following services were not available in their county: residential treatment (55%), detoxification (42%), medication assisted treatment (39%), intensive outpatient (34%), other recovery support (27%), and co-occurring substance use and mental health treatment (25%). Only 1% of agencies reported not knowing if outpatient treatment was available. Substantially more (19%) were unsure about the availability of medication assisted treatment with the other treatment services falling somewhere in the middle. In those community supervision agencies providing any sort of substance use treatment, 93% used an evidence-based approach, 59% were providing evidence-based treatment to 50% or more of their youth, and 87% offered services that were provided by clinical staff with a bachelor's degree or RN education or above. Motivational Interviewing was by far the most commonly used substance use treatment approach when treatment was provided by community supervision agencies (86%).
 - It was uncommon for any type of mental health treatment to be provided directly by community supervision agencies (0-6%). External agencies provided the majority of these services ranging from 64% for residential treatment to 89% for individual counseling and family counseling. 10% or fewer agencies reported that various mental health treatment services were not available in the county with the exceptions of medication assisted treatment (16%), day programs (19%), and residential treatment (38%). 0-12% of agencies reported not knowing if each type of treatment was available. For the small percentage of community supervision agencies directly providing mental health treatment, 100% used an evidence-based approach, 47% provided evidence-based treatment to half or more of their youth, and 100% used clinical staff with bachelor's degree or RN education or higher to provide the treatment.

Recommendations/Next Steps

The preliminary survey results highlight the need for and/or strong interest in:

- Improving the use of evidence-based screening and clinical assessment into routine practice.
- Developing skills to integrate screening and assessment results with case planning and implementation.
- Learning more about the impact of trauma and other mental health disorders on adolescent behavior.
- Learning more about effective substance use prevention and treatment.
- Implementing improved data systems needed for tracking information about youth, their needs, and the services they receive across disciplines.
- Learning more about the availability of substance use, mental health, and HIV/STI services within communities and the sharing of information.

Linking Systems of Care Evaluation's Executive Summary

Purpose:

This report presents findings and lessons learned from a formative evaluation of the first two Linking Systems of Care demonstration sites, Montana and Virginia, that explores the development and implementation of the sites' approaches to linking systems of care for children and youth in their states. This report describes the development and implementation of each site's approach, strategies used to coordinate systems and services for youth victims of crime, the roles of key stakeholders, and resources used throughout the project. This report presents an overview of the background of the demonstration project, including an introduction to each of the demonstration sites; an overview of the evaluation approach and methodology; a detailed discussion of the findings, including overarching themes and key differences between the sites; and a discussion of recommendations and lessons learned from the demonstration project that can enhance implementation at future sites.

Summary/Takeaways:

During the planning phase, both sites developed their network of key stakeholders and conducted needs assessment activities. As required in the solicitation, each site compiled a stakeholder group consisting of representatives from relevant child-serving systems, including State government, child welfare, health services, juvenile justice, education, and other relevant entities. Each site also developed and conducted several information-gathering activities as part of their needs assessments, including reviews of a literature search and policies, focus groups or listening sessions, and surveys. The sites completed these activities to learn about how organizations were serving child victims in their States, to identify gaps in services and to understand whether service providers and systems were collaborating. Both sites used data from these activities to inform the development of their approaches to linking systems of care.

In the implementation phase, both sites worked to maintain existing relationships with key State and local stakeholders and pilot tested their approaches to linking systems of care. The involvement of the stakeholder groups in both sites ebbed and flowed as the project moved to the implementation phase. Changes in stakeholder engagement and collaboration were the result of the sites' decision to shift toward a local, community-based approach as they began piloting their screening tools. The sites identified and began pilot testing their approaches during the implementation phase. As required by the project's solicitations, the sites' approaches included a systematic screening method, with accompanying training materials, and resource and referral materials for responding to screenings. In addition, the sites conducted policy analysis activities intended to inform their work.

Throughout the project, both sites leveraged various resources, including Federal funding and guidance from OVC, external funding from Federal and State agencies, and training and technical assistance (TTA) from NCJFCJ and the National Child Traumatic Stress Network. Both sites primarily relied on their grant funds under the LSC demonstration project to support their projects but also tapped into non-LSC financial resources to support their efforts. NCJFCJ provided TTA to both sites on several topics throughout the project. While both sites received TTA, NCJFCJ reported more, but shorter, contacts with the Virginia site during the planning phase and fewer, but longer, contacts with the Montana site. Despite differences in the frequency of engagement with the TTA partner, both sites provided positive feedback about their experiences receiving TTA during the planning phase. During the implementation phase, NCJFCJ provided more than 500 hours of

TTA on a wide range of topics that reflected the different needs of the two sites. Both sites received site-specific assistance in similar areas, such as refining and finalizing their screening tools and associated training manuals, support in policy activities, and support in developing resource guides and referral protocols. At the Montana site, the TTA focused on brokering relationships and providing topical information. At the Virginia site, the TTA focused on reviewing products and deliverables to support future project activities.

Both sites identified similar objectives based on the requirements of the RFP and conducted similar activities, including developing a network of stakeholders, conducting a gap analysis or needs assessment, developing a strategy, and implementing the strategy. Both sites also struggled with similar challenges, such as maintaining the engagement of their stakeholder group members, collecting data about the experiences of youth and their families, and completing activities within the original timeline. As a result, the sites have yet to fully implement their strategies for linking systems of care, and it is premature to comment on whether these strategies will improve the provision of services for this population. The challenges that the sites experienced are not surprising given their context and the nature of the demonstration projects.

Recommendations/Next Steps

The experiences of these sites provide important lessons for future demonstration projects. Future sites will face similar challenges and need to adapt in various ways. Thus, future sites may benefit from considering how to create individualized approaches for linking systems in their communities, purposefully engaging key stakeholders, ensuring that they have a complete understanding of how their systems function, and being practical in strategic planning and implementation efforts.

Validation of Virginia's Juvenile Risk Assessment Instrument

Purpose: The Virginia Department of Juvenile Justice (DJJ) utilizes the Youth Assessment and Screening Instrument (YASI); however, risk assessment instruments do not always generalize across populations. This study focused on the accuracy in predicting recidivism, equity across racial groups, and usage of YASI as a case planning tool in the state of Virginia.

Summary of Findings: Of 11,888 youth on probation or parole, 34.4% were rearrested within 12 months. A higher percentage of males (36.9%) were rearrested than females (25.9%), and a higher percentage of Black youth (41.1%) were rearrested than White youth (34.4%). (See Attachment A.) Females (44.7%) were more likely to be low risk than males (23.2%), and Black youth (23.6%) were more likely to be high risk than White youth (18.9%). (See Attachment B.)

- YASI in Virginia performed as expected in comparison to existing research on youth risk assessment instruments. (See Attachment C for risk scores and levels by rearrest rates.)
- The predictive validity of the overall and dynamic risk scores and levels was statistically equivalent for males and females. The *Community/Peers* and *Family* domains had stronger predictive validity for males than females.
- The predictive validity was statistically equivalent for White and Black youth for overall risk levels and dynamic risk scores and levels; however, the predictive validity for the overall risk score was statistically significantly higher for White youth than Black youth. The *Alcohol/Drugs* domain had stronger predictive validity for White youth than Black youth.
- Each domain had a positive correlation between risk and priority area assignment, though some were stronger correlations than others. The strongest correlations were for the *Alcohol/Drugs* domain, followed by *Aggression*. The *Employment/Free Time* domain had the lowest prevalence of moderate to high risk, lowest occurrence of assigned priority area, and the lowest correlation between domain level and priority area assignment.

Research Recommendations:

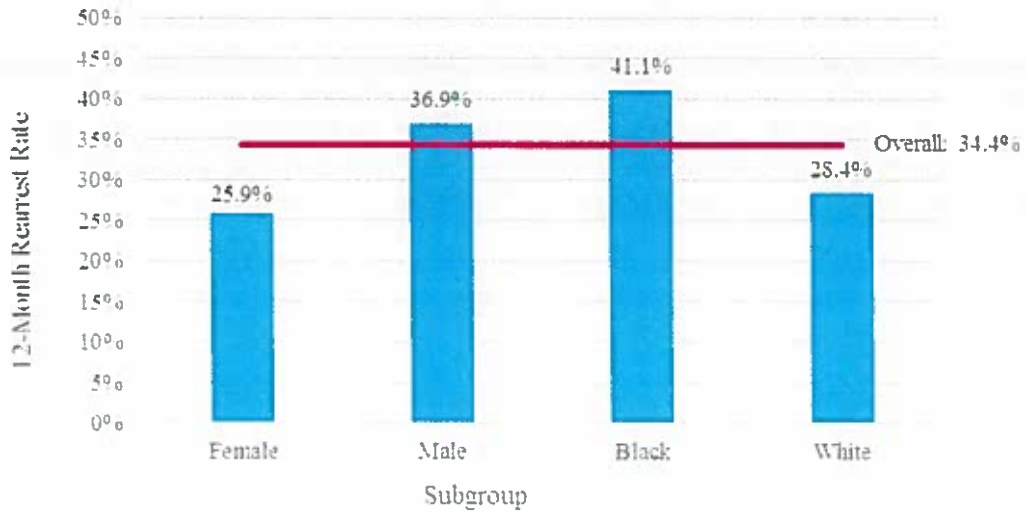
- Instrumental validity: Do individual items load onto their designated domains? Are the domains separate and distinct concepts?
- Inter-rater reliability: Have training efforts maintained consistency in assessments?
- Interactions between domains: Do patterns exist in how domains present?
- Different outcomes: What is the predictive ability for different reoffense severities?
- Additional groups: Are there other group or geographical differences?
- Weighting and scoring: Can modifications improve the predictive ability?
- Service matching: Is the tool used by practitioners to match services to the risk profile?
- Recidivism reduction: Does the use of risk assessment tools decrease reoffending?
- Program evaluations: Do services improve dynamic risk?

Ongoing Policy Recommendations:

- Determine purpose and function of the assessment within the system
- Conduct staff and stakeholder training
- Test the tool's performance
- Calibrate and modify the instrument
- Repeat

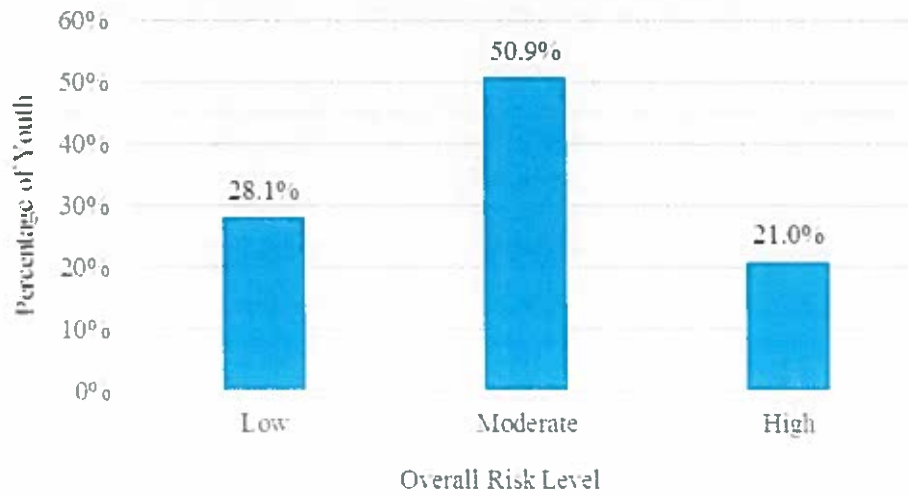
Attachment A: Recidivism

12-Month Rearrest Rates

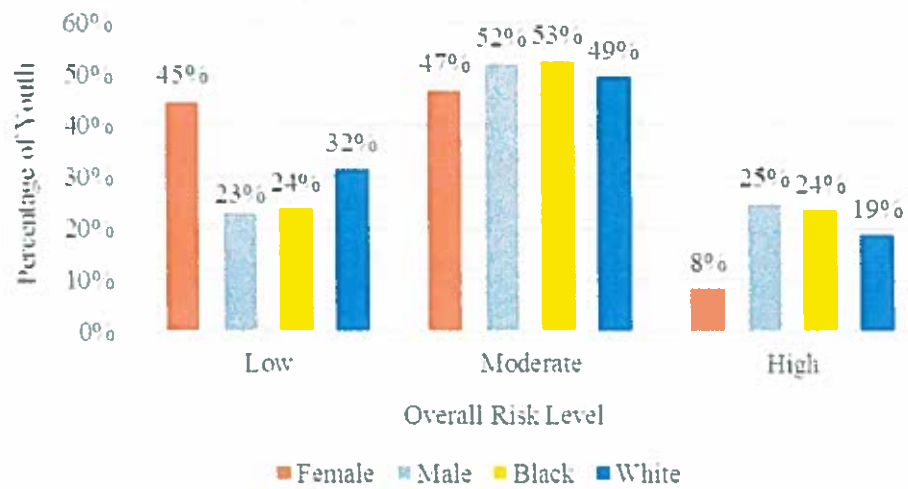


Attachment B: Risk Assessment Distributions

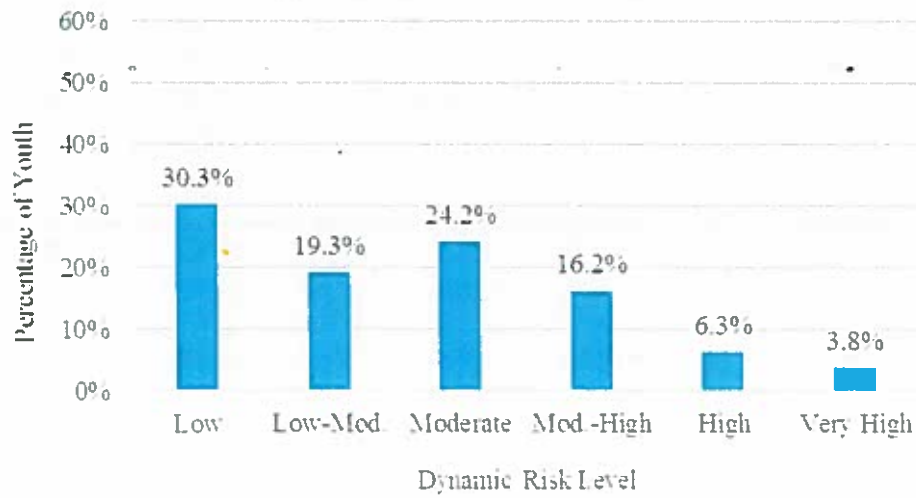
Percentages of Youth by Overall Risk Level



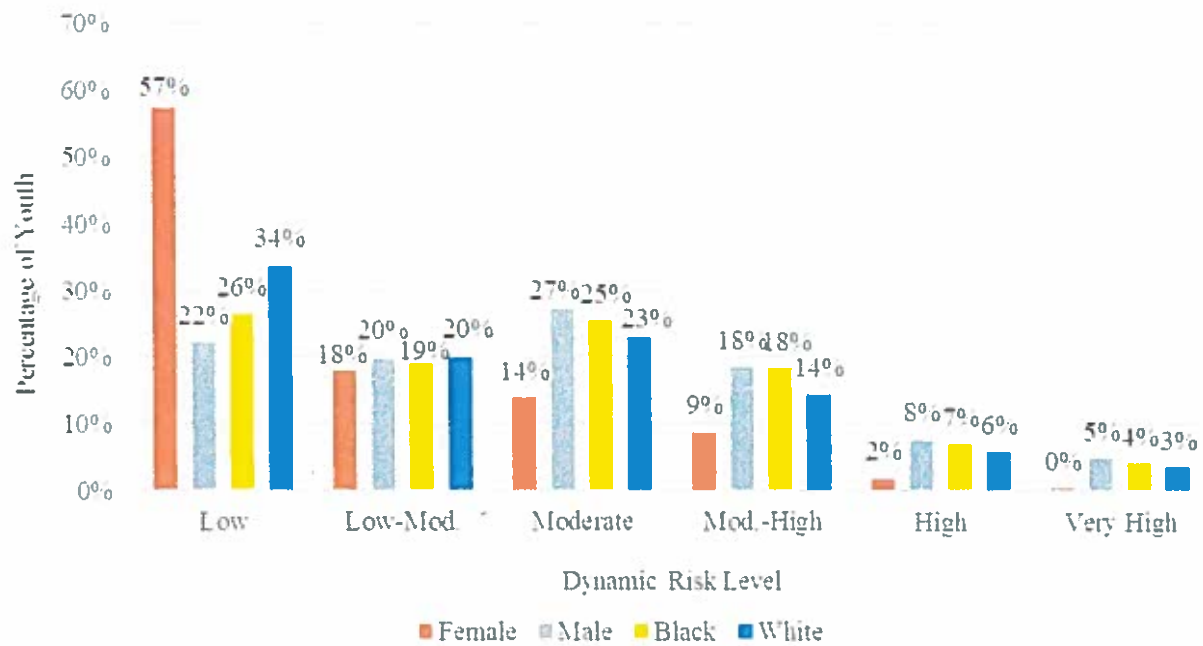
Percentages of Youth by Overall Risk Level



Percentages of Youth by Dynamic Risk Level



Percentages of Youth by Dynamic Risk Level



Summary of Statistically Significant Assessment Differences by Subgroup

	Sex		Race	
	Score	Level	Score	Level
Overall	--	Male	Black	Black
Dynamic	--	Male	Black	Black
<u>Domains</u>				
Legal History	Male	Male	Black	Black
Family	Female	Male	White	--
School	Female	Male	Black	Black
Community/Peers	Male	Male	Black	Black
Alcohol/Drugs	Male	Male	White	White
Aggression	Female	Male	Black	Black
Attitudes	--	Male	Black	Black
Skills	--	Male	Black	Black
Employment/Free Time	Female	--	Black	Black

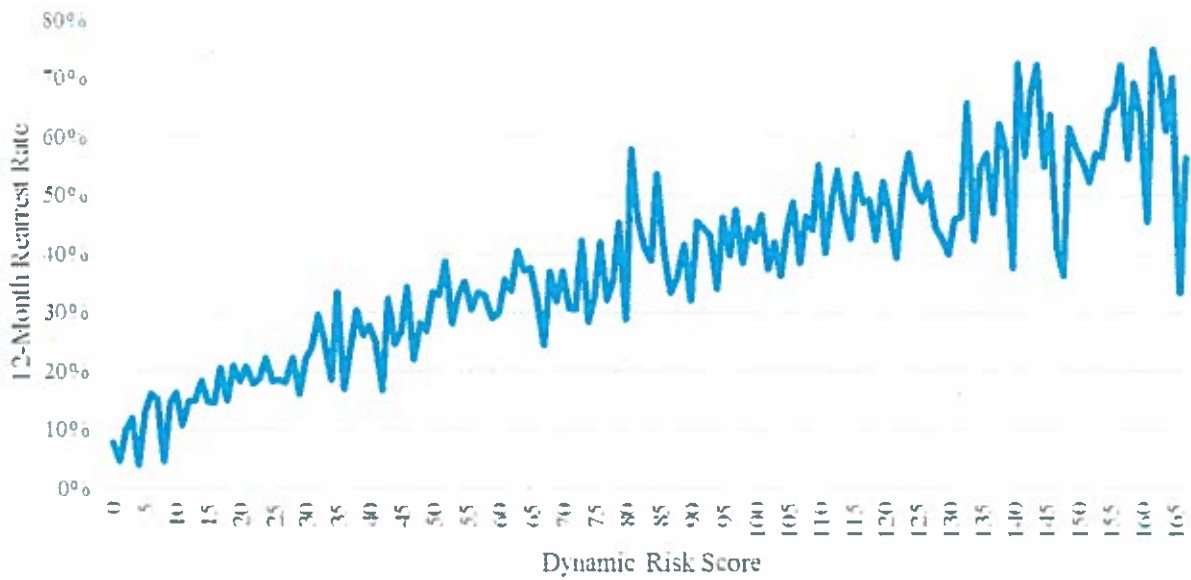
Note: The subgroup with the higher value is listed.

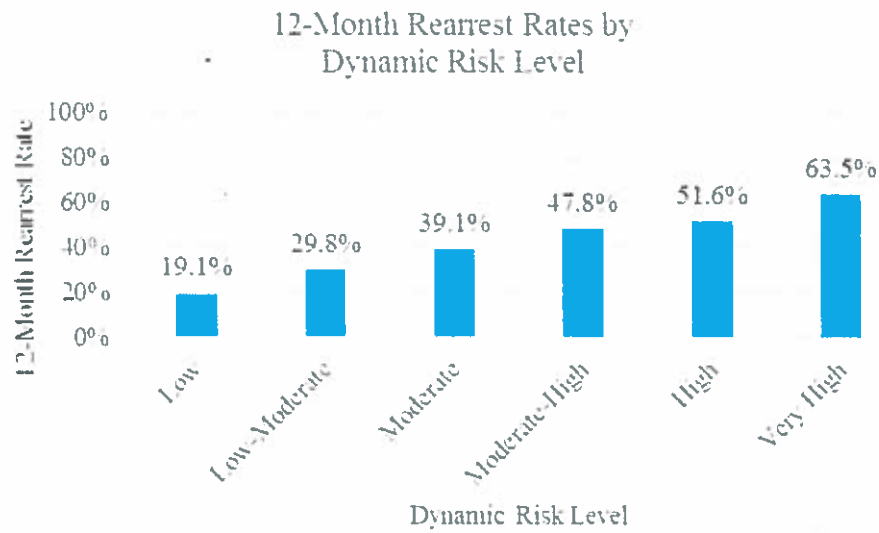
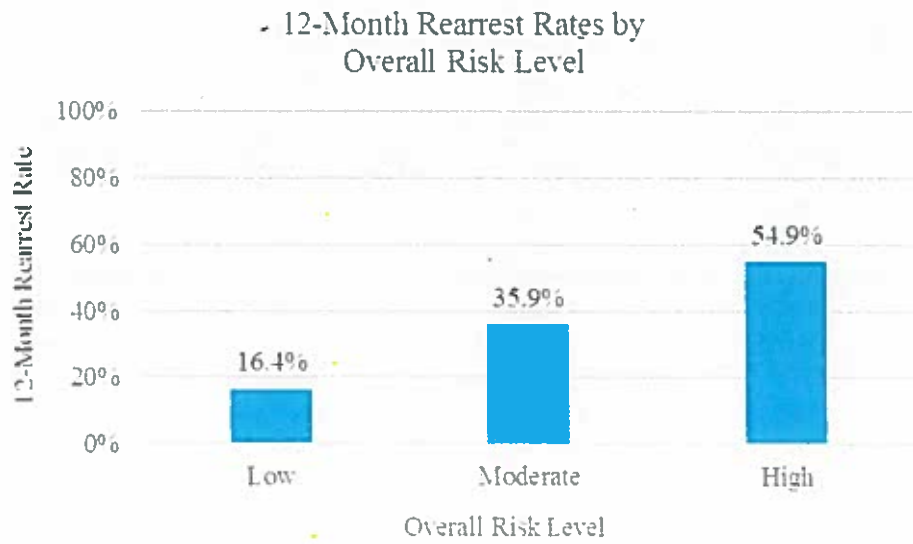
Attachment C: Risk Assessment and Recidivism

12-Month Rearrest Rate by Overall Risk Score

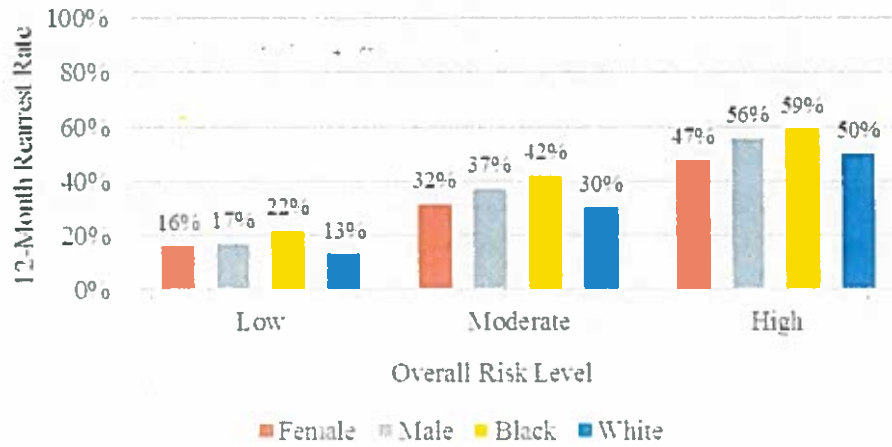


12-Month Rearrest Rate by Dynamic Risk Score

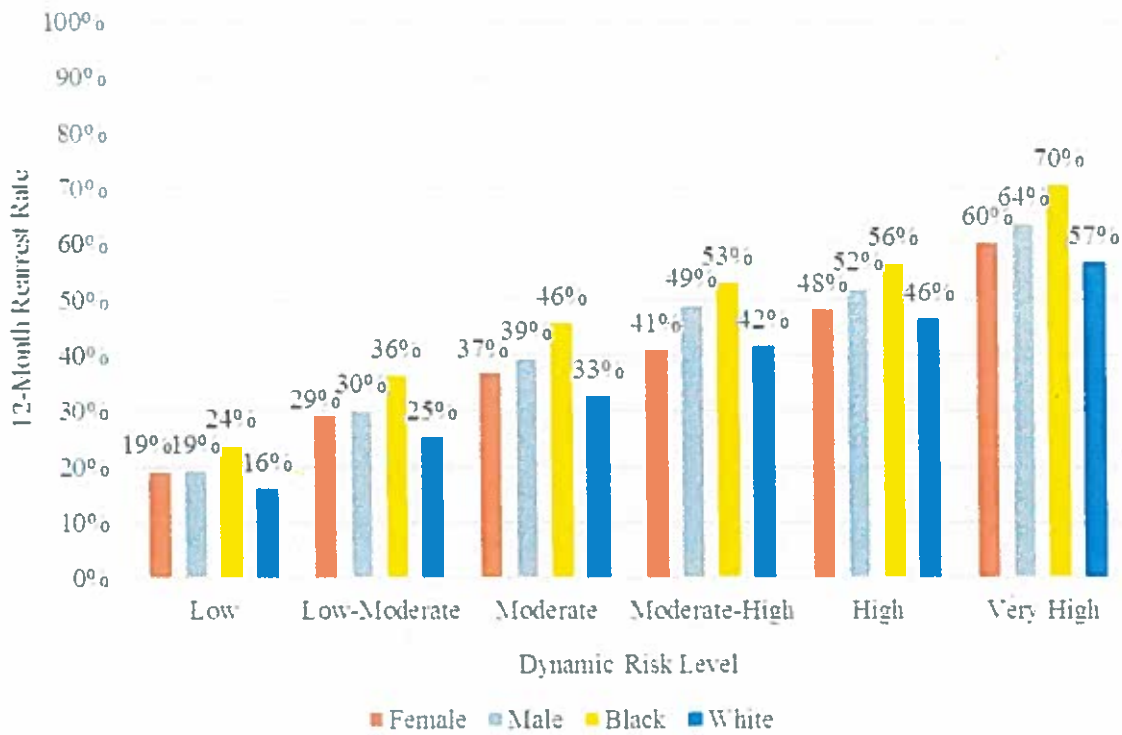




12-Month Rearrest Rates by Overall Risk Level



12-Month Rearrest Rates by Dynamic Risk Level



YASI Predictive Validity Results of Current Study Compared to Previous Studies

	Orbis, 2007	Jones, 2011	Jones et al., 2016	Baird et al., 2013	Current - Scores	Current - Levels
Pre-Screen	0.65	0.64	0.79	0.68	0.68	0.66
Female	0.61	0.60	0.68	0.67	0.67	0.63
Male	0.68	0.64	0.82	0.71	0.68	0.65
Black				0.66	0.65	0.64
White				0.68	0.69	0.67
Dynamic Risk	0.62	0.63			0.65	0.66
Female	0.59	0.62			0.64	0.62
Male	0.64	0.63			0.66	0.65
Domain Dynamic Risk	0.55-0.63		0.54-0.73		0.56-0.64	0.56-0.64
Female		0.50-0.60			0.55-0.63	0.55-0.61
Male		0.50-0.62			0.57-0.65	0.57-0.64

Note: Values represent the Area Under the Receiver Operating Characteristic Curve (AUC), a measure of predictive validity. Studies varied in population, follow-up timeframes, and recidivism measures and may have reported additional AUCs not displayed in the summary table above. Orbis (2007) and Jones (2011) both studied New York populations, resulting in similar AUCs. In the Orbis (2007) study, “negative outcome” was defined as a new referral/arrest, violation of probation, or adjudication/conviction; AUCs for the pre-screen after item weight and cut-off point revisions are displayed.

Summary of Statistically Significant AUC Differences by Subgroup

	Sex		Race	
	Score	Level	Score	Level
Overall	--	--	White	--
Dynamic	--	--	--	--
<u>Domains</u>				
Legal History	--	--	--	--
Family	--	Male	--	--
School	--	--	--	--
Community/Peers	Male	Male	--	--
Alcohol/Drugs	--	--	White	White
Aggression	--	--	--	--
Attitudes	--	--	--	--
Skills	--	--	--	--
Employment/Free Time	--	--	--	--

Note: The subgroup with the higher AUC value is listed.

Youth Photography Focus Group's Executive Summary

Purpose

The Youth Photography course was offered during May and June of 2018 through CSU 4 (Norfolk). The purpose was to expose system involved youth to a prosocial activities, build social skills, learn about photography, network, and have fun. By all accounts, it was a resounding success. I conducted a focus group with the youth after the class ended. Consent/assent were obtained from all youth. I spoke to the youth about their experiences with the class, how they felt about photography, how they experienced their interactions with each other and the adults they worked with, and what the experience taught them about themselves.

Summary/Takeaways

The class was fun to organize and the amateur photographer who taught the class enjoyed teaching the youth. The kids learned a lot and were proud of their work and appeared to enjoy the experience. The CSU staff did an amazing job anticipating any problems (e.g., providing transportation each day to and from the class almost eliminated any problems with attendance). The feedback from the focus group was mainly positive. For example, the youth talked about how they felt being involved in the class kept them out of trouble (because if they weren't "here", they would probably be engaged in something non-productive), they discussed their strong social bonds, feeling like a "family" by the end of the class, wanting to come back and do this class or something similar in the future (e.g., drawing, dance, poetry). They commented that they felt respected by "most" of the adults, and they hoped to continue to take pictures in the future because most of them felt that they were good at it (one participant commented that he felt this was "the only thing he was really good at"). The complaints were trivial (e.g., they didn't like the food and the travel time to the library).

Recommendations/Next Steps

During the focus group, I found it challenging to keep them focused and it was difficult to convince them to express their feelings and discuss the big picture. The class, as well as the focus group, was a pilot, and I learned a lot by doing it. In terms of the research component, I learned how to navigate full IRB approval from two state agencies, and I realized that I need to hone my qualitative skills (I am primarily a quantitative researcher). Next time, I will do some more research on conducting focus groups and spend some time practicing, which should make it more effective. I may also conduct a survey and expand the focus group to include the staff who worked together to coordinate the class. My assumption is that it helped to boost morale among the staff because it was a "feel good" activity and allowed PO's and system involved youth to interact in a fun, non punitive way. The entire experience was rewarding and beneficial for all. Next time, I will also look into pursuing funding. Those of us involved in the class funded the program out of pocket (snacks, clothes for the gala for each kid, jump drives, getting pictures matted/mounted, etc.). We learned some important lessons, and overall, it sets the stage for offering other similar opportunities in the future with a more complete evaluation component.



COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

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MEMORANDUM

TO: State Board of Juvenile Justice

FROM: Virginia Department of Juvenile Justice

DATE: November 13, 2019

SUBJECT: Request for Additional Amendments to Regulation Governing Minimum Standards for Juvenile Information Requests from and Research Involving Human Subjects within the Department of Juvenile Justice (6VAC35-170) through the Fast-Track Regulatory Process.

I. SUMMARY OF ACTION REQUESTED

The Department of Juvenile Justice (department) is respectfully requesting the State Board of Juvenile Justice (board) to approve additional proposed amendments to 6VAC35-170, *Regulation Governing Minimum Standards for Juvenile Information Requests from and Research Involving Human Subjects within the Department of Juvenile Justice (Human Research Regulations)* and to incorporate these amendments into the fast-track regulatory package approved by the board at its June 2019 meeting.

On June 19, 2019, the board approved proposed amendments to the Human Research Regulations. The department proposed these amendments to clarify certain provisions in the regulation that were generating confusion among researchers and other representatives in the regulated community. Although the intent was to clarify these provisions for department staff and regulators, the proposed amendments failed to outline the protocol for processing and reviewing data requests submitted through the Virginia Longitudinal Data System (VLDS).

The VLDS is a system that allows researchers to access de-identified case-specific data across multiple participating agencies. The purpose of the VLDS is to create usable information for policy and generate cross-agency research for longitudinal studies. Data requests are submitted through a VLDS portal operated by the State Council of Higher Education for Virginia and must be approved by each participating agency that maintains the data sought. The department became a partnering agency with VLDS in October 2017.

In addition to establishing a process for VLDS submissions, the proposal also provides for an expedited process for minor amendments to previously approved data requests.

A summary of the proposed amendments is contained in Section II of this memo.

II. SUMMARY OF ADDITIONAL SUBSTANTIVE AMENDMENTS

- **Section 10 - Definitions:** The proposal adds a definition for VLDS, the data system providing de-identified case-specific data from participating agencies to qualified researchers.
- **Section 65 – External case-specific data requests:** This section establishes conditions that must be satisfied before the department will approve an external research or data request. Among the existing provisions, the proposal is subject to a review by the department’s coordinator of external research and an internal review committee, with final approval provided by the director. Because the VLDS system captures data collected from multiple participating state agencies, the system has its own processes that researchers must follow to access data, including a separate approval process for each participating agency from which the data are sought. In order to acknowledge this separate process, the proposal expressly exempts VLDS data requests from the provisions of this section and establishes a new section (below) to address these requests.
- **Section 67 (new) – VLDS requests:** This proposed new section establishes a separate process for external, case-specific data requests submitted through the VLDS. Such requests must be submitted through the VLDS portal, and researchers must comply with applicable VLDS processes and procedures to access the data. Unlike other external, case-specific data requests that must undergo review by an internal review committee and that require the director’s approval, the proposal identifies the Human Research Review Committee (HRRC) chair as the sole reviewer and approver of VLDS requests. The HRRC chair, prior to approving such requests, must determine that the requests: 1) meet the current requirements in Sections 30 and 50; 2) are not human research proposals and do not require the HRRC’s review; 3) contain all required information in proper format; 4) comply with applicable laws and basic research standards; and 5) are accessible and available in the VLDS. Sections 30 and 50, as proposed for amendment in June 2019, require data requests and research proposals to conform to ethical standards of applicable professional societies and limit the department’s authority to approve the same based on the availability of department resources, the likelihood of interference with existing programs or operations, and the compatibility of the proposal with the juvenile justice system’s purposes and goals.
- **Section 69 – Minor amendments to data requests.** Although the current regulation allows for an expedited review process when the data requester makes minor amendments to a previously approved human research project, the current regulation does not provide a comparable expedited review process for minor amendments to data requests. The proposal adopts a new provision that allows such previously approved data requests to bypass the lengthy review process set out in this chapter and permits the HRRC chair to conduct an expedited review. This expedited review is available only when such amendments do not alter the scope of the request.
- **Section 140 – Timeline for review of human research proposals.** This section establishes a timeline for review of human research proposals and sets out the terms under which the HRRC may conduct an expedited review of human research proposals. Currently, such expedited reviews for human research proposals are authorized, in part, when the research will not impose more than a

minimal risk to the human subject and the review involves only a minor change to a previously approved proposal. The additional amendments clarify that such changes also must be approved in writing by the HRRC chair and are not subject to the director's review. The department currently follows this process with respect to minor amendments to human research proposals.

III. PROCESS FOR SUBMISSION

The department respectfully requests authorization to incorporate the additional proposed amendments into the fast-track regulatory package that the board approved at its June 19, 2019, meeting. If the Board elects to authorize these additional amendments, the department will submit the entire regulatory package to the Virginia Regulatory Town Hall, which will initiate the fast-track regulatory process set out in § 2.2-4012.1 of the *Code of Virginia*.

DEPARTMENT (BOARD) OF JUVENILE JUSTICE
CH 0170 Amend Regulation Governing Human Research

CHAPTER 170
REGULATION GOVERNING MINIMUM STANDARDS FOR JUVENILE INFORMATION
REQUESTS FROM AND RESEARCH INVOLVING HUMAN SUBJECTS WITHIN THE
DEPARTMENT OF JUVENILE JUSTICE

6VAC35-170-10. Definitions.

~~Unless the context clearly indicates otherwise, the~~ The following words and terms when used in this chapter shall have the following meanings, ~~consistent with the definitions offered in § 32.1-162.16 of the Code of Virginia~~ unless the context clearly indicates otherwise:

"Aggregate data" means statistics that relate to broad classes, groups, or categories so that it is not possible to distinguish the properties of individuals within those classes, groups, or categories.

"Case-specific data" means nonaggregated data that provides information about individuals within a group.

"Coordinator of external research" ~~is~~ means the department employee designated by the director to receive research proposals and data requests from external entities and to ensure that the proposals are reviewed in accordance with this chapter and related department procedures.

"De-identified data" means data with common identifiers, such as names, phone numbers, social security numbers, and addresses, ~~etc.,~~ removed in order to eliminate the ability of an individual viewing the data to determine the identity of an individual.

"Department" means the Department of Juvenile Justice.

"Director" means the ~~Director~~ director of the ~~Department of Juvenile Justice~~ department or the director's designee.

~~"Encrypted" means the transformation of data through the use of an algorithmic process into a form in which there is a low probability of assigning meaning without the use of a confidential process or key or the securing of the information by another method that renders the data elements unreadable or unusable.~~

"External research" means research conducted at or using the resources of a facility, program, or organization that is owned, operated, or regulated by the department or the Board of Juvenile Justice by researchers who are not part of the department or under contract ~~to~~ with the department, or who are not employees of another state agency conducting a study at the direction of the General Assembly.

"Human research" means any systematic investigation, including research development, testing and evaluation, utilizing human subjects that is designed to develop or contribute to generalized knowledge. Human research shall not be deemed to include research exempt from federal research regulation pursuant to 45 CFR 46.101(b).

"Human Research Review Committee" or "HRRC" means the committee established by the department to oversee human research proposals and activities in accordance with 6VAC35-170-130 and § 32.1-162.19 of the Code of Virginia.

"Human subject" means ~~any~~ an individual who is: under the department's care, custody, or supervision; ~~or~~ under the care, custody, or supervision of a facility or program regulated by the department or the Board of Juvenile Justice; or a member of the family of such an individual, and who is, or who is proposed to be, a subject of human research. For purposes of this definition, human subject also means an individual who is employed in or provides contractual services to a

juvenile correctional center or other facility or program regulated by the department or the Board of Juvenile Justice and who is or who is proposed to be a subject of human research.

"Informed consent" means the knowing and voluntary agreement without undue inducement or any element of force, fraud, deceit, duress, or other form of constraint or coercion of a person who is capable of exercising free choice. The basic elements necessary for informed consent regarding human research include:

1. A reasonable and comprehensible explanation to the person of the proposed procedures and protocols to be followed, their purposes, including descriptions of attendant discomforts, and risks and benefits reasonably to be expected;
2. A disclosure of alternative procedures or therapies that might be helpful to the person;
3. An instruction that the person may withdraw his consent and stop participating in the human research at any time without prejudice to him;
4. An explanation of costs or compensation that may accrue to the person and whether third party reimbursement is available for the proposed procedures or protocols; and
5. An offer to answer, and answers to, questions by the person about the procedures and protocols.

"Internal committee" means the committee established by the department pursuant to 6VAC35-170-65 to oversee de-identified case specific data.

"Legally authorized representative" means the parent ~~or parents~~ having custody of a prospective subject; the legal guardian of a prospective subject; or any person or judicial or other body authorized by law to consent on behalf of a prospective subject to such subject's participation in the particular human research, including an attorney in fact appointed under a durable power of attorney, provided the power grants the authority to make such a decision ~~and the attorney in fact is not employed by the person, institution, or agency conducting the human research. No official or employee of the institution or agency conducting or authorizing the research shall act as a legally authorized representative.~~ For purposes of this chapter, "legally authorized representative" shall not include an official or employee of the institution or agency conducting or authorizing the research.

"Minimal risk" means that the risks of harm anticipated in the proposed research are not greater, considering probability and magnitude, than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

"Nontherapeutic research" means human research in which there is no reasonable expectation of direct benefit to the physical or mental condition of the human subject.

"Organizational unit head" means the person in charge of a juvenile correctional center, court service unit, ~~or other organizational unit of the department or Board of Juvenile Justice-regulated facility, program or service.~~

"Principal researcher" means the individual who is responsible for the research design, ~~the~~ conduct of research implementation, supervision of research staff, and the research findings.

"Research" means the systematic development of knowledge essential to effective planning and rational decision-making. It involves the assessment of current knowledge on conceptual problems selected, statement of those problems in researchable format, design of methodologies appropriate to the problems, and the application of statistical techniques to organize and analyze data. ~~Research findings should provide valuable information to management for policy options.~~

"Researcher" means an individual conducting research.

"Research project" means the systematic collection of information, analysis of the data, and the preparation of a report of findings.

"Sensitive data" means any data the compromise of which, with respect to confidentiality, integrity, or availability, could have a material adverse effect on agency programs or the privacy to which individuals are entitled.

"Virginia Longitudinal Data System" or "VLDS" means a data system, which provides de-identified case-specific data from participating agencies to qualified researchers through a process that involves submission of requests and approval or denial by each sponsoring agency from which data is sought, in an effort to create usable information for policy and generate cross-agency research.

~~"Written" means the required information is communicated in writing. Such writing may be available in either in~~ hard copy or electronic form.

6VAC35-170-20. General requirements of external researchers.

A. The principal researcher shall have academic or professional standing in the pertinent field or job-related experience in the areas of study or be directly supervised by such a person.

B. The principal researcher ~~is~~ shall be responsible for (i) the conduct of the research staff, (ii) the protection of the rights of subjects involved in the project, and (iii) ~~providing the~~ provision of information required by the coordinator of external research, organizational unit heads, and the ~~Human Research Review Committee~~ HRRC.

6VAC35-170-30. Professional ethics.

All research shall conform to the standards of ethics of professional societies such as the American Correctional Association, the American Psychological Association, the American Sociological Association, the National Association of Social Workers, the American Evaluation Association, or their equivalent.

6VAC35-170-50. Conditions for department approval of external research and data requests.

The department may approve research ~~projects~~ and data requests only when it determines, in its sole discretion, that the following conditions have been met:

1. The department has sufficient financial ~~resources~~ and staff resources to support the ~~research project request~~, and that, on balance, the benefits of the ~~research request~~ request justify the department's involvement;
2. The ~~proposed research request~~ request will not interfere significantly with department programs or operations, particularly those of the operating units that would participate in the proposed research; and
3. The ~~proposed research request~~ request is compatible with the purposes and goals of the juvenile justice system and with the department's organization, operations, and ~~resources;~~ and
4. ~~The proposed research requests for aggregate data or de-identified data, and the human research proposals, comply with all department procedures, which shall be posted on the department's website.~~

6VAC35-170-55. Review and approval of aggregate data requests.

A. The department shall determine the following prior to approving aggregate data requests:

1. That the request meets the conditions for department approval of research identified in 6VAC35-170-30 (professional ethics) and 6VAC35-170-50 (conditions for department approval of external research and data requests);

2. That the data requested is accessible;

3. An estimate of the time required to process the data request; and

4. Based on staff workload, whether staff resources are available to process the request.

B. The department may approve and coordinate the provision of data.

C. The department shall provide the principal researcher with a written notification of the approval or denial of the data request within 20 business days of the department's receipt of the proposal.

1. If the department denies the data request, documentation of the rationale for the denial shall accompany the proposal.

2. If the department approves the data request, it shall provide the principal researcher with a written estimated timeline for receipt of the data.

6VAC35-170-60. Formal agreement required.

No external research case-specific data request or human research request shall begin until all reviews required by this regulation and department procedure chapter have been completed and the principal researcher is given receives a copy of the research agreement signed by the director.

6VAC35-170-62. Review and approval of aggregate data requests(Repealed).

~~A. Aggregate data requests shall be submitted to the department in accordance with procedures posted on the department's website.~~

~~B. The department shall determine the following prior to approving the request:~~

~~1. The request meets the conditions for department approval of research identified in 6VAC35-170-30 and 6VAC35-170-50;~~

~~2. The data requested is accessible;~~

~~3. An estimate of the time required to process the data request; and~~

~~4. Based on staff workload, if staff resources are available to process the data request.~~

~~C. The department may approve and coordinate the provision of data.~~

~~D. The principal researcher shall be notified in writing of the approval or denial of the data request within 20 business days of the department receiving the proposal.~~

~~1. The department shall provide the principal researcher with documentation of the rationale for the denial of the request when applicable.~~

~~2. The department shall provide the principal researcher with a written estimated timeline for receipt of the data when applicable.~~

6VAC35-170-65. External case-specific data requests.

A. External case-specific data requests shall be submitted to the department via using the Confidentiality Agreement Form, Research Proposal Form, and the Research Agreement Form, and any attachment required by department procedures.

B. The Research Agreement Form shall be signed by the principal researcher and the student researcher, if applicable, at the time of submission.

C. The coordinator of external research shall determine the following within 10 business days of receiving the ~~research proposal~~ data request:

1. ~~The~~ That the request meets the conditions for department approval of research identified in 6VAC35-170-30 (professional ethics) and 6VAC35-170-50 (conditions for department approval of external research and data requests);
2. ~~The~~ That the proposal is not a human research proposal and is not required to be reviewed by the ~~Human Research Review Committee~~ HRRC; however, requests that include sensitive data shall be reviewed by the HRRC;
3. ~~The~~ That the principal researcher has appropriate academic or professional standing or job-related experience in the area to be studied;
4. ~~The~~ That the proposal is in the required format and includes all required information;
5. ~~The~~ That the proposal complies with basic research standards and applicable laws;
6. ~~The~~ That the data requested is accessible;
7. ~~Department staff and~~ That department resources are available to process the data request; and
8. An estimate of the time required to compile the data request.

D. ~~The~~ Except as provided in subsection E, the following identifiers are considered sensitive data and shall be removed from the data provided to researchers:

1. Names;
2. ~~Dates (date of birth, date of admission, date of release, etc.)~~ Dates of birth;
3. Postal street address information, other than town or city, state, and zip code addresses;
4. Telephone numbers;
5. Email addresses;
6. Social security numbers;
7. Medical record numbers;
7. ~~Account numbers (Juvenile Tracking System, Direct Care, etc.)~~;
8. Biometric identifiers, including finger and voice prints; and
9. Full face photographic images and any comparable image.

E. The director ~~or his designee~~ may on a case-by-case basis approve the dissemination of data containing a limited number of the identifiers listed in subsection D of this section for research benefiting the department, provided the researcher agrees that any such information shall be kept confidential in accordance with 6VAC35-170-40 (confidentiality requirements of all research) or released or published only in aggregate form.

F. The human research review process shall be followed when the data requested by a researcher are such that a reasonable person could identify the research participants.

G. Industry standard levels of encryption shall be required to protect all juvenile record information provided to researchers.

H. Upon determining the requirements in subsection C of this section are met, the director ~~or his designee~~ shall designate a an internal committee to which shall meet within 20 business days of receiving the proposal. The internal committee shall:

1. Review the data requested and determine if it is necessary to restrict the scope of the information provided. The scope of information may be restricted for any reason.
2. Determine the research is beneficial to the department.
3. Ensure juvenile confidential information will be adequately protected adequately.

4. Make a written recommendation to the director ~~or his designee~~ to approve or disapprove the request.

I. The director shall approve or deny the proposal within 10 business days of receiving the recommendation.

J. The department shall notify the researcher of the director's decision within five business days of the director making the decision.

1. If the director denies the proposal, the notification shall include a written rationale for the denial;

2. If the director approves the proposal, the notification shall include the research agreement containing the director's signature. The agreement shall outline the respective responsibilities of the parties and shall specify:

a. When progress reports shall be required. If the external research request also involves human research, this schedule of progress reports shall be developed in consultation with the HRRC;

b. That the department shall have unrestricted permission to use the research findings in accordance with professional standards of research;

c. That a final report shall be submitted electronically to the department;

d. That unless waived by the director or designee, all external articles, reports, and presentations made from the data collected shall be submitted electronically to the department and shall include the statement, "The findings of this study are the responsibility of the researchers, and cooperation by the Virginia Department of Juvenile Justice in facilitating this research should not be construed as an endorsement of the conclusions drawn by the researchers," and

e. That the research agreement shall not be effective until signed by both the principal researcher and the director.

~~K. Notification of the denial of a proposal shall include a written rationale.~~

~~L. Notification of the approval of a proposal shall include the research agreement. The research agreement shall outline the respective responsibilities of the parties and will specify:~~

~~1. When progress reports shall be required. If the external research also involves human research, this schedule of progress reports shall be developed in consultation with the Human Research Review Committee;~~

~~2. The department shall have unrestricted permission to use the research findings in accordance with professional standards of research;~~

~~3. A final report shall be submitted electronically to the department;~~

~~4. Unless waived by the director or designee, all external articles, reports, and presentations made from the data collected shall be submitted electronically to the department and shall include the statement, "The findings of this study are the responsibility of the researchers, and cooperation by the Virginia Department of Juvenile Justice in facilitating this research should not be construed as an endorsement of the conclusions drawn by the researchers."; and~~

~~5. The research agreement is not effective until signed by both the principal researcher and the director or his designee.~~

MK. The department shall provide the principal researcher, by first class mail , electronic mail, or facsimile, a final signed copy of the research agreement to the principal researcher containing the director's signature by first-class mail, electronic mail, or facsimile.

L. External case-specific data requests submitted through the VLDS shall not be subject to the requirements of this section. Researchers submitting such requests shall adhere to the provisions of Section 67 of this chapter.

6VAC35-170-67. VLDS requests

A. External case-specific data requests submitted through the VLDS shall be submitted to the department using the VLDS portal.

B. The researcher shall comply with all VLDS procedures in order to access data through the VLDS.

C. The chair of the HRRC shall have primary responsibility for reviewing and approving requests submitted through the VLDS portal. The chair of the HRRC may not approve an external case-specific data request unless it meets the following requirements:

1. The request satisfies the conditions for department approval of research identified in 6VAC35-170-30 and 6VAC35-170-50;
2. The request is not a human research proposal and does not require the HRRC's review;
3. The request is in the required format and includes all required information;
4. The request complies with basic research standards and applicable laws; and
5. The data requested is accessible and available in the VLDS.

D. Upon reviewing the data request, the chair of the HRRC may restrict the scope of the data, provided it is unrelated to the purpose of the research study.

6VAC35-170-69. Minor amendments to data requests

If the researcher offers a minor amendment to an external data request that the director previously approved in accordance with the provisions of this chapter, the chair of the HRRC may conduct an expedited review of the amendment, provided the amendment does not alter the scope of the request. Additional review or approval by the Internal Committee or director shall not be required.

6VAC35-170-70. Requirements specific to human research.

A. All human research shall comply with all applicable laws, particularly Chapter 5.1 (§ 32.1-162.16 et seq.) of Title 32.1 of the Code of Virginia and all other applicable laws regarding human research.

B. Research Human research involving known and substantive physical, mental, or emotional risk to subjects, including the withholding of any prescribed program of treatment, and all experimental medical, pharmaceutical or cosmetic research, are specifically prohibited.

C. Offering incentives to participate in research is discouraged, but not prohibited. Incentives offered shall be appropriate to the juveniles' custodial status and shall be proportionate to the situation.

D. If sensitive data are provided, the researchers must comply with appropriate security and non-disclosure requirements.

DE. No human research shall be conducted without the approval of the Human Research Review Committee HRRC.

6VAC35-170-80. Informed consent required for human research (~~§ 32.1-162.18 of the Code of Virginia~~).

A. Except as provided elsewhere in this chapter, no researcher may involve a human subject in human research without first obtaining the informed consent of the human subject or his legally authorized representative. A researcher shall seek such consent only under circumstances that provide the human subject or the legally authorized representative sufficient opportunity to consider whether to participate and that minimize the possibility of coercion or undue influence.

AB. If a human subject is competent, informed consent shall be given in writing by the subject and witnessed.

BC. If a human subject is not competent, informed consent shall be given in writing by the subject's legally authorized representative and witnessed.

CD. If a human subject is a minor who is otherwise capable of giving informed consent, informed consent shall be given in writing by both the minor and his legally authorized representative.

DE. If two or more persons who qualify as legally authorized representatives with decision-making authority inform the researcher that they disagree as to the participation of the prospective subject in human research subject, the subject shall not be enrolled in the human research that is the subject of the consent.

EF. Notwithstanding consent by a legally authorized representative, no person who is otherwise capable of giving informed consent shall be forced to participate in any human research.

FG. A legally authorized representative may not consent to nontherapeutic research unless the ~~Human Research Review Committee~~ HRRC determines that such the nontherapeutic research will present no more than a minimal risk to the human subject.

GH. ~~No~~ The informed consent form shall not include any language through which the human subject waives or appears to waive any legal right, including ~~any~~ the release of ~~any an~~ individual, institution, or agency or any agent thereof from liability for negligence (~~see § 32.1-162.18 of the Code of Virginia~~).

6VAC35-170-90. Exemptions from the requirements governing human research.

~~In accordance with § 32.1-162.17 of the Code of Virginia, the~~ A. The following categories of human research are not subject to this regulation's chapter's provisions governing human research. Except when as otherwise provided for by law or regulation, these activities ~~may~~ shall be subject to the nonhuman research review and approval process established by the department.

1. Activities of the Virginia Department of Health conducted pursuant to § 32.1-39 of the Code of Virginia.
2. Research or student learning outcomes assessments conducted in educational settings involving regular or special education instructional strategies; the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods; or the use of educational tests, whether cognitive, diagnostic, aptitude, or achievement, if the data from such tests are recorded in a manner so that subjects cannot be identified, directly or through identifiers linked to the subject.
3. Research involving solely the observation of public behavior, including observation by participants, or research involving survey or interview procedures unless subjects can be

identified from the data either directly or through identifiers linked to the subjects, and either:

a. The information about the subject, if it ~~become~~ became known outside the research, ~~could~~ reasonably could place the subject at risk of criminal or civil liability or be damaging to the subject's financial standing or employability; or

b. The research deals with sensitive aspects of the subject's own behavior, such as sexual behavior, drug or alcohol use, or illegal conduct.

4. The collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the subjects cannot be identified from the information either directly or through identifiers linked to the subjects.

5. Medical treatment of an experimental nature intended to save or prolong the life of the subject in danger of death, to prevent the subject from becoming disfigured, physically or mentally incapacitated, or to improve the quality of the subject's life.

B. Pursuant to 45 CFR 46.101, the exemptions outlined in this section shall not apply to research conducted upon individuals involuntarily confined in a penal institution, including individuals committed to a juvenile correctional center or juvenile secure detention center.

C. Pursuant to 45 CFR 46.101, the exemptions outlined in subdivision A(3) of this section shall not apply to research conducted upon children who have not attained age 18.

6VAC35-170-100. Proposal for external research.

A. If the external research is proposed to take place in a particular organizational unit, the principal researcher shall present a preliminary research proposal to the ~~head of that organizational unit~~ and get ~~the organizational unit head's~~ endorsement of the proposal from the organizational unit head, in accordance with procedures established by the department.

B. The principal researcher shall submit to the coordinator of external research a complete research proposal describing the research project, and containing:

1. Name, address, telephone numbers number, email address, title and affiliation of the principal researcher;

2. Name, telephone number, and email address of the person who will ~~immediately supervise~~ coordinate the project, if different from the principal researcher;

3. Funding source, if any;

4. Date of the proposal's submission to the department;

5. Title or descriptive name of the proposed research project;

6. Statement of the specific purpose or purposes of the proposed research project with anticipated results, including benefit to the department;

7. A concise description of the research design and techniques for data collection and analysis, and of the likely effects of the research methodology on existing programs and institutional operations;

8. Timeframes indicating proposed beginning and ending dates for (i) data collection, (ii) analysis, (iii) preliminary report, and (iv) final report;

9. A listing list of resources the researcher will require from the department or its units, such as staff, supplies, materials, equipment, work spaces, or access to clients and files;

10. A ~~The~~ written endorsement from the head of the organizational unit where the research will be conducted, if applicable head in accordance with subsection A;

11. ~~For student research, endorsement from the researcher's academic advisor or other appropriate persons;~~

- ~~12. For research involving records of juveniles at state and local court service units, a written endorsement from the appropriate juvenile and domestic relations judge or judges;~~
- ~~1311. For human research, a A written endorsement from the institutional review board of the institution or organization with which the researcher is affiliated; and~~
- ~~1412. For all research projects, a A signed and dated statement that the principal researcher and research staff have read, understand, and agree to abide by these regulations.~~

6VAC35-170-110. Initial review by coordinator of external research.

The coordinator of external research shall receive all research proposals from external researchers and shall:

1. Ensure that the proposals are in the required format and include all required information;
2. Confirm that the proposal complies with basic research standards and applicable laws; and
3. Refer the proposals to appropriate department personnel for review, which shall include, for all proposed human research, shall include, the department's ~~human research review committee~~ HRRC.

6VAC35-170-130. Human Research Review Committee.

A. ~~In accordance with § 32.1-162.10 of the Code of Virginia, the~~ The department shall establish a ~~human research review committee~~ HRRC composed of persons of various backgrounds to ensure the competent, complete, and professional review of human research activities conducted or proposed to be conducted or authorized by the department. No member of the ~~committee~~ HRRC shall be directly involved in the proposed human research or have administrative approval authority over the proposed research except in connection with his role on the ~~committee~~ HRRC.

B. The ~~committee~~ HRRC may ask persons with pertinent expertise and competence to assist in the review of any research proposal or ongoing human research activities.

C. The ~~committee~~ HRRC may require additional information from the researcher before making a recommendation to the director.

6VAC35-170-140. Timeline for review of human research proposals.

A. The ~~Human Research Review Committee~~ HRRC ~~will~~ shall review proposals involving human research within 30 business days of receiving a complete research proposal.

B. At the request of the researcher, the ~~Human Research Review Committee~~ HRRC may conduct an expedited review when the proposed research involves no more than minimal risk to the human subjects and:

1. The proposal has been reviewed and approved by another agency's ~~human research review committee~~ HRRC; or
2. The review involves only minor changes to a research project that was previously approved.

C. A proposal that undergoes expedited review pursuant to subdivision (B)(2) of this section shall be approved in writing by the chair of the HRRC before the researcher may proceed. Additional review or approval by the director shall not be required.

6VAC35-170-150. Committee HRRC review of human research proposals.

In reviewing the human research proposal, the ~~committee will~~ HRRC shall consider the potential benefits and risks to the human subjects, and shall recommend approval only when ~~the benefits outweigh the risks. In addition, the committee shall recommend approval only when:~~

1. The benefits to the human subjects outweigh the risks;

~~4~~2. The methodology is adequate for the proposed research;

~~2~~3. The research, if nontherapeutic, presents no more than a minimal risk to the human subjects;

~~3~~4. The rights and welfare of the human subjects are adequately protected;

~~4~~5. Appropriate provisions have been made to get informed consent from the human subjects, as detailed in 6VAC35-170-160 (HRRC review of informed consent provisions);

~~5~~6. The researchers are appropriately qualified;

~~6~~7. The criteria and means for selecting human subjects are valid and equitable; and

~~7~~8. The research complies with the requirements set out in this regulation and in applicable department policies and procedures chapter.

6VAC35-170-160. Committee HRRC review of informed consent provisions.

A. The ~~committee~~ HRRC shall review and approve the consent process and all required consent forms for each proposed human research project before recommending approval to the director.

B. The committee may approve a consent procedure that omits or alters some or all of the basic elements of informed consent, or waives the requirement to get informed consent, if the ~~committee~~ HRRC finds and documents that:

1. ~~Research~~ The research involves no more than a minimal risk to the subjects;

2. The omission, alteration, or waiver will not adversely affect the rights and welfare of the subjects;

3. The research could not ~~practicably~~ be performed practicably without the omission, alteration, or waiver; and

4. After participation, the subjects will be given additional pertinent information, when appropriate.

C. The ~~committee~~ HRRC may waive the requirement that the researcher get written informed consent for some or all subjects if the principal risk would be potential harm resulting from a breach of confidentiality, and the only record linking the subject and the research would be the consent document. The ~~committee~~ HRRC may require the researcher to give the subjects and legally authorized representatives a written statement explaining the research. Further, the researcher shall ask each subject ~~shall be asked~~ whether he wants documentation linking him to the research, and the subject's wishes shall govern.

6VAC35-170-170. Recommendation to director and final action.

A. The ~~Human Research Review Committee~~ HRRC shall make a recommendation to the director to deny, approve, or conditionally approve the proposed human research.

B. The director shall approve or deny the proposal within 10 business days of receiving the committee's recommendation.

C. The research agreement shall become effective only after all reviews required by this regulation ~~and department procedures~~ are completed, and the director signs the agreement on behalf of the department. The coordinator of external research ~~must~~ shall send a copy of the signed research agreement to the principal researcher before the project may begin.

D. The coordinator of external research shall notify the principal researcher of the director's final decision.

6VAC35-170-180. Annual review of human research activities.

The ~~human research review committee~~ HRRC shall review all human research activities at least annually to ensure that they are being conducted in conformance with the proposals as approved by the director.

6VAC35-170-185. Researcher noncompliance.

A. The researcher shall report noncompliance with the approved research proposal to the ~~Human Research Review Committee~~ HRRC and the institutional review board.

B. Research ~~If the HRRC determines that the research activities identified by the department or the Human Research Review Committee as failing~~ fail to comply with the approved proposal or ~~in violation of~~ violate the Code of Virginia or the Virginia Administrative Code, ~~the department may result in the department~~ restricting (i) restrict or ~~terminating~~ terminate further research; and ~~the department may~~ (ii) prohibit the researcher from presenting or publishing the research results; or (iii) bar researchers from conducting future studies.

6VAC35-170-190. Committee reports required.

A. In accordance with § 66-10.1 of the Code of Virginia, the ~~Human Research Review Committee~~ HRRC shall submit to the Governor, the General Assembly, and the director at least annually a report on human research projects approved by the ~~committee~~ HRRC and the status of such research, including any significant deviation from the proposals as approved.

B. The ~~Human Research Review Committee~~ HRRC ~~also shall also~~ annually submit annually to the Board of Juvenile Justice the same report as required by subsection A of this section.

C. The HRRC shall ensure that an overview of the report required in subsection A containing a summary of approved human research projects and the results of such projects, is posted on the department's website unless otherwise exempt from disclosure under the Virginia Freedom of Information Act.

6VAC35-170-200. Progress reports.

A. The department may require periodic reports on the progress of any research project. The principal researcher shall be responsible for providing such reports, and any supplementary information requested by the department, ~~in a timely manner.~~

B. The researcher shall submit an annual progress report to the coordinator of external research when the research is not completed within one year of approval.

6VAC35-170-220. Final report.

A. The department shall require ~~that~~ the principal researcher to submit a formal final report ~~be submitted~~ to the coordinator of external research and may require up to 10 copies of the report.

B. The report shall contain, unless waived by the director or designee, ~~contain~~ the following statement:

"The findings of this study are the responsibility of the researchers, and cooperation by the Virginia Department of Juvenile Justice in facilitating this research should not be construed as an endorsement of the conclusions drawn by the researchers."

6VAC35-170-230. Written procedures.

A. The department shall establish written procedures regarding the process for obtaining the organizational unit head's endorsement for any external research proposal, as required in 6VAC35-170-100 (proposal for external research).

B. The department may establish written procedures that outline additional requirements for the submission, approval, and review of research projects and data requests authorized in this chapter. The written procedures also may identify additional data elements that the department deems to be sensitive data.

C. The department shall ensure that any written procedures established pursuant to this chapter are posted on the agency website.

FORMS (6VAC35-170)

[Research Agreement \(rev. 1/2016\)](#)

[Research Proposal Summary \(rev. 1/2016\)](#)



Valerie P. Boykin
Director

COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

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MEMORANDUM

TO: State Board of Juvenile Justice

FROM: Virginia Department of Juvenile Justice

SUBJECT: Request Extension of Variance Applicable to Direct Supervision Staff in Juvenile Correctional Centers; Training

DATE: November 13, 2019

I. SUMMARY OF ACTION REQUESTED

The Department of Juvenile Justice (the department) respectfully requests the State Board of Juvenile Justice (board) to approve an extension of the variance submitted on behalf of the Bon Air Juvenile Correctional Center and originally approved by the board on November 12, 2014. The variance authorizes nonsecurity staff classified as "direct supervision staff" to break up their mandated training hours to enable them to receive 40 of the 120 mandated hours of training prior to working with residents and the remaining 80 hours before the close of their first year of employment with the department.

II. BACKGROUND

On November 12, 2014, the board granted the department's existing juvenile correctional centers (at the time, Bon Air Juvenile Correctional Center, Beaumont Juvenile Correctional Center, and the Reception and Diagnostic Center) a variance to the regulatory requirement contained in 6VAC35-71-160. Subsection B of the regulation provides:

B. Direct care staff and employees responsible for the direct supervision of residents shall, before that employee is responsible for the direct supervision of a resident, complete at least 120 hours of training, which shall include training in the following areas:

1. Emergency preparedness and response;
2. First aid and cardiopulmonary resuscitation, unless the individual is currently certified, with certification required as applicable to their duties;
3. The facility's behavior management program;
4. The residents' rules of conduct and the rationale for the rules;
5. The facility's behavior interventions, with restraint training required as applicable to their duties;

6. Child abuse and neglect;
7. Mandatory reporting;
8. Maintaining appropriate professional relationships;
9. Appropriate interaction among staff and residents;
10. Suicide prevention;
11. Residents' rights, including but not limited to the prohibited actions provided for in 6VAC35-71-550;
12. Standard precautions;
13. Recognition of signs and symptoms and knowledge of actions required in medical emergencies;
14. Adolescent development;
15. Procedures applicable to the employees' position and consistent with their work profiles; and
16. Other topics as required by the department and any applicable state or federal statutes or regulations.

The variance authorizes nonsecurity, direct supervision staff (interpreted by the department to include counselors, teachers, mental health providers, and recreational staff) to receive 40 of the 120 hours of mandated initial training required pursuant to 6VAC35-71-160 before assuming direct supervision responsibility. The remaining 80 hours of training must be completed before the end of the staff's first year of employment with the department. Under the variance, direct supervision staff must receive the initial 40 hours of training in the 16 various topics enumerated in subsection B of Section 160 before they may provide services to residents.

The department originally sought the variance in order to address the logistical challenges associated with affording training to nonsecurity staff. Unlike the staff classified as "direct care" or "security staff," who are hired in mass and complete their 120 hours of required training together as a group before being authorized to work with residents, nonsecurity staff have a different rate of attrition, are hired as the positions become vacant, and often have rolling start dates. Before the board approved the variance, this issue created a significant delay in the provision of important educational, mental health, and other mandated services. When the department originally sought the variance, training for nonsecurity staff was available every other month due to the unpredictable participation rates. Therefore, nonsecurity staff often waited 6-7 weeks before a new training session opened for them, and by regulation were prohibited from assuming their direct supervision responsibilities until their mandated training hours were completed. This often resulted in the disruption of vital behavioral health, educational, and other services while applicable staff waited for training to become available.

III. PROPOSED VARIANCE

The variance would continue to allow new direct supervision staff to receive 40 hours of training before assuming their direct supervision responsibilities and the remaining 80 hours before the close of their first year of employment. Direct care staff and security staff would remain subject to the current regulatory requirements. The specific provisions of the variance are provided below:

6VAC35-71-160. Required initial training

B. Direct care staff and security staff ~~and employees responsible for the direct supervision of residents~~ shall, before that employee is responsible for the direct supervision of a resident, complete at least 120 hours of training, which shall include training in the following areas:

1. Emergency preparedness and response;

2. First aid and cardiopulmonary resuscitation, unless the individual is currently certified, with certification required as applicable to their duties;
3. The facility's behavior management program;
4. The residents' rules of conduct and the rationale for the rules;
5. The facility's behavior interventions, with restraint training required as applicable to their duties;
6. Child abuse and neglect;
7. Mandatory reporting;
8. Maintaining appropriate professional relationships;
9. Appropriate interaction among staff and residents;
10. Suicide prevention;
11. Residents' rights, including but not limited to the prohibited actions provided for in 6VAC35-71-550 (prohibited actions);
12. Standard precautions;
13. Recognition of signs and symptoms and knowledge of actions required;
14. Adolescent development;
15. Procedures applicable to the employees' position and consistent with their work profiles; and
16. Other topics as required by the department and any applicable state or federal statutes or regulations.

C. Employees responsible for the direct supervision of residents shall complete at least 40 hours of training, including training in the topics set out in subdivisions (B)(1) through (B)(16) of this section before they may assume their direct supervision responsibilities. An additional 80 hours of training must be completed before the end of the staff's first year of employment.

IV. RATIONALE

The variance continues to be necessary to ensure the security and well being of residents and is not expected to threaten the safety of residents or staff.

For the past five years, this variance has prevented the interruption or delay of essential services to residents as "direct supervision staff" wait for the next available training slot. Without the variance, nonsecurity direct supervision staff would have to wait for almost two months before assuming their direct supervision responsibilities or have another staff who has completed the required training to be present during the provision of services that may require confidentiality.

The proposed variance also exceeds national standards for juvenile correctional staff established by the American Correctional Association (ACA). Currently, ACA directs all new juvenile careworkers to receive 120 hours of training in such topics as security procedures, suicide prevention, use of force, safety procedures, and key control **during their first year of employment**. The standards do not require that a specified volume of training hours be satisfied before direct care staff or staff responsible for the direct supervision of residents may assume the provision of care or services. By directing nonsecurity direct supervision staff to receive an initial 40 hours of training in the 16 modules, the variance has implemented additional safeguards to ensure that staff who may not have experience in a confinement setting are sufficiently trained in the required topics. Under the existing and proposed extended variance, direct supervision staff will need to continue to receive training in the 16 topics enumerated under Subsection B before assuming their direct supervision responsibilities.

Additionally, if granted, the variance will continue to exceed the regulatory requirements that were applicable to the department's juvenile correctional centers before the last set of amendments to the regulation in 2014. Prior to January 2014, the only training nonsecurity staff had to complete prior to working with residents was emergency preparedness and response.

VI. DURATION OF VARIANCE

The department requests the variance to be granted and to remain in effect for three years or until 6VAC35-71 is amended, whichever occurs first. The department has incorporated additional requirements into the proposed amendments to Chapter 71 of the regulations, and direct supervision staff are complying with these anticipated enhanced requirements. Staff will continue such compliance after the regulation is amended.



COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

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October 25, 2019

Joyce Holmon
Deputy Director of Residential Services
Bon Air Juvenile Correctional Center
1900 Chatsworth Avenue
Richmond, Virginia 23235

VIA ELECTRONIC MAIL

Dear Ms. Holmon:

This letter responds to your request for a waiver to the regulatory requirements in 6VAC35-71-160 related to training for staff classified as direct supervision staff in juvenile correctional centers. On behalf of the Bon Air Juvenile Correctional Center (JCC), you are requesting that I grant a waiver authorizing "direct supervision staff" to receive 40 of the 120 hours of regulatory-mandated initial training prior to assuming their direct supervision responsibilities, provided the remaining 80 hours of training are completed within their first year of employment. You seek this waiver pursuant to my authority under 6VAC35-20-93.

The basis for your request involves an active variance applicable to juvenile correctional centers, which is set to expire on November 12, 2019. The variance, originally approved in November 2014, excuses direct supervision staff from having to receive the mandated 120 hours of initial training required pursuant to 6VAC35-71-160 before they may assume direct supervision responsibilities. Instead, such staff must receive at least 40 hours of training in certain specified topics before assuming direct supervision responsibilities and the remaining 80 hours of training before the expiration of their first year of employment. The department plans to present a request for extension of this variance to the Board of Juvenile Justice (board) at the November 13, 2019, board meeting, which falls one day after the variance is set to expire.

Pursuant to 6VAC35-20-93, the Director of the Department of Juvenile Justice has the authority to issue a waiver to a noncritical regulatory requirement, provided: (i) the requirement is not mandated by statute or by federal or state regulations other than those issued by the board; (ii) noncompliance with the regulatory requirement will not result in a threat to the health, welfare, or safety of residents, the community, or staff; (iii) enforcement of the regulatory requirement will create an undue hardship; (iv) juveniles' care or services would not be adversely affected;

and (v) there are emergency conditions or circumstances that make compliance with the regulatory requirement impossible or impractical. Based on my review of this request, it appears that the juvenile correctional center is presented with such circumstances. The current regulatory requirement mandating 120 hours of initial training before direct supervision staff may assume such responsibilities is not a product of federal or state statutes or of other state-issued regulations. Furthermore, the variance has been in place for five years, and the department has seen no evidence that its application threatens the health, welfare, and safety of residents. Rather, the variance, while excusing staff from having to receive all the required training at one time, ensures that direct supervision employees are proficient in topics needed to protect residents, staff, and others in the facility from injury or illness. These topics include suicide prevention, First Aid and CPR, behavior interventions, and standard precautions. Staff remain responsible for receiving the additional 80 hours of training before the end of their first year of employment. Furthermore, I believe that enforcement of the existing regulatory requirement for the brief period between the variance's expiration and the November 13 board meeting will create an undue hardship for the department's Training Unit, which schedules training far in advance of the set date, as well as newly hired direct supervision staff. Enforcement of the existing regulatory provision also will place the department in the same position that the variance was intended to prevent. Granting the waiver will ensure that educational, mental health, and other essential services are not interrupted or delayed while new direct supervision staff wait for training slots to become available.

I find that your request meets the regulatory criteria for issuance of a waiver, and I grant your request accordingly. The waiver will expire when the board makes a determination on your variance request at the November 13, 2019, meeting. I will forward your variance request to the board for consideration at the meeting.

Sincerely,



Valerie P. Boykin
Director, Department of Juvenile Justice

cc: Jennifer Woolard
Board of Juvenile Justice



COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

Valerie P. Boykin
Director

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MEMORANDUM

TO: State Board of Juvenile Justice

FROM: Virginia Department of Juvenile Justice

SUBJECT: Request to Initiate a NOIRA for the Regulation Governing State Reimbursement of Local Juvenile Residential Facility Costs (6VAC35-30).

DATE November 13, 2019

I. SUMMARY OF ACTION REQUESTED

The Department of Juvenile Justice (the department) respectfully requests the State Board of Juvenile Justice (board) to approve the submission of a Notice of Intended Regulatory Action (NOIRA) to initiate a comprehensive regulatory review and amendment for the Regulation Governing State Reimbursement of Local Juvenile Residential Facility Costs, currently set out at 6VAC35-30.

II. BACKGROUND

Pursuant to the statutory mandate in *Code of Virginia* § 16.1-309.5, the Commonwealth of Virginia must reimburse localities for one-half the cost of “construction, enlargement, renovation, purchase, or rental of a detention home or other facility, provided the plans and specifications for these facilities have been approved by the board and the Governor.” Under this statute, the board must promulgate regulations, including criteria to serve as guidelines in evaluating requests for these reimbursements and to ensure the geographically equitable distribution of state funds allocated for these purposes.

Based on this directive, the above-captioned regulation establishes a process for localities to obtain reimbursement for a portion of the costs incurred in construction, renovation, and similar projects for detention centers and locally operated juvenile residential facilities. The process generally involves the submission of reports for department review; classification of projects based on their scope; board review of the project, including a determination of construction costs based on a funding formula established by regulation; a funding recommendation made by the board based on the costs of construction and other criteria established by regulation; and approval by the Governor’s office.

Despite the statutory language mandating the state reimbursement, for several years the General Assembly has included language in the Appropriation Act (currently set out in Paragraph A of Item 411 of the 2019

Appropriation Act) that prohibits the board from approving funds for state reimbursement of such construction, enlargement, or renovation costs for local detention centers, group homes, and similar facilities. An exception to the moratorium, however, allows the board, together with the Secretary of Public Safety and Homeland Security, to approve state funding for emergency maintenance projects to resolve immediate life safety issues provided the projects comply with the board's regulations. The General Assembly has approved this budget language consistently since the 2003 General Assembly Session.

III. RATIONALE FOR THIS REQUEST

On April 11, 2019, pursuant to authorization granted by the board and in accordance with the process outlined in *Code of Virginia* § 2.2-4007.1, the department submitted a Periodic Review Report regarding this regulatory chapter and recommended that the chapter be amended to promote consistency in its application and ensure compliance. In furtherance of this recommendation, the department has convened a workgroup consisting of representatives from the Virginia Juvenile Detention Association and internal department staff to conduct a more comprehensive review of the regulation and to identify areas for amendment.

In addition to the preliminary periodic review recommendation, the department is aware of several localities that have proposed construction or renovation projects or are in the early stages of such activities and that have identified concerns with some of the outdated provisions contained in the department's regulations and supplemental guidance documents. Based on this information and its own review, the workgroup proposes to make several changes, including the following:

- Updating definitions and adding new terms to provide clarity;
- Removing the provisions in this and other regulatory chapters that make the regulation applicable, regardless of whether localities are seeking reimbursement;
- Establishing a new, separate process for localities that are engaging in relevant projects but are not seeking reimbursement;
- Allowing flexibility regarding the deadline for the board's review of certain documents;
- Adding language from the Appropriation Act allowing for state reimbursement for emergency maintenance projects;
- Abandoning the current requirement that the locality determine construction costs based on a board-established funding formula;
- Imposing a deadline from the date of applicable board approvals for the locality to commence construction, after which time the locality must reinitiate the process set out in the regulation; and
- Removing provisions that incorporate into the regulation by reference documents of the department's own creation and documents that are no longer applicable to the process.

The department is asking the board to approve the submission of a NOIRA to initiate the amendment of 6VAC35-30 in order to address the concerns outlined in this section and any other concerns that may arise as the amendments move through the regulatory process.

VI. PROCESS FOR SUBMISSION OF NOIRA AND NEXT STEPS

The NOIRA is the first stage of the standard regulatory process and is intended to alert the public of the agency's intent to take certain action on a regulation. If the board approves the department's request to initiate the NOIRA, the department will complete and submit the necessary filing to the Virginia Regulatory Town Hall. This will launch review of the proposal by the Department of Planning and Budget, the Secretary of Public Safety and Homeland Security, if applicable, and the Governor's office. Once the requisite reviews have been completed at the Executive Branch level, the action will undergo a 30-day public comment period, which may prompt additional meetings of the workgroup. When the workgroup's review of the regulation is complete, the department will provide the board with proposed text for amendments to the regulation. If the board approves the proposed text this will initiate the second stage (the Proposed stage) of the regulatory process.

The anticipated timeframes for the NOIRA action are established in the table below:

Action/Review	Deadline for Completion
Submit NOIRA to Virginia Regulatory Town Hall	No deadline after Board approval
Department of Planning and Budget	14-day deadline
Cabinet Secretary*	14-day deadline
Governor's Office	No deadline
Publication of NOIRA in Virginia Register	In accordance with Register's Publication Schedule
Public Comment Period	30-day deadline

* Cabinet Secretary review is required only if DPB advises the Cabinet Secretary and Governor that the NOIRA presents issues requiring further review.



COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice

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MEMORANDUM

TO: State Board of Juvenile Justice

FROM: Virginia Department of Juvenile Justice

SUBJECT: Request to Initiate a NOIRA for the Regulation Governing Mental Health Services Transition Plans for Incarcerated Juveniles (6VAC35-180).

DATE November 13, 2019

I. SUMMARY OF ACTION REQUESTED

The Department of Juvenile Justice (the department) respectfully requests the State Board of Juvenile Justice (board) to approve the submission of a Notice of Intended Regulatory Action (NOIRA) to initiate a comprehensive review of, and amendments to, the Regulation Governing Mental Health Services Transition Plans for Incarcerated Juveniles, currently set out at 6VAC35-180. The review and amendments will enable the department to carry out the recommendations it made in the Periodic Review Report in accordance with the process mandated in the Administrative Process Act (§ 2.2-4000 et seq. of the Code of Virginia).

II. BACKGROUND

Pursuant to the statutory mandate in Code of Virginia § 16.1-293.1, the board shall promulgate regulations for the "planning and provision of post-release services" for certain youth identified as having a recognized mental health, substance abuse, or other therapeutic treatment need. The targeted youth include those who are committed to the department pursuant to subdivision (A)(14) of § 16.1-278.8 of the Code of Virginia or placed in a postdispositional detention program pursuant to subsection B of § 16.1-284.1. The statute requires the board to consult with the Department of Behavioral Health and Developmental Services in promulgating the regulations.

In accordance with these statutory requirements, in 2008, the Regulations Governing Mental Health Services Transition Plans for Incarcerated Juveniles took effect. The regulations were a product of numerous meetings of a workgroup consisting of representatives from various state agencies (including the Department of Behavioral Health and Developmental Services), along with representatives from several advocacy groups, local community service boards, and other local organizations. The regulations have remained in effect since their inception on January 1, 2008. Despite the statutory mandate established in § 2.2-4007.1 that requires state agencies to review their regulations every four years, this chapter has never undergone a review.

III. RATIONALE FOR THIS REQUEST

In an effort to come into compliance with the quadrennial Periodic Review requirement, on March 27, 2019, pursuant to authorization granted by the board and in accordance with the process outlined in § 2.2-4007.1 of the Code of Virginia, the department submitted a Periodic Review Report regarding this regulatory chapter. In the report, the Department recommended that this chapter be amended to address inconsistent, obsolete, and ambiguous provisions with a goal of promoting consistency in the regulation's application, increasing compliance, and improving outcomes for eligible youth with mental health, substance abuse, or other therapeutic treatment needs. In furtherance of this recommendation, the department has convened a workgroup consisting of internal staff and representatives from the Virginia Department of Behavioral Health and Developmental Services, the Virginia Department of Social Services, the Virginia Juvenile Detention Association, and the Virginia Association of Post-Dispositional Programs to conduct a more exhaustive review of this regulatory chapter.

Based on the workgroup's preliminary discussions, the department anticipates recommending several amendments to the regulation, including the following:

- Defining indefinite or vague terms used frequently throughout the regulation and adding new terms to provide clarity;
- Removing the "Purpose and Goal" statement, consistent with recommendations from the Virginia Register of Regulations;
- Simplifying language and removing duplicative citations to make the regulation easier to read;
- Modifying or removing several provisions in order to comply with rules established in the *Virginia Register of Regulations Form, Style and Procedure Manual for Publication of Virginia Regulations*;
- Clarifying roles and changing requirements regarding the content of the Memoranda of Understanding that applicable court service units and juvenile detention centers must execute under the existing regulation, and
- Narrowing the categories of youth for whom a Mental Health Services Transition Plan is required, consistent with language in the governing statute.

The department is asking the board to approve the submission of a NOIRA to initiate the amendment of 6VAC35-180 in order to address the concerns outlined above and any other concerns that may arise as the workgroup continues its review of the regulation.

VI. PROCESS FOR SUBMISSION OF NOIRA AND NEXT STEPS

The NOIRA, the first stage of the standard regulatory process, is intended to alert the public of the board's intent to take certain action on a regulation. If the board approves the department's request to initiate the NOIRA action, the department will complete and submit the necessary filing to the Virginia Regulatory Town Hall. This will launch Executive Branch review of the action. Concurrently, the workgroup will continue reviewing the regulation and making recommendations for amendments. Once the requisite Executive Branch-level reviews are complete, the action will undergo a 30-day public comment period, which may prompt additional meetings of the workgroup. When the workgroup's review of the regulation is complete, the department will present proposed amendments to the regulation for board approval and advancement to the second stage of the regulatory process. The anticipated timeframes for the NOIRA action are established in the table below:

Timeframes for NOIRA Stage

Action/Review	Deadline for Completion
Submit NOIRA to Virginia Regulatory Town Hall	No deadline after Board approval
Department of Planning and Budget	14-day deadline
Cabinet Secretary*	14-day deadline
Governor's Office	No deadline
Publication of NOIRA in Virginia Register	In accordance with Register's Publication Schedule
Public Comment Period	30-day deadline

* Cabinet Secretary review is required only if DPB advises the Cabinet Secretary and Governor that the NOIRA presents issues requiring further review.

STATE BOARD OF JUVENILE JUSTICE

BY-LAWS

Revised September 13, 2017

Article 1.

§ 1.01. Establishment and Composition.

The State Board of Juvenile Justice (the "Board") is established by § 66-4 of the Code of Virginia. The Board consists of nine members appointed by the Governor and confirmed by the General Assembly if in session and, if not, at its next succeeding session. Two of the nine members shall be experienced educators.

Article 2.

§ 2.01. Term of Office.

In accordance with § 66-5 of the Code of Virginia, the term of office of Board members shall be for four years, except that appointments to fill vacancies shall be for the remainder of the unexpired terms. No person shall be eligible to serve more than two successive four-year terms, except that a person appointed to fill a vacancy may be eligible for two additional, successive four-year terms after the term of the vacancy for which the person was appointed has expired.

§ 2.02. Orientation.

In accordance with § 2.2-3702 of the Code of Virginia, within two weeks of their appointment or re-appointment, members of the Board shall (i) be furnished by the Board's administrator or legal counsel with a copy of the Virginia Freedom of Information Act (§ 2.2-3700 et seq.), and (ii) read and become familiar with the provisions of that Act.

§ 2.03. Meetings.

Section 66-8 of the Code of Virginia requires that the Board meet at least four times each calendar year. The Board shall meet as follows:

- (a) Regular Meetings - Meet once during each calendar quarter at such times and places as it deems appropriate.
- (b) Special Meetings - Special meetings of the Board may be called by the Chairperson or, if the Chairperson is absent or disabled, by the Vice chairperson or by any four members of the Board at such dates, times and places as may be specified in the call for the meeting.

Last Reviewed September 5, 2018

§ 2.04. Notice.

At least five days' notice in writing shall be given to a Board member of the date, time, and place of all meetings. In accordance with § 2.2-3707 of the Code of Virginia, notice including the time, date and place of each meeting shall be furnished to any citizen of the Commonwealth who requests such information. Notices for meetings shall state whether or not public comment will be received at the meeting, and, if so, the approximate points during the meeting public comment will be received. Any requests to be notified of Board meetings on a continual basis shall be made at least once a year, in writing and shall include the requester's name, address, zip code, daytime telephone number, email address (if available) and organization, if applicable. Notice to any citizen of the Commonwealth who requests such information, reasonable under the circumstance, of special or emergency meetings shall be given contemporaneously with the notice provided Board members.

§ 2.05. Board Materials.

With the exception of any materials that are exempt from public disclosure pursuant to § 2.2-3705 of the Code of Virginia, at least one copy of all agenda packets and materials furnished to Board members for a meeting shall be made available for inspection by the public at the same time such documents are furnished to the members of the Board.

§ 2.06. Cancellation or Rescheduling of Meetings.

The Chairperson may, with the concurrence of a majority of the Board, cancel or postpone a meeting. The Director of the Department of Juvenile Justice (the "Director") shall ensure that proper and immediate public notice is given. In an emergency, the Chairperson is authorized to cancel, significantly alter, or postpone the meeting time.

§ 2.07. Quorum.

In accordance with § 66-9 of the Code of Virginia, a majority of the current membership of the Board shall constitute a quorum for all purposes.

§ 2.08. Attendance.

Participation is essential to the fulfillment of the function of membership. The absence of any member impedes the business of the Board and deprives the Department of Juvenile Justice (the "Department") of the overall policy direction this Board is responsible for providing. Should any member miss three consecutive regular meetings, or a total of five or more regular meetings during a calendar year, the Chairperson, following consultation with the member, is authorized to advise the appropriate Executive Branch official(s). In accordance with § 66-5 of the Code of Virginia, members of the Board may be suspended or removed by the Governor at his pleasure.

§ 2.09. Conduct of Business

The Board actively encourages and welcomes public participation in all its public deliberations. All meetings of the Board, including meetings and work sessions during which no votes are cast or any decisions made, shall be public meetings, and shall be conducted in accordance with § 2.2-3707 of the Code of Virginia. Votes shall not be

taken by written or secret ballot in an open meeting, and minutes shall be recorded at all public meetings. All meetings shall be conducted in accordance with the principles of procedures prescribed in Roberts' Rules of Order.

Article 3. Powers and Duties.

§ 3.01. **General Powers and Duties.**

Section 66-10 of the Code of Virginia gives the Board the following general powers and duties:

- a) To establish and monitor policies for programs and facilities for which the Department is responsible by law;
- b) To ensure the development of a long-range youth services policy;
- c) To monitor the activities of the Department and its effectiveness in implementing the policies of the Board;
- d) To advise the Governor and Director on matters relating to youth services;
- e) To promulgate such regulations as may be necessary to carry out the provisions of Title 66 of the Code of Virginia and other laws of the Commonwealth;
- f) To ensure the development of programs to educate citizens and elicit public support for the activities of the Department; ~~and~~
- g) To establish length-of-stay guidelines for juveniles indeterminately committed to the Department and to make such guidelines available for public comment;
- h) To adopt all necessary regulations for the management and operation of the schools in the Department, provided that any such regulations do not conflict with regulations relating to security of the institutions in which the juveniles are committed; ~~and~~
- h)i) To establish compulsory minimum entry-level, in-service, and advanced training standards, as well as the time required for completion of such training, for persons employed as juvenile correctional officers employed at a juvenile correctional facility as defined in § 66-25.3.

§ 3.02. **Additional Specific Powers and Duties.**

Various sections of the Code of Virginia give the Board additional specific powers and duties, both mandatory and discretionary. Such sections of the Code of Virginia include, but are not limited to, the following:

- a) Section 2.2-4007.02 of the Code of Virginia requires the Board to promulgate regulations for public participation in the formation and development of regulations.
- b) Section 16.1-223 of the Code of Virginia requires the Board to promulgate regulations governing the security and confidentiality of data in the Virginia Juvenile Justice Information System.
- c) Section 16.1-233 of the Code of Virginia requires the Board to establish minimum standards for court service unit staff and related supportive personnel and to promulgate regulations pertaining to their appointment and functions to the end

that uniform services, insofar as is practical, will be available to juvenile and domestic relations district courts throughout the Commonwealth.

- d) Section 16.1-284.1 of the Code of Virginia requires the standards established by the Board for secure juvenile detention centers to require separate services for the rehabilitation of juveniles placed in post-dispositional detention programs for greater than 30 calendar days.
- e) Section 16.1-293.1 of the Code of Virginia requires the Board to promulgate regulations for the planning and provision of mental health, substance abuse, or other therapeutic treatment services for persons returning to the community following commitment to a juvenile correctional center or post-dispositional detention program.
- f) Section 16.1-309.3 of the Code of Virginia authorizes the Board to approve local plans for the development, implementation, and operation of a community-based system of services under the Virginia Juvenile Community Crime Control Act (Article 12.1 of Title 16.1 of the Code of Virginia). This section also requires the Board to solicit written comments on the plan from the judge or judges of the juvenile and domestic relations court, the director of the court service unit, and if applicable, the director of programs established under the Delinquency Preventions and Youth Development Act (Chapter 3 of Title 66 of the Code of Virginia).
- g) Section 16.1-309.5 of the Code of Virginia requires the Board to promulgate regulations to serve as guidelines in evaluating requests for reimbursement of one-half the cost of construction, enlargement, renovation, purchase, or rental of a secure juvenile detention center or other home and to ensure the geographically equitable distribution of state funds provided for such purpose.
- h) Section 16.1-309.9 of the Code of Virginia requires the following:
 - a. The Board to develop, promulgate, and approve standards for the development, implementation, operation, and evaluation of a range of community-based programs, services, and facilities authorized by the Virginia Juvenile Community Crime Control Act (Article 12.1 of Title 16.1 of the Code of Virginia)
 - b. The Board to approve minimum standards for the construction and equipment of secure juvenile detention centers or other facilities and for the provision of food, clothing, medical attention, and supervision of juveniles to be housed in these facilities and programs.
- i) Section 16.1-309.10 of the Code of Virginia authorizes the Board to visit, inspect, and regulate any secure juvenile detention center, group home, or the residential care facility for children in need of services, delinquent, or alleged delinquent that is established by a city, county, or any combination thereof.
- j) Section 16.1-322.5 of the Code of Virginia requires the Board to approve those localities creating a Commission for the purpose of financing and constructing a regional detention or group home. This section also requires the Board to approve contracts for construction of such facilities.
- k) Section 16.1-322.7 of the Code of Virginia requires the Board to make, adopt, and promulgate regulations governing specific aspects of the private management and

operation of local or regional secure juvenile detention centers or other secure facilities.

- l) Section 66-10.1 of the Code of Virginia requires the Board to promulgate regulations to effectuate the purposes of Chapter 5.1 (§32.1-162.16 et seq.) of Title 32.1 of the Code of Virginia governing any human research conducted or authorized by the Department.
- m) Section 66-13 of the Code of Virginia requires the Board to prescribe standards for the development, implementation, and operation of juvenile boot camps.
- n) Section 66-23 authorizes the Board to promulgate regulations to govern the process by which superintendents of juvenile correctional centers consent to residents applying for driver's licenses and issue employment certificates;
- o) Section 66-24 of the Code of Virginia requires the Board to promulgate regulations for the certification of community group homes or other residential care facilities that contract with or are rented for the care of juveniles in direct state care.
- p) Section 66-25.1 of the Code of Virginia requires the Board to promulgate regulations governing the form and review process for any agreement with a public or private entity for the operation of a work program for juveniles committed to the Department.
- q) Section 66-25.6 of the Code of Virginia requires the Board to promulgate regulations governing the private management and operation of juvenile correctional facilities.
- r) Section 66-28 of the Code of Virginia requires the Board to prescribe policies governing applications for grants pursuant to the Delinquency Prevention and Youth Development Act (Chapter 3 of Title 66 of the Code of Virginia) and standards for the operation of programs developed and implemented under the grants.

Article 4.

Committees.

§ 4.01. Special or Ad Hoc Committees

Special or Ad Hoc Committees may be constituted at any time by action of the Board or the Chairperson. At the time a Special Committee is created, its mission shall be specifically established by action of the Board or by the Chairperson. In creating such Special Committees, the Chairperson shall specify the time within which the Committee is to make its report to the Board.

§ 4.04. Other Appointments.

The Chairperson may designate members of the Board from time to time to serve on various task forces, advisory councils, and other committees and to serve as liaison with Department functions and state organizations or associations.

Article 5.
Officers.

§ 5.01. Officers Elected from the Board.

The Officers of the Board elected from its membership shall be the Chairperson, Vice-chairperson and Secretary, who shall each be elected by the Board at its first regular meeting of the fiscal year. Officers shall serve for a term of one year and shall be eligible for re-election.

§ 5.02. Chairperson.

The Chairperson shall be the presiding officer of the Board at its meetings. Upon request of the Board, the Chairperson shall act as its spokesperson or representative and shall perform such additional duties as may be imposed on that position by an Act of the General Assembly or by direction of the Board. The Chairperson shall be an ex-officio member of all Committees of the Board.

§ 5.03. Vice-chairperson.

In the absence of the Chairperson at any meeting or in the event of disability or of a vacancy in the office, all the powers and duties of the Chairperson shall be vested in the Vice-chairperson. The Vice-chairperson shall also perform such other duties as may be imposed by the Board or the Chairperson.

§ 5.04. Secretary.

The Secretary shall (1) review and recommend improvements to Board meeting procedures and other relevant Board business so as to facilitate the administrative efficiency of the Board; (2) ensure the development of appropriate resolutions, etc., which are needed by the Board from time to time; (3) serve as the Board's parliamentarian; (4) work closely with the Department staff who are assigned to provide administrative assistance to the Board to review and sign minutes and policy documents, etc.; and (5) to ensure that unique or non-routine materials and equipment are available for the Board to carry out its functions. In the event that both the Chairperson and Vice-chairperson are absent at any meeting, the Secretary shall preside over the meeting.

§5.05. Order of Succession in Absence of Officers

In the event that the Chairperson, Vice-chairperson, and Secretary all are absent from a meeting, the Board member in attendance with the longest tenure on the Board shall be authorized to preside over the meeting. In the event that two or more such members in attendance have served identical terms, the Director shall be authorized to designate one of the two Board members to preside over the meeting.

Article 6.

Department of Juvenile Justice.

§ 6.01. Director.

§ 66-1 of the Code of Virginia establishes the Department of Juvenile Justice under the immediate supervision of a Director who is appointed by the Governor, subject to confirmation by the General Assembly. In accordance with § 66-2 of the Code of Virginia, the Director is responsible for supervising the Department and for exercising such other powers and performing such other duties as may be provided by law or as may be required of the Director by the Governor and the Secretary of Public Safety. The Director shall implement such standards and goals of the Board as formulated for local and community programs and facilities. In accordance with § 16.1-234 of the Code of Virginia, it shall be the duty of the Department to ensure that minimum standards established by the Board for court service and other state-operated programs are adhered to.

§ 6.02. Relationship of the Board and Department.

In keeping with the powers and duties imposed upon the Board and upon the Director by law, the Board shall regularly meet with the Director in order that the responsibilities of each are carried out efficiently and cooperatively. The Board shall periodically assess its needs for administrative assistance and how well those needs are being met, and shall so advise the Director. In accordance with § 16.1-309.4 of the Code of Virginia, the Department shall submit to the Board on or before July 1 of odd-numbered years, a statewide plan for the establishment and maintenance of a range of institutional and community-based, diversion, predispositional and postdispositional services to be reasonably accessible to each court. The Department shall establish procedures to ensure (i) the superior quality and timeliness of materials submitted to the Board and (ii) that the Board is informed as early as possible of individuals attending Board meetings.

§ 6.03. Administrative Assistance.

The Department shall provide staff assistance to the Board in carrying out its administrative duties.

Article 7.

Amendments and Procedural Irregularities.

§ 7.01. Annual Review.

The Board shall review the By-Laws annually to ensure compliance with any amendments that may have been made to applicable sections of the Code of Virginia.

§ 7.02. Amendments.

The By-Laws may be amended at any regular or special meeting of the Board by an affirmative vote of the majority of the Board, provided that the proposed amendment was included in the notice of the meeting.

§ 7.03. Procedural Irregularities.

Failure to observe procedural provisions of the By-Laws does not affect the validity of Board actions.

§ 7.04. Effective Date.

The foregoing By-Laws are adopted by the Board and are effective as amended, September 13, 2017.

DEPARTMENT OF JUVENILE JUSTICE REGULATORY UPDATE

November 13, 2019

CURRENT ACTIONS:

6VAC35-101 Regulation Governing Juvenile Secure Detention Centers

Stage: Proposed (Standard Regulatory Process)

Status: This regulation became effective on January 1, 2014. This action involves a comprehensive review of the regulatory requirements. The Notice of Intended Regulatory Action (NOIRA) was published in the *Virginia Register* on October 17, 2016. At the NOIRA stage, no public comments were submitted. The action was submitted through the Proposed Stage on September 3, 2019 and is currently being reviewed by the Office of the Attorney General (OAG).

Next step: The Department of Planning and Budget (DPB) will complete an Economic Impact Analysis and policy analysis.

6VAC35-71 Regulation Governing Juvenile Correctional Centers

Stage: Proposed (Standard Regulatory Process).

Status: This regulation became effective on January 1, 2014. This action involves a comprehensive review of the regulatory requirements. The Notice of Intended Regulatory Action (NOIRA) was published in the *Virginia Register* on October 3, 2016. At the NOIRA stage, no public comments were submitted. Now in the Proposed Stage, the action has been approved by DPB, the Secretary of Public Safety and Homeland Security (SPSHS), and the Governor's Office. The Proposed Regulatory Action was published in the *Virginia Register of Regulations* on September 30, 2019 and is currently undergoing a 60-day public comment period, which will end on November 29, 2019.

Next step: After the public comment period closes, the department will have just over six months to advance the action to the Final stage of the process and submit any changes for Executive Branch review.

6VAC35-11-150 Public Participation Guidelines Public comment

Stage: (Fast-Track Process)

Status: This regulation became effective on September 17, 2008. This amendment is the result of a periodic review of this chapter, the results of which were reported on May 21, 2019. The Fast-Track was approved by DPB on July 18, 2019, the SPSHS on July 30, 2019, and the Governor's office on August 26, 2019. The action was published in the *Virginia Register* on September 16, 2019 and the public comment period ended on October 16, 2019.

Next step: Unless the board receives objections by an applicable standing member of the House or Senate, a member of the Joint Commission on Administrative Rules, or 10 or more members of the public, the regulation will take effect on October 31, 2019.

COMPLETED ACTIONS

6VAC35-101-45 Regulation Governing Juvenile Secure Detention Centers, Contracts between juvenile detention centers and separate entities

Stage: (Fast-Track Process).

Status: This is a new provision proposed for addition to the Regulation Governing Juvenile Secure Detention Centers, which became effective on January 1, 2014. This is a standalone action apart from the comprehensive review of the regulatory requirements in Chapter 101. The Fast-Track action was certified by the OAG on September 17, 2018, and completed review by DPB on October 27, 2018, the SPSHS on November 6, 2018, and the Governor's office on June 5, 2019.

The Fast-Track was published in the *Virginia Register* on July 8, 2019 followed by a 30-day public comment period. The board did not receive any comments or objections during the public comment period. The regulation took effect on August 22, 2019.

Virginia's Standardized Disposition Matrix(SDM)

*Stephanie C. Garrison,
Regional Program Manager*



**Virginia Department
of Juvenile Justice**

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Standardized Disposition Matrix (SDM)

In 2017, 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 of 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



Standardized Disposition Matrix (SDM)

WHAT IS THE PURPOSE?

- To bring a greater degree of consistency, reliability, and equity to the assessment and decision-making process.
- Designed to structure objective decisions in a juvenile court disposition hearing.
- To recommend an appropriate level of Court Service Unit supervision.
- To make informed decisions that are based on risk and offense severity.



Standardized Disposition Matrix (SDM)

WHAT IS THE FUNCTION?

- Will ensure that youth in similar situations will have similar and appropriate disposition recommendations
- Will allow DJJ to evaluate disposition recommendation practices
- Will allow DJJ to compare disposition trends
- Provides collaboration opportunities between probation officers and attorneys
- Will not replace the expertise of probation officers



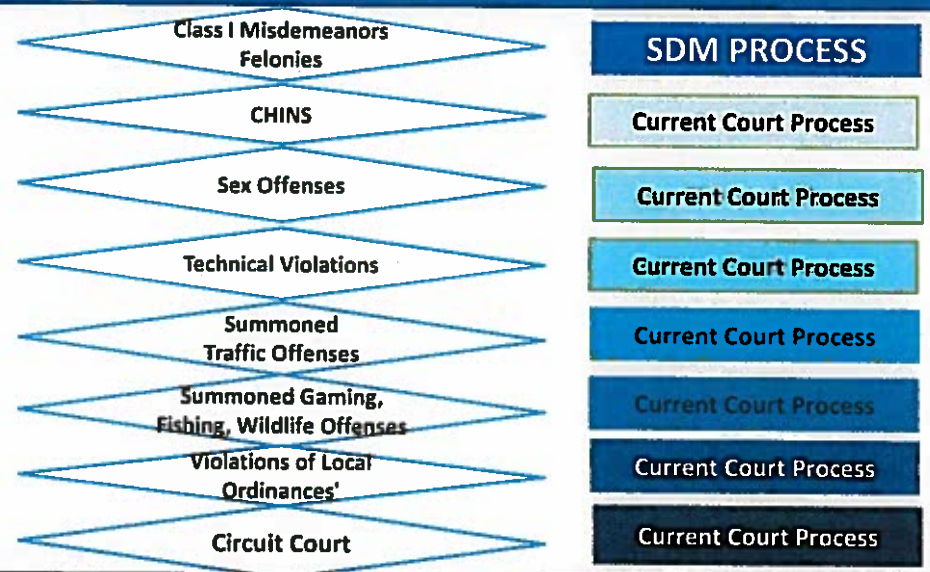
Standardized Disposition Matrix (SDM)

Least Restrictive To Most Restrictive Levels of Supervision

Risk Level (based on YASI)	Offense Category*				
	Class I Misdemeanor Non-Person	Class I 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



Standardized Disposition Matrix Offense Categories & Exclusions





Standardized Disposition Matrix (SDM)

WHO IS RESPONSIBLE



PROBATION OFFICERS



Standardized Disposition Matrix Automated Tool

SDM ID	Date Completed	Worst Serious Offense	Offense Category	Overall YASI Risk	YASI Assessment Date	Matrix Disposition Level	PO Recommendation Level	Court Determined Level
304	04/15/2019	ASL 1343-F6	Felony Person	High	4/11/2019	3.4.5	3	
203	04/15/2019	ASL-1343-F6	Felony Person	High	4/8/2018	3.4.5	5	
202	04/15/2019	ASL 1343-F6	Felony Person				5	

Associated Offenses

VCC Code	Index #	Offense #	Date adjudicated
ASL 1343-F6	3306252	4879335	06/11/2017
ASL 1343-F6	3253363	4882931	04/13/2017

YASI Risk Level
Total YASI: 220451
Overall YASI Risk Level: High
Date YASI Completed: 04/15/2019

Disposition Levels
Matrix: 3.4.5
Reason Matrix Not Used

PO Reason
Reason PO Variance

Court Values
Date Determined
Court Determined

Court Actions

1. Place on Probation
2. Offense Forfeited
3. Enhanced Probation
4. Unlawful Disposition
5. The client is Court-Court



Standardized Disposition Matrix Court Reports

- ❑ The SDM Level of Supervision will be included in a SDM Report
- or
- ❑ The SDM Level of Supervision will be included in a Social History

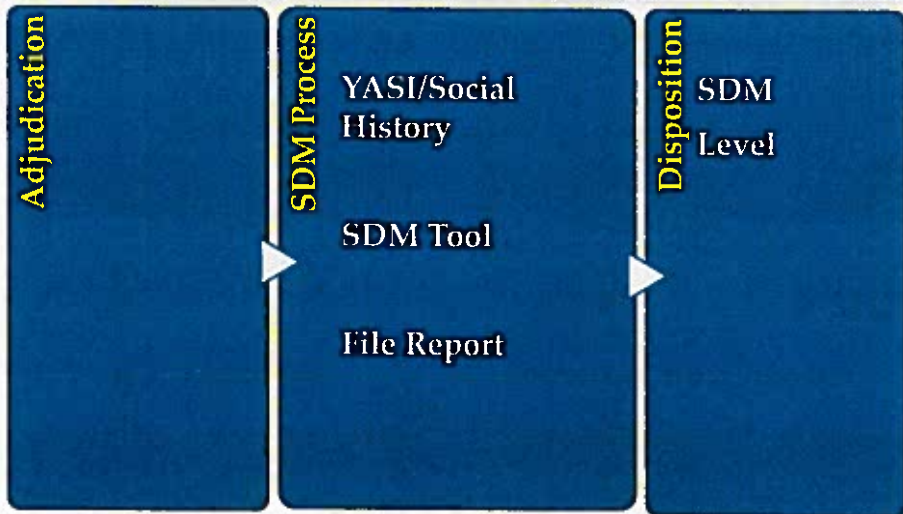
COMMONWEALTH OF VIRGINIA
Department of Juvenile Justice
Social History/Social History with Assessment/SDM
Disposition/SDM
Assessment and Disposition/SDM/SDM Level

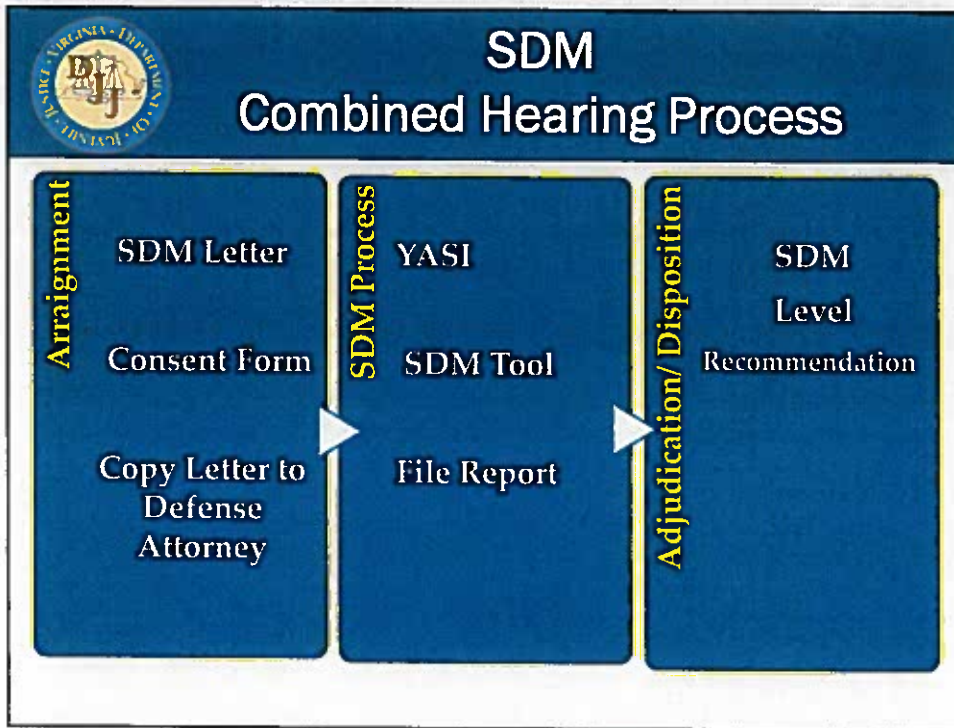
Virginia Department of Juvenile Justice
SDM Report

Standardized Disposition	Level 1	Level 2	Level 3	Level 4	Level 5
Supervision	Level 1	Level 2	Level 3	Level 4	Level 5
Other	Level 1	Level 2	Level 3	Level 4	Level 5



SDM Separated Hearing Process





Standardized Disposition Matrix Levels of Supervision

LEVEL 1

Referral(s) & Reporting of Outcomes to the Court

Probation officers will make referrals to services or programs.

- Monitoring of compliance with the court's order
- Referral examples- Community Service, Anger Management, etc.
- No supervision is not provided in this level



Standardized Disposition Matrix Levels of Supervision

LEVEL 2

Post-Disposition Case Management

Probation officers will make contact with a youth and parent or guardian at least monthly.

- Includes crisis intervention when the parent needs support
- May include referrals to community based services, as needed
- No community supervision is provided in this level
- No supervision rules and no case plans in this level



Standardized Disposition Matrix Levels of Supervision

LEVEL 3

Probation Supervision

Probation officers make face to face contact with youth and their parent/guardian at least monthly.

- Supervision and frequency of contacts are based on risk level
- Includes supervision rules
- Includes a risk assess, social history, and case plan



Standardized Disposition Matrix Levels of Supervision

LEVEL 4

Out-Of-Home Placement

Probation officers will provide case management or probation supervision. The court may also order case management services to be provided by another agency.

- Residential placements include:
 - Post disposition detention sentence less than 30 days
 - Post Dispositional Detention Program (Post-D Program)
 - Local or state funded placement (e.g. VJCCCA, CSA, etc.)
 - Private Insurance placement
- Probation Officers or case managers are required to secure funding and placement prior to disposition



Standardized Disposition Matrix Levels of Supervision

LEVEL 5

Commitment to DJJ

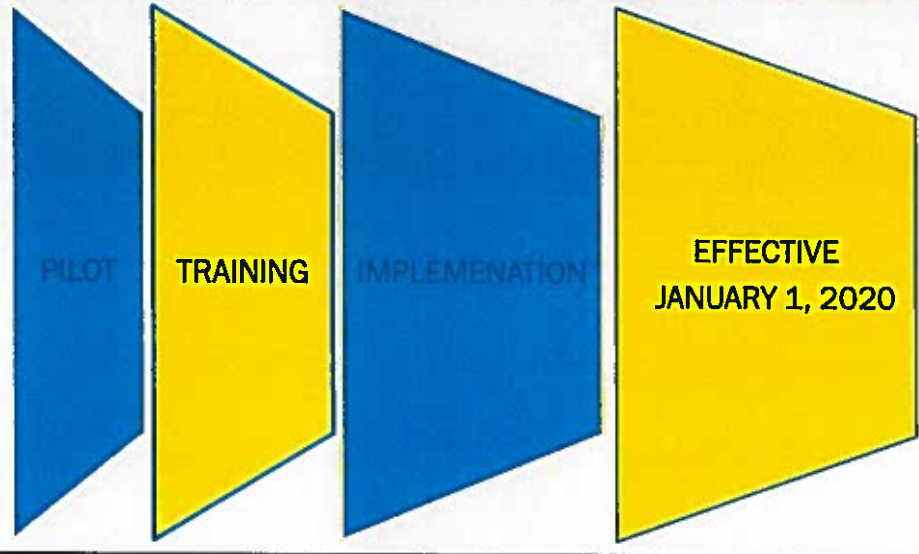
Probation officers collaborates with direct care staff and provides parole supervision for youth who are placed in the custody of DJJ for a determinate or indeterminate period of time.

Current placement options include:

- Bon Air Correctional Center
- Community Placement Programs
- DJJ Continuum Residential or Group Home Placements



Standardized Disposition Matrix Roll Out



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