2. Project Abstract

The Michigan Department of Health and Human Services (MDHHS) has been designated by Governor Whitmer as the Agency responsible for administering the Juvenile Justice and Delinquency Prevention Act (JJDPA) Title II grant for the State of Michigan. The State Advisory Group (SAG) for Michigan is known as the Michigan Committee on Juvenile Justice (MCJJ). The MCJJ adopted six priority areas to help guide their work. The MCJJ's six juvenile justice priority areas are as follows: 1) establishing an accessible statewide data system; 2) more funding for diversion programs; 3) the establishment and funding of juvenile mental health courts; 4) educating stakeholders on the importance of raising the age of juvenile jurisdiction in Michigan; and 5) the School – Justice Partnership. This partnership helps to eliminate the school to prison pipeline by reducing truancy and increasing graduation rates among youth; and 6) Racial and Ethnic Disparities. These priority areas will aid in identifying long term goals, and will guide funding decisions for projects intended to prevent and reduce delinquency for children in Michigan.

Michigan is currently working on four projects that support the priorities outlined in the strategic planning efforts of the MCJJ. The School-Justice Partnership currently focuses on reducing truancy through efforts such as a statewide School to Prison Pipeline Forum. With the support of the MCJJ, county planning groups were brought back together in a statewide forum on November 7-9, 2018. Funding in support of the MCJJ's two other priorities, diversion and Racial and Ethnic Disparities (RED), concentrate on alternatives to detention for youth coming in contact with the juvenile justice system. The MCJJ currently funds another grant with a juvenile court agency which focuses on improving the data collection system so that outcomes on youth in community programs can be collected and analyzed for program effectiveness. The third initiative being addressed is developing a strategy which will improve the state's juvenile justice data system. This initiative is a collaborative effort between the MCJJ and volunteer juvenile iustice stakeholders. The objective is to coordinate and streamline the various data collection systems that will serve to improve the accuracy, consistency and availability of juvenile justice data. Lastly, the work by the committee on raising the age of juvenile jurisdiction in Michigan aided in the state passing legislation on October 31, 2019 that will now raise the age of criminal responsibility from 17 years of age to 18.

3. Program Narrative

Addendum

The Michigan Juvenile Justice System is a decentralized system that serves to address the needs of children who require intervention. Funding is provided by local, state and federal sources. Procedures are established in the State that protect the rights of recipients of services and for assuring appropriate privacy with regard to records relating to such services. Michigan provides supervision and treatment through county level services, state services, and contracted private agencies. This plan focuses on the policies and procedures that are in place for youth supervised by the state or are placed in a state licensed Child Caring Institution (CCI).

- The state plan takes into account scientific knowledge regarding adolescent development and behavior regarding juvenile justice interventions. The State Advisory Group (SAG) makes it a priority to fund programs that are evidence based or are a promising practice program that take into account positive effects of delinquency prevention programs and juvenile justice interventions.
- The State currently focuses on utilizing community-based services, when appropriate.

 Juveniles who are not charged with any offense and who are alleged to be dependent,
 neglected, or abused shall not be placed in secure detention facilities or secure correctional
 facilities. While Michigan's juvenile justice policy implements this practice, Michigan also
 revised its foster care policy to prohibit the same type of placement. Programs that divert
 youth from involvement in the juvenile justice system have become more frequent in
 response to the increased recognition that involvement in the system often is not necessary.

 Diversion has been a priority of the SAG the last three years due to many benefits, such as:

 1) decreased rates of recidivism; 2) less crowded detention facilities; 3) allowing youth the
 option to choose an alternative to processing; 4) providing more appropriate treatments at

the community level; 5) reducing the stigma associated with formal juvenile justice system involvement; and 6) increasing family participation. The SAG will plan to bring more attention to the benefits of utilizing diversion programs which will help to provide alternatives to detention. The SAG will continue to fund any entity that can show, through evidence-based practices that community-based diversion programs are effective at keeping youth out of the justice system with low rates of recidivism.

- In order to reduce the number of children housed in secure detention, Michigan's juvenile justice policy provides that youth awaiting placement in residential treatment programs cannot be placed in secure detention longer than thirty days. If undo circumstances arise, and a youth cannot be moved within the thirty- day limit, a Placement Exception Request must be completed detailing why they youth cannot be moved at that time. This helps to reduce the number of youth who are housed in a secure detention setting, while awaiting placement at a residential treatment facility.
- In recent years, a collaborative model of service provision has been used among locval, state, and federal funding sources. Multiple agencies participate in the process of case planning and review in order to achieve the best outcome for a child. The juvenile court, community mental health, school districts, families and private agencies work together to avoid service duplication while still maintaining optimum service delivery. One of the main funding streams for county juvenile courts in Michigan is the Child Care Fund. This is a state funding source that provides counties a fifty percent reimbursement for community-based programming. These community-based services that are implemented by counties respond to the needs of youth who have come into contact with the juvenile justice system.
- Michigan provides for the coordination and maximum utilization of juvenile delinquency programs, programs operated by public and private agencies and organizations, and other

related programs in the state. This occurs through quarterly meetings with stakeholders, as well as the involvement of SAG members who have connections to various programs throughout the state. SAG subcommittees involve representation spanning multiple departments and sectors across the state. There are cross-system collaborations in place that allow for planning and coordination through committee meetings and regional collaboration groups. Information gathered from regional and subcommittee groups is shared at the SAG meeting to consider how to incorporate it into the state plan.

- The SAG will give priority to the extent practicable in funding programs and activities that are based on rigorous, systematic, and objective research that is scientifically based.

 Michigan Department of Health and Human Services (MDHHS) is prioritizing dissemination of evidence-based practices by supporting training and technical assistance for agency staff and service providers.
- MDHHS has started the process to update its Juvenile Justice Residential Policy, so that no later than December 21, 2020 Michigan will have enacted policy that:
 - I. Eliminates the use of restrains of known pregnant juveniles housed in secure juvenile detention and correction facilities during labor, delivery, and post-partum recovery, unless credible, reasonable grounds exist to believe the detainee presents an immediate and serious threat of hurting herself, staff, or others.
 - II. Eliminate the use of abdominal restraints, legs and ankle restraints, wrist restraints behind the back, and four-point restraints on known pregnant juveniles, unless
 - a. Credible, reasonable grounds exist to believe the detainee presents an immediate and serious threat of hurting herself, staff, or others; or
 - b. Reasonable grounds exist to believe the detainee presents an immediate and credible risk of escape that cannot be reasonably minimized through any other method.

This policy change is expected to be completed by June 2020.

- To help eliminate the use of unreasonable restraints, staff in state residential facilities may only physically restrain a youth in the following circumstances:
 - I. To prevent injury to the youth, self or others;
 - II. As a precaution against escape or truancy for a youth in a secure facility or a youth transported while resident in a secure facility;
 - III. When there is a serious destruction of property that places a youth or others at serious threat of violence or injury if no intervention occurs.
- To help reduce the use of unreasonable restraints, staff directing and applying physical restraints must be properly trained in approved DHHS de-escalation and restrain techniques. New staff may not supervise or engage in restraint with any youth until they have satisfactorily completed training.
- It is the policy of the MDHHS that each facility will have a licensed mental health professional that is responsible for the oversight and coordination of behavioral health service delivery. This designated authority will also be responsible for providing clinical supervision. This designation is needed to ensure consistency, professional integrity and accuracy in the delivery of behavioral health services and treatments to state supervised youth, as needed and identified. All state run and private, contracted juvenile justice residential treatment facilities must have designated treatment team members to administer the following screening and evidence-based assessments for each youth held more than 24 hours in a facility:
 - 1. MDHHS-5606, Prison Rape Elimination Act Screening Tool.
 - 2. Massachusetts Youth Screening Instrument-Second Version (MAYSI-II).

- 3. JJ Strengths and Needs Assessment.
- 4. Michigan Juvenile Justice Assessment System (MJJAS).
- 5. MJJAS Residential Assessment Tool (MJJAS-RES).
- 6. MJJAS Reentry Assessment Tool (MJJAS-RT).
- 7. Casey Life Skills Assessment, for youth age 14 and older.

State run and private, contracted juvenile justice residential treatment facilities providing a Sexually Reactive Program must have designated treatment team members to administer one of the following for each youth:

- Estimate of Risk of Adolescent Sexual Offense Recidivism Version 2.0 (ERASOR 2.0).
- 2. Juvenile Sex Offender Assessment Protocol-II (J- SOAP II).
- Michigan's juvenile justice structure relies on a variety of means for connecting a youth to mental health and substance abuse treatment. Those youth who score high on screening for needing these services, will receive them as part of their case plan in the facility. For youth with Serious Emotional Disturbance who are covered by Medicaid those services are typically provided through the public mental health system. For children/youth with Medicaid who are deemed to have mild to moderate needs, then they typically access services through their Medicaid Health Plans.
- Michigan contracts with the Michigan Public Health Institute (MPHI) to coordinate and
 provide reentry services for state supervised youth. Per the contract, each youth will have a
 written case plan based on an assessment of the needs that includes:
 - 1. The pre and post release plans for the youth;

- 2. The living arrangement to which the youth are to be discharged; and
- 3. Any other plans developed for the juveniles based on an individualized assessment.
- Review Process: Each youth's case plan must be reviewed, at a minimum, every thirty days.

 Case plans can be reviewed on more frequent basis, based on the youths' needs.
- If a youth displays signs that she/he may be a victim or at risk of becoming a victim, caseworkers must consult with their supervisors to determine if further screening must take place. Per state policy, if a youth is positively screened as a victim of human trafficking, after the completion of the Human Trafficking Indicator Tool (DHS-5523), a referral to Centralized Intake **must** be made. Whenever a youth is positively screened as a human trafficking victim she/he must receive services to address the needs identified. To minimize trauma and accurately identify human trafficking victims or youth at risk of human trafficking, caseworkers must use the specified screening tools listed in the policy. The MDHHS Human Trafficking Website has additional resources regarding identification and services for victims of human trafficking.

There are no additional changes to the approved 3-year plan beyond the new narrative provided in the Addendum.

APPENDIX E				
Budget Detail				
Worksnet			1	
			Proposed FY	
	· •		022	Combined
Program Areas	-			Total Budget
28	28 Planning & Administration Total *	\$58,689.50	\$58,689.50	\$117,379.00
	P&A Detail *			
	Personnel	\$50,000.00	\$50,000.00	\$100,000.00
	Fringe Benefits	\$2,689.50	\$2,689.50	\$5,379.00
Andrew II V March Andrew Comment of a control of the comment of th	Travel	\$6,000.00	\$6,000.00	\$12,000.00
	-			
	Program Contracts and Sub Awards Total*	\$1,115,104.50	00.0\$	50.00 51,115,104.50
	Program Contracts & Sub Awards			
←	1 Aftercare/Reentry			
2	2 After-School Program			
E.	3 Alternatives to Detention			
4	4 Child Abuse/Neglect Programs			
5	5 Community-Based Programs and Services			
9	6 Delinquency Prevention	Qu. (4.100 to 100)		
7	7 Gangs			
∞	8 Graduated and Appropriate Sanction			
6	9 Hate Crimes			
10	10 Job Training			
11	11 Learning and other Disabilities			
12	12 Mental Health Services	\$20,000.00 P	A	\$20,000.00
13	13 Mentoring, Counseling and Training Programs			
14	14 Positive Youth Development			
15	15 Probation			
16	16 Protecting Juvenile Rights	\$20,000.00 P	<u>a</u>	\$20,000.00
17	17 School Programs	\$95,000.00 P	۵	\$95,000.00
18	18 Substance and Alcohol Abuse			

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19	19 Compliance Monitoring	\$320,000.00		\$320,000.00
20	20 Deinstitutionalization of Status Offenders	The state of the s	1122	- Annual
21	21 Disproportionate Minority Contact	\$333,238.50 P		\$333,238.50
22	22 Diversion	\$100,000.00 P		\$100,000.00
23	23 Gender Specific Services	\$75,127.00		\$75,127.00
24	24 Indian Tribe Programs	\$6,739.00	A A A A A A A A A A A A A A A A A A A	\$6,739.00
25	25 Indigent Defense	1		TOTO STREET AND STREET
26	26 Jail Removal	TO THE PROPERTY OF THE PROPERT		
27	27 Juvenile Justice System Improvement	\$125,000.00 P	•	\$125,000.00
29	29 Reducing Probation Officer Caseload	THE PROPERTY AND A STATE OF TH		The second of th
30	30 Rural Area Juvenile Programs	The state of the s	THE PROCESSION PROCESSION AND A STATE OF THE PROCESSION AND A STAT	
31	31 Separation of Youth from Adult Inmates			
32	32 State Advisory Group Allocation	\$20,000.00		\$20,000.00
			2 000	
	AWARD TOTAL	\$1,173,794.00 \$58,689.50 \$1,232,483.50	\$58,689.50	\$1,232,483.50