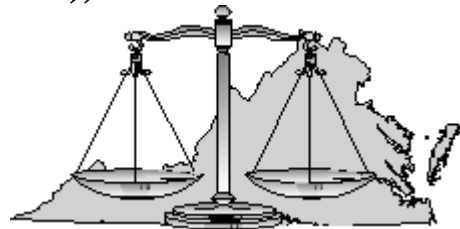


**Department of
Juvenile Justice**

**Juvenile Correctional
Center Utilization Report**

*In response to:
Chapter 890 of the 2011 Virginia
Acts of Assembly (The
Appropriation Act, Item 400 (D.)
(2011))*



October 1, 2011

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Executive Summary

In response to language included in the 2011 Appropriation Act, the Department of Juvenile Justice (DJJ) prepared a report on the utilization of juvenile correctional centers (JCCs), the utilization of detention centers, and the feasibility of the closure of a JCC and the enhancement of transitional programs and re-entry services.

Since fiscal year (FY) 2006, both admissions and average daily population (ADP) decreased every year. Utilization of JCC operating capacity, excluding the Reception and Diagnostic Center (RDC), was 97% in FY 2010. Based on the various treatment needs and other population management concerns among committed juveniles, DJJ has determined that the target utilization for the JCCs, excluding RDC, is approximately 80-85%.

Utilization of the licensed capacity of detention centers was 56% in FY 2010. (Due to utilization and budget constraints, licensed capacity may not represent the number of “operational” or “staffed” beds, which may be significantly lower.) Detention centers have been used for alternative and transitional placements of committed juveniles in the past, and DJJ received a grant award in 2010 for a Juvenile Offender Re-entry Demonstration Project in the Tidewater region, which includes a detention re-entry component.

Options Considered by the Workgroup

Option #1: Implement a statewide detention re-entry program for juveniles to return to the detention center in their home communities during the last 30-90 days of commitment, pending funding, in order to increase re-entry and transitional services.

Implementing a statewide detention re-entry program is a potential option for creating transitional programs in detention centers. In this program, eligible juveniles would return to the detention center in their home communities during the last 30-90 days of commitment in order to receive re-entry and transitional services. The currently established rate for detention re-entry is \$100 per bed per day.

The following considerations must be examined before implementing a detention re-entry program in each individually-operated detention center:

1. Security requirements of juveniles versus physical plants of each detention center
2. Staff levels and distribution in JCCs and each detention center
3. Treatment requirements of juveniles versus services provided at each detention center, including mental health, substance abuse, sex offender, and age- and gender-specific needs of juveniles
4. Availability and continuity of educational services at each detention center, including middle school, high school, GED, vocational, and services for graduates
5. Capabilities of each detention center to house special populations (e.g., sex offenders, juveniles with severe mental health disorders, low-functioning juveniles)
6. Delivery of health services at each detention center

Detention re-entry is the most viable option for utilizing detention center beds for re-entry purposes. The program moves juveniles to their home communities without regionalization, and

it could be incrementally implemented across the state while being monitored and evaluated for effectiveness in reducing recidivism. DJJ is already piloting this program as part of the Second Chance Act Grant, but additional funding is necessary to expand it. The department will continue to identify grant opportunities and potential reallocation of savings. However, serious consideration should be provided for identifying additional funding in the state budget for the allocation of financial support to implement detention re-entry.

Option #2: Investigate the possibility of establishing regional CPPs as alternatives or step-down placement options, with extensive input from the detention centers potentially involved.

Recreating regional CPPs is another potential option for transitional and step-down services. By creating four regional CPPs with ten beds each, juveniles could be placed in the CPP closest to their communities. Since detention centers, rather than DJJ, would operate the programs, the planning necessary to finalize program components and other details of the MOA must be completed with extensive input from the detention centers potentially involved. The same six considerations listed for detention re-entry would also be applicable to CPPs, and additional study, collaboration with detention centers, development of program guidelines, and analysis of costs would be necessary before the possibility of implementation. Furthermore, the regionalization of CPPs is not as desirable as the locality-based approach of detention re-entry, making detention re-entry the better option for a detention-based program for committed juveniles.

DJJ's Recommendations

Recommendation #1: Do not close a JCC at this time.

In order to adequately place and move residents for the purposes of security and program delivery, facilities need more empty beds when there are more individualized needs for treatment and services in the population. Based on the various treatment needs and other population management concerns among committed juveniles, DJJ has determined that the target utilization for the JCCs, excluding RDC, is approximately 80-85%.

This study revealed that the utilization of JCC operating capacity in FY 2010, excluding RDC, was 97%, exceeding the target rate and approaching 100%. Exceeding this figure may cause challenges in placing residents with treatment needs or other placement considerations in the appropriate environment. Therefore, it is not feasible to close a JCC at this time, and additional beds are required for committed juveniles, whether in the JCCs or through detention-based programs. It is recommended that serious consideration be provided for additional beds to be opened, pending funding, utilizing some of the 202 additional beds currently not being used across four JCCs. These beds could be closed as the need for them diminished. However, opening additional housing units would require additional funding.

Even if these beds were opened, it is not a viable option for Oak Ridge, the smallest JCC with 40 beds, to close. Oak Ridge residents require a centralized environment arrangement with single-bed rooms in order to provide effective treatment and services to the low-functioning juveniles. The potentially usable beds would be scattered across four facilities and would not comply with

the necessary single-bed room arrangement. The next smallest facility is Hanover, with a capacity of 120. If all of the potentially usable beds were opened, the utilization rate (excluding RDC) would be 91%, exceeding the target rate of 80-85%. Thus, it is not feasible to close Hanover at this time, and no other facility has an ADP or operational capacity small enough to be able to close while maintaining the target 80-85% utilization rate.

It is important to note that opening additional JCC beds is not intended to “widen the net” and increase the number of committed youth. Opening additional beds would not increase the likelihood of juveniles being committed or decrease the availability or access to detention-based programs. In fact, these beds could be reclosed if the JCC population later decreased due to either a decline in commitments or an increase in the use of detention-based programs. Conversely, should the juvenile offender population begin to increase in the future then action concerning additional bed space will need to occur.

Recommendation #2: Identify funding before implementing the proposed programs in detention centers, opening additional JCC beds, or creating other re-entry programs.

It is not recommended that a facility be closed at this time due to the current population management considerations, and it is unlikely that a facility closure would result in sufficient cost-savings for the immediate implementation of the proposed programs. Therefore, before implementing any of the three options above, funding streams must be identified independently from the reallocation of funds from facility closures. It may be possible to reallocate funding from other existing sources to implement re-entry programs on a limited or smaller scale. Thus, DJJ should conduct ongoing assessments of expenditures in order to identify possible sources for reallocating funding for operational and re-entry purposes. Also, DJJ will continue to investigate possible grant opportunities to help fund programs for committed juveniles. Finally, funding in the state budget could be allocated for these services.

Conclusion

An ongoing process for the long-term planning of JCC utilization and detention-based re-entry programs should be established.

More investigation and analyses are necessary to determine the feasibility of both the implementation of transitional detention programs and resulting changes in the utilization of JCCs. It is recommended that DJJ continue to examine JCC population trends, characteristics and needs of committed juveniles, physical conditions of JCCs, and potential funding sources for programming. Any pilot programs should be monitored to determine the impact on JCC population counts and utilization rates. This examination should become an ongoing process in order to establish long-term planning for the operation of JCCs and the development of detention-based re-entry programs, and decisions to open or close JCC units or facilities and to implement detention-based re-entry programs should be based on these ongoing analyses.

Acknowledgements

The department consulted with an inter-agency workgroup comprised of representatives from the following agencies and organizations: the Department of Correctional Education, the Department of Education, the Virginia Council on Juvenile Detention, juvenile CSU directors, juvenile and domestic relations district court judges, juvenile advocacy groups, the Virginia Prisoner and Juvenile Offender Re-entry Council, the Virginia Municipal League, and the Virginia Association of Counties.

Appreciation goes to the members of the department and the inter-agency workgroup who contributed to this document, with special thanks to Beau Blevins, Cynthia Cave, John Coble, Kate Duval, Bill Hill, Lelia Hopper, Ding Huafeng, Regina Hurt, Michael Ito, Marilyn Miller, Andrew Molloy, Peggy Parrish, Steve Peed, Deron Phipps, Steve Pullen, Fang Qian, Pat Rollston, Lian Rozzell, Tim Smith, Marci Stables, Ralph Thomas, Jessica Turfboer, Angela Valentine, and George Wakefield.

While this report would not have been possible without the work of those listed above, the points of view or opinions contained within this document are those of the department and do not necessarily represent the positions of these individuals or their organizations.

Introduction

Item 400 (D.) of the 2011 Appropriation Act:

“The Department of Juvenile Justice shall prepare a report on the future of juvenile correctional centers (JCCs) in the Commonwealth. The report shall include: (1) an analysis of JCC utilization rates; (2) an analysis of local and regional secure juvenile DH utilization rates; (3) a determination of the appropriate number and types of beds, including security levels, necessary to manage the projected state-responsible and local-responsible juvenile population; and (4) an analysis of options for providing regional transitional programs and re-entry services at selected local and regional juvenile secure detention facilities.

In preparing this report, the department shall consult with representatives of the following: (1) the Department of Correctional Education; (2) the Department of Education; (3) the Virginia Council on Juvenile Detention; (4) juvenile court service unit directors; (5) juvenile and domestic relations district court judges; (6) juvenile advocacy groups; (7) the Virginia Prisoner and Juvenile Offender Re-entry Council; (8) the Virginia Municipal League; and (9) the Virginia Association of Counties. This consultation shall address the prospect of implementing a plan for: (1) the closing of one state juvenile correctional center and reallocating the cost savings to regional transitional programs and re-entry services at selected local and regional juvenile secure detention facilities; and (2) identifying funding to be transferred for the purpose of reinvesting in such programs and services. The report shall detail the feasibility and core components of such a plan and shall include a fiscal analysis of the impact on localities and on the department of the plan. The fiscal analysis shall address state responsibilities related to transportation, education, medication, assistance to support security services provided directly by the juvenile detention facility, and comprehensive programming provided on a contractual basis by private, for-profit and non-profit providers, based on evidenced-based practices.

The report shall be provided to the Governor, the Secretary of Public Safety, and the Chairmen of the Senate Finance and House Appropriations Committees on or before October 1, 2011.”

A Juvenile Correctional Center (JCC) Utilization Report was issued in 2011 in response to language included in the 2011 Appropriation Act. As part of this report, the utilization of secure juvenile detention centers was also required. The department reviewed historical changes in the population of committed juveniles and considered additional programmatic changes and needs to enhance transitional programs and re-entry services.

Underlying Philosophy

DJJ is charged with improving public safety through programs it operates. Additionally, DJJ provides funding to localities to maintain a range of services that are administered in the communities and in secure detention.

For those juveniles committed to the state, the department provides a secure environment designed to prepare them for return to their communities with an enhanced ability to become productive citizens and thus a reduced risk to the safety of the public. This effort includes coordinated parole planning, as well as cooperation and coordination with the many local agencies that will provide services to these juveniles after they are released. Because education is a primary factor in determining success, DJJ works closely with the Department of Correctional Education (DCE) to support the schools operated within the JCCs, to plan for transition to local schools or jobs after release, and to continue to encourage residents to be good citizens outside of

the correctional center setting. Furthermore, the department developed a four-year strategic plan in 2010 for the re-entry initiative with the mission to promote public safety and accountability by implementing a seamless plan of services for each offender for a successful transition and reintegration in the community. Planning for utilization of JCCs must incorporate these ultimate goals.

The JCCs were designed and built to meet needs that have changed over the years. DJJ's utilization plan makes the best use of those facilities to meet the current and projected system needs. DJJ must consider multiple management concerns, including residents' ages security needs, physical sizes, and treatment and educational needs. Additionally, the re-entry needs of residents are important to consider in the utilization plan.

Use of Available Local/Regional Detention Capacity for State Committed Residents

The budget language that requested this report asked the department to analyze the utilization of regional secure juvenile detention centers and to consider options for providing regional transitional programs and re-entry services at selected detention centers. These potential programs could place certain juveniles closer to their homes.

Continuing Challenges

There are a number of challenges that DJJ faces in its attempt to improve the outcomes for juveniles who are committed to the state. As noted, DJJ's institutionalized population includes a greater number of older youth than in the past. These residents require different programming to prepare them to live on their own after release. As will be shown in subsequent sections of this report, the lengths of stay for committed youth have been increasing, particularly considering the numbers of juveniles committed to DJJ after having been convicted in circuit courts.

The relatively small number of females in the JCC population requires additional planning for meeting their gender-specific needs. Furthermore, these residents have differing educational needs. As mentioned earlier, many residents have varying treatment requirements while others suffer mental handicaps.

This report attempts to balance all these needs with the resources that are available to the department to increase successful outcomes for juveniles committed to DJJ. The following sections provide more specific information:

- Part I: DJJ JCCs and Local/Regional Detention Centers
- Part II: Historical Trends
- Part III: Snapshot JCC Population (Population on February 1, 2011)
- Part IV: Juvenile Population Forecast
- Part V: Historical Detention Center Uses for Committed Juveniles
- Part VI: Historical Fiscal Summary
- Part VII: Conclusions

Part I: JCCs and Local/Regional Detention Centers

JCCs

DJJ currently operates five JCCs and a Reception and Diagnostic Center (RDC) to serve juveniles committed to the state. The JCCs and RDC had a combined operating capacity of 917 as of June 30, 2010. (For the purposes of this report, “JCCs” will be used to refer to both RDC and the five correctional centers unless otherwise specified.) Each JCC’s ADP, operational capacity, and utilization rate are listed below:

JCC ADP, Capacity, and Utilization, FY 2010

	ADP	Capacity	% Utilization
Beaumont	265	284	93%
Bon Air	178	193	92%
Culpeper	145	144	101%
Hanover	118	120	98%
Oak Ridge	40	40	100%
<i>JCC Total*</i>	<i>761</i>	<i>781</i>	<i>97%</i>
RDC	98	136	72%
<i>State Total*</i>	<i>859</i>	<i>917</i>	<i>94%</i>

* Includes 15 residents at Natural Bridge JCC before it closed on 10/9/09.

See page 8 for additional details on individual facilities.

The Behavioral Services Unit (BSU), Central Infirmary, Youth Industries, Bon Air Complex Maintenance, Health Services Unit, and Food Services Unit provide support to the JCCs. The educational needs of the committed juveniles are met by DCE. Through contractual agreements with providers, DJJ offers supplemental programs and services in environments designed to more intensely deliver services. All programs within the institutions offer community reintegration and specialized services in a secure residential setting, taking into consideration adjustments in service delivery during the course of operation.

Treatment and Educational Services

BSU is the organizational unit responsible for providing treatment services to residents of RDC and the JCCs. The primary services provided by BSU staff include mental health, substance abuse, sex offender, and aggression management treatment services, as well as psychological and risk assessments.

Mental Health Treatment

BSU conducts comprehensive psychological evaluations of all youth committed to DJJ while they are residents at RDC. At each facility, BSU provides 24/7 crisis intervention; individual, group, and family therapy; mental status evaluations; case consultations and development of individualized behavior support protocols; program development and implementation; and staff training. Three JCCs have intensive services units for residents whose mental health needs do not

allow them to function effectively in the general population of the institution. Risk assessments are completed for all serious and major offenders when they are considered for release.

Psychiatric services at each of the facilities include psychiatric evaluation and medication management. Psychiatric services are provided through contracts with psychiatrists from the Virginia Commonwealth University School of Medicine as well as the private sector.

Substance Abuse Treatment

Evidence-based substance abuse treatment services are provided in specialized treatment units as well as in the general population at each of the JCCs. Treatment emphasizes motivation to change, drug and alcohol refusal skills, addiction/craving coping skills, relapse prevention, problem solving, effective communication, and transition to the community, among other skills. Individualized treatment planning allows residents with co-occurring disorders or specialized needs to receive additional intervention, including individual, group, and family therapy. Girls with substance abuse treatment needs participate in a specialized treatment unit program that is evidence-based and addresses gender-specific issues, including female sexuality, trauma, and grief and loss. Depending upon individual needs, completion of substance abuse treatment services requires five weeks to six months.

Sex Offender Treatment

DJJ opened its first state-operated juvenile sex offender unit in 1990. Currently, there are seven sex offender units (a total of 112 beds) with at least one unit at each of the JCCs. Evidence-based sex offender evaluation and treatment services are also provided in the general population and the intensive services units at the JCCs. Residents in sex offender treatment units receive intensive treatment from a multi-disciplinary treatment team that includes a unit manager, counselor, psychologist, and social worker. Specialized sex offender treatment units offer an array of services, including individual, group, and family therapy. Each resident receives an individualized treatment plan that addresses programmatic goals, competencies, and core treatment activities. Successful completion of sex offender treatment may require six to 36 months depending upon the treatment needs, behavioral stability, and motivation of the resident. Median treatment time is approximately 18 months.

Aggression Management

Evidence-based aggression management treatment services are provided at each of the JCCs. Residents receive treatment in specialized units as well as in the general population from multidisciplinary treatment teams consisting of mental health professionals, institutional counselors, and security staff. Residents must complete core objectives that address anger control, moral reasoning, and social skills as well as demonstrate aggression management in their environment. Depending upon individual needs, treatment completion requires 10 to 16 weeks or longer. Some facilities have housing units with a treatment program combining Aggression Management and Substance Abuse (AMSA) services.

Education/Vocational Services

DCE meets the educational needs of committed juveniles through school and vocational programs. With the exception of RDC, DCE operates a school at every facility. The specific

educational and vocational programs offered at each facility depend on the needs of each population.

Re-Entry Programs

The department developed a four-year strategic plan in 2010 for the re-entry initiative with the mission to promote public safety and accountability by implementing a seamless plan of services for each offender for a successful transition and reintegration in the community. While some re-entry programs already existed, several additional re-entry programs were created to support the re-entry initiative.

Work/Education Release Program

The Work Education Release Program (WERP) housed at RDC accommodates 12 male participants and provides education and work experience outside of a JCC. A priority for wages earned is to pay any restitutions, fines, or court costs prior to the resident's release to the community. In addition to equipping residents with employability skills or furthering their education, the program provides a life skills component that includes financial planning, culinary skills, social etiquette, personal hygiene, parenting skills, household cleanliness, vocational preparation, and moral reasoning.

Female Transition and Work/Education Release Unit

Bon Air JCC operates a six-bed transition/WERP unit for its female population, utilizing grant funds administered by the Department of Criminal Justice Services (DCJS). Female residents who are eligible for the Work/Education Release Program or are within six months of their release dates are housed in a separate unit from the general female population. The participants live in a unit modified to resemble a typical homelike environment that includes a kitchen, dining area, common area/family room, and individual bedrooms. While in this new environment, the residents receive intensive life skills programming as preparation for a successful re-integration to the community.

Badges for Baseball

The Cal Ripken, Sr. Foundation (CRSF) developed a curriculum to pair at-risk youth with law enforcement officers who serve as mentors in a structured activity and curriculum based program. Its concept of pairing officers with juveniles is designed to reshape the relationship between law enforcement and at-risk youth. The Ripken Foundation agreed to bring their concept to Hanover JCC and apply it within a correctional facility for the first time. Participating residents are paired with law enforcement mentors and complete a 12-session program consisting of an educational curriculum that teaches life skills concepts via sports terminology in conjunction with an athletic program. Funding for this program was provided by a grant from the Governor's Office on Substance Abuse (GOSAP).

Mentoring Project

DJJ, in partnership with the *Virginia Mentoring Partnership*, has developed a Mentoring Project. The Project is designed to provide committed juveniles who are within 90 days of their projected release date with an adult to aid him or her overcome specific risk factors. The mentor-mentee relationship will begin a minimum of 60 days prior to a resident's release while the juvenile is still in direct care. The relationship will continue in the community for an additional 10 months

post-release. The program's goal is to increase the juvenile's competencies in the areas of consequential thinking, impulse control, problem-solving, decision-making, interpersonal relationships, and goal setting. Funding for this program was provided by a grant from the Governor's Office on Substance Abuse (GOSAP).

Mental Health Services Transition Plans

For those residents with mental health needs, facility counseling staff work with the assigned CSU staff to facilitate a case review meeting 90 days prior to release that includes the institutional counselor, BSU therapist, parole officer, resident, resident's family, and community services providers. In this meeting, these parties collaboratively develop a mental health services transition plan for the resident to provide a seamless transition from facility to community with no lapse in mental health services.

Responsibility, Empowerment, Achievement, Change, and Hope (REACH)

The department's behavior management program used in the facilities, called REACH, provides residents with the knowledge, skills, and abilities necessary for rehabilitation, positive growth, and behavioral change. Through participation in REACH, residents earn credits for positive behavior. They use these credits to purchase reinforcers or privileges. The main premise behind REACH is to teach residents to make better, independent choices and decisions to provide for a positive transition following release.

Youth Industries

Recognizing that many of the youth released to the community from the JCCs are not prepared to enter the work force, the Youth Industries Program was created to help participants overcome barriers to employment and was designed as a partnership with DCE and the U.S. Department of Labor (DOL). DJJ manages its programs so that juveniles are offered meaningful opportunities to learn employable skills and to practice those skills in a constructive environment. Participants engage in employment provided both on the JCC grounds and in local communities through agreements with agencies of state and local government, private employers, foundations, and charitable organizations. Fields of study include horticulture, silk screening, offset printing, food service, immediate assembly, electrical, barbering, embroidery, vinyl sign-making, and advertising and design. DJJ, in conjunction with DCE, utilized DOL grant funding from two separate grants to build and enhance Youth Industry programming. Since expiration of the grant funding, DJJ and DCE have assumed all program-related costs to ensure that these opportunities continue to be available for residents.

Phoenix Program

The Phoenix Program is an evidence-based curriculum developed by A. R. Phoenix Resources, Inc. The curriculum helps residents develop a variety of behavioral, cognitive, and affective skills necessary to function effectively in the institutions and community settings. This curriculum, designed for adolescents, includes skills such as decision-making, problem-solving, anger management, coping skills, relapse prevention, returning home, vocational issues, understanding and handling feelings, and dealing with transitions.

Transitional Services

An array of transitional services is provided statewide by a network of contracted vendors from which the local CSUs purchase services for paroled juveniles and their families. The intent of community-based transitional services is to provide short-term non-residential services to support and assist the juvenile's adjustment to the community following commitment. Clinical services such as sex offender and substance abuse treatment build upon treatment that was initiated during commitment. Services focus on criminogenic needs in the individual, peer group, family, school, and community domains. The utilization of contracted services is guided by the youth's level of risk and need with resources focused on those youth at greatest risk of re-offending and those whose offense pattern represents a particular risk to community safety.

Halfway Houses

The department operates two halfway houses: Hampton Place, located in Norfolk, and Abraxas House, located in Staunton. The halfway houses are designed to provide transitional skills to juveniles released from the JCCs. Each halfway house program is designed to take advantage of the unique resources available in its community to meet the needs of the residents. Upon completion of the program, the resident will have gained additional skills to promote a continued positive adjustment and reduce the risk of recidivism.

Second Chance Act Grant for Re-Entry

The department, in partnership with Tidewater Youth Services Commission (TYSC), received a grant award of \$675,000 from the Office of Justice Programs at the U.S. Department of Justice for a Juvenile Offender Re-entry Demonstration Project. The project will serve high- and moderate-risk parolees up to the age of 21 from the cities of Chesapeake, Virginia Beach, Portsmouth, Norfolk, Suffolk, Newport News, and Hampton; and the counties of Southampton, Franklin, and Isle of Wight. The grant funding and matching DJJ funds support a comprehensive range of services and provide for graduated re-entry options to address challenges posed by re-entry and to reduce recidivism. The program is grounded in research-based principles and implements evidence-based modalities targeting criminogenic needs.

Family Link Pilot Video Visitation

The Family Link program allows juvenile offenders and their family members to visit via video in collaborative sites operated by DJJ and non-profit agencies. This contact will augment and support the DJJ visitation program while fostering a stronger family connection to enhance re-entry initiatives. New Jubilee Inc., located in Richmond, coordinates the services; and the program is being piloted at Culpeper JCC. The video services are available to families at Saint James United Methodist Church in Hampton, Virginia. Additional facilities and visitor centers will be added in the future.

Re-Entry to Education and Employment Project (REEP)

REEP is a cooperative initiative between the department and the Peninsula Area Worklink, a workforce investment board that serves the Hampton, Newport News, and Williamsburg areas. The One-Stop site within Beaumont JCC allows certain juveniles to participate in job training and to access job-search services under the Commonwealth of Virginia's SHARE Network Program. Upon release from custody, the juveniles are given opportunities for on-the-job training and apprenticeship programs through the employers who work with Peninsula Worklink. The

goal under REEP is to have participants work full time in stable jobs following their release, thereby improving community reintegration and lowering recidivism rates for this population.

RDC and JCC Facilities

The following descriptions provide additional information for each facility, including an outline of specialized programming, housing capacities, outstanding capital outlay needs, and total expenditures.¹ It should be noted that many of these facilities contain buildings that have exceeded originally anticipated life-cycle use. A number of renovations and expansions have been made over the past 10 years; however, some structures remain in need of extensive renovation. This report highlights some of the capital improvement needs for each facility but is not comprehensive.

C. R. Minor Reception and Diagnostic Center (RDC)

RDC consists of six housing units: three with dormitory-style and three with single rooms. Bon Air and Oak Ridge JCCs are located on the same property as RDC. RDC is the central intake facility for the entire juvenile correctional system. All newly committed residents, regardless of age, offense history, or committing court (circuit or juvenile and domestic relations) are housed initially at RDC. Juveniles undergo extensive psychological, educational, and other assessments to determine the most appropriate treatment during their commitment. Each juvenile is also assigned a classification level at RDC to guide facility placement decisions using an objective point system: 1 (Low), 2 (Medium), 3 (High), or 4 (Maximum).

In April of 2011, females were no longer admitted to RDC and were admitted directly to Bon Air JCC, the only JCC housing females. Females continue to receive the full series of psychological, medical, dental, and educational assessments at RDC.

RDC also operates the Work/Education Release Program (WERP) to provide residents with off-site employment opportunities and a community college education. Youth Industries provides residents with the opportunity to participate in the Embroidery Enterprise program while at RDC.

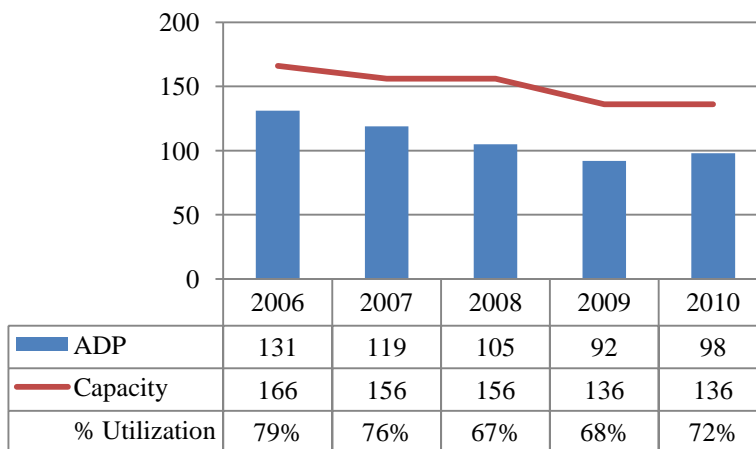
DCE provides educational services in the living units, including academic and vocational instruction and assessment.

- Population Profile: Males, Ages 11-20, All Classification Levels
- FY 2010 Operating Capacity: 136
 - General Population Capacity: 114
 - Isolation Capacity: 10
 - Work/Education Release Program: 12
- FY 2010 Additional Capacity: 18 beds repurposed for programming

¹ As delineated in the Appropriation Act, expenditures are captured by the following categories: Juvenile Corrections Center Management, Food Services, Physical Plant Services, Offender Classification and Time Computation Services, Juvenile Supervision and Management Services, Medical and Clinical Services, and Juvenile Rehabilitation and Treatment Services. See Chapter 890 of the 2011 Virginia Acts of Assembly (The Appropriation Act, Item 400 (D.) (2011)).

- FY 2010 ADP: 98
- FY 2010 Utilization Rate: 72%
- Outstanding Capital Needs:
 - Projects include HVAC, fire safety and electrical upgrades, and windows.
 - Funding for the new 42,365 sq. ft. DCE school and infirmary to serve RDC has been allocated by the General Assembly. This building is currently scheduled for August 2011.
 - Additional renovations are needed.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.
- Staffing: 136.5 positions
- FY 2010 Expenditures: \$9,529,468

RDC ADP and Capacity, FY 2006-2010



Beaumont

Beaumont JCC has two separate campuses within the facility: maximum and medium. All units on the maximum security campus have single rooms. Units on the medium security campus have single, double, and four-person rooms. There are also unfunded transitional cottages at Beaumont that were built with double rooms.

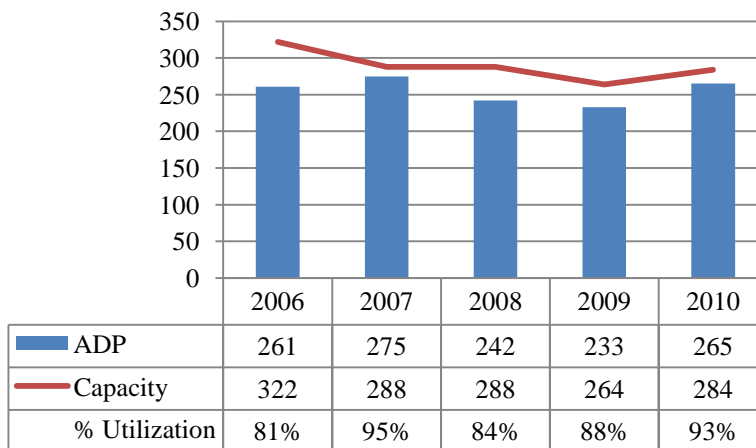
Beaumont JCC provides specialized programs, including aggression management; sex offender; substance abuse; life skills; Youth Industries; institutional work program; intensive services unit for individuals with special needs; individual, group, and family therapy provided by social workers and psychologists; enhanced transitional parole; and religious/recreation/volunteer programs.

DCE provides educational services at Paul S. Blandford School and Annex, including a comprehensive high school education program, GED preparation and testing, reading, tutorial, career and technical, apprenticeship, College Bound, and SAT preparation and testing. See *Appendix B: DCE School Courses and Vocational Training* for more details on educational and vocational programs offered by DCE.

- Population Profile: Males, Ages 17-18.5, Classification Levels 3-4

- FY 2010 Operating Capacity: 284
 - General Population Capacity: 146
 - Sex Offender Treatment Capacity: 30
 - AMSA Treatment Capacity: 24
 - ASU/ISU/Isolation/Observation Capacity: 44
- FY 2010 Additional Capacity: 66
 - 36 closed beds
 - 30 beds reopened but remain unfunded
- FY 2010 ADP: 265
- FY 2010 Utilization Rate: 93%
- Outstanding Capital Needs:
 - Emergency water system piping replacement is currently under construction.
 - Conversion to a propane delivery system is currently being designed.
 - A new fiber-optic security and communication system and additional renovations are needed.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.
- Staffing: 303 positions
- FY 2010 Expenditures: \$21,687,869

Beaumont ADP and Capacity, FY 2006-2010



Bon Air

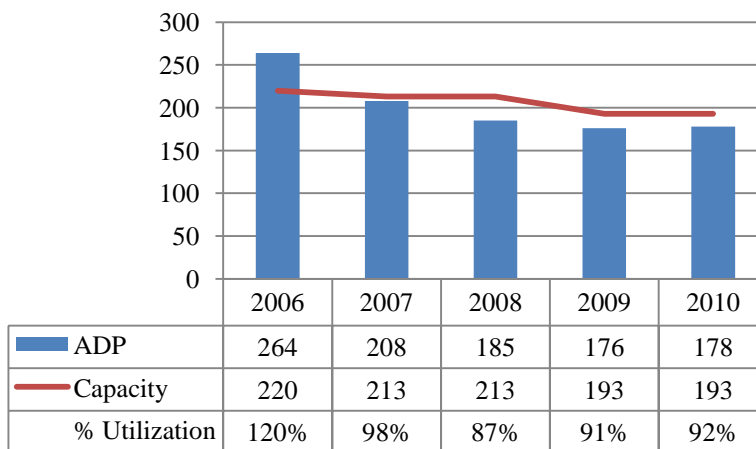
Bon Air JCC includes two distinct housing designs: open campus and self-contained. The older section of the facility is constructed as an open campus, containing seven housing units with single and dormitory-style rooms. The self-contained building includes eight residential living units with single, double, and four-person rooms.

Bon Air JCC provides specialized programs, including aggression management; sex offender; substance abuse; Youth Industries; institutional work program; intensive services unit for individuals with special needs; individual, group, and family therapy provided by social workers and psychologists; gender specific programming; enhanced transitional parole; and religious/recreation/volunteer programs.

DCE provides educational services at Joseph Mastin School and Annex, including a comprehensive high school education program with GED preparation and testing, reading, tutorial, career and technical, apprenticeship, distance learning for future college courses, cognitive skills training, and SAT preparation and testing. See *Appendix B: DCE School Courses and Vocational Training* for more details on educational and vocational programs offered by DCE.

- Population Profile: Males, Ages 11-16, Classification Levels 3-4 / Females, Ages 11-20, All Classification Levels
- FY 2010 Operating Capacity: 158 Males, 35 Females (Total: 193)
 - General Population Capacity: 65
 - Female Work/Education Release Program Capacity: 6
 - Female Substance Abuse Treatment Capacity: 19
 - Male AMSA Treatment Capacity: 19
 - Sex Offender Treatment Capacity: 38
 - ASU/ISU/Observation Capacity: 46
- FY 2010 Additional Capacity: 72
 - 40 closed beds
 - 12 beds repurposed for programming
 - 20 beds requiring extensive repair
- FY 2010 ADP: 178
- FY 2010 Utilization Rate: 92%
- Outstanding Capital Needs:
 - Projects include HVAC, fire safety upgrades, windows, roof replacement, electrical upgrades, and a main electrical feed upgrade.
 - A new fiber-optic security and communication system and additional construction and renovations are needed.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.
- Staffing: 246 positions
- FY 2010 Expenditures: \$16,767,932

Bon Air ADP and Capacity, FY 2006-2010



Culpeper

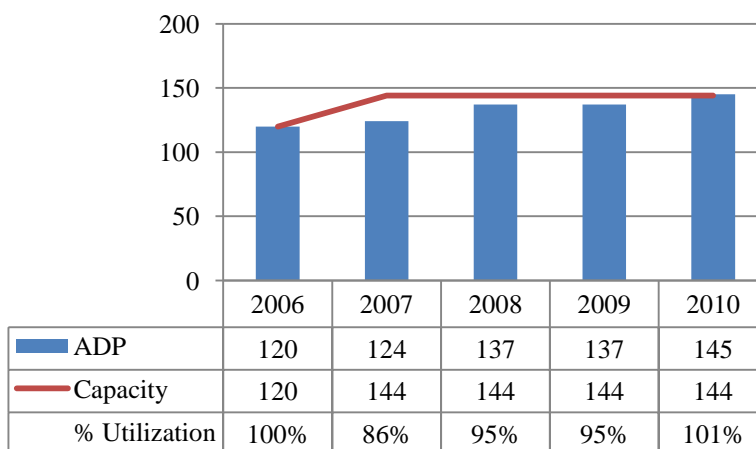
Culpeper JCC consists of a main support building and four housing unit buildings, each with four pods of single rooms. In addition, a 50-bed detention center is on the property.

Culpeper JCC provides specialized programs, including aggression management; sex offender; substance abuse; Youth Industries; institutional work program; independent living; intensive services unit for individuals with special needs; individual, group, and family therapy provided by social workers and psychologists; religious/recreation/volunteer programs; and barbering/horticulture programs initiated by a DOL grant.

DCE provides educational services at Cedar Mountain School, including a comprehensive high school education program with GED preparation and testing, reading, tutorial, career and technical, apprenticeship, distance learning for future college courses, cognitive skills training, and SAT preparation and testing. See *Appendix B: DCE School Courses and Vocational Training* for more details on educational and vocational programs offered by DCE.

- Population Profile: Males, Ages 18.5-20, Classification Levels 3-4
- FY 2010 Operating Capacity: 144
 - General Capacity: 132
 - Sex Offender Treatment Capacity: 12
- FY 2010 Additional Capacity: 96, including 48 detention center beds
- FY 2010 ADP: 145
- FY 2010 Utilization Rate: 101%
- Outstanding Capital Needs:
 - There are no outstanding capital needs at Culpeper at this time.
- Staffing: 187 positions
- FY 2010 Expenditures: \$12,056,741

Culpeper ADP and Capacity, FY 2006-2010



Hanover

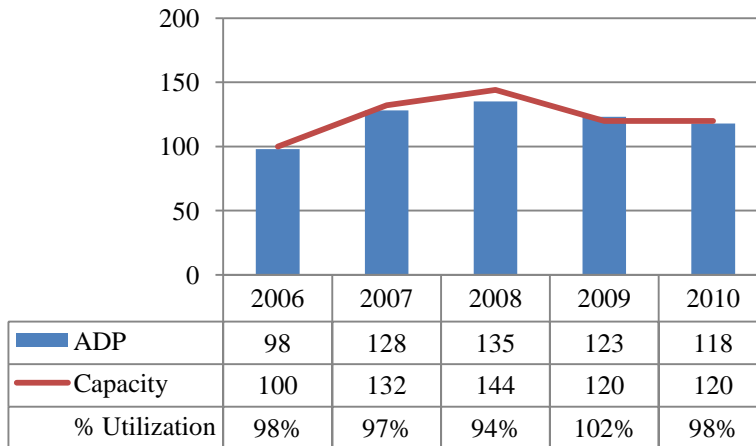
Hanover JCC has nine cottages with primarily dormitory-style and some single rooms. The deed for the property stipulates that should the facility cease operation, the 1,400 acres will revert to

the heirs of Collis P. Huntington, who originally loaned the property to the Negro Reformatory Association for use as a school for young men.

Hanover JCC provides specialized programs, including JROTC; aggression management; sex offender; substance abuse; Youth Industries; institutional work program; intensive services unit for individuals with special needs; individual, group, and family therapy provided by social workers and psychologists; and religious/recreation/volunteer programs.

DCE provides educational services at John H. Smyth School, including a comprehensive high school and full middle school curriculum with GED preparation and testing and career and technical programs. See *Appendix B: DCE School Courses and Vocational Training* for more details on educational and vocational programs offered by DCE.

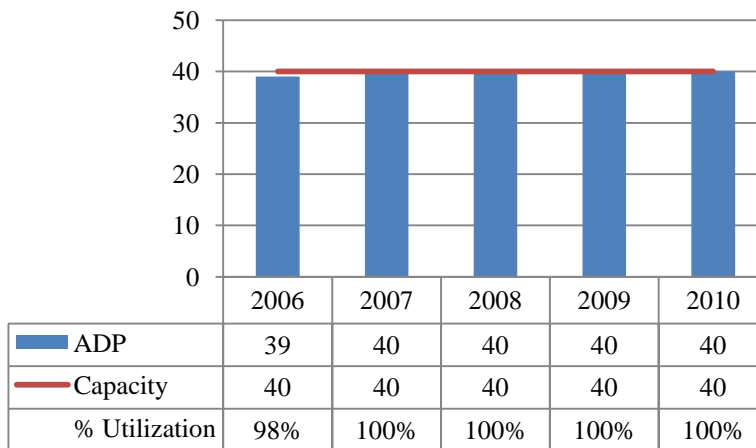
- Population Profile: Males, Ages 11-20, Classification Levels 1-2
- FY 2010 Operating Capacity: 120
 - General Capacity: 72
 - Sex Offender Treatment Capacity: 18
 - AMSA Treatment Capacity: 18
 - ASU/Isolation Capacity: 12
- FY 2010 Additional Capacity: 58
 - 30 closed beds
 - 28 beds requiring extensive repair
- FY 2010 ADP: 118
- FY 2010 Utilization Rate: 98%
- Outstanding Capital Needs:
 - Projects include a propane piping system, duress alarm system, emergency generator, water system piping replacement, DCE school fire alarm and sprinkler system upgrades, and construction of a new entry building.
 - Correcting the damage resulting from Tropical Storm Gaston is scheduled for 2011-2012.
 - HVAC, fire safety, windows, doors, electrical, fire upgrades, and additional construction are needed.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.
- Staffing: 143 positions
- FY 2010 Expenditures: \$10,618,327

Hanover ADP and Capacity, FY 2006-2010***Oak Ridge***

Oak Ridge JCC is a single building with four housing units, each having ten individual rooms. Oak Ridge provides specialized programs for mild to moderately mentally impaired or developmentally delayed juveniles, including aggression management; substance abuse; sex offender; Youth Industries; institutional work programs; individual, group, and family therapy provided by social workers and psychologists; token economy program; and religious/recreation/volunteer programs.

DCE provides educational services at W. H. Crockford School, including comprehensive special education curriculum and career and technical programs. See *Appendix B: DCE School Courses and Vocational Training* for more details on educational and vocational programs offered by DCE.

- Population Profile: Males, Ages 11-20, All Classification Levels, Low Intellectual Functioning (measured by an IQ score less than 75 and Woodcock Johnson Math, Reading, and Writing grade scores less than fifth grade). Final placement decisions are made by the Custody Classification Review Committee (CCRC).
- FY 2010 Operating Capacity: 40
 - General Population Capacity: 30
 - Sex Offender Treatment Capacity: 10
- FY 2010 Additional Capacity: None
- FY 2010 ADP: 40
- FY 2010 Utilization Rate: 100%
- Outstanding Capital Needs:
 - Phase 2 of retrofitting supplementary cell heating units is currently under design.
 - New construction of a 20,000 sq. ft. building should be considered.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.
- Staffing: 67 positions
- FY 2010 Expenditures: \$4,149,917

Oak Ridge ADP and Capacity, FY 2006-2010***Closed Facilities******Barrett***

As a result of recommendations made in the previous utilization report mandated by the General Assembly, Barrett JCC was closed in June 2005.

- FY 2010 Operating Capacity: 0
- Constructed Capacity: 112
- Outstanding Capital Needs:
 - Projects at Barrett have been suspended due to the facility closure, but include HVAC, fire safety, windows, and doors.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.

Natural Bridge

Due to mid-fiscal year budget reductions, DJJ was required to close Natural Bridge JCC in October 2009.

- FY 2010 Operating Capacity: 0
- Constructed Capacity: 61
- Outstanding Capital Needs:
 - Projects at Natural Bridge have been suspended due to the facility closure, but include a campus-wide fire safety system upgrade, water piping replacement, waste water piping replacement, renovation/expansion of the gymnasium, and new construction.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.

Cedar Lodge Training Facility

The Cedar Lodge Training facility occupies a former housing unit of RDC on the Bon Air JCC campus. The training program housed at Cedar Lodge trains newly hired juvenile correctional officers and provides a range of introductory and in-service offerings for professionals who work with juveniles in all of the department's divisions. Training for support staff is also offered.

- Outstanding Capital Needs:
 - Renovations are needed but are not funded.
 - See *Appendix A: Outstanding Capital Needs* for more detailed information.

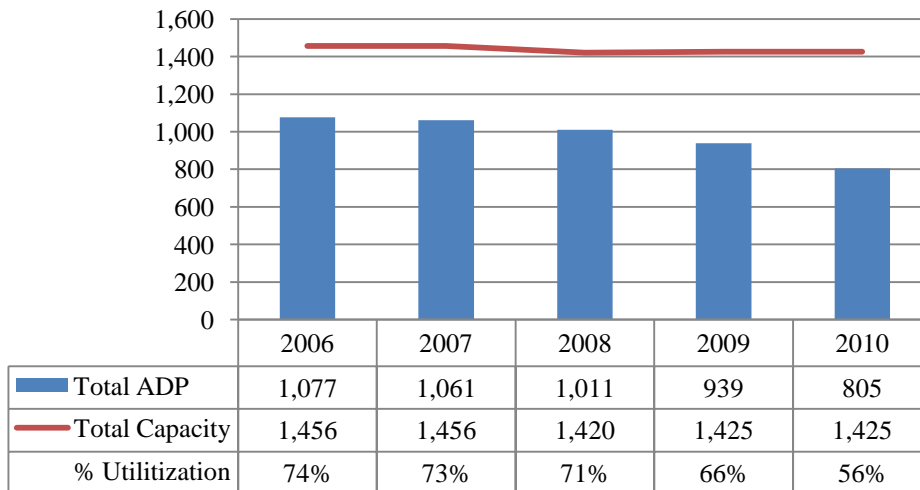
Local/Regional Detention Centers

There are 24 secure detention facilities throughout the state. Twelve of these facilities are locally operated, and 12 are run by commissions (political entities comprised of three or more localities). DJJ provides partial funding for construction and operations and serves as the regulatory agency for these facilities. These community-based, residential facilities provide temporary care for delinquents and alleged delinquents requiring secure custody pending court disposition or placement.

Section 16.1-322.1 of the Code of Virginia specifies that DJJ will provide funding for the operational support of local and regional detention facilities. The department, in partnership with the Virginia Council on Juvenile Detention, establishes a formula for the distribution of funds specified in each year of the Appropriations Act for the support of detention operations. The current methodology for distribution of block grant dollars takes into consideration a facility’s certified capacity and historic utilization. Based on FY 2010 operational expenditure information submitted by each of the 24 local and regional juvenile detention facilities, the state share of funding for detention operations represents 39%. Operational expenditures for all detention facilities totaled \$84,146,549 for FY 2010.

It is important to note that the detention capacities used throughout this report represent the number of licensed beds; due to utilization and budget constraints, it may not represent the number of “operational” or “staffed” beds, which may be significantly lower.

*Statewide Detention Center ADP and Capacity, FY 2006-2010**



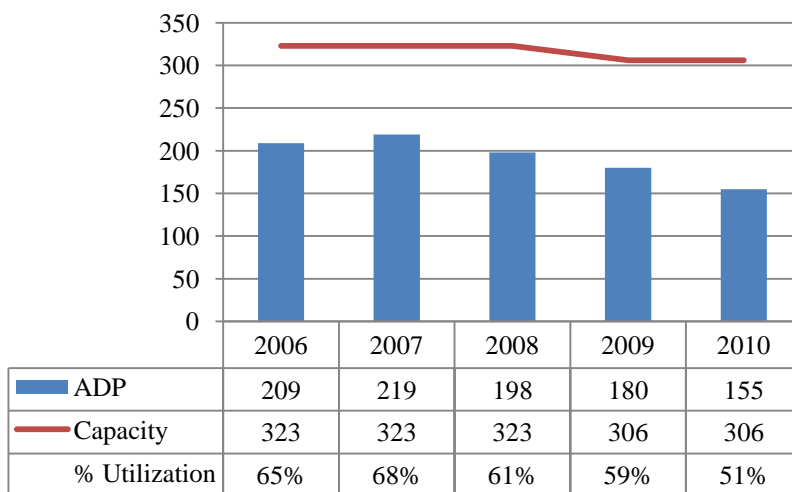
*Detention Center and Regional ADPs may not add to Statewide ADP due to rounding. Juveniles with missing disposition statuses are included.

The detention centers are organized in three regions¹ as follows:

Region 1

- Highlands Juvenile Detention Center
- Lynchburg Regional Juvenile Detention Center
- New River Valley Juvenile Detention Home
- Piedmont Regional Juvenile Detention Center
- Roanoke Valley Juvenile Detention Center
- Shenandoah Valley Juvenile Center
- W. W. Moore, Jr. Detention Home

*Region 1 Detention Center ADP and Capacity, FY 2006-2010**

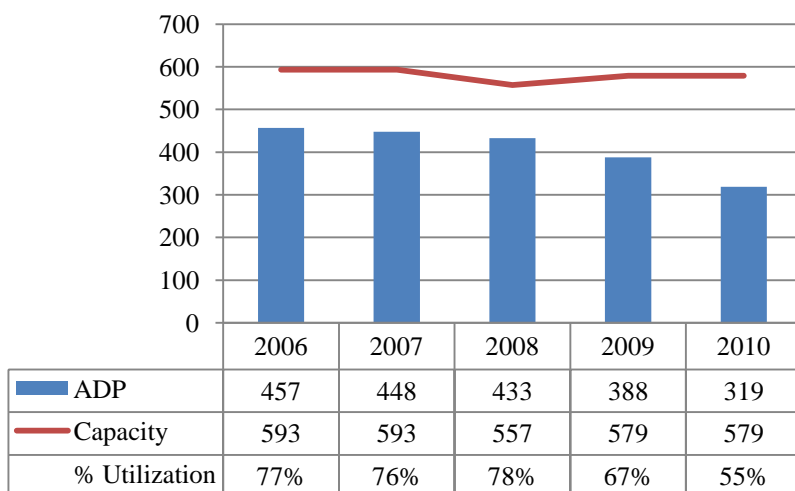


* Detention Center ADPs may not add to Regional ADPs due to rounding, and regional ADPs may not add to Statewide ADPs due to rounding. Juveniles with missing disposition statuses are not included.

Region 2

- Blue Ridge Juvenile Detention Home
- Fairfax County Juvenile Detention Center
- Henrico Juvenile Detention Home
- James River Juvenile Detention Center
- Loudoun County Juvenile Detention Center
- Northern Virginia Juvenile Detention Home
- Northwestern Regional Juvenile Detention Center
- Prince William County Juvenile Detention Home
- Rappahannock Juvenile Detention Center
- Richmond Juvenile Detention Home

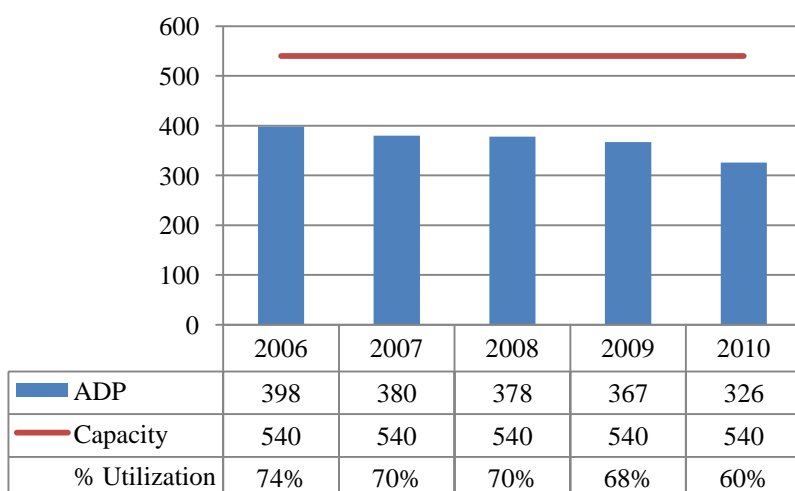
¹ During the writing of this report, the divisions were modified from three regions to six regions.

*Region 2 Detention Center ADP and Capacity, FY 2006-2010**

* Detention Center ADPs may not add to Regional ADPs due to rounding, and regional ADPs may not add to Statewide ADPs due to rounding. Juveniles with missing disposition statuses are not included.

Region 3

- Chesapeake Juvenile Services
- Chesterfield Juvenile Detention Home
- Crater Juvenile Detention Home
- Merrimac Center
- Newport News Secure Detention
- Norfolk Juvenile Detention Center
- Virginia Beach Juvenile Detention Center

*Region 3 Detention Center ADP and Capacity, FY 2006-2010**

* Detention Center ADPs may not add to Regional ADPs due to rounding, and regional ADPs may not add to Statewide ADPs due to rounding. Juveniles with missing disposition statuses are not included.

See the first table of *Appendix C: Detention Center ADP, Capacity, and Utilization* for each detention center's ADP, capacity, and utilization rate.

Programs and Services

Detention Home Education Programs (DHEPs) are provided in all 24 of Virginia's local and regional juvenile detention centers and are supervised by the Virginia Department of Education (DOE). Education and instructional objectives are tailored to meet the individual student's needs in coordination with the detention center staff and within the confines of the detention center. A minimum of 5.5 hours per day, or 27.5 hours per week of instructional time is available for each student. In an effort to assure a smooth educational transition into and out of the detention center, education staff will provide a comparable education program by following as closely as possible the student's home school education program (i.e., curricula, assignments, textbooks). All curricula in DHEPs are based on the standards of learning (SOLs) and the curriculum of the local school division where the detention center is located or based on one of the school divisions served. Instructional programs may include basic education skills; prevocational, vocational, and career education; preparation for high school graduation; affective education skills; preparation for GED; life skills; employment; and transition services. DOE provides educational services to all youth admitted to detention facilities, regardless of the juvenile's grade, age, schooling history, or GED status.

Twenty-three community services boards (CSBs) provide mental health and substance abuse services in juvenile detention centers. CSBs staff (a clinician and a case manager) at the local juvenile detention center provide mental health screening/assessment and other mental health and substance abuse services as indicated through the initial intake assessment process. All 23 programs are currently funded entirely with state general funds.

For staffing at each detention center, see *Appendix D: Detention Center Staffing*.

Part II: Historical Trends

This section will examine the number of cases and trends concerning juvenile justice, including:

- Intake
- Detention
- JCC Admissions
- Length of Stay
- Commitment Types
- Female Residents
- Special Populations
 - Includes sex offenders, substance abusers, and juveniles with mental health needs.

Intake

Intake Case Offense Severity, FY 2006-2010

	2006	2007	2008	2009	2010
Felonies:					
Against Persons	4,039	3,872	3,505	3,170	2,736
Weapons/Narcotics	917	875	816	683	566
Other	6,843	6,795	6,547	6,359	5,151
Class 1 Misdemeanors:					
Against Persons	10,603	9,792	9,177	8,928	8,416
Other	16,734	16,697	17,076	17,738	15,575
Prob./Parole Violation	5,285	4,991	4,332	4,275	3,827
Court Violation	4,153	3,929	3,981	3,950	3,475
Status Offenses	11,196	11,568	10,739	10,665	9,509
Other	5,602	5,330	5,769	5,611	5,232
<i>Total Juvenile Case</i>	<i>65,372</i>	<i>63,849</i>	<i>61,942</i>	<i>61,379</i>	<i>54,487</i>

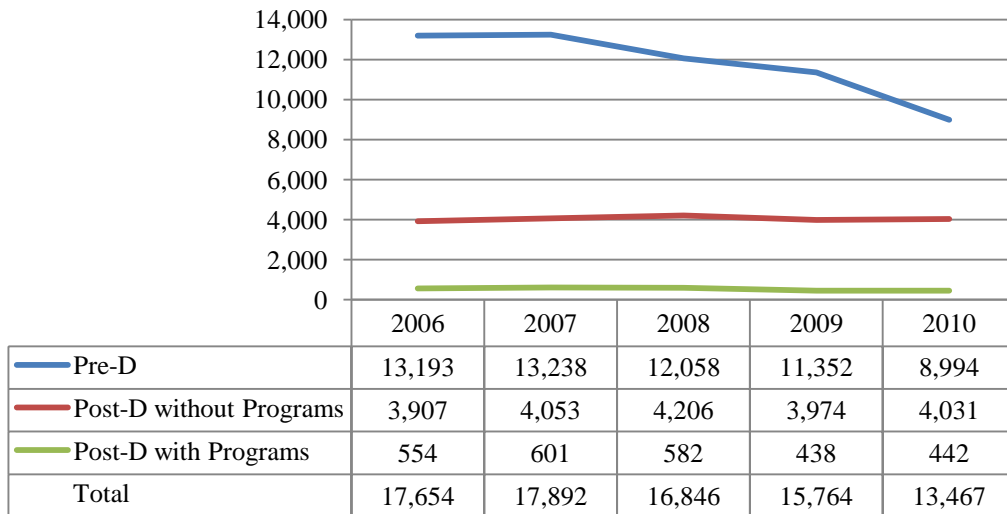
- Between FY 2006-2010, intake cases decreased by nearly 11,000 cases (17%).
 - The number of felonies decreased 28%, more than any other offense severity.
- 16-18% of intake cases were felonies.
- 41-44% of intake cases were class 1 misdemeanors.
- 20-22% of intake cases were against persons (felony or class 1 misdemeanor).
- 7-8% of intake cases were probation/parole violations, and 6% were court orders violations.
- 73-74% of intake cases were eligible for detention. (Felonies, class 1 misdemeanors, probation/parole violations, and court orders violations are eligible for detention.)

Detention

There are four types of detention disposition statuses described below: pre-dispositional (pre-d) detention, post-dispositional (post-d) detention without programs, post-d detention with

programs, and other (e.g., restoration of mental competency, transferred to circuit court, awaiting placement, appealed, etc.).

*Detention Admissions, FY 2006-2010**



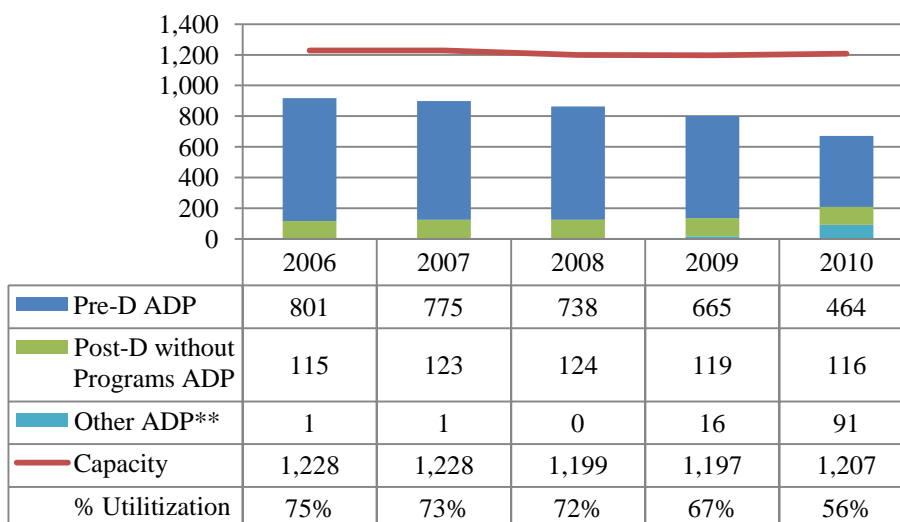
* Other types of detention admissions are not included.

- Between FY 2006-2010, detention admissions decreased 24%.
 - Admissions for pre-d detention decreased 32%.
 - Admissions for post-d detention without programs increased 3%.
 - Admissions for post-d detention with programs decreased 20%.

Pre-D/Post-D without Programs/Other

Each detention center has a licensed capacity for disposition statuses with short-term lengths of stay: pre-d detention, post-d detention without programs, and others. Pre-d detention is used to provide temporary care for delinquents and alleged delinquents who require secure custody pending a court appearance. Post-d detention without programs involves the sentencing of a juvenile by a judge to a detention facility for up to 30 days without full services being provided. Other uses include restoration of mental competency, transfer to circuit court, awaiting placement, appeal, etc.

*Detention Center ADP and Capacity (Pre-D/Post-D without Programs/Other), FY 2006-2010**



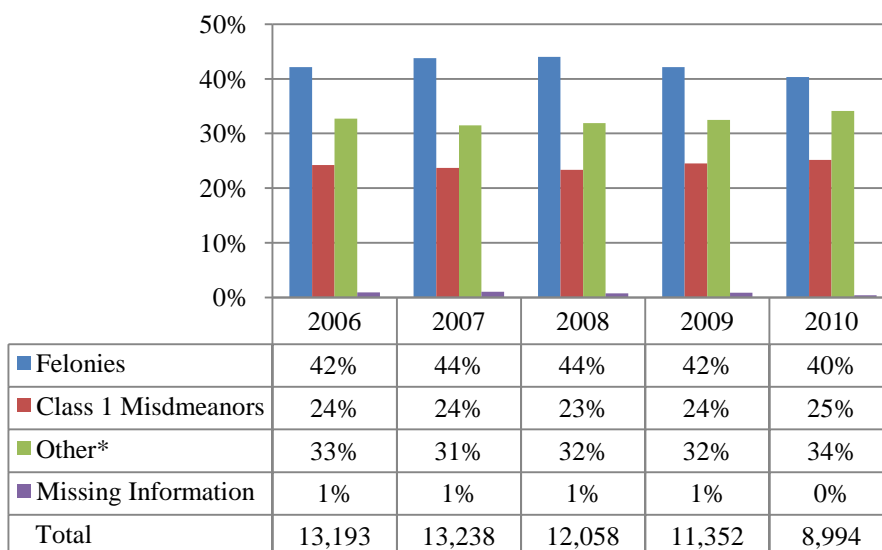
* Juveniles with missing disposition statuses are not included.

* Other includes restoration of mental competency, transferred to circuit court, awaiting placement, appealed, etc.

- Between FY 2006-2010, ADP for pre-d detention decreased 42%.
- Between FY 2006-2010, ADP for post-d detention without programs remained relatively stable.
- Between FY 2006-2010, ADP for pre-d detention, post-d detention without programs, and other detention dispositions combined decreased 27%.
- In the same time period, capacity for these disposition statuses decreased 2%.
- ADP has consistently been below operational capacity, and utilization has decreased from 75% in FY 2006 to 56% in FY 2010.

See the second table of *Appendix C: Detention Center ADP, Capacity, and Utilization* for each detention center's pre-d/post-d without programs/other ADP, capacity, and utilization rate.

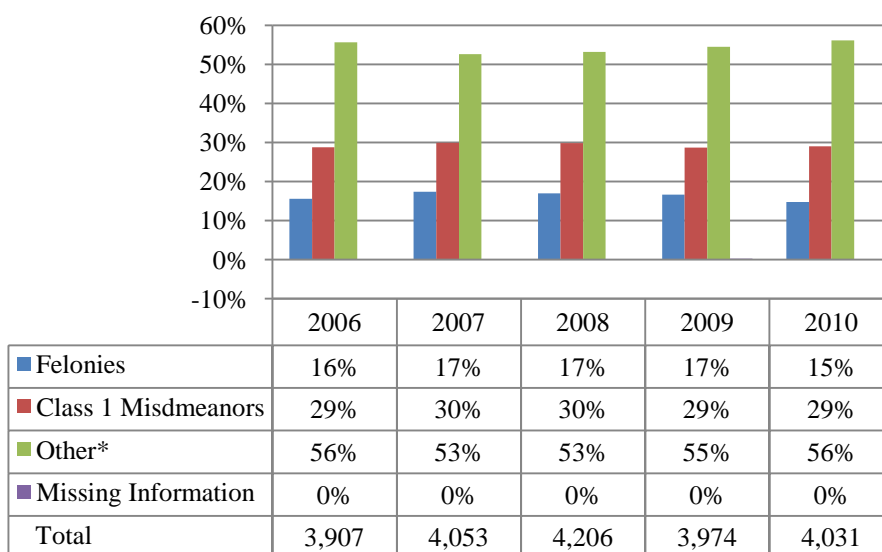
Pre-D Admissions by Offense Severity, FY 2006-2010



* Includes probation/parole violations, court violations, status offenses, and other.

- For FY 2006-2010, 40-44% of pre-d detention admissions were for felonies, 23-25% were for class 1 misdemeanors, and 31-34% were for other offenses.
- For FY 2006-2010, the average LOS for pre-d detention was 22-26 days.

Post-D without Programs Admissions by Offense Severity, FY 2006-2010



* Includes probation/parole violations, court violations, status offenses, and other.

- For FY 2006-2010, 15-17% of admissions for post-d detention without programs were for felonies, 29-30% were for class 1 misdemeanors, and 53-56% were for other offenses.
- For FY 2006-2010, the average LOS for post-d detention without programs was 13-14 days.

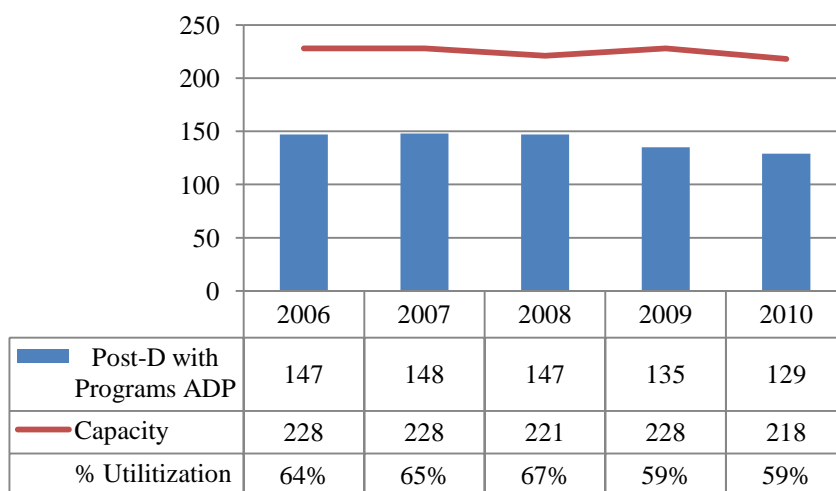
Post-D with Programs

Section 16.1-284.1 of the Code of Virginia allows judges to use local/regional detention centers as a disposition for juveniles for up to 180 days. Post-d detention is used by some localities as a community-based alternative to state commitment that allows juveniles to receive services in secure custody while planning for transition back into their communities. Those juveniles who meet the eligibility criteria for state commitment must receive a suspended commitment when sent to a post-d detention program.

In post-d detention, treatment services are coordinated by the detention facility, the CSU, local mental health and social service agencies, and the juvenile's family and are tailored to meet the specific needs of that juvenile. Examples of facility- and community-based services for post-d detention include anger management, substance abuse education and treatment, life skills, vocational education, community service, restitution, and victim empathy.

Seventeen facilities have licensed post-d programs (dedicated beds for facility- and community-based treatment services): Blue Ridge, Chesapeake, Chesterfield, Fairfax, Highlands, James River, Loudoun, Lynchburg, Merrimac, New River Valley, Newport News, Norfolk, Northern Virginia, Northwestern, Rappahannock, Virginia Beach, and W.W. Moore, Jr. Post-d detention with programs utilizes a separate licensed capacity from other disposition statuses due to the level of programming.

*Detention Center ADP and Capacity (Post-D with Programs), FY 2006-2010**

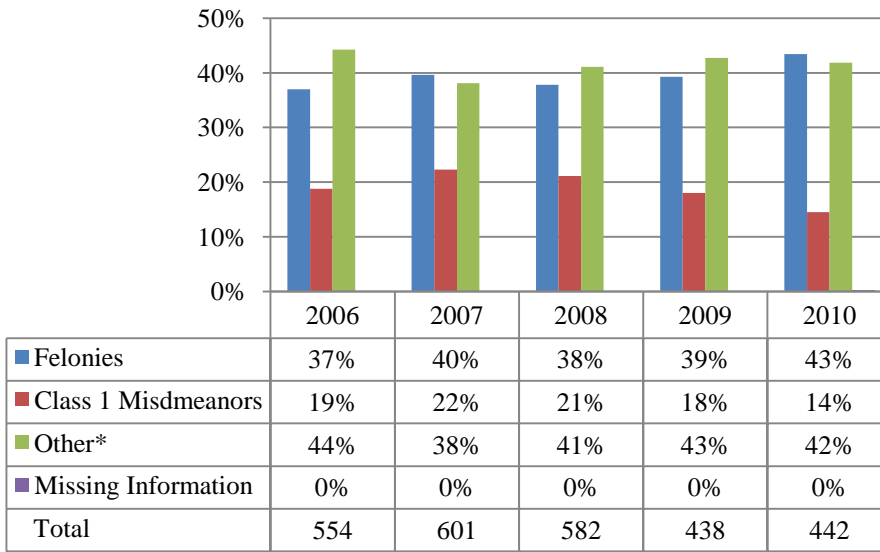


* Juveniles with missing disposition statuses are not included.

- Between FY 2006-2010, ADP for post-d detention with programs decreased 12%.
- In the same time period, capacity for post-d detention with programs decreased 4%.
- ADP has consistently been below operational capacity, and utilization has decreased from 64% in FY 2006 to 59% in FY 2010.

See the third table of *Appendix C: Detention Center ADP, Capacity, and Utilization* for each detention center's post-d with programs ADP, capacity, and utilization rate.

Post-D with Programs Admissions by Offense Severity, FY 2006-2010



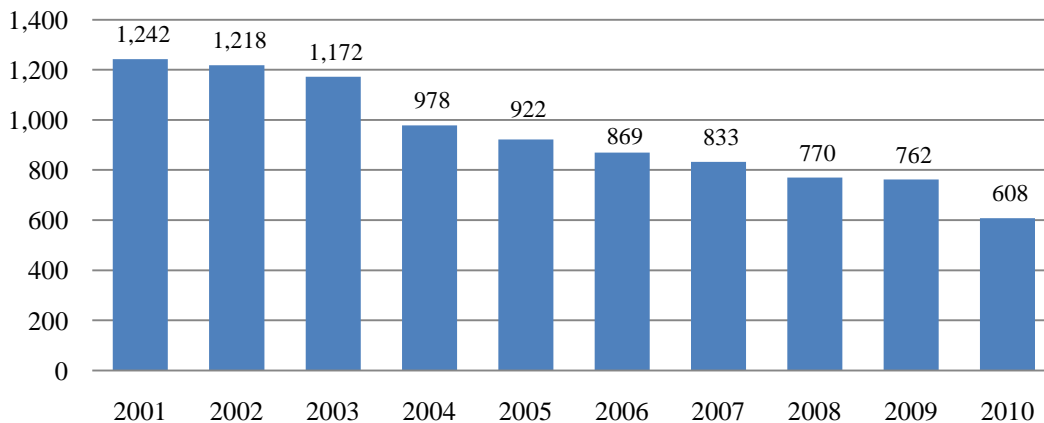
* Includes probation/parole violations, court violations, status offenses, and other.

- For FY 2006-2010, the average LOS for post-d detention with programs was 132-138 days (4.3-4.5 months).

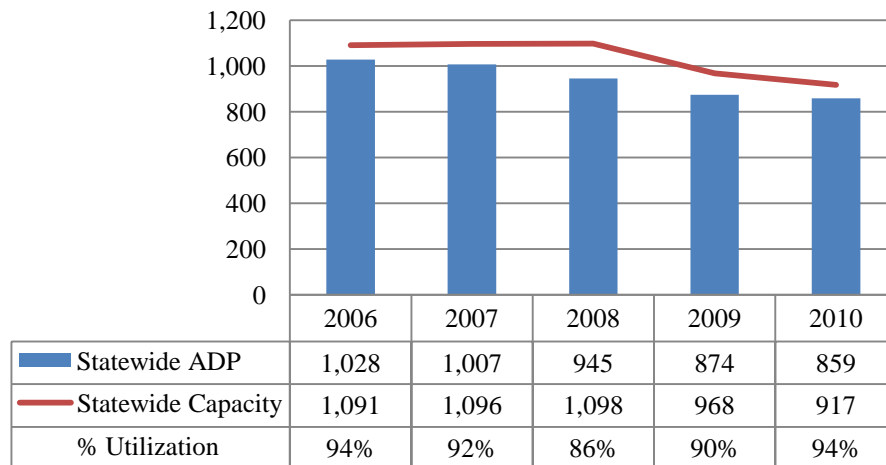
JCC Admissions

In July 2000, the threshold eligibility criteria for juveniles committed changed from being found guilty of one felony or two class 1 misdemeanors to one felony or four (cumulative) class 1 misdemeanors. The intention of the change was to reserve the use of commitment to DJJ for a population of more serious offenders. (Appealed cases are not included in admission data.)

JCC Admissions, FY 2001-2010



- Between FY 2001 (after the new eligibility criteria was effective) and FY 2010, admissions decreased by 51%.
 - The largest percent decrease occurred in FY 2010 with a 20% decrease from FY 2009.

*JCC Operational Capacity and ADP, FY 2006-2010**

* Includes RDC, JCCs, and all alternative placements.

- Between FY 2006-2010, ADP decreased 16%.
- In the same time period, JCC operational capacity also decreased 16%.
- ADP has consistently been below operational capacity.

JCC Admissions by Offense Severity, FY 2006-2010

	2006	2007	2008	2009	2010
Felonies:					
Against Persons	38%	38%	44%	47%	43%
Weapons/Narcotics	6%	5%	7%	5%	5%
Other	37%	39%	35%	31%	37%
Class 1 Misdemeanors:					
Against Persons	8%	6%	6%	7%	6%
Other	7%	6%	5%	5%	4%
Parole Violation	4%	5%	4%	5%	4%
Court Violation	0%	0%	0%	0%	0%
Status Offenses	0%	0%	0%	0%	0%
Other	0%	0%	0%	0%	0%
Total Admissions	869	833	770	762	608

- Between FY 2006-2010, felonies increased from 81% of admissions to 86%.

Admissions by Age, FY 2006-2010

	2006	2007	2008	2009	2010
Under 14	2%	2%	2%	2%	1%
14	8%	7%	6%	5%	4%
15	19%	17%	16%	17%	13%
16	32%	29%	28%	32%	25%
17	34%	38%	41%	37%	44%
18	5%	7%	7%	7%	11%
19 or older	0%	1%	0%	1%	1%
<i>Total Admissions</i>	869	833	770	762	608

- Each year between FY 2006-2010, 20 or fewer juveniles were admitted under the age of 14. In FY 2010, seven juveniles were admitted under the age of 14.
- The highest percentage of juveniles were age 17 when admitted.
- The percentage of juveniles admitted at ages 17 or older increased from 39% in FY 2006 to 56% in FY 2010.

Length of Stay (LOS)

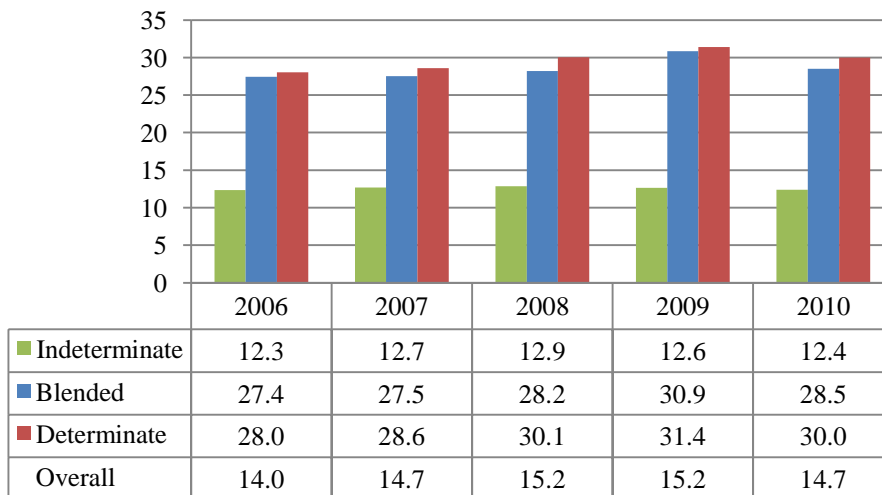
The majority of commitments to DJJ are indeterminate, which means that the department, not the court, is responsible for determining when a juvenile is released back to the community. The Board of Juvenile Justice is mandated by § 66-10.8 of the Code of Virginia to establish LOS Guidelines that set the broad parameters within which the department may decide when to release indeterminately committed residents. These guidelines establish criteria for discretionary release from indeterminate commitments; meld the punitive aspects of institutional confinement with the rehabilitative focus of indeterminate sentencing; promote consistency across individual juveniles' cases and institutional programs; provide a proportionate penalty structure; and accommodate youth's treatment needs as they relate to offense behavior.

Serious offenders may be determinately committed to the department for up to seven years. The court, not the department, determines when the individual will be released. Determinately committed residents are more likely to remain in direct care longer than indeterminately committed juveniles. In addition, when a juvenile has been transferred to circuit court to be tried as an adult, the court may commit the juvenile determinately to the department and may also impose an adult sentence to be served following the juvenile commitment. Such "blended commitments" result in a resident population that tends to stay with the department for long periods of time. Residents with determinate commitments and with adult prison terms after their commitment to the department present challenges to the utilization of JCCs due to their longer lengths of stay of multiple years.

Admissions by LOS Category (Months), FY 2006-2010

	2006	2007	2008	2009	2010
3 - 6	8%	6%	6%	6%	6%
6 - 9	1%	1%	1%	0%	1%
6 - 12	24%	19%	20%	20%	19%
9 - 15	3%	3%	2%	3%	2%
12 - 18	24%	31%	26%	27%	28%
15 - 21	7%	7%	7%	6%	8%
18 - 24	6%	7%	8%	6%	6%
18 - 36	12%	11%	13%	13%	9%
21 - 36	3%	2%	1%	1%	1%
24 - 36	1%	1%	1%	1%	0%
Blended	3%	3%	4%	5%	3%
Determinate	9%	10%	11%	13%	15%
<i>Total Admissions</i>	869	833	770	762	608

- The percentage of indeterminate admissions with a minimum LOS of less than one year decreased from 35% in FY 2006 to 29% in FY 2010.
- The percentage of indeterminate admissions with a minimum LOS of at least one year remained relatively stable at 52-53%.
- The percentage of blended/determinate admissions increased from 12% in FY 2006 to 18% in FY 2010.

Admissions by Average Actual LOS (Months), FY 2006-2010

- On average, juveniles with determinate commitments had actual LOSs over twice as long as juveniles with indeterminate commitments.
- Overall, the average actual LOS increased from 14.0 months in FY 2006 to 14.7 months in FY 2010.

Since the LOSs for juveniles with determinate or blended commitments are longer than juveniles with indeterminate commitments, combined with the slight increase in determinate/blended

admissions, the proportion of juveniles with determinate or blended commitments in the average daily population will increase as indeterminately committed juveniles are released at a faster rate.

ADP by Commitment Type, FY 2006-2010

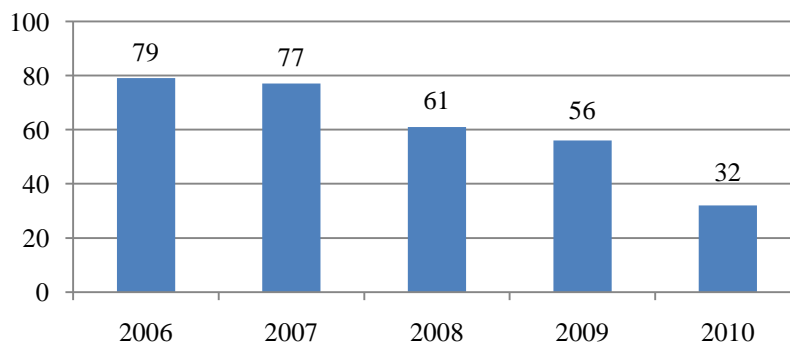
	2006	2007	2008	2009	2010
Indeterminate	74%	73%	72%	71%	66%
Blended	3%	5%	6%	8%	9%
Determinate	22%	23%	22%	22%	25%
<i>Total ADP</i>	<i>1022</i>	<i>1001</i>	<i>943</i>	<i>872</i>	<i>858</i>

- While blended commitments accounted for only 3% of admissions in FY 2010, juveniles with blended commitments accounted for 9% of the ADP. Similarly, determinate commitments accounted for only 15% of admissions in FY 2010, but juveniles with determinate commitments accounted for 25% of the ADP.
- Indeterminate commitments accounted for 82% of admissions in FY 2010, but juveniles with indeterminate commitments accounted for only 66% of the ADP.

Female Residents

It is important to examine female offenders because they are housed separately, and they present different staffing and treatment challenges than males.

Female JCC Admissions, FY 2006-2010



- Between FY 2006-2010, female JCC admissions decreased 59%. (Total admissions decreased 30% in the same time period.)
- Females accounted for 9% of total admissions in FY 2006. This percentage decreased to 5% in FY 2010.

Special Populations

Certain populations require specific training for both treatment and security staff. Interaction and supervision of a sex offender or a developmentally delayed juvenile is not the same as what would be required for other juveniles. Staff must be trained in the specific treatment modalities so that they understand the dynamics of the individuals and can consistently provide appropriate responses to questions, situations, tasks, and behaviors.

Admissions by Mental Health Treatment Need

	2006	2007	2008	2009	2010
MH Treatment Need	62%	68%	66%	63%	68%
Total Admissions	869	833	770	762	608

- The percentage of admitted juveniles designated as needing mental health treatment increased from 62% in FY 2006 to 68% in FY 2010.
- In FY 2010, 54% of admitted juveniles appeared to have significant symptoms of a mental health disorder, excluding Attention Deficit/Hyperactivity Disorder (ADHD), Conduct Disorder, Oppositional Defiant Disorder, Substance Abuse Disorder, and Substance Dependence Disorder.

Mandatory and Recommended Treatment Needs

Substance abuse, aggression management, and sex offender treatment needs can be assigned at admission as mandatory or recommended, based on the resident's offense history, assessment and screening. Juveniles assigned mandatory treatment needs may be held until their statutory release date if they do not complete the mandatory treatment, and juveniles assigned recommended treatment needs may be held until their late release date if they do not complete the recommended treatment. Sex offender treatment can have the greatest impact on the juvenile's LOS due to the length of the program (Median treatment time is approximately 18 months.)

Admissions by Substance Abuse Treatment Need, FY 2006-2010

	2006	2007	2008	2009	2010
Mandatory	36%	39%	39%	32%	38%
Recommended	34%	26%	30%	44%	50%
Total Admissions	869	833	770	762	608

- The majority of juveniles admitted were assigned a mandatory or recommended substance abuse treatment need.
- The percentage of juveniles with either a mandatory or recommended substance abuse treatment need increased from 70% in FY 2006 to 88% in FY 2010.

Admissions by Aggression Management Treatment Need, FY 2006-2010

	2006	2007	2008	2009	2010
Mandatory	63%	58%	57%	60%	66%
Recommended	24%	30%	29%	32%	29%
Total Admissions	869	833	770	762	608

- The majority of juveniles admitted were assigned a mandatory aggression management treatment need.
- The percentage of juveniles with either a mandatory or recommended aggression management treatment need increased from 87% in FY 2006 to 95% in FY 2010.

Admissions by Sex Offender Treatment Need, FY 2006-2010

	2006	2007	2008	2009	2010
Mandatory	8%	8%	9%	8%	9%
Recommended	1%	2%	1%	3%	3%
<i>Total Admissions</i>	869	833	770	762	608

- Less than 15% of juveniles admitted were assigned a mandatory or recommended sex offender treatment need.
- The percentage of juveniles with either a mandatory or recommended sex offender treatment need increased from 9% in FY 2006 to 12% in FY 2010.

Because the juveniles with mandatory sex offender treatment needs must complete the lengthy program (approximately 18 months) in order to be released before their statutory release date, they often have longer LOSs.

Average Actual LOS (Months) for Juveniles with Sex Offender Treatment Needs

	2006	2007	2008	2009	2010
Mandatory	26.6	28.8	30.5	29.5	26.9
Recommended	23.8	23.2	20.4	12.0	15.9
Overall*	14.0	14.7	15.2	15.2	14.7

* Includes juveniles with and without sex offender treatment needs

- Juveniles with mandatory sex offender treatment needs had LOSs approximately twice as long as the overall average LOSs for all juveniles.

Since the LOSs for juveniles with sex offender treatment needs are longer than juveniles without sex offender treatment needs, combined with the slight increase in determinate/blended admissions, the proportion of juveniles with sex offender treatment needs in the average daily population will increase as juveniles without the treatment needs are released at a faster rate.

ADP by Sex Offender Treatment Needs, FY 2006-2010

	2006	2007	2008	2009	2010
Mandatory	18%	17%	17%	17%	16%
Recommended	1%	2%	2%	2%	4%
<i>Total ADP</i>	1,022	1,001	943	872	858

- While juveniles with mandatory sex offender treatment needs accounted for only 9% of admissions in FY 2010, juveniles with mandatory sex offender treatment needs accounted for 16% of the ADP.

Low Intellectual Functioning

In order to be placed at Oak Ridge JCC, the following guidelines are used to determine low intellectual functioning: IQ score less than 75 and Woodcock Johnson Math, Reading, and Writing grade scores less than fifth grade. Final placement decisions are made by CCRC.

Admissions by Oak Ridge Eligibility, FY 2006-2010

	2006	2007	2008	2009	2010
Oak Ridge Eligible	66	40	42	46	29
	8%	5%	5%	6%	5%
<i>Total Admissions</i>	869	833	770	762	608

- The number of juveniles admitted who were eligible for placement at Oak Ridge decreased from 66 in FY 2006 to 29 in FY 2010. However, the percentage of total admissions remained relatively stable at 5-8%.

The average ADP provides a better illustration of the number of juveniles eligible for placement at Oak Ridge at any given time.

ADP by Oak Ridge Eligibility, FY 2006-2010

	2006	2007	2008	2009	2010
Oak Ridge Eligible	84	66	53	52	53
	8%	7%	6%	6%	6%
<i>Total ADP</i>	1,022	1,001	943	872	858

For the past five fiscal years, there were more juveniles eligible for placement at Oak Ridge than the 40-bed facility could accommodate.

Part III: Snapshot JCC Population (Population on February 1, 2011)

While it is important to look at admission and ADP trends, it is useful to also examine a one-day snapshot of the population in order to determine the needs and characteristics of the population on a particular day. Additionally, this snapshot of the population on February 1, 2011, provides information on the possible changes occurring since the end of FY 2010. Specifically, information concerning utilization, special populations, and detention-eligibility is presented.

JCC Population Count, Capacity, and Utilization (Snapshot Population on 2/1/11)

	Count	Capacity	% Utilization
Beaumont	264	284	93%
Bon Air	191	193	99%
Culpeper	148	144	103%
Hanover	96	120	80%
Oak Ridge	40	40	100%
<i>JCC Total</i>	<i>739</i>	<i>781</i>	<i>95%</i>
RDC	77	136	57%
<i>State Total</i>	<i>816</i>	<i>917</i>	<i>89%</i>

- Excluding RDC, the JCC utilization rate of February 1, 2011, was 95%, slightly lower than the 97% rate for FY 2010.
- Including RDC, the overall JCC utilization rate on February 1, 2011, was 89%, lower than the 94% rate for FY 2010.
- On February 1, 2011, there were 33 females (28 at Bon Air and five at RDC). Females accounted for 4% of the total population.

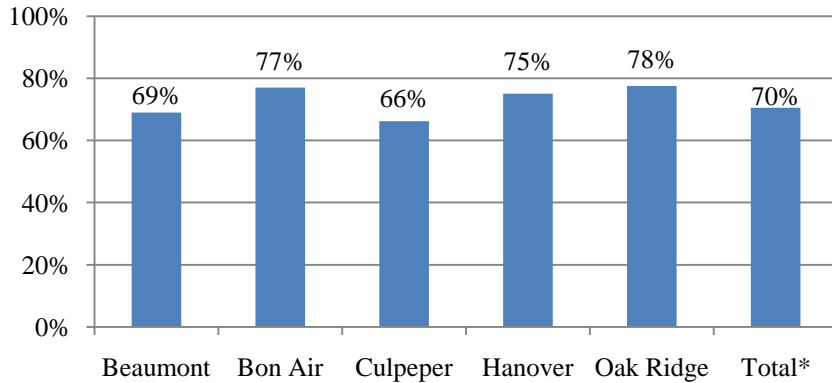
Residents with Mandatory or Recommended Treatment Needs (Snapshot Population on 2/1/11)

	Total Residents	Aggression Management	Substance Abuse	Sex Offender
Beaumont	264	251	220	59
Bon Air	191	182	158	43
Culpeper	148	142	123	32
Hanover	96	91	74	29
Oak Ridge	40	37	33	11
<i>Total*</i>	<i>816</i>	<i>769</i>	<i>675</i>	<i>185</i>

* Total includes residents at RDC, where treatment needs are assessed but not delivered. Therefore, RDC is not listed individually.

- On February 1, 2011, the majority of the JCC population had mandatory or recommended aggression management treatment needs or mandatory or recommended substance abuse treatment needs.
- Overall, residents with any type of mandatory or recommended treatment need were fairly evenly distributed among the facilities.

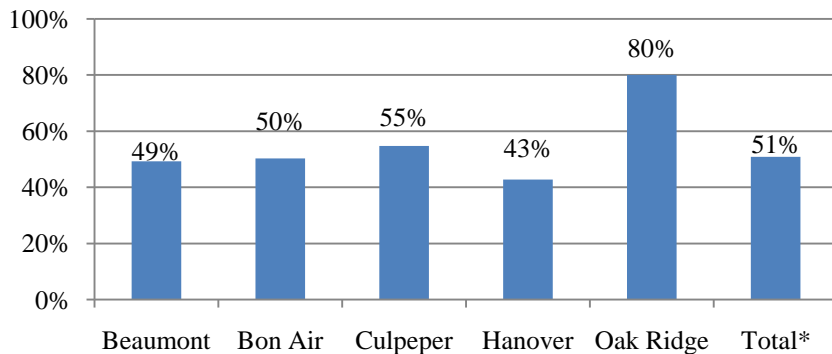
Residents with Mental Health Needs (Snapshot Population on 2/1/11)



* Total includes residents at RDC, where treatment needs are assessed but not delivered. Therefore, RDC is not listed individually.

- On February 1, 2011, 70% of the JCC population had a mental health need.
- Oak Ridge and Bon Air had the highest percentages of residents with mental health needs (77-78%).
- Culpeper had the lowest percentage of residents with a mental health need (66%).

Residents with Symptoms of Mental Health Disorder¹ (Snapshot Population on 2/1/11)



¹ Excludes Attention Deficit/Hyperactivity Disorder (ADHD), Conduct Disorder, Oppositional Defiant Disorder, Substance Abuse Disorder, and Substance Dependence Disorder.

* Total includes residents at RDC, where treatment needs are assessed but not delivered. Therefore, RDC is not listed individually.

- On February 1, 2011, 51% of residents appeared to have significant symptoms of a mental health disorder, excluding Attention Deficit/Hyperactivity Disorder (ADHD), Conduct Disorder, Oppositional Defiant Disorder, Substance Abuse Disorder, and Substance Dependence Disorder.
- Oak Ridge had the highest percentage of residents with significant symptoms of a mental health disorder (80%).
- Beaumont, Bon Air, Culpeper, and Hanover had similar percentages of residents with significant symptoms of a mental health disorder (43-55%).

Educational Programs (Snapshot Population on 2/1/11)

School Program	# of Residents	% of Residents
Assessment*	77	9%
Middle School	18	2%
High School	351	43%
GED/ISAEP Program	173	21%
CTE**	117	14%
Work Release	1	0%
College	3	0%
Not Enrolled***	76	9%
<i>Total</i>	<i>816</i>	<i>100%</i>

* Students were in the process of being assessed at RDC and had not yet been placed in an educational program.

** Career and Technical Education.

*** Includes juveniles with completed diplomas/GEDs or juveniles over the age of 18 who do not wish to continue in educational programs.

- On February 1, 2011, nearly half (43%) of residents were enrolled in high school and 2% were enrolled in middle school.
 - 94% of those juveniles in middle school were at Hanover.
- 9% of residents were not enrolled in any educational programs.
 - 50% of those not enrolled were at Culpeper, and 46% were at Beaumont.

JCC Residents and Detention Centers

Because the Appropriations Act calls for “an analysis of options for providing regional transitional programs and re-entry services at selected local and regional juvenile secure detention facilities,” the snapshot population on February 1, 2011, was analyzed according to the locality in which they were committed and the detention centers that serve those localities. Although not guaranteed that residents would return to the same locality after release, this data demonstrates the general distribution of residents returning to the communities. (See page 16 for a description of detention centers and their regions.)

Residents on February 1, 2011, by Committing Detention Regions

Region	#	%
1	127	16%
2	293	36%
3	396	49%
<i>Total</i>	<i>816</i>	<i>100%</i>

For details on commitments by individual detention center localities, see the first table of *Appendix E: JCC Residents and Detention Center Localities*.

However, not all juveniles committed to a JCC are eligible for post-d detention. Eligibility criteria for post-d detention include the following:

- The juvenile must be fourteen years of age or older.

- The juvenile must be found to have committed an offense punishable by confinement in a state or local correctional facility as defined in § 53.1-1 of the Code of Virginia. Offenses confineable in a local or state correctional facility include class 1 and class 2 misdemeanors and felonies.
- Juveniles adjudicated delinquent of a violent felony or convicted of a violent felony are not eligible for placement in post-d detention.
- A juvenile who has been released from the custody of DJJ within the previous 18 months is not eligible for placement in a post-d detention program.

Of the 816 residents on February 1, 2011, 141 (17%) were eligible for post-d detention. According to the locality in which they were committed, the detention regions that would have served these juveniles had they gone to post-d detention are as follows:

Detention-Eligible Residents on February 1, 2011, by Committing Detention Regions

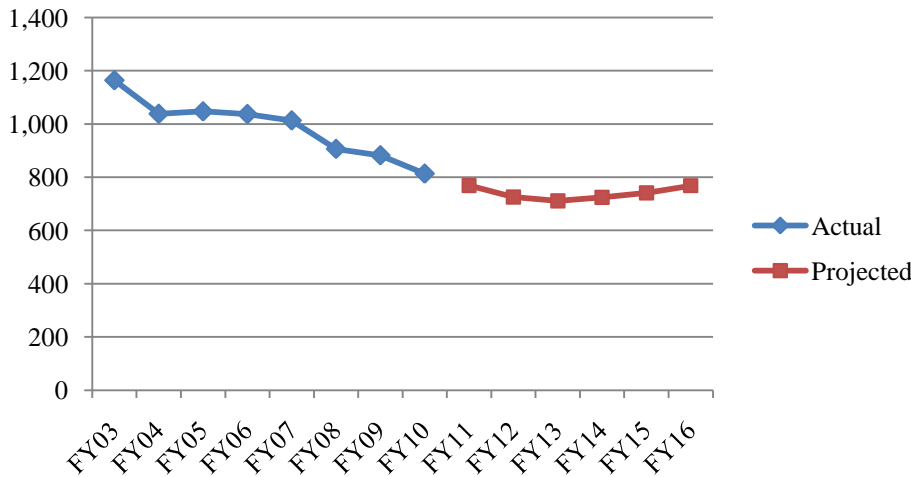
Region	#	%
1	19	13%
2	65	46%
3	57	40%
<i>Total</i>	<i>141</i>	<i>100%</i>

- For details on commitments by individual detention center localities, see the second table of *Appendix E: JCC Residents and Detention Center Localities*.

Part IV: Juvenile Population Forecast

Forecasts of juveniles confined in JCCs and detention centers are essential for budgeting and planning in Virginia.¹ The forecasts are used to estimate operating expenses and future capital needs and to assess the impact of current and proposed criminal justice policies. The most recent forecasts (below), approved in September 2010, were based on all of the statistical and trend information known at the time that they were produced. However, it is important to note that it is unclear how long the current trends will continue.

JCC Forecast (Average Daily Population for June of each year)



	Actual Population*	Change
FY03	1,164	-3.6%
FY04	1,038	-10.8%
FY05	1,047	0.9%
FY06	1,037	-1.0%
FY07	1,013	-2.3%
FY08	906	-10.6%
FY09	882	-2.6%
FY10	813	-7.8%

Average Growth: -4.7%

	Projected Population*	Change
FY11	769	-5.4%
FY12	725	-5.7%
FY13	711	-2.0%
FY14	724	1.8%
FY15	741	2.4%
FY16	768	3.6%

Average Growth: -0.9%

* Figures represent the ADP in June for each year reported.

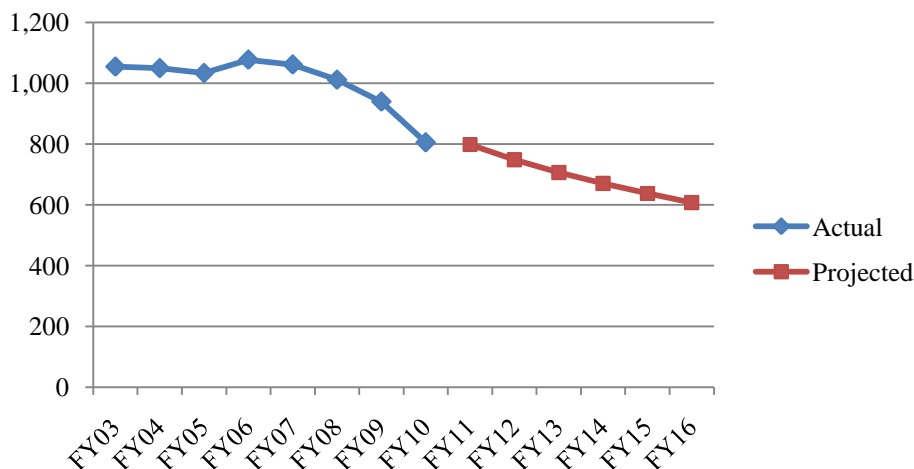
The number of juveniles in JCCs has decreased since FY 2000. Some of the decline can be attributed to a change in the minimum criteria for a juvenile to be committed to DJJ (from a felony or two class 1 misdemeanor adjudications to a felony or four class 1 misdemeanor

¹ For additional information concerning the juvenile offender population, please see the Adult and Juvenile Offender Population Forecasts (HB 1500 Budget Bill Item 370 (A) (2011)).

adjudications) beginning July 1, 2000. That policy change, however, cannot explain the persistent downward trend in commitments. At DJJ's CSU, the point of entry into the juvenile justice system, the total number of juvenile intake cases fell for the fourth straight year, decreasing by 11.5% in FY 2010. The Policy Advisory Committee discussed factors that may be contributing to the decline in juvenile intake cases. For instance, Safe and Drug-Free Schools programs, supported by federal grants, have been developed to address at-risk behavior and to reduce incidents of crime and violence within schools and communities. In addition, DJJ has implemented policies that emphasize the use of validated risk assessment instruments in various aspects of community and institutional operations in order to reserve correctional and detention beds for juveniles who represent the greatest risk to public safety or are at risk for failing to appear in court.

In June 2010, the ADP in JCCs was 813. Under the admissions forecast, it is assumed that admissions will continue to fall through FY 2011 and then level off at 576 juveniles per year through FY 2016. The forecast for ADP calls for a continued decline through FY 2013. Beginning in FY 2014, however, the JCC population is expected to grow again due to the longer LOSs, on average, for juveniles committed today compared to juveniles committed a few years ago. By June 2016, the ADP in JCCs is projected to be 768 juveniles.

Juvenile Detention Center Population Forecast (Fiscal Year Average)



	Actual Population*	Change
FY03	1,054	-4.7%
FY04	1,049	-0.5%
FY05	1,033	-1.5%
FY06	1,077	4.3%
FY07	1,061	-1.5%
FY08	1,011	-4.7%
FY09	939	-7.1%
FY10	805	-14.3%

Average Growth: -3.8%

	Projected Population*	Change
FY11	798	-0.9%
FY12	748	-6.3%
FY13	706	-5.6%
FY14	670	-5.1%
FY15	637	-4.9%
FY16	607	-4.7%

Average Growth: -4.6%

* Figures represent the average population for each fiscal year reported.

Between FY 2003-2007, the average detention center population fluctuated between 1,030 and 1,080 juveniles. The population has been decreasing since FY 2007, reaching an average population of 805 juveniles for FY 2010. Lower numbers of intakes at DJJ's CSUs and a pilot program to reduce detention of low-risk juveniles have contributed to the changes in this population. The downward trend in this population is expected to continue during the next six years. The average population for FY 2016 is projected to be 607 juveniles.

Part V: Historical Detention Center Uses for Committed Juveniles

Detention centers have a history of being utilized for alternative, step-down, and re-entry placements for committed juveniles. Detention re-entry programs and CPPs have operated at different points during the past six years, and a program including detention re-entry in the Tidewater region is currently in progress.

Detention Re-Entry

During FY 2007-2008, a pilot project was funded to enhance the re-entry process for residents leaving JCCs. Several local detention centers allowed DJJ to place residents in their facilities during the last 30-90 days of commitment. These detention centers were located in the same communities to which the residents were to be released so that parole officers could work to increase family visitation and reintegration and provide continuous treatment, education, and work preparation services after release. This continuum of services was intended to offer a seamless transition to the communities in which detention re-entry participants resided. Only 16 juveniles participated in the program before funding was discontinued due to budget reductions.

In 2010, DJJ, in partnership with the Tidewater Youth Services Commission (TYSC), received a Second Chance Act Grant award from the Office of Justice Programs at the U.S. Department of Justice for a Juvenile Offender Re-Entry Demonstration Project. The project serves high- and moderate-risk parolees up to the age of 21 from the Tidewater region (cities of Chesapeake, Virginia Beach, Portsmouth, Norfolk, Suffolk, Newport News and Hampton; and the counties of Southampton, Franklin, and Isle of Wight). The participants will receive comprehensive re-entry services throughout their commitment and parole, including the option of detention re-entry in which juveniles would be transferred from a JCC 30-90 days before their anticipated release to detention centers in the localities to which they will be returning. DJJ has entered into a Memorandum of Agreement (MOA) with detention centers in the regions to house these juveniles as a component of their comprehensive re-entry services. The outcomes of this program will be monitored and evaluated by DJJ as juveniles are enrolled. As the program began enrolling participants recently, results are not available at this time.

Community Placement Programs (CPPs)

CPPs were operated at Shenandoah Valley Juvenile Center (Shenandoah CPP) during FY 2004-2008 and at Chesapeake Juvenile Services (Tidewater CPP) during FY 2005-2009. These programs, operated by the detention centers but contracted through DJJ, served as an alternative placement for committed juveniles. The goal of these structured programs was to create smaller, more treatment-focused facilities to improve reintegration of the juveniles into their communities. Program components included substance abuse education, treatment, and relapse prevention; anger management; employability skills; life skills; academic classes (middle school, high school, special education, GED); and physical fitness. The programs' LOSs typically ranged from three to 12 months. Due to budget reductions, Shenandoah CPP was closed on December 31, 2007, and Tidewater CPP was closed on December 31, 2008.

While in operation, the CPPs experienced several challenges:

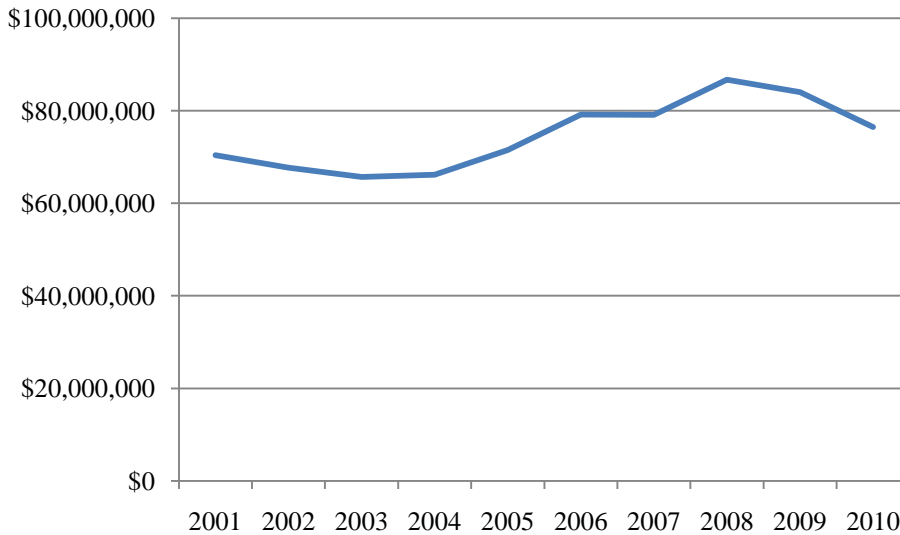
- With only two CPPs, placement options close to all eligible juveniles' home communities were unavailable.
- Community-based resources were limited in some areas.
- Detention center staff required orienting and training for working with juveniles therapeutically on a long-term basis (especially in detention centers without post-d programs).
 - Revising existing behavior management programs was necessary for juveniles with longer LOSs compared to short-term pre-dispositional juveniles.

Part VI: Historical Fiscal Summary

In order to analyze the potential impact of establishing new programs or closing facilities, it is important to examine the historical JCC and detention center expenditures, program and facility closures, and facility closure scenarios.

JCC Expenditures

*Total JCC Expenditures, FY 2001-2010**



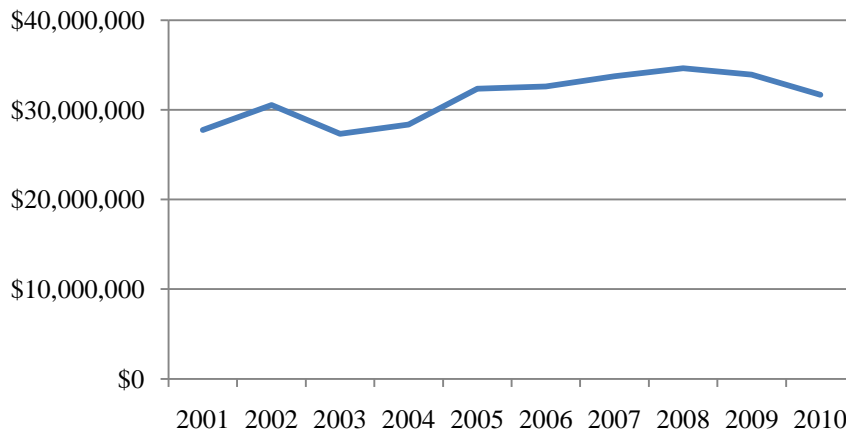
* Expenditures for alternative placements for committed juveniles are not included.

- Total JCC expenditures increased from a low in FY 2003 to a high in FY 2008 (32% increase). Between FY 2008-2010, expenditures decreased 12%.

Detention Center Expenditures

Detention centers are operated using local, state (general fund), and federal (non-general fund for reimbursements of specific items and services) resources.

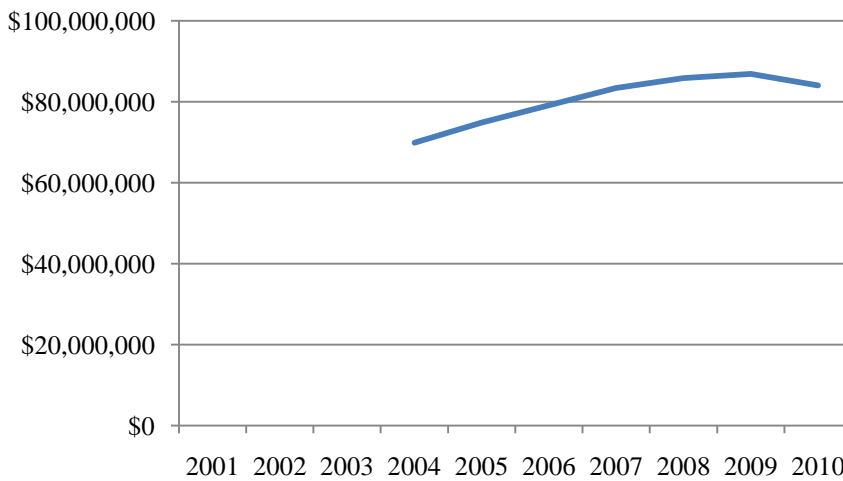
*State Expenditures (General Fund) for Detention, FY 2001-2010**



* General expenditures utilize state funds. One-time construction expenditures are excluded.

- State expenditures (from general funds) for detention centers decreased 10% between FY 2002-2003. Between FY 2003-2008, state expenditures increased 27%; and between FY 2008-2010, state expenditures decreased 9%.

*Total Detention Expenditures, FY 2004-2010**



* Expenditures before FY 2004 are not comparable due to a change in data collection methods.

- Total detention expenditures increased 24% between FY 2004-2009, and then decreased by 3% in FY 2010.

Past Facility and Program Closures

Due to budget and population reductions, several facilities and programs for committed and detained juveniles have closed since FY 2005:

Facility or Program	Description	Capacity	Date Closed
Barrett JCC	JCC with specialized substance abuse treatment programs	98	4/30/2005
Culpeper Detention Home	Only state-run detention center	50	7/1/2007
Shenandoah Community Placement Program (CPP)	Alternative placement for committed juveniles (Operated at Shenandoah Valley Juvenile Center)	10	12/31/2007
Tidewater Community Placement Program (CPP)	Alternative placement for committed juveniles (Operated at Chesapeake Juvenile Services)	10	12/31/2008
Virginia Wilderness Institute (VWI)	Alternative placement for committed juveniles (Privately operated)	32	12/31/2008
Natural Bridge JCC	JCC for lower security-risk offenders and offenders preparing for release	71	10/9/2009

(In addition to these closures, individual housing units at JCCs have been opened and closed for population management and budget considerations. Other smaller programs may have been closed during this time period, including the detention re-entry program operated during FY 2007-2009.)

JCCs

As a result of recommendations made in the previous utilization report mandated by the General Assembly, Barrett was closed in June 2005. Due to mid-fiscal year budget reductions, DJJ was required to close Natural Bridge JCC in October 2009. The following table presents the savings that resulted from the closing of these facilities:

Facility	Date Closed	Annual Operating Budget	Savings in 1 st Year	Savings in 2 nd Year
Barrett	4/30/2005	\$5.7M	None	None
Natural Bridge	10/1/2009	\$4.9M	\$1.2M	\$3.0M

M = Million

- Due to the funding needs for beds at other facilities, there were no identified savings as a result of closing Barrett.

Detention Re-Entry

During FY 2007-2008, 16 juveniles were placed in a detention re-entry program in which they returned to detention centers in their home communities during the last 30-90 days of

commitment in order to receive re-entry and transitional services. Funding for this program was discontinued due to budget reductions. The total cost for these 16 juveniles was \$79,042. (See page 40 for more details on detention re-entry.)

CPPs

CPPs were operated at Shenandoah Valley Juvenile Center (Shenandoah CPP) during FY 2004-2008 and at Chesapeake Juvenile Services (Tidewater CPP) during FY 2005-2009. These programs, operated by the detention centers but contracted through DJJ, served as alternative placements for committed juveniles. Both programs had a capacity of 10. In the full fiscal year prior to closing, Shenandoah CPP had an ADP of 10 (FY 2007), and Tidewater CPP had an ADP of nine (FY 2008). Due to budget reductions, Shenandoah CPP was closed on December 31, 2007, and Tidewater CPP was closed on December 31, 2008. (See page 40 for more details on CPPs.)

The annual cost for Shenandoah CPP was \$620,466, and the annual cost for Tidewater CPP was \$623,018. (These figures were determined by the agreement with the detention centers to operate a 10-bed program.)

Closure Scenarios

Over the past years, DJJ has developed facility closure scenarios at the request of the Department of Planning and Budget (DPB) or Senate staff. ***Caution should be taken in interpreting these closure scenarios, as potential savings calculations rely heavily on factors that may change over time, including operational decisions, juvenile characteristics, and population management needs.*** In particular, changes in the following factors may impact actual savings against current operating appropriations:

- Time frame and time of fiscal year for closure
- Specific logistics for moving juveniles and staff
- Number of employees to be displaced or laid off
- Number of juveniles to be relocated
- Specific salary and fringe costs (e.g., retirement) that vary from year to year
- Supply of available physical beds
- Availability of increased staffing at other sites
- Availability of ancillary programs at new sites (e.g., DCE, specialized treatment, etc.)

Facility	Date Scenario Prepared	Assumed Date of Closure*	Initial Operating Budget	Savings in Year of Closure
Oak Ridge	2/2010	7/1/2010	\$3.5M	\$0.3M
Culpeper	10/2010	7/1/2011	\$11.5M	\$0.7M
Hanover	10/2010	7/1/2011	\$9.4M	-\$1.2M

* Defined as the date that the last juvenile leaves the facility
M=Million

These projected savings were estimates at the time the scenario was prepared. Due to changes in the factors listed above, projected savings on past scenarios may not represent actual savings if a facility was closed on a different date.

Part VII: Conclusions

The following options, recommendations, and conclusions are presented and explained below:

- Implement a statewide detention re-entry program.
- Investigate the possibility of establishing regional CPP programs.
- Do not close a JCC at this time.
- Identify funding for proposed changes before implementation.
- An ongoing process for the long-term planning of JCC utilization and detention-based re-entry programs should be established.

It is important to note that creating programs in detention centers or opening additional beds at JCCs would require additional funding.

Options Considered by the Workgroup

Option #1: Implement a statewide detention re-entry program for juveniles to return to the detention center in their home communities during the last 30-90 days of commitment, pending funding, in order to increase re-entry and transitional services.

Implementing a statewide detention re-entry program is a potential option for creating transitional programs in detention centers. In this program, juveniles would return to the detention center in their home communities during the last 30-90 days of commitment in order to receive re-entry and transitional services. Re-entry plans would be developed during placement in the JCCs, and parole officers would arrange and monitor the transition and re-entry services in the detention centers. Detention centers would provide room, board, and supervision, as well as education and limited services.

A detention re-entry program in the Tidewater region is already planned as a component of the Second Chance Act Grant award from the Office of Justice Programs at the U.S. Department of Justice. The currently established rate for detention re-entry is \$100 per bed per day. (See page 40 for more information about the detention re-entry component of the grant award.)

The eligibility criteria for detention re-entry participants would likely include items similar to the following:

1. Indeterminate commitment,
2. Zero to 90 days from early release date,
3. At least 90 days since last major institutional offense,
4. At least 30 days since last moderate institutional offense,
5. Not a major offender (indeterminately committed for specific violent offenses), and
6. Completion of all mandatory treatment needs.

Three snapshot JCC populations (February 1st, March 1st, and April 1st of 2011) were analyzed to determine the approximate number of juveniles that would be eligible to participate in detention re-entry before being released. Using the first five criteria (the sixth criterion cannot be tracked in the DJJ database at this time), 92 juveniles were eligible for detention re-entry. Considering the movement of juveniles based on their early release date, the potential ADP for detention re-

entry ranged from 37 to 58, meaning the JCC population could be reduced by 37-58 juveniles by fully implementing detention re-entry statewide. Based on FY 2010 ADP and operating capacity, this could reduce the JCC utilization rate (excluding RDC) to 90-93%. However, this reduction would likely be less in actual implementation for two reasons: 1) some of these juveniles would not be approved for participation due to incomplete mandatory treatment needs or other circumstances, and 2) some of these juveniles would be approved for early release incentive and released instead of transferring to a detention center. It is important to note that care must be taken to avoid extending a juvenile's LOS through the detention re-entry program who would otherwise have been released.

The 92 juveniles identified as eligible were committed from various localities across the state:

Juveniles Potentially Eligible for Detention Re-Entry (2/1/11, 3/1/11, and 4/1/11)

	#	%
Blue Ridge Juvenile Detention Home	1	1%
Chesapeake Juvenile Services	6	7%
Chesterfield Juvenile Detention Home	7	8%
Crater Juvenile Detention Home	2	2%
Fairfax County Juvenile Detention Center	0	0%
Henrico / James River Detention*	8	9%
Highlands Juvenile Detention Center	2	2%
James River Juvenile Detention Center	2	2%
Loudoun County Juvenile Detention Center	1	1%
Lynchburg Regional Juvenile Detention Center	3	3%
Merrimac Center	2	2%
New River Valley Juvenile Detention Home	0	0%
Newport News Secure Detention	8	9%
Norfolk Juvenile Detention Center	4	4%
Northern Virginia Juvenile Detention Home	2	2%
Northwestern Regional Juvenile Detention Center	4	4%
Piedmont Regional Juvenile Detention Center	4	4%
Prince William County Juvenile Detention Home	6	7%
Rappahannock Juvenile Detention Center	7	8%
Richmond Juvenile Detention Home	7	8%
Roanoke Valley Juvenile Detention Center	6	7%
Shenandoah Valley Juvenile Center	0	0%
Virginia Beach Juvenile Detention Center	2	2%
W. W. Moore, Jr. Home for Juveniles	8	9%
<i>Total</i>	92	100%

* Both Henrico Juvenile Detention Home and James River Juvenile Detention Center serve Henrico County.

Therefore, MOAs would need to be developed for each detention center in order to provide detention re-entry services to all eligible juveniles. However, each detention center is individually operated, so programs and services may not be consistent. For instance, some

detention centers may not have the resources to serve low-functioning juveniles, and some detention centers may not serve older juveniles.

Although regionalizing the detention re-entry program into a selected number of detention centers may alleviate these challenges, it would have two major limitations: 1) it is important for juveniles to be placed within approximately 30 miles of their home communities in order to maximize the effectiveness of re-entry services, and 2) grouping juveniles in detention re-entry into regional detention centers may require the facility to hire additional staff. Without regionalizing the program, the low number of juveniles at any one facility at a given time may not require additional staffing.

The following considerations must be examined before implementing a detention re-entry program in each individually-operated detention center:

1. Security requirements of juveniles versus physical plants of each detention center
2. Staff levels and distribution in JCCs and each detention center
3. Treatment requirements of juveniles versus services provided at each detention center, including mental health, substance abuse, sex offender, and age- and gender-specific needs of juveniles
4. Availability and continuity of educational services at each detention center, including middle school, high school, GED, vocational, and services for graduates
5. Capabilities of each detention center to house special populations (e.g., sex offenders, juveniles with severe mental health disorders, low-functioning juveniles)
6. Delivery of health services at each detention center

Detention re-entry is the most viable option for utilizing detention center beds for re-entry purposes. The program moves juveniles to their home communities without regionalization, and it could be incrementally implemented across the state while being monitored and evaluated for effectiveness in reducing recidivism. DJJ is already piloting this program as part of the Second Chance Act Grant, but additional funding is necessary to expand it. The department will continue to identify grant opportunities and potential reallocation of savings. However, serious consideration should be provided for identifying additional funding in the state budget for the allocation of financial support to implement detention re-entry.

Option #2: Investigate the possibility of establishing regional CPPs as alternatives or step-down placement options, with extensive input from the detention centers potentially involved.

Recreating regional CPPs is another potential option for transitional and step-down services. These programs, operated by the detention centers but contracted through DJJ, could serve as alternative placements for committed juveniles in order to improve reintegration of the juveniles into their communities.

By creating four regional CPPs with ten beds each (possible locations: Roanoke Valley Juvenile Detention Center, Virginia Beach Juvenile Detention Center, Fairfax County Juvenile Detention Center, and Chesterfield Juvenile Detention Home), juveniles could be placed in the CPP closest to their communities. Up to 40 juveniles could be placed at the CPPs at a time, meaning the JCC

population could be reduced by up to 40 juveniles. Based on FY 2010 ADP and operating capacity, this could reduce the JCC utilization rate (excluding RDC) to 92%.

DJJ would determine participants, and detention centers would provide all services with contractual oversight by DJJ. Establishing eligibility criteria may be necessary concerning juveniles' mental health needs, intellectual functioning, and treatment needs. Since detention centers, rather than DJJ, would operate the programs, the planning necessary to finalize program components and other details of the MOA must be completed with extensive input from the detention centers potentially involved. The same six considerations listed for detention re-entry would also be applicable to CPPs, and additional study, collaboration with detention centers, development of program guidelines, and analysis of costs would be necessary before the possibility of implementation. Furthermore, the regionalization of CPPs is not as desirable as the locality-based approach of detention re-entry, making detention re-entry the better option for a detention-based program for committed juveniles.

DJJ's Recommendations

Recommendation #1: Do not close a JCC at this time.

For proper population management, the utilization of beds must be less than 100% in order to accommodate resident movement and placements according to their varying characteristics and needs (e.g., age, sex, treatment needs, classification level). There is no set percentage of bed utilization recommended for all facilities or jurisdictions because the number of special population categories influences the amount of flexibility needed in the ideal utilization rate.¹

In order to adequately place and move residents for the purposes of security and program delivery, facilities need more empty beds when there are more individualized needs for treatment and services in the population. Based on the various treatment needs described in previous sections and other population management concerns among committed juveniles, DJJ has determined that the target utilization for the JCCs, excluding RDC, is approximately 80-85%.

This study revealed that the utilization of JCC operating capacity in FY 2010, excluding RDC, was 97%, exceeding the target rate and approaching 100%. Exceeding this figure may cause challenges in placing residents with treatment needs or other placement considerations in the appropriate environment. Although the JCC population forecast projects a slight decline in ADP until FY 2013, ADP is then predicted to increase through FY 2016; a decline in the utilization rate is not expected in the long term unless the operating capacity is expanded. Therefore, additional beds are required for committed juveniles, whether in the JCCs or through detention-based programs.

Even if detention-based re-entry services are expanded, the JCCs must still provide security and services for those juveniles remaining in the facilities. If the utilization rate is too high, the JCCs cannot operate effectively and meet the security, treatment, and educational needs of residents,

¹ Bennett, D. M., & Lattin, D. (2009). *Jail capacity planning guide: A systems approach*. Washington, DC: National Institute of Corrections.

particularly those with high risks and specialized needs. If the detention-based programs described above were implemented, the potential reduction in the JCC population would be gradual as the programs were incrementally put into practice. Even the full implementation of a statewide detention re-entry program would not reduce the JCC utilization rate to the target range.

Thus, it is not feasible to close a JCC at this time, and it is recommended that serious consideration be provided for additional beds to be opened, pending funding, utilizing some of the 202 additional beds currently not being used across four JCCs (Bon Air, Beaumont, Culpeper, and Hanover). According to the FY 2010 ADP, between 114 and 170 of the 202 potentially available beds would need to be opened to reach the utilization rate of 80-85% (excluding RDC), but this number may be lower if the detention-based programs were implemented. Also, these beds could be closed as the need for them diminished. However, opening additional housing units would require additional funding.

If those beds were opened, 32-88 potentially usable JCC beds would remain closed. According to the ADP and capacity of Oak Ridge JCC (40), it might be argued that Oak Ridge JCC could be closed if the remaining available beds were also opened. However, Oak Ridge residents require a centralized environment arrangement with single-bed rooms in order to provide effective treatment and services to the low-functioning juveniles. The 32-88 potentially usable beds would be scattered across four facilities and would not comply with the necessary single-bed room arrangement. Therefore, closing Oak Ridge is not a viable option at this time since there is no alternative for offering the services currently provided to those juveniles.

The next smallest facility is Hanover, with a capacity of 120, ADP for FY 2010 of 118, and 30 potentially usable closed beds. If Hanover were to close, there would be 172 potentially usable beds across three facilities (Bon Air, Beaumont, and Culpeper). According to the FY 2010 ADP, if all of these potentially usable beds were opened, the utilization rate (excluding RDC) would be 91%, exceeding the target rate of 80-85%. Thus, it is not feasible to close Hanover at this time. No other facility has an ADP or operational capacity small enough to be able to close while maintaining the target 80-85% utilization rate.

It is important to note that opening additional JCC beds is not intended to “widen the net” and increase the number of committed youth. Opening additional beds would not increase the likelihood of juveniles being committed or decrease the availability or access to detention-based programs. In fact, these beds could be reclosed if the JCC population later decreased due to either a decline in commitments or an increase in the use of detention-based programs. Conversely, should the juvenile offender population begin to increase in the future then action concerning additional bed space will need to occur.

Recommendation #2: Identify funding before implementing the proposed programs in detention centers, opening additional JCC beds, or creating other re-entry programs.

As demonstrated by the past JCC closures and the past closure scenarios, cost-savings from closing a facility can vary. Closing Barrett JCC did not result in any identifiable cost-savings in the two years following the closure. Closing Natural Bridge resulted in some savings, but it was

not until the second year following the closure for the savings to approach the operating budget. Similarly, the closure scenarios prepared in 2010 projected minimal savings for closing Oak Ridge and Culpeper JCCs and a deficit for closing Hanover JCC.

It is not recommended that a facility be closed at this time (as described on page 50) due to the current population management considerations. Furthermore, it is unlikely that a facility closure would result in sufficient cost-savings for the immediate implementation of the programs described above. Cost-savings from facility closures take time to be actualized due to the factors previously described. (See page 45.)

Therefore, before implementing any of the three options above, funding streams must be identified independently from the reallocation of funds from facility closures. It may be possible to reallocate funding from other existing sources to implement re-entry programs on a limited or smaller scale. Thus, DJJ should conduct ongoing assessments of expenditures in order to identify possible sources for reallocating funding for operational and re-entry purposes. Also, DJJ will continue to investigate possible grant opportunities to help fund programs for committed juveniles. Finally, funding in the state budget could be allocated for these services.

Conclusion

An ongoing process for the long-term planning of JCC utilization and detention-based re-entry programs should be established.

As described above, the utilization rate for FY 2010, excluding RDC, was 97%, exceeding the target rate of 80-85%. Therefore, one option presented was to expand the operating capacity in order to increase the flexibility of placing juveniles according to their treatment and other needs. However, if a statewide detention re-entry program and regional CPP programs are implemented, the JCC ADP would decrease as juveniles were placed in detention centers for portions of their commitment. These programs, especially the CPP programs, would take time to be planned and implemented and to affect the JCC ADP.

According to the analyses described above, a detention re-entry program could reduce the JCC ADP by approximately 37-58 juveniles; however, these figures may be high. (See page 47 for an explanation of the analysis.) Regional CPP programs could further reduce the JCC ADP by 40 juveniles according to the possible capacities of the programs. If both statewide detention re-entry programs and CPPs were fully implemented, the JCC ADP could be decreased by 77-98.

It is important to pilot these programs in order to determine the following:

- 1) The actual number of juveniles participating in the programs and the resulting reduction of the JCC ADP,
- 2) The characteristics and needs of the juveniles participating in the programs,
- 3) The characteristics and needs of the juvenile population remaining in the JCCs,
- 4) The facilities and programs in the JCCs that should remain in operation in order to best serve the needs of those juveniles remaining in the JCCs,
- 5) The feasibility of closing a facility based on the factors above, and
- 6) The cost comparisons of JCCs and the detention-based programs.

Therefore, more investigation and analyses are necessary to determine the feasibility of both the implementation of transitional detention programs and resulting changes in the utilization of JCCs. It is recommended that DJJ continue to examine JCC population trends, characteristics and needs of committed juveniles, physical conditions of JCCs, and potential funding sources for programming. Any pilot programs should be monitored to determine the impact on JCC population counts and utilization rates. This examination should become an ongoing process in order to establish long-term planning for the operation of JCCs and the development of detention-based re-entry programs, and decisions to open or close JCC units or facilities and to implement detention-based re-entry programs should be based on these ongoing analyses.

Appendices

Appendix A: Outstanding Capital Needs

Barrett JCC (All Work Suspended due to Facility Closure)

Structure/Use	Repairs Needed	Cost Estimate
Walker Cottage	HVAC, fire safety, windows/doors	\$850,000
McNeil Cottage	HVAC, fire safety, windows/doors	\$850,000
Lowe Cottage	HVAC, fire safety	\$850,000
	Windows/doors (Completed in 2005)	
Buck Cottage/ Infirmary	HVAC, fire safety, windows/doors	\$850,000
O'Kelley Cottage	Windows/doors	\$350,000

Beaumont JCC

Structure/Use	Repairs Needed	Cost Estimate
Campus-wide	Emergency water system	\$1,000,000*
	Water system piping replacement (Under construction)	
	Convert to propane delivery system (Under design)	\$350,000*
	New fiber-optic security and communications (NF)	\$2,505,000
Central Maintenance	Central maintenance, materials storage building (NF)	\$2,110,000
Old Dining Hall	Renovation to convert to storage warehouse (NF)	\$90,000
Beaumont Mansion	Renovate historic Beaumont Manor House (NF)	\$1,165,000

Bon Air JCC

Structure/Use	Repairs Needed	Cost Estimate
Central Campus	Main electrical feed upgrade	\$150,000
Light Cottage	New roof, HVAC, windows (Completed in 2008)	\$750,000
	Electrical upgrades, fire safety (Under design)	
Stuart Cottage	New roof, HVAC, windows (Completed in 2008)	\$750,000
	Electrical upgrades, fire safety (Under design)	
Keller Cottage	New roof, HVAC, windows (Completed in 2008)	\$750,000
	Electrical upgrades, fire safety (Under design)	
Fisher-Jackson	HVAC, electrical, fire safety (Under design)	\$750,000
	Windows and roof (Construction scheduled for 2011)	
Nichols Cottage	New roof, HVAC (Completed in 2008)	\$750,000
	Electrical upgrades, fire safety (Under design)	
Carroll Cottage	AC, electrical, fire safety (Under design)	\$550,000
	Windows, new roof (Construction scheduled for 2011)	
Buchanan Cottage	New roof, HVAC (Completed in 2008)	\$750,000
	Electrical upgrades, fire safety (Under design)	
Campus-wide	New fiber-optic security and communications (NF)	\$11,500,000
Central Maintenance	Construct new central maintenance, materials storage building (NF)	\$1,550,000
Campus-wide	Construct new dry-storage warehouse (NF)	\$2,695,000
Bon Air House	Renovate historic Kilburne House (NF)	\$950,000
Old Infirmary	Renovate to convert to administrative space (NF)	\$1,040,000

Cedar Lodge

Structure/Use	Repairs Needed	Cost Estimate
Cedar Lodge	Renovate building and replace modular classroom (NF)	\$600,000

Hanover JCC

Structure/Use	Repairs Needed	Cost Estimate
Winston Cottage	Windows/doors, electrical, fire upgrades (NF)	\$500,000
Bannister Cottage	Emergency generator (Under design)	\$285,000*
Cardwell Cottage		
Martha Washington		
Ellen Allen	Doors, electrical, HVAC, fire safety (NF)	\$850,000
Edwards Cottage	Doors, electrical, HVAC, fire safety (NF)	\$850,000
New Entry Building	Capital new construction 13,538 sf. (Begin Construction July, 2011)	\$3,585,000*
Campus-wide	Propane piping system (Phase 1 completed in 2009)	\$175,000*
	Duress alarm system	\$150,000*
	Water system piping replacement	\$250,000*
	Damage resulting from Tropical Storm Gaston (Construction scheduled for 2011-12)	\$2,304,000*
DCE School	Fire alarm/sprinkler system (Under design)	\$200,000*
	Construct new classroom addition (NF)	\$2,350,000
Dining Hall	Fire safety upgrades (Completion scheduled for 2011)	\$100,000*
Dormitory	Construct replacement dormitory	\$2,350,000

Natural Bridge JCC (All Work Suspended due to Facility Closure)

Structure/Use	Repairs Needed	Cost Estimate
New Multi-Use Building	Capital new construction (NF)	\$2,425,000
Gymnasium	Renovation/expansion (NF)	\$3,500,000
Campus-wide	Fire safety system upgrade.	\$345,000*
	Water piping replacement	\$350,000*
	Waste water piping replacement	\$290,000*
Campus-wide	New central plant and distribution lines (NF)	\$1,250,000
Housing	Construct four new replacement housing units (NF)	\$3,000,000
Maintenance Building	Construct new central maintenance building (NF)	\$1,050,000
Administrative Building	Construct new administration and program building (NF)	\$1,300,000

Oak Ridge JCC

Structure/Use	Repairs Needed	Cost Estimate
New Addition	Capital new construction - 20,000 sf. (NF)	\$4,250,000
Cell Blocks	Retrofit supplementary cell heating units (Phase 1 completed in 2008; Phase 2 under design)	\$245,000*

RDC

Structure/Use	Repairs Needed	Cost Estimate
A-2 Cottage	HVAC, fire safety upgrades, replace windows Electrical upgrades (Construction scheduled for 2011-12)	\$750,000
A-3 Cottage	HVAC, fire safety upgrades, replace windows Electrical upgrades (Construction scheduled for 2011-12)	\$750,000
B Cottage	Fire safety upgrades, replace windows (Construction scheduled for 2011-12)	\$350,000
A-4 Cottage	Fire safety upgrades, replace windows (Construction scheduled for 2011-12)	\$350,000
Building C-1	Fire safety upgrades, replace windows Electrical upgrades (Construction scheduled for 2011-12)	\$350,000
Building C-2	Replace windows (Construction scheduled for 2011-12)	\$100,000
Building C-3	Fire safety upgrades, replace windows Electrical Upgrades (Construction scheduled for 2011-12)	\$350,000
New School & Infirmery	Capital new construction (42,365 sf.) Construction scheduled for August, 2011.	\$12, 327,000*
New School/Infirmery	Supplemental funding for Virginia Energy Conservation and Environmental Standards (VEES) Compliance (NF)	\$655,000
Administrative Building	Renovate administrative building to support new infirmery (NF)	\$150,000
Dining Hall	Renovate walk-in food storage and preparation area (NF)	\$250,000

*Capital Project
(NF) = Not Funded
sf. = Square Feet

Appendix B: DCE School Courses and Vocational Training

Beaumont JCC

Residents are enrolled in courses at Paul S. Blandford High School and Paul S. Blandford High School Annex to obtain a high school diploma (Standard, Modified Standard, and Special) or in the Individual Student Alternative Education Plan (ISAEP)/GED program to pursue a GED.

Paul S. Blandford High School and Paul S. Blandford High School Annex Courses

- English 9-12
- Algebra 1, Geometry, and Computer Math
- Earth Science, Biology, and Integrated Science
- World History (before 1500), VA/US History, and Government
- Health/PE, Driver's Ed (classroom), and Life Sports
- Social Skills
- Art
- Developmental Reading I, II, and III
- Resource English, Math, Science, History/Social Science 9 -12

Career and Technical Education

- Advertising Design and Sign-Making Enterprise
- Business Education
- Barbering Training Program
- Career Pathways
- Commercial/Residential Cleaning
- Computer Systems Technology/Computer Repair Enterprise
- Cook/Food Service Apprenticeship
- Direct Print
- Electricity
- Graphic Imaging and Technology
- Immediate Assembly
- Marketing
- Masonry
- Offset Printing Enterprise
- Silk-Screen Enterprise
- Small Engine Repair
- Technology Education

Bon Air JCC

Residents are enrolled in courses at Joseph T. Mastin High School and Joseph T. Mastin High School Annex to obtain a high school diploma (Standard, Modified Standard, and Special) or in the ISAEP/GED program to pursue a GED.

Joseph T. Mastin High School and Joseph T. Mastin High School Annex Courses

- English 9-12
- Spanish
- Algebra 1, Geometry, and Computer Math
- Earth Science, Biology, and Integrated Science
- World History (before 1500), VA/US History, and Government
- Health/PE, Driver's Ed (classroom), and Life Sports
- Social Skills
- Developmental Reading I, II, and III
- Art
- Music
- Resource English, Math, Science, History/Social Science 9 -12

Career and Technical Education

- Advertising Design Apprenticeship and Sign-Making Enterprise
- Business Education
- Career Pathways
- Commercial/Residential Cleaning
- CAD/Drafting
- Cosmetology
- Culinary Arts
- Direct Print (girls)
- Technology Education

Culpeper JCC

Residents who have not earned a high school diploma or a GED are enrolled in the GED program at Cedar Mountain High School. If the resident has a disability and has been determined not to be a candidate for the GED program, he will continue enrollment in resource classes to earn a Special Diploma.

Career and Technical Education

- Barbering Training Program
- Building Maintenance/Repair
- Business Education
- Career Pathways
- Commercial/Residential Cleaning
- Culinary Arts
- Cook/Food Service Apprenticeship
- Horticulture Enterprise

Hanover JCC

Residents are enrolled in courses at John H. Smyth High School to obtain a high school diploma (Standard, Modified Standard, or Special) or in the ISAEP/GED program to pursue a GED.

John H. Smyth High School Courses

- Resource English
- Spanish
- Resource Math
- Integrated Science and Resource Science
- World History (prior to 1500) and Resource History/Social Science
- Junior Reserve Officers' Training Corps (JROTC) Leadership Education Training I-IV

Career and Technical Education

- Business Education
- Cabinet Making
- Career Pathways
- Commercial/Residential Cleaning
- Cook/Food Service Apprenticeship
- Electricity
- Horticulture Enterprise
- JROTC

Oak Ridge JCC

Residents are enrolled in courses at W. Hamilton Crockford High School. Residents with disabilities pursue a Special Diploma.

W. Hamilton Crockford High School Resource Courses

- English
- Math
- Science
- History/Social Science
- Developmental Reading
- Health/PE

Career and Technical Education

- Building Cleaning Exploration
- Culinary Arts: Fast Foods
- Immediate Assembly

Appendix C: Detention Center ADP, Capacity, and Utilization*Detention Centers – ADP, Capacity, and Utilization, FY 2010**

	ADP	Capacity	% Utilization
Blue Ridge Juvenile Detention Home	17	40	43%
Chesapeake Juvenile Services	50	100	50%
Chesterfield Juvenile Detention Home	49	90	54%
Crater Juvenile Detention Home	17	22	N/A
Fairfax County Juvenile Detention Center	48	121	40%
Henrico Juvenile Detention Home	19	20	N/A
Highlands Juvenile Detention Center	25	35	71%
James River Juvenile Detention Center	58	60	97%
Loudoun County Juvenile Detention Center	16	24	67%
Lynchburg Regional Juvenile Detention Center	26	48	54%
Merrimac Center	38	48	79%
New River Valley Juvenile Detention Home	15	24	63%
Newport News Secure Detention	75	110	68%
Norfolk Juvenile Detention Center	50	80	63%
Northern Virginia Juvenile Detention Home	45	70	64%
Northwestern Regional Juvenile Detention Center	17	32	53%
Piedmont Regional Juvenile Detention Center	13	20	N/A
Prince William County Juvenile Detention Home	31	72	N/A
Rappahannock Juvenile Detention Center	42	80	53%
Richmond Juvenile Detention Home	26	60	N/A
Roanoke Valley Juvenile Detention Center	31	81	N/A
Shenandoah Valley Juvenile Center	17	38	N/A
Virginia Beach Juvenile Detention Center	47	90	52%
W. W. Moore, Jr. Detention Home	28	60	47%

* Detention center ADPs may not add to Total ADP due to rounding.

*Pre-D/Post-D without Programs/Other – ADP, Capacity, and Utilization, FY 2010**

	ADP	Capacity	% Utilization
Blue Ridge Juvenile Detention Home	14	30	47%
Chesapeake Juvenile Services	43	80	54%
Chesterfield Juvenile Detention Home	43	80	54%
Crater Juvenile Detention Home	17	22	77%
Fairfax County Juvenile Detention Center	39	106	37%
Henrico Juvenile Detention Home	19	20	95%
Highlands Juvenile Detention Center	21	28	75%
James River Juvenile Detention Center	36	40	90%
Loudoun County Juvenile Detention Center	13	16	81%
Lynchburg Regional Juvenile Detention Center	19	39	49%
Merrimac Center	30	33	91%
New River Valley Juvenile Detention Home	12	16	75%
Newport News Secure Detention	60	90	67%
Norfolk Juvenile Detention Center	41	64	64%
Northern Virginia Juvenile Detention Home	36	60	60%
Northwestern Regional Juvenile Detention Center	13	19	68%
Piedmont Regional Juvenile Detention Center	13	20	65%
Prince William County Juvenile Detention Home	31	72	43%
Rappahannock Juvenile Detention Center	35	70	50%
Richmond Juvenile Detention Home	26	60	43%
Roanoke Valley Juvenile Detention Center	31	81	38%
Shenandoah Valley Juvenile Center	17	38	45%
Virginia Beach Juvenile Detention Center	40	75	53%
W. W. Moore, Jr. Detention Home	22	48	46%

* Detention Center ADPs may not add to Regional or Statewide ADP due to rounding.

*Post-D with Programs – ADP, Capacity, and Utilization, FY 2010**

	ADP	Capacity	% Utilization
Blue Ridge Juvenile Detention Home	3	10	30%
Chesapeake Juvenile Services	7	20	35%
Chesterfield Juvenile Detention Home	6	10	60%
Crater Juvenile Detention Home	0	0	N/A
Fairfax County Juvenile Detention Center	9	15	60%
Henrico Juvenile Detention Home	0	0	N/A
Highlands Juvenile Detention Center	4	7	57%
James River Juvenile Detention Center	22	20	110%
Loudoun County Juvenile Detention Center	3	8	38%
Lynchburg Regional Juvenile Detention Center	7	9	78%
Merrimac Center	8	15	53%
New River Valley Juvenile Detention Home	3	8	38%
Newport News Secure Detention	15	20	75%
Norfolk Juvenile Detention Center	9	16	56%
Northern Virginia Juvenile Detention Home	9	10	90%
Northwestern Regional Juvenile Detention Center	4	13	31%
Piedmont Regional Juvenile Detention Center	0	0	N/A
Prince William County Juvenile Detention Home	0	0	N/A
Rappahannock Juvenile Detention Center	7	10	70%
Richmond Juvenile Detention Home	0	0	N/A
Roanoke Valley Juvenile Detention Center	0	0	N/A
Shenandoah Valley Juvenile Center	0	0	N/A
Virginia Beach Juvenile Detention Center	7	15	47%
W. W. Moore, Jr. Detention Home	6	12	50%

* Detention Center ADPs may not add to Regional or Statewide ADP due to rounding.

Appendix D: Detention Center Staffing

Detention Center Staffing, FY 2010

	Full-Time Positions*
Blue Ridge Juvenile Detention Home	35
Chesapeake Juvenile Services	77
Chesterfield Juvenile Detention Home	60
Crater Juvenile Detention Home	26
Fairfax County Juvenile Detention Center	104
Henrico Juvenile Detention Home	28
Highlands Juvenile Detention Center	34
James River Juvenile Detention Center	66
Loudoun County Juvenile Detention Center**	31
Lynchburg Regional Juvenile Detention Center	47.05
Merrimac Center	57
New River Valley Juvenile Detention Home	25.75
Newport News Secure Detention	111
Norfolk Juvenile Detention Center	74
Northern Virginia Juvenile Detention Home	71
Northwestern Regional Juvenile Detention Center	35
Piedmont Regional Juvenile Detention Center**	18
Prince William County Juvenile Detention Home	44.5
Rappahannock Juvenile Detention Center	79
Richmond Juvenile Detention Home**	63.6
Roanoke Valley Juvenile Detention Center	55
Shenandoah Valley Juvenile Center	43
Virginia Beach Juvenile Detention Center	64
W. W. Moore, Jr. Detention Home**	45

* Some positions may not be filled. All detention centers have a mental health clinician which is funded by the Department of Behavioral Health and Developmental Services and provided by the local Community Services Board. Some detention centers provide funding to support the position.

** Loudoun, Piedmont, Richmond, and W. W. Moore, Jr. have 11, 11, 14, and 12 part-time positions, respectively. Many detention centers rely on part-time staff to support the direct supervision of detained residents, but some may not have noted the number of part-time staff in this report.

Appendix E: JCC Residents and Detention Center Localities

Residents on February 1, 2011 by Committing Detention Center Localities

	#	%
Blue Ridge Juvenile Detention Home	21	3%
Chesapeake Juvenile Services	65	8%
Chesterfield Juvenile Detention Home	48	6%
Crater Juvenile Detention Home	34	4%
Fairfax County Juvenile Detention Center	29	4%
Henrico / James River Detention*	58	7%
Highlands Juvenile Detention Center	12	1%
James River Juvenile Detention Center	10	1%
Loudoun County Juvenile Detention Center	8	1%
Lynchburg Regional Juvenile Detention Center	20	2%
Merrimac Center	39	5%
New River Valley Juvenile Detention Home	5	1%
Newport News Secure Detention	97	12%
Norfolk Juvenile Detention Center	62	8%
Northern Virginia Juvenile Detention Home	16	2%
Northwestern Regional Juvenile Detention Center	16	2%
Piedmont Regional Juvenile Detention Center	9	1%
Prince William County Juvenile Detention Home	23	3%
Rappahannock Juvenile Detention Center	45	6%
Richmond Juvenile Detention Home	67	8%
Roanoke Valley Juvenile Detention Center	20	2%
Shenandoah Valley Juvenile Center	15	2%
Virginia Beach Juvenile Detention Center	51	6%
W. W. Moore, Jr. Detention Home	46	6%
<i>Total</i>	<i>816</i>	<i>100%</i>

* Both Henrico Juvenile Detention Home and James River Juvenile Detention Center serve Henrico County.

Detention-Eligible Residents on February 1, 2011 by Committing Detention Center Localities

	#	%
Blue Ridge Juvenile Detention Home	7	5%
Chesapeake Juvenile Services	12	9%
Chesterfield Juvenile Detention Home	12	9%
Crater Juvenile Detention Home	7	5%
Fairfax County Juvenile Detention Center	3	2%
Henrico / James River Detention*	10	7%
Highlands Juvenile Detention Center	2	1%
James River Juvenile Detention Center	1	1%
Loudoun County Juvenile Detention Center	2	1%
Lynchburg Regional Juvenile Detention Center	5	4%
Merrimac Center	7	5%
New River Valley Juvenile Detention Home	2	1%
Newport News Secure Detention	8	6%
Norfolk Juvenile Detention Center	8	6%
Northern Virginia Juvenile Detention Home	3	2%
Northwestern Regional Juvenile Detention Center	4	3%
Piedmont Regional Juvenile Detention Center	2	1%
Prince William County Juvenile Detention Home	6	4%
Rappahannock Juvenile Detention Center	15	11%
Richmond Juvenile Detention Home	14	10%
Roanoke Valley Juvenile Detention Center	2	1%
Shenandoah Valley Juvenile Center	0	0%
Virginia Beach Juvenile Detention Center	3	2%
W. W. Moore, Jr. Detention Home	6	4%
<i>Total</i>	<i>141</i>	<i>100%</i>

* Both Henrico Juvenile Detention Home and James River Juvenile Detention Center serve Henrico County.