Juvenile Justice Realignment Block Grant Annual Plan

Draft

Background and Instructions:

Welfare & Institutions Code Section(s) 1990-1995 establish the Juvenile Justice Realignment Block Grant program for the purpose of providing county-based care, custody, and supervision of youth who are realigned from the state Division of Juvenile Justice or who would otherwise be eligible for commitment to the Division of Juvenile Justice prior to its closure.

To be eligible for funding allocations associated with this grant program, counties shall create a subcommittee of the multiagency juvenile justice coordinating council to develop a plan describing the facilities, programs, placements, services, supervision and reentry strategies that are needed to provide appropriate rehabilitative services for realigned youth.

County plans are to be submitted and revised in accordance with WIC 1995, and may be posted, as submitted, to the Office of Youth and Community Restoration website.

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Part 1: Subcommittee Composition (WIC 1995 (b))

List the subcommittee members, agency affiliation where applicable, and contact information:

Agency	Name and Title	Email	Phone Number
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	Addition	nal Subcommittee Participants	

Part 2: Target Population (WIC 1995 (C) (1))

Briefly describe the County's realignment target population supported by the block grant:

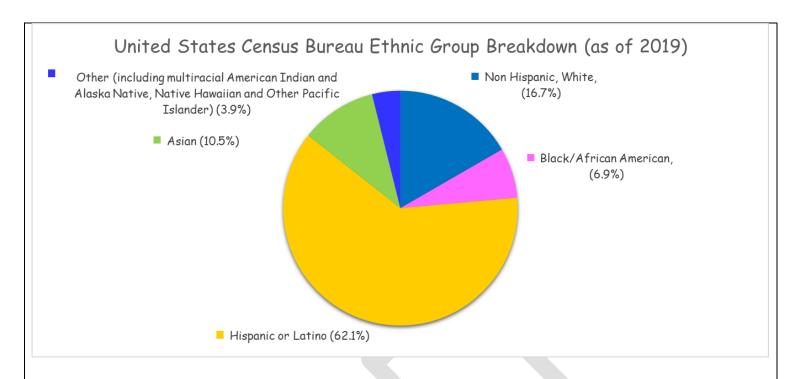
The County of Los Angeles's realignment target population supported by the block grant includes youth who were eligible for commitment to the Division of Juvenile Justice prior to its closure on June 30, 2021, which includes those adjudicated to be a ward of juvenile court based on an offense described in Welfare and Institutions Code (WIC) Section 707 (b) or an offense described in Penal Code Section 290.008 (c) (SB 823, Chapter 1.7, Section 1990 (b)) and their reentry process to the community, including planning and linkages to support employment, housing and continuing education (SB 823, Section 1995, (3) (D)).

Demographics of identified target population, including anticipated numbers of youth served, disaggregated by factors including age, gender, race or ethnicity, and offense/offense history:

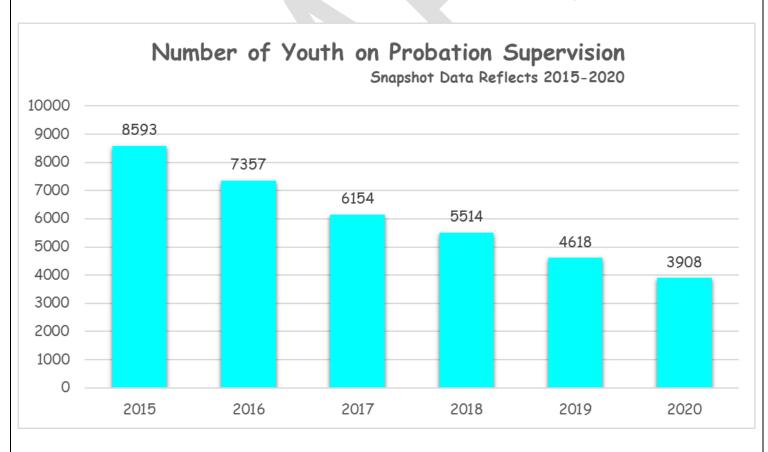
The County of Los Angeles was established on February 18, 1850 and is one of the nation's largest counties, with 4,084 square miles and 10,039,107 residents (as of July 1, 2019), accounting for approximately 27 percent of the State's population. The County includes 88 incorporated cities and many unincorporated areas.

As reported by the United States Census Bureau, of this population (2019), 863,303 youth, ages 11-17 years, reside in the County and the percentage of these youth race/ethnic groups were as follows:

United States Census Bureau Ethnic Group Breakdown (as of 2019)	%
Non Hispanic, White	16.7%
Black/African American	6.9%
Hispanic or Latino	62.1%
Asian	10.5%
Other (including multiracial American Indian and Alaska Native, Native Hawaiian and	
Other Pacific Islander)	3.9%



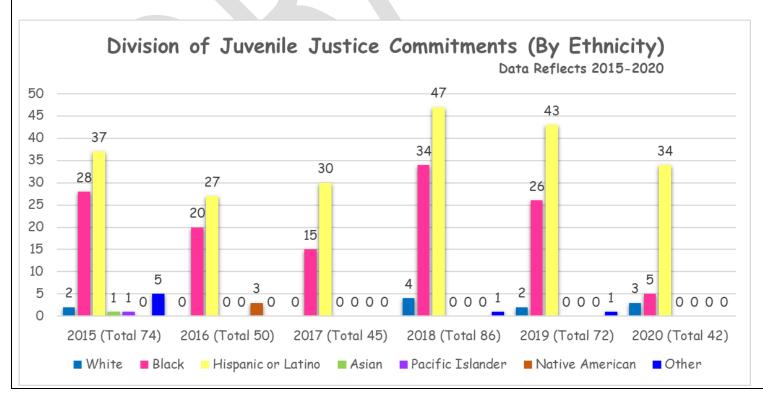
Snapshot data for youth on Probation for Calendar Years (2015-2020) include the following, with a more than 50% decrease in youth on Probation between 2015 and 2020.



For the specific County identified target Plan population, information is provided by the following categories:

- 1. Historical demographic information for our County's 369 Division of Juvenile Justice (DJJ) youth commitments: (a) by ethnicity, (b) age and (c) gender at the time of Juvenile Court disposition, for Calendar Years 2015-2020
- 2. Historical most serious sustained offense information for 114 youth who received a DJJ disposition for Calendar Years 2019-2020
- 3. Additional historical delinquency information for 114 youth who received a DJJ disposition for Calendar Years 2019-2020
- 4. Demographic and most serious sustained offense information for 163 youth with current DJJ dispositions (as of March 2021)
 - 1. (a) Historical ethnicity information for the County's 369 DJJ youth commitments (at time of Juvenile Court Disposition) for Calendar Years 2015-2020 include:

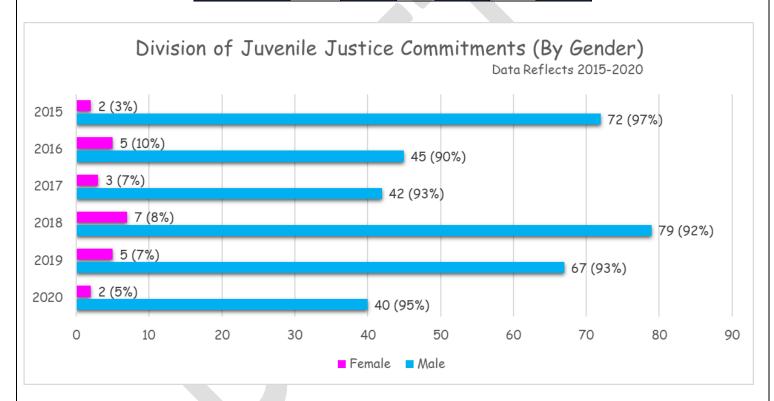
Ethnicity	White		Black		Hispani Latino	c or	Asiar	1	Pacit Islar		Nati Ame	ve rican	Oth	er	Total	
2015	2	3%	28	38%	37	50%	1	1%	1	1%	0	0%	5	7%	74	100%
2016	0	0%	20	40%	27	54%	0	0%	0	0%	3	6%	0	0%	50	100%
2017	0	0%	15	33%	30	67%	0	0%	0	0%	0	0%	0	0%	45	100%
2018	4	5%	34	40%	47	55%	0	0%	0	0%	0	0%	1	<1%	86	100%
2019	2	3%	26	36%	43	60%	0	0%	0	0%	0	0%	1	1%	72	100%
2020	3	7%	5	12%	34	81%	0	0%	0	0%	0	0%	0	0%	42	100%
Total	11	3%	128	35%	218	59%	1	0%	1	0%	3	1%	7	2%	369	100%



Between the Calendar Years of 2015-2019, Black youth DJJ commitments ranged from 33%-40% of the total County commitments; in the 2020 Calendar Year, Black youth made up 12% of the DJJ youth County commitments, an approximate 68% decrease from the previous years' averages.

1. (b) Historical gender information for the County's 369 DJJ youth commitments (at time of Juvenile Court Disposition) for Calendar Years 2015-2020:

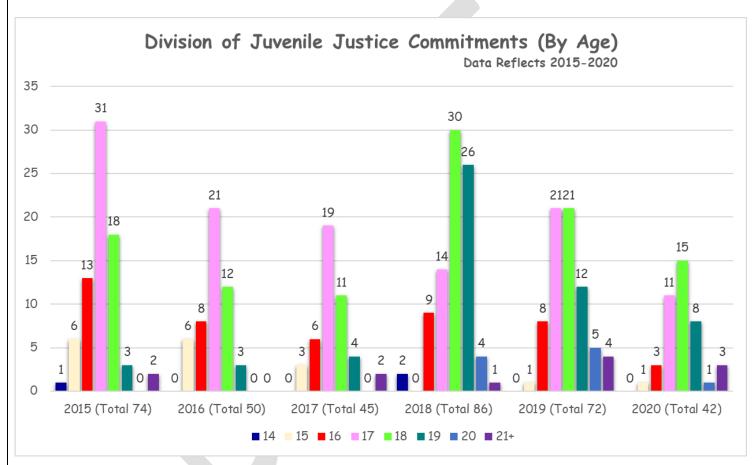
Gender	Male		Female		Total	
2015	72	97%	2	3%	74	100%
2016	45	90%	5	10%	50	100%
2017	42	93%	3	7%	45	100%
2018	79	92%	7	8%	86	100%
2019	67	93%	5	7%	72	100%
2020	40	95%	2	5%	42	100%
Total	345	93%	24	7%	369	100%



There have not been significant percentage changes for male and female County youth ordered to DJJ for the six (6) Calendar Years (2015-2020) as indicated in Chart/Graph 1b.

1. (c) Historical age information for the County's 369 DJJ youth commitments (at time of Juvenile Court Disposition) for Calendar Years 2015-2020 include:

Age at Commitment	14		15		16		17		18		19		20		21+		Total	
2015	1	1%	6	8%	13	18%	31	42%	18	24%	3	4%	0	0%	2	3%	74	100%
2016	0	0%	6	12%	8	16%	21	42%	12	24%	3	6%	0	0%	0	0%	50	100%
2017	0	0%	3	7%	6	13%	19	42%	11	24%	4	9%	0	0%	2	5%	45	100%
2018	2	2%	0	0%	9	10%	14	16%	30	35%	26	30%	4	5%	1	2%	86	100%
2019	0	0%	1	1%	8	11%	21	29%	21	29%	12	17%	5	7%	4	6%	72	100%
2020	0	0%	1	2%	3	7%	11	26%	15	36%	8	19%	1	2%	3	7%	42	100%
Total	3	1%	16	5%	44	13%	106	32%	92	28%	48	15%	9	3%	12	3%	369	100%



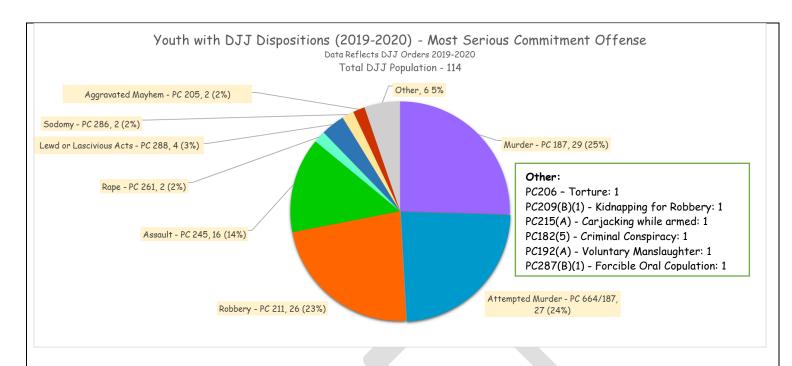
As indicated in the previous chart/graph (1c) regarding age at DJJ commitments, the age at commitment began increasing in 2018, where youth ages 15-17 have decreased and ages18-19 years increased. The passage of Senate Bill (SB) 382 on January 1, 2016 and Proposition (Prop.) 57 (The Public Safety and Rehabilitation Act of 2016) on November 8, 2016 likely increased the number and age of commitments based on the following:

SB 382 made changes to Fitness Hearings for juvenile offenders by changing factors that the court
may give weight to when determining whether a youth should be tried in Juvenile or Adult Court;
this comprehensive information including facts about the crime and the youth's ability to rehabilitate
as well as the Juvenile Court may give weight to any relevant factor including, but not limited to

- those listed under each of the five criteria. This Bill ensures judges consider the actual behavior of the individual and his/her ability to grow, mature and be rehabilitated.
- Proposition 57 ended direct filing by the District Attorney, eliminated the presumption of unfitness and allowed for the filing of the "Motion to Transfer to Adult Court" for the following two groups of youth: a) for those ages 16-17, for any felony offense and; b) for ages 14-15, Welfare and Institutions Code (WIC) Section 707 (b) offenses where prior to this, the DA could make a fitness motion for youth ages 16-17, under WIC Section 707 (a)(1) for any offense, and under WIC Section 707 (c) for youth ages 14-15 for WIC 707 (b) offenses. Additionally, Prop. 57 also allowed for the return of cases from the Adult Court, which had not had the benefit of the Motion to Transfer to Adult Court process.
- 2. For the 114 County youth committed to DJJ during Calendar Years 2019-2020, the following includes their most serious commitment offense:

Youth with DJJ Dispositions (2019-2020) - Most Serious Commitment Offense

Commitment Of	fense (Most Se	rious)	Commitment Of	fense Code	# of Youth	%
Murder			PC 187		29	25%
Attempted Mur	der		PC 664/187		27	24%
Robbery			PC 211		26	23%
Assault			PC 245		16	14%
Rape			PC 261		2	2%
Lewd or Lascivia	ous Acts		PC 288		4	4%
Sodomy			PC 286		2	2%
Aggravated May	yhem		PC 205		2	2%
Other:						
Torture			PC PC	206		
Kidnapping	for	Robbery	PC PC	209(B)(1)		
Carjacking	While	Armed	PC	215(A)		
Criminal		Conspiracy	PC	182(5)		
Voluntary		Manslaughter	PC	192(A)		
Forcible Oral Co	opulation		PC 287(B)(1)		6	5%
Total					114	100%



As this pie chart indicates, approximately 72% of County youth were ordered to DJJ for Murder/ Attempted Murder (49% total – Murder-25% and Attempted Murder-24%) and Robbery (23%).

3. For the 114 County youth committed to DJJ during Calendar Years 2019-2020, the following includes additional information related to their delinquency histories:

2019	72 42	18.5	19 26% 12	53 74% 30	31 43% 18
	Total # of Youth with DJJ Commitments	Average Age at DJJ Commitment	# of Youth Where DJJ Commitment Offense Was First Contact with Law Enforcement	# of Youth with Prior Arrest/Probation History	# of Youth with Motion to Transfer prior to DJJ Order

	# of Youth with Prior Informal Probation	# of Youth with Prior Probation Wardship (Not Including DJJ Offense)	Average # of Law Enforcement Contacts Prior to DJJ Commitment Offense(s)	Average Age When Wardship was Declared
2019	5	52	4	15.6
31	7%	72%		
2020	7	25	4	15.7
2320	17%	60%	4	13.7

As mentioned, the average age of DJJ commitment increased to approximately 18-19 years. Additionally, for youth committed to DJJ for Calendar Years 2019-2020:

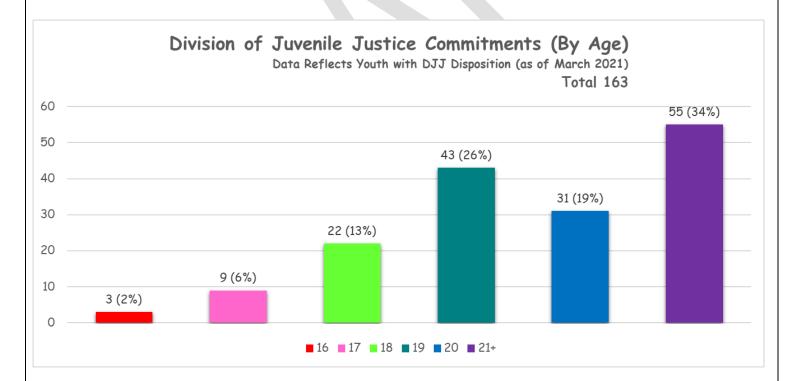
- 72% (average) had prior arrests/Probation history
- 15.6 years was the average age when Juvenile Court wardship was declared
- 66% (average) had prior Juvenile Court ordered delinquency wardship prior to their DJJ disposition
- 4. As of March 2021, the following includes demographic information as well as the most serious commitment offense for County youth with current DJJ dispositions:

Youth with DJJ Dispositions (as of March 2021) - Demographic Information

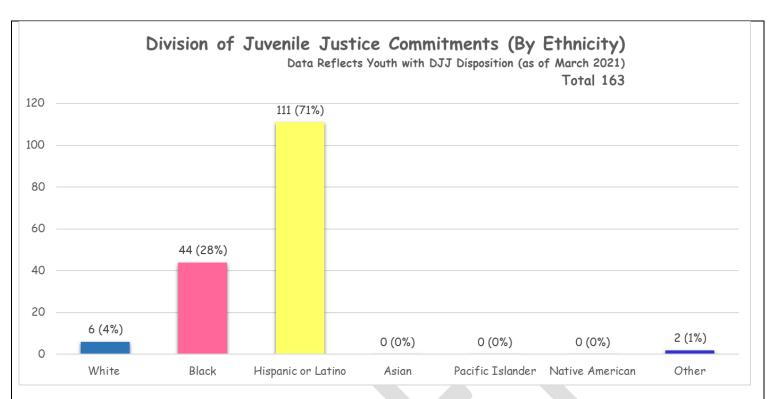
Age	# of Youth	%
16	3	2%
17	9	6%
18	22	13%
19	43	26%
20	31	19%
21	33	20%
22	14	9%
23+	8	5%
Total	163	100%

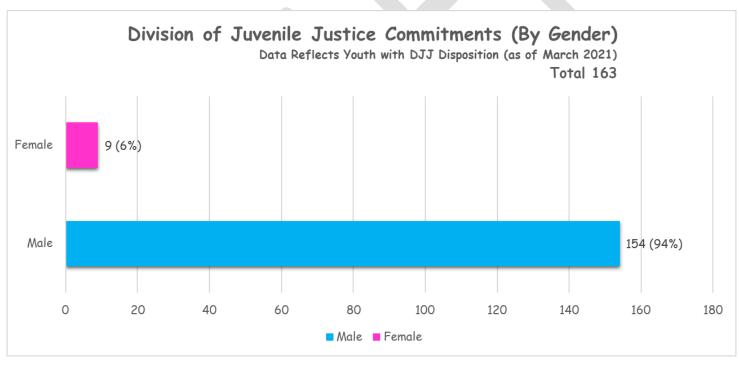
Ethnicity	# of Youth	%
White	6	4%
Black	44	27%
Hispanic or Latino	111	68%
Asian	0	0%
Pacific Islander	0	0%
Native American	0	0%
Other	2	1%
Total	163	100%

Gender	# of Youth	%
Male	154	94%
Female	9	6%
Total	163	100%



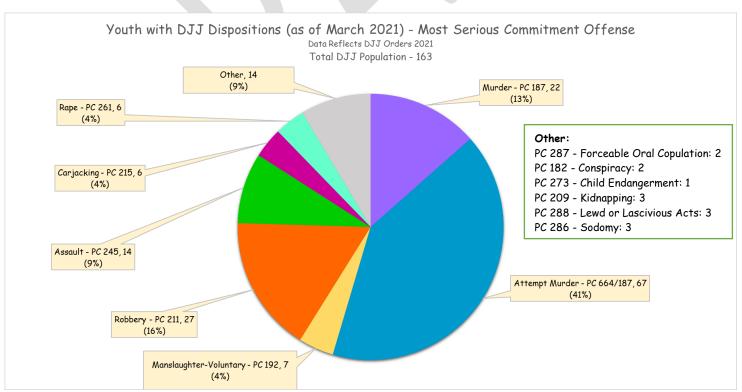
The average ages of County youth currently housed at DJJ are on par with the average ages at disposition considering average length of commitment (approximately 28 months), although this may based on the current average age at disposition.





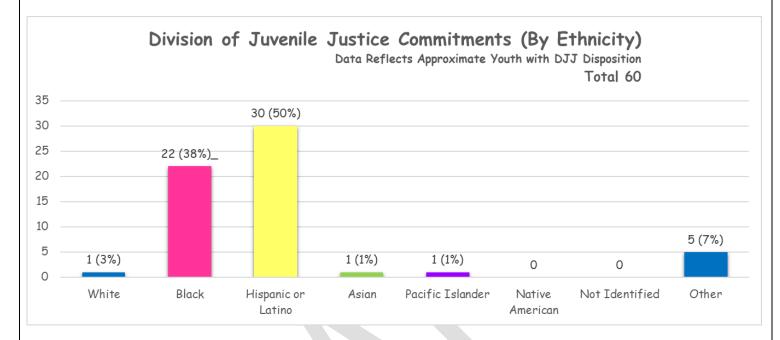
Youth with DJJ Dispositions (as of March 2021) - Most Serious Commitment Offense

Commitment	t Offen	se (Most S	erious)	Commitment (# of Youth	%	
Murder				PC 187	22	13%	
Attempt Mu	ırder			PC 664/187	67	41%	
Manslaughter-Voluntary				PC 192	7	4%	
Robbery				PC 211	27	16%	
Assault				PC 245	14	9%	
Carjacking				PC 215		6	4%
Rape				PC 261		6	4%
Other:						14	9%
Forceable		Oral	Copulation	PC	287		
Conspiracy				PC	182		
Child			Endangerment	PC	273		
Kidnapping				PC	209		
Lewd	or	Lascivi	ous Acts	PC	288		
Sodomy				PC 286			
Total						163	100%

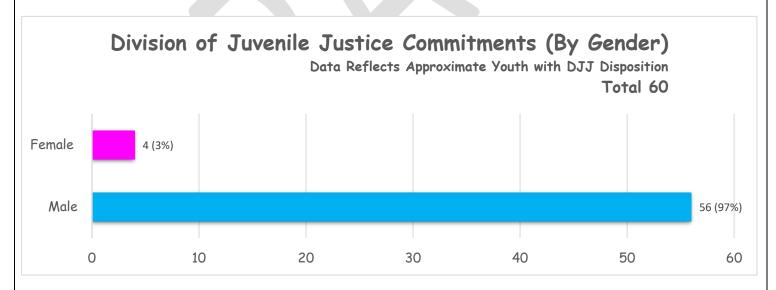


Based on historical information, the County approximates that Juvenile Court may order an estimated 60 youth annually to the County's Secure Alternative to DJJ as follows:

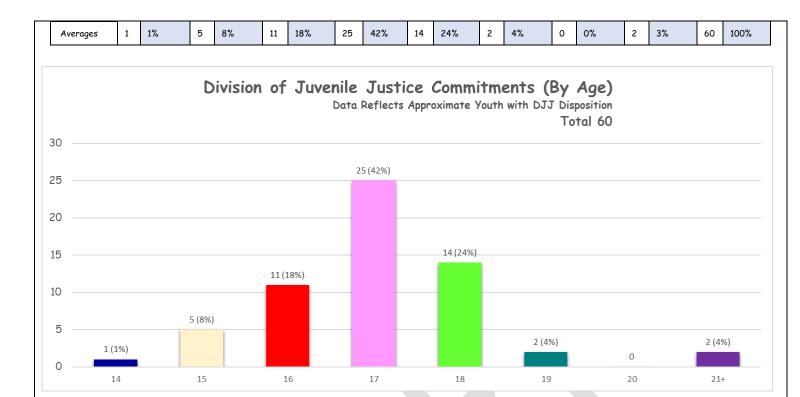
Ethnicity	Wh	ite	Black		Hispa Latino		Asid	ın	Paci Isla		Nati Ame	ve rican	Not Iden	ıtified	Othe	er	Total	ı
Averages	1	3%	22	38%	30	50%	1	1%	1	1%	0	0%	0	0%	5	7%	60	100%



Gender	Male	Fe		Female		ıl
Averages	56	97%	4	3%	60	100%



Age at Commitment 14 15 16 17 18 19 20 21+ Total		115	h 16 1/	18 19	20 21+	Total
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Additionally, it is anticipated that the averages of prior arrests/Probation history (approximately 72%), average age (15.6 years) when Juvenile Court wardship was declared and average number of youth (66%) who had prior Juvenile Court ordered delinquency wardship prior to their DJJ disposition will not change significantly.

Describe any additional relevant information pertaining to identified target population, including programs, placements and/or facilities to which they have been referred.

Additional relevant information pertaining to the County's identified target Plan population, including programs, placements and/or facilities to which they have been referred is provided as follows:

- 5. Additional historical delinquency and dependency information for 114 youth who received a DJJ disposition for Calendar Years 2019-2020
- 6. Mental health profile for 94 youth with DJJ dispositions from March 2019 February 2021
- 5. Historical Delinquency/Dependency information for the 114 youth who received a DJJ disposition for Calendar Years 2019-2020:

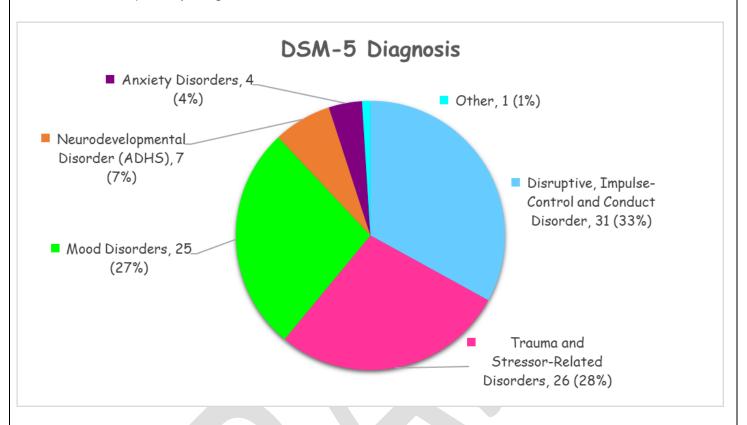
	Total # of Youth with Prior Suitable Placement (SP) Orders	Total # of Youth with Prior Camp Community Placement (CCP) Orders	Average # of SP Orders Prior to DJJ Commitment	Average # of CCP Orders Prior to DJJ Commitment	# of Youth with Bench Warrants Issued	Average # of Bench Warrants
2019	29	39	1.5	1.3	37	2
	40%	54%			51%	
2020	16	22	1	1	21	3.5
	38%	52%			50%	

	# of Youth with Any DCFS Referral (Inconclusive, Unsubstantiated or Substantiated)	# of Youth with at Least One Substantiated DCFS Referral		# of Youth with WIC 241.1 Assessment	# of Youth with Prior Dual Supervision (WIC 300/WIC 654.2, 725a, 790)	# of Youth on Dual Status at Time of DJJ Commitment Offense
2019	61	31	21	9	3	8
	85%	43%	29%	13%	4%	11%
2020	36	16	٥	I	1	3
2020	12000	10000	9	9	1	ى
	86%	38%	21%	12%	2%	7%

Additionally, for youth committed to DJJ for Calendar Years 2019-2020:

- 39% (average) of the youth had a prior Suitable Placement disposition order
- 53% (average) had a prior Camp Community Placement disposition order
- 50% had prior Bench Warrant issued by Juvenile Court
- 86% (average) had prior DCFS referral (inconclusive, unsubstantiated or substantiated)
- 41% (average) had at least one (1) substantiated DCFS referral
- 25% (average) had prior Dependency Status (WIC 300 wardship)

- 6. The Mental Health profile of 94 County youth sent to DJJ (between 3/2019-2/2021) includes:
 - Youth primary diagnosis included:



Additionally:

- Many youth have secondary diagnoses
- 32% of youth had a co-occurring substance abuse/use diagnosis (at least one)
- Youth had a history of prior psychiatric hospitalization
 - o 10% of youth in the sample had at least one psychiatric hospitalization
- Youth had prior placement on Enhanced Supervision
 - 37% of youth in the sample had been on Enhanced Supervision
- Youth had a history of psychotropic medication in the Juvenile Hall
 - 75% of youth had been on psychotropic medication
 - Many of the sample were currently on medication
 - A significant number of the youth were treated for insomnia which inflates the overall percentage

Provide a description of the facilities, programs, placements, services and service providers, supervision, and other responses that will be provided to the target population:

Los Angeles County has taken bold steps over the last several years to transform its youth justice system, including through the creation of the Youth Justice Workgroup composed of a diverse group of youth leaders, community advocates, service providers, County representatives (including staff from the Probation Department), and justice partners (DA, defense offices, and the Courts) and the subsequent adoption of that body's vision for Youth Justice Reimagined (YJR) that embraces a "a care first youth development approach to youth justice" and "commit[s] to transitioning the County's youth justice system to the care-first model outlined in the YJWG Report by 2025." This YJR vision includes a series of structural changes that will transition [the] Juvenile Probation to a Department of Youth Development (DYD) in a three-phase approach spanning a period of at least five years. It is within this transformational moment that LA turns to the opportunity to serve youth who would have previously been committed to DJJ prior to its closure of intake on June 30, 2021.

To facilitate youth well-being as well as public safety, youth development is a holistic approach that focuses on youth's strengths and assets instead of deficits and problems; emphasizes building positive relationships; supports the development of skills and competencies; and connects youth to educational, employment, civic, and cultural opportunities. Developing and implementing local alternatives to the Division of Juvenile Justice includes strengthening and better utilizing a continuum of care, from community-based supports to out-of-home settings (both non-secure and secure), and reserving secure confinement for youth as a last resort for the shortest duration possible.

The Los Angeles County Probation Department has collaborated with many visionaries both locally and nationally to re-imagine the landscape of care and rehabilitation. The facilities are designed to align with the principles centered in the creation of youth-centered therapeutic environment for youthful offenders up to the age of 25.

The youth-centered therapeutic environments approach ensures that all collaborative partners leverage available resources and coordinate approaches in a setting described as a "therapeutic milieu." The therapeutic milieu refers to and includes all aspects of the environment within which youth live and staff work. The milieu is characterized by a "culture of care" and respect among all persons in the setting (e.g., probation staff, youth, kitchen staff, medical providers, mental health clinicians, administrators, educators, volunteers, and any other person who provides services) as well as the formal programming and education elements that are critical to each young person's development. The milieu is designed to cultivate opportunities for growth and healing while promoting personal autonomy and responsibility.

Probation has developed a strategic long-term implementation plan that utilizes the practice areas identified in the Youth in Custody Practice Model (YICPM)¹, and approaches outlined in the LA Model.

Launched by the Los Angeles County Probation Department at Campus Kilpatrick in 2017, the "LA Model" was a new approach to juvenile justice in Los Angeles that is focused on the positive development of youth in small, home-like settings using intensive group processing facilitated by

¹ The Youth in Custody Practice Model (YICPM) is informed by research on "what works," and professional standards needed to implement best practices for serving youth in custody, and was developed by the Council of Juvenile Correctional Administrators, the Center for Juvenile Justice Reform at Georgetown University's McCourt School of Public Policy (CLIR), and a team of consultants to assist state and county

consistent staff-youth teams. In this environment, youth hold each other accountable for maintaining a safe, respectful environment, engaging in treatment, and working towards change.

Facility and Supervision

"LA will pursue a staffing model from across County departments that surrounds youth with a multidisciplinary team that is well-equipped with the skills to effectively engage, motivate, and facilitate groups of youth towards a positive peer culture in which youth feel safe sharing past experiences, traumas, and fears, to learn new social emotional (soft) skills, and reinforce new positive behaviors"

Staffing will consist of multiple departments in multiple disciplines including Probation who will provide sufficient staff to ensure adequate implementation of the plan and meet all other licensing standards.

After July 1, once we have completed required discussions with our labor unions and until threshold is reached, Campus Kilpatrick will house youth while we develop Camp Scott as a longer-term facility, with eventual plan for a possible site to be developed for step down or in the community.

Sworn staff selected to work in the facility will have completed the state mandated Juvenile Correctional Officer Core academy and be trained and assessed for competence in the following areas:

- Adolescent Stages of Development.
- b. Social Learning Model:
- c. Trauma-Informed Care;
- d. Motivation, Engagement and De-escalation;
- e. Use of Force Continuum and Defense Tactics;
- f. Case Management
- g. Core Correctional Practices;

Program Design

Practice Area 1: Developing the Individualized Rehabilitation Plan

Upon arrival, the youth will undergo the intake and engagement process and will be introduced to the various evidenced-based interventions available at the SB 823 facility. A Multidisciplinary Team (MDT), including the youth, Deputy Probation Officer, Juvenile Court Heath Services (JCHS), Department of Mental Health (DMH), Los Angeles County Office of Education (LACOE) staff, and the youth's parents, caregiver or supportive adult will provide information to develop an Individualized Rehabilitation Plan and an Initial Case Plan.

During intake, youth will receive the following assessments:

Screening / Assessment Instrument	Purpose of the Screening / Assessment
Los Angeles Risk & Resiliency Checkup-II (LARRC-II): *	Assessment used to determine level of recidivism risk and inform case planning.
Massachusetts Youth Screening Instrument (MAYSI-2)	Screening tool used to identify youth at admission/intake that might have special mental health needs
Behavioral Health Assessment	Assessment which includes trauma, risk of suicide, co-occurring disorders
Psychoeducational Assessment	All youth with identified or suspected learning disabilities / special needs to receive appropriate tests to establish Individualized Education Plan (IEP)
Academic and career/technical education	Assessment used to determine abilities, interests and aspirations.
Prison Rape Elimination Act (PREA) Screener	Assessment used to determine risk of being sexually abused or sexually abusive toward others.
Youth Outcome Questionnaire (Y-OQ®)	Assessment used to measure how the youth feels inside, how they are getting along with significant others, how they are coping with stress physically and behaviorally, and how they are performing in important life tasks, such as work and school. The six areas of assessment include: Intrapersonal Distress (emotional distress) Somatic Distress (distress presenting physically) Interpersonal Relations (relationship with parents, other adults,
	and peers) Critical Items (flags need for those requiring immediate intervention beyond standard outpatient treatment) Social Problems (socially-related problematic behaviors) Behavioral Dysfunction (unhealthy behaviors)
Positive Youth Development	Pre-test assessment used to determine competencies, skills and abilities of youth so that case plans are designed to build on those skills, assets and competencies that empower youth to reach their full potential.

Note: As tools are updated, information will be included in future Annual Plans.

All youth will receive a completed Assessment that will be utilized to develop an Individualized Rehabilitation Plan and a comprehensive individualized case plan.

Practice Area II: Providing the Youth with Services and Supports during Facility Placement

Youth will be provided with intentional and targeted interventions using a positive youth development approach and evidence-based practices which will result in the following objectives:

- 1. Improve the psycho-social functioning of youth by using evidence-based mental health;
- 2. Increase the developmental assets of youth by providing healing and trauma informed services;
- Improve educational outcomes of youth by providing individualized educational and counseling services;

- 4. Improve family functioning through Family Assessment and Support Team co-case management services;
- 5. Improve self-sufficiency through jobs and post-secondary education linkages and supports.

Programs and services offered will be predicated on the Principles of Effective Correctional Interventions which indicates that programs should be based on risk, target criminogenic needs (Antisocial Attitudes, Values, Beliefs, Antisocial Peers, Antisocial Personality, Family, Education/Employment, Substance Abuse and Leisure Activities), by utilizing strategies that align with the learning styles and characteristics (responsivity factors) of the youth to increase their motivation to change.

In alignment with this "what works" research, the following is a sample of anticipated program/services to be provided to youth while in custody to prioritize the highest needs.

Healing and Restoration

Restoration should articulate restorative justice practices and a comprehensive model to be implemented/adapted.

Adapted Dialectic Behavioral Therapy

Serves individuals who have or may be at risk for symptoms related to emotional dysregulation, which can result in the subsequent adoption of impulsive and problematic behaviors, including suicidal ideation. DBT incorporates a wide variety of treatment strategies including chain analysis, validation, dialectical strategies, mindfulness, contingency management, skills training and acquisition (core mindfulness, emotion regulation, interpersonal effectiveness, distress tolerance and self-management), crisis management, and team consultation.

Individual Cognitive Behavioral Therapy

Intervention for individuals who either have or may be at risk for symptoms related to the early onset of anxiety, depression, and the effects of trauma that impact various domains of daily living. CBT incorporates a wide variety of treatment strategies including psycho-education, skills acquisition, contingency management, Socratic questioning, behavioral activation, exposure, cognitive modification, acceptance and mindfulness strategies and behavioral rehearsal.

Seeking Safety

Present-focused therapy that helps people attain safety from trauma or Post Traumatic Stress Disorder and substance abuse. It consists of 25 topics that focus on the development of safe coping skills while utilizing a self-empowerment approach. The treatment is designed for flexible use and is conducted in group or individual format, in a variety of settings, and for culturally diverse populations.

Aggression Replacement Training

Multimodal psycho-educational intervention designed to alter the behavior of chronically aggressive adolescents and young children. Its goal is to improve social skills, anger control, and moral reasoning. The program incorporates three specific interventions: skill-streaming, anger control training, and training in moral reasoning. Skill-streaming teaches pro-social skills. In anger control training, youths are taught how to respond to their hassles. Training in moral reasoning is designed to enhance youths' sense of fairness and justice regarding the needs and rights of others.

Education

Los Angeles County Office of Education (LACOE) provides educational assessments, instruction, career technical education, and counseling. Services range from academic, acceleration, enrichment, social emotional counseling, academic counseling parent education, workforce development, and career technical education.

Los Angeles County Library provides educational enrichment to build upon a youth's competencies and build motivation by building assets and competencies through Library services and resources. Services and resources include, but are not limited to online databases with reading, research, and entertainment (music and movies) materials; online and in-person programs that focus on life skills, science technology engineering, arts and mathematics (STEAM), cooking, building and music which promotes healthy adolescent development. The Library also provides tutoring and book clubs while utilizing clinical social worker librarians and peer advocates to implement many online programs, which demonstrates the library's commitment to provide opportunities for growth and employment to young men of color that will project an image of positive outcomes to youth that share similar backgrounds and have experienced the same challenges.

Substance Abuse

Department of Public Health (DPH) Substance Abuse Prevention and Control (SAPC) manages the delivery of a full spectrum of specialty Substance Use Disorder (SUD) wrap-around services through the Client Engagement and Navigation Services (CENS) program. CENS counselors will provide remote SUD services (such as screenings, patient education, and case management services) and connect youth to a continuum of substance use disorder (SUD) treatment services including outpatient, intensive outpatient and residential treatment programs, and recovery supportive services. CENS will serve as a resource hub for participating youth throughout their treatment while in-custody and as they return and reintegrate into the community.

Health

Department of Health Services (DHS) – Juvenile Court Health Services (JCHS) provides evidence-based, standard medical care for the adolescent and young adult population. All youth receive a health assessment to identify any medical condition(s) requiring further care or treatment and to identify opportunities for providing preventative care. These services include routine dental and eye care and immunizations. Routine laboratory and radiologic services are provided on site. Emergent, inpatient, and specialty care are provided by other DHS facilities as needed. Additionally, nursing and physician staff provide health education to promote good health and build health literacy.

Mental Health

Los Angeles County Department of Mental Health (DMH) provides all mental health assessments and services for youth in custody. Services provided by DMH includes:

- On site clinical staff 7 days per week, minimally 12 hours per day.
- Individual and group psychotherapy services, including evidence-based practices
- Psychiatric evaluation and medication management
- Evaluation for Psychiatric Hospitalization
- Crisis Intervention
- Family Therapy, where clinically indicated
- Aftercare Planning

Treatment for Youth Who Have Sexually Offended

Treatment for youth who have sexually offended is a highly specialized area of treatment and requires a combination of behavioral and cognitive therapies to modify distorted thinking patterns, reduce deviant sexual fantasies and improve social and communication skills. The Integrated Sex Offender Treatment Program (ISOTP) is a Cognitive Behavioral Therapy program based on the principles of Social Learning Theory, Trauma Informed Care (TIC), Motivational Interviewing, Relapse Prevention and Critical Thinking Errors, have published findings that demonstrate positive reductions of deviant sexual fantasies, cognitive distortions and negative mental health symptoms. The Department will explore contracting with the creators of ISOTP to procure the evidence-based curriculum and case management model.

Research supports that youth who sexually offend differ from the adult population charged with sexual offenses. Given the different developmental status, brain development, and history of chronic sexual behaviors, and the importance of family involvement, a different approach is required for youth who sexually offend.

The nature of behaviors underlying sex offense adjudications range dramatically – from developmentally normal, to inappropriate to abusive, aggressive and violent behaviors. Research has established that the motivations underlying adolescent sex offenses are often sexual exploration, rather than sexual exploitation, and that any sexual misbehavior underlying a youth's adjudication is a symptom or extension of other problems for most youth. For only a small percentage of adolescent sex offenses does the underlying motivation involve a true disorder or deviancy. One-size-fits-all approaches focused on containing and treating youth adjudicated of sex offenses have resulted in many negative consequences, including isolation, depression, increased suicidal ideation and suicide attempts, denied access to education, and fear for their own safety.

A comprehensive assessment of the youth should be conducted post-adjudication which includes an assessment of factors which contribute to sexual and nonsexual recidivism. Well researched risk assessment techniques should be used for assessing both these areas. The assessment additionally should also include appraisal of comorbid psychiatric, neuropsychological, trauma related, and substance abuse factors. Treatment planning should be individually tailored accordingly.

Many treatment components outlined in programs for youth who sexually offend are in alignment with overall programs to improve outcomes for all youth involved in the juvenile justice system. There is no convincing evidence that specialized treatment programs produce better outcomes than best practice treatment for justice-involved youth. The County should by default serve this population through holistic community-based and family-centered supports to the extent possible.

Practice Area III: Transitioning the Youth from the Facility to the Community

Transition case planning begins upon disposition, re-assessed at the mid-point or every six (60 months and finalized minimally 60-days prior release into the community. The transition plan is completed through the MDT process which prioritizes education; employment; housing; health care (including medical, mental health, and substance use treatment); family and pro-social relationships; and life skills. Family engagement and community support are embedded in the transition planning process.

Both the Primary Deputy Probation Officer (DPO – in custody) and the Secondary DPO (in community) are members of the MDT and begin working with the youth and family/supportive adults upon disposition. A Credible Messenger will be assigned to work in collaboration with the DPO,

upon the youth's arrival at the facility. The Credible Messenger and the Secondary DPO, as community experts will be responsible for ensuring that community connections and supports are coordinated, comprehensive and immediately available upon the youth's release. They will work with the family to ensure stability and that necessary supports are in place.

Practice Area IV: Support Youth in the Community

Economic and housing stability are the highest priority areas, and the following resources and programs are provided to ensure these basic needs are met.

Basic Needs

Food and other forms of relief - Youth exiting care are assessed for eligibility and referred to the Department of Public Social Services (DPSS) to access a variety of state and federal benefits such as:

- Medi-Cal: Provides comprehensive medical coverage to eligible individuals including Former Foster Youth (FFY) 18 years old or older and Young Adults 19-25.
- CalFresh: Is a food benefit program for individuals or families who have limited income and resources to buy the food they need to stay healthy. Youth, 16-24 years old, are potentially eligible to CalFresh.
- General Relief (GR): Is a County funded program, which provides cash and supportive services to single adults 18 years old and older.
- General Relief Opportunities for WORK (GROW): Is a program designed to remove employment barriers and transition GR participants from cash aid to self-sufficiency.
- CalWORKs: Is a time-limited cash assistance program for eligible needy families with children, or pregnant women and pregnant teens.
- Cal-Learn: is a statewide mandatory program for pregnant and parenting teens receiving CalWORKs, under 19 years of age, and who have not completed their high school education. The program requires participants enroll in a High School or equivalent program with the goal of completing their high school education.
- Greater Avenues for Independence (GAIN): Is a mandatory program that provides employment-related services to CalWORKs participants.

Identification Documents – youth will be assisted to obtain a governmental identification and other documentation

Transition Care Package - youth will be provided with toiletries and clothing items upon release

Transitional Housing and Independent Living

The Department intends to explore the expansion of current contracts with community-based providers for transitional housing. Additionally, some youth will be eligible for housing through the Independent Living Program and AB12 state revenues.

Family Engagement and Community Support

The County intends to implement a robust Family Engagement Model that includes the engagement and partnership with family members as partners throughout the young person's stay, specifically at critical decision points. The research is clear about the benefits of keeping youth connected to their family while detained. Engaging families and employing them as full partners throughout the continuum of care is a central tenet of programming for this population and a part of a broader goal

that will facilitate and enhance well-being outcomes that extend through to reentry. Further, family will be broadly defined to include biological family members, extended chosen family (godparents, foster siblings, etc.) and other important people such as mentors, teachers, and coaches. (Ryan Shanahan, Margaret diZerega (2016). Identifying, Engaging, and Empowering Families: A Charge for Juvenile Justice Agencies).

Additionally, there will be a deliberate focus to expand and dedicate Family Finding services to increase the opportunity to locate family members for youth in need permanent supportive adult relationships with the possibility of family members serving a dual purpose, as possible post release option and/or as positive meaningful adult connection during the young person's stay and upon release.

Further, visiting times will be flexible. Also, families will be included in special meals, special on-site events, family team & decision-making meetings to build a strong network of support around the young person and to foster connections with staff. Transportation will be made available for families to and from the facility for events and visiting.

Understanding families and best practices engaging families is an urgent public health issue requiring professional attention, best practice training activities, new research and use of comprehensive intervention approaches as affirmed by best practices, national and local experts. To that end, the County will explore options to contract expert consultant services with expertise implementing family engagement models designed to meet the cultural needs of youth through the context of family. These professional services will also guide training efforts, development of facility standards, policies and procedures. It is anticipated that training facility staff and providers in learning effective skills in working with youth and families will further develop their engagement, alliance and validation skills, and motivational enhancements.

In conclusion, service provision will include but will not be limited to:

- Transportation for parents
- Dedicated Family Finding Resources
- Technology upgrades to ensure virtual visitation and increased opportunities for families to be included in behavioral health interventions and de-escalation efforts
- Consultant Services

Staff/Provider Training

Family Finding protocols will be used to find family resources and adult connections for youth identified without stable housing.

Healing and Restoration

- Transformative Mentoring/Credible Messengers
 - The Credible Messenger program provides integrated and coordinated responses to transition by facilitating family engagement and collaboration with the MDT to successfully mobilize community resources by using persons with lived experience who come from the same communities.
- Cognitive Behavioral Therapy
 Intervention for individuals who either have or may be at risk for symptoms related to the early
 onset of anxiety, depression, and the effects of trauma that impact various domains of daily
 living. CBT incorporates a wide variety of treatment strategies including psycho-education,
 skills acquisition, contingency management, Socratic questioning, behavioral activation,
 exposure, cognitive modification, acceptance and mindfulness strategies and behavioral
 rehearsal.

- Healing Circles
- Restorative Justice Leadership Training

Education

The department is continuing to expand relationships with the community college districts to leverage federal and state education funds to provide dual enrollment of youth in college courses and successful enrollment and linkages to post-secondary education.

Employment

The Workforce Development and Aging Community Services (WDACS) leverages federal and state funds to provide job readiness and experience training for youth in custody and linkages to America's Job Centers for employment upon release. Through the Youth at Work and other workforce investment funding, the County provides subsidized employment, educational stipends and vocational training funding, which prioritizes the reentry population. The Department will also contract with Community-Based providers for employment services.

Substance Abuse Treatment and Client Engagement and Navigation

Mental Health Services – individual and family services

Part 4: Juvenile Justice Realignment Block Grant Funds (WIC 1995 (3)(a))

Describe how the County plans to apply grant funds to address the mental health, sex offender treatment, or related behavioral or trauma-based needs of the target population:

The County plans to apply grant funds to address the mental health, sex offender treatment or related behavioral or trauma-based needs of the target population primarily funded through Medi-Cal and Mental Health Services Act funding that are not available for youth in custody:

As mentioned, Los Angeles County Department of Mental Health (DMH) provides all mental health assessments and services for youth in custody. For additional information, refer to Part 3: Programs and Services section on Mental Health. Additionally, the Department will explore contracting for treatment for youth who have sexually offended using the evidence-based Integrated Sex Offender Treatment Program (ISOTP). For additional information, refer to Part 3: Programs and Services section on Treatment for Youth Who Have Sexually Offended.

In addition, other trauma related behaviors such as domestic violence, co-parenting, parenting, family therapy programs may be needed for youth to regain visitation or custody of a child post release.

Describe how the County plans to apply grant funds to address support programs or services that promote healthy adolescent development for the target population: (WIC 1995 (3) (B))

The dynamics characterizing adolescent development during young adulthood are unique and complex and have direct implications for those who work this population. Healthy adolescent development in the broadest sense refers to stages that all youth go through to acquire the attitudes, competencies, values and social skills they need to become successful adults.

The Positive Youth Development framework presupposes that youth are continuing to change and develop; and as a practice, Youth Development programs prepare youth to meet challenges of adolescence by focusing on cultivating their strengths to help them achieve their full potential. Additionally, further implications drawn from this approach suggest that the youth/young adults' ability to develop successfully greatly depends on the support and assistance they receive from the institutions and people surrounding them. Supportive programs will be designed to recognize, utilize, and enhance the young person's strengths while providing opportunities to foster positive relationships with adult and peers. As a part of the treatment team, Credible Messengers will be one of the central features of programming, providing both in-facility and aftercare services for this population. Credible Messengers are people who are recognized and validated by the community they serve by providing transformative mentoring programming that includes healing circles, individual mentoring, family engagement, case management, community leadership opportunities, etc. They easily connect with this population because they come from the same/or a similar community, were formerly incarcerated and/or involved in the justice system and are skilled and trained in mentoring young people.

Adolescent Development and Stages of Change training will be provided for staff, agencies, and community-based providers.

Describe how the County plans to apply grant funds to address family engagement in programs for the target population: (WIC 1995 (3) (C))

As mentioned, the County intends to implement a robust Family Engagement Model that includes

the engagement and partnership with family members as partners throughout the young person's stay, specifically at critical decision points. For additional information, refer to Part 3: Programs and Services section on Family Engagement and Community Support.

Describe how the County plans to apply grant funds to address reentry, including planning and linkages to support employment, housing and continuing education for the target population: (WIC 1995 (3) (D))

The County will begin aftercare planning on receipt of the order for Secure Alternative Placement. Aftercare planning will include the assignment of an Aftercare/Transition community-based Deputy Probation Officer (DPO) and Credible Messenger that will serve also in a secondary/support role with the on-site treatment team and a primary role in the community with family, care giver, educational providers and other behavioral health practitioners to ensure that a viable youth leg plan that connects youth to the resources and opportunities in the community are being pursued and ready for activation, upon release.

The Positive Youth Development approach will be the cornerstone of the transition strategy and the Causal Model of Delinquency is the theoretical framework that will guide and inform programmatic thrusts. The Positive Youth Development is founded on the belief that young people are continuing to grow and change and are best able to navigate through their developmental stages when supported by prosocial adults and institutions within their ecology. The tenets of the Causal Model of Delinquency are grounded in social ecological research (Bronfenbrenner, 1979) that presupposes that behavior is multidetermined through the reciprocal interplay of the youth and his or her social ecology and that programs, service, people and the social systems where youth are embedded have the capacity to comprehensively enhance protective factors across all domains. The ultimate goal of both strategies is to help youth become healthy adults, not just arrest free, but fully prepared responsible and productive adults.

An additional challenge includes the coordination of multiagency participation that is an extension of services provided in the facility to wrap around youth and further emphasize and build on the strengths of family, community and most of all the gains made while incarcerated. The Community-Based Deputy Probation Officer and the Credible Messenger/Mentor will be principal parties responsible for ensuring that the pertinent key protective networks are well coordinated. Additionally, they will also be responsible for coordinating community-based resources for the family to prepare them for the youth's return home.

There is a heightened opportunity for relapse if Transition plans are not well coordinated as this population will not only be faced with navigating the transition from a well-structured setting to one of more independence, but also physically and mentally navigating the movement from adolescence to adulthood as the average age of DJJ disposition is 18 years and the average upon DJJ release is 21 years. Therefore, it is imperative that all living, housing arrangements are immediately accessible upon release.

The Community-Based phase of the model will deliberately focus efforts to ensure a continuum of care and support that increases protective factors/assets as opposed to employing practices that emphasize a deficit/risk-based approach. The family and the natural supports in the youth's ecology will also be emphasized and placed at the forefront of the community integration phase.

The aftercare case plan goals, as developed, reassessed from the beginning of the youth's stay in the Secure Alternative to DJJ will be accomplished through leveraging resources from governmental agencies, community-based organizations, faith-based partners and volunteers working in concert to support transition plans.

Describe how the County plans to apply grant funds to address evidence-based, promising, trauma-informed and culturally responsive services for the target population: (WIC 1995 (3) (E))

The Department will utilize the Principles of Effective Correctional Interventions as the evidence-based framework to fund programs that address the highest criminogenic need areas of Antisocial Attitudes, Values, Beliefs, Antisocial Peers, Antisocial Personality, Family, Education/Employment, Substance Abuse and Leisure Activities, while using cognitive behavioral interventions.² For specific interventions, the Department will rely on the Model Programs Guide (MPG) established by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to replicate programs that have been shown to work and fit the community's needs.

As personal characteristics (responsivity), such as motivation, developmental age, learning disabilities, intelligence, learning style culture, gender, mental health (depression, history of sexual abuse), and personality, may interfere or hinder engagement, motivation and efficacy, programs and services will be guided by research and trauma informed.³

Staff and providers alike will be trained in approaches that focus on the positive development of youth in small, home-like settings using intensive group processing facilitated by consistent staff-youth teams. Small, high-functioning, consistent, collaborative staffing teams will support youth in building a positive peer culture in which youth feel safe sharing past experiences, traumas, and fears, to learn new social emotional (soft) skills, and reinforce new positive behaviors, proven to positively impact an array of sectors, including areas of sexual and reproductive health, mental health, education, crime and violence (Catalano, 2002; Gavin et al., 2010; Roth 2003).

Therefore, training and competencies of staff will continuously be evaluated and updated to reflect the following set of principles that will shape the attitudes, behaviors, and organizational culture required to effectively implement evidence-based, trauma-informed and culturally responsive services:

- Evidence and Research Based: All youth services will be informed by research on effective and promising practices, for the juvenile justice population.
- Developmentally Appropriate: Services and programs must be tailored to the specific responsivity factors of each youth (age, gender, learning style, language, culture).
- Family Centered Engagement and Empowerment: Family (includes non-biological supportive adults, loved by the youth) are recognized as valued partners and part of the decision-making team that are incorporated into the youth's individualized treatment plan.
- Strengths-Based: Staff and system partners must view youth as individuals who have positive
 attributes that can be enhanced through programming that utilizes intentional youth
 development practices to effectuate changes to the youth's social emotional skills (Emotional
 Management, Empathy, Teamwork, Initiative, Responsibility, and Problem Solving.)
- Trauma Informed: Staff and system partners understands the impacts of trauma and builds pathways for recovery by recognizing and responding to the signs and symptoms of trauma.
- Culturally Responsive: Staff and systems partners value diversity and demonstrate social competence and sensitivity to cultural differences of groups of people with various backgrounds.
- Coordinated and Cohesive Case Management: Staff and system partners develop coordinated services through multi-disciplinary team meetings, and case plans so each youth's team (supportive adult, youth, teacher, clinician, social worker, treatment provider) are working together to achieve treatment goals and objectives.

² Gendreau, P., French, S., & Goinet, A. (2004). What Works (What Doesn't Work): The Principles of Effective correctional Treatment. Journal of Community Corrections, 13, 4-30.

³ Hubbard, Dana Jones and Pealer, Jennifer, "The Importance of Responsivity Factors in Predicting Reductions in Antisocial Attitudes and Cognitive Distortions Among Adult Male Offenders" (2009). Sociology & Criminology Faculty Publications. 57. https://engagedscholarship.csuohio.edu/clsoc_crim_facpub/57

Therefore, part of the grant funding will be utilized to cross-train staff and contractors and provide interventions. The evidence-based interventions utilized will be assessed for utilizing pre-post test data to ensure program fidelity and efficacy. Existing evidence-based practices such as Dialectic Behavioral Therapy, Seeking Safety, Mindfulness Based Substance Abuse treatment, and other cognitive behavioral interventions will be incorporated in the treatment plan for the SB823 population.

Describe whether and how the County plans to apply grant funds to include services or programs for the target population that are provided by nongovernmental or community-based providers: (WIC 1995 (3) (F))

Many of the programs/services, with the exception of supervision and reentry case management may be provided by non-governmental community-based providers. As prescribed, funding will pass through to the Department mandated by municipal code (e.g., Department of Mental Health) for managed care plans to community-based providers, where appropriate.

The following illustrates a sample of anticipated program/services to be provided known to enhance protective factors, while targeting criminogenic needs and responsivity factors in-custody and in the community:

Family

- Transportation for Parents (in custody)
- Dedicated Family Finding Services (in custody and in community)
- Individual/Group Counseling (in custody and in community)

Education/Vocational

- Tutoring (in custody and in community)
- Education Pathways and Vocational Opportunity Services (in community)
- Vocational Training (in custody and in community)
- Employment Readiness (in custody)
- Employment (in community)

Substance Abuse

- Substance Abuse Treatment (in custody and in community)
- Client Engagement and Navigation (in community)

Healing and Restoration

- Transformative Mentoring/Credible Messengers (in custody and in community)
- Healing Circles (in custody and in community)
- Cognitive Behavioral Therapy (e.g. Emotional Regulation/Mindfulness) (in custody and in community)
- Restorative Justice Leadership Training (in custody and in community)
- Victim Impact Classes (in custody)

Mental Health – CBO services will be contracted as deemed appropriate by DMH for Cognitive

Behavioral Therapy, crisis de-escalation, psychiatric treatment, etc.

Positive Youth Development

- Arts (e.g. music, literature, drama, dancing, etc.) (in custody)
- Leadership/Conflict Resolution (Youth Councils) (in custody)

Leisure –the Department is currently engaged in dialogue with faith-based entities, fraternities and sororities to assist with volunteerism in various areas such as: religious services, book clubs, intramural sports activities, banking, investing, career exploration, etc., which also accomplishes the goal of youth being connected to prosocial adults,

Housing – the Department intends to explore the expansion of current contracts with community-based providers for transitional housing

Program Evaluation and Training

- Program Evaluation Probation's Research Section will develop the framework for the evaluation and pursue the viability of partnership with a University
- Training CBO/University contracted services

Consultant Services – the Department seeking consultant services to assist with the implementation of various program components

Part 5: Facility Plan

Describe in detail each of the facilities that the County plans to use to house or confine the target population at varying levels of offense severity and treatment need, and improvements to accommodate long-term commitments. Facility information shall also include information on how the facilities will ensure the safety and protection of youth having different ages, genders, special needs, and other relevant characteristics. (WIC 1995 (4))

The County of Los Angeles Board of Supervisors directed the Youth Justice Work Group (YJWG), facilitated by the Haywood Burns Institute to help lead the first phase of planning "consistent with and informed by the ongoing work to reimagine the juvenile justice system in the County and improve treatment for youth in the County's care." The planning group consisted of governmental stakeholders and community-based professionals, guided by an established advisory committee of youth directly impacted by DJJ to inform the work.

Vision and Values Guiding SB 823 Implementation

The vision for local alternatives to the Division of Juvenile Justice – as is the overriding vision for youth justice generally – is to improve youth and family wellness and community safety by increasing access to opportunities to strengthen resiliency and reduce delinquency. To advance that vision, planning and implementation of those alternatives should be guided by the following values:

Holistic, trauma-informed youth development approach

- Justice responses to youth should focus on a continuum of holistic youth development responses to achieve rehabilitation, healing, public safety and restorative justice.
- o A Youth Development approach is rooted in a positive, strengths-based and

social justice orientation to working with youth, families and communities, characterized by opportunities that promote a sense of belonging, usefulness and power by helping youth develop competencies enabling them to grow and lead healthy, responsible and caring lives.

- Consistent with evidence based approaches and supportive of holistic, traumainformed youth development, a goal is to dramatically reduce the prosecution of youth in adult court. Therefore, "youth should be served through a continuum of effective secure and non-secure alternatives to the criminal court system and Division of Juvenile Justice.
- The justice system should make intentional investment in effective community-based organizations rooted in directly impacted neighborhoods to provide support services for youth in and out of custody. Re-entry support with connection to the community is critical and should begin right away.
- Robust educational and vocational opportunities should be provided.

Therapeutic, home-like environments

- Out-of-home placements—both non-secure or secure—should promote healing in a safe, therapeutic, home-like environment; engage/deliver services within a therapeutic milieu; and provide reentry services to ensure a seamless and positive return to the community.
- Facility staffing should prioritize hiring from backgrounds in evidence-based, youth development approaches to working with youth. All staff must be trained in and committed to adopting a trauma-informed, positive, youth-centered approach.

Further reducing reliance on detention

Implementing alternatives to DJJ should be consistent with the County's overall commitment to further reduce its reliance on detention, consolidate and close remaining facilities where feasible and redirect cost-savings towards more therapeutic alternatives.

Countywide Systems Coordination

Planning, decision-making and implementation of alternatives to DJJ should leverage, and be coordinated and integrated with related county initiatives, including the expanding work of the Office of Diversion and Reentry's Youth Diversion and Development division and Youth Justice Reimagined.

Family and community engagement

Youth's family and community should be active participants in their healing.

Period reviews and collaborative decision-making

Periodic court reviews should happen during a youth's confinement term to discuss the progress a youth has made – highlighting the skills they have developed to be able to step down to a less restrictive setting as soon as possible, and engaging multi-disciplinary perspectives in reporting and decision-making.

Transparency and Accountability, Centering Impacted Voices

Planning and implementation should ensure transparency and accountability across system and community-based providers, and center the voices and perspectives of those most impacted – including youth who are incarcerated or formerly incarcerated, and victims of serious crimes.

Evaluation and System Improvement

Policies and practices should be guided by qualitative and quantitative evidence. To improve outcomes for youth and the community and facilitate transparency and accountability, the County should collect and report on consistent and meaningful outcomes on the impact and effectiveness of all facilities, programs, services and other components of local alternatives on an annual basis (at minimum), and make system, program and practice improvements accordingly.

Racial Equity

All programs, services and other responses to youth should recognize and reduce the racial and ethnic and geographic disparities in access to services and more severe outcomes in juvenile justice processing.

These values support and reaffirm the facility's programmatic approach and Positive Youth Development (PYD) framework.

Facility Attributes

- Therapeutic, home-like setting
- Capacity for vocational/educational training
- Vast outdoor spaces
- Healing space to accommodate family visits

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Youth Classification Strategies

As mentioned, After July 1, once we have completed required discussions with our labor unions and, until threshold is reached, Campus Kilpatrick will house youth while we develop _Camp Scott as a longer-term facility, with eventual plan for possible site to be developed for step down or in the community.

To fully embrace a systematic approach to reform and to embrace the reimagined youth-centered therapeutic environments articulated by the LA Model, will require collaborative partners to pool resources and coordinate approaches in a setting described as a "therapeutic milieu." The therapeutic milieu refers to and includes all aspects of the environment within which youth live and staff work. The milieu is characterized by a "culture of care" and respect among all persons in the setting (e.g., probation personnel, youth, medical providers, mental health clinicians, administrators, educators, volunteers, and any other person who provides services) as well as the formal programming and education elements that are critical to each young person's development. The milieu is designed to cultivate opportunities for growth and healing while promoting personal autonomy and responsibility.

The therapeutic environment must permeate all aspects of the custodial experience, and shall be integrated into all daily and nighttime activities, and both adults and youth consistently practice and reinforce the supporting behavior, vocabulary, and strategies. In addition, the program takes advantage of every opportunity to provide all participants choice and autonomy to encourage independent practice of the learned skills.

Services provided to the youth will be intended to be achieved in diverse ways (e.g., in individual and group settings) and by a variety of service providers including, at a minimum, officers, educational providers, community-based organizations, religious providers, and mental health clinicians. However, each individual program or service shall be required to be integrated within the therapeutic milieu. As indicated in the LA Model, no program operates as a stand-alone service. This community approach emphasizes collaboration, fostering a refined learning environment that

is an innovative youth-centered approach, rooted in evidence-based practices and trauma-informed care.

Probation will utilize the LA Model core components to enhance and modify current practices to increase positive outcomes for youth and families as well as provide greater support for staff. The core principles and elements of the LA Model will provide a framework to assist Probation in improving practices to support enhanced communication, coordination and services for youth and families in the facility.

The model will guide the paradigm shift in the facility from a custodial focus to a more supportive, safe, and therapeutic environment for all. This will be achieved by meeting the following objectives:

- Operational practices will be realigned into small group, supportive living environments. Staffing, which will include stable post assignments led by a supervisor or DPO III, will allow for greater staff engagement with youth which develops more positive relationships consistent with the LA Model principles.
- 2. All youth will receive purposeful programming, determined to some extent by their length of stay, legal status, and for committed youth, needs as identified by formal assessments and case plans developed as part of a continuum of preparation for successful community reentry. Programming will include mental health, health, substance use-related, vocational programming and structured activities in alignment with the principles and practices of the LA Model.
- 3. Youth will be engaged by staff to support skill development and healthy behaviors (Positive Youth Development).
- 4. Staff will be trained to utilize appropriate rewards and sanctions using a behavior management program.
- 5. Staff will be trained and assessed for competence in the following areas:
 - Adolescent Stages of Development.
 - Social Learning Model;
 - Trauma-Informed Care
 - Vicarious Trauma
 - Engagement and De-escalation;
 - Physical interventions Continuum and Tactics:
 - Emergency Response;
 - Multi-disciplinary Team (MDT) approaches for behavior management;
 - Behavior Management Program;
 - Core Correctional Practices;
- 6. Policies will be modified based on the LA Model.
- 7. Incorporation of resources and stakeholder involvement.

To accomplish the objective of providing enhanced programming to mitigate disruptive behaviors, the Department will seek to:

- Staff the facility with direct supervision staffing
- Increase first-line supervisors.
- Add DPO IIs, Treatment and Counseling, to collaborate with DMH in the development of resource teams to respond to crisis situations.
- Add DPO IIIs as trainers, mentors and program specialists.

The conceptualized enhanced staffing model, supported by the principles of the LA Model which is designed to support a small-group, therapeutic living unit structure to create more positive and interactive relationships between staff and youth will provide sufficient staff to supervise the youth in a variety of activities. This model of care is intended to realign the tasks and activities of the facility staff into job descriptions and roles that are focused on the care and support of youth residing in our facilities.

Part 6: Retaining the Target Population in the Juvenile Justice System

Describe how the plan will incentivize or facilitate the retention of the target population within the jurisdiction and rehabilitative foundation of the juvenile justice system, in lieu of transfer to the adult criminal justice system: (WIC 1995 (5))

The purpose clause of SB 823 advises that counties should "reduce the transfer of youth into the adult criminal justice system. Extensive research has shown that sending youth to the adult court and prison system is ineffective and more harmful to both youth and public safety than keeping youth in the juvenile justice system. Moreover, youth of color bear the brunt of adult court prosecution, even when controlling for the nature of the offense and criminal history.

To facilitate retention of youth in the juvenile justice system, the County will:

1)Serve youth through a continuum of effective secure and non-secure alternatives to the criminal court system and Division of Juvenile Justice; 2) in collaboration with the District Attorney, Public Defender, Courts, Probation, the Office of Diversion and Reentry, restorative justice service providers and other relevant stakeholders, create and invest in a restorative justice approach to youth crime, including serious, violent crimes, to facilitate the goals of repair and accountability at any point viable before, during or after adjudication and confinement; 3) engage leadership of youth formerly incarcerated in DJJ and the adult system and survivors of serious crimes, in developing the continuum of effective secure and non-secure alternatives.

Part 7: Regional Effort

Describe any regional agreements or arrangements supported by the County's block grant allocation: (WIC 1995 (6))

The County may enter into a regional agreement or arrangement pending the Board of State and Community Corrections (BSCC) one-time grant as a part of the Regional Youth Programs and Facilities Grant (RYPFGP) under SB 823 (Chapter 337, Statues of 2020) and how grant funds may serve overarching DJJ realignment needs related to providing custody, supervision and services for out-of-county youth on a regional basis and providing specialized programming for the County's DJJ realigned youth, including longer-term secure confinement programs and sex-offender mental health or gender specific programs.

Part 8: Data

Describe how data will be collected on youth served by the block grant: (WIC 1995 (7))

Collection of data points will occur through multiple systems across various programs and services for youth served by the block grant as follows:

- Youth related demographics (e.g. gender, age, ethnicity, etc.) and case management supportive efforts
- Youth general health services
- Youth mental health services
- Youth educational services through various agencies providing supportive services (e.g. Los Angeles County Office of Education, Community College, etc.,)
- Youth vocational services and training

Additionally, program specific data points (e.g. number of participants, dosage amount and type, etc.) and possible survey-based responses (e.g. attitude and behavior, cognitive abilities, etc.) will also be targeted for collection in order to analyze outcome measures.

Part 9: Data

Describe outcome measures that will be utilized to determine the results of the programs and interventions supported by block grant funds: (WIC 1995 (7)

Probation will collaborate with subject matter experts to appropriate the necessary information from established sources, in particular partner stakeholders (governmental agencies, community-based service providers for the outcome measures. Probation (Research) will work with any form of data received that consists of (1) program-specific data from probation as well as from partner agencies and (2) psychometric outcome measures collected at the facilities. Identification of outcome measures will be made by closely supporting program coordinators and collaborating with program subject matter experts.

The areas of outcome measures include education, family, substance use, health, life coach, vocational, positive incentive system, mental health, young-adult counselling, and rehabilitative programming, which the Department identifies as "current DJJ youth needs." Some of the programs' psychometric outcome measures could be used to evaluate change over time in behavior, while other outcome measures will be used to capture attitudes and cognitive abilities.

Outcomes can be disaggregated by the DJJ youth's demographic characteristics such as gender, age, race/ethnicity, which will allow for the identification of disproportionalities of the results of the programs, if any, among the population served. Dosage amount and type of direct service provided will also be assessed to identify how the components of the programs may impact the outcomes of interest. The intermediary assessment results can be used for course correction during the program implementation to ensure it success. For example, counts, ratios, and standard deviations will be used to create performance metrics. Probation (Research) will work with operations to provide technical assistance with developing the tools for any matrix requiring ongoing monitoring and frequent reporting for progress toward program goals. (i.e. weekly, monthly reports).

Depending on the amount and type of data provided, the analyses can examine pre/post program outcomes, performance metrics, and factors that impact outcomes. This can be for short-term and long-term outcomes. This can be done by using descriptive statistics, paired sample t-tests, regression modeling, structural equation modeling, propensity score matching, and moderation & mediation analyses, etc.