



JBCSSD REGIONS Juvenile Justice Process and Outcome Evaluation

JJPOC Meeting, October 19, 2023

Background Information

REGIONS

Legislation enacted in Connecticut during the 2017 and 2018 legislative sessions transferred juvenile justice functions under the purview of the Department of Children and Families (DCF) to the Judicial Branch Court Support Services Division (JBCSSD) and made substantial changes to the juvenile justice system. The legislation required the JBCSSD to develop a continuum of community-based programs for the reduction of juvenile delinquency and to establish or contract to establish secure and staff-secure residential facilities to serve juveniles placed on probation supervision with residential placement (PWP) [C.G.S. 46b-121 k]. The process includes the following stages: 1) a risk assessment and predisposition study by Juvenile Probation, 2) a clinical/behavioral residential evaluation by the Court Clinic, 3) treatment at a secure or staff-secure residential treatment program, and 4) re-entry from the residential treatment program to the community with probation supervision.

Under Section 8 of Public Act 18–31, *An Act Concerning the Recommendations of the Juvenile Justice Policy and Oversight Committee and Concerning the Transfer of Juvenile Services from the Department of Children and Families to the Court Support Services Division of the Judicial Branch*, JBCSSD assumed legal authority over any child committed to DCF as delinquent effective July 1, 2018. As a result of these changes and to effectively meet the new mandate, the JBCSSD created a residential treatment program model for juvenile justice system-involved adolescents who exhibit complex needs and are most at risk of recidivating. The new model is referred to as the **Re-Entry, Goal-oriented, Individualized, Opportunity to Nurture Success (REGIONS)**, which offers the highest level of care in a continuum of community-based and residential programs available through agreements the Judicial Branch holds with contracted providers or operates directly.

Juvenile Justice Process and Outcome Evaluation

Through a competitive request-for-proposal (RFP) process, Development Services Group, Inc. (DSG), was awarded a contract in November 2020 to conduct a 3-year process and outcome evaluation (JJPOE) of the implementation of this new system. Upon award, DSG produced a workplan that JBCSSD approved. DSG executed the workplan and submitted a draft interim process evaluation report on Oct. 15, 2021. After incorporating JBCSSD's feedback, DSG submitted the final interim process evaluation report on Nov. 15, 2021. The draft final process and outcome evaluation report was submitted on July 10, 2023, and presented to JBCSSD on Aug. 31, 2023. The process evaluation describes DSG's assessment of the implementation fidelity of the three new system components (evaluation, residential treatment, and community supervision) and how well each component aligns with best practices. To accomplish the assessment and prepare the report, DSG used a mixed-methods approach, combining qualitative and quantitative

data collection, analysis, and interpretation, and the expert judgment of its highly experienced team. The outcome evaluation used inferential statistics to compare outcomes for REGIONS youths with a matched group of youths on probation.

Court Clinic

The goal of the **Court Clinic** is to provide the Court with timely, relevant, and accurate clinical and forensic information to assist the judge in dispositional planning.

A **clinical coordinator** is a licensed mental health professional with specialized forensic training to provide consultation to the Superior Court for Juvenile Matters on issues related to delinquency and behavioral/mental health. Clinical coordinators address referral questions received from the Superior Court for Juvenile Matters. They are employed by the JBCSSD and cover all 11 Superior Court for Juvenile Matters locations.

JBCSSD Policy and Procedure 6.116 (Clinical and Educational Services, Service Memorandum for Residential Placement) requires that the clinical coordinator provide the Court with a **service memorandum for residential placement** in response to an order and a completed referral packet.

REGIONS Residential Treatment

At the time of the JJPOE, there were seven secure and staff-secure residential treatment programs (six for boys, and one for girls).

JJPOE Methodology

PROCESS EVALUATION

DSG reviewed audit reports and JBCSSD policies and procedures, analyzed data in state databases, reviewed youths' files, conducted in-person and remote interviews and focus groups, observed treatment groups, and conversed with other REGIONS staff. DSG also met regularly with JBCSSD administrators and leadership.

DSG staff and consultants conducted site visits to three courthouses and seven REGIONS residential treatment programs (see Table 1). During these site visits, we obtained information through interviews, focus groups, and observations. We also conducted follow-up site visits to some of the residential treatment programs to observe additional treatment groups.

Interviews and Focus Groups

The final report reflects the input, opinions, and perspectives of about 200 individuals involved in the new post-adjudicatory juvenile justice process. Through in-person and remote interviews and focus groups, we were able to discuss Court Clinic, residential treatment, re-entry, and probation metrics with the following justice process decision-makers, staff, and stakeholders: 17 Court Clinic staff (clinical coordinators and Court Clinic auditors), 49 Court staff and attorneys (probation officers, attorneys, judges), 75 REGIONS treatment program staff (juvenile detention officers/youth mentors, reintegration mentors, clinical staff, superintendents, directors, supervisors, managers, rehabilitation therapists, teachers, continuous quality improvement [CQI] consultants, social workers), 10 JBCSSD central office administrators, 17 REGIONS youths, 7 parents/guardians, and 12 community-based service providers. Also, DSG engaged in several ad

hoc discussions with stakeholders (outside of these scheduled interviews) to provide feedback.

Table 1. DSG Site Visits

Date	Site Visit	Number of DSG Evaluators Onsite
July 19, 2021	Hartford REGIONS Secure Treatment Program	5
July 20, 2021	Hartford Community Partners in Action (CPA) REGIONS Staff-Secure Treatment Program	5
July 20 and 23, 2021	Hamden CPA REGIONS Secure Treatment Program	5
July 21 and 22, 2021	Bridgeport REGIONS Secure Treatment Program	2
July 21 and 22, 2021	Milford Boys and Girls Village REGIONS Staff-Secure Treatment Program	3
Aug. 11, 2021	Bridgeport Superior Court for Juvenile Matters	2
Aug. 12, 2021	Hartford Superior Court for Juvenile Matters	2
May 5, 2022	Willimantic Superior Court for Juvenile Matters	2
May 25, 2022	Journey House, Natchaug Hospital REGIONS Limited-Secure Treatment Program	3
May 26, 2022	Waterbury Connecticut Junior Republic (CJR) REGIONS Staff-Secure Treatment Program	3
July 18, 2022	Hamden CPA REGIONS Secure Treatment Program	1
July 19, 2022	Bridgeport REGIONS Secure Treatment Program	1
July 20, 2022	Hartford REGIONS Secure Treatment Program	1
July 21, 2022	Hartford CPA REGIONS Staff-Secure Treatment Program	1
May 16, 2023	Hartford CPA REGIONS Staff-Secure Treatment Program	1
May 17, 2023	Hamden CPA REGIONS Secure Treatment Program	2
May 17, 2023	New Haven Superior Court for Juvenile Matters	2
May 17, 2023	Youth Advocate Program's (YAP's) Credible Messengers Program, New Haven	1
May 18, 2023	YAP Credible Messengers Program, Bridgeport	1
May 18, 2023	Linking Youth to Natural Communities (LYNC) Program	1

Note: We originally planned to visit the New Haven Superior Court for Juvenile Matters on Aug. 10, 2021, but several staff members tested positive for COVID-19, so this site visit was changed to remote interviews and focus groups.

Treatment Group Observations

From July 2021 through July 2022, DSG residential treatment experts observed Dialectical Behavior Therapy (DBT) groups at each of the seven residential programs. In four of the programs (Bridgeport Secure, Hartford Secure, Hartford Staff-Secure, and Hamden Secure), groups were observed twice—once in July 2021 and again in July 2022. Each group was observed by one or two members of the DSG project team, who followed an established observation protocol during the group sessions. This protocol included observing the entire group, sitting in an unobtrusive location within the group's sitting area, and not participating in the group. A group observation form was developed and used to record information about the group process, facilitator skills, group activities, and participant engagement.

Policy Review

DSG staff reviewed all JBCSSD Policy and Procedures documents that they could readily locate, and we worked with JBCSSD to find additional policies that were not easily obtainable. As

appropriate, we measured achievement of selected metrics by determining the extent to which staff complied with standards established in JBCSSD policies.

Analysis of Data in State Databases

DSG requested, received, and analyzed data from both the Case Management Information System (CMIS) and the Contractor Data Collection System (CDCS).

Review of Service Memos

DSG requested all REGIONS service memos from Jan. 1, 2019, through Sept. 8, 2022, and received 223 memos from JBCSSD completed by 17 clinical coordinators from 11 Courts. DSG reviewed each of these memos to assess several of the Court Clinic metrics.

File Review to Address Metrics That Examine Information From More Than One Tool

Several metrics required that the DSG team review and compare files of information from more than one tool or instrument. To select files, we identified a random sample of 40 youths from each of the seven residential programs. We requested the following files for this sample: a) PrediCT (juvenile probation delinquency risk assessment) report, b) SAVRY (violence risk assessment) report, c) clinical coordinator service memo, d) initial integrated treatment plan (ITP), e) initial START:AV (assessment of short-term treatment progress), f) Juvenile Probation Assessment/Case Plan, and g) final START:AV.

Review of Discharge Summaries

To assess some of the discharge metrics and the reentry and probation metrics, DSG requested 1 year of discharge summaries. We received 75 discharge summaries from six of the seven residential programs for youths who discharged from a REGIONS residential program in 2022. The 75 discharge summaries were for youths admitted to a REGIONS program between April 15, 2021, and Dec. 22, 2022.

Review of Other Sources

Several other sources were used to complete the process evaluation, including Court Clinic audit reports, residential treatment audit reports, findings from a report summarizing the responses to a Performance-based Standards (PbS) Youth Reentry Survey, and findings from a focus group of REGIONS youths that JBCSSD conducted to obtain the youths' feedback on barriers to re-entry, needs and experiences, and gaps in services.

OUTCOME EVALUATION

Outcome studies evaluate the impact of an intervention on a group exposed to the intervention relative to a group not exposed to the intervention. DSG's outcome evaluation analyses used coarsened exact matching (CEM) to compare REGIONS youths with similar youths who were placed on probation supervision during the same period of observation but did not attend REGIONS. The final sample included 115 REGIONS youths and 279 probation youths. We compared the differences between the two groups related to new arrests, new detention stays, and new adjudications within 1 and within 2 years.