

Reducing Recidivism for Youth in the Juvenile Services Division of the Kansas Department of Corrections

Analyses and Recommendations

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Overview



Background and Overview of Assessment

Findings

Recommendations

The Council of State Governments Justice Center

Corrections



Courts



Justice Reinvestment



Law Enforcement



Mental Health



Reentry



Substance Abuse



Youth



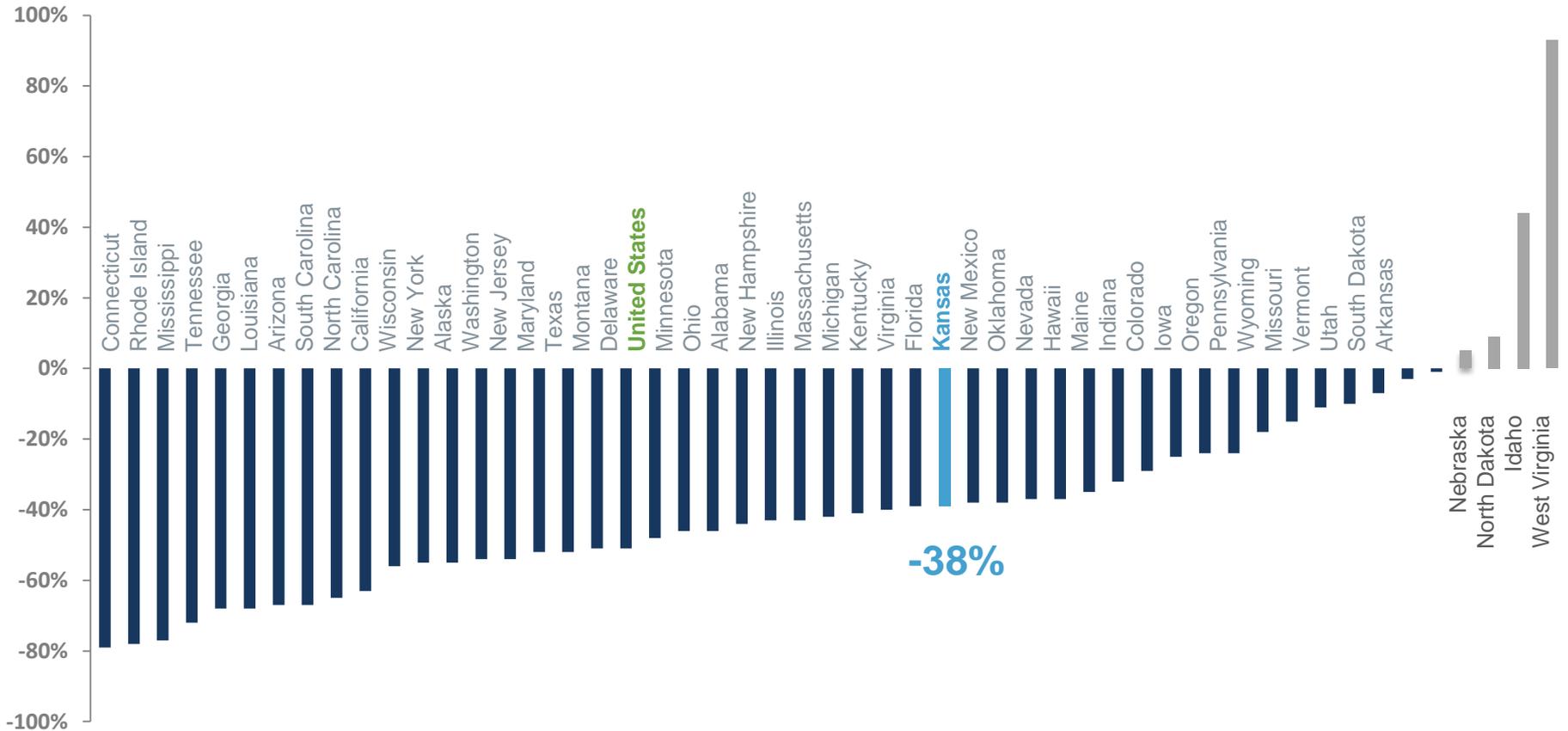
National nonprofit,
nonpartisan membership
association of state
government officials

Represents all
three branches of
state government

Provides practical
advice informed by the
best available evidence

Progress in Reducing State Juvenile Confinement Rates

PERCENT CHANGE IN STATE JUVENILE CONFINEMENT RATES (1997-2011)



*Office of Juvenile Justice and Delinquency Prevention, Easy Access to the Census of Juveniles in Residential Placement. Available at ojjdp.gov/ojstatbb/ezacjrp

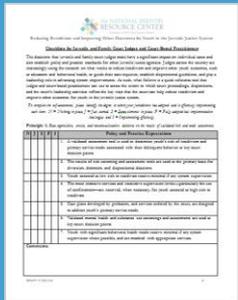
Importance of Youth Outcomes



July 2014

WHITEPAPER PUBLISHED

Identifies core principles demonstrated by research to reduce recidivism and improve other youth outcomes



August 2014

PILOTS LAUNCHED IN FIVE STATES

Piloting checklists to help government officials assess whether policies and practices align with the core principles

Core Principles for Improving Youth Outcomes

Principle 1

Base supervision, service, and resource allocation decisions on the results of **validated risk and need assessments**

Principle 2

Adopt and effectively implement **programs and services demonstrated to reduce recidivism** and improve other youth outcomes, and use data to **evaluate the results** and direct system improvements

Principle 3

Employ a **coordinated approach** across service systems to address youth's needs

Principle 4

Tailor system policies, programs, and supervision to reflect the **distinct developmental needs of adolescents**

Assessment of Policies and Practices

Youth in the Custody of the Kansas Department of Corrections

No juvenile justice system has fully implemented all or even most of “what works” to reduce recidivism

KDOC has engaged in a robust and transparent evaluation of its efforts and is committed to improvement

Reviewed KDOC policies and procedures

Analyzed recidivism and other outcome data

Conducted over 25 focus groups with KDOC staff and external stakeholders

Identified key barriers to reducing recidivism and recommendations for improvement

Data and Information Used for Assessment

Data Analyzed

- Intakes
- Disposition to ISP, case management and JCFs
- Length of stay (LOS)
- Releases/completions from case management and JCFs
- Discharges from ISP
- YLS scores
- Sex offenders in JCFs and LOS
- Dispositions and prison admissions to calculate recidivism

Information Reviewed

- Juvenile system flow chart
- Juvenile Intake and Supervision Standards
- KDOC 2014 annual report and outcome reports
- Provider Policy Handbook
- Strategic Action Plan, 2012
- YRCII Cost Study
- Juvenile YLS scores
- State Advisory Group System Ad Hoc Report, 2013
- Subcommittee on JJ Reform Proposals to the House Committee on Corrections and Juvenile Justice, 2014

Focus Group Participants

Community Advisory Council (KDOC)

Community Supervision Agencies Line Staff
and Supervisors

Court Services Staff

Kansas Department for Children and Families

Juvenile Court Judges

Juvenile Corrections Advisory Board members

Juvenile Intake and Assessment Line Staff

Kansas Advisory Group

KDOC Leadership, Program Managers, and
Research Staff

Kansas Department for Aging and Disability
Services

Kansas Appleseed

Legislators

Office of Judicial Administration

Parents and Youth

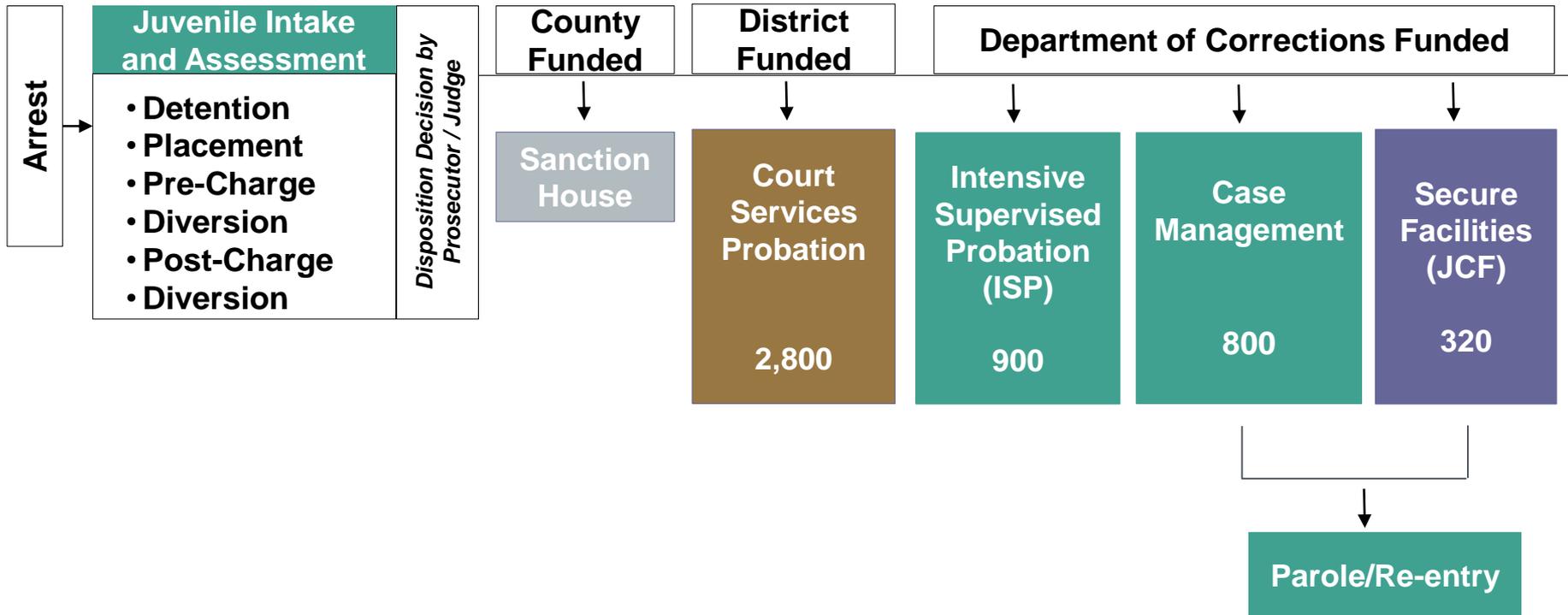
Providers Advisory Group (KDOC)

Prosecutors

Staff and Leadership at the Kansas Juvenile
Correctional Complex and Larned Juvenile
Correctional Facility

Kansas Juvenile Justice System

Focus of assessment primarily on KDOC operated and funded activities



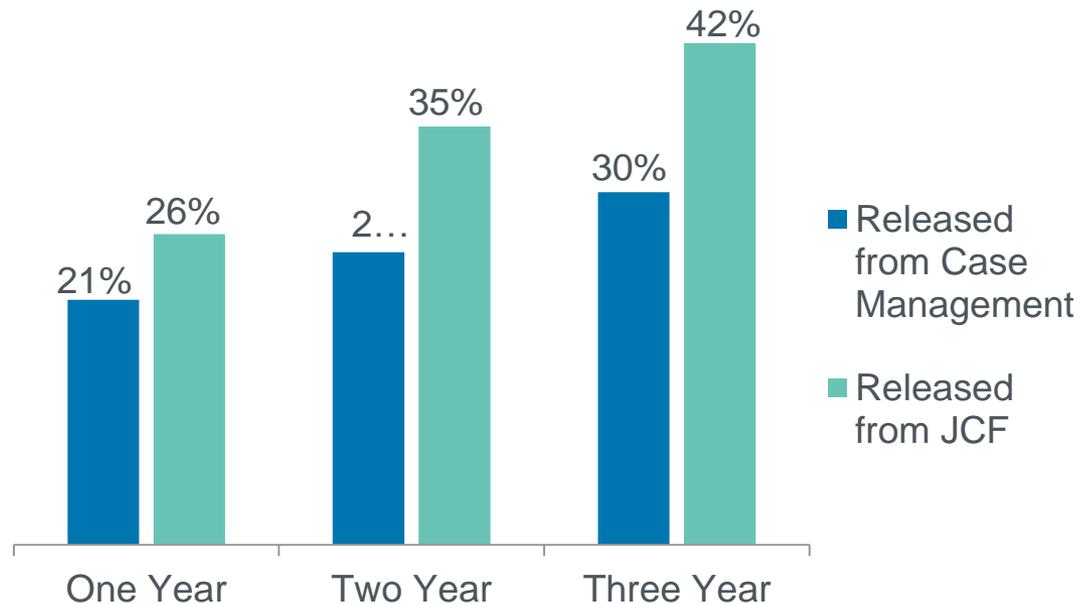
High Recidivism Rates for Youth in KDOC Custody

FIGURE 1: Re-incarceration Rates for Youth Released from Case Management and Juvenile Correctional Facilities, 2010

30%
of youth on case management

42%
of youth in JCFs

are **reincarcerated** within
three years of release



Overview

Background and Overview of Assessment

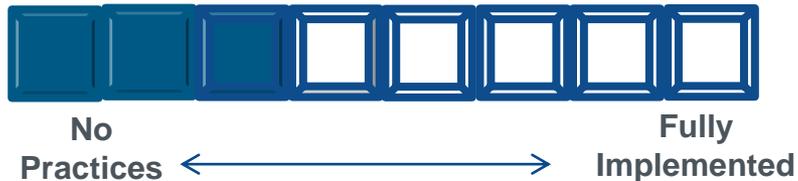


Findings

Recommendations

Steps Taken Towards Adopting and Using Validated Risk Assessments

Principle 1: Use Validated Assessments



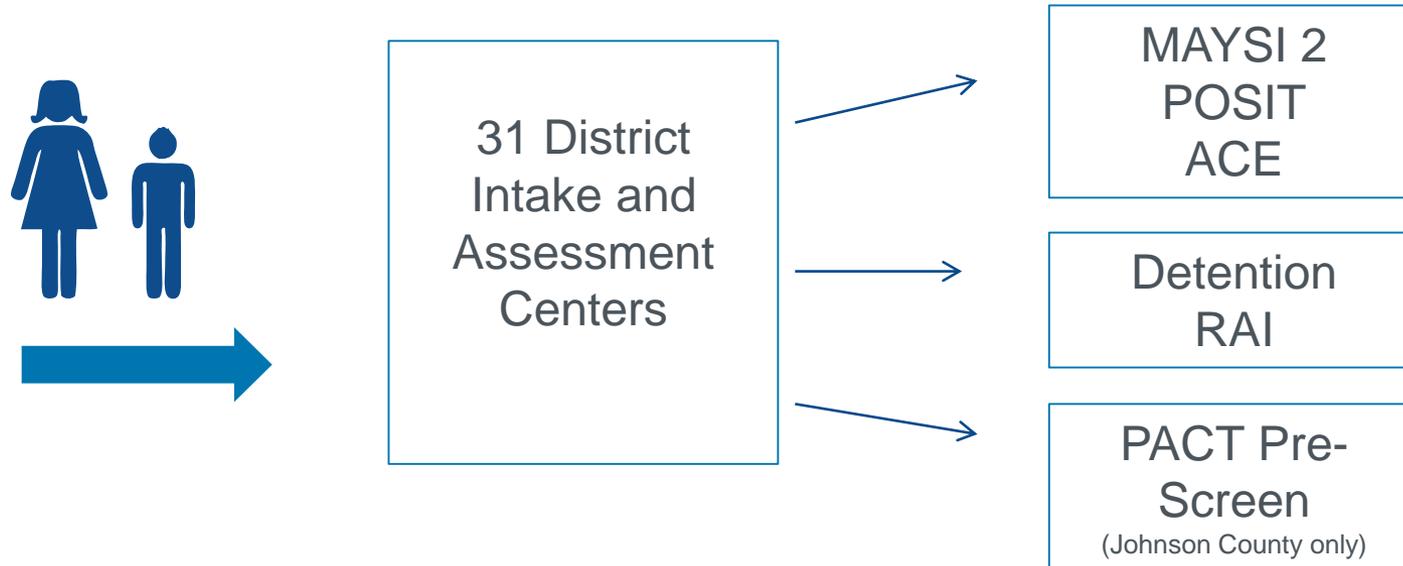
- ✓ Court services recently required to conduct risk assessments (YLS) as part of pre-disposition investigations
- ✓ ISP officers required to conduct a YLS and develop case plans for all youth on ISP and in KDOC custody
- ✓ Implemented YLS statewide
- ✓ Most districts use a validated mental health/substance use screen at intake
- ✓ Training is provided by KDOC to ISP officers on conducting risk assessments with fidelity
- ✓ KDOC conducts quality assurance audits of YLS assessments

Areas in Need of Improvements

Limited use of objective criteria to guide key decisions

- Risk assessments are not the primary determining factor for supervision decisions
- Youth's treatment needs are not assessed fully or in a timely manner
- YRCIIs may not be aware of or able to effectively address youth's needs
- Lengths of stay in residential placements and reentry decisions are not based on youth's risks and needs and the efficient use of resources
- Quality assurance concerns may limit the usefulness of the YLS

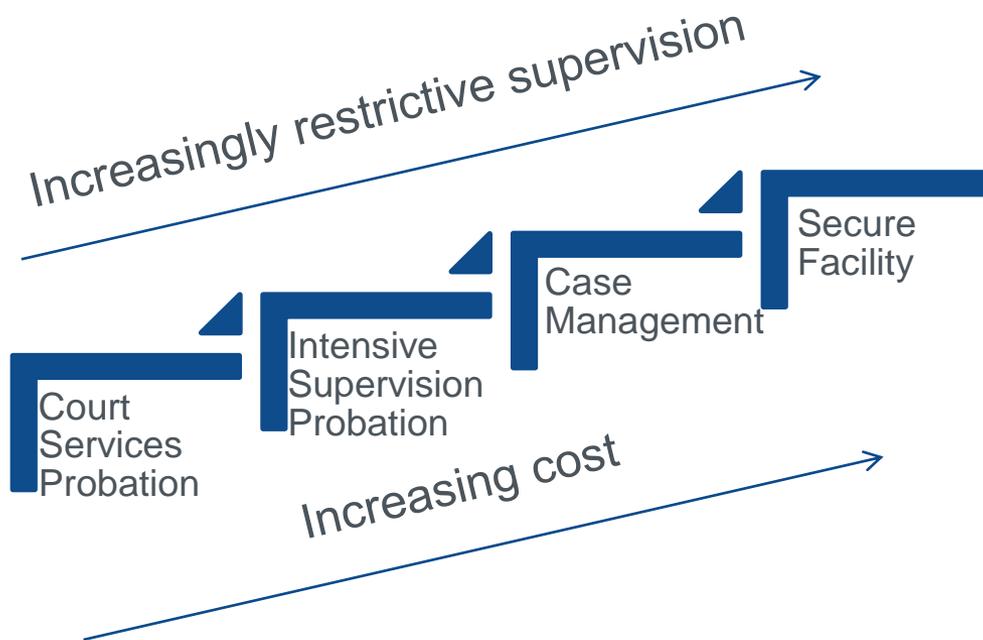
No Standard Assessment Identifies Youth for Diversion at Intake



“The data collected via the Intake and Assessment process could potentially provide a wealth of knowledge for the juvenile justice system. However, given the large amount of missing data, it is clear that the assessment process is not being implemented uniformly across the state.”

Source: Objective Advantage LLC, *Kansas State DMC Assessment*, 2013

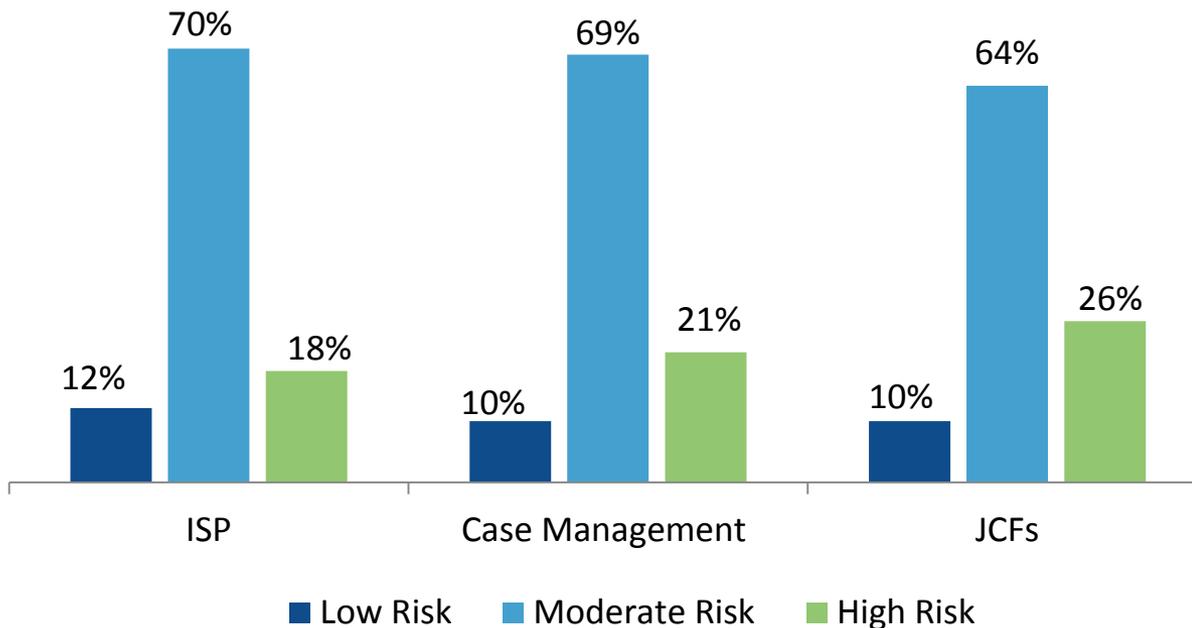
Risk Assessments Are Required But May Not Occur Before Disposition



- Based on interviews, many judges don't order pre-disposition investigations so dispositions occur without a YLS
- No statewide criteria exists to distinguish between one of four supervision levels based on offense severity and risk to reoffend and to match youth with the appropriate supervision level accordingly

Less than a Quarter of Youth on ISP and in KDOC Custody Are Assessed as High Risk

FIGURE 2: Assessed Risk Level of Youth under KDOC Jurisdiction, 2014

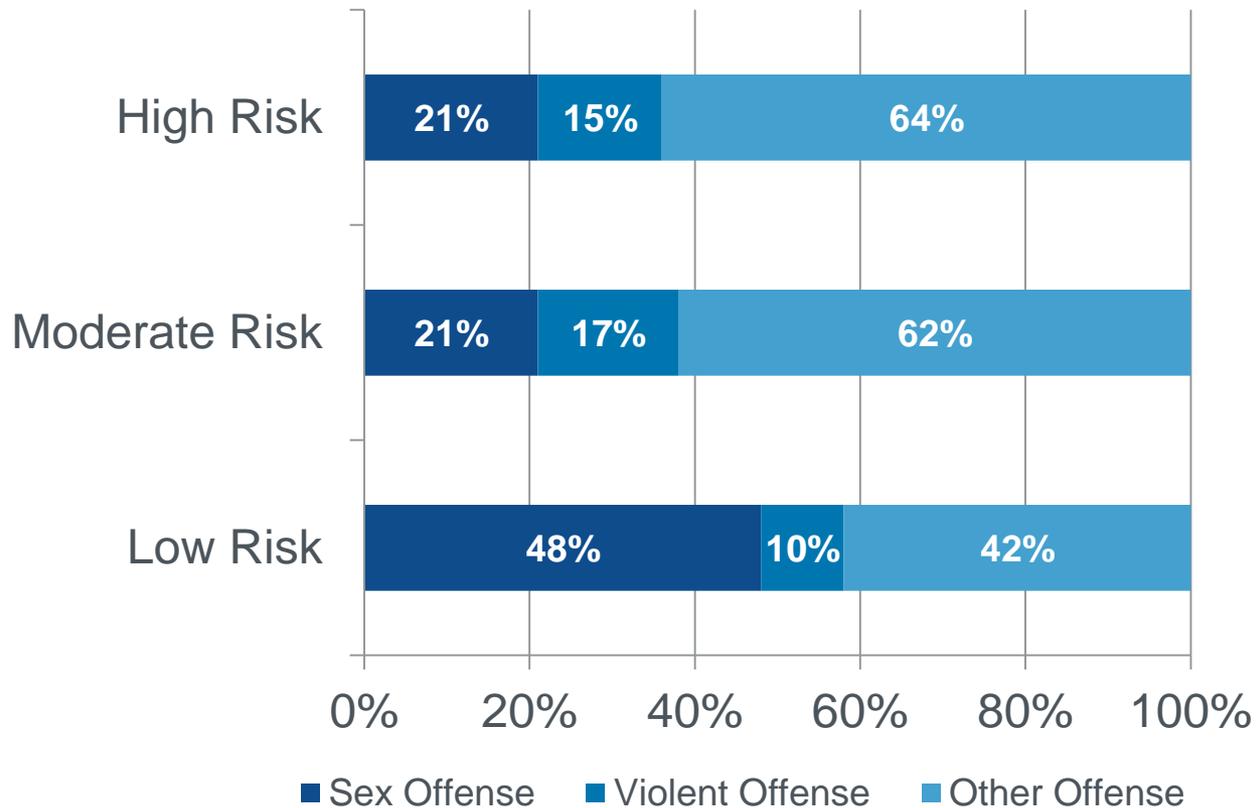


Majority of youth under jurisdiction of KDOC are assessed as being at moderate risk of reoffending

Dispositions to JCFs Not Due to Violent Offenses for Most Moderate Risk Youth

Sex offenses are significant driver of JCF placements for low-risk youth

FIGURE 3: Offense Severity of Youth Placed in JCFs by Assessed Risk Level of Youth, 2014



Unidentified Mental and Substance Use Disorders

Insufficient Communication

Youth receive a mental health screening at intake, but districts don't always share the results with the court

+

Lack of Formal Assessments

Courts don't use validated assessments and/ or know when to use them based on screening results

+

Uninformed Decision Making

Disposition, placement, and service decisions made without knowing treatment needs

Youth Are Not Assessed in a Timely Fashion or at All If in a Residential Placement

Youth Entering Case Management

On average, youth entering a case management placement had their last YLS from an ISP officer **327 days** before placement

Average number of placements after disposition before release to home
4.2

Youth Entering JCFs

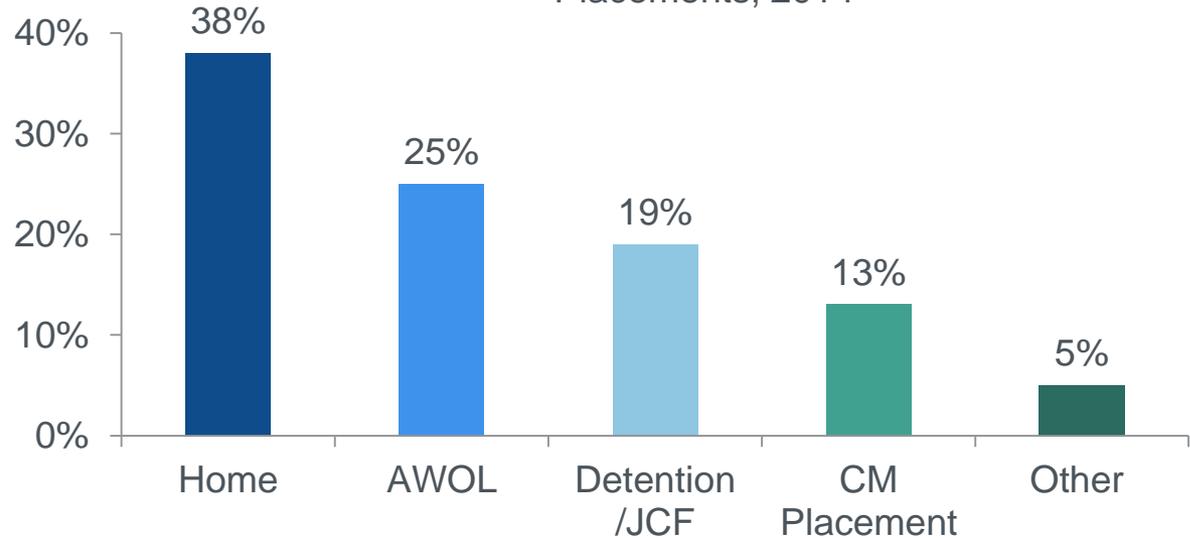
On average, youth entering a JCF had their last YLS from an ISP officer **222 days** before placement

Average number of placements after disposition before release to home
4.4

Youth Do Not Appear to be Matched to Appropriate Services

\$16 million
Per year spent on YRCIIs

FIGURE 4: Discharge Location for Youth Leaving YRCII Placements, 2014



Youth's needs are not fully assessed so youth are placed in facilities that are unaware of their treatment needs and/or not equipped to address them effectively

Lengths of Stay Are Not Based on the Time Needed for Effective Treatment and Efficient Use of Resources

FIGURE 5: Distribution of Youth's Lengths of Stay in JCFs and YRCIIs, 2014

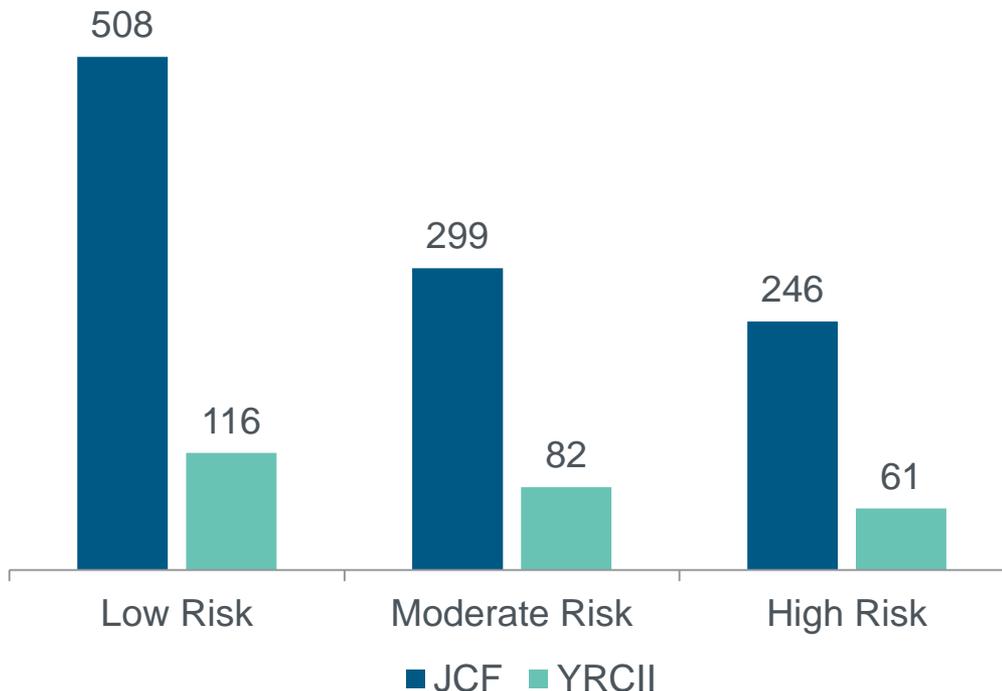
	JCF*	YRCII
0 to 3 months	9%	53%
3 to 6 months	22%	30%
6 to 12 months	21%	14%
12 to 24 months	37%	2%
More than 24 months	11%	1%
Median Stay	349 Days	80 days

*For youth admitted to a JCF for a new offense (not for violation of conditional release)

- LOS in JCFs are determined by statute, judges, “good time” and “time served”
- 9% of youth in JCFs stay less than 3 months, 37% stay more than 12 months and 11% more than 2 years
- LOS in YRCIIs are based on judge, district, and service provider discretion
- 53% of youth in YRCIIs stay less than 3 months; 70% of these youth are discharged unsuccessfully

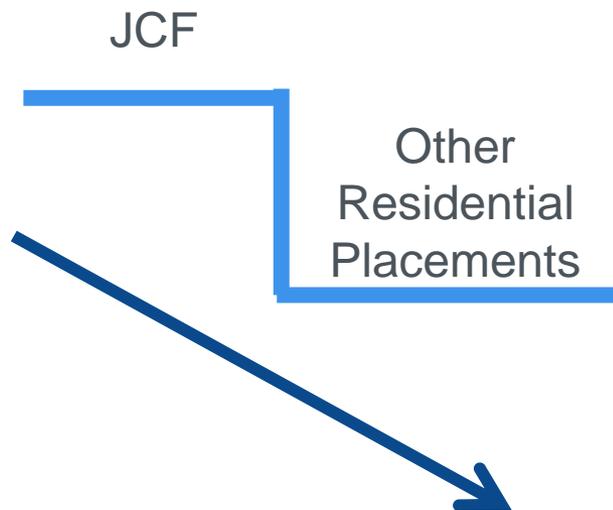
Low Risk Youth Have the Longest Lengths of Stay

FIGURE 6 : Median Length of Stay in a JCF and YRCII for Youth by Assessed Risk Level, 2014



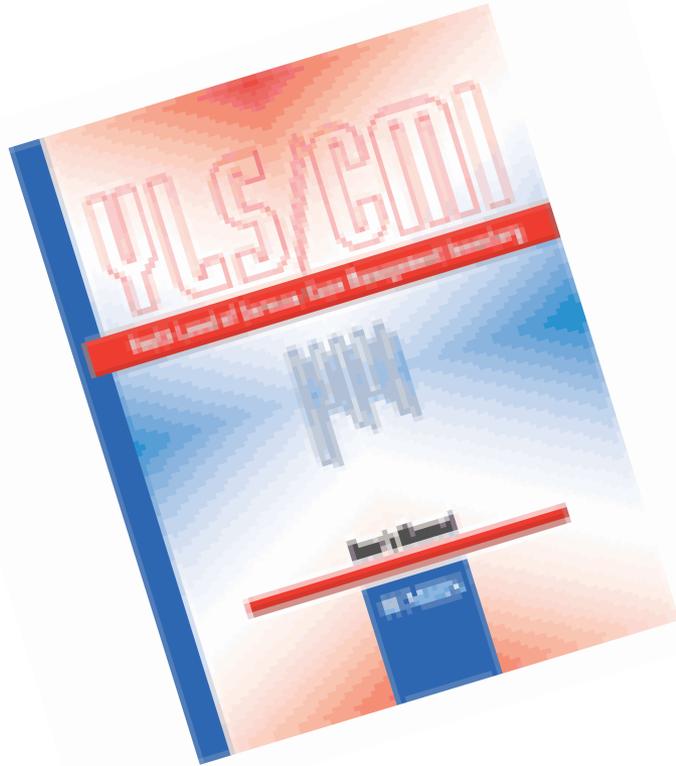
- Lengths of stay in JCFs or YRCIIs are not determined by youth's risk of reoffending
- YRCIIs LOS are longest for youth assessed as low risk to offend and shortest for the highest risk youth
- LOS for low risk youth in JCFs are primarily driven by statutory minimum lengths of stay for youth who commit sex offenses

Youth Leaving JCFs Often Transition to Other Residential Placements for Reentry



- 33% of all youth are released from a JCF to another residential placement as part of their reentry plan
- High risk youth transition to another residential placement 46% of the time and low and moderate risk youth 33% of the time
- Facility staff cite that residential placements are often used as a default reentry plan for all youth returning to certain counties

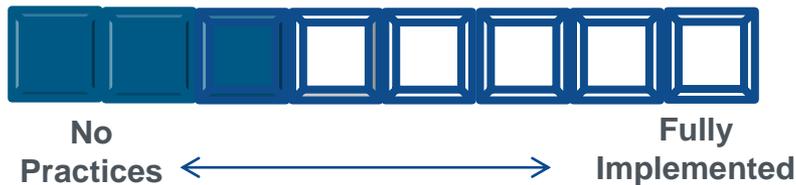
Quality Assurance Concerns About the YLS May Limit its Usefulness



- Similar distribution of low, moderate, and high risk youth across ISP, case management, and JCFs raise concerns about tool validation/scoring
- District staff question the YLS accuracy, which may distort the thoroughness of their assessments and use of the results
- KDOC conducts YLS quality assurance reviews, but does not analyze data to identify districts that may be using the tool inappropriately and target training and more intensive reviews accordingly

Steps Taken Towards Adopting Effective Programs and Evaluating Youth Outcomes

Principle 2: Programs that Work



- ✓ Implemented MST pilot project in Wyandotte County to divert youth from residential placement in September 2013
- ✓ Provides Aggression Replacement Training (ART) and evidence based sex offender treatment in JCFs
- ✓ Conducts quality assurance case audits of services provided to youth in YRCII placements
- ✓ Tracks return to custody and incarceration for youth leaving JCFs and reports annually

Areas in Need of Improvements

Lack of evidence-based programs in community and data on youth outcomes

- Kansas lacks a statewide strategy for ensuring that evidence-based programs are available in the community for use as alternatives to residential placement and for reentry
- The implementation of evidence-based programs is not required for case management providers
- KDOC does not use a validated tool to assess service quality and lacks formal processes for reviewing and using this data for outcome improvement
- Recidivism and other youth outcomes are tracked in an incomplete manner or not all for youth under KDOC jurisdiction, and data is not used to guide key decisions and to hold staff, districts, and providers accountable
- Data collection is fragmented and inconsistent across the juvenile justice continuum and locales

Few Evidence Based Services Are Available to Youth in the Community

- × Mental Health
- × Substance Use
- × Females
- × Youth Who Commit Sex Offenses

“There is only one provider for drug treatment. That provider is not good but I have to send my kids there anyway.” (family member of youth in custody)

“A lot of females could be better served in the community but are placed instead.” (KDOC staff member)

“There is no sex offender treatment in the community. Kids have to drive 3 1/2 hours one way to go to counseling.” (ISP officer)

Limited Services in Community May Impact Overall Confinement Rate

Location	2011 Confinement Rate per 100,000 Youth	State Rank
United States	196	
Kansas	255	8 th highest

- Kansas lacks a statewide approach for ensuring that youth are maintained in the community through the use of evidence-based programs/practices:
 - 35 states have implemented the “big 3” evidence-based programs (MST, FFT, MTFC) at some scale statewide
 - 12+ states use the [Standard Program Evaluation Protocol](#) or [Correctional Program Checklist](#) to assess and improve the quality of local services
 - States such as Ohio, Illinois, and Washington have established [fiscal incentives for locales to implement EBPs](#) and keep youth out of state custody

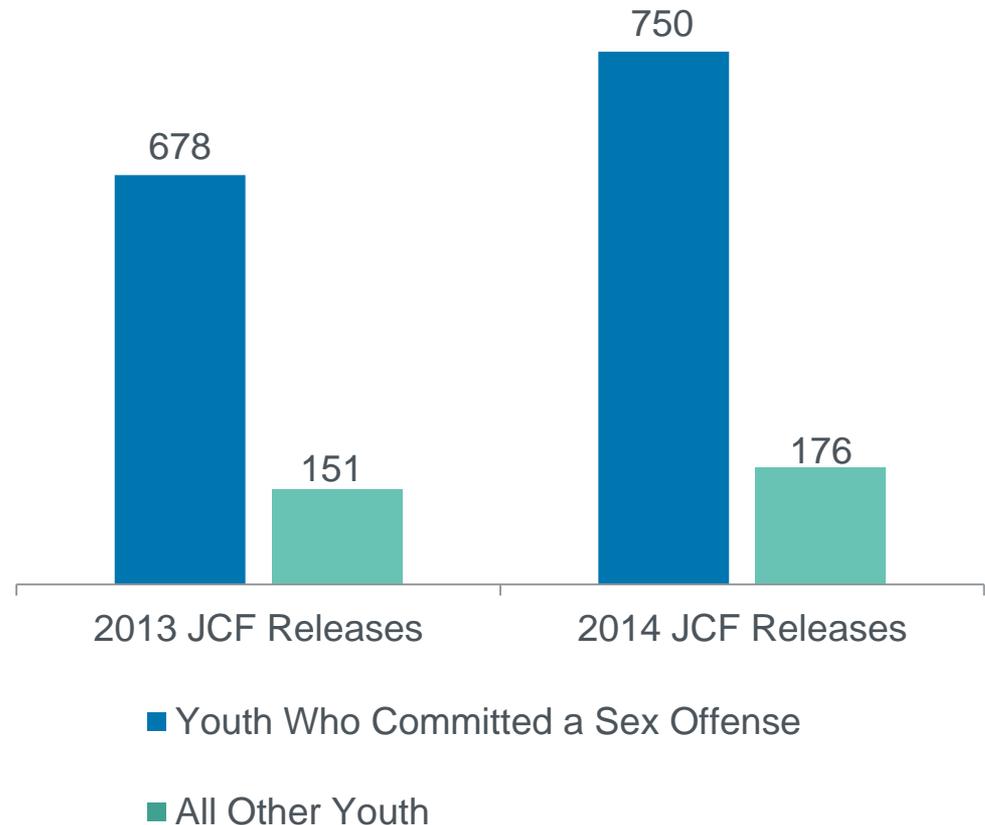
Limited Community Services May Impact Confinement and LOS Specifically for Youth Who Commit Sex Offenses

Disproportionate commitment of youth who commit sex offenses

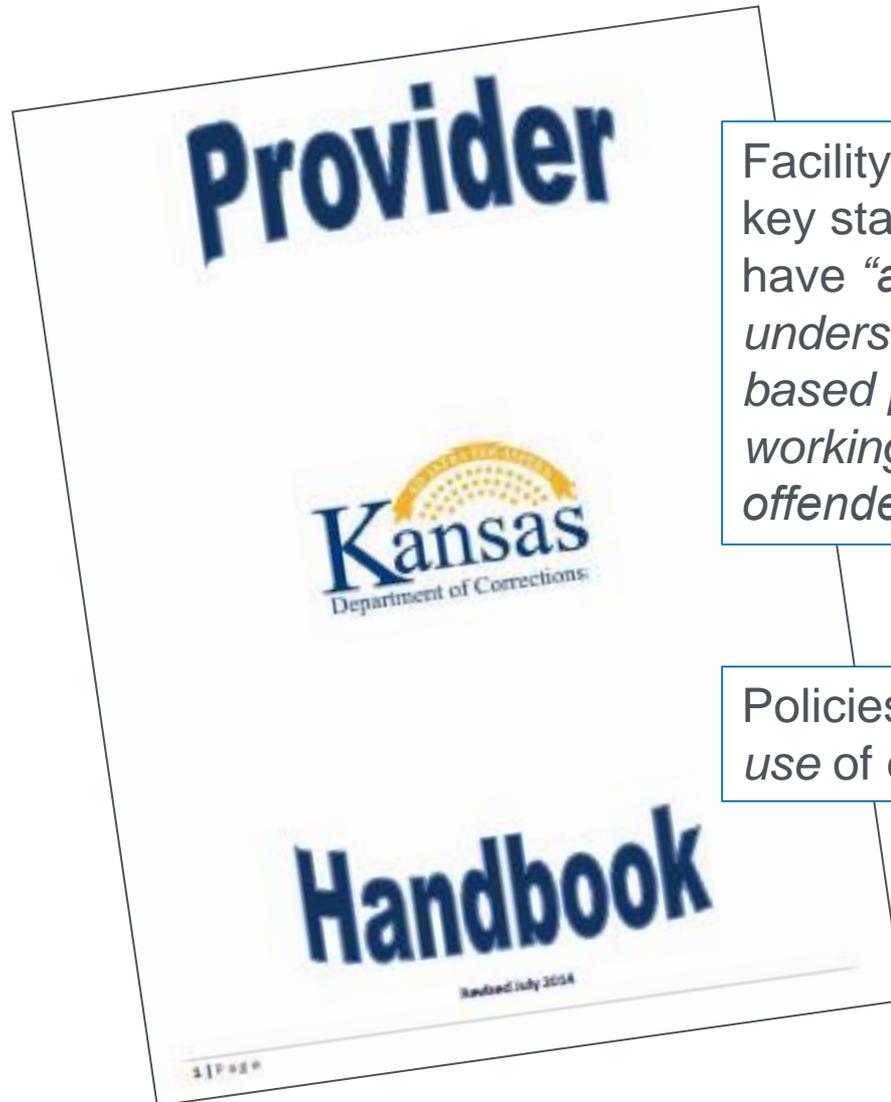
40%

of entire JCF population

FIGURE 7: Median Lengths of Stay in a JCF, 2014



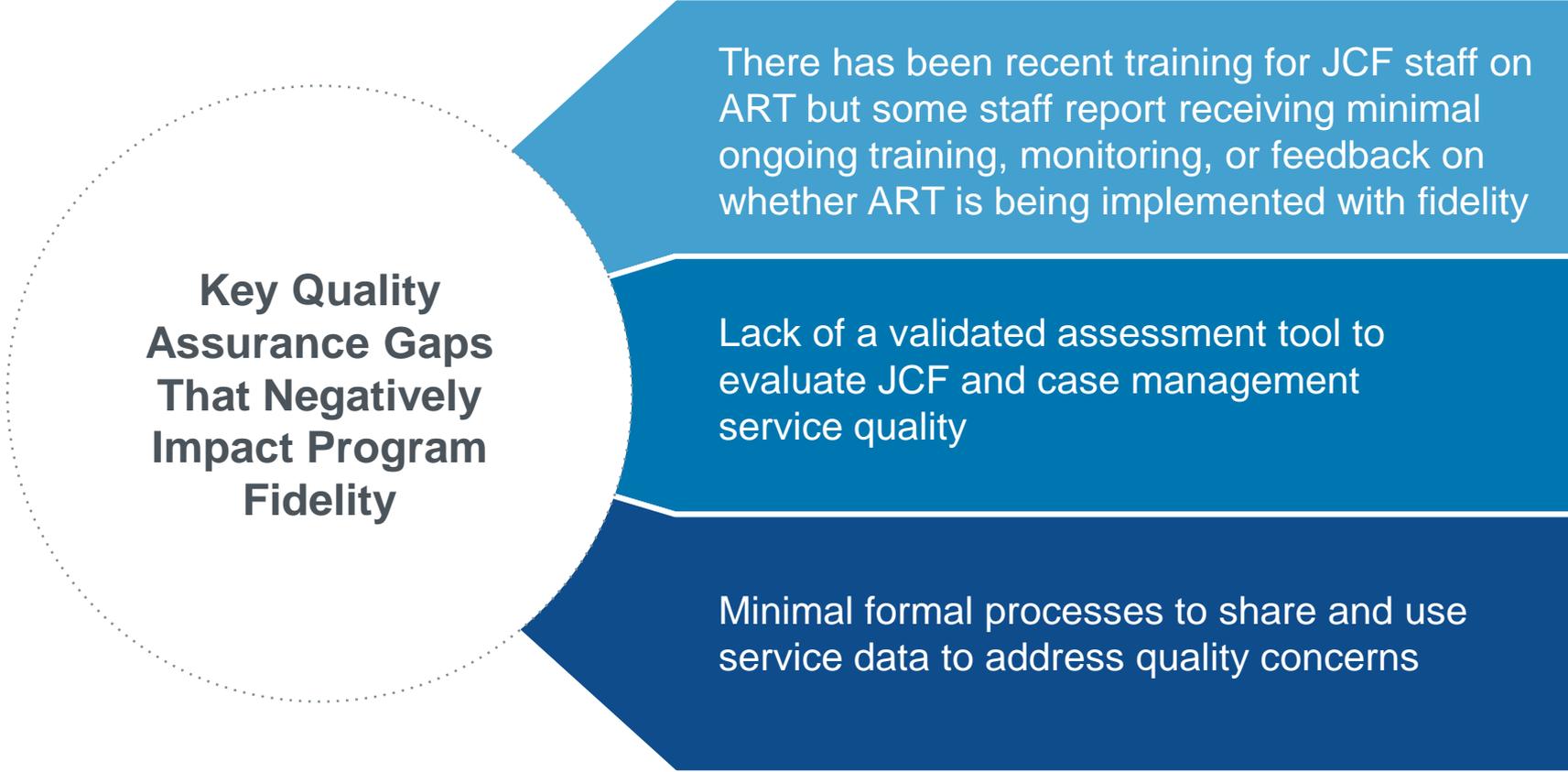
Service Providers Are Not Required to Offer Evidence-Based Services



Facility administrators and key staff are required to have *“a knowledge and understanding of evidence based practices for working with juvenile offenders”*

Policies do not require the *use of effective programs*

Lack of Quality Assurance for Services



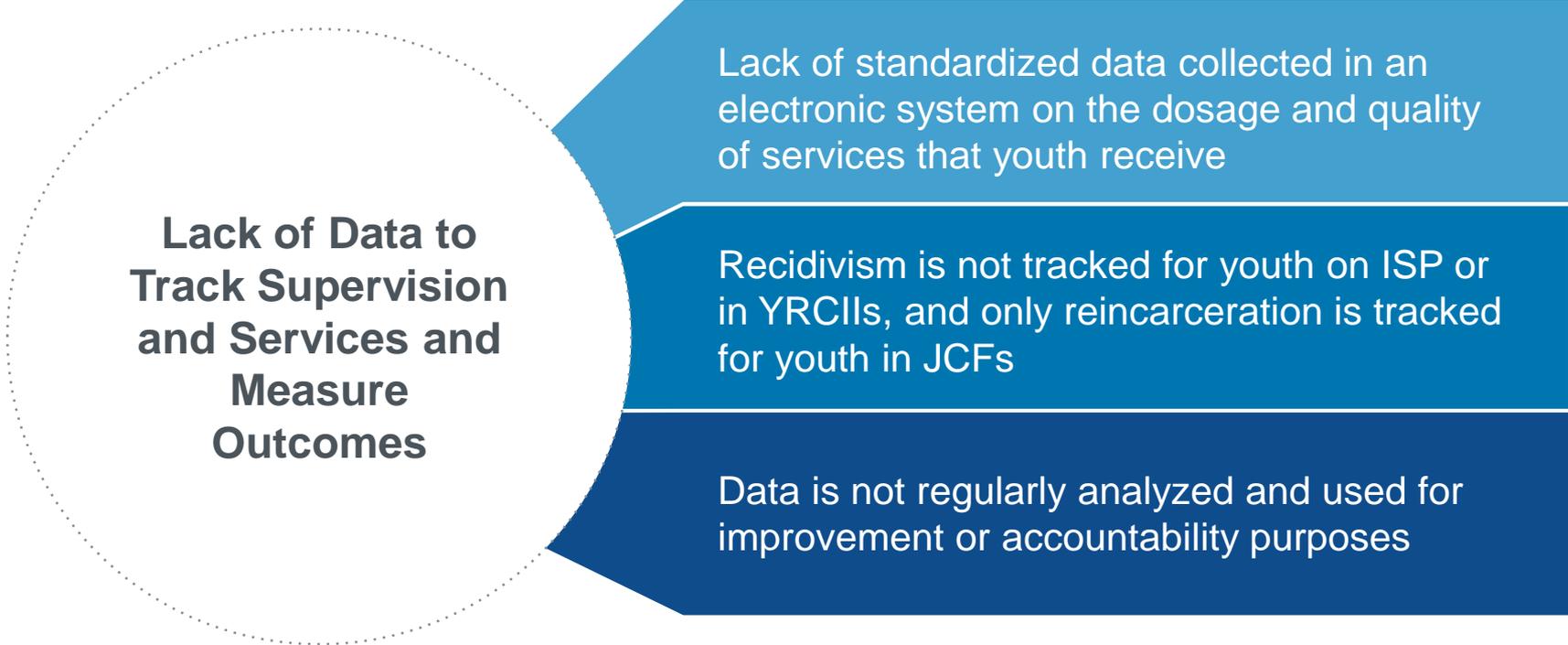
Key Quality Assurance Gaps That Negatively Impact Program Fidelity

There has been recent training for JCF staff on ART but some staff report receiving minimal ongoing training, monitoring, or feedback on whether ART is being implemented with fidelity

Lack of a validated assessment tool to evaluate JCF and case management service quality

Minimal formal processes to share and use service data to address quality concerns

Insufficient Data for Outcome Measurement and Accountability



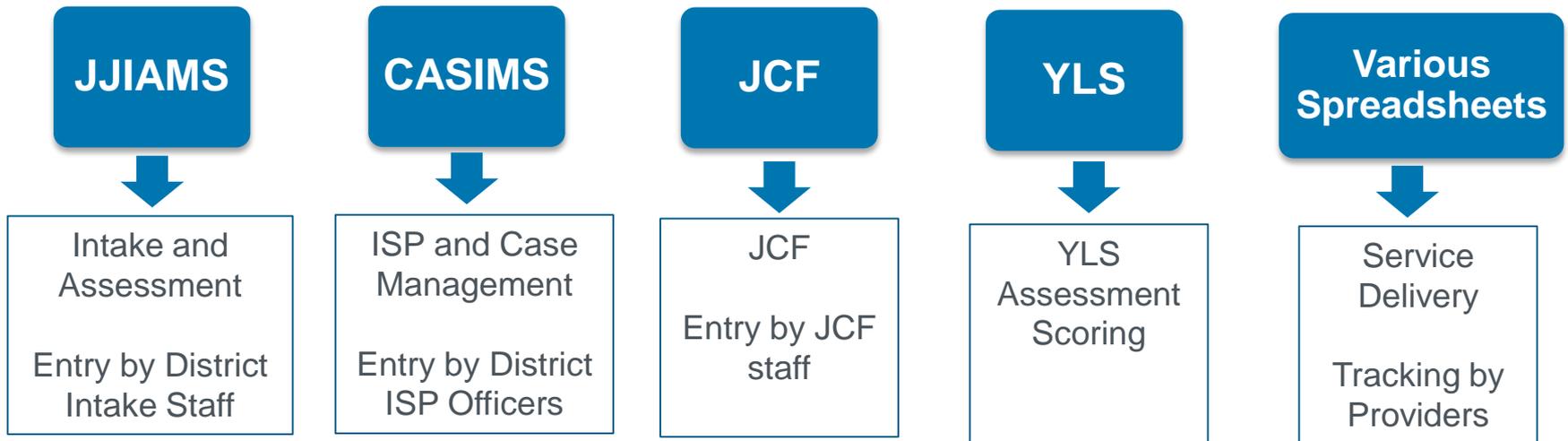
Lack of Data to Track Supervision and Services and Measure Outcomes

Lack of standardized data collected in an electronic system on the dosage and quality of services that youth receive

Recidivism is not tracked for youth on ISP or in YRCIIs, and only reincarceration is tracked for youth in JCFs

Data is not regularly analyzed and used for improvement or accountability purposes

Data Collection and Lack of Systems Integration Make Analysis Difficult



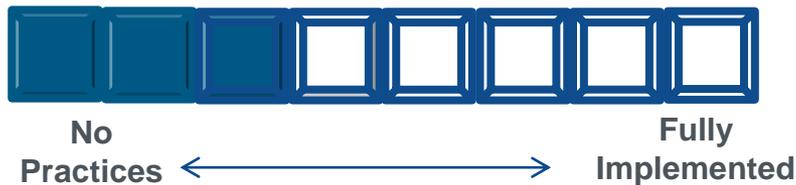
- Redundant data entry
- Difficulty linking information across separate electronic systems
- Historical data overwritten so difficult to identify youth's needs versus services at a specific point in time
- No program participation /service data captured and service providers don't have direct system access
- No mental health or substance use data available
- Data difficult to extract / use

**Court
Services
Probation**

Data Not Available
to KDOC

Steps Taken Toward Government Agency and Service System Collaboration

Principle 3: Collaboration across Systems



- ✓ Partners with the Kansas Advisory Group, Community Advisory Council, and Provider Advisory Group
- ✓ Attends some meetings of Juvenile Corrections Advisory Boards in districts
- ✓ Participates in Governor's Behavioral Health Subcabinet

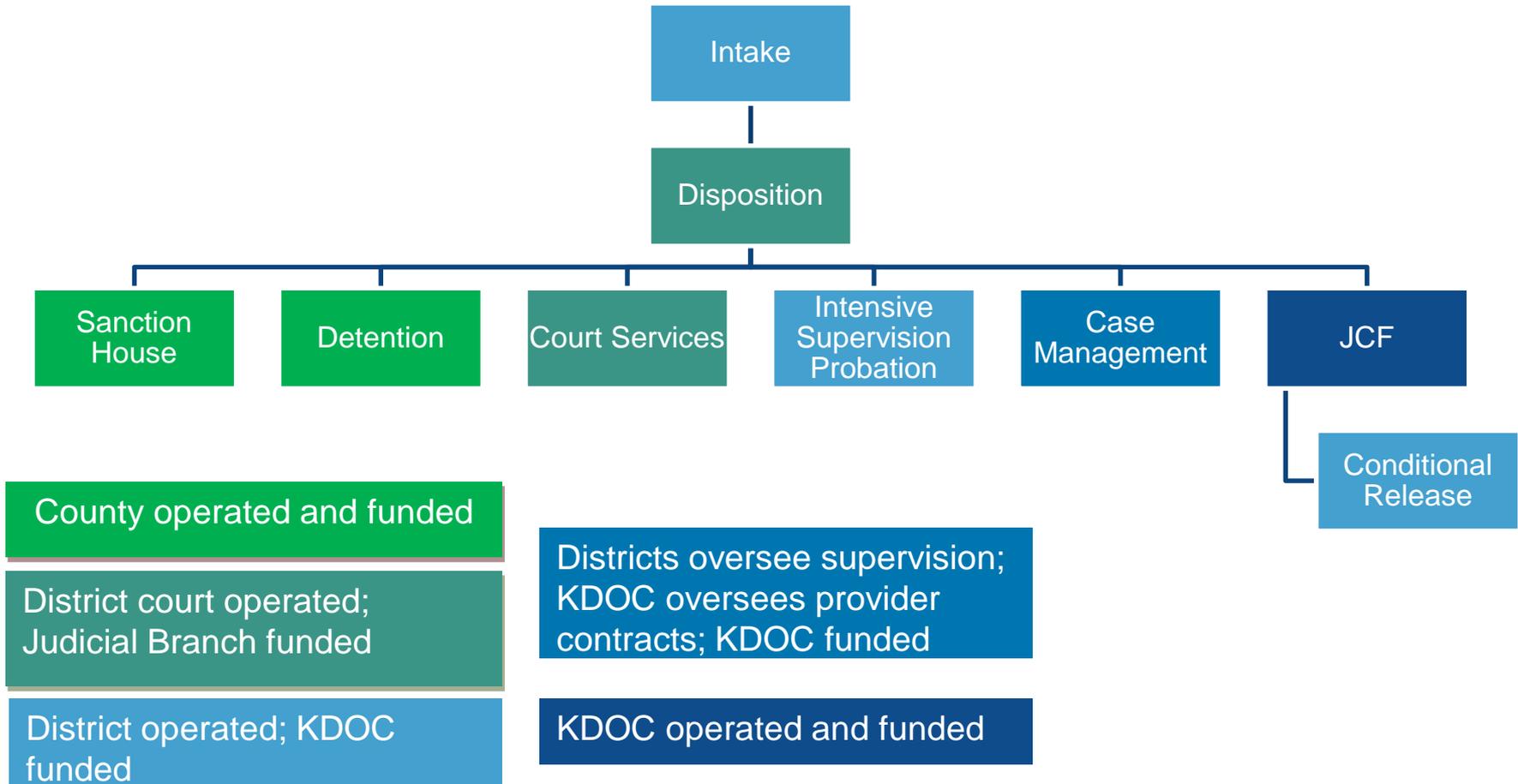
Areas in Need of Improvements

Insufficient collaboration across agencies to address youth's needs

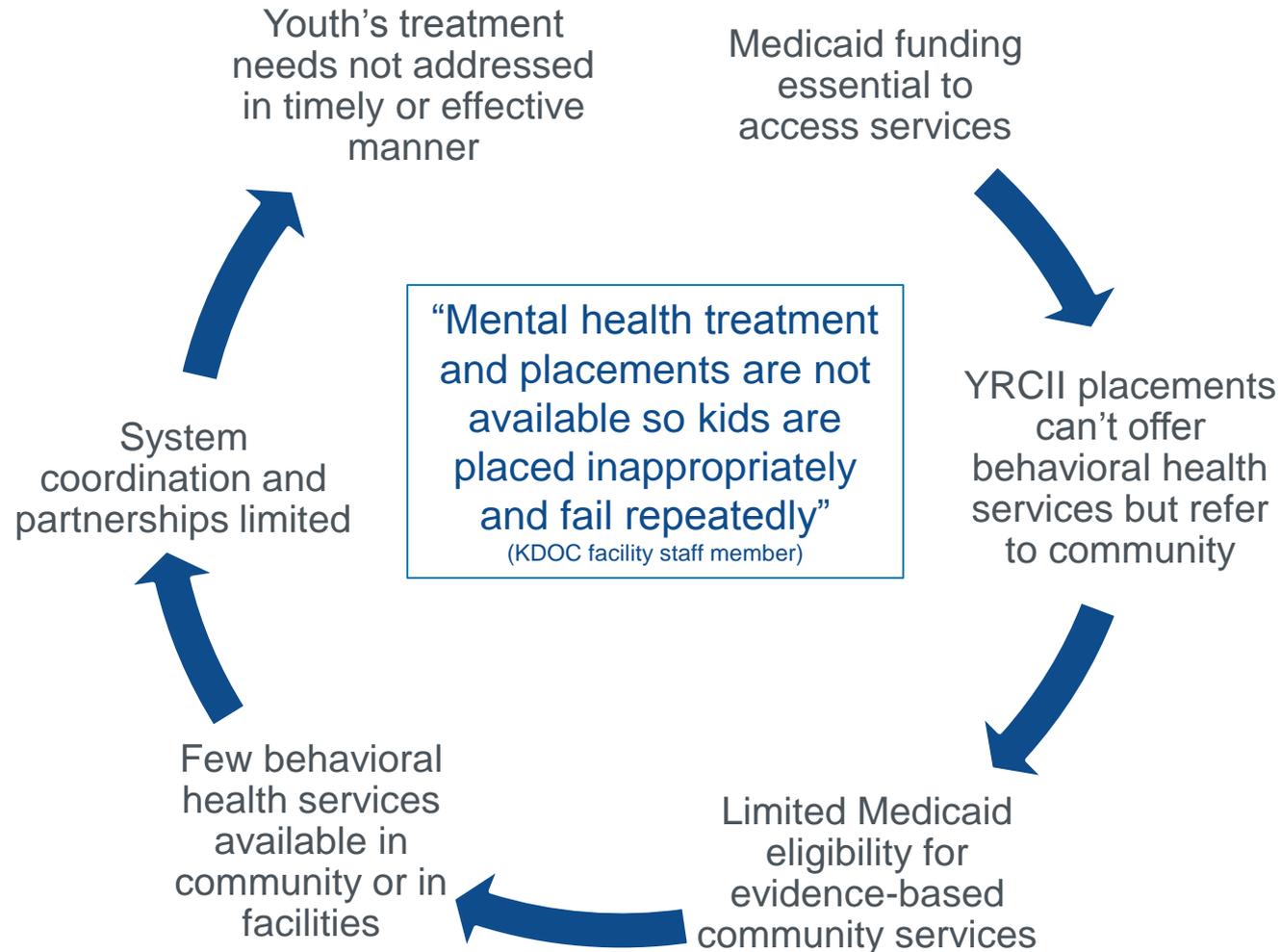
- The juvenile justice system structure is a barrier to consistent decision making, coordinated delivery of supervision/services, and resource efficiency
- There is a lack of accessible and high-quality treatment services for youth with mental and substance use disorders and limited agency collaboration
- Youth in case management placements may not be enrolled in school in timely manner, stay in school, and make reasonable academic progress

Complex System Structure a Barrier to Collaboration and Efficiency

KDOC, court services, and district staff all cite inconsistent coordination with each other on supervision, placement, service, reentry, and revocation decisions



Limited Availability of Mental Health and Substance Use Services



Local Schools May Not be Receptive to Enrolling Youth in KDOC Custody

YRCIIs and District Staff Cite:

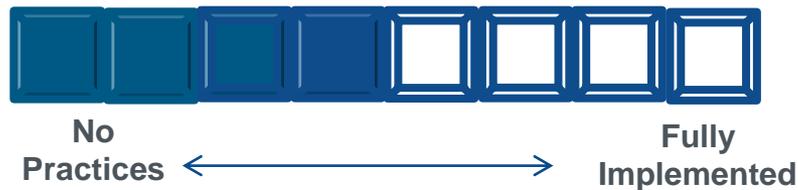
- Youth are not enrolled in a timely fashion in local schools
- Schools records are not shared
- Credits are not fully transferred
- Youth are disproportionately suspended or expelled
- Enrollment/academic progress data is not collected for youth in YRCIIs

“Getting education records can take 2 to 3 months. It creates real problems when you think a youth will be released to one district and then there is a last minute change.” (YRCII provider staff member)

“If a youth is suspended or expelled they can’t go to school anywhere. We try to find them a placement with an on-line school.” (YRCII provider staff member)

Steps Taken Toward a Developmentally-Appropriate Approach

Principle 4: Policies and Practices Developmentally Appropriate



- ✓ Developed visitation policies that enable greater family involvement
- ✓ ISP officers required to make monthly contact with families
- ✓ Provides training for ISP officers in techniques such as Motivational Interviewing for engaging youth and promoting positive behaviors

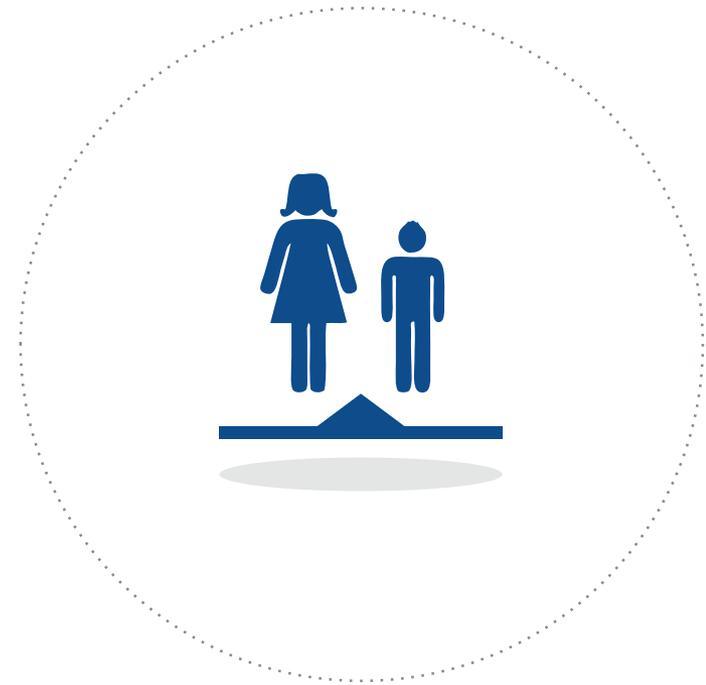
Areas in Need of Improvements

Lack of consistent , developmentally appropriate approach to supervision, services, and technical violations

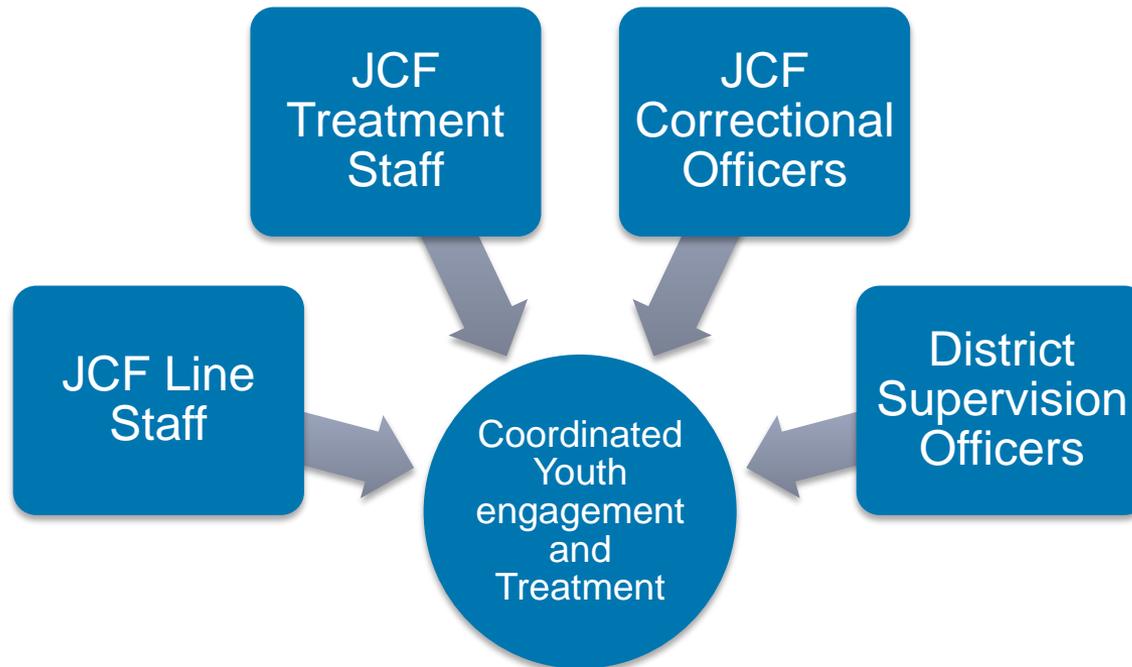
- Youth and families are not consistently a part of case planning decisions, reentry planning, and treatment
- KDOC secure facility staff are committed to rehabilitation but cite a lack of collaboration and shared training as obstacles to effective treatment
- Some districts do not supervise youth with officers who only have youth on their caseloads and are appropriately trained on how to promote positive youth behavior change
- Kansas lacks a statewide graduated response policy, and thus, technical violations are significant driver of KDOC custody and residential placements

Families Are Not Consistently Engaged

- KDOC does not provide family therapy to youth in JCFs
- Families are not regularly involved in case planning meetings, treatment progress review meetings, or to develop reentry plans



Lack of Collaboration amongst JCF and District Staff on Youth's Treatment



All key parties to youth's successful treatment and reentry do not receive the same training on how to advance youth's treatment goals or engage in regular team meetings

"Program staff teach and try to change but JCOs see their role as discipline. They say my job is to consequence and your job is to change." (KDOC facility staff member)

Lack of Graduated Responses to Technical Violations

23%

of all admissions to JCFs in 2011 were due to a technical violation of conditional release

22%

of all youth released from a JCF in 2011 were reincarcerated within three years due to a technical violation of conditional release

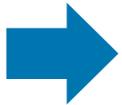
Court service and ISP violators are also likely to comprise a significant proportion of the JCF population

Disproportionate reliance on KDOC custody and expensive residential placements as a response to technical violations

Overview

Background and Overview of Assessment

Findings



Recommendations

Key Recommendations

High recidivism rates but significant opportunities for improvement

1

KDOC should establish **specific metrics and related policy/practice requirements** for district block grants and service provider contracts to ensure that youth's needs are assessed and effectively addressed.

2

KDOC should develop more regular and sophisticated **data collection processes** to hold itself, districts, and providers accountable for implementing high-quality services and improving youth outcomes.

3

Policymakers should establish **statewide criteria** for matching youth with the appropriate level of supervision and services and invest in **evidence-based community services**.

Strengthen Requirements for District Block Grants

Key changes for district block grants

1. Identify and use a **risk screening tool** at intake and develop guidelines to divert low-risk youth
2. Conduct YLS **assessments every six months** for all youth
3. Share mental health **screening results** with court services and/or allow court services view access to JJIAMS
4. Develop and use a standard **case planning tool** to match youth to services based on their YLS results
5. Develop and use a **service matrix** to determine appropriate case management placements so resources are used efficiently
6. Require that a youth's **default reentry plan is to return home** unless certain risk/need criteria are met and written approval is given by KDOC
7. Hold regular **treatment team meetings** with facility line and treatment staff, facility and district supervision officers, and families
8. Hold a **mandatory reentry planning meeting** with youth and families 30-60 days prior to release
9. Develop and use a statewide **graduated response matrix** to match appropriate sanctions to youth's risk level and severity of their behaviors

Strengthen Requirements for Service Provider Contracts

Key changes for provider contracts

1. Demonstrate that services provided are **based on what research has shown works** to reduce recidivism
2. Document a **program framework** that specifies the population served, expected outcomes, service intensity, and quality assurance
3. Accept for admission only youth whose risks and needs match this documented **referral criteria**
4. Maintain **average lengths of stay** that adhere to treatment “dosage” criteria
5. KDOC should identify risk/need criteria for LOS adjustments and establish a formal **approval process**, with KDOC having final LOS decision-making authority
6. Track and **report data** on admissions, service delivery, and program completions/failures in an electronic management system

Improve Data Collection Processes

Changes to KDOC data practices

1. Identify **key data points** to measure program quality and youth outcomes for case management contractors and district block grants
2. Assess the quality of JCF and case management services using a **validated service quality assessment tool** (e.g. SPEP or CPC)
3. Maintain **contracts** with only providers that rate as high quality
4. Measure **re-adjudication**, re-incarceration, and technical violation rates for all youth in custody and on ISP
5. Measure **school enrollment and outcomes** for all youth, specifically those on case management and ISP
6. Analyze recidivism and other outcome data **by youth's risk level**, youth demographics, facility/provider, and lengths of stay
7. Establish separate annual **data review** and improvement/corrective action processes with KDOC staff, service providers, and districts

Establish Statewide Criteria for the Efficient Use of Supervision and Services

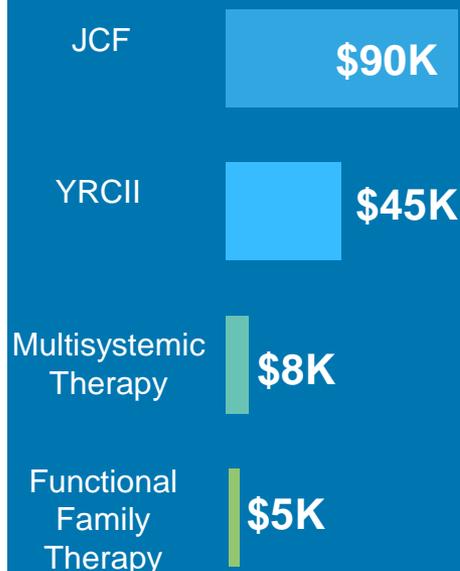
Policy and funding changes to use supervision resources more efficiently

1. Establish a cohesive vision for Kansas' juvenile justice system and identify the **governance and funding structure** that best supports it
2. Require that all youth receive a **risk assessment prior to disposition** and that the results are shared with the court
3. Establish guidelines for the **use of court services probation, ISP, case management, and JCFs** based on offense severity and assessed risk level
4. Restrict the population of youth eligible for admission to JCFs to primarily include **youth who commit felony/violent offenses**
5. Align **minimum and maximum required LOS** with the average time needed to accomplish treatment goals and use resources most efficiently, and **give KDOC authority** to adjust LOS for most youth based on objective criteria

Invest in Evidence-Based Community Services

Policy and funding changes to use service resources more efficiently

Average Annual Cost per Youth



1. Consider how existing resources used for YRCIIs (\$16 million) **can be most efficiently allocated** to develop evidence-based programs in the community that reduce recidivism and keep youth close to home
2. Reinvest **savings** from reduced KDOC placements in competitive grants for districts to implement EBPs
3. Adjust the state **funding formula for district block grants** so districts are incentivized to establish EBPs that serve as alternatives to placements
4. Require that youth receive a **validated behavioral health assessment** prior to disposition when warranted
5. Amend the **state Medicaid plan** to cover more community-based, evidence-based behavioral health services

Looking Ahead

Over the next few months, the CSG Justice Center will support KDOC to:

Form a working group of KDOC staff and other system stakeholders

Establish an action plan to advance key policy and practice changes

Determine highest priority and most viable recommendations and best way to achieve them

Leverage resources and technical assistance from Models for Change

Join our distribution list to receive CSG Justice Center project updates!

www.csgjusticecenter.org/subscribe

Additional Resources

Core Principles:

<http://csgjusticecenter.org/youth/publications/juvenile-justice-white-paper/>

Juvenile Reentry and Resources:

<http://csgjusticecenter.org/youth/juvenile-reentry/>

Juvenile Justice Project:

<http://csgjusticecenter.org/youth/juvenile-justice-project/>

For more information, contact Josh Weber (jweber@csg.org)

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