# Juvenile Justice Policy and Data Board

Community Based Interventions
Subcommittee Meeting
April 28, 2025



## **Agenda**

- 1. Introductions
- 2. Approval of February Meeting Minutes
- 3. Dually Involved Youth Project: Guest Presentations



## **DIY Project: Guest Presentations**





# Crossover Youth A Provider Perspective NFI Massachusetts



NFI Massachusetts, Inc.

Executive Director Lydia Todd

Director of Adolescent Residential Services Cindy Powers



## **Crossover Youth**

Youth who enter DYS care and/or custody and are already in the care and/or custody of DCF or have an open case with DCF.



### Crossover Youth

We may also be concerned with youth who crossover from congregate care to DYS detention or commitment. We do not see this happen often.



#### **NFI Massachusetts**

- Provider agency founded 1974 by DYS Assistant Commissioner
- Actively participated in and supported JDAI; has seen decline of DYS programs (from six to two programs)
- Current adolescent programs cover the continuum of care:
  - In home /community services for DCF, DYS and DMH
  - Detention for DYS youth
  - Emergency and Treatment Residences for DCF
  - Intensive Residential Treatment Programs for DMH
  - Pre-IL, IL Programs for DCF



## DCF Residences Operated by NFI

- Emergency Residences—Amesbury and Wilmington
- Treatment Residences
  - Intensive--Beverly
  - Specialty—Haverhill
  - TAY--Haverhill
- Independent Living (transition age youth 18+) Haverhill



#### **Referrals and Admissions**

- Emergency Residences: Short notice, could be same day
- Treatment Residences: Wait list
- Independent Living (transition age youth 18+): Wait list
- Information on past involvement with the courts unavailable/minimal for ER youth.
- If they have an ankle monitor or if they tell us, we will know.
- If DYS committed, we would normally know that or find out quickly.
- JJ involvement does not change our treatment planning but we must factor in court appearances, ankle monitor prescription, curfews, etc.

#### Concern about crossover from ER/TR

- We often have limited information on ER youth
- In ER, some youth may already be court involved
- Challenges if youth act out behaviorally
  - Screeners say it is behavioral (call LE)
  - Law enforcement says it is mental health (go to ER)
- Intensive staff training in adolescent brain development, trauma informed care, least restrictive care, de-escalation and prevention (24 hours and 16 hours annually)
- Staff, families and other youth retain their right to press charges
- Very rare to have a youth cross over from DCF to DYS even if they go to court

### **Examples**

- Youth with ankle monitor running with other youth and stealing cars, going for joy rides. Engaging in sexual activity while on the run
- Assault of staff or other youth and need to manage in emergency department
- Goal is to manage incidents internally unless unsafe to do so
- Work with police departments who can be variable in their understanding of and tolerance for group home behavioral issues
- Rare that we would have DYS committed youth; unique case



## When do we call law enforcement for help?

- Call non-emergency law enforcement if we need to have a child transported to an emergency department for screening
- If we need police response due to a situation that overwhelms our ability to manage, we would call 911
- When police respond, we work with them to try and restore the youth to the program and/or emergency department
- Proactive meetings with emergency responders before we need them is critical



## NFI Massachusetts Training, adolescent group care workers (number of hours)

- Trauma informed care and therapeutic engagement (5)
- Attachment, Regulation and Competency (8)
- Defensive Maneuvers (3)
- Physical Intervention (8)
- Sex Abuse Prevention (4)

- Professional Boundaries (3)
- Incident/Abuse Response and Reporting (2)
- DEIB and LGBTQIA+ (8)
- Suicide prevention (3)



### NFI Massachusetts Policies/Practices

- Agency and program level policies
- Comply with EEC Licensing Requirements and funder policies
- Medication
- Physical Intervention
- Incident/Abuse Reporting
- Training

- Robust Safety Program
- QA/RM Reviews
- Restraint Review
- Missing in Care/AWOL
- Drug screening
- Medical clearance
- CSEC tool for MIC



Detention: A staff or hardware secure location operated by DYS and/or a provider agency to hold youth who have been arraigned, pending court appearance





### **Lakeside Detention**

Staff secure program in Essex County housing up to twelve detained boys and up to two boys being held for overnight arrest. Important not to forget about overnight arrest since we know that 'even one night" in a setting like this can lead to greater involvement in the system. We know that more than 50% of youth in pretrial detention have had DCF involvement (OCA Detention Study)

FY 2024:

71 youth held for ONA

87 youth detained



### **Bright Spots**

- From DYS Detention to DCF!
- Internal placements after identifying ideal location

 Intentional proactive police engagement

### **Challenges**

- While we agree with the decriminalization of adolescent behaviors, sometimes accountability and containment really needed for youth safety and stabilization (high acuity youth)
- Ongoing disruptions and trauma to other youth in program
- Also prevents staff from working with other youth in the program
- Occasional delay in placement from Detention to DCF
- ELMO not available



## Questions, Comments?

## Thank you

NFI Massachusetts, Inc.

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## DYS and DCF in partnership: Detained & Committed Youth

Becki Moore

Senior Director of Community Operations

MA Department of Youth Services

# Overview of DYS' Role at the Detention Stage

- Detained youth are in the care of the Department of Youth Services (DYS) during the pendency of their juvenile cases
- DYS seeks to place detention youth in the most appropriate, least restrictive setting to assure their appearance in court
- The Department utilizes the Detention Placement Recommendation (DPR) Form to structure decision-making around placement
- A varied milieu of services are provided to youth while in detention including but not limited to therapeutic support, medical services, education and substance use prevention
- Detained youth participate in twice weekly Dialectical Behavior Therapy (DBT) groups twice weekly
- In FY25, 16% of detained youth were then committed to DYS

# Overview of DYS' Role at the Commitment Stage

- Committed youth are in the custody of the Department of Youth Services (DYS) following the resolution of a pending delinquency or youthful offender matter
- In large part, commitment includes a residential-based treatment phase followed by community-based placement
- Each youth committed to DYS is assigned a Caseworker
- A thorough assessment is conducted and appropriate placement for each youth is determined via the classification process
- Individualized residential treatment plans are developed for each youth. Youth meet regularly with program-based clinicians to identify treatment goals and review progress toward stated goals. Monthly treatment meetings are held for each youth.
- Residential programs offer a variety of services to youth including but not limited to vocational training, employability, arts, education, recreation and family engagement

# Overview of DYS' Role at the Commitment Stage

- 90-, 60-, and 30-day transition meetings are held to plan for the youth's release to the community
- The DYS Caseworker develops an individualized Case Management Plan (CMP) to support the youth in the community. The CMP delineates community-based services and supports to be delivered which align with the youth's needs and level of risk as determined by the Youth Level of Service/Case Management Inventory (YLS/CMI)
- Each youth is released to a community placement under a Grant of Conditional Liberty (GCL)
- DYS casework staff are located in community-based District Offices and work together with Community Services Network (CSN) contracted staff to serve youth
- Community-based placements may include home with family, pre-independent living, independent living, foster care or non-guardian placement
- All youth discharging from DYS are offered an opportunity to opt into DYS' voluntary
   Youth Engaged in Services (YES) program

## Overview of how DYS and DCF Liaison

- Notification of DCF youth held in detention
- DCF sharing all relevant information with DYS
- Weekly population review meetings
- Clinical staff coordination and communication
- Training

# Highlights of any bright spots and/or challenges

#### **BRIGHT SPOTS**

- Well established points of contact
- Regular participation in population meetings
- Prompt notification of dually-involved youth

#### **CHALLENGES**

- Lack of placement options
- Youth access to community-based caring adults while in detention
- Cross-agency understanding / turnover; enhance training opportunities
- Specificity in meeting agendas, required records and timelines

#### RECOMMENDATION

Update and recirculate the existing MOU

## **Questions?**



## Next Meeting: Monday, June 23<sup>rd</sup>, 11am-12:30pm

(All meetings are virtual; Zoom information is in each calendar invitation)





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