State of Delaware, Juvenile Justice Disposition Recommendation Matrix

Most serious presenting offense	Low Risk to reoffend	Moderate Risk to reoffend	Moderate High Risk to reoffend	High Risk to reoffend
First time misdemeanor First referral to DYRS, with no history of adjudication or participation in diversion programs.	Community Supervision Assignment Decision Tool (CSADT)	CSADT	N/A	N/A
Minor All misdemeanor offenses, including youth who participated in diversion programs.	CSADT	CSADT	Probation Officer with services	Probation Officer with services
Serious Felony offenses that do not include violence.	CSADT or Probation Officer with services	Probation Officer with services	Probation Officer with services or L4 placement	Probation Officer with services or L4 placement
Violent Violent felony offenses	Probation Officer with services	Probation Officer with services or L4 placement	Probation Officer with services or L4 or L5 placement	Probation Officer with services or L4 or L5 placement

Note: this matrix does not apply to youth eligible for a mandatory 6 month, or 12 month, commitment per DE Code

DYRS staff should consider beginning with the least restrictive setting within a particular disposition category/or the least restrictive that was successful before. Any deviation (up or down) must always be approved by the unit supervisor; recommendations for placements must be approved by the PAC committee.

Youth in need of a residential ISB program will have been evaluated by PBH and recommendation will be made at the time of the hearing. Youth in need of a residential mental health program will have been evaluated by PBH and recommendation will be made at the time of the hearing.

Community Supervision Assignment Decision Tool – August 2015

To use grid: review risk of re-offense, caregiver involvement, requirements and access to services choosing item in each row that best matches the youth's situation.

	e most categories endorsed is the presumptive pr		1
Risk of Re-Offense	Low	Moderate	Moderate High to High
(Assessment score)			
Caregiver Involvement & Attitudes	 High Caregiver(s): Understand(s) probation conditions and Court- ordered requirements is willing or committed to assisting youth is able to monitor curfew, school attendance, community service requirements, restitution, fines, etc. is able to initiate/coordinate services with referral help is engaged (or willing to engage) as a participant in treatment as appropriate and necessary is concerned for youth's circumstances and is committed to making and supporting changes 	Any level of caregiver involvement, support and attitude toward probation and the requirements is appropriate for supervision and case management with a contracted community-based provider or a DYRS probation officer. This includes factors to the left in the High caregiver involvement section and those below: Caregiver(s): • may or may not understand(s) requirements and probation conditions. • may feel conditions are the youth's responsibility, may not agree with the requirements or conditions. • may offer minimal or limited support in completing conditions, setting up services, participating, etc. • may have fair to good ability to monitor curfew, school attendance, community service requirements, restitution, fines, etc. • may have fair to a baility to maintain youth behavior (home/ community). • demonstrates concerns for youth's circumstances, but may not know how to proceed and get help. • may have limited or no authority over youth and youth's behavior.	
DYRS History	First time offenders, prior diversion, civil citation or adjudications not resulting probation, prior successful BOT 2 or more years ago. Traffic offense only regardless of history.	First time offenders, prior BOT, prior low-risk provider program probationers can be considered.	Previous PO, particularly if within the last two years, prior aftercare and now has a new misdemeanor or felony adjudication (traffic offenses only may be appropriate for a provider supervision option).
Requirements/ Needs (these can be court- ordered requirements or youth / family needs)	Low: 1. Costs and Fines 2. Restitution 3. Community Services Hours 4. No Contact order 5. Substance Abuse Evaluation and follow recommendations 6. Family needs help connecting to social services and supports	 Low - Moderate: 1 - 6 on left and 7. Curfew monitoring 8. Electronic Monitoring 9. Support to coordinate services and complete conditions 10. Pro-social or vocational skills 11. Family Engagement 12. Family needs help connecting to more intensive or therapeutic services and supports 	 Moderate – High: 1 – 12 on left and 13. Therapeutic or rehabilitative needs that are not otherwise met or can only be met through contracted service providers 14. Consistent and/or intensive contact needed to promote success 15. Structured compliance plan 16. Adjunct Services are ordered or needed to ensure compliance
Access to Appropriate Resources within the Community	 High: Family has insurance or access to resources and/or; Community-based resources (services, programs, supports) that match needs are available in reasonable geographic proximity Youth can access mental and behavioral health resources through PBH which meet needs and satisfy conditions / requirements. Transportation issues are not an barrier 	Moderate: • Youth needs skills-based programming not available in community • Youth and family require significant assistance/follow-up to ensure connection to services and completion of requirements. • Family may or may not have adequate insurance or barriers may exist to accessing treatment • Youth and family need assistance to access treatment services	 Low: Family does not have any or adequate insurance There are availability or funding barriers impacting access to needed services or resources in the community Community-based services and programs do not match treatment or other needs
Type of Service	Compliance Monitoring with BACK ON TRACK	Contracted/Community Program for Case Management & Supervision	Appropriate Rehabilitative or Therapeutic Programming with Probation Officer Supervision

The column with the most categories endorsed is the presumptive program assignment.

Updated: 8/20/2015

Definitions:

BOT = Back on Track, which is the lowest risk to reoffend statewide provider who will offer case management, 4 skills building groups, and a community service project.

Low Risk Provider = Wraparound Delaware (Wrap DE) in New Castle County and Community Service Resource Connection (CSRC) in Kent & Sussex counties offer case management, skills building groups, connections to services in the community, community service projects, etc.

Probation Officer = State of Delaware employee (DYRS) who will connect youth to appropriate services to match their top 3 criminogenic needs, as well address any court ordered conditions (restitution, court costs and fines, etc.). Services can include those through DYRS umbrella services, as well as mental health/substance use services via providers throughout the state/contracted via PBH.

Criminogenic needs

Attitudes & Behaviors (Anti-social/Pro-Criminal Attitudes, Values and Beliefs)

Refer to:Aggression Replacement Training (ART) Group [10 weeks, 30 sessions]
Accountability [60 days]
Cognitive Behavioral Self-Counseling Skills (Individual or group) [16 weeks, 24 sessions]
Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Current Relationships (Pro-Criminal Associates and Isolation from anti-Criminal Peers)Refer to:Street Smart [9 weeks, 10 sessions]
Accountability [60 days]
Sanctuary – individual or group [16 weeks, 24 sessions]
Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Aggression (Temperamental and Personality Factors Conducive to Criminal Activity)

Refer to:Aggression Replacement Training (ART) (Group) [10 weeks, 30 sessions]Cognitive Behavioral Self-Counseling Skills (Individual or group) [16 weeks, 24 sessions]

Skills (History of Anti-Social Behavior/Low Self-Esteem)

Refer to:Sanctuary (individual or group [16 weeks, 24 sessions]
Casey Life Skills [16 weeks, 24 sessions]
Girls' Self-esteem (Individual or group) [16 weeks, 24 sessions]
Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Current Living Arrangements (Current Dysfunctional Family Features)

Refer to:Family Meetings [Maximum of 6]Functional Family Therapy (FFT) [Average of 12 weeks, 12 sessions]Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Current School Status (Low Levels of Education or Vocational Achievement)

Refer to:Cognitive Behavioral Self-Counseling Skills (Individual or group) [16 weeks, 24 sessions]Casey Life Skills [16 weeks, 24 sessions]Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Current Use of Free Time (Low Levels of Involvement in Pro-Social Leisure Activities)

Refer to:Street Smart [9 weeks, 10 sessions]
Community Service [indicate number of hours]
Guided Recreation [indicate number of hours]
Multi-systemic Therapy (3 to 4 months, sessions per week based on family's needs)

Alcohol and Drug Use (Abuse of Alcohol and/or Drugs)

Refer to:Street Smart [9 weeks, 10 sessions]Functional Family Therapy (FFT) [Average 12 weeks, 12 sessions]

Description of VisionQuest Services to address these needs:

Accountability: is a packaged service that includes a variety of components. The PO can tailor the components to best meet the needs of the youth and family. The maximum components include:

- 1. Curfew call every evening between 7 and 9 pm (specific time designated by PO)
- 2. Two random in-home curfew checks per week
- 3. School Attendance Monitoring VQ will call school by 11 am to check on youth's attendance
- 4. Two face to face contacts per week

5. Intervention support availability

Aggression Replacement Training: is a cognitive behavioral intervention program to help children and adolescents improve a social skill competence and moral reasoning, better manage anger, and reduce aggressive behavior. The program specifically targets chronically aggressive children and adolescents. ART sessions are divided into three components – social skills training, anger-control training, and training in moral reasoning. Social Skills Training uses modeling, role-playing and performance feedback. During anger-control training, youth share stories of recent times of anger, and throughout the sessions, youth learn skills to control their angry impulses. Moral reasoning teaches youth to more accurately identify justice in the world and to enhance their sense of fairness. Staff and youth discuss different problems while taking perspectives other than their own. The goal is to help youth identify errors in the thinking and help them learn how to think differently and se situations differently so they can respond more appropriately in the future.

The program consists of 10 weeks (30 sessions) of intervention training. Youth attend a one-hour session in each of these components each week. Adaptations of this model are available for youth with time constraints or for make-up reasons. All groups are facilitated by 2 staff members. These groups are "closed" requiring that the same group must start and finish together.

Casey Life Skills: the Casey Life Skills Assessment is a strengths-based tool that is designed to help develop a life skills teaching curriculum and individual learning plans. The goal of this tool is to better prepare young people for living on their own. The areas identified in the Casey Life Skills Assessment tool are Career Planning, Daily Living, Home Life, Housing and Money Management, Self-Care, Social Relationships and communication, Work and Study Skills, and Work Life.

An assessment is completed during the first week a youth is in the proposed program to determine how competent the youth is in these skills. An individualized Life Skills Plan is then developed that identifies the activities, training, and exercises that can be used to teach the youth the appropriate life skills that prepares them for independent living.

Cognitive Behavior Self-Counseling Skills: a cognitive behavioral approach emphasizes the important role of thinking in how one feels and what one does. It is based on the idea that thoughts cause feelings and behaviors, not external things, like people, situations, and events. The benefit of this fact is that youth can change the way they think to feel/act better even if the situation does not change. It is briefer and time limited due to it highly instructive nature and the fact that it makes use of homework assignments. The education emphasis of the model has an additional benefit – it leads to long term results. When people understand how and why they are doing well, they know what to do to continue doing well.

VisionQuest utilizes Cognitive Behavioral Self-Counseling Skills in a psycho-education group and individual setting. YQ staff members are training and supervised by the president of the National Association of Cognitive Behavior Therapists to ensure adherence to the model. These groups are "open," which does not require that the same group starts and finishes together. Services can also be provided on an individual basis.

Community Service: meaningful and gratifying community service opportunities are provided throughout the year. Projects may include: Habitat for Humanity, Graffiti removal, Meals on Wheels, Serving in a homeless shelter, Food banks, Work with the Salvation Army, National Cancer Society, Community Clean-up, Cemetery Clean-up, Township/borough community projects, Beautification projections (planting gardens, working in parks, cleaning up street blocks), shoveling and landscaping for the elderly, and Mural Projects. Through these community service projects, youth learn the importance of giving back to and becoming active in their local community.

Family Meetings: family meetings are appropriate for families who need basic family work to address minor family issues. For more intensive support and structured therapy, please refer youth and families to Functional Family Therapy.

To work with the entire families, staff will use the evidence-informed Sanctuary curriculum Teaching Families about Sanctuary for 6 sessions. Throughout the sessions, families will work to identify how various traumas in their lives have affected their families. They will learn tools and techniques that will help them address family issues. Staff will work with each family to identify goals regarding family functioning and will provide support and follow-up to help families achieve those goals.

Functional Family Therapy (FFT): FFT is a family-based therapy approach that provides treatment for youth offenders (and their families) between the ages of 10 and 17 and are primarily demonstrating disruptive externalizing behaviors (e.g., attention deficit hyperactivity disorder, oppositional defiant disorder, conduct disorder, etc.) that lead to delinquency, violence and drug abuse and other negative manifestations.

Each family is assigned to a Therapist who is trained and clinically supervisor by FFT Inc. On average, a youth/family will receive FFT for 14 weeks. Over the course of this period, the Therapist will work with the family in nine to 14 one-hour sessions. The exact frequency of the sessions will vary on a case-by case basis over the course of the treatment; sessions could occur daily to weekly as needed. Services will occur in the family's home or community and at times that are convenient for the family members. Each Therapist serves between 10 and 15 families at a time depending on geographical distance.

This model is used as a prevention services to avoid further penetration into the juvenile justice system, and is also used for youth reentering the community to their families from residential placement.

Girls Self-Esteem: gender specific self-esteem programming is provided through group and individual sessions for girls. The curriculum focuses on four main areas: trauma/drama, healthy relations, sexuality, and mind-body connection. The goal of this curriculum is to empower young women and create positive self-esteem.

Guided Recreation: youth have the opportunity to participate in activities that are designed to create interest and replace negative group recreation. The expectation is that they can learn to do these activities and continue upon discharge. Activities may include: playing basketball, baseball, ultimate Frisbee, disc golf, touch football, or doing yoga at a local park; playing chess; running races; attending library events;

participate in Wilmington's Art Loop; attending local theater performances (high school or professional, as available); attending local sporting events, movies, and bowling.

Sanctuary Psycho-education: the Sanctuary Model teaches with the goal of helping youth recover from the effects of trauma and chronic stress. The curriculum teaches children why what happened to them effects the way the act in everyday life and emphasizes the education as well as the processing of feelings. It is believed that if children are to make progress in treatment, they must shift their understanding of what has happened to them and the role they must plan in the own recovery.

The primary task of reeducation involves a change in the person's self-perception. Increasing awareness, emphasizing safety, and teach skills to manage feelings are crucial steps to take in creating an environment that can handle the crucial work of processing feelings, past trauma and grief and loss.

All children need to learn the skills that will help them to succeed in the world-the ability to care for themselves and others, the ability to manage their emotions, the ability to envision a positive future and the ability to cope with adversity and loss. VQ offers this service for youth in a group or individual setting. The groups are "open," which does not require that the same group starts and finishes together.

Street Smart: Street Smart focuses on the prevention of sexually transmitted diseases and infections, teen pregnancy; reduces substance use; and works to encourage the development of healthy relationships. Street Smart consists of eight group sessions, an individual counseling session and a visit to a community resource, such as Planned Parenthood.

Each session addresses one or more of the following topics: personal risk for STD's; HIV/AIDS and STDs transmission and prevention; discussion, observation, and practice of proper use of condoms; the relationship between drug use and HIV; impact of drug use on sexual behavior; personal triggers and urges; risky sexual situations; observation and role play of coping and problem solving skills; examination of personal sexual values; practice of positive "self-talk," observation and practice of assertiveness skills to deal with peer pressure; and risk reduction techniques.

The Street Smart curriculum includes eight group sessions and one individualized counseling session for each youth, which will underscore the importance of lessons learned and help each youth understand the particular implications of prevention as they pertain to his/her particular circumstances. The counselling session helps him/her identify goals regarding safer sex, discuss personal triggers and barriers, and develops a personal risk reduction plan. Each group also visits a community resource as part of the curriculum. These groups are "closed," requiring that the same group must start and finish together.

Psychotherapeutic Services, Inc. to address criminogenic needs:

Multi-Systemic Therapy: is a treatment strategy that is supported by research, that is goal oriented, intensive home based treatment designed to work with youth with multiple problems; peer relations, school performance, family relations, and community associations contribute to the youth's behavior. MST therapists work with the families to design interventions in all of these areas. The therapists do a functional assessment of the youth in the context of their family, school and community. They work to understand the youth's problems and factors that contribute to their problems; help the parent to build supportive networks around them, empower the parent to address the needs of the youth more effectively and help them to attain long term change that families can maintain following the completion of the MST program. They are available 24 hours day/7 days a week.

Family Support Program (ISB only): While the youth is in residential ISB treatment, the primary Family Support therapist works collaboratively with the residential therapist, the PBH worker and the Delaware probation officer in an effort to assist the youth and the family with reducing maladaptive behaviors. The program's comprehensive treatment approach emphasizes positive growth and development to help the youth individuate and seek healthy interpersonal relationships. This philosophy includes a strong belief in the adolescent's accountability and responsibility for their behavior. Honesty, basic trust, empathic interpersonal relationships, healthy expression, self-regulation, and relapse prevention/wellness are key principles of the program. Following the youth's residential treatment, the Family Support Program remains involved with the youth and their family to assist with the reintegration process, promoting relapse prevention and pro-social behaviors for 6 months, with extensions as needed. This will include family and individual sessions, parent groups, aftercare group therapy with other ISB youth, as well as referrals to services to support the family and youth as s/he returns to live at home. If the youth requires a step-down through a state run RTC, this program participates in the process as well. If the youth is being placed in a DFS foster home, the therapist is able to provide education regarding sexual offending issues and safety to foster parents. Crisis services are provide 24/7 as needed.

Support Services

Translation – the Delaware Children's department contracts with a number of translation services to support youth/family during parent contacts, youth contacts, provider contacts, and other areas as needed.

Transportation – the Delaware Children's department contracts with a number of transportation services throughout the State of Delaware. This service helps to get youth and their families to counseling appointments, family meetings, and other services as necessary.

GPS – this service is to be used as an alternative to secure detention, as a support to a reentry plan, and for youth who have been ordered to Tier 3 sex offender status who must have a GPS when returning to the community until the end of their juvenile disposition.

L4 = Level 4 residential services, selected to meet the youth's criminogenic needs:

Level 4 options available in-state as follows:

Grace Cottage

Criminogenic needs that can be addressed: current school status, current living arrangements (family functioning), currently relationships, aggression, attitudes/behaviors, skills

Grace Cottage is a Level IV staff-secured residential program focusing on the unique treatment needs of adolescent females in a safe, gendersensitive environment. This instate residential program is a cottage setting with a capacity for 14 females in order to provide individualized programming in a small group setting.

Grace Cottage offers the rewards-based Cognitive Behavior Training behavior management system and cognitive skills development program. This evidence-based practice enables youth to learn pro-social skills to effectively solve problems, handle conflict situations and develop impulse control. This approach is especially helpful for youth with criminogenic needs related to skills, attitudes/behaviors and aggression, though all youth can benefit from increasing skills in the area of cognitive functioning. The gender-responsive life skills program also promotes skills development.

Grace Cottage allows youth and families to remain connected, and when needed, to improve family functioning and address needs related to current living arrangements. Grace Cottage is accessible to families as it is an in-state residential cottage. This promotes family engagement and visitation. Youth and families have an opportunity to work with the program's Family Crisis Therapist to improve communication and functioning. In addition, the Parenting with Love and Limits program is available through VisionQuest for families residing in Kent and New Castle Counties and Functional Family Therapy is available to families residing in Sussex County as a component of transition planning. Many youth visit their homes on passes as they near their reentry date. This allows time for the youth and family to try newly acquired skills with the support of the team.

Youth at Grace Cottage participate in daily academic education by certified instructors, including special education services and GED preparation. A transition specialist works with youth, family members and the local school district to promote a smooth transition back to school upon reentry.

Mental health services are provided by a certified psychologist and psychiatrist in partnership with the Division of Prevention and Behavioral Health Services.

All youth receive transition/aftercare services planning in collaboration with Community Services case managers. This planning includes a review of criminogenic needs to ensure transition plans address youth needs.

Other services include medical, dental and eye care services and programming provided by various community providers.

Snowden Cottage

Criminogenic needs that can be addressed: current school status, current living arrangements (family functioning), currently relationships, aggression, attitudes/behaviors, skills

Snowden Cottage is a Level IV staff-secured residential program designed to address the needs of adjudicated male adolescents and assist them in making a successful transition to the community. This instate residential program is a cottage setting with a capacity for 15 males in order to provide individualized programming in a small group setting. Snowden Cottage is most appropriate for youth with no prior YRS Level IV placement history.

Snowden Cottage offers the rewards-based Cognitive Behavior Training behavior management system and cognitive skills development program. This evidence-based practice enables youth to learn pro-social skills to effectively solve problems, handle conflict situations and develop impulse control. This behavioral approach is especially helpful for youth with criminogenic needs related to skills, attitudes/behaviors and aggression, though all youth can benefit from increasing skills in the area of cognitive functioning.

Snowden Cottage allows youth and families to remain connected, and when needed, to improve family functioning and address needs related to current living arrangements. Snowden Cottage is accessible to families as it is an in-state residential cottage. This promotes family engagement and visitation. Youth and families have an opportunity to work with the program's Family Crisis Therapist to improve communication and functioning. In addition, the Parenting with Love and Limits program is available through VisionQuest for families residing in New Castle Counties and Functional Family Therapy is available to families residing in Kent and Sussex Counties as a component of transition planning. Many youth visit their homes on passes as they near their reentry date. This allows time for the youth and family to try newly acquired skills with the support of the team.

Youth at Snowden Cottage participate in daily academic education by certified instructors, including special education services and GED preparation. A transition specialist works with youth, family members and the local school district to promote a smooth transition back to school upon reentry.

Mental health services are provided by a certified psychologist and psychiatrist in partnership with the Division of Prevention and Behavioral Health Services.

All youth receive transition/aftercare services planning in collaboration with Community Services case managers. This planning includes a review of criminogenic needs to ensure transition plans address youth needs.

Other services include medical, dental and eye care services and programming provided by various community providers.

Mowlds Cottage

Criminogenic needs that can be addressed: current school status, current employment, current living arrangements (family functioning), currently relationships, aggression, attitudes/behaviors, skills

Mowlds Cottage is a Level IV staff-secured residential program designed to serve youth who have successfully completed the Ferris School program and are ready to transition to the community. Mowlds also provides short-term residential programming for youth on aftercare supervision. This instate residential program is a cottage setting with a capacity for 16 males in order to provide individualized programming, with an emphasis on transition services, in a small group setting.

Mowlds Cottage offers the rewards-based Cognitive Behavior Training behavior management system and cognitive skills development program. This evidence-based practice enables youth to learn pro-social skills to effectively solve problems, handle conflict situations and develop impulse control. This approach is especially helpful for youth with criminogenic needs related to skills, attitudes/behaviors and aggression, though all youth can benefit from increasing skills in the area of cognitive functioning.

Mowlds Cottage allows youth and families to remain connected, and when needed, to improve family functioning and address needs related to current living arrangements. Mowlds Cottage is accessible to families as it is an in-state residential cottage. This promotes family engagement and visitation as the team develops and begins implementation of the youth's transition plan. Youth and families have an opportunity to work with the program staff to improve communication and functioning. In addition, the Parenting with Love and Limits program is available through VisionQuest for families residing in New Castle Counties and Functional Family Therapy is available to families residing in Kent and Sussex Counties as a component of transition planning. Youth visit their homes on passes as part of this reentry program. This allows time for the youth and family to try newly acquired skills with the support of the team.

Youth at Mowlds Cottage participate in daily academic education by certified instructors, including special education services and GED preparation. A transition specialist works with youth, family members and the local school district to promote a smooth transition back to school upon reentry. For those youth who with vocational interests, or who have completed their high school education or GED, Mowlds offers services related to employment search and skills development.

Mental health services are provided by a certified psychologist and psychiatrist in partnership with the Division of Prevention and Behavioral Health Services.

Substance abuse relapse prevention education programming is provided for youth with a need in this area. Youth are also connected with appropriate substance abuse treatment programs as they transition back to the community.

All youth receive transition/aftercare services planning in collaboration with Community Services case managers. This planning includes a review of criminogenic needs to ensure transition plans address youth needs.

Other services include medical, dental and eye care services and programming provided by various community providers.

Out of State L4 contracted programs as follows:

Summit Academy ~ males 14 to 18 years of age

Criminogenic needs that can be addressed: Current School status, Aggression, Attitudes/Behaviors, Current Relationships, Skills

Summit Academy offers programming for males who are characterized by a lack of self-discipline, self-esteem, lack of respect for authority, community and persons. Targeted youth are further characterized by poor decision-making, are easily led, behind in school and needing to develop accountability, sense of responsibility, and structure for living. Finally the youth is characterized by some life experience related to substance abuse.

Summit Academy offers a year round educational system including a wide range of industrial trade skills training. Educational services are provided for GED track and Diploma track and an option to participate in a "College within a High School" for juniors and seniors in good academic standing. These are transferable college credits. Drug and Alcohol education and prevention taught in health class through the Education Department

Inappropriate referrals:

- History of fire setting and/or arson
- Suicidal or self-destructive tendencies
- Youth with psychotic or severely emotionally disturbed behavior/serious mental health issues
- Major Depression
- Loner behavior
- Homicide adjudication
- Rape adjudication
- Aggravated assault/robbery with a deadly weapon
- IQ below 80 (will be considered on case by case basis)
- Runaway (considered on case by case basis)

New Outlook Academy (formerly Sleepy Hollow) females 14 to 18 years of age Criminogenic needs that can be addressed: Current School status, Aggression, Attitudes/Behaviors, Current Relationships, Skills

The New Outlook Academy offers programming for females who are characterized by a lack of self-discipline, self-esteem, lack of respect for authority, community and persons. Targeted youth are further characterized by poor decision-making, are easily led, behind in school and needing to develop accountability, sense of responsibility, and structure for living. Finally the youth is characterized by some life experience related to substance abuse. The student may also have the experience of being abused (verbally, physically, and/or sexually) manifested by a Post-Traumatic Stress Disorder (PTSD) diagnosis.

New Outlook Academy offers a year round educational system including a wide range of industrial trade skills training. Educational services provided for GED track and Diploma track and an option to participate in a "College within a High School" for juniors and seniors in good academic standing. These are transferable college credits. Drug and Alcohol education and prevention taught in health class through the Education Department.

The program can also address the Attitudes/Behaviors and Relationship needs by providing programming aimed at the youth's pro-delinquent attitudes, values, beliefs and associations while increasing her pro-social and coping skills.

Inappropriate referrals:

- History of fire setting and/or arson
- Suicidal or self-destructive tendencies
- Youth with psychotic or severely emotionally disturbed behavior/serious mental health issues
- Chemical Dependency
- Major Depression
- Loner behavior
- Homicide adjudication
- Rape adjudication
- Aggravated assault/robbery with a deadly weapon (will consider on case by case basis)
- IQ below 80 (will be considered on case by case basis)
- Runaway (considered on case by case basis)
- Pregnancy past the first trimester

Clarinda Academy – males 12 to 18 years of age Criminogenic needs that can be addressed: Current School status, Aggression, Attitudes/Behaviors, Current Relationships, Skills

Clarinda Academy provides a safe, supportive, nurturing and educational program for males 12-18 years of age. The program focuses on behavioral change through cognitive/behavioral thinking processes and the intervention and redirection of socially unacceptable behavior. The program prepares young men for a positive future by identifying strengths and weaknesses in their physical, mental, social and spiritual characteristics. Clarinda focuses on four core norms: treat others with respect, intervene all socially inappropriate behavior, support those who intervene and reinforce positive, pro-social behavior. A Psychiatric Nurse Practitioner is available to provide assessments and medication management as well as a Psychiatrist and Psychologist.

Clarinda Academy uses Guided Group Interaction where residents share "here and now" behavior problems using peer pressure and offer helpful feedback to help fellow student with problems.

Clarinda Academy focuses heavily on helping students develop pro-social decision making skills by challenging current value systems, education and practicing healthy choices. Life skills classes are taught as well as therapy and counseling group sessions. Students benefit from frequent practice of general living skills such as housekeeping, budgeting and financial preparation, and daily life scheduling, positive self- expression and socially-age appropriate hygiene techniques. With staff and peer group guidance they will also explore and develop their spirituality, inner strengths and personality. The Life Skills Curriculum will consist of: Emotions Management, Victim Awareness, and Chemical Dependency. Other practical skills will be taught on a weekly basis such as: money management, cooking, vehicle care, hygiene, and resume writing. There is also opportunity to participate in clubs and special groups such as the Eagle's Club, Facility Tours, Public Speaking and Clarinda Community Activities.

Inappropriate referrals:

- Youth whose diagnoses include: mental retardation, schizoid personality, pervasive development disorder, schizophrenia, paranoid personality disorder and paranoid type of schizophrenia
- Youth with a Full Scale IQ of less than 65
- Youth with a significant history of fire setting and/or a documented history of sexual acting out and who have not been successfully treated

L4 Substance Abuse

Mountain Manor (males and females, ages 13-18)

Criminogenic needs that can be addressed: current relationships, current alcohol and drugs, aggression, attitudes/behavior, skills and can also address current mental health needs (non-criminogenic) for clients with dual diagnosis

Mountain Manor Treatment Center at Baltimore is a JCAHO accredited Residential Substance Abuse Treatment program specializing in substance abuse and dual diagnosis treatment. This medium to high intensity Residential Treatment Facility is designed to provide a broad continuum of behavioral health services to adolescents who present with a complex array of substance use and abuse, emotional, behavioral, legal, family, learning and socialization problems. Mountain Manor treats youth with marijuana, alcohol, cocaine, heroin and/or poly-substance abuse or dependence, as well as, dual-diagnosed youth.

Clinical services include evidence-based best practices which motivate individuals to acquire the knowledge and skills to maintain abstinence and begin the process of establishing lifestyle and attitude changes that will initiate and support recovery. The following treatment modalities are employed:

- Motivational Techniques
- Strengths-Based Approach
- Stages of Change

Services provided:

- Assessment by Certified Drug/Alcohol Counselor
- Bio-psychosocial Assessment
- Psychiatric Evaluation (when needed)
- Individual Treatment Plan
- Individual/Group/Family Counseling
- Family Education Program
- Gender-specific groups
- Anger Management
- Grief and Loss Groups
- Psycho-education program and life skills group
- Relapse Prevention
- Alcoholics and Narcotics Anonymous based education, prevention and treatment curriculum
- Twelve-Step Self Help Meetings
- Routine Nursing and Medical Services
- Approved, non-public School certified by the Maryland Department of Education
- GED preparation program
- Medication management

Inappropriate referrals:

• Actively psychotic/suicidal/ homicidal

- Treated sexual offenders will be considered on a case by case basis
- Arsonists will be considered on a case by case basis
- IQ's between 55 and 69 will be considered on a case-by case basis

Level 5 Option available in-state:

Ferris School

Criminogenic needs that can be addressed: aggression, current school status, current living arrangements, current relationships, attitudes and behaviors, alcohol and drug use, mental health, skills, employment, and use of free time.

Ferris School is a 72 bed, maximum secure care, level V treatment facility for adjudicated males, ages 13 to 18. The average length of stay is six months, which is followed by a six-week transition program at Mowlds Cottage. Students committed to Ferris are identified as serious and/or chronic repeat offenders, who are at high risk to re-offend. Ferris School is accredited by the American Correctional Association (ACA), a professional organization dedicated to the improved management of correctional agencies through the accreditation process. Ferris School is also a participant in Performance based Standards (PbS), a data-driven improvement model which focuses on improving outcomes for youth and staff.

Ferris School provides a total structured learning environment that integrates all elements of rehabilitation; including education and treatment services daily. Treatment services focus on the individualized strengths and needs of the youth. Ferris offers a rewards-based Cognitive Behavior Training behavior management system and cognitive skills development program. This evidence-based practice enables youth to learn pro-social skills to effectively solve problems, handle conflict situations and develop impulse control. This approach is especially helpful for youth with criminogenic needs related to skills, attitudes/behaviors and aggression, though all youth can benefit from increasing skills in the area of cognitive functioning.

Ferris School offers educational services through our DMSS partners. Youth attend school daily from 7:50am-1:50pm. Class sizes are small and taught by certified teachers. Youth can earn academic credits which can be transferred to their home school and, if eligible youth can earn a high school diploma or GED. Youth can also earn participate in the construction certificate program; which allows them to work at Habitat for Humanity while at Mowlds. Youth are also eligible to participate in a credit recovery course offered by Groves night school where they are able to earn additional credits, which are transferable. Tutoring services are provided through our HOSTS (help One Student to Succeed) program, which is a partnership with duPont volunteers. A transition specialist works with youth, family members and the local school district to promote a smooth transition back to school upon reentry. For those youth who have completed their high school education or GED, Ferris School offers them the opportunity to work in the kitchen or with janitorial services to earn income, which is applied towards courts costs and restitution.

Ferris School offers treatment programs to address the most significant criminogenic needs. Services provided to youth are determined after an assessment is completed by a licensed psychologist and individualized treatment planning occurs. Services include ART (aggression replacement training), Thinking for a Change (T4C), violence prevention, healthy relationships, sex education/HIV prevention, transformative life skills (yoga), Student Warriors Against Gangs and Guns (SWAGG- in partnership with Delaware Center for Justice), parenting classes, nutrition program (in partnership with the University of Delaware), life skills, victim sensitivity, and public speaking.

Ferris School offers the following mental health services through our Prevention and Behavioral Health partners: Opportunities to Change (substance abuse treatment services), Trauma and Grief Component Therapy for Adolescents (TGCT-A) (group therapy focusing on grief and loss), Trauma Focused Cognitive Behavior Therapy (TF-CBT) (individual therapy focusing on trauma). The goal of trauma informed treatment at Ferris is to reduce the impact of exposure to traumatic events in the youth whom the program serves.

Ferris School allows youth and families to remain connected, and when needed, to improve family functioning and address needs related to current living arrangements. Ferris School is accessible to families as it is an in-state placement, and transportation is provided if necessary. This promotes family engagement and visitation as the team develops and begins implementation of the youth's transition plan. Youth and families have an opportunity to work with the program staff to improve communication and functioning. In addition, the Parenting with Love and Limits program is available through VisionQuest for families residing in New Castle Counties and Functional Family Therapy is available to families residing in Kent and Sussex Counties as a component of transition planning. Monthly family engagement events are held to foster the relationship between the family, youth, and staff.

Ferris School has a recreation department which is led by a recreation program specialist and program leader. We offer a variety of sports to our youth and compete in basketball and football. Our varsity and junior varsity teams play local schools in games which are open to the public.

Other services include medical, dental and eye care services and programming provided by various community providers.

Level 5 Options available out-of-state:

Southwest Indiana Regional Youth Village – females in need of L5 option, with the ability to step down to L4 within the perimeter fence.

Secure Care Level V with step down to Level IV– Southwest Indiana Regional Youth Village provides detention for females in a highly structured, carefully supervised locked environment within a perimeter fence. Detention programs are built principally on evidence-based practices, emphasizing behavior management, education and personal health. Case management services provided include: substance abuse education, values examination, relationship education, personal health education, conflict resolution, behavior management, stress management, and independent life skills. Mental health services provided include: psychological diagnostic and evaluation services which are provided via a contract. A psychiatrist conducts face-to-face visits with youth on-site and prescribes appropriate psychotropic medications. A physician

conducts weekly and scheduled visits with youth face to face on-site. Dental services are available on-site monthly. Optometry services are available by appointment. Proprietary, licensed nursing staff is on-cite 16 hours daily (while youth are awake) to administer and monitor medications

Inappropriate referrals:

• Mentally challenged youth

Reentry Options

Functional Family Therapy-is offered statewide as a re-entry service; a family based therapy approach that provides treatment for young offenders and their families. Youth can range in age from 10 to 17 and demonstrate behaviors such as ADHD, ODD, conduct disorder, etc. Each family is assigned to a therapist who is trained and clinically supervised by FFT, Inc. Services occur in the home or community, at times convenient to the family, generally for 14 weeks.

Family Support Program (ISB only) – While the youth is in residential ISB treatment, the primary Family Support therapist works collaboratively with the residential therapist, the PBH worker and the Delaware probation officer in an effort to assist the youth and the family with reducing maladaptive behaviors. The program's comprehensive treatment approach emphasizes positive growth and development to help the youth individuate and seek healthy interpersonal relationships. This philosophy includes a strong belief in the adolescent's accountability and responsibility for their behavior. Honesty, basic trust, empathic interpersonal relationships, healthy expression, self-regulation, and relapse prevention/wellness are key principles of the program. Following the youth's residential treatment, the Family Support Program remains involved with the youth and their family to assist with the reintegration process, promoting relapse prevention and pro-social behaviors for 6 months, with extensions as needed. This will include family and individual sessions, parent groups, aftercare group therapy with other ISB youth, as well as referrals to services to support the family and youth as s/he returns to live at home. If the youth requires a step-down through a state run RTC, this program participates in the process as well. If the youth is being placed in a DFS foster home, the therapist is able to provide education regarding sexual offending issues and safety to foster parents. Crisis services are provided 24/7 as needed.

Youth Advocate Program – for Ferris youth who will exit to home in 19801, 19802 and 19805(within the City of Wilmington limits). Youth are matched to an advocate familiar with the area in which they reside, to work with the youth and their family, and any other members of the youth's support network, to wrap services around them in the community to decrease the likelihood of their reoffending. This is generally a 6 month service.

Challenge Program – offered only in New Castle County, as a job-training program that is also a fully functional construction company, contracting and executing local construction jobs. The Challenge Program is committed to rebuilding low-income housing in Wilmington and to

preserving and encouraging traditional and environmentally responsible building techniques. The job training program is designed to achieve positive outcomes with trainees, all of whom are at-risk youth aged 17-21. The objectives for the trainees are to teach skills to make them employable in construction and other fields, to improve their reading and math skills, to assist them in attaining their GED or high school diploma and a construction-industry recognized credential, and to help them achieve stability in their lives.

Future Net - a New Castle County program for youth who have completed residential services at Ferris School, Grace, Snowden or Mowlds Cottage, or for youth on supervision in the community. Jewish Family Services is a private non-profit agency offering a technology training program for out-of-school youth aged 17-19. Trainees enrolled in the program complete 48 hours of site-based technology (audio-visual) training and continuing education (GED) along with supplemental services (job search) off site

Pre-trial options (for informational purposes)

The Children's department contracts with Connections for a 10 bed and People's Place 2 for two 10 bed facilities for youth in need of residential alternatives to secure detention (RAD). VisionQuest is also an option for youth who can remain at home with case management support, including curfew checks, school visits, and assuring youth will return to court for their hearings. DYRS has staff who provide pre-trial support to both the RAD youth who do not yet have a probation officer assigned, as well as to youth in the community who are able to be safely maintained while awaiting their court dates.