

## **PARENT TOWN HALL MEETING – MAY 15, 2020 PRESENTERS' REMARKS**

**Valerie Boykin, Director**

Thank you for joining us for our first parent Town Hall Forum.

We are excited that so many of you are able to join us by computer or phone.

The goals for tonight are to:

- Provide you with up-to-date information regarding DJJ's Bon Air Operations
- COVID 19 Response Planning
- Current Status of the youth
- What is provided and needed for youth as they leave our care
- Answer your questions provided in advance. We ask that you send any questions that you have tonight over the Questions feature if you are on the Go To Meeting site or contact our Family Engagement Team and we will answer your questions at a later time.

We certainly have found ourselves in an unprecedented situation as the coronavirus – COVID 19 -- has hit Virginia, the US and the world. Unfortunately, DJJ and, specifically Bon Air Juvenile Correctional Center, was not spared. This has been a scary time for us all with new information about the virus and its impact coming out all the time.

I want you to know that DJJ managers and staff across the agency began planning for the possible attack of the virus weeks before the first case was announced in Virginia on March 7. You will hear about some of our efforts to prepare tonight. We enacted facility wide protocols for employees and the youth and have modified them as new information has come out from the CDC.

Beginning, the day after the Governor declared the state of emergency on March 12, our management level COVID 19 Response Team began daily weekday meetings for the first few weeks followed by three days a week which continues as we speak. We reached out to the Virginia Department of Health in February and they have been working with us ever since. Unfortunately, we had our first staff to test positive on April 1 and the first youth to test positive on April 5. Contact tracing is important during a virus but we may never know when or how it entered the facility. Certainly, it could have been staff, it could have been a new youth arrival, it could even have been through visitation that we had suspended only a short time beforehand. It could also be all of the above.

Nevertheless, we had to make tough decisions at that time of the first positive youth. Based on the guidance provided by the medical experts and scientist, the epidemiologist, we went into a facility wide quarantine in an effort to isolate and determine the extent of COVID 19 on the campus. You will recall that quarantines were and still are happening in the community when there is exposure. We did not know who had been exposed and quarantine in a facility, unfortunately, means remaining in one's room for extending periods of time. Prior to the quarantine, we had some parents asking for release and others questioning why we had not separated and quarantined all youth. We made that decision when it was medically warranted. As a result, over a two-week period, we identified 26 youth who had little to no symptoms but tested positive for COVID 19. Had we not stepped up our testing protocols which

exceed those in the community we may have never known that they had the virus. You will hear more about those protocols from our health officials. The quarantine lasted a little over two weeks as our outside professional cleaning crew was delayed in returning to the facility to finish the deep clean in the living areas. You will hear more about our cleaning efforts as well.

I am happy to report that as a result of the quarantine, we believe that we have slowed the spread of the virus. We have only had three additional youth to test positive following the quarantine and all but two of those youth live in 4 of our 14 housing units. All youth have fully recovered. The Health Department advises us that we can only slow the spread and just like in the community, it will take some time to be totally gone or eradicated. We have not had a youth to test positive in nearly two weeks. However, we are not out of the woods and neither is the rest of the country, unfortunately. We do hope that we have hit our curve, the highest numbers.

You have heard a lot in the media about releasing youth. I want you to know that DJJ does not have the authority to release most of the youth at Bon Air. The Courts maintain that authority. I will say that we began looking at the release status of youth in March and continue to do so today. We have been able to reduce the population by about 15% and if appropriate will continue to see when and where others might be released.

It seems that COVID 19 is here with us for a while. The experts cannot tell us when it will be gone but I need for you to know that your child's health and well-being along with the employees of this agency is a priority to us and we will continue to do all in our power to ensure their well-being.

### **Mark Murphy, Health Services Director**

Health Services encompasses medical, dental, nursing, and the behavioral services unit.

Our health services team has been meeting daily to ensure we have a well thought out and coordinated response to the virus that takes into consideration all of our residents' health needs. We have also been in frequent contact with the Virginia Department of Health to review our plans and seek the latest guidance.

To give you more detailed information about our response to the virus and what we have seen so far, I am going to turn you over to Dr. Christopher Moon, our medical director. He will be followed by Dr. Robin Binford-Weaver, our Behavioral Services Unit Director. She will share with you about our mental health team's work during this time.

### **Dr. Christopher Moon, DJJ Chief Physician**

Hello, I'm Dr. Christopher Moon, the chief physician with the Virginia Department of Juvenile Justice. I've been with the department over 10 years now. I'm a board certified family practice doctor, a member of the American college of correctional physicians, and a certified correctional healthcare provider.

What is COVID-19?

As I'm sure most of you know, COVID-19 is the illness caused by the Coronavirus, also known as SARS-COV-2. This is a new coronavirus that has spread throughout the entire world.

It spreads through respiratory droplets, person-to-person in close contact, usually within 6 feet. It can be spread through coughing, sneezing, or even talking. You can also get it by touching a surface or object that has the virus on it, then touching your mouth, nose, or eyes, though this is not thought to be the main way the virus spread.

There is currently no vaccine against COVID-19.

I want to start by giving you a brief timeline of the virus including the steps that we took as an agency.

COVID 19 first was reported in Wuhan, China by the Wuhan Health commission on December 31, 2019. On January 5<sup>th</sup> the World Health Organization first published on the new virus.

The WHO first reported evidence of human-to-human transmission on January 22, 2020.

The department of Juvenile Justice first met to discuss COVID-19 on February 27, 2020.

On March 10<sup>th</sup> DJJ established a 4 stage COVID-19 response plan.

On March 11<sup>th</sup>, the WHO made the assessment that COVID-19 can be characterized as a pandemic.

On March 12<sup>th</sup> we met with the Virginia Department of Health.

On March 13<sup>th</sup> we activated a number of precautions to reduce the risk of virus entering or spreading within the facility.

Visitation was suspended.

We began a mandatory temperature checks and COVID 19 questionnaires at front entry of the Bon Air Juvenile Correctional Center. Any staff with fever and or positive screening was reviewed by a medical provider and if indicated not allowed to enter the facility.

We began requiring all transfers to be screened for COVID-19 prior to being sent to Bon Air.

On March 15<sup>th</sup> we stopped all mixing of units.

On March 16, we began checking resident temperatures every three days.

Governor Northam issued a statewide stay at home order on March 30.

On April 3, we had our first confirmed COVID-19 positive youth.

On April 6 we went on facility wide lockdown to stop transmission within units.

On that same day through the advice of the local health department, we began screening our entire population twice a day.

Normally a temperature is considered a fever if it is greater than 100.4 degrees, however we are testing for COVID-19 in all residents with a temperature 99.0 or greater. With the help of the health department and the state lab we have a quick turnaround with results and are able to isolate those residents that test positive in accordance with the health department recommendations.

We test residents for the coronavirus through a nasal swab. It tests directly for the virus through PCR. This is a test that takes the virus if it's present and makes it detectable.

We tested 125 residents, with a total of 29 residents testing positive. All 29 residents recovered. Most were asymptomatic. The few that did have symptoms had a mild flu-like illness.

In the overwhelming majority of the positive cases we've had, the temperatures were only between 99.0 and 99.9. Very few residents who were positive had temperatures greater than 99.9 degrees.

Most of the residents were asymptomatic.

We currently have no active cases of COVID-19, and have not had any reported in the last four weeks.

**Dr. Robin Binford-Weaver, Behavioral Services Manager**

Good evening. My name is Dr. Robin Binford-Weaver and I am the Director of the Behavioral Services Unit (BSU) for the Department of Juvenile Justice. I am a Licensed Clinical Psychologist and I have been with the agency for 16 years. I began my career with the agency working at the Bon Air JCC as a therapist working with youth, many of whom had significant mental health issues.

My current role within the agency is to ensure that we have qualified clinicians at the facility who can effectively meet the mental health needs of our youth. Every residential living unit has a BSU staff assigned to it with a minimum of master's level training in psychology, social work, or counseling. BSU is responsible for conducting evaluations of residents and providing individual, group, and family therapy to residents and families.

Upon admission to Bon Air, every youth is assigned a therapist. Each youth works with his respective therapist to develop a mental health treatment plan to address his individual needs. All youth also have a Comprehensive Reentry Case Plan to address their overall case planning needs. All residents have access to their therapists and work with them on their individual goals. Throughout the period of quarantine, BSU staff were on campus in a rotating fashion in keeping with efforts to minimize resident and staff exposure. BSU checked on residents and worked with treatment teams to assess and respond to residents' needs and concerns, as indicated and/or requested.

Due to appropriate prioritization of medical and public health needs, the focus of BSU clinicians with residents was on maintaining mental health stability. During that period, group treatment services were suspended. Now that the medical and public health issues have abated, the full complement of BSU services are available to residents again. Residents are engaging regularly with their therapists to address mental health issues and treatment needs such as aggression management, substance abuse treatment, and sex offender treatment, as already outlined in their existing treatment plans. Additionally, there is always someone on-call to address crises. And finally, residents have and will continue to always have access to psychiatric care.

I hope that, while brief, this summary gives you a better idea about the clinical services available to residents.

**Russell Jennings, Superintendent, Bon Air Juvenile Correctional Center**

My name is Russell Jennings Superintendent Senior at Bon Air Juvenile Correctional Center. My role is to oversee the facility daily operation. As Superintendent and a father of two, I clearly understand your concerns during these unforeseen circumstances. Back in early March, we implemented measures to reduce the risk of COVID-19 from spreading through the facility. We implemented temperatures check for all staff entering the facility. Nurses are posted out in the lobby area checking staff temperature, and

any staff displaying an elevated temperature are sent home and advised to seek medical attention. All staff must wash their hands, and use hand sanitizer before entering into the secure environment.

As we learned more about COVID-19 we implemented more safety protocols to reduce the risk of COVID-19 from spreading within the facility. My team is working hard daily to ensure the safety protocols we implemented are conducted daily. Example of some safety protocols we have implemented:

- Cloth face mask for staff and residents
- Housing unit cleaning protocols
- Sanitizing shower protocols
- After-work protocol
- PPE removal protocol for staff
- Disinfection of staff footwear

We also implemented a social distancing protocol to allow residents out of their rooms onto the open dayroom area in groups of two. Residents must wear their cloth facemask while out on the pod floor at all times. Staff continue to reiterate to residents the importance of wearing their cloth facemask and social distancing themselves.

We are in discussion on when we will resume visitation. Meanwhile, resident can make unlimited phone calls using our Global Tel Link (GTL), and write unlimited letters.

#### **Dr. Melinda Boone, Interim Superintendent/Education Consultant**

I am Dr. Melinda Boone, Interim Superintendent for the Department of Juvenile Justice. Prior to this position, I served 10 years as a superintendent of schools for two different urban school districts in Massachusetts and Virginia.

On March 13, Governor Ralph Northam announced the initial two-week school closure for all schools across the Commonwealth, including the Yvonne B. Miller High School at Bon Air JCC. Prior to the end of those two weeks, Governor Northam announced that all schools would be closed for the remainder of the 2019-2020 school year. Initially, learning packets were developed by the teachers for the students that provided enrichment, as well as activities to address skills gaps.

The Virginia Department of Education developed guidance in support of school districts and schools providing for continuity of education during the closure. The goal was to ensure that high school seniors would be able to complete graduation requirements and that students in other grades would complete courses for promotion to the next grade. At the same time, the US Department of Education granted a waiver to the state allowing Standards of Learning (SOL) tests to be canceled for this spring. Students can meet the verified credit requirements that normally would have happened as a result of the SOL tests, through the awarding of Locally Awarded Verified Credits. Additionally, the Virginia General Assembly waived a few other graduation requirements for seniors in the Class of 2020 such as completion of a fine arts or CTE course.

The DJJ Division of Education developed a Continuity of Learning Plan that is now being implemented and includes students being able to resume their online courses through the Edgenuity program. Learning packets are provided for elective, CTE, and post-secondary courses and for students with disabilities to address their Individualized Education Plans.

**Linda McWilliams, Deputy Director, Community Programs**

Good Evening, I am Linda McWilliams, the Deputy Director for Community Programs. The Community Programs Division provides supports and services to youth beginning at intake, during probation, commitment and transition from commitment and parole supervision.

Community Division staff remain involved in release planning for your child throughout their stay at Bon Air. This support and communication occurs through treatment team involvement, visits with youth, and ongoing communication with you. Working with residential staff release planning for your child begins at commitment.

The manager for the department's continuum of services works with providers to ensure that treatment services needed for your child's successful transition are secured and in place at the time of need.

Parole supervision and contacts during this period of pandemic has been modified; but will still require a face-to-face meeting with you and your child on the day of release from Bon Air. Follow up services may include in-person meetings, video and audio calls and ongoing accountability for adherence to parole expectations. You will note changes at court buildings requiring screenings for the COVID-19 virus and modifications within our offices to provide for your protection as well as that of our staff. We ask that you and your child wear a mask and observe social distancing when you attend scheduled meeting.

Please remind your child that the good sanitation habits they have been practicing at Bon Air are essential for their health and the health of the family when they return to the community (hand washing, social distancing, face coverings, and limited travel/movement will still be required).

As we all know, you, the parents and guardians, are so essential to your child's success and we recognize that the transition period requires a lot of support. At this time I would like to introduce you to Ashaki McNeal, Manager of the Reentry Services Unit. She will share the important role of the unit in providing another level of support to you and your child.

**Ashaki McNeil, Manager, Reentry Services Unit**

Good afternoon. I am Ashaki McNeil, the Department's Reentry Program Manager. My role is to bridge the gap between residential and community to support youth and their families as they reenter the community.

My team consists of five reentry advocates assigned by regions. Their role is to provide support and assistance for young people as they transition to the community. For more information on who is assigned to your region, please ask your child's parole officer or counselor or feel free to contact me. My contact information is also provided in today's presentation.

My team also includes Diane Leiter who is participating on this call. Diane is the Family Engagement Coordinator and her role is to build and enhance partnerships between families and DJJ to ensure families remain connected to young people while in commitment. Tamla Brookins, our Family Advocate, is also on this call. Her role is to ensure the family's voice is represented and to provide support to families as you navigate the system.

**Diane Leiter, Family Engagement Coordinator**

My name is Diane Leiter, I am the Family Engagement Coordinator. My role is to improve communication between DJJ and families and to assist the Department with improving communication and partnerships with families. I can be reached by email or phone.

**Tamla Brookins, Family Advocate**

My name is Tamla Brookins. I am the Family Advocate. As a mother of a young person who was once committed to DJJ, I am familiar with what families experience when their child is committed to the Department of Juvenile Justice. As the family advocate, I am here to support other families during this challenging time. I would also like to encourage you to become a part of our network of families by sending your contact information to me by email or phone.