

DECEMBER 2019 BOARD UPDATE

ADVOCATES/PROGRAMS VISITED

- 1. Kevin Evans, Western Plains Youth and Family Services
- 2. SHIELD tour
- 3. Jennifer Goodrich, Pivot
- 4. Dr. Ellen Harwell
- 5. Served lunch at Street School Thanksgiving

PUBLIC RELATIONS

- 1. Ribbon cutting for the Tulsa Family Justice Center
- 2. OCCY Pace event
- 3. Spoke to OJA's Emerging Leader's Task Force
- 4. Fields & Futures Vision Awards
- 5. OK Autism Center Foundation Annual Lunch
- 6. Resilience showing with Dr. Chan Hellman

Executive, Judicial, & Legislative

- 1. Maria Maule, OHCA
- 2. Meeting with OHCA consultants
- 3. Joint House & Senate budget hearing
- 4. Chase Bowker, Governor Stitt's office
- 5. JJOAC meeting
- 6. Human Services & Early Childhood Initiatives Director's meeting
- 7. Director Scott Crow, DOC

OTHERS

- 1. Run the Streets OKC meeting
- 2. Joint staff meeting with OKDHS
- 3. Public Strategies Research Conference
- 4. RESTORE task force meeting

State of Oklahoma

OFFICE OF JUVENILE AFFAIRS

Residential Placement Support

Carol Miller, Deputy Director Residential Placement Support

Board Report – December 2019

November 1st-30th activity

Releases (6 total) from Secure Care November 2019 Intakes (3) for Secure Care

Paroles: COJC – 1, SWOJC – 0 Intakes COJC – 1, SWOJC – 2

Court Release: COJC- 3 (2 to DDSD Adult Independent Living, 1 to Independent Living PIVOT), SWOJC – 1 Step Down – COJC – 0, SWOJC – 1 stepdown to Level E

Youth Activities in the Community

COJC -

11/13/19 – 4 residents attended Speakers Night at the Fairview Baptist Church Oklahoma City

11/14/19 – 4 residents attended Black Violin Performance at OCCC Performing Arts Center OKC

11/16/19 - 4 residents attended Fellowship of Christian Athletes pre game team building meeting with Representative John Talley and OSU Football game Stillwater.

11/20/19 – 1 resident presented at OJA Board Meeting for OYAC

Attended religious services in the community, Staff pass to the Dept. Motor Vehicles for State ID card and Drivers permit test, shopping in Shawnee for clothes before release to Independent Living. SWOJC –

11/4/19 – Residents assisted with the Frederick Rotary dinner

11/17/19 – 6 residents attended church services at Indiahoma Baptist Church

11/21/19 – 2 residents performed community service at the Frederick Food Bank

Central Oklahoma Juvenile Center (COJC) facility events

Shawnee YMCA YOGA instructors visit COJC to prepare for YOGA class implementation Man Up Program at COJC continues to meet on every Weds. Nights with Lt Cubit, volunteer activities, Bible study, NA group, Rock Teen Reunion, church services.

Southwest Oklahoma Juvenile Center (SWOJC) facility events

Volunteer activities, Torch mentors, NA Group, Bible study and church services.

OJA/DMHSAS/DHS Core activities

Federation of Families is actively engaged with 15 youth and their families providing visitation, family support and wrap around services in preparation for reentry. One COJC youth who required inpatient level of care was staffed with DMHSAS, OHCA and COJC resulting in a successful inpatient placement. OJA youth who have been helped through this collaboration is in the double digits and continues to grow. The work and the partnerships continue to expand.

Division Leadership Activities

During the month of November, I presented a training webinar on the topic of Residential Secure Care Facility overview, facilitated mock ACA/ PREA audits at SWOJC and COJC, attended Next Generation fixtures meeting, reviewed Performance based Standards outcomes from the October data collection month and initiated the kickoff for the January 2020 Man Up Program II.

Janelle Bretten, Senior Project Researcher & Planner

Board Report-December-2019

Pregnancy Assistance Fund (PAF) Grant

- Since July 1, we have received 69 referrals.
- We continue to provide Youth Services Agencies with technical assistance and multiple sites are doing well with increased referrals and building their parenting programs.
- Linda did a site visit with the Nurturing Parents facilitator at Southwest Youth and Family Services in Chickasha.

Justice Assistance Grant Board (JAG)

 Assigned to be designee and attended meeting 11/13/19, which included reviewing the Local Law Enforcement (LLE) grant applications.

o Mental Health Services for OK County Juvenile Justice Involved Youth

 Dr. Shawler and I attended meeting at Arnall Family Foundation to discuss barriers and gaps in mental health services for justice involved youth in Oklahoma County. District Judge Pemberton was present, as well as representatives from DHS and ODMHSAS. Arnall Family Foundation looking at ways to support efforts in OK County.

Governor's Interagency Council on Homelessness (GICH)

- Attended GICH main Executive Team meeting and assisted with developing agenda for next GICH main meeting. Reported on current work being done in the Education, Employment and Training subcommittee.
- Attended website administrator's training for the GICH website.

Systems of Care State Advisory Team

 Attended monthly meeting. Agenda included excellent training entitled the "Trauma Continuum" presented by trainer/consultant Cheryl Step of Creating Resilience.

Pace Center for Girls

- O Worked with OCCY in planning visit by Mary Marx, CEO of the Pace Center for Girls. Ms. Marx provided presentation about the success of this program in Florida. Pace Center for Girls is a holistic, gender-specific, strength-based, and trauma informed prevention program model with proven outcomes in preventing girls from entering the juvenile justice system. Pace has 21 centers in Florida and recently expanded to a location in Georgia. Will continue conversations with Ms. Marx and explore potential options for Oklahoma.
- Region VI Head Start and Early Head Start: "Preparing and Planning to Address the Opioid Crisis and Substance Use Disorders: Creating a Path Forward to Support Head Start Children, Families, and Staff at the Program and State Levels"
 - O Invited to be member of state team to attend two day regional meeting that focused on understanding how Early Head Start (EHS), Head Start (HS), child care, and home visiting programs can help young children and their families who are impacted by opioid use disorders and other substance use disorders. Our State Team developed action plan to increase awareness about HS and EHS programs and services throughout Oklahoma and connecting these providers with the Systems of Care Coalitions, as well as connect with DHS and OJA programs.

Youth Level of Service Case Management Inventory

Conducted YLS/CMI annual refresher training for District 3 and District 5.

Janelle Bretten, Senior Project Researcher & Planner

- Held group meeting with YLS/CMI committee and discussed possible modifications to the scoring guide and our two-day training presentation. Working with our new YLS/CMI trainers to schedule the next 2-day certification training.
- o Comanche County JB now has staff certified in the YLS/CMI.

OJJDP Webinar: Trauma and Brain Science

Participated in webinar and shared with OJA Training Director to share with staff. Webinar
addressed how brain science explains the quality of elasticity in brain function. Described how we
can use this quality to develop new behaviors and thinking patterns that help us build resilience and
wellness.



DECEMBER 2019 BOARD UPDATE

OJA Operations

- 1. SWOJC
- 2. Meeting on Oklahoma County Detention contract with Oklahoma County staff
- 3. District 2 meeting
- 4. Resilience film with District 7 hosted by the First Lady
- 5. Meeting with Robert Cornelius
- 6. Administrative Transfer Hearing
- 7. Mustang Treatment Center

Partner Engagement

- 1. Served at Street School Thanksgiving lunch
- 2. Opening Celebration of Tulsa County Family Justice Center
- 3. SHIELD tour
- 4. Attended OCCY's PACE event
- 5. YWCA Women Who Care lunch
- 6. Met with OJDA regarding the State Plan for Detention
- 7. Joint staff meeting with OKDHS staff
- 8. DAC Kathryn Brewer

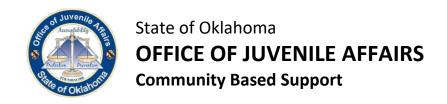
Legislative & Executive

- 1. OJA Joint Legislative Budget Hearing
- 2. Toured Mustang Treatment Center with Representative Brian Hill
- 3. Senator Paul Rosino
- 4. Senator Kay Floyd
- 5. Representative Chris Kannady
- 6. Representative Mark Lawson

Judicial

- 1. Attended JJOAC meeting
- 2. Judge Steve Stice
- 3. ADA Kristi Johnson





Shelley Waller, Deputy Director Board Report for November 20, 2019

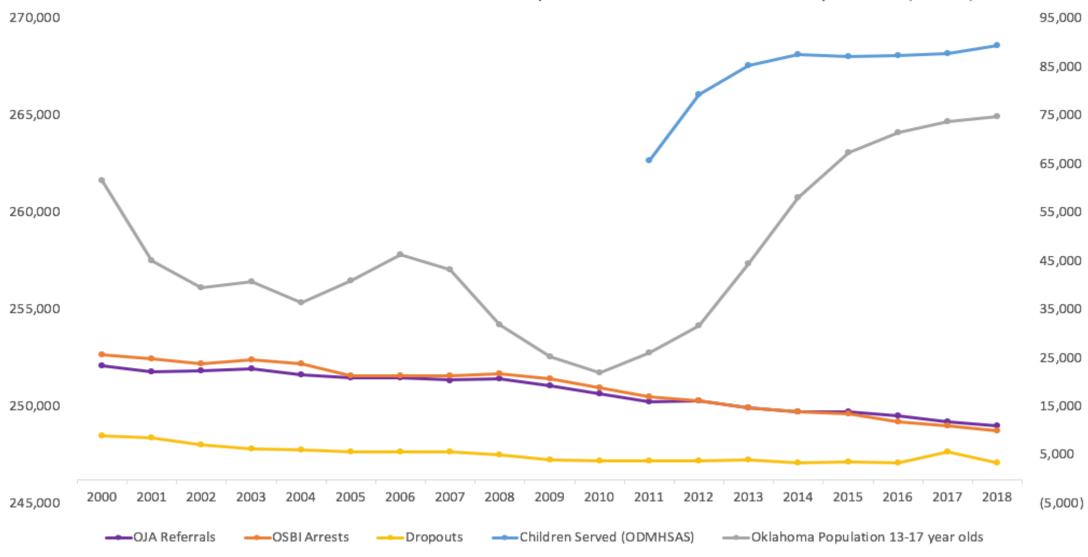
Monthly Contacts and Activities:

- Represented the agency at two (2) memorial services for co-workers whose parent had passed away.
- Traveled to Tulsa and attended the ribbon cutting ceremony for the new Tulsa Family Justice Center; served Thanksgiving dinner to the students and their families at Street School, and toured the SHIELD group home at Laura Dester.
- Attended a presentation by Pace Centers on At Risk Girls and Young Women at MetroTech.
- Attended the Be a Neighbor information gathering and meeting at the Supreme Court of Oklahoma in Oklahoma City.
- Attended the YWCA Women Who Care, Share luncheon at the Western Heritage Museum in Oklahoma City.
- Continued research on Performance Based Standards (PbS) and how we could utilize PbS in community/group home settings. Currently reviewing the Standards.
- Continued work with Leadership team members for the final rewrite of the State Plan for the Establishment of Juvenile Detention Centers.
- Held meeting with the OJDA Sub-Committee for the State Plan to gain input and continued collaboration with the membership.
- o Three (3) Districts held their quarterly meeting and training for staff.
- Attended and participated in the OJA & DHS Joint Agency Leadership Meeting.
- Presented, along with other Leadership team members, at the District 2 JSU meeting held in Claremore.
- o Attended the Resilience Showing and Panel discussion held in Durant.
- Attended a meeting with a provider to explore future options for OJA custody youth.
- Executive Placement Staffing on four (4) youth and options available for potential placement.
- Visited Mustang Treatment Center (MTC) and met with the youth and staff.
- Continuing to work on a Telework Pilot Project in four (4) counties. Identifying barriers, implementation timelines and next steps. Termination of leases have been given.

> 80% of OJA youth had involvement with OKDHS child welfare (Based on FY2019 data match between DHS and OJA total population) > 60% of OJA youth had involvement with OKDHS child welfare (Based on FY2015 data match between DHS and OJA total population)

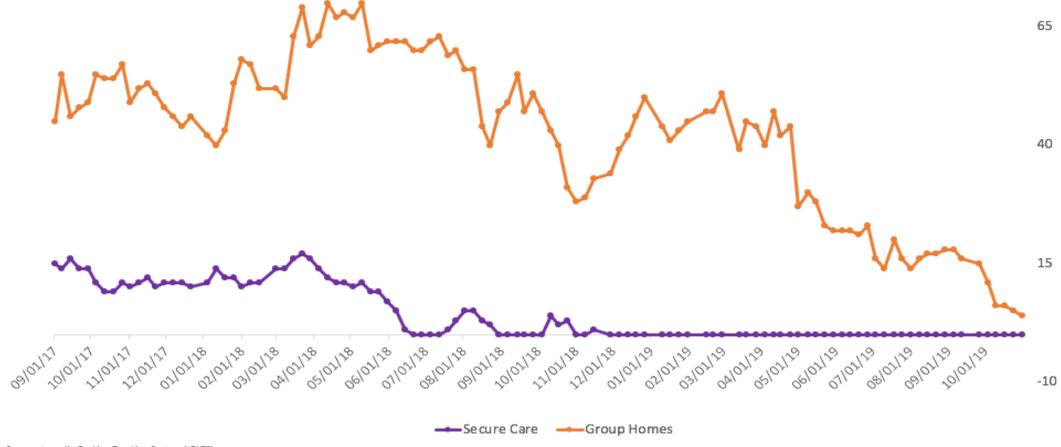
Source: Juvenile On-Line Tracking System (JOLTS)

Total OJA Referrals – Total OSBI Arrests – Dropouts - Oklahoma Juvenile Population (13-17)



^{**}OJA Referrals - Population: 14 to 19 years of age. - OSBI Total Arrests - Population: Under 10 to 17 years of age.

Source: OSBI FY2000-FY2018 Annual Reports - Juvenile On-Line Tracking System (JOLTS) - National Center for Juvenile Justice/US Census



Source: Juvenile On-Line Tracking System (JOLTS)

DRAFT FOR DISCUSSION PURPOSES ONLY



State Plan for the Establishment Of Juvenile Detention Services

State Plan for the Establishment Of Juvenile Detention Services

Resolution

WHEREAS, the Board of Juvenile Affairs is authorized by law to develop, adopt and implement a plan for the establishment of detention facilities and services known as the State Plan for the Establishment of Juvenile Detention Services (State Plan); and

WHEREAS, the State Plan may be amended or modified only by the Board of Juvenile Affairs as necessary and appropriate;

THEREFORE, BE IT RESOLVED, that the Board has not and will not delegate its authority to any person to act on its behalf or to make representations as to the Board's intent in determining the number or geographic location of beds to be included in the State Plan.

History

Concern over the negative effects of incarcerating juveniles in adult jail facilities led the State of Oklahoma to begin to consider other options. Plans to remove juveniles from these adult facilities began in the 1970's. In 1978, then Governor David Boren, directed the Criminal Justice Services Division of the Department of Economic and Community Affairs to conduct a study of the State's detention practices for juveniles.

Court Related and Community Services, a branch of the Department of Human Services, participated directly in the study by providing all necessary information relating to the practice of placing juveniles in locked facilities. The outcomes of the study documented that in 1979, seven thousand eight hundred (7,800) juveniles were confined in locked facilities. Four thousand one hundred fourteen (4,114) or almost fifty-three percent (53%) of these juveniles were held in adult facilities. Data collected from the same geographic region in 1980 indicated that rural admissions of juveniles into adult jail facilities had increased to four thousand nine hundred (4,900). Incidents of abuse, mistreatment and loss of life by suicide increased with the rise of incarceration.

The Oklahoma Legislature passed reform legislation in 1980 that prohibited the jailing on juveniles who were alleged to be Deprived or In Need of Supervision. The restrictions for the use of adult jails broadened in 1982 when the legislature mandated that "after July 1, 1985, no child may be detained in any jail, adult lockup or other adult detention facility." Statutes gave a mandate to the Oklahoma Commission of Human Services in 1982 to "develop and implement a plan for juvenile detention services." The Commission approved the initial "Plan for Juvenile Detention Services" in February 1984. That document is the original "State Plan for the Establishment of Juvenile Detention Services."

Further legislation extended the 1985 deadline to July 1, 1987. The legislature again extended the jail removal deadline, setting a new deadline for January 1, 1988. The State of Oklahoma met the January 1, 1988 deadline by establishing contracts with county governments to provide secure regional detention programs.

The original plan called for a system of short-term and full-service facilities. The two (2) short-term facilities were to hold juveniles up to five (5) days, at which time the juveniles would be released or transferred to a full-service facility. The five-day time frame was later changed to fifteen (15) judicial days. Short-term facilities were not required to provide educational or recreation services. Once a juvenile was moved to a full-service facility, a variety of services including education and recreation were then provided.

The 1985 revised State Plan for the Establishment of Juvenile Detention Services authorized up to four additional short-term detention facilities. However, the plan never came to fruition. The concept of short-term centers bringing juveniles into the full-service centers so that a full range of services could be provided seldom became a reality, based upon the fact that those full-service facilities were typically at full capacity. The lack of bed availability at full-service facilities, coupled with the fact that every juvenile is entitled to a full array of services upon admission to detention, precipitated the two existing short-term facilities to be funded so that services equivalent to those offered at full-service facilities could be provided. The State Plan was again modified in 1994. Additional secure detention services were added and the two short-term facilities were converted to full-service facilities.

Each of the full-service detention facilities, now commonly referred to as juvenile detention centers, is required to be certified by the Office of Juvenile Affairs, Office of Public Integrity (OPI). Juvenile detention centers must meet standards for certification promulgated by the Board of Juvenile Affairs, the body responsible for juvenile detention facilities and services. The standards shall include, but are not limited to, screening for detention, providing education, providing recreational and religious programming, and providing emergency medical care including dental and mental health care.

Transportation services are an integral part of the State Plan. Legislation was passed in 1994 directing county sheriffs, their designee, private contractors, or juvenile court officers to provide transportation services to and from secure detention for the purposes of admission, inter-facility transfer, discharge, medical or dental attention, court appearance or placement designated by the Office of Juvenile Affairs (OJA).

In 1997, the Board of Juvenile Affairs authorized the Office of Juvenile Affairs to explore the need for additional secure detention beds in North Central and South Central Oklahoma. OJA examined the need for additional detention beds and at the time it appeared that although there were geographical gaps, there was not a need for additional beds and no new detention facilities were built.

The State Plan for the Establishment of Juvenile Detention Services was updated and revised, again, in 2008 to reflect changes in trends and recommending changes such as enhancing the OJA high-risk transportation system or allowing the detention centers to receive the current reimbursement rate (\$12.00 per hour, mileage reimbursement and \$6.00 for meals) that would result in the juveniles being transported more efficiently, with greater cooperation and collaboration among the detention centers. The expansion of transportation needs never came to fruition and will be explored.

In 2008, the trends indicated a need to either expand the six (6) bed centers or add an additional two (2) more detention centers based on arrest data and the number of admissions to detention. This expansion did not occur as OJA began an effort to diligently educate local Judiciary, District Attorneys and law enforcement to reduce the numbers of youth inappropriately placed in secure juvenile detention centers. Although youth are placed in secure detention through a judge's court order, OJA has been more active and vocal in recommending youth not be placed in detention if they do not meet the statutorily defined criteria. These efforts have helped reduce the inappropriate placement of these youth in juvenile detention centers.

Other recommendations, in 2008, included placing the Youthful Offender population on separate pod/units within juvenile detention centers so that they would not be housed with younger, non-violent or less aggressive offenders. New legislation, in 2016, prohibited status offenders from being detained solely on a status offense or violations of a valid court order. This legislation, coupled with increased education of stakeholders, has led to a reduction of low-level offenders being detained and, therefore, the need for separation is not as imperative as in 2008. The federal JJDP Act, reauthorized in 2018, will require Oklahoma to revise Youthful Offender statute regarding their eligibility for placement into adult jails.

Youth with mental health needs have placed additional stress on the detention centers, the youth and their families. The ability for these centers to obtain adequate mental health screenings and services plays a vital role. For youth, who have been determined to have a serious mental health need, efforts began to screen these youth out of detention into more appropriate settings. In addition, funding has been approved by the Board of Juvenile Affairs to initiate mental health services for youth in detention centers. Appropriate referrals should be made for mental health services to include: in-home crisis management, inpatient mental health services and wrap around services for the youth and their family in the community.

Additionally, Oklahoma State Statue, 10A O.S. § 2-7-401, addresses the Juvenile Detention Improvement Revolving Fund. OJA continues to recommend the Legislature appropriate monies to allow for capital improvements to juvenile detention centers.

Oklahoma Law on Secure Detention

It is imperative to the people and the children of Oklahoma, that the use of secure detention for juveniles is utilized in accordance with Oklahoma law. When a child is taken into custody pursuant to the provisions of the Oklahoma Juvenile Code, the child shall be detained only if it is necessary to assure the appearance of the child in court or for the protection of the child or the public.

Lawful Use of Detention – Statutory Definitions

10A O.S. § 2-3-101(A)(B)

- "Secure detention" means the temporary care of juveniles who require secure custody in physically restricting facilities:
- a. while under the continuing jurisdiction of the court pending court disposition, or
- b. pending placement by the Office of Juvenile Affairs after adjudication;

Further:

No child shall be placed in secure detention unless:

- 1. The child is an escapee from any delinquent placement;
- 2. The child is a fugitive from another jurisdiction with a warrant on a delinquency charge or confirmation of delinquency charges by the home jurisdiction;
- 3. The child is seriously assaultive or destructive towards others or self;
- 4. The child is currently charged with any criminal offense that would constitute a felony if committed by an adult or a misdemeanor and:
 - a. is on probation or parole on a prior delinquent offense,
 - b. is on preadjudicatory community supervision, or
 - c. is currently on release status on a prior delinquent offense;
- 5. The child has willfully failed or there is reason to believe that the child will willfully fail to appear for juvenile court proceedings;
- 6. A warrant for the child has been issued on the basis that:
 - a. the child is absent from court-ordered placement without approval by the court,
 - b. the child is absent from designated placement by the Office of Juvenile Affairs without approval by the Office of Juvenile Affairs,
 - c. there is reason to believe the child will not remain at said placement, or

d. the child is subject to an administrative transfer or parole revocation proceeding

<u>Preadjudicatory or Predisposition Detention – 30 Day Limit</u>

10A O.S. § 2-3-101(B)

No preadjudicatory or predisposition detention or custody order shall remain in force and effect for more than thirty (30) days. The court, for good and sufficient cause shown, may extend the effective period of such an order for an additional period not to exceed sixty (60) days. If the child is being detained for the commission of a murder, the court may, if it is in the best interests of justice, extend the effective period of such an order an additional sixty (60) days.

Detention Review Hearing – Every 15 Days

10A O.S. § 2-3-101(A)(1)(b)

Whenever the court orders a child to be held in a juvenile detention facility, an order for secure detention shall remain in force and effect for not more than fifteen (15) days after such order. Upon an application of the district attorney and after a hearing on such application, the court, for good and sufficient cause shown, may extend the effective period of such an order for an additional period not to exceed fifteen (15) days after such hearing. The total period of preadjudicatory or predisposition shall not exceed the ninety-day limitation as specified in subparagraph a of this paragraph. The child shall be present at the hearing on the application for extension unless, as authorized and approved by the court, the attorney for the child is present at the hearing and the child is available to participate in the hearing via telephone conference communication. For the purpose of this paragraph, "telephone conference communication" means use of a telephone device that allows all parties, including the child, to hear and be heard by the other parties at the hearing. After the hearing, the court may order continued detention in a juvenile detention center, may order the child detained in an alternative to secure detention or may order the release of the child from detention.

Detention Review Via Telephone

10A O.S. § 2-3-101(A)(1)(b)

The child shall be present at the hearing on the application for extension unless, as authorized and approved by the court, the attorney for the child is present at the hearing and the child is available to participate in the hearing via telephone conference communication. For the purpose of this paragraph, "telephone conference communication" means use of a telephone device that allows all parties, including the child, to hear and be heard by the other parties at the hearing. After the hearing, the court may order continued detention in a juvenile detention center, may order the child detained in an alternative to secure detention or may order the release of the child from detention.

NOTE: Courts and detention centers are encouraged to use telephones, videoconferencing (ie. Skype, FaceTime) when available to facilitate detention review hearings. This use of technology to facilitate court reviews is not only allowed by law, it was a recommendation of in the BKD Performance Assessment of the Office of Juvenile Affairs. "Due to the advancements in technology capacity, speed and mobility, there are a number of technology improvements that could be implemented to help OJA run more efficiently and save employees time. In particular, OJA should explore options to utilize audio/video technology including applications in education, rehabilitation, monitoring and coordination with other system partners (courts, district attorneys, defenders, department of human services, etc.) (BKD Performance Assessment of the Office of Juvenile Affairs, Top 10 Recommendations, December 2018, p.3).

Priority Status/ "Bumping"

10A O.S. § 2-3-101(D)

Priority shall be given to the use of juvenile detention facilities for the detention of juvenile offenders through provisions requiring the removal from detention of a juvenile with a lower priority status if an empty detention bed is not available at the time of referral of a juvenile with a higher priority status and if the juvenile with a higher priority status would be more of a danger to the public than the juvenile with the lower priority status.

NOTE: Detention Centers are required to have a priority status list of its current residents to be completed at intake and entered into JOLTS V4. Designated staff with OJA and Juvenile Bureau shall use the priority list in case there is a need for the release of juveniles with lower priority status. This list should also be utilized for continual assessment of whether or not a juvenile needs to remain in detention. The priority level should be reviewed and updated at minimum of five (5) days following admittance. The priority status and procedures for determining when a juvenile shall be "bumped" should be addressed in all county to county contracts to ensure uniform compliance to all eligible youth.

Sanctions for Probation Violations- 5 DAYS

10A O.S. § 2-2-503 (A)(7)(f)(g)

- A. The following kinds of orders of disposition may be made in respect to children adjudicated in need of supervision or delinquent:
- 7. With respect to a child adjudicated a delinquent child, the court may:
- f. sanction detention in the residence of the child or facility designated by the Office of Juvenile Affairs or the juvenile bureau for such purpose for up to five (5) days, order weekend detention in a place other than a juvenile detention facility or shelter, tracking, or house arrest with electronic monitoring, and
- g. impose consequences, including detention as provided for in subparagraph f of this paragraph, for post adjudicatory violations of probation;

State Plan for Alternative Detention Services

The development and support of community-based alternatives to detention programs played an important role in the formulation of the State Plan. OJA is currently exploring the capability to expand funding for existing community-based alternatives, to include: attendant care, electronic monitoring and youth services shelter care.

Screening guidelines were adopted by the Senate Joint Resolution (SJR) 13 Judicial Oversight Committee for the Oklahoma Supreme Court in 1984. These screening guidelines are crucial to the success of the detention plan for both alternative detention services and secure detention. These guidelines are used in each of the seventy-three (73) non-metro counties and are provided to the four (4) metropolitan counties (Oklahoma, Tulsa, Comanche and Canadian) where screening is conducted by juvenile bureau operators, or their designees. When juveniles are screened at the time of their apprehension, a better determination of the appropriateness of detention alternatives can be made. Juveniles being screened for detention shall be administered a standardized and approved OJA detention screening.

When deemed appropriate, a "promise to appear" contract may be initiated by law enforcement to release the juvenile to his/her parents or other responsible adult who will assure that the juvenile appears for an intake interview with the OJA or the juvenile bureau.

Crisis Intervention Centers (CIC) are short-term holding facilities used for juveniles taken into custody by law enforcement for an alleged law violation and for whom detention is unavailable or inappropriate. Juveniles may be held in a CIC for a maximum of twenty-four (24) hours prior to being released to a parent, guardian, attorney or responsible adult. The juvenile and his/her parent are required to sign a release or a "promise to appear" as described above. CIC's are staff secure and are open twenty-four (24) hours a day, seven (7) days a week. CIC's are funded through the municipalities, who they contract with, and are no longer funded by the OJA. It could be beneficial to explore rates to fund additional preventative services, which could be implemented in existing community Intervention Centers. CIC's are currently located in Clinton, Enid, Muskogee, Oklahoma City and Tulsa.

Attendant care is a service designated to meet the needs of juveniles who require short-term supervision or crisis intervention. Attendant care must be authorized by the court and is administered in the local community. An attendant remains with the juvenile until the circumstances requiring the intervention no longer exists. This program has been ideal for alcohol and drug related offenses, juveniles who are flight risks, or juveniles who are exhibiting behaviors for which they would normally be returned home if a responsible adult could be located. Attendant care has worked well in smaller, rural areas and this is one of the community-based alternatives OJA would like to bring back into the array of services.

Electronic monitoring expands on the ability to account for the juvenile's whereabouts through the use of electronic equipment as well as a daily tracking schedule and itinerary. The use of an electronic monitor can be utilized as a condition of their release from detention or as an alternative to detention, ordered by the local Judge, during normal working hours. The use of electronic monitoring should be expanded, statewide, as an alternative to detention for youth who can be served in the community with added structure, accountability and services. The use of a universal assessment or screener could aid courts in determining potential candidates for this alternative.

Youth Service shelters are also used as alternatives to secure detention and provide structured, residential care to juveniles. Shelter programs provide around-the-clock staffing patterns and programming for crisis intervention, twenty-four (24) hours a day, seven (7) days a week. In a partnership with youth service agencies, OJA has been able to increase the use of these shelter beds with juvenile justice involved youth.

In certain rural areas, it may be determined that the best and most cost effective alternative is for OJA to provide enhanced transportation and/or law enforcement support either directly or by subcontracting with County Sheriffs.

These types of alternatives to detention play a vital role in the success in the State Plan by allowing certain youth to avoid admission or extended stays in a secure juvenile detention.

State Plan for Secure Detention Services

The focus of the State Plan is to establish an effective balance between detention alternatives and secure detention services, while providing a statewide transportation network for the purpose of admission, discharge, and the safe delivery of youth to treatment facilities. Throughout the state, alternative programs are in place (although they need to be enhanced) and secure juvenile detentions exist in strategic geographic locations. This system helps to ensure adequate protection of the public from those juveniles who are violent, aggressive, habitual offenders and, also, helps ensure that youth considered to be flight risks appear for their scheduled court hearings.

The appropriate use of detention and detention alternatives safeguards against further traumatizing youth who have encountered law enforcement. Oklahoma children have the highest rates of Adverse Childhood Experiences (ACEs) in the country. (*Tulsa World "Special Report: Oklahoma leads the nation in childhood trauma. How does this affect our state and what can we do?" July 8, 2019*). Children that present in the juvenile justice system typically present with high ACE scores. One night in secure detention is itself an ACE score. It is imperative to the mental and physical health of Oklahoma's children and their future that the use of secure detention is limited to the children that meet statutory requirements for detention and that detention stays are continuously assessed for appropriateness and are as brief as possible.

There will always be a percentage of Oklahoma youth who require secure detention services, OJA's hope is that these numbers continue to decrease across the State. Every effort has been made, and will continue to be made, to establish a statewide system that will be neither be quickly outgrown nor overbuilt. The State of Oklahoma in conjunction with local county governments is committed to a cost-effective detention system that serves the public interest and provides a safe, humane environment for the population for whom it is designed to serve.

In conjunction with OPI, surveys were sent throughout the State to Judges, District Attorneys and Assistant District Attorneys, OJA staff, County Commissioners, and juvenile detention operators. The responses indicate a need for more immediate mental health/substance abuse interventions and treatment, specialized detention beds, capital improvements, specialized training opportunities and enhanced assessments and screenings. Those who responded felt that the challenges to implementing alternatives to detention were the implementation costs, public safety concerns and the lack of community support.

Mental health needs increase the likelihood of detention and youth of color experiencing mental health difficulties are even more likely to be detained (White, C. 2016). It is imperative youth who have mental health service needs receive those services within a treatment setting. Additional research has determined those suffering from mental health issues are victimized when they are combined in a population with those who have committed offenses and who are not suffering from mental health issues. To address these needs, the Board of Juvenile Affairs has approved rates for counseling services for youth receiving detention services. As always, the length of stay in detention should be minimized so the youth can receive services in the community or the least restrictive setting possible. OJA will continue to collaborate and develop strategies through our partnerships with the Department of Mental Health and Substance Abuse Services to address identified needs.

Research has also shown youth who have been detained experience long term effects of that detainment. The incidents of suicide among detained youth is demonstrated to be between three (3) and eighteen (18) times more prevalent, as youth in the general population. This range of prevalence is influenced by the gender, race, history of mental health problems or experience of maltreatment of each individual youth detained (Kerig, P. 2019). Further, detained youth have a demonstratively higher rate of self-injury (2019).

The goal of eliminating the use of detention as an option for lower level offenses is not unrealistic: programs which utilize community service work consequences, combined with placement in the community under supervision have not demonstrated increased risk to public safety (Raghavan, 2019).

BKD Performance Assessment

In December of 2018, a Performance Assessment report was completed and published by BKD CPAs and Advisors, at the request of the Agency Performance and Accountability Commission. This assessment reviewed the current services provision methods of OJA. The recommendations regarding detention services, specifically "right-sizing" detention capacity, funding alternatives to detention and utilizing an objective evidence-based detention screening tool, are included within this State Plan.

Best Practice Philosophies

OJA strongly believes we can address the needs and obstacles by continuing to use best practice philosophies throughout the State Plan. Some of the interventions and best practices include:

- 1. All juvenile detention centers have been provided with the Youth Crisis Mobile Response Unit's toll free number (1-833-885-CARE (2273)) to assist with those youth who are actively displaying mental health needs.
- 2. Within twenty-four (24) hours of admission into a juvenile detention center, the youth shall be administered the MAYSI-2. This is a mental health screening tool composed of fifty-two (52) questions designed to assist early identification of youth who may have mental health needs. For youth who score moderate or high, a referral to the Youth Crisis Mobile Response Unit will be made and local JSU staff/liaisons notified for further assistance and location of available beds.
- 3. Within forty-eight (48) hours of admission, and prior to a detention hearing in front of a Judge, a standardized and OJA approved detention screening shall be completed on youth. This will give all parties the level of risk the youth poses to the community and if further detention is necessary or appropriate. Low risk youth should not remain in detention.
- 4. A counseling rate has been established and approved by the Board of Juvenile Affairs for local youth service agencies to provide much needed treatment to youth in need of services while in detention, including crisis intervention.
- 5. Education must be provided to youth in accordance with the State Department of Education minimum standards and not less than four point twelve (4.12) hours per school day or as required by the State Board of Education. The local school district or an OJA approved alternative is responsible for providing educational programming. Detention centers are only required to provide summer school if the local school district provides this to the community as a whole. The recommendation in this area is to establish criteria for a daily rate for those centers who provide additional accredited educational opportunities during the summer months.
- 6. In collaboration with local social service agencies, each juvenile detention center shall develop a Resource List for their communities to distribute to youth and families upon discharge from their facility.

- 7. All juvenile detention centers are participating in an Emergency Preparedness Grant so that they can respond quickly and efficiently if a natural disaster occurs in their community.
- 8. Collaboration of shared, informational and meaningful training opportunities between social service agencies and juvenile detention operators.

Current Site Locations and Capacities

The State Plan outlines a system of secure juvenile detention facilities strategically located throughout the state. The following chart depicts the licensed beds, along with the current contracted beds.

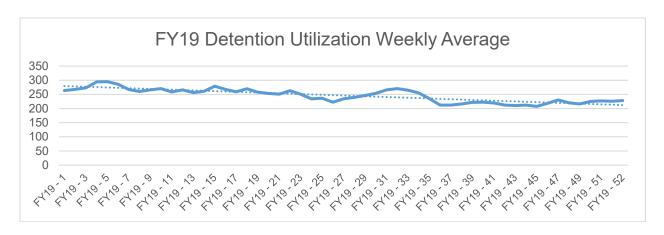
Detention Center	Licensed Beds	Contracted Beds
Beckham County	6	6
Bryan County*	0	0
Canadian County	28	10
Cleveland County	26	26
Comanche County	25	25
Craig County	18	18
Creek County*	16	0
Garfield County	11	10
Le Flore County	10	10
Muskogee County*	0	0
Oklahoma County	78	72
Pittsburg County	10	10
Pottawatomie County	14	12
Lincoln County	42	12
Texas County	6	6
Tulsa County	55	55
Woodward County	10	8

^{*} Bryan County was previously certified for 6 beds

^{*} Creek County is certified by the OJA/OPI but does not currently contract with OJA.

^{*} Muskogee County contract is currently under suspension.

Formula to Determine Annual Contracted Bed Need



In recent years, OJA has paid for excess capacity due to no clear plan for periods of declining need. This section of the State Plan will establish a method of determining need for budget, contracting and planning purposes by using data collected from the prior budget cycle. Although, longer time periods should be studied to identify trends and compare inputs to outcomes, a shorter time frame is more accurate for projecting current and short term need.

The following formula will be used with variations depending on if use is declining, increasing or holding steady.

Projected Need determined by analysis of prior budget cycle (process is described below)

Less

Number of beds used during the prior budget cycle that according to JOLTS data were not eligible for detention

Plus

Adjustment for known changes to the system that will increase bed demand (pending changes in rules and/or law)

Plus

5 to 10% cushion to account for temporary fluctuations as a conservative factor **Less**

Adjustment for implementation of alternatives to detention as outlined in the Plan **Less**

Adjustment for youth detained awaiting OJA placement – reallocate funding from detention to therapeutic placements.

Process for determining "Projected Need" as used in the above formula

- If prior year demonstrates a decline in need, projected need shall be the average demand of the last ninety (90) days.
- If prior year demonstrates an increase in need, projected need shall be the average demand for the last thirty (30) days plus an escalation of beds by quarter

equal to the amount suggested by the statistical slope of the trend line based on a bed utilization time-line plotted in Cartesian coordinates. If need exceeds available capacity and budget, then the normal process of seeking additional resources will be employed.

• If need is relatively stable, based on the trend line, then the prior year plan will be continued

This formula is summarized as follows:

Projected Need – unlawful use + pending need (law/rule changes) – allowance for utilization of alternatives – average number of beds used for youth waiting placement up to the amount of new therapeutic placements created = Number of Fixed Capacity Beds Contracted.

To account for temporary upward fluctuations in this formula, OJA may also contract for additional beds on an as needed basis. If a detention center has certified beds that are not part of the standing capacity contracted by OJA, OJA may elect to contract for one (1) or more of these beds. Payment for these beds shall not exceed the daily rate established for the detention center and will only be paid if the bed is utilized.

Prior to each budget year OJA will issue the Projected Need calculation in August for the previous fiscal year. This data will be used in production of the budget request for the upcoming year. A second Projected Need calculation shall be conducted prior to the budget work program being filed in June or July. If the projected need indicates changes to the number and location of beds for the detention system and if contracts have already been issued for the next fiscal year, modifications to the contracts will be issued. The below table represents the calculations for FY2020

FY2020 Formula for Determining Contracted Bed Needs	
Projected Need based most recent trend line	228
Plus 10% normalizing/conservative factor	23
Less unlawful detention stays (status offenses - adjusted for accuracy)	-3
Plus estimated beds needed for Youthful Offenders being moved from adult	41
lockup to detention	
Less youth that would be better served in alternatives to detention of	-23
misdemeanors and judicial orders (adjusted for accuracy)	
Less increase in therapeutic beds up to average youth in detention waiting	0
placement	
Projected Secure Detention Bed Need for FY2020	266

Capital Needs Revolving Fund

OJA will seek permanent sources of funding for the statutory "detention revolving fund" referenced in Title 10A. For FY2020, OJA will program \$50,000 of carryover into the fund and will do so each fiscal year as long as surplus funds are available. These funds will be dispersed based on prioritization of need based on written proposals from the detention centers.

Regional Use and Proposed Bed Allocation

Juvenile detention center sites are determined by a number of factors. Those factors include arrest data, analysis of the juvenile population, and the number of admissions to detention, geographic factors such as access to major transportation arteries and distance from other detention centers, community support and services, number of existing detention beds, adequate funding and other factors of need.

The map below show the number of detention beds utilized in each region for the 2019 Fiscal Year.



Based on the formula to determine detention bed needs, the table below allocates the beds to the following existing Secure Detention Centers.

FY 2021 Proposed Bed Allocation					
County	Licensed/Certified Beds	FY 2020 Contracted Beds	FY 2021 Proposed Contracted Beds		
Beckham County	6	6	6		
Bryan County	6	6*	0		
Canadian County	28	10	10		
Cleveland County	26	26	26		
Comanche County	25	25	25		
Craig County,	18	18	16		
Creek County	16	0	0		
Garfield County,	11	10	10		
Le Flore County	10	10	10		
Muskogee County	10	10	0		
Oklahoma County	78	72	60		
Pittsburg County	10	10	10		
Pottawatomie County	14	12	12		
Lincoln County	42	12	12		
Texas County	6	6	6		
Tulsa County	55*	55	55		
Woodward County	10	8	8		
Total	371	296	266		

^{*}Bryan County Commissioners chose to no longer provide juvenile detention services.
*Tulsa County will increase to a 60+ bed licensed facility following the certification of their new center in late December, 2019.

Statistical Data

The following statistics are offered to assist in establishment of benchmarks for measuring progress toward reaching goals and objectives and to identify areas of concern that should be addressed.

Number of Youth detained in secure setting and type of offenses

	# of Youth	Felony	Judicial Order	Misdemeanor	Status Offense
FY17	3998	1691 – 42.30%	1623 - 40.60%	641 – 16.03%	41 – 1.03%
FY18	3459	1480 – 42.79%	1377 - 39.81%	605 – 17.49%	35 – 1.01%
FY19	3306	1413 – 42.74%	1298 - 39.26%	552 – 16.20%	45 – 1.38%

Statistics by County are listed in Table 1.

Length of Stay (LOS)

•	3 ()		
	Average LOS	# and % over 60 Days	# and % over 90 Days
FY17	28.02 days	525 – 13.14%	279 – 6.98%
FY18	34.01 days	663 – 18.96%	332 – 9.49%
FY19	31.30 days	499 – 15.09%	248 – 7.50%

See Table 2 for detailed data by County for LOS.

Age of Detainees in years

J		•				
	Average Age	13 or less	14	15	16	17 or older
FY17	16.16	308 7.70%	533 13.33%	829 20.74%	1115 27.89%	1213 30.34%
FY18	16.13	297 8.49%	478 13.67%	744 21.28%	926 26.48%	1067 30.51%
FY19	16.17	282 8.52%	464 14.03%	705 21.31%	931 28.14%	1001 30.26%

Race/Ethnicity

race, Enimetry						
	White	Black	Native American	Asian	Hispanic Latino	Other
General Youth Population	56.67%	6.99%	8.20%	1.65%	14.61%	11.90%
FY19 Secure Detention	39.90%	30.01%	15.91%	.85%	11.71%	1.63%

See Table 3 for detailed data by county for Age and Race/Ethnicity

FY19 Usage and Youth Population

Below is a map showing FY2019 usage and youth population (under 18). The stars indication location of detention centers with the contracted bed quantity listed in the inset.



Proposed Rule, Policy, Contractual Language, and Legislative Changes

The following are areas of consideration for changes to the current system.

1. Detaining of Youth under the Age of Twelve

No child under the age of twelve (12) shall be placed in secure detention, unless all alternatives have been exhausted and their alleged crime and risk scores are at a high level requiring secure detention. The use of detention for any youth age twelve (12) or under shall be judicially reviewed per statutory timelines and the judge shall reissue the order for detention and justify the continued detainment at each review.

Any child thirteen (13) or fourteen (14) years of age may be admitted to secure detention only after all alternatives have been exhausted and their alleged crime and risk scores are at a high level requiring secure detention.

2. OJA Custody Youth Awaiting OJA Placement

OJA shall pay one hundred percent (100%) of the approved rate for all OJA custody youth currently on the OJA Placement waiting list for an out-of-home placement. If OJA, as the

placement authority, determines the youth will not be placed in an OJA contracted or operated facility, and the youth continues to be held in detention, OJA will recoup costs of continued detainment at a 100% from the county of jurisdiction.

3. Independent Financial and Programmatic Audit of Detention Center Operations Authorization for OJA to perform (at OJA's cost) an independent financial and programmatic audit of the detention center operations. This will allow for a more accurate analysis which will aide in the development of fair and equitable rates and standards for secure detention.

4. Continuity of Services

If a county with a functioning detention center is unable or unwilling to sign their regional secure detention contract within thirty (30) days of receiving the contract or within thirty (30) days of the start of the contract period, then specific statutory provisions automatically apply.

The provision of the previously signed contract with the exception of payment will automatically be extended while Secure Detention Services are provided. Payment will be based on the current daily rate applied to detention beds utilized by youth who are lawfully detained. No other payment will be required in the absence of a signed contract.

5. Unlawful Use of Detention Beds

If it is determined, by OJA, that detention beds were utilized for unlawful detention services, OJA may recoup or withhold payment for the daily rate of the bed. If a third party provides detention services for the county, and payment is assigned to the third party, OJA will pay the daily rate to the third party provider and then charge the county for the unlawful use of the bed. If the county operates the detention center, payment will be reduced on the next claim after discovery of the unlawful use of the secure detention bed.

6. Training Expectations

All parties, to include but not limited to: County Commissioners, Judiciary, District Attorney, and the Detention Center Administrator shall attend OJA Detention Use training annually.

7. Tele-Court Ability

In order to be eligible for a Secure Detention Contract, the Detention Center, in conjunction with the originating county, must have the ability to allow tele-court as an option.

8. Specialty Detention Centers

Based on need and willingness of specific detention centers, OJA will give consideration to the creation of a specialty detention center or designating specific beds for special needs.

9. Six (6) Bed Facility Rate

No six (6) bed center shall be paid a rate higher than the established rate for an eight (8) bed detention center.

Conclusion

As the state of Oklahoma's juvenile justice system continues the transition into a research based, data driven, service provision system it is imperative that we right size the number of detention beds and ensure those beds are being used appropriately. This will lead to better outcomes for youth, families and their communities. OJA will develop and require all youth meet eligibility criteria on an evidence based detention screening tool prior to placement in detention. OJA will continue to work with detention providers to ensure public safety, education and mental health needs are met for youth requiring detention services.

References

Kerig, P.J., (2019) Linking childhood trauma exposure to adolescent justice involvement: the concept of post traumatic risk seeking. *Clinical Psychology; Science and Practice* 11/20 Mendel, No Place for Kids: The Case for Reducing Juvenile Incarceration (Baltimore: Annie E. Casey Foundation, 2011), 19-22, https://perma.cc/KBV7-6HYD

Oklahoma Office of Juvenile Affairs Performance Assessment, Agency Performance and Accountability Commission (December 2018). BKD CPAs and Advisors

Raghavan, P. (2018). Criminal Justice Solutions: Model State Legislation. Brennan Institute at the New York University School of Law. https://www.brennancenter.org/publication/criminal-justice-solutions-model-state-legislation

White, C. (2016). Incarcerating youth with mental health problems: a focus on the intersection of race, ethnicity, and mental Illness. *Youth Violence and Juvenile Justice*, *14*(4), p.426–447. https://doi.org/10.1177/1541204015609965

STATE PLAN FOR THE ESTABLISHMENT OF JUVENILE DETENTION SERVICES

OJA BOARD UPDATE

December 18, 2019

Rachel Canuso Holt
Chief Operating Officer/ Senior General Counsel

Kevin Clagg Chief Financial Officer

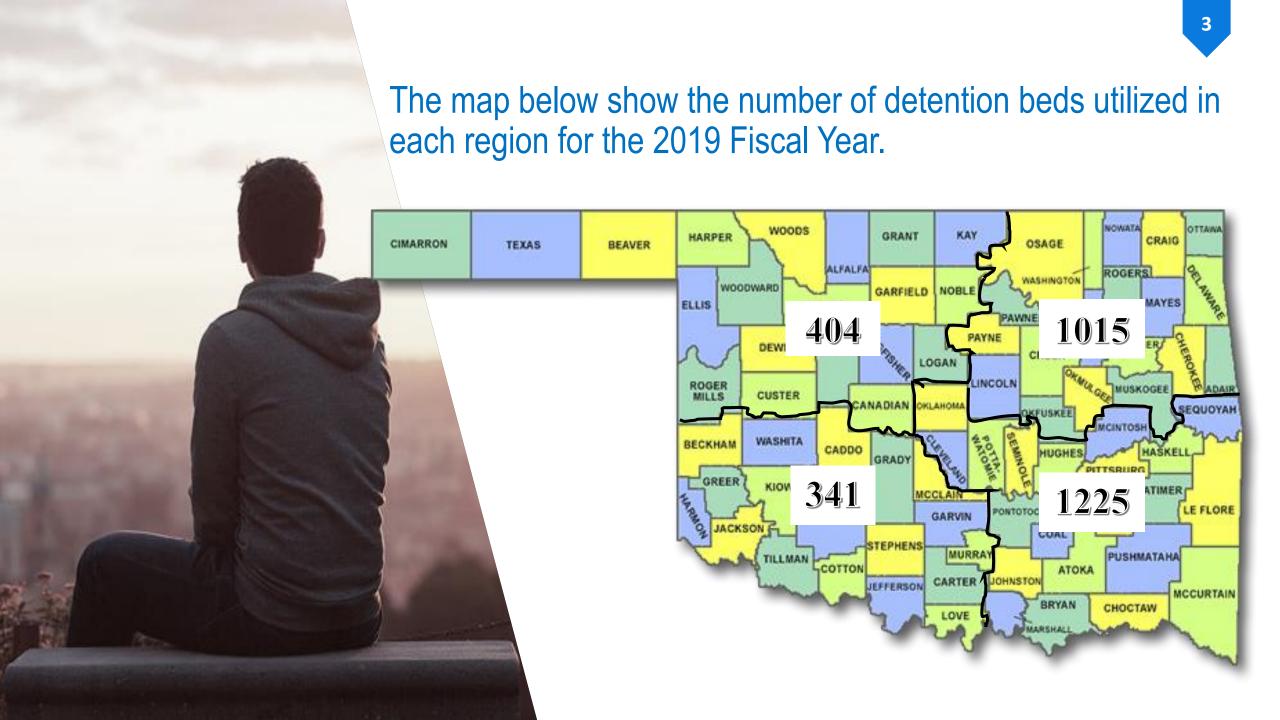
Shelley Waller CBS Deputy Director



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recommendations

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Authorization for OJA to perform (at OJA's cost) an independent financial and programmatic audit of the detention center operations. This will allow for a more accurate analysis which will aide in the development of fair and equitable rates and standards for secure detention.

recommendations

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All parties, to include but not limited to: County Commissioners, Judiciary, District Attorney, and the Detention Center Administrator shall attend OJA Detention Use training annually.

recommendations

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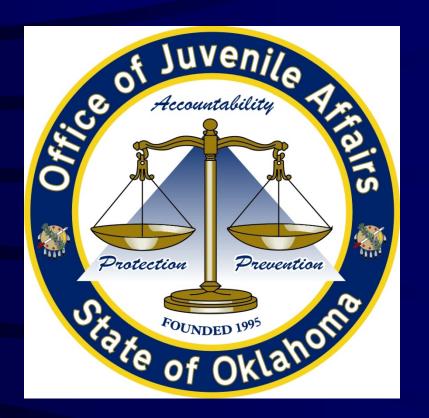
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Board of Juvenile Affairs

Rates and Standards
Presentation
December 18, 2019

On October 15, 2019, the OJA Rates and Standards Committee voted to recommend to the Board of Juvenile Affairs the proposal represented by items within this presentation designated by the number series RS20-002(a-k).

On November 13, 2019, the OJA Rates and Standards Committee voted to recommend to the Board of Juvenile Affairs the proposal represented by items within this presentation designated by the number series RS20-003.

As required by statute, each component of these rate proposals were submitted to OMES for review and approval. Approvals were granted by State Purchasing Director, Sam DuRegger on November 8, 2019, for RS20-002 (a - K) and December 2, 2019, for RS20-003. (Copies of the approval letters are in the board packet)

Community-based Youth Services – Flex Emergency Shelter Beds

Note: If approved, the effective date for rate RS20-003-01 will be on date of approval and established in the JOLTs rate structure

Flex Emergency Shelter Bed

- This service is defined as a bed that is available within licensed capacity but exceeds the number of beds under contract with OJA.
- From time-to-time there is a need to ask a contractor to accept a youth even though their utilization is already at the maximum level relative to the OJA contract. In this situation, OJA will pay the shelter center the Level IV Shelter Rate, currently \$138.63 per bed per day, regardless of assessment score. All other standards for emergency shelter beds will apply.

Flex Emergency Shelter Bed (Continued)

• Use of a flex bed will count toward the bed utilization percentage. If bed utilization subsequently drops below contract capacity then the cost for the youth's stay will be charged using the normal rates structure.

Regional Secure Detention Services

Note: If approved, effective date for rates RS20-002 - a through k will be February 3, 2020

Regional Secure Detention Services RS20-002

- Summary of Changes:
- 1. The direct labor (full time employees) portion of the rate calculation was increased based on analysis of the changes in the regional consumer price index since the rate was originally constructed adjusted subsequent increases (31% increase.)
- 2. Benefits were reduced from 40% to 30% of the direct labor cost to more accurately reflect actual expenditures.
- 3. Daily Operations rate was increased by \$1.00 per youth per day.
- 4. 2.5% increase for Tier 1 Detention Centers that meet the requirements outlined later in the presentation: 8

Proposed Daily Rate Based on Licensed Capacity

Licensed Bed Capacity	Current Rate	Proposed Maximum Rate	Tier 1 Rate
6-7	166.36	179.91	184.41
8-9	158.72	168.92	173.14
10-11	131.84	141.07	144.60
12-13	119.63	128.21	131.42
14-17	115.57	122.41	125.47
18-19	113.53	120.95	123.97
20-25	112.52	119.83	122.83
26-29	109.45	116.36	119.27
30-54	104.27	110.89	113.66
55-78	101.70	108.63	111.35
79+	90.52	97.39	99.82

Tier 1 Criteria

- 1. Education Advocacy Education assessment for all youth, provide tutoring/homework assistance as needed, assist reintegration with home school or appropriate alternative.
- 2. Mental Health Obtain additional services as needed beyond the minimum requirement of one weekly session of individual or group counseling.
- 3. Quality of Life Medical care, clothing, food, recreation needs are met well above the minimum requirements as determined by program/contract monitors and treatment team

Board of Juvenile Affairs and Board of Oklahoma Youth Academy Charter School

Meeting Minutes November 20, 2019

Board Members Present

Tony Caldwell
Amy Emerson
Janet Foss
Stephen Grissom
Mautra Jones (arrived at 9:01 a.m.)
Timothy Tardibono
Karen Youngblood (arrived at 9:01 a.m.)

<u>Absent</u>

Sean Burrage Jenna Worthen

Guests

Twyla Snider, Linda Shaw, Ada Fox, TJ Bailey, Brenda Myers, Darla Slipke, Lisa Williams, Sidney Lee, Mitch McGrew, Darla Slipke, Joe Blaugh

Present from the Office of Juvenile Affairs

Janelle Bretten, Laura Broyles, Steven Buck, Paula Christiansen, Kevin Clagg, Donna Glandon, Rachel Holt, Michael McNutt, Carol Miller, Len Morris, Paul Otieno, Audrey Rockwell, Leticia Sanchez, Paul Shawler, Matt Stangl, Amy Stuart, Paula Tillison, Shelley Waller, Jim Weaver, and Melissa White

Call to Order

Chair Caldwell called the November 20, 2019, meeting of the Board of Juvenile Affairs and Board of Oklahoma Youth Academy Charter School to order at 9:00 a.m. and requested roll be called.

Public Comment

No public comments.

Presentation on recommended Rates and Standards

Mr. Clagg presented the attached.

Chair Caldwell recognized Twyla Snider from OJDA.

Twyla Snider: I just want to kind of talk from my heart this morning. Really what I want to talk about is the proposal that's on the agenda later. That has to do with the new state plan for detention. My name is Twyla Snyder, and I'm a dinosaur. But I've been around a long time seeing a lot of things with this system. I was present during the time of the Terry D. lawsuit. Myself and Tom Kemper from the Oklahoma Commission of Children and Youth were the transition team leaders brought OJA out of the Department of Human Services and to a free standing agency. So part of my heart is here. A big part of my heart is in this business. And I will tell you that ripping this agency out of the Department of Human Services was very grueling. It was very grueling. So here's what I would like for all of you to consider. Tearing something down is a lot easier than building something. And I've watched from the time in the 90s, that detention centers came up in the 80s and the mid-90s. And then we had programs galore and decided for kids. We had wraparound services we had, we had the ability to put workers, the besides the OJA workers in the home 10 hours a week. We had wonderful programs. Then we got leadership who wasn't invested in programs. We had budget cuts, lots of reasons. The programs went away. Now we're trying to get programs back. Do you see how hard it is? It's very difficult to rebuild. It's very easy to shut things down and stop and you can do it with like a pen or with a word, but to get it back is very difficult. So I come to you. I represent the Oklahoma Juvenile Detention Association. I'm the president of that. I have 15 detention centers. We have 286 beds now something like that. Some of them are six bed facilities. Here's my appeal. Anything that we do to right size is going to diminish the existence of those six bed facilities. They cannot enter the most expensive so the economy of scale, we knew about the economy of scale in the 90s, believe it or not. And we said, we went with our heart and the right thing. And the right thing was to keep kids in the smallest places possible, and to keep them as close as possible to their home. So my appeal is as we go through this right sizing for detention centers. Let's look beyond the numbers. Let's look beyond the utilization, rate. Let's look at what we're really doing to our kids and the system. I'm not a six bed facility. So if you think I'm appealing for myself, I'm not. I'm an 18 bed facility. And I will tell you that the bigger the facilities are, the lower their utilization rate is, the smaller they are, by and large, they have larger utilization rates, which should tell us a little something there. We've only got a few of them left. So my appeal is this, we have lots of experience in our, in our organization, the directors of the detention by and large have experience, if we're going to remove kids from jails and bring them back to detention centers, there needs to be a systematic thought process to that rather than just one day decide we're bringing all of these because, you know, this, Mr. Caldwell from the Department of Corrections, if you have kids that have been exposed to that environment, and you bring it back to a lesser environment, there's a lot of things to consider when you do that. So all I'm asking at this point is, can we think with our hearts, can we try to keep what we have and the existence intact, and yet do the right thing by the state of Oklahoma, when we do reduce the population? And the other thing that I would ask is that we want to be involved not just with the input, but in the conversation.

Chair Caldwell: The action plan for the state plan for detention. But I think it's appropriate that and I appreciate you being here, because we are in the final stages of trying to put that together. And I think, speaking only for myself. But as someone who's been involved in this process now for about six months, and I share your concerns and also your perspective in your

desire in terms of what we do with kids. And I think that's something that just from all the conversations I've had with my colleagues on the board and our team that is working on this plan. I think we all share a similar place from our hearts. I think that the struggle is always Okay, How do you how do you do that? And there's lots of ways. Just like there's a lot of ways to get from here to Tulsa. There is a lot of ways to get there. So we're working really hard on that. Look forward to presenting our plan next month and hope you'll be back. Appreciate your comments this morning. So with that said, why don't we move back into the JRAP rates? And Kevin has made his presentation. Are there any questions about any of the rates that are proposed, either from the point of view of what the rate is for, or how we got to the number or anything else you'd like to ask? I will say that, you know, as, as we've been done all year long been approving a lot of rates. And serving on that committee has been interesting to me because we've had a lot of discussion with the committee about the appropriateness of a lot of these rates in terms of both how and how we pay them whether its 15 minutes or an hour per use or all these other things. So that we can be really fair to the folks that are doing the work, I think I think we've had a couple of things preeminently in mind, as we look at these rates. First of all, what's best for the child and, secondly, what's best for the provider partners that we're working with, we want to make sure that as we continue to move from a reimbursement type mentality to the rate, payment for service mentality, and that we do it in a way that both keeps our partners whole and intact, actually improves their situation. So one of the things Kevin didn't say this time, but I will just make this point, which is that in many cases, these rates actually represent a long overdue increase in compensation for our partners. It's not everything that we would like to do. But is it's at least a step in the right direction. And it's my hope that as we revisit these rates over the next couple of years, they'll continue to be able to continue to do that, which that has a lot to do with what happens with state of Oklahoma's finances. That's our effort. And so with that said, there aren't any questions.

Dr. Grissom: I do have a couple of questions. The third item now, individual or third rehabilitative treatment is \$5.22 per 15 minutes. Is there a limit on group size?

Kevin: Yes, 14 is the limit.

Dr. Grissom: That's Health Care Authority? Who's rule was 14?

Laura Broyles: We looked at the Health Care Authority.

Shelley Waller: The rule is 14 and they have to have a minimum of six in the group.

Dr. Grissom: So is this evidence based. I've not seen any literature that says 14 people in group therapy is a good idea, particularly when we're talking about kids. I mean, six to eight is optimal group size. So by 14.

Shelley Waller: We can definitely take a look at that.

Dr. Grissom: I mean, I'm okay. I don't want to raise a stink about this this. I want to make sure that we're following is that the Health Care Authority's limit?

Shelley Waller: Can we have Lisa Williams speak to that?

Dr. Grissom: Yes.

Lisa Williams: Dr. Grissom I have raised those same questions with ODMHSAS. I have yet to see any evidence based rules, whether it's six for adolescents or eight for adults or 14 for rehab. Those numbers are just general numbers in terms of whether it is a level one or a level e group home. I would hope that any provider would take into account population and do numbers accordingly. I think this is a rule that can be programmatically you can have the right to make them conditions.

Dr. Grissom: As Twyla knows, I've been around a while too, and I'm a little jaded because there are people who will maximize their dollar to whatever limit is allowed. At the expense of the quality of the intervention. And so that's why I raised the question. I do know from Health Care Authority rules at our level e group homes the maximum group size for RBMS reimbursements is eight. I actually liked the fact that individual is paid at that rate for 15 minutes because that actually de-incentivizes doing individual therapy and incentivizes doing group therapy, which is much more effective with this particular clientele. So I like that particular here. But the group size being 14 is a little bothersome to me. But I think we have to work with the Health Care Authority rules in that regard.

Chair Caldwell. You know, you're far more educated on the technical aspects of this, I'd be, I would say this, were going to consider these rates in a moment individually, as we always do. which includes digital. If you're feeling that we should go back and revisit this rate by group size, we can certainly do that. And I think, we would be willing to follow your lead in that regard? So, if you indicate to me how you tend to flow that would be helpful for everyone else. To do what we need everyone.

Dr. Grissom: Well, if I would, if I vote no, it would be because I want staff to explore with the other entities and see what our options are there.

Chair Caldwell: I think that is fair.

Dr. Grissom: And I want to be reasonable here, but I also want to make sure that we're setting rates with the benefit of our clients.

Chair Caldwell: Well, I appreciate you bringing this up. As a committee member on that committee, I'm not aware of, you know, necessarily, what is the best treatment modality. So, I appreciate knowing this. And I'll also say that, you know, we're not here, even though if you were to review, about a year's worth of minutes for our board, you find that it's almost always unanimously yes in favor of everything because the work does in fact, get done and outside of

this room, but it is important that we're not a rubber stamp or anything. And so I think it's important in you as a highly educated experienced person in this regard, raising concern or question that we as those of us who are not as well schooled, step back and go Okay, let's revisit it. So if you're planning to vote, no, put it back on the table doesn't mean we can't take it back up again in 60 days I'd far prefer personally to do that. Then pass something, get everybody confused and then revisit.

Director Buck: I was simply going to echo those exact sentiments that an either a no vote today or a tabling action on that specific rate, neither would prevent us from bringing a revised rate or a more informed rate before the board if that's what you chose.

Chair Caldwell: Are there any other questions?

Judge Foss: How are you defining an event?

Kevin: In that case, it would just be session as opposed to the time is the session.

Judge Foss: So is there any limit to how many?

Dr. Grissom: In our packet was there a description log? I can't find it.

Kevin: Yes, it was referred to as Attachment B.

Secretary Rockwell: I can drop it in.

Chair Caldwell: While she's doing that we lay this item over for a few minutes and move back to our original agenda, which was the Director's Report.

Director's Report

Director Buck ran through his report.

Chair Caldwell: Are there any questions to the Director about his report. We will go back to the JRAP rates.

Secretary Rockwell: It is in there under attachment B.

Chair Caldwell: Can you point us where we can find the answer.

Dr. Grissom: The very first rate is for substance abuse family can counseling with patient present. That's the top line correct? There, there appears to not be a limit, but the document says per 15 minutes not per event. Is there a limit to a number of session that can occur?

Laura Broyles: No.

Dr. Grissom: It says whenever possible will be provided to incorporate family members for the purposes of developing awareness of familiar worlds and systems. There is no limit on that? And the second one is also for 15 minutes?

Chair Caldwell: Can I just make come about the question regarding limits, in terms of the number of events, so if you think back to where we were a year and a half ago, when we were reimbursing for things that took place. In a sense, you had an open checkbook only balance by agreements between your organizations about how much money that was to spend. And in also you had an culture and an environment which we've been moving away from wherein, you know, we work directing what youth services agencies did. Which struck me, I've had a lot of conversations with OAYS about this and internally, that, you know, the intention was never that the legislature appropriated money in order for us to tell nonprofits as a part our system, what to do and how to do it. That's what developed overtime. And we used the power of the purse to, to direct things really in an in an appropriate way. Because the youth service agencies were originally, you know, the idea behind them was that communities would determine, what is the best kind programming for the kids in their community. And they would have a lot of flexibility, we really have taken that away. And so the whole movement to rate based system, in part is designed, to give back that autonomy. So, I think it's appropriate that we don't necessarily have a limit in terms of the number of these events that can take place. We're just saying, hey, if you feel like this is the appropriate thing to do with the children in your care, here's how much money we think based on you know, all the factors considered that that, that we can pass through an appropriation for that purpose. I just want to make a comment as a great question. And I just want to observe that, you know, to the greatest extent possible, what we I think what we want to not be doing is being in the position of telling people what the limits are.

Dr. Grissom: My guess, and we have people nowadays I can probably do a better guess than me on this particular issue would be that it's most frequently difficult to get family involvement. And the way we're doing this would appear to actually incentivize getting more family involvement in the process, which I think overall would probably be good thing and money well spent.

Laura Broyles: I can also add to that there's an assessment rate for assessment and somewhere requiring that the YLSI helps identify those youth that are moderate and high risk of substance use disorder. And then there's an additional TASI, we're paying for that. And then that should guide that level of treatment as well. And so in the work, get them to do that treatment plan development and also doing a relapse prevention plan, because what we found is that kids that were leaving the system and coming back into the community didn't have substance abuse services. So this is also some of the rates are a little bit higher, but the purpose is to incentivize those such as those that are certified by DMH to provide substance abuse services to our kids, we found that the majority of our kids have substance use disorder. So it's incentivize that prioritize that and it also give them the freedom to develop that treatment plan based on their risk and needs.

Chair Caldwell: Judge Foss was your question answered? Judge Foss: Yes.

Kevin: I appreciate your concern. And I agree with that. I think about those things too, as well. But there are two ways of controlling the cost but is the treatment has to follow the treatment plan. OJA approves the treatment plan, and monitors and reviews it so that the treatment, the number of is the number of hours, quarter hours expense would be specified. And the other thing is that contract monitoring, will be looking for situations where certain rights seem to be overused. So, there will be controls in place to monitor.

Chair Caldwell: I think it's worthwhile. Thank you, Kevin, just to make this observation because, you know, this is not a static process. We're going to keep promulgating rates. And in fact, many of the rates that we've already promulgated in the last year or so, are going to be a review in the next year or so. And, you know, as we've had these conversations, really, the intent is, is to create ever greater flexibility, first of all for our providers, and really be measuring outcomes so that we're not prescribing what people are doing, you know, with the kids that we're just saying, hey, if you choose to do these things, here's the outcome. Here's a whole bunch of things that you may choose to use in trying to drive that outcome. And, if the things that you want to do, aren't in any of these rates have already promulgated, tell us what that is, and we'll work to promulgate it rate. So we can reimburse, you know, the work you're doing. In fact, we've promulgates some rates this year, that were requested by some of our providers for that very purpose. And so, you know, this is a, it's an ongoing experiment. And I think one of the things I would say about that is that we just need to be really clear about our intent. And I think we have them. And then we need to be extraordinarily sensitive to our provider partners is they come back to us and say, This is working, this isn't working, we need this help. Because the end of the day, we're just not partnership trial kids. And I think that's what we're doing.

Laura Broyles: And so something to keep in mind to you and you're getting ready to consider the vote and everything is that we have federal seed money that is paying for services. And so this is really a demonstration project and that we're still trying to figure out what the rates need to look like and what the treatment needs to look like. So for example, Dr. Grissom is the rate that you are uncomfortable with the group ratio, we have federal funding that can continue to pay that because its seed money to get this started. So I that should allow us the time to really make sure that these rates are what you want these rates to be. So I respect your, your expertise and the result from that.

Dr. Grissom: Sounds to me, like, maybe the smart thing to do is to approve it. And you guys work on? Is that actually the best one and then we revise it later. If we need to.

Chair Caldwell: For myself, I'm going to fall in leadership here. And so I think that's the decision that you should make and guide us in. So you've got four or five minutes to do that.

Dr. Grissom: So are we already doing these services? Yes. Do we have groups of 14 anywhere?

Lisa Williams: For my agency and we only do group therapy, we limit ours to six.

41:57

Dr. Grissom: I'm a little I'm a little confused, I guess. Because the requirement for who's providing is is the same. And in my experience rehabilitative services, as differentiated from counseling or therapy, yeah, those are different sizes and different rates. But here we're requiring LPCs and LADCs to do the rehabilitative service rather than other staff, which is the way the differentiation and for example, group home settings.

Laura Broyles: For the rehab, there should be a there should be CADC we ask they be substance abuse certified in some way.

Dr. Grissom: LADC or individuals under supervision for alcohol and drug counselor licensure or other licensed professionals LPC, LCSW, LBP, LMFT, LSW, including those under supervision of substance abuse specific training and or experience. Which is the same provider requirements for doing family counseling and so on.

Laura: So with that individual?

Dr. Grissom: That is the JRAP individual or group rehabilitative treatment. Yeah. So, I mean, to me, if you're going to require that level of professional, then you're talking about a professional counseling service.

Laura Broyles: Yeah, it should there should be a differentiation. I know that. It's okay,

Dr. Grissom: I'm back. I'm thinking we need to make that really cleaned up before we really need to clean that up. I am going to vote no on that one for now.

Chair Caldwell: Let me just observe we actually, clarified with Kevin, this rate, we had some discussion about maybe this month regarding, eventually, of people providing the service. And we're going to have we've voted to make some adjustments to the requirements, which is now before OMES. So, this, this rate is going to come back up again next month, and if you would like to adjust the group size, my guess is we'll have to deal that at committee, go back to OMES and come back to the Board. So I think you are safe to promulgate this rate, either way, you're going to see it again.

Dr. Grissom: Okay, I can live with that. As long as its as its own process, and it's been looked at and considered, then that's, that's my concern. I want to make sure we're doing the right thing.

Chair Caldwell: Is there any more trouble you would like to cause any more trouble this morning. I appreciate you bringing, because this is why we're here. So I appreciate it very much. Are there other questions about the rates that we had presented to us?

Vice Chair Youngblood: I would just like Kevin to clean up the top line. I know it's only presented that way what we have on our documents is correct. But for the record when he goes in the top on just that lists.

Chair Caldwell: Okay, I think we should certainly. Okay. All right. So as you know, we need to, we need to consider each of these rates we individually.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Substance Abuse</u>
<u>Family Counseling with Patient Present, RS20-001-06 - \$23.36 per 15 minutes</u>
Dr. Grissom moved to approve with a second by Dr. Emerson

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood Absent: Burrage and Worthen

Rates and standards for JRAP Substance Abuse Family Counseling with Patient Present, RS20-001-06 - \$23.36 per 15 minutes approved.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Substance Abuse</u>

<u>Family Counseling without Patient Present, RS20-001-07, RS20-001-07 - \$22.36 per 15 minutes</u>

Dr. Grissom moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood Absent: Burrage and Worthen

Rates and standards for JRAP Substance Abuse Family Counseling without Patient Present, RS20-001-07, RS20-001-07 - \$22.36 per 15 minutes approved.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Individual or Group Rehabilitative Treatment, RS20-001-08 - \$5.22 per 15 minutes per client</u>

Dr. Emerson moved to approve, Dr. Grissom moved to amend to match the attachment after clarification retracted the motion to amend, with a second by Judge Foss

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood Absent: Burrage and Worthen

Rates and standards for JRAP Individual or Group Rehabilitative Treatment, RS20-001-08 - \$5.22 per 15 minutes per client approved.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Substance Treatment Team meeting, case staffing, or supervision, RS20-001-09a - LADC or individuals under supervision for Alcohol and Drug Counselor licensure, or other Licensed professionals (LPC, LCSW, LBP, LMFT, LSW), including those under supervision with Substance abuse-specific training and/or experience - \$9.00 per 15 minutes per provider</u>

Dr. Grissom moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Rates and standards for JRAP Substance Treatment Team meeting, case staffing, or supervision, RS20-001-09a - LADC or individuals under supervision for Alcohol and Drug Counselor licensure, or other Licensed professionals (LPC, LCSW, LBP, LMFT, LSW), including those under supervision with Substance abuse-specific training and/or experience - \$9.00 per 15 minutes per provider approved.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Substance Treatment Team meeting, case staffing, or supervision, RS20-001-09b - CADC and Bachelor's degree in a behavioral science and one year of experience in juvenile justice, social work, or education - \$7.50 per 15 minutes per provider</u>

Dr. Grissom moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Rates and standards for JRAP Substance Treatment Team meeting, case staffing, or supervision, RS20-001-09b - CADC and Bachelor's degree in a behavioral science and one year of experience in juvenile justice, social work, or education - \$7.50 per 15 minutes per provider_approved.

<u>Discussion and/or possible vote to approve rates and standards for JRAP Substance Abuse Work-related Travel Time – RS20-001-10 - \$17.78 per 15 minutes</u>

Dr. Grissom moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Rates and standards for JRAP Substance Abuse Work-related Travel Time – RS20-001-10 - \$17.78 per 15 minutes approved.

<u>Update on State Plan for the Establishment of Secure Detention Services ahead of final presentation and vote at December Board Meeting</u>
OJA team ran through the attached presentation.

Chair Caldwell: You know, it was it was our original goal was to get this done in September or October. Then it was our plan B was to get done in November. And so now we are on plan C. And I would just say this, I mean, I think that's just indicative, really everyone that's been involved in the process, their desire to get this right. We haven't reopened the plan for any detention in over a decade. It really is something that needs to be reconsidered every year or two but opportunities been really give us a serious look. As Ms. Snider pointed out, you know, it didn't just about utilization. That's an important part of this because we begin talking about it,

utilization and most utilization profiles and patterns. You know, there's obviously an opportunity. So we worked on that. But it's also about other things as well as it's taken longer than I thought. So I think we're close with just a couple of things really held us off. This month, and I think we're in the process of resolving those. So I don't think it'd be more a couple of weeks before we get a chance to see it. Are there any comments or questions about the report?

Update on the Next Generation Campus Project

Video presentation and Mr. Clagg gave a brief status of the where the project currently stands.

<u>Discussion and/or possible vote to approve change order NGF-003 to Flintco contract - adjustments to intake building, design and location, \$17,610.00 reduction. (Note: Board Action modified the masterplan on 6/19/2019 this is for the resulting change to the construction contract)</u>

Dr. Grissom moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Change order NGF-003 to Flintco contract - adjustments to intake building, design and location, \$17,610.00 reduction. (Note: Board Action modified the masterplan on 6/19/2019 this is for the resulting change to the construction contract) approved.

<u>Discussion and/or possible vote to approve a change order NGF-004 to Flintco contract – adjustment to upgrade temporary security fencing to combination 10ft concreted base poles w/anti-climb mesh and curved fence, \$124,152.00 increase</u>

Dr. Grissom moved to approve with a second by Judge Foss

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood Absent: Burrage and Worthen

Change order NGF-004 to Flintco contract – adjustment to upgrade temporary security fencing to combination 10ft concreted base poles w/anti-climb mesh and curved fence, \$124,152.00 increase approved.

<u>Discussion and/or possible vote to approve a change order NGF-005 to Flintco contract – ground water remediation for fresh water seepage in construction areas, \$78,213.00 increase</u>

Dr. Grissom moved to approve with a second by Ms. Jones and Judge Foss

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood Absent: Burrage and Worthen

Change order NGF-005 to Flintco contract – ground water remediation for fresh water seepage in construction areas, \$78,213.00 increase approved.

<u>Discussion and possible vote to adopt State Advisory Group (SAG) Recommendations – Dr. Stephen Grissom, SAG Chair, and Ms. Laura Broyles, Administrator Juvenile Justice and Delinquency Prevention (JJDP) Unit</u>

Ms. Broyles ran through the attached presentation.

Dr. Grissom: She is remarkable in how she keeps all this together. The retreat was marvelous. So many of us were like, o, my we have some work to do. The important thing to understand is that Laura's group is quite deep into making these changes happen. I don't want to take this particular time to get on a soapbox about adding to Adverse Childhood Experiences. The focus has been to pull in the Tribes and youth. Alison has been remarkable in chairing the subgroup for youth. They are making substantial changes. I am impressed, as chair of SAG, with the work this team is doing.

Dr. Emerson: I appreciated the presentation, its spirit and the thoughtfulness put behind it. I love nothing about us without us. Even though we don't get as much interaction as we would like. I think it is important to adopt. I think this may be an opportunity to infuse better mental and medical health services, and will be happy to help in those regards. I'm really appreciative of the dimension of trying to listen to our Native American voices and focusing on disparity. I also wanted to ask the question, as far as groups go that we feel like could be treated in an equitable fashion, it was our African American males. So, is it true, when we look at data that we still have work to do? I just want to make sure that is still a priority.

Dr. Grissom: The fourth area is one of the four core, formerly called, Disproportionate Minority Contact is a core function. We monitor and provide data on that issue. We have had a couple of intervention projects that we have funded.

Mr. Tardibono: The recommendation number seven, the facility standard shall be amended. Is that a request that needs to go to the legislature?

Laura Broyles: Yeah. So the recommendation that we should be making to the Legislature.

Chair Caldwell: So I have sort of similar question. There's really two things here. One, there's some recommendations for us. And then there's some recommendations for legislative action and so there's a proposed action item on here, proposed action items, to adopt the recommendations to us. I think the second piece is the first question for you all, which is these legislative changes that you're recommending does the SAG intend to make those to carry water for that with respect to the legislature? Or are you making a request to us to make that part of our legislative program?

Laura Broyles: So I think it's both so we will make these recommendations to the Legislature and the Governor through a written product primarily. However, we realize that it takes to get legislation through it requires people to help us change. So I'm going ask Dr. Grissom as a SAG member to speak.

Dr. Grissom: It is somewhat bifurcated. I think technically, I think for the possible vote, it is that last slide, which has four bulleted recommendation. So that's our recommendations to OJA, right. That's the voting. Okay, now the items one through 12, which are recommendations for statutory change. SAG has a responsibility to provide information to the Governor and the Legislature. So in that regard, that's a separate SAG function but SAG would certainly hope that the OJA board would be in support of those items, but they're not necessarily things that I think that are up for a vote.

Chair Caldwell: Okay. So we have established practice of having the OJA a legislative program reviewed by the Board and that will take place in either December or January, right.

Director Buck: In January.

Chair Caldwell: You will have the opportunity to review and vote on each of those items.

Mr. Tardibono: So just one more on number nine, prohibit charging application fee for indigent attorneys for youth. Does the federal OJJDP act have a definition of indigent? Because as a state we do not. One of the conversations we've had not in this setting in other settings, is whether because we don't have a definition of indigent whether there should be some recommendation or legislation, advise the judges, if in my case, a person in jail situation if they're on some sort of federal or state aid, where they have been determined to be in poverty, that that should be viewed in the judge's determination of indigent status. So if there's not a federal standard, look at it, is that a way to come up with a already determined definition? Because some state or federal agency already has a criteria that is determined poverty, leading to eligibility for treatment or services, thus suggest you take that at least as persuasive.

Laura Broyles: The Department of Justice, the OJJDP may have a definition. I will certainly look for that.

Chair Caldwell: Other questions about the report?

Mr. Tardibono: One more on number 10. Do we have any sort of actual listing of what those fines and fees are for juveniles?

Laura Broyles: I think we could get it. We look at, we see it when we look at a data.

Mr. Tardibono: So, I think that's going to be a legislative recommendation. The legislature is really looking at fines and fees, piece. And so I think as much information as we can give.

Dr. Grissom moved to approve with a second by Ms. Jones and Mr. Tardibono

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Recommendations from State Advisory Group (SAG) to OJA adopted.

Approval of Minutes for the October 16, 2019, Board Meeting

Mr. Tardibono moved to approve with a second by Ms. Jones

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

October 16, 2019, board minutes approved.

<u>Discussion and/or possible vote to approve the year-to-date OJA Finance Report</u>

Ms. Jones moved to approve with a second by Judge Foss.

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Year-to-date OJA Finance Report approved.

<u>Discussion and/or possible vote to approve 2019-2020 year-to-date Oklahoma Youth Academy</u> <u>Charter School Finance Report</u>

Ms. Jones moved to approve with a second by Judge Foss.

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

2018-2019 year-to-date Oklahoma Youth Academy Charter School (OYACS) Finance Report

approved.

<u>Update on ICAP - Mr. Jim Weaver</u>

<u>Presentation on Entrepreneurship program</u>

Vote to enter Executive Session

Mr. Tardibono moved to enter executive session with a second by Dr. Grissom

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Board entered Executive Session at 11:14 a.m.

Vote to return from	Executive Session	1
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Dr. Grissom moved to return from executive session with a second by Vice Chair Youngblood and Judge Foss

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

Board returned from Executive Session at 11:30 a.m.

Announcements/comments

Secretary Rockwell informed the Board they can tour the facilities located on-site.

New business; as authorized by 25 O.S. § 311(A) (9)

No new business.

<u>Adjournment</u>

Prepared by:

Judge Foss moved to adjourn with a second by Dr. Emerson.

Aye: Caldwell, Emerson, Foss, Grissom, Jones, Tardibono, and Youngblood

Absent: Burrage and Worthen

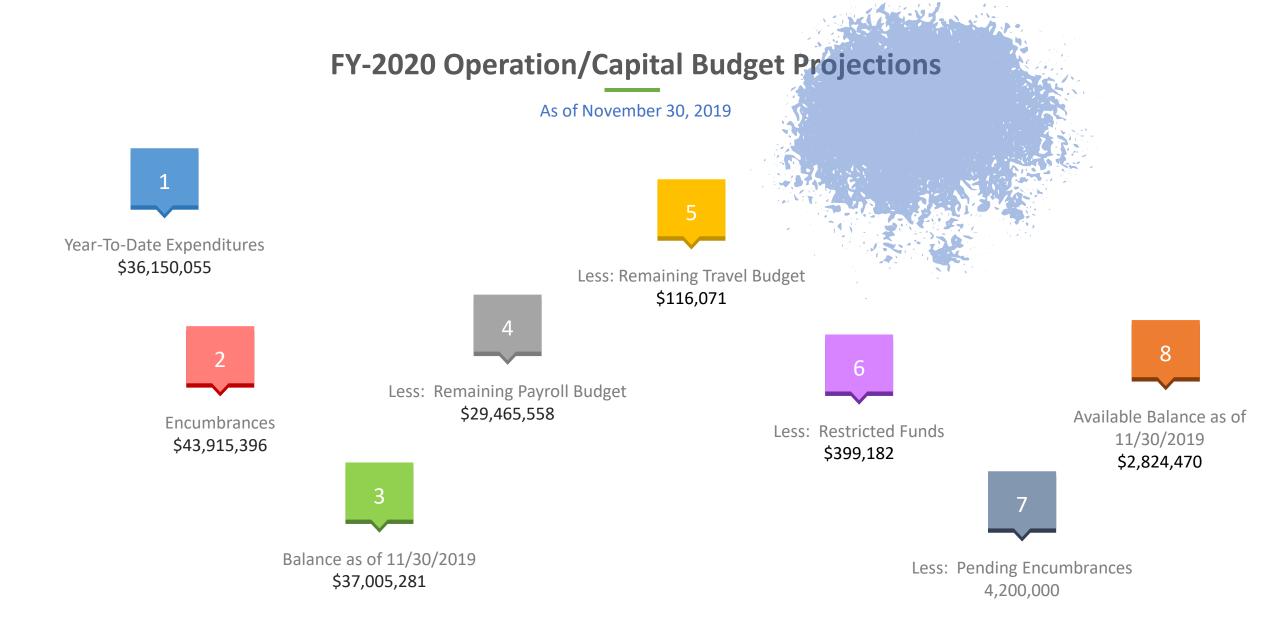
Chair Caldwell adjourned the meeting at 1:09 p.m.

Minutes approved in regular session on the 18th day of December, 2019.

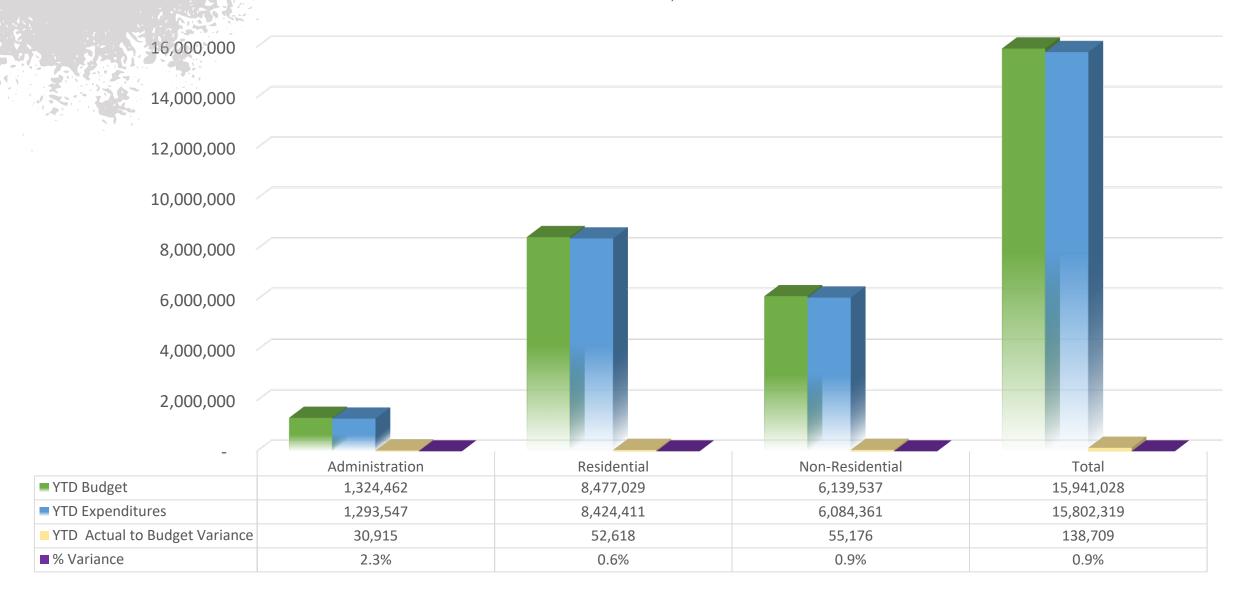
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Audrey Rockwell, Secretary	Tony Caldwell, Chair

Signed by:

OJA FINANCE REPORT December 2019 Board Meeting Financial Reports for the Month Ending November 30, 2019



FY-2020 Payroll Costs



General Revolving Fund Revenue

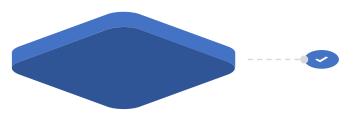
Revenue Source	FY-20 Budget	Budget to Date	Receipts	In-Transit	Over (Under) Budget
SSI and SSA	80,423	33,509.58	71,564	_	38,054
Income from Rent	9,576	3,990	6,893	-	2,903
Charter School State Aid/Grants	962,540	401,058	524,103	-	123,045
School Breakfast/Lunch/Snacks Program	248,460	103,525	79,099	17,929	(6,497)
Refunds & Reimbursements	401,007	167,086	195,390	-	28,304
Sales	19,800	8,250	4,327	_	(3,923)
Child Support	130,000	54,167	72,153	-	17,986
Other Receipts	12,050	5,021	67,643	-	62,622
Total Revolving Funds	\$ 1,863,856	\$ 776,607	\$ 1,021,171	\$ 17,929	\$ 262,493

Federal Programs Revenue

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FFP Revolving Fund	Projected Annual Revenue		Projected YTD Revenue		Actual Revenue	In-Ti	In-Transit		ariance
Residential Behavior Management Services (RBMS)	\$	4,000,000	\$ 1,666,66	66.67	\$ 1,983,167.3	4 \$	-	\$	316,501
Targeted Case Management (TCM)		2,000,000	833	3,333	1,037,28	9	-		203,956
IV-E Shelter		54,709	22	2,795	26,07	2	-		3,277
Indirect Cost Reimbursement (OHCA)		150,000	62	2,500		-	28,455		(34,045)
Grants (Formula)		593,000	247	7,083	190,96	1	-		(56,122)
OSDH-Youth Pregnancy & Parenting		224,000	93	3,333	77,62	6	24,108		8,401
DAC-RSAT		144,168	60	0,070	49,83	1	5,967		(4,273)
Total	\$	7,165,877	\$ 2,985	5,782	\$ 3,364,94	6 \$	58,530	\$	437,694

700 Fund Accounts

As of November 30, 2019



Trust Fund 70100

Established to account for all the funds a juvenile received or expended while in OJA custody.

**Cash Balance as of 11/30/2019 was \$18,671



Canteen Fund 70200

Established to account for all the funds a juvenile received or expended while in OJA custody.

**Cash Balance as of 11/30/2019 was \$9,610



Donation Fund 70300

Established to account for the all the funds a juvenile recieved or expended while in OJA custoody.

**Cash Balance as of 11/30/2019 was \$1,311



Victim Restitution Fund 70400

Established to account for all funds a juvenile received or expended while in OJA custody.

**Cash Balance as of 11/30/2019 was \$33,240

Emergency Purchases

As of November 30, 2019



1) There are no Emergency Purchases.

Sole Source Purchases

SS#	Date	Vendor	Description	Amount
SS20-06	11/20/2019	Educational Diagnostic Testing Services LLC	HSEA Paper Based Test processing	\$5,000
SS20-07	011/26/2019	PbS Learning Institute	Performance Based Standards Program	\$21,000
TOTAL				\$26,000





Oklahoma Youth Academy Charter School Combined Statement of Revenues, Expenditures and Changes in Fund Balances School Year 2019-2020 As of November 30, 2019

		JA General and							
2019-2020	R	levolving Funds	Fund 25000	To	tals as of 11/30/2019	COJC (972)	4	SOJC (975)	Total
Revenues									
State Aid	\$	-	\$ 321,952.15	\$	321,952.15	\$ 160,976.07	\$	•	\$ 321,952.15
Title I N&D			167,312.06		167,312.06	83,656.03		83,656.03	167,312.06
IDEA-B			17,956.40		17,956.40	9,221.56		8,734.84	17,956.40
Title IV-E LEA			15,000.00		15,000.00	7,500.00		7,500.00	15,000.00
Textbooks			1,882.52		1,882.52	941.25		941.27	1,882.52
Child Nutrition Program _Breakfast			29,871.12		29,871.12	13,127.10		16,744.02	29,871.12
Child Nutrition Program _Lunches and Snacks			49,227.52		49,227.52	21,633.39		27,594.13	49,227.52
Refunds			233.89		233.89	-		233.89	233.89
Office of Juvenile Affairs **		602,481.78			602,481.78	327,483.58		274,998.20	602,481.78
Total Revenues	\$	602,481.78	\$ 603,435.66	\$	1,205,917.44	\$ 624,538.98	\$	581,378.46	\$ 1,205,917.44
<u>Expenditures</u>									
Payroll Expenses	\$	451,426.12	\$ 637,931.14	\$	1,089,357.26	\$ 592,087.49	\$	497,269.77	\$ 1,089,357.26
Training and Travel		8,335.67	100.00		8,435.67	6,424.60		2,011.07	8,435.67
Operational Expenses		133,985.54	40,175.47		174,161.01	76,177.55		97,983.46	174,161.01
Equipment and Library Resources		8,734.45	-		8,734.45	4,665.94		4,068.51	8,734.45
Total Expenditures	\$	602,481.78	\$ 678,206.61	\$	1,280,688.39	\$ 679,355.58	\$	601,332.81	\$ 1,280,688.39
Excess of revenues over (under) expenditures	\$	-	\$ (74,770.95)	\$	(74,770.95)	\$ (54,816.60)	\$	(19,954.35)	\$ (74,770.95)
Fund Balances July 1, 2019		-	247,899.71		247,899.71	124,503.11		123,396.60	247,899.71
Fund Balances 2019-2020 School Year	\$	-	\$ 173,128.76	\$	173,128.76	\$ 69,686.51	\$	103,442.25	\$ 173,128.76
**OJA Funds									
Fund 19001	\$	567,098.78							
Fund 19811	\$	182.37							
Fund 19901	\$	31,243.12							
Fund 19911	\$	2,696.88							
Fund 20500	\$	1,260.63							
	\$	602,481.78							



Office of Juvenile Affairs Oklahoma Youth Academy Encumbrances for Approval - School Year 2019-2020 December 2019 Board Meeting

Encumbrance #	Product Description	Quantity	Vendor	Justification			Campus	
"			Unit Cost	COJC	SOJC	Total		
2020-055	Google License	18	Dell	Additional software licenses are required to allow OYA to remotely manage additional Chromebooks purchased recently.	25.72	231.48	231.48	462.96