Report to
The Vermont Legislature

DCF Raise the Age, High End System of Care Status Update
in Accordance with Act 23, Section 14

Submitted to:  Joint Legislative Justice Oversight Committee
               Senate Judiciary Committee
               Senate Health and Welfare Committee
               Senate Institutions Committee
               House Judiciary Committee
               House Corrections and Institutions Committee
               House Human Services Committee

Submitted by:  Chris Winters, Commissioner
               Department for Children and Families

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Report Date:   December 1, 2023
Executive Summary

This report has been prepared in accordance with Act 23, Section 14:

On or before September 1, 2023 and December 1, 2023, the Department for Children and Families shall file a status report to the Joint Legislative Justice Oversight Committee, the Senate and House Committees on Judiciary, the House Committee on Corrections and Institutions, the House Committee on Human Services, and the Senate Committee on Health and Welfare describing the progress made toward implementing the requirement of Secs. 12 and 13 of this act that the Raise the Age initiative take effect on July 1, 2024.

This report seeks to clarify the intense level of investment and change in the system of care that is needed in advance of any further expansion of juvenile jurisdiction to include 19-year-old youth in Vermont. This report does not indicate planned funding in the Fiscal Year 2025 budget for all these initiatives, particularly as a long term in-state security facility, will take several years to put in place. Due to the amount of work still needed, the Department for Children and Families (Department) recommends delaying Raise the Age – not for one year – but rather until the system is fully built, as identified below, and ready to receive an older expanded population.

As referenced in the Department’s December 2022 “High End System of Care Plan” and September 2023 Act 23 Status Report, the Department is committed to serving youth within a system of care that supports their success, including supporting staff with the tools and training they need to serve youth in the care and custody of the Department. A healthy system of care serving both child welfare and juvenile justice populations relies on home, homelike, community-based, residential, and stabilization settings. In 2022, the Department identified substantially diminished capacity within Vermont’s “High-End System of Care” (HESOC) for youth as the primary barrier to the advancement of Vermont’s “Raise the Age” initiative. The reason for this is that lack of capacity in the HESOC means the Department cannot ensure the safety of an older and higher risk youth population, Department staff or Vermont communities. Expanding the juvenile system to youth who are 19 would place a level of stress on the entirety of the system and further risk negative outcomes for the youth in need of care.

The Department conducted basic data analysis to review the potential impact that Raise the Age to include 19-year-old youth would have on the already stressed system. Based on that analysis, the Department concludes that the first four initiatives below would have to be fully implemented, and the final one well underway in order to support the additional caseload expanded juvenile jurisdiction would involve. The five initiatives are:

1. An operating secure crisis stabilization program.
   • Recommendation: Expand juvenile jurisdiction only when the in-state secure facility is operational.

2. Additional juvenile services specific family services worker (FSW) positions allocated to the Family Services Division workforce.
   • Recommendation: Before implementing Raise the Age, expand the existing Family Services Division workforce by at least six positions to accommodate the anticipated additional caseloads.

3. An expansion of the current Balanced and Restorative Justice (BARJ) budget - to help offset some of the supervisory responsibilities for non-custodial probation youth.
   • Recommendation: Increase the size of the annual BARJ budget by $925,000. This would allow for the addition of 9.25 BARJ positions, each of which would average approximately $100,000 annually.

4. Transition-age-specific residential program access.

DCF Raise the Age, High-End System of Care Status Update
December 2023
5. **Recommendation**: The Department requests an expansion of funding to accommodate the entirety of an expanded Return House contract. Amount not yet known.


**Recommendation**: The development of a Comprehensive Child Welfare Information System (CCWIS) is a multi-year project. The Department does not recommend delaying a further Raise the Age until the completion of such a project but would like to highlight the value of a sustained commitment to financing such a project, particularly should Raise the Age move forward.

As noted above, this report does not indicate planned funding in the Fiscal Year 2025 budget for all of these initiatives, particularly as the first initiative above will take several years to put in place. Due to the amount of work still needed, the Department recommends delaying Raise the Age – not for one year – but rather until the system is fully built, as identified above, and ready to receive this additional expanded population.

**DCF’s Existing System of Care**

The current system of care (which includes the HESOC, as well as other residential care settings within Vermont) continues to operate at reduced capacity as compared to pre-pandemic overall bed count. Though the Department continues to make concerted efforts to support the health and growth of the existing system of care, the overall number of available residential beds remains roughly the same as it was in December of 2022. Residential capacity is currently running at 68% of the licensed capacity. When compared with pre-pandemic levels, the system is running at 55% of the previously contracted capacity.

The following table describes the capacity within Vermont’s in-state contracted youth system of care. The system described here serves the youth needs of both the Departments for Children and Families and Mental Health. Levels of care are ordered from highest to lowest acuity. This chart continues to reflect incremental growth within the system of care.

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Pre-Pandemic Contracted Capacity</th>
<th>Current Licensed Capacity</th>
<th>Actual Capacity - November 17, 2023</th>
<th>Actual Capacity (Percent of Pre-pandemic Contract)</th>
<th>Actual Capacity (Percent of Current Licensed Capacity)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure Programming</td>
<td>16</td>
<td>0</td>
<td>0</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Crisis Stabilization</td>
<td>20</td>
<td>19</td>
<td>13</td>
<td>65%</td>
<td>68%</td>
</tr>
<tr>
<td>Mental Health Emergency Beds</td>
<td>16</td>
<td>18</td>
<td>13</td>
<td>81%</td>
<td>72%</td>
</tr>
<tr>
<td>Short Term Stabilization</td>
<td>14</td>
<td>16</td>
<td>6</td>
<td>43%</td>
<td>38%</td>
</tr>
<tr>
<td>Intensive residential</td>
<td>75</td>
<td>46</td>
<td>44</td>
<td>59%</td>
<td>96%</td>
</tr>
<tr>
<td>Community Based Residential</td>
<td>55</td>
<td>58</td>
<td>31</td>
<td>56%</td>
<td>53%</td>
</tr>
<tr>
<td>Total</td>
<td>196</td>
<td>157</td>
<td>107</td>
<td>55%</td>
<td>68%</td>
</tr>
</tbody>
</table>
The most significant barrier to restoring full operational capacity to programs serving youth continues to be difficulty hiring and retaining front line staff. Also critical is the acuity of needs of youth as seen by front line staff. Higher acuity needs require programs to support youth with higher staffing ratios. This means some youth require a higher staffing ratio due to acuity. Even where some programs have found some success during this reporting period recruiting and retaining staff, higher needs in the milieu do not necessarily translate to increased bed counts. The need to staff at a higher ratio artificially reduces the “actual capacity.” This is particularly true of crisis stabilization programs, who maintain youth that do not easily fit into other residential settings.

One system improvement of note is that on October 12, 2023, Washington County Mental Health opened the doors to a beautiful new residential care facility in Berlin, Vermont. It currently has capacity to serve three, but once staffed to full capacity - this program will serve up to eight youth.

**High End System of Care Expansion**

The Department has continued to advance each level of care identified in the proposed system of care plan. Each new program must navigate multiple hurdles, including community engagement, location scouting, site specific needs like permitting and zoning, building specific needs such as fire safety and construction, architecture and engineering, etc.

Throughout most of these developments, the Department has worked closely with Buildings and General Services (BGS), who has been a critical partner in helping to organize and advance multiple complex projects on a very tight timeline. The urgency of need has prompted a strong emphasis on efficiency, and each project is advancing on the most aggressive timeline possible.

**Short-Term Secure Stabilization and Treatment Programs:**

The largest project (and most immediate need) is to develop access to architecturally secure programming within the state. Because both urgency and desire for the highest quality programming are needed for this population, the Department is advancing both temporary and permanent solutions simultaneously.

The permanent solution involves developing a secure campus that contains both short term stabilization and longer-term treatment programs. Both programs will be served by a common core space that houses education, recreation, wellness, and administration components.

Since submission of the Department’s September report, BGS has released a request for proposals (RFP) to the three developers identified by the prior RFQ (request for qualifications) process. The proposals are set to be scored by reviewers from the Department and BGS on December 1, 2023.

While progressing on the timeline for a permanent secure campus, BGS and the Department have continued the development of the temporary secure crisis stabilization program in Middlesex, Vermont. This program would only serve up to four youth at a time. Work on the facility is underway and is anticipated to be completed as early as January 2024. Unfortunately, as described below, the Department may not have a contractor in place to staff the facility. A January 2024 opening would require state staffing and potentially limit the number of beds we could make available.

Concurrent to the efforts to begin developing the temporary and permanent physical spaces, the Department had released an RFP to identify a service provider who could operate the client programming
for both the permanent campus and the interim temporary stabilization program. Unfortunately, that RFP returned no bids. The Department is gathering feedback from national consultants and program providers, and decisions are being made about reworking or re-releasing the RFP. In the meantime, the Department has reached out to local providers to solicit interest in operating the temporary program.

As noted in prior reports, the plan to renovate the Summit Transition Home in Newbury, Vermont, into a secure short-term treatment program has been on hiatus awaiting pending legal matters. While the Environmental Division of the Vermont Superior Court issued a Final Judgment Order allowing the issuance of a zoning permit to the State to proceed with this project in November 2022, the Town of Newbury appealed this to the Vermont Supreme Court. The Department awaits the Court’s decision.

**Staff-Secure Crisis Stabilization Beds:**
The Department has continued to work with BGS and the Windham County Sheriff’s Department to develop a three-bed crisis stabilization program in Brattleboro, Vermont. This program is not a locked facility and will be operated by an independent treatment provider. Construction is slated to occur between January and June of 2024. It is anticipated that the program will be operational by late summer 2024.

**Psychiatric Residential Treatment Facility (PRTF):**
The Department, in conjunction with the Departments of Mental Health and Disabilities, Aging and Independent Living, has issued an RFP to develop a 15 bed PRTF in Vermont. This RFP has yielded a successful bid, and the departments are currently engaging with the bidder in contractual negotiations. The departments hope to see this program operational by the summer of 2024.

**Alternative (Staffing) Settings**
The Department has long utilized the practice of “staffing” youth in non-program settings. Historically, this has occurred in emergency rooms, district offices, police departments, or other identified spaces. While at times necessary, this practice is not a sustainable solution. While Department staff attend to the needs of youth with care, this type of setting does not provide youth with reliable education, treatment, or other opportunities for healthy development. Further, the practice comes with an enormous toll on the Department’s workforce, namely increased hours of high-stress work. Ideally, this type of setting is only used as a temporary bridge to enter a more sustained formal placement. However, given the limited capacity of Vermont’s residential system of care, the Department has had to increasingly use this type of setting, sometimes for many days, even weeks.

To support child, youth, and staff safety, the Department has contracted the use of some spaces where needs can be met with greater consistency and stability. The Department utilized dedicated spaces in Hyde Park, Bennington, and Brattleboro for these purposes. In November 2023 the Department lost access to the space in Hyde Park, the only one of these spaces in the northern part of the state. In response, the Department was able to identify and contract for the use of another space in Chelsea, Vermont which became operational in December 2023.

The Department has also contracted with two separate staffing providers to support these placements as necessary. Further, the Agency of Human Services has organized a “special response team” of Agency staff who will receive additional training and pay to be able to support the needs of high acuity youth when no other alternatives are available. The special response team is expected to be operational by February 2024.

Finally, the Department has created a position that supports the logistical challenges associated with maintaining and staffing an alternative setting. This includes scheduling and coordination of services,
maintaining procedural documentation, and addressing any identified unmet needs regarding the staffing locations.

**Raise the Age to include 19 Year Olds: DCF Impact**

The Department has analyzed the data available to determine what the impact of the second phase of Raise the Age may be on the Department. The Department has looked at the data in two ways: from the perspective of potential impact of including 19-year-olds, and from the perspective of actual impact on juvenile jurisdictional expansion, including from the first phase of Raise the Age. The data for both perspectives have limitations, but both add to the depth of understanding. The initial conclusion is that raising the age would significantly increase caseload pressures on the existing workforce and potentially exacerbate unsafe situations for both youth and staff.

In the analysis of court filing records during the State Fiscal Year 2023 (July 1, 2022, and June 30, 2023), 298 delinquent/criminal charges were filed on youth aged 19. Of those 298 cases, 145 (approximately half) were directly filed in the Family Division of the Superior Court – meaning they were under the age of 19 at the time of the offense and within the Department’s existing purview. Of these 145 cases, 83 were directly filed for youthful offender consideration. Post implementation of Raise the Age, some of these cases would be initiated in the Family Division as delinquency proceedings and not as youthful offenders. While any of these cases may not ultimately have remained in Department, they are not being counted as impacting the Department because they are assumed to be included in the Department’s care regardless of Raise the Age Implementation.

Of the remaining 153 cases, 35 were charged as “Big 12” offenses, meaning they automatically originate in the adult Criminal Division of the Superior Court and potentially would not fall under the purview of the Family Division or the Department’s jurisdiction. As above, these are youth who may later have come back into the Department’s care on youthful offender status but are again excluded from the impact projection given the charges originated in the Criminal Division.

Twenty-two (22) cases were charged with felony level (non-Big 12) offenses, and 87 were charged as misdemeanor level offenses. This accounting of the data indicates a projected impact to the Department would be 109 cases (non-Big 12 felonies [22] + misdemeanors [87]).

<table>
<thead>
<tr>
<th>Court Filings, 19-year-olds (7/1/22-6/30/2023)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Existing Delinquency (Current DCF)</strong></td>
</tr>
<tr>
<td>• Direct File to youthful offender status- (83)</td>
</tr>
<tr>
<td>• Youth who were under 19 at time of offense- (62)</td>
</tr>
<tr>
<td><strong>Misdemeanor (NEW DCF)</strong></td>
</tr>
<tr>
<td><strong>Felony, non-“Big 12” (NEW DCF)</strong></td>
</tr>
<tr>
<td><strong>Felony, “Big 12” (Not DCF)</strong></td>
</tr>
<tr>
<td><strong>Total Filings</strong></td>
</tr>
<tr>
<td><strong>Total Filings newly originating in Family Court</strong></td>
</tr>
</tbody>
</table>

The limitations of this dataset, for this purpose, are varied. Of course, trends in delinquent/criminal activity change – for example, broadly speaking recent national trends describe a decrease in youthful arrests for violent crimes with the exception of a slight national uptick for murder. Second, court filings do not equate to disposition; some cases will be dropped, dismissed, or diverted. Others may return to the Family Services Division and DCF custody through the designation of youthful offender status. Additionally, these data are limited in that they speak only to court filings; any given filing may result in different
outcomes. What happens at filing does not necessarily reflect what happens at disposition or sentencing. Third, there is some inconsistency in filings regionally or case-specifically (some counties may include multiple charges in a filing, and others may submit multiple separate filings) which can lead to duplication of individuals in the data. The Department is currently awaiting updated court data that represents dispositional outcomes but many of these cases can take over a year to resolve. Despite the limitations, these data are helpful to form a general assessment that there could be a significant increase in caseload.

The second approach for data analysis involves using Department data to look at the trend of youth being served by the Department over the course of juvenile jurisdictional expansion. It is important to note that the Raise the Age initiative described in the 2019 Act 201 is only part of a longer trend of juvenile jurisdictional expansion, notably including the expansion of eligibility for youthful offender status that went into effect in 2018. The chart below illustrates the impact of jurisdictional expansion over the past 8 years. There are three case-types that describe the populations of youth with delinquency statuses. “DC” describes youth with delinquencies who are in Department custody. “DP” describes youth with delinquencies who are on probation only (not in Department custody), and “DY” describes youth who had pending delinquency matters during the time frame referenced. This data is reflective of youth who have delinquency and youthful offender status. These data are presented by the federal fiscal year (October 1-September 30).

The Department’s assessment of these figures is that the expansion of juvenile jurisdiction has coincided with an increase in juvenile services cases for the Department. The Department hypothesizes that the dip in numbers between 2020 and 2021 are related to the COVID pandemic and subsequent impacts on how quickly cases moved through the judicial system. The upward trends of these case types, combined with a further expansion of juvenile jurisdiction will most likely result in total juvenile services case types further expanding to upwards of 700 cases in 2024. If so, that would indicate a 30 - 40% increase in juvenile services workload since 2016. These changes were made without any additional investment in workforce.

Raise the Age to include 19 Year Olds: DCF Recommendations
The Department continues to stand behind the values that led to the passage of the Raise the Age legislation. Science is clear that the human brain is in development well into a person’s mid-20’s. The adaptability of the adolescent mind is a tremendous strength. Simultaneously, the developing mind is more inclined to prioritize reward over risk. This is typical and healthy of youthful development - but can lead to situations that present danger to families, communities, or the youths themselves. As stated above, to successfully accommodate the anticipated broader population of youth to be served, the Department has identified a pathway including five areas of resource needs. The first four of these resources must be in place prior to continued juvenile jurisdiction expansion, and the last is a sustained project that will take years to complete. The five areas are:

1. An operating secure crisis stabilization program.
2. Additional juvenile services specific family services worker (FSW) positions allocated to the Family Services Division workforce.
3. An expansion of the current BARJ budget - to help offset some of the supervisory responsibilities for non-custodial probation youth.
4. Transition-age-specific residential program access.

Temporary Crisis Stabilization Program
As indicated above, and in prior reports, lack of access to any form of secure placement is currently the primary driver of many untenable outcomes for the Department. It is a major contributor to: workforce fatigue, youth becoming “stuck” in inappropriate levels of care, risk to communities, risk to staff, and risk to youths. Plans to open both temporary and permanent secure placement options are well underway, as already described above, but the Department will not be able to expand juvenile jurisdiction without access to some form of secure placement.

Recommendation: Expand juvenile jurisdiction only when the in-state secure facility is operational.

Juvenile Services Workforce
The Department’s family services workforce is severely taxed after experiencing three years of an atrophied system of care. This may be especially true of the workforce that maintains justice involved youth, who often are among the most difficult to place securely, within residential programming, or within community. Justice-involved youth sometimes represent the greatest risk to community, family, themselves or the workforce. Workers with a juvenile services skillset often have extremely high caseloads. Despite the estimated 30-40% expansion of caseload in the past eight years this portion of the workforce has not grown at all. Given the current workforce size capacity, and assuming approximately 100 new cases post implementation, the Department must stabilize the existing workforce and estimates needing at least six (6) additional Family Services Workers to maintain consistent service delivery.

Recommendation: Before implementing Raise the Age, stabilize and expand the existing Family Services Division workforce by at least six positions to accommodate the anticipated additional caseloads.

Expansion of Current Balanced and Restorative Justice (BARJ) Budget
Beyond stabilizing the Family Services Division juvenile specific workforce, the Department recognizes the importance of expanding the existing BARJ program. The community providers contracted for the BARJ program offer both preventative and supportive services to justice-involved youth., While the provider network was able to successfully advocate for some increase in funding last year - if they are...
properly resourced, they could assume responsibility for providing supervision and support for the Department’s Probation only caseload.

Current point-in-time case load shows 141 active non-custody probation cases in the state. Transition of supervisory responsibility to the BARJ provider network would increase the bandwidth of existing Family Services Division workforce to attend to the needs of custodial, youthful offender and pending delinquency cases.

**Recommendation:** Increase the size of the annual BARJ budget by $925,000. This would allow for the addition of 9.25 BARJ positions, each of which would average approximately $100,000 annually.

**Transition-Age-Specific Residential Programming**

In prior reports, the Department has described its efforts to grow residential programs that can support the needs of an older youth/emerging adult population. One of these programs is DOC’s Return House Program in Washington County. The Department has been working with DOC and Return House to convert the entirety of the program to a youth focus by July of 2024. This would increase the number of older youth/emerging adult beds up to ten, but the shift will have to include the addition of onsite treatment, support and additional staffing. The Department has funding to support its current portion of the contract, but that funding will most likely be insufficient to support the entire contract – especially with the needed youth services elements. The Department is expecting to get an estimate of program cost from the program provider this December.

**Recommendation:** The Department requests an expansion of funding to accommodate the entirety of an expanded Return House contract. Amount not yet known.

**CCWIS Development**

As it stands today, Vermont Family Services Division’s (FSD) main data collection system, the Social Services Information Management System (SSMIS), is not currently equipped to manage the 18-year-old population added in July 2020 and will not be able to accommodate additional older youth without a system overhaul, which could take several years.

The aging data collection system lacks the capacity to add new case types or other data elements. It is difficult to extract information that is granular enough to be useful. Any meaningful data analysis often requires synthesizing data from multiple sources or manually compiling data. This process is cumbersome for Department staff and causes delays in accessing needed information. This lack of data access impacts the ability for the Department to determine and assess outcomes.

**Recommendation:** The development of a Comprehensive Child Welfare Information System (CCWIS) is a multi-year project. The Department does not recommend delaying a further Raise the Age until the completion of such a project but would like to highlight the value of a sustained commitment to financing such a project, particularly should Raise the Age move forward.

**Partner and Stakeholder Engagement**

The Department continues to move as quickly as possible, given existing constraints outside of the Department’s control, to develop the programs and facilities described in this update, but ongoing collaboration will be required to operationalize their use. This involves not just siting, funding, building,
and staffing programs, but also developing policies and procedures and informing ongoing operations of programs.

This summer, the Department initiated a specialized HESOC Taskforce to develop a collaborative approach to problem solving, maintaining and developing the fragile HESOC system. Importantly, this Taskforce includes representatives from: the Department’s essential frontline workforce, the stabilization program provider network, DMH, DAIL, Sheriffs, the hospital care network, and the Office of Child Youth and Family Advocate (OCYFA). The HESOC Taskforce continues to meet monthly to strategize solutions to the challenges to maintain a stable HESOC.

Equally important to the work of the Department are engagement efforts with other groups outside of project partners. These other perspectives may include legal entities such as the courts, Defender General’s Office and States Attorneys; family advocacy groups; national consultants; individuals with lived experience; racial and social equity voices; the OCYFA; and others.

The Juvenile Jurisdiction Stakeholders Group (JJSG) was formed in 2016 by the Department to invite stakeholder participation and collaboration among State, Judiciary, and community partners. The Department convenes at least monthly meetings with JJSG and has continued to engage in discussions with that group on juvenile practices, jurisdictional change implementation efforts, and identified discrepancies in understanding. JJSG includes representation from the Department of Corrections (DOC), the Office of the Defender General, the Department of State’s Attorneys and Sheriffs, the Judiciary, and the Vermont Center for Crime Victim Services. The JJSG had received regular updates about DCF’s efforts to develop secure placement capacity, prior to the development of the Facility-Planning for Justice involved Youth Stakeholder working group.

The Council for Equitable Youth Justice serves as the State Advisory Group overseeing the Office of Juvenile Justice and Delinquency Prevention (OJJDP) Title II Formula Grant. The Department regularly engages feedback within that body and its subcommittees. Representation on that group is wide ranging and its membership includes youth and family representatives, non-profit service provider, alternatives to incarceration provider, court, law enforcement, education system perspectives, community voices and more.

Lastly, DCF is identifying final representatives for the Facility Planning for Justice-Involved Youth Stakeholder Working Group, as described in Act 78 of the Laws of 2023. The initial invited guests came together on October 27th to discuss DCF’s efforts to develop secure treatment programs. The initial group met again on November 17, 2023, with some new membership. Themes discussed included ideal facility size and discussion of therapeutic approach.

Conclusion

In conclusion, the Department for Children and Families continues to develop holistic and trauma-responsive residential treatment programs and facilities to best serve justice-involved Vermont youth. A number of hurdles can be identified which are outside of the Department’s control including workforce constraints inevitably flowing from the State’s demographic trends as well as community opposition to project siting. Progress in sustaining and building the system of care will occur through partnership with the Legislature, the front-line staff, and other organizations with solutions-oriented approaches and a realistic understanding of the barriers to overcome.
The Department can only recommend continued expansion of the Raise the Age initiative to include 19-year-old delinquent youth/emerging adults when the State has the necessary resources and infrastructure as described in this report. We further recommend amending applicable law to remove a date certain for implementation and adding these triggers with continued semiannual reporting on status.

The Department will continue to maintain its emphasis on prioritization of youth needs, the urgency of sustaining the system of care with a particular focus on staff safety, and the responsibility of improving the system for better outcomes for young Vermonters and their communities.