

Deschutes County

Juvenile Crime Prevention Basic & Diversion Funding Plan Narrative

2023 - 2025

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Introduction

The State of Oregon, through the Oregon Youth Authority, provides funding to the county juvenile departments to support serving youth locally at the earliest intervention possible, to prevent escalation deeper into the juvenile justice system. The two funding streams are called Juvenile Crime Prevention (JCP) Basic and JCP Diversion.

- JCP Basic Funds are allocated to support basic infrastructure for juvenile justice services. The target population is youth ages 10-17 and the goal is to prevent further offenses.
- JCP Diversion Funds are allocated to divert the highest risk youth from placement in OYA custody. The target population is youth ages 12-19 and the goal is to prevent escalation to OYA close custody placement.

This report provides an overview of data to convey the demand on services at the county level, populations at risk of coming to OYA, services to address the needs of diverse youth in the county. In addition, information is offered to share what is working, what is not, and where there may be gaps in local services.

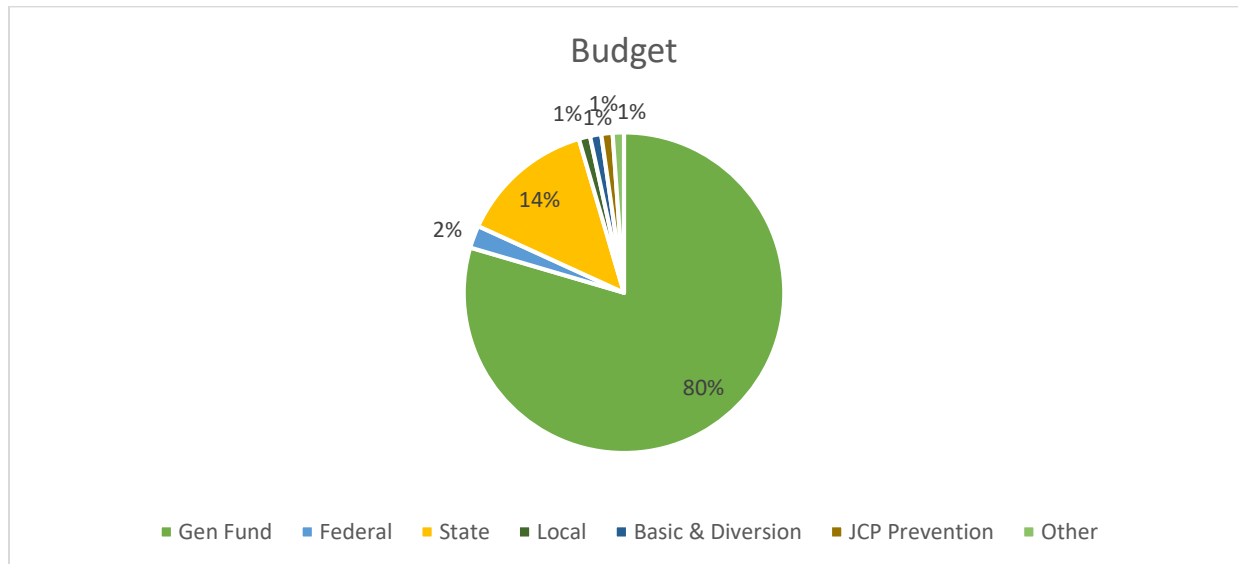
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County Budget and Youth Population

Juvenile Department Budget

County juvenile department services are funded from multiple sources that may include county general fund; federal, state Juvenile Crime Prevention basic, diversion and prevention funding, other state or local resources; and grants.

Most of these funding types are combined into their total budget and not used to fund distinct services. For this reason, there is little ability to develop a causal connection between the state Juvenile Crime Prevention basic and diversion funding and outcomes (e.g., recidivism, escalation to OYA).



Juvenile Justice Continuum and County Services

While the juvenile justice system is divided into local and state services, it functions as a continuum with extensive collaboration and coordination between local county juvenile departments, the Central and Eastern Oregon Juvenile Justice Consortium (CEOJJC), and the Oregon Youth Authority. Each county and OYA have an Intergovernmental Agreement that guides the collaborative process between them. In addition, some counties have local services or assistance that OYA may access, providing unaccounted for financial benefits to the State. This may include local services or programs that counties share with OYA, such as detention or youth development programs.

► Provide an example of how your department and OYA collaborated to support the needs of youth in your area.

Deschutes County Juvenile Community Justice (DCJCJ) regularly works with OYA to collaborate and support the needs of youth in Deschutes County. At times, an informal collaboration begins with a meeting where the community justice officer, the DCJCJ supervisor, and an OYA representative discuss a case. The goal of this collaboration is to see if the youth's risk and needs can be addressed in the community before moving onto a formal placement committee meeting. On rare occasion, OYA sometimes joins our department for an escalation multi-disciplinary team (EMDT) meeting. Generally, these meetings occur prior to OYA involvement but are utilized to mitigate risks associated with a youth's potential escalation to OYA. If necessary, Deschutes County requests a formal placement meeting that is facilitated by DCJCJ Behavioral Health Supervisor. The goal of Placement Committee is to clearly lay out the youth's risk and needs and make a determination based on the youth's current situation what recommendations will be best for the youth, family and community. OYA is a part of these meetings and the goal is to understand what services are currently being offered, what services are needed, barriers for the youth and ultimately make a recommendation for

placement and/or services. Other collaboration between DCJCJ and OYA occurs when a youth is in placement and may need additional supports to avoid being removed from a program and/or prevent unnecessary detention episodes.

Here are some specific examples to provide more context to what we have done in the past.

Youth MD has been dependent for care for most of her adolescent years. DHS was not able to find adequate placement in order for her to access local MH/SUDS treatment. At PV adjudication, OYA’s initial plan was to recommend YCF because community placement options were minimal and those that considered youth were reluctant to accept because of youth’s extensive needs and a history of one physical assault that youth was involved in at a recent placement. Deschutes County worked closely with OYA to push back on community programs to reconsider and ultimately youth was placed. So far, escalation to YCF has been avoided.

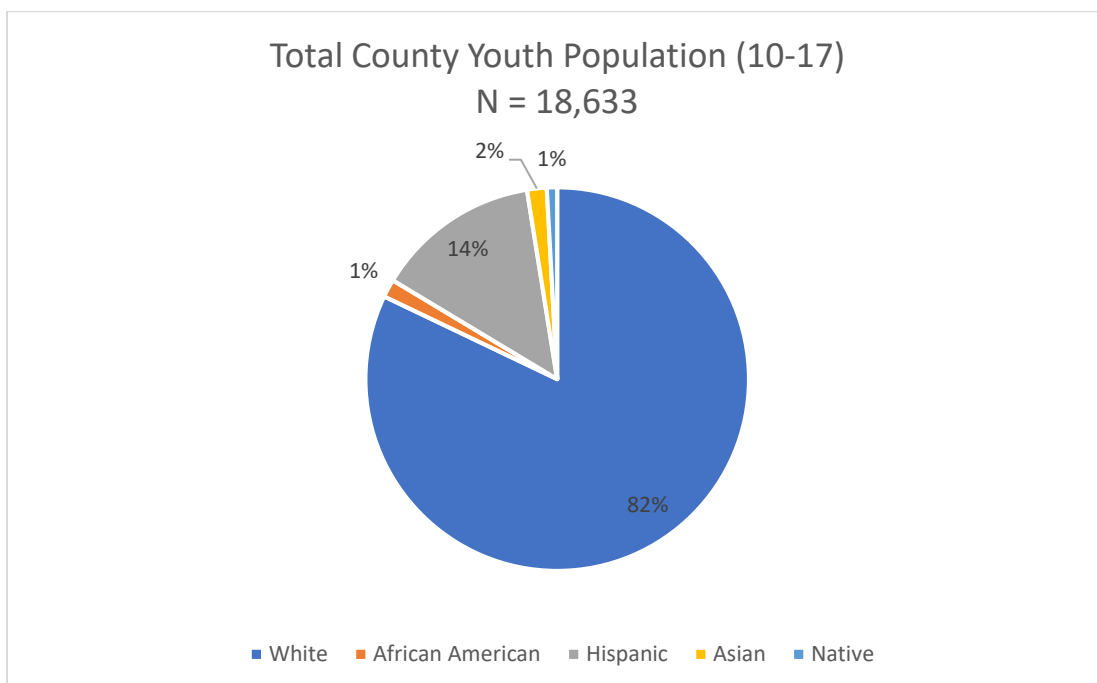
Youth LH was a youth that did not reside in Deschutes County and needed to complete community service hours for a probation condition. OYA case worker called to ask if the youth could participate in our community service program. Allowing the out of county youth to work off his hours helped the youth complete all conditions of his probation.

Total County Youth Population (Youth 10-17)

The following chart shows the total youth population, ages 10-17, who reside in the county. This represents the youth who could potentially be referred to the juvenile department. Historically, the youth population has determined the amount of funds distributed to each county.

The additional information in this report (e.g. referrals, equitable services, youth needs) will help inform how the JCP funds are used in each county.

Source: 2020 population data provided by Office of Juvenile Justice and Delinquency Prevention



Youth Data

Youth Referred to the Juvenile Department (All Youth)

Youth are referred to the juvenile department for charges ranging from dependency status offenses (e.g., runaway), violations (e.g., Minor in Possession of Alcohol) and criminal offenses (e.g., misdemeanor and felony). The total number of youth referred demonstrates the volume of youth processed by each department and informs the overall need or demand for services and interventions in the county.

The table below shows all of these referral types, and unique youth reflects that youth are only counted once, no matter how many referrals they received.

Source: 2022 JJIS annual report (Youth Referral Page 8)

All Referrals	Gender	Race/Ethnicity
Unique youth (n=587)	Male (n=367) — 62.5%	Caucasian (n=426) — 72.6%
	Female (n=212) — 36.1%	Hispanic (n=80) — 13.6%
	Unknown (n=8) — 1.4%	African-American (n=13) — 2.2%
		Asian (n=4) — .7%
		Native (n=9) — 1.5%
		Other (n=55) — 9.4%

The table below shows only criminal referrals, and again represents unique youth, not the total number of referrals.

Source: 2022 JJIS annual report (Youth Referral Page 7)

Criminal Only Referrals	Gender	Race/Ethnicity
Unique youth (n=322)	Male (n=223) — 69.3%	Caucasian (n=234) — 72.7%
	Female (n=96) — 29.8%	Hispanic (n=70) — 17.4%
	Unknown (n=3) — 0.9%	African-American (n=7) — 2.2%
		Asian (n=2) — .6%
		Native (n=7) — 2.2%
		Other (n=19) — 5.9%

Demographics of Youth Referred to the Juvenile Department (A Mis. and Felonies)

This chart represents demographic information on youth referred to the juvenile department for a class A misdemeanor or any felony offense. This population of youth are eligible for commitment to OYA for a community placement or youth correction facility, based on public safety concerns or the needs of the youth.

Source: Adapted from the Allegation_Referral universe within BIS Reports. OYA Research and Evaluation Team

A Mis. & Felony Referrals	Risk Level	Gender	Race/Ethnicity
Unique youth (n=211)	High (n=34) — 16%	Male (n=158) — 75%	Caucasian (n=147) — 70%
	Medium (n=53) — 25%	Female (n=51) — 24%	Hispanic (n=43) — 20%
	Low (n=99) — 47%	Non-binary (n=1) — 0.5%	African-American (n=4) — 2%
	Unknown (n=25) — 12%	Unknown (n=1) — 0.5%	Asian (n=1)— 0.5%
			Native (n=4)— 2%
			Other/Unknown (n=12)— 6%

*Risk level is provided for youth where a Juvenile Crime Prevention (JCP) assessment was available. Totals may not match total number of unique youth.

Juvenile Crime Prevention Risk Assessment – Highlights of Needs

The information below comes from completed Juvenile Crime Prevention risk assessments that demonstrates need areas, such as mental health, behavioral health, or substance use. The data are used to inform the service needs within the community.

► (Note: All youth receive a JCP assessment.)

Source: Adapted from the Assessments universe within BIS Reports. OYA Research and Evaluation Team

#	Question	(n=)	Percentage
2.8	Diagnosed learning disability or concrete evidence of cognitive difficulties	113	36%
4.1	Chronic aggressive, disruptive behavior at school starting before age 13	84	27%
4.6	Chronic runaway history	45	14%
4.12	A pattern of impulsivity combined with aggressive behavior towards others	62	20%
5.4	History of reported child abuse/neglect or domestic violence	167	53%
5.6	Criminal family member having impact on youth's behavior	84	27%
5.7	Substance-Abusing family or household member(s)	80	25%
6.1	Substance use beyond experimental	208	66%
6.3	Substance use began at age 13 or younger	122	39%
8.1	Actively suicidal or prior suicide attempts	70	22%
8.2	Depressed or withdrawn	134	43%
8.4	Hallucinating, delusional, or out of touch with reality	13	4%

Disposition of Youth by Demographics

This table demonstrates the types of dispositions of referrals, broken down by sex, age, and race/ethnicity. The disposition of referrals to the juvenile justice system provides information about how cases in the juvenile justice system are resolved. This can include taking no action (e.g. because of insufficient evidence to proceed, review and close), informal handling (e.g. diversion process, peer court), or formal court involvement (e.g. county probation, OYA commitment).

Source: 2022 JJIS Annual Report (Disposition Page 9)

Disposition of Referrals by Demographics													
	TOTAL	SEX			AGE			RACE/ETHNICITY					
		Females	Males	Unknown	12 and Younger	13-15	16 and Older	African American	Asian	Hispanic	Native American	Other/Unknown	White
Not Petitioned													
• Review & Close	448	181	261	6	28	198	222	16	3	40	1	42	346
• Diversion/ Informal Disposition	283	84	198	1	23	110	150	2	2	60	7	11	201
Petitioned													
• Dismissed	18	1	16	1	1	5	12	1	1	1	0	1	14
• Plea Bargain/ Alternative Process	2	0	2	0	0	0	2	0	0	1	0	0	1
Adjudicated Delinquent													
• Formal sanction	1	0	1	0	0	0	1	0	0	0	0	0	1
• Probation	56	10	46	0	0	27	29	1	5	7	0	1	42
• Probation & Commitment to Agency (Non-OYA)	0	0	0	0	0	0	0	0	0	0	0	0	0
• Probation & OYA commitment for community placement	8	1	7	0	0	5	3	0	2	0	0	0	6
• OYA commitment to YCF	4	2	2	0	0	0	4	0	0	0	0	0	4

Equity

A component of the funding to counties is to prevent commitment to OYA services. OYA also looks at disparities in commitment rates, commitment by crime type and can look at variations across the state. This section of the report is for counties to provide a review and discussion of equitable access to services within the county or area. This may be by race, ethnicity, gender, sexual orientation, or treatment need.

Assessment of Equitable Access to County/Local Services

► Note any disparities based on race and gender in referrals and dispositions.

- For all referrals we are noticing the following disparities.
 - African American youth make up 2.2% of all referrals, but only represent 1% of Deschutes County youth.
 - Indigenous youth make up 1.5% of all referrals, but only represent 1% of Deschutes County youth.
- For criminal referrals we are noticing the following disparities.
 - African American youth make up 2.2% of all criminal referrals, but only represent 1% of Deschutes County youth.
 - Hispanic youth make up 17.4% of all criminal referrals, but only represent 14% of Deschutes County youth.
 - Indigenous youth make up 2.2% of all criminal referrals, but only represent 1% of Deschutes County youth.
- For A MISD and felony referral we are noticing the following disparities.
 - Hispanic youth make up 20% of all A MISD and felony referrals, but only represent 14% of Deschutes County youth.
 - Indigenous youth make up 2% of all A MISD and felony referrals, but only represent 1% of Deschutes County youth.
- For not petitioned we are noticing the following disparities.
 - African American youth make up 3.6% of review and close, but only represent 1% of Deschutes County.
 - Hispanic youth make up 21% of Diversion/Informal Disposition, but only represent 14% of Deschutes County youth.
 - Indigenous Youth make up 2.5% of Diversion/Informal Disposition, but only represent 1% of Deschutes County youth.
- For petitioned we are noticing the following disparities.
 - African American youth make up 5.6% of dismissed petitions, but only represent 1% of Deschutes County youth.
 - Asian youth make up 5.6% of dismissed petitions, but only represent 2% of Deschutes County youth.
 - Hispanic youth make up 50% of Plea Bargain/Alternative process, but only represent 14% of Deschutes County youth.
- For adjudicated delinquent we are noticing the following disparities.
 - African American youth make up 1.8% of probation cases, but only represent 1% of Deschutes County youth.
 - Asian youth make up 9% of probation cases and 25% of Probation/OYA commitments for community placement, but only represent 2% of Deschutes County youth.

► Describe what is working well for equitable service delivery (e.g., gender, race/ethnicity, crime type) at the local level.

Deschutes County Community Justice has utilized different strategies to help with equitable service delivery. First we utilized a series of matrices that structure our decision making from receipt of referral through disposition and subsequent technical and/or new law violations. A youth's JCP score and offense severity are considered at all decision points.

Unfortunately in our community our services are very limited in terms of being culturally responsive or gender specific. We have taken internal measures to begin the process to translate all official documents into Spanish. We also have recruited and trained Spanish speaking staff to conduct services at all decision points (i.e. Intake Assessment and Supervision) for our Spanish speaking youth/families. Interpreter services are available for Spanish speaking families who are participating in Functional Family Therapy. We have also recently launched a culturally responsive support service in detention. This group focuses on youth who identify as Indigenous by providing mentorship and ultimately all youth in the facility benefit from participation in the craft circle. This is a new service and we are very excited to replicate the services by utilizing other community groups who provide culturally specific support. As a department we are continuing our work in understanding and eliminating racial inequities. Our most recent goal setting for 2023 included the incorporation of the Government Alliance on Race and Equity tool (GARE) into this process and many of these goals have a focus around equitable service delivery for youth in our department.

► After reviewing your data, services, and outcomes, do you see any adjustments or issues that need to be addressed differently?

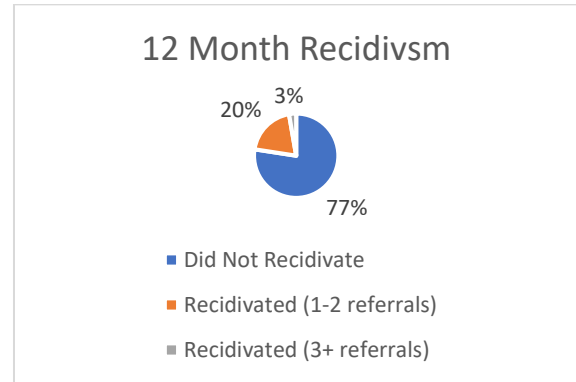
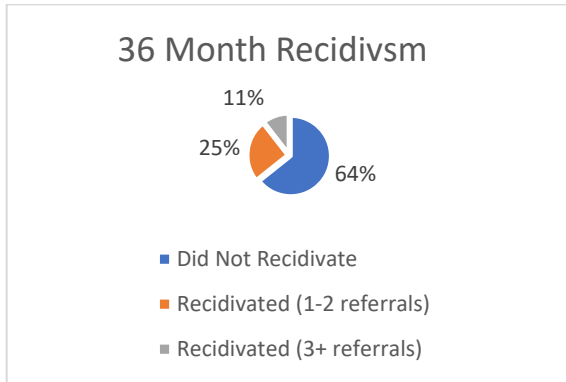
It is clear that we need to continue our work around restorative justice and equity and look at potential options to expand to those entities in charge of making referrals and charging decisions. This includes seeking collaboration with local school officials, law enforcement, district attorney's office and the Court. Most of the disparities in Deschutes County start before we have contact with the youth, but as a part of that system it is part of our responsibility to model and help them understand the disparities that are occurring and how to eliminate those disparities.

Output and Outcome Measures

Juvenile Department Recidivism

As a measure of public safety, recidivism is defined as a new criminal referral. A criminal referral is a law enforcement report to a juvenile department alleging one or more felony or misdemeanor offenses. Youth who initially received a referral for a criminal offense are tracked 12 and 36 months from the time of a referral.

Source: 2022 JJIS Annual Reports (Recidivism Page 7, 36 & 12 Month)



Escalation to OYA Commitment

Based on public safety concerns or treatment needs, youth can be escalated from county involvement to OYA commitment for placement in the community or in a youth correctional facility. This table represents the percentage of youth who were initially placed on county probation and were escalated to either OYA probation or directly to OYA close custody.

Escalation from County Supervision to OYA	Youth on County Probation	# of Youth Escalated to OYA	% County Escalation
Youth on County Probation	49	4	8.2%
Escalated to OYA Probation		4	8.2%
Escalated directly to OYA Close Custody		0	0%

Source: Adapted from Escalation and ORRA Event Universes within BIS Reports. OYA Research and Evaluation Team

► **Provide an example of services provided to a youth that did not escalate to OYA and what worked to prevent escalation (including services provided and other factors that prevented escalation).**

Deschutes County Community Justice looks to exhaust all placement options to prevent escalation for youth to OYA. We consider placement options outside of the current environment with other family members, friends, Cascade Youth and Family Services (The Loft), temporary shelter care through respite services for youth/family. We look at consideration for residential treatment options (i.e. In-patient SUDS treatment through Rimrock Trails, Madrona, private residential placements for youth with private insurance). We work with youth to seek out education and/or employment options in the community such as Heart of Oregon Corps. We assess medium and high risk youth for Function Family Therapy (FFT) services and provide those services at no cost to the youth/family. At times, we work closely with family/guardians to develop parental contracts that outline specific goals for family/guardian to encourage and empower them to help the youth be successful with supervision and services. Fortunately we have a

24 hour stabilization center in Deschutes County and we connect youth in crisis to these services whenever necessary. We work with our County Behavioral Health provider to connect youth with Wrap services or Young Adult in Transition (YAT) programs. When necessary, we also have a partnership with Youth Villages to provide intensive outpatient services for at risk youth/family in their home. We regularly utilize an escalation multi-disciplinary team (EMDT) meeting to help strategize and problem solve to prevent escalation to OYA. Generally, these meetings occur prior to OYA involvement but are utilized to mitigate risks associated with a youth's potential escalation to OYA. Our goal is to address a youth and families risk, needs, barriers and be as responsive as we can based on the services we have available to avoid OYA escalation.

Here are some specific examples to provide more context to what we have done in the past.

Youth SS avoided escalation to OYA after EMDT action plan that facilitated a team effort to connect youth with Youth Build and MH services. Youth was stabilized in the JCJ 30 day program prior to execution of the action plan. Probations were closed successful.

Youth JT was referred to the delinquency system for an assault on a family member, who was his only sustaining caregiver. Youth spent 60+ days in detention pending a PV. OYA seemed to be the only option until I/DD was brought into assess youth's eligibility. Youth ultimately was released to a group home placement. Distant family members were also able to provide short-term respite to bridge the gap between release and placement.

Youth MS was escalating deeper into the juvenile justice system due to his behaviors. The CJO recommended the 30 day program through JDF, this helped the youth maintain pro-social behavior for about six months. Once the youth began to exhibit anti-social behavior again the CJO worked with the youth's IDD worker to get him voluntarily placed in an IDD program, Professional Therapeutic Community Network (PTCN). This program helped this youth change his behavior and kept him from escalating into OYA.

► Provide an example of services provided to a youth that are at "imminent risk" to escalate to OYA and explain any gaps in services that may have impacted escalation.

One of our largest barriers at this time is availability beds in our placement resources. Sometimes the lack of a bed can result in youth escalating without the necessary services and thus ends in OYA escalation. We also have a major gap in substance use disorder services for youth in our community. Our residential provider has very limited bed space and it is only for male youth. We also have no level two outpatient services being offered by a local provider and assessment wait times can average a couple weeks. We also lack dual diagnosis treatment options. We also do not have a local counselor or treatment provider that provides treatment related to sexual offending. Our contracted provider works out of Montana and while he is still able to provide services this doesn't present challenges being that he is not here locally. In Deschutes County we also very limited to no foster care options for youth who could be treated in the community. Many times these youth have offended sexually and we are unable to find a community placement option for them which in turn leads to OYA placement.

Here are some specific examples to provide more context to what we have done in the past.

Youth DD was at imminent risk to escalate to YCF. Her age prohibited her placement in community residential via OYA contracts, no other options for this 18 year old to access the SUDS evaluator's firm recommendation that youth needed intensive in-patient treatment.

We have had several youth who have offended sexually and been directly committed to OYA due to lack of community resources. The youths have usually offended a younger sibling and were unable to return home. Due to other family members also having younger children in their home the youth did not have a safe place to reside, therefore committed to OYA. If we had local foster care placements or other housing services for youth who have

committed sexual offenses the youth would have stayed in the community and would have been successful without further escalation into the juvenile justice system.

► **Please describe what data or other factors are used when making placement recommendations.**

- JCP Assessment.
- Other services tried or being provided.
- Disposition matrix.
- OYA Escalation Numbers.
- Referral History.
- Detention Risk Assessment Instrument.
- Case Brief prepared by CJO for EMDT.

JCP Risk Assessment Completion

The following table represents the percentage of JCP risk assessments completed for each youth who received that disposition within the timeframes indicated, during calendar year 2022.

	% Completed 90 days pre-disposition	% Completed 30 days post-disposition	Total % Completed*
Diversion/Other	49.2%	23.0%	72.2%
Formal Accountability Agreement	54.4%	49.7%	100.0%
Probation	81.1%	5.7%	83.0%
OYA Commitment (Probation or YCF)	77.8%	11.1%	77.8%

*The total column may not equal the sum of 90 days pre and 30 days post. This can occur when a youth was found to have a JCP during both time periods.

Source: OYA Research and Evaluation Team/JJIS Data

► **Discuss the completion rate for JCP risk assessments. Please include strategies to increase the completion rate in the future.**

We are working with Bis Reports to better understand the JCP data above. The likely reason why Diversion/Other and OYA Commitment are not at 100% completed is due to the time frames being used to measure this. As a part of our process our Intake unit conducts a JCP on all youth that enter our system and our CJOs reassess as needed throughout supervision and at the end. The assessment is the main tool we use for our routing matrix and structured decision making and will be the main factor that influences the level of supervision and services youth receive. We conduct regular JCP trainings for new staff and also do JCP interrater reliability and JCP refresher trainings.

Summary and Plan

► Based on the data provided in this document (budget, JCP, outcomes, equitable access) and any other factors — describe how it informed your JCP basic and diversion plan?

We appreciate having this data available to help us when building our JCP basic and diversion plan. The emphasis on calling out disparities for marginalized populations supports the work we have been doing around restorative justice and equity. This data clearly allows us to articulate the disparities that occur before a youth comes through our doors and reinforces that we will continue efforts with key partners like Restorative Justice and Equity to implement restorative practices in our schools and community which are both proactive and help respond when problems arise. Working with partners, we will center the solutions and needs articulated by youth and families of color. The majority of the plan's funding request is to provide Functional Family Therapy to families. This intervention engages family members to address youth's criminogenic risks, needs and strengths by identifying, amplifying and harnessing their own family's unique, culturally-informed way of functioning. Families remain one of the most important locations for effective engagement and long term behavior change. Youth by definition are inextricably connected to their families and caregivers. There is very little likelihood of youth behavior change without the support of their family. Functional Family Therapy, now in its 14th year in Deschutes County, is an evidence based practice to bring family strengths to the forefront when understanding and addressing youth behavior issues. The program receives referrals from many parts of the county, including schools, human services, primary care physicians and families themselves. It continues to have high adherence ratings and remains a certified FFT Inc. site.

► Describe your plan for JCP basic and diversion funds; ATTACH the budget detail sheet when submitting.

For the 2023-2025 biennium Deschutes County Community Justice will continue to utilize a majority of the Basic and Diversion funding to support Functional Family Therapy (FFT) services. Basic funding will support 1 to 1.5 FTE FFT certified therapists to reduce juvenile recidivism by serving medium and high risk youth being supervised on FAAs or Probation for B-C misdemeanors. Diversion funding will support 1 FTE FFT to reduce juvenile recidivism and minimize use of OYA close custody beds by serving high risk youth being supervised on Probation for A misdemeanors or felonies. Basic and diversion funding will be used to support detention medical services (Contract) currently provided by Premise, Inc. which will provide .5 FTE nurse and oversight/consultation of physician to ensure safety and health standards for detained youth. Detention does not reduce recidivism or change behavior; humane, respectful conditions of confinement where basic needs are met professionally and empathetically reduces trauma associated with detention, and supports recovery from past trauma or abuse rampant amongst youth who are detained. We will also use some Basic funding to conduct a gender responsive assessment of our department which will look at our department as a whole to assess how our department provides gender responsive supervision and services. From this assessment, a formal recommendation will be created and the department will work on an action plan with the goal of addressing two to three gender responsive recommendations.

Submitted by

► Michele Winters

Name (print or type)

7/12/2023

X Michele Winters

Michele Winters

Signed by: Michele Winters

Signature and Date