

Overview of the Florida Department of Juvenile Justice

Presented to
Partners in Crisis
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New Vision and Mission

Vision

The Children and Families of Florida will live in safe and nurturing communities that provide for their needs, recognize their strengths and supports their successes.

Mission

To increase public safety by reducing juvenile delinquency through effective prevention, intervention and treatment services that strengthen families and turn around the lives of troubled youths.

The Office of Health Services

- First established in *2005*
- Role: To provide oversight for the delivery of medical, mental health, substance abuse and developmental disability services to the youth adjudicated delinquent.
- Most services delivered by contracted providers.

DJJ Youth Served

FY 2006-2007

31,961 Served annually by Prevention

49,000 Served under Probation programs

54,369 Admissions to secure Detention

5349 Children committed to Residential Programs
(approx. 13,000 per year)

DJJ Statistics

FY 2006-2007

- 91,497 unduplicated youth referred to the Department (146,765 total referrals)
 - ◆ 45% White (*53% of 10-17 y.o. pop in FL*)
 - ◆ 39% Black (*21% of 10-17 y.o. pop in FL*)
 - ◆ 13% Hispanic (*22% of 10-17 y.o. pop in FL*)

Comparative Statistics

FY 2007-2008

- DOC Budget: \$ 2, 504, 927, 293 *
- DJJ Budget : \$ 709, 325, 609 **

A \$1.8 million dollar difference

* Not including 28, 559 FTE's

** Including 5, 011 FTE's

A Profile: Who Are Our Youth?

- Impoverished
- Minorities
- Males
- Mentally Ill
- Substance Abusers (Co-Occurring Disorders)
- Medically complex and neglected
- High Risk behaviors (STDs, Teen Pregnancies)
- Developmentally Disabled
- Disenfranchised families in crisis
- Delinquent and Dependent

Primarily.....

Non-violent minority males referred for
misdemeanor offenses

Our Girls

- One of three youth referred to the Department for delinquency is a girl.
 - ◆ 45% of those referred are African-American Girls
- 21% of Detention admissions
- Extensive trauma histories
 - ◆ 50-75% suffer from PTSD
- Unique health needs

3 Primary Issues:

Medical

Mental Health / Substance Abuse
(Co-Occurring Disorders)

Developmental Disabilities

Overlying Concerns:

- Complex conditions
- Limited resources
- Ensuring accountability with privatization
- Systemic Barriers

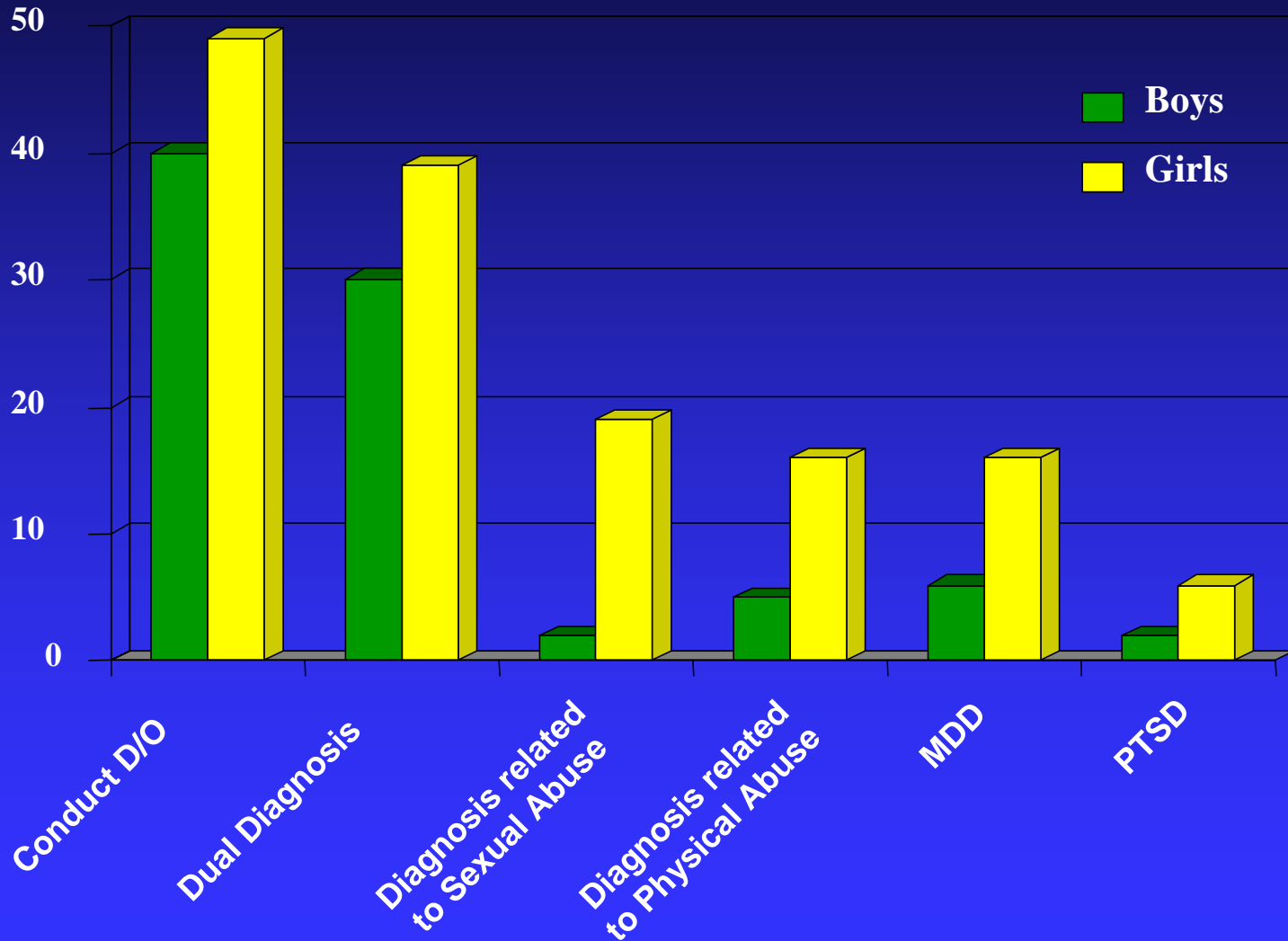
Complex Conditions

Our survey on DJJ youth in Need of Specialized Services

- 49% of youth in DJJ programs had a diagnosed DSM-IV **mental illness** and an additional 14% demonstrated behaviors which suggested a mental health problem **(63%)**
- 35% of the youth had a diagnosed DSM-IV **substance-related disorder** and an additional 30% demonstrated behaviors which suggested a substance abuse problem **(65%)**
- **52%** of the children reported for all substance-related disorders had a diagnosis of Substance Abuse AND **36%** had a diagnosis of Poly-substance Dependence.

Mental Illness and Girls

DJJ Diagnosis by Gender



Services Provided to Youth

Specialized Treatment Beds

- **PACT Risk Needs Assessment**
- **MST/FFT**
- **Suicide Screenings**
- **Psychological Assessments**
- **Counseling**
- **Crisis Intervention**
- **Psychiatric Services**
- **Medication Management**
- **Mental Health Overlay**
- **Behavioral Health Overlay**
- **Substance Abuse Overlay**
- **Sex Offender Services**
- **Intensive Mental Health**
- **Comprehensive Mental Health**
- **Developmental Disability**

Girls Trauma Initiative

- Because we recognize:
 - ◆ Underreporting of physical, sexual and emotional abuse.
 - ◆ 50-75% of girls in juvenile justice facilities suffer from PTSD symptoms.
 - ◆ PTSD often co-occurring with or misdiagnosed as other mental illnesses
- Trauma Initiative to change the paradigm of girls' services.

Detention Centers

- 26 Detention Centers

- 2,057 Bed Capacity

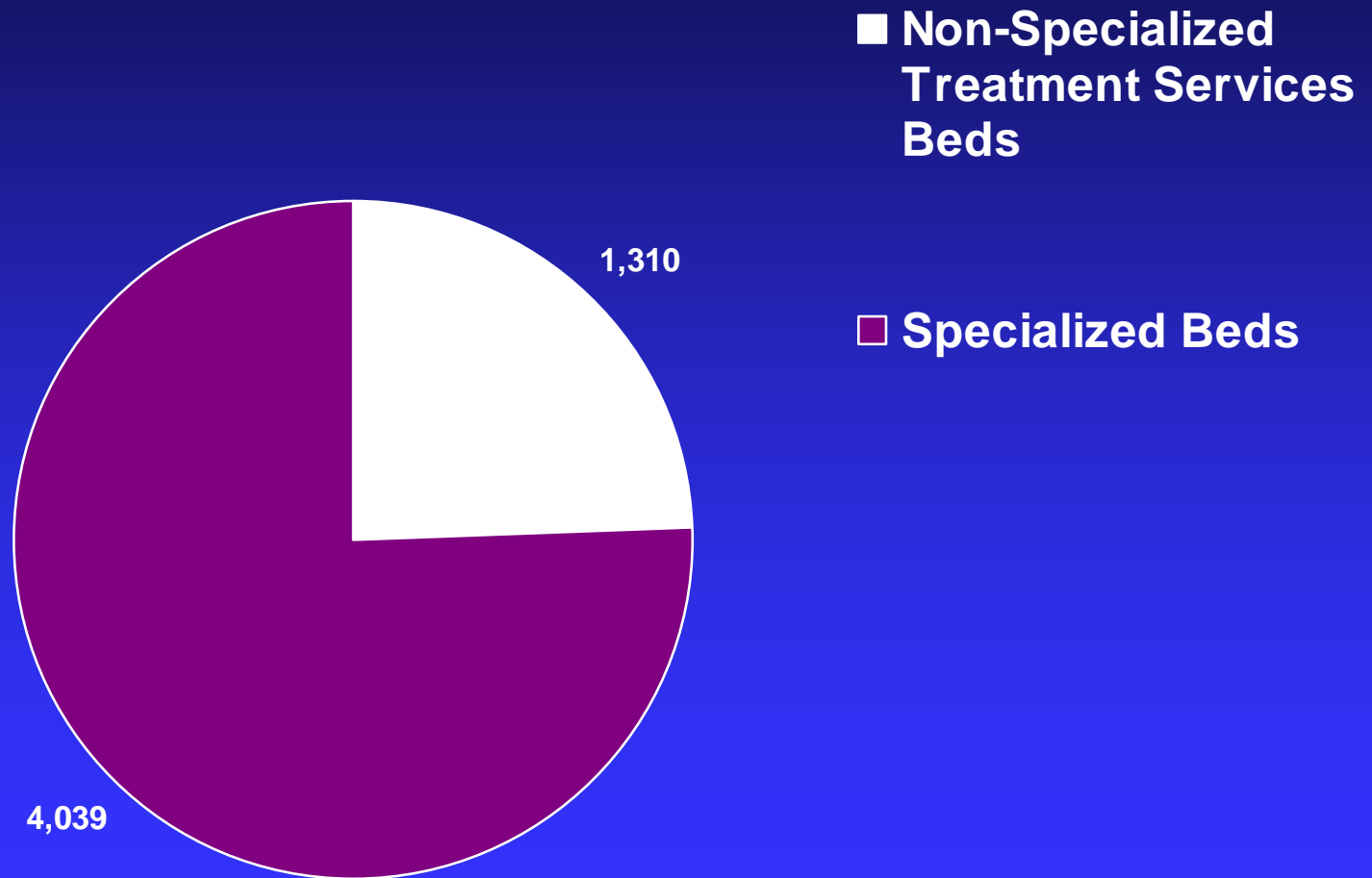
- ◆ All Youth receive Suicide Risk Screening upon admission to a detention center.
- ◆ Mental health clinicians on site at least 5 days of the week in most facilities.
- ◆ Mental health and substance abuse services include: assessment, counseling, psychiatric services and crisis intervention.

Mental Health Services in Residential Programs

- 129 Residential Commitment Programs
- 5,349 Beds
- Most Mental Health and Psychiatric Services Contracted
- Services include: assessments, counseling, psychiatric services, crisis intervention and treatment.
 - ◆ 65 % of Boys and 72 % of Girls receive mental health services

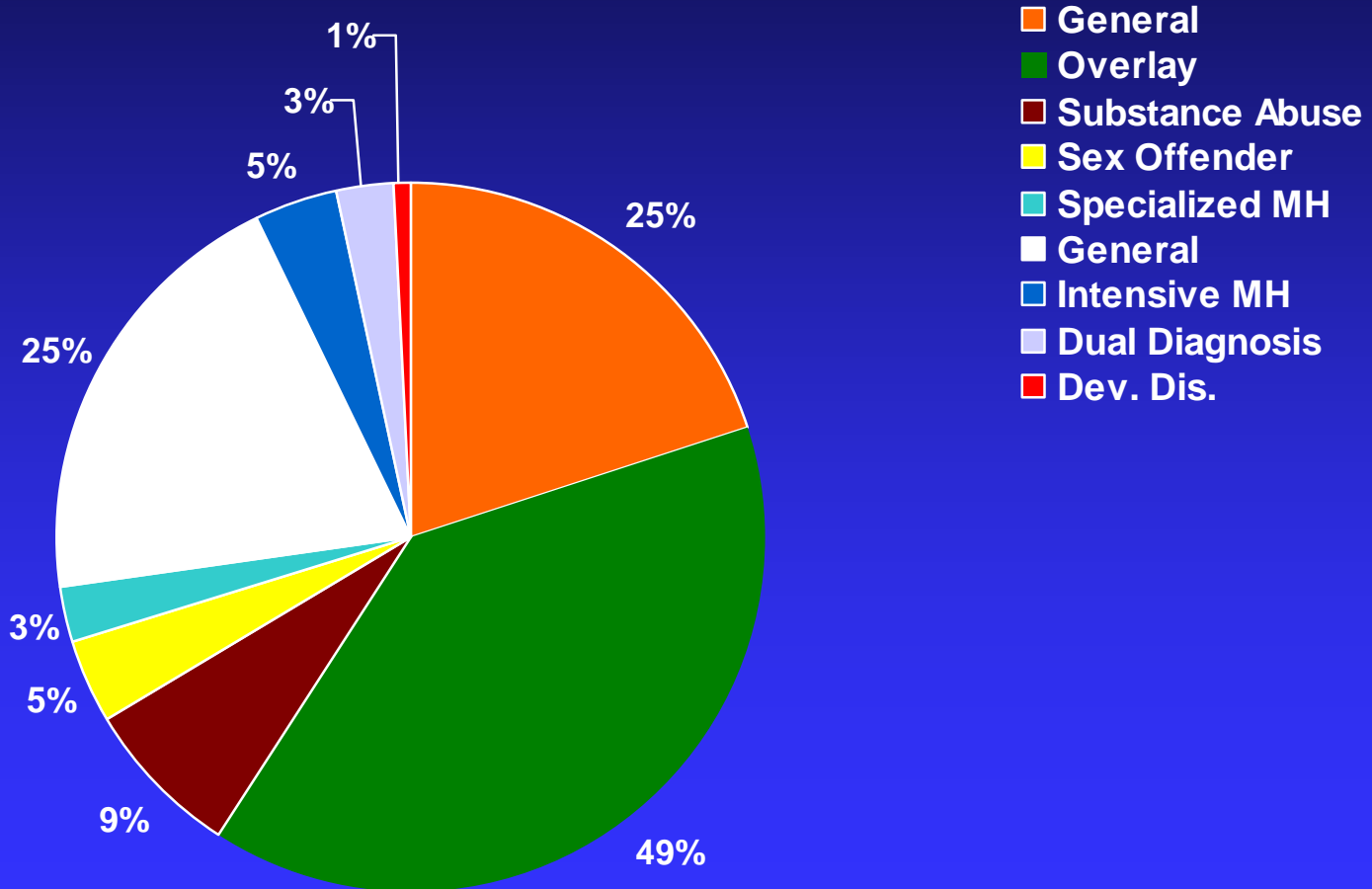
Residential Services

Distribution of 5349 Commitment Beds



Residential Services (5349 Beds)

Specialized Treatment Services



Specialized Beds

GIRLS

- ◆ Low Risk:
 - ◆ Medicaid-Funded Overlay: 27
- ◆ Moderate Risk
 - ◆ Overlay Services*: 414
 - ◆ Intensive Mental Health: 152
 - ◆ Dual Diagnosis: 23
 - ◆ Substance Abuse: 44
- ◆ High Risk
 - ◆ Overlay Services: 20
 - ◆ Substance Abuse: 10
 - ◆ Dual Diagnosis: 25
- ◆ Maximum Risk
 - ◆ Intensive Mental Health: 2

*DJJ or Medicaid Funded

Specialized Beds

BOYS

- ◆ Low Risk:
 - ◆ Medicaid-Funded Overlay: 75
- ◆ Moderate Risk
 - ◆ Overlay Services*: 1639
 - ◆ Specialized MH: 135
 - ◆ Intensive MH: 73
 - ◆ Dual Diagnosis: 32
 - ◆ Substance Abuse: 306
 - ◆ Sex Offender: 109
 - ◆ Developmentally Disabled: 40

*DJJ or Medicaid Funded

Specialized Beds

BOYS

- ◆ High Risk
 - ◆ Overlay Services: 253
 - ◆ Substance Abuse: 137
 - ◆ Intensive MH: 30
 - ◆ Dual Diagnosis: 73
 - ◆ Sex Offender: 356
 - ◆ Low Functioning: 24
- ◆ Maximum Risk
 - ◆ Overlay Services: 38
 - ◆ Substance Abuse: 10

Limited Resources

- Lack of Specialized Early Intervention Programs
- Detention funded for crisis intervention not treatment
 - Long waits for specialty MH/SA beds
- Residential Programs under-funded, not intended for complex mentally ill youth.
- Comprehensive Mental Health beds in DJJ have a per diem nearly HALF of the state inpatient psychiatric per diems.

**Inadequate treatment **

Systemic Barriers

- Lack of Mental Health Infrastructure in Florida.
- Parents press charges vs. child to access mental health services in DJJ.
- Limited access into Statewide Inpatient Psychiatric Placements (SIPPs)
- Mental Health Issues interface with Zero Tolerance Policies.

Systemic Barriers

- Lack of diversion (or less restrictive) alternatives in the community.
- Limited Aftercare Services
 - ◆ Inadequate discharge planning
 - ◆ Medicaid Reform and Access



The Blueprint Commission

The Blueprint Commission

- Authorized by Governor Crist July 2007
- A 25 member workgroup charged with developing recommendations to reform Florida's juvenile justice system.
- 7 Statewide Public Hearings
- Report in final stages for presentation in February.

The Blueprint Commission

■ Supporting Partners

- ◆ The JEHT Foundation
- ◆ Jessie Ball duPont Fund
- ◆ Eckerd Family Foundation
- ◆ Children's Campaign, Inc.
- ◆ Florida Network of Youth and Family Services
- ◆ Florida Juvenile Justice Association

The Blueprint Commission

Recommendations forthcoming

- ◆ Medicaid suspension vs disenrollment
- ◆ Comprehensive Assessment of Health, Mental Health, Substance Abuse and Developmental Disability Services.
- ◆ Comprehensive, Standardized, Evidence-Based Mental Health and Substance Abuse Services
- ◆ DJJ-DCF Collaboration for community-based services



Legislative Session
2008-2009

Legislative Budget Priorities

- Minimal Budget Reductions
((\$5.5 million cut during first round)
 - ◆ Reduction of beds reduces all services

The Future

- Effective collaborative effort with *Partners in Crisis* to continue to further the critical mental health needs of Florida's most vulnerable population.
- Education: Mental illness does not begin once someone reaches 18.

*For these are all our children.
We will all profit by, or pay for,
whatever they become.*

- James Baldwin

Thank You