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Oversight—The Juvenile Justice System During COVID-19

Good afternoon Chair Levin and members of the General Welfare Committee. I am David Hansell, the Commissioner of the New York City Administration for Children's Services (ACS). With me today from ACS are Sara Hemmeter, Acting Deputy Commissioner for the Division of Youth and Family Justice (DYFJ), Dr. Angel Mendoza, ACS's Chief Medical Officer, as well as Charles Parkins, Deputy Associate Commissioner and Louis Watts, Senior Assistant Commissioner from DYFJ. ACS has appreciated this Committee's oversight of our child welfare and early childhood education work, and we are delighted that this Committee now also has oversight of our juvenile justice division. As you will see, we have worked hard to weave the principles, programs and services of child welfare into our youth justice programs, so we can empower youth with the tools they need to turn their lives around. We are grateful for this opportunity to testify virtually before this Committee about ACS's juvenile justice system and how we have responded to the unprecedented COVID-19 health crisis.

NYC's juvenile justice system safely serves youth through a trauma-informed lens, in the community whenever possible, and with appropriate structure and supports in place. DYFJ, oversees services and programs for youth at every stage of the juvenile justice continuum. Our continuum includes community-based services for youth who are at risk of delinquency, as well as for their families. In addition, we provide secure detention services and oversee nonsecure detention for youth who have been arrested and the court has ordered to be detained while awaiting resolution of their cases.

The past decade has seen two major progressive reforms in juvenile justice in New York City and State. Since 2012, with the enactment of Close to Home, NYC juvenile delinquents who are adjudicated by the Court to have committed offenses are no longer placed in Office of Children and Family Services (OCFS) facilities far from their homes, but instead are placed with ACS, in small home-like settings in or very near the City, where we provide therapeutic services to the youth and the family while the young person is in residential care, and upon his or her return to the community.

Second, and long overdue, as of October 1, 2020, New York State has finally caught up to the rest of the country, as the two-year process to raise the age of criminal responsibility from age 16 to age 18 has been completed. Today, all newly arrested 16- and 17-year-olds are now treated as juveniles in the justice system. In New York City, no 16- or 17- year old youth has been held at Riker's Island since October 2018; if they are ordered to be detained, they are now detained at one of ACS's juvenile detention programs.

We have made significant strides to improve the lives of children and families involved in the juvenile justice system, with a special focus on keeping young people strongly connected to their families and communities, and by pairing youth and families with the individualized supports needed to help them succeed. Through our collaboration with numerous City partners including NYPD, the Department of Probation (DOP), the Department of Education (DOE), Department of Youth and Community Development (DYCD), and the Mayor's Office of Criminal Justice (MOCJ), as well as

the City Council, advocates and providers, we have improved the prospects of justice-involved youth while enhancing public safety outcomes for all New Yorkers.

Despite the many challenges that COVID-19 presents, we have worked closely with our provider community to adapt our entire continuum of juvenile justice programs to meet the needs of youth and their families while conforming to the public health demands of this unique time. Our community-based alternative programs continue to offer prevention and diversion services to safely keep youth out of the justice system and supported in their homes and with their families. Our detention system has taken extraordinary measures to keep both children and staff safe, while providing the programming and supports youth need to thrive. And our Close to Home system of residential placement and aftercare has effectively adopted public health protocols, and is continuing to serve adjudicated youth and helping them safely transition back to the community.

Protecting the health and safety of youth and staff in our detention and Close to Home programs has remained our top priority throughout the pandemic. As will be discussed in more detail in this testimony, we have closely followed evolving public health guidance by implementing new protocols and procedures to protect the health and safety of the youth in our care and the dedicated staff who work with them each day.

I'd now like to provide an overview of our juvenile justice continuum, beginning with our programs to keep youth out of the justice system through diversion and

community-based programs, through our detention programs for youth awaiting adjudication of their cases, and ending with our Close to Home program for youth who have been ordered into placement by the court.

Community-Based Alternatives

Our goal is always to keep young people out of the juvenile justice system when that is safely possible, through community-based services. We know that the best way to intervene positively in the lives of young people is to engage with the whole family. In New York City, our Family Assessment Program (FAP) is a diversion program available to families of youth up to age 18, to help avoid involvement in the juvenile justice or child welfare systems by providing therapeutic services, grounded in a child welfare framework. Our services support families to address difficult teenage behaviors such as skipping school, using drugs, running away from home and/or struggling with mental illness. To minimize court involvement, families in NYC must first participate in FAP services before a Persons in Need of Supervision (PINS) petition can be filed.

ACS also administers the Juvenile Justice Initiative (JJI), which serves youth adjudicated as juvenile delinquents who are under probation supervision, as an alternative to placement. Specifically, JJI provides intensive services to youth in their communities rather than through placement in a custodial setting. JJI helps parents develop skills to support their children, enforce limits, and steer them towards positive peers and activities.

FAP and JJI use home-based interventions, drawing on skilled clinicians to work closely with parents and youth in their homes and communities while engaging schools, after school programs and other professionals to support the family. These services, which range from community-based supports such as mediation, respite and mentoring programs, to ACS-funded intensive, therapeutic evidence-based models such as Multisystemic Therapy (MST), Functional Family Therapy (FFT).

While these services have typically been accessed through the courthouses and have been delivered in family's homes, ACS has maintained access to these programs both virtually and in-person throughout the pandemic.

Detention

While there are many "off-ramps" in place, including the programs I've just described as well as diversion and alternative to detention programs administered by DOP and MOCJ, judges in both the Family Court and Supreme Court's Youth Part may order a youth detained while awaiting trial. When this happens, youth go to one of ACS's seven contracted non-secure detention sites, or to one of our two directly operated secure detention sites, Crossroads Juvenile Center in Brooklyn or Horizon Juvenile Center in the Bronx.

At the beginning of the pandemic, in light of emerging health concerns, we undertook a review to identify those youth who could be safely returned to the community. While ACS does not have the authority to release youth from detention,

through a collaboration with our sister agencies, we were able to support the release of over 1/3 of the youth in detention (20 from secure detention and 26 from non-secure detention). There are currently 32 youth at Horizon, 74 youth at Crossroads and 18 youth in nonsecure detention. All of the youth in detention have been ordered detained by either a Family Court Judge (for juvenile delinquents) or a Judge in the Youth Part of the Supreme Court (for Juvenile Offenders and Adolescent Offenders).

By law, a youth charged as a Juvenile Delinquent (JD) is a young person accused of committing an act that would be a crime if committed by an adult. Juvenile delinquent cases are heard in the Family Court, and now include youth ages 16 and 17 charged with misdemeanors, as well as felony cases transferred from the Youth Part in Supreme Court. A Juvenile Offender (JO) is a youth who is alleged to have committed a higher-level felony, such as murder or rape, when he or she was 13-15 years old. And pursuant to the Raise the Age law, 16- and 17-year olds charged with felonies are categorized as Adolescent Offenders (AO). JDs have their cases heard in Family Court and JOs and AOs have their cases heard in the Youth Part in Supreme Court. The Youth Part Judges transfer some AOs to Family Court, except when there are exceptional circumstances, or the felony was violent and caused substantial injury or death. The overwhelming majority of youth in secure detention today have been charged with higher level crimes. Currently, there are 71 AOs, 28 JOs and 7 JDs in secure detention.

Only JDs are detained in nonsecure detention, and currently there are 17 JDs in nonsecure detention (NSD). ACS contracts with 5 nonprofit providers to provide NSD,

which offers a less restrictive setting for lower-risk Juvenile Delinquents with court cases pending in Family Court. These NSD groups house up to 12 youth, and offer supportive home-like environments and close supervision.

ACS Secure Detention

To prepare for the implementation of Raise the Age and ensure proper staffing of both Crossroads and Horizon, ACS created a new job and title, Youth Development Specialist (YDS). The YDS title represents an updated approach to juvenile justice that stresses the importance of establishing credibility with youth, connecting with them, and effectively de-escalating situations when necessary. ACS worked hard to recruit YDS from across the City by doing extensive outreach in the neighborhoods and communities where our youth and families live to find qualified people committed to working with youth.

All new YDS undergo an intensive 6-week training program that includes two weeks of on-the-job training at the facility. The James Satterwhite Training Academy provides pre-service training on important topics, such as: understanding youth development and relationships; safety, security, and supervision; behavior modification and management; and group facilitation. All of our Youth Development Specialists have received training in trauma-based approaches to working with teens and on de-escalation of conflict and anger. Their skills are reinforced through intensive Safe Crisis Management training, with a focus on verbal de-escalation techniques as much as possible and physical restraint when necessary. We also offer Core Supervisory training

to all mid-level managers and supervisors in secure detention to provide them with the skills they need to properly manage and coach staff and create stable, safe environments for everyone.

While the Department of Correction (DOC) was initially required to assist ACS in staffing Horizon, because it still housed so-called “pre-RTA” youth who were legally adjudicated as adults, ACS assumed full operational control of Horizon in January 2020. For the past three years, we have been aggressively recruiting, hiring and training multiple classes of YDS Like all City hiring, ACS’s hiring of YDS was impacted by the citywide hiring freeze at the beginning of the pandemic. However, since August 2020, ACS has been onboarding new classes every month, the most recent of which started last week. These new classes will help ACS increase the available staff in our detention facilities.

Maintaining the health and safety of the youth and staff in our ACS-operated secure detention programs is our top priority. For youth in secure detention, and for the dedicated staff who work with them every day, we have implemented strict protocols to minimize the health risk to staff and youth. Under the leadership of our Chief Medical Officer, we have continued to follow the guidance of public health officials, including the Department of Health & Mental Hygiene, Health + Hospitals, and the Centers for Disease Control. As public health guidance has evolved throughout the course of the pandemic, ACS has adapted and implemented new protocols as needed, and we will continue to do so.

We continually disseminate up-to-date guidance to staff and youth about virus prevention practices such as hand washing and social distancing. Our detention

facilities are regularly and thoroughly cleaned and sanitized, and we have increased the number of cleaning personnel. We have equipped the facilities with ample hand sanitizer, soap, gloves, and PPE for staff working with symptomatic youth. Nurses conduct temperature checks of all staff and visitors who enter either facility on each shift, and our health partners conduct daily screenings of youth. All staff and youth are provided face coverings to help ensure transmission is minimized.

We have a full array of on-site medical and mental health care serving the youth at Crossroads and Horizon. ACS contracts with The Floating Hospital to provide health services and Bellevue to provide mental health services. We've been working closely with Health + Hospitals Bellevue Hospital Center to provide trauma-informed screening and mental health services to young people in secure detention (as well as in our non-secure detention continuum). Through its team of psychiatrists, psychologists, social workers and mental health clinicians, Bellevue works closely with Youth Development Specialists, Case Managers, Program Counselors, and our contracted medical services staff to provide comprehensive care for all our youth. We are grateful for the hard-working teams who have been meeting the complex needs of our youth prior to and throughout this crisis.

Education and programming are critical components within any detention facility, and these key services needed to be quickly modified and adapted due to COVID-19. Youth in detention participate in remote learning provided by the Department of Education's Passages Academy, using DOE-issued Chromebooks. Like all public school students in New York City, remote learning during the pandemic has created

challenges. DOE teachers, in addition to ACS staff, have worked tirelessly to make the remote learning experience as positive and educationally rich as possible.

We believe that programming is essential to enhance the therapeutic environment in detention, while helping youth build self-esteem, take part in positive activities, reduce idle time, connect with role models and credible messengers, and develop skills to redirect their lives in a positive direction. We have implemented new types of virtual programming to engage youth while adhering to social distancing protocols. For instance, youth have access to video games, movies, and books on ACS tablets. They are participating in virtual programming with our various partners, including a writing challenge through the Kite Program, yoga, individual exercise challenges, and more. Building on our successful summer internship program, the Robin Hood Foundation is funding a fall enrichment program, in which 78 youth are receiving stipends to participate in programs such as Barista Café, Book Club, Newsletter, and also training by credible messengers for youth to be Junior Violence Interrupters.

Strong family engagement is another essential part of our model of care, and we have adapted to make sure youth remain connected. Our Case Management staff connect with parents by phone at intake, and they call parents to provide weekly progress updates. One of our early and most difficult decisions during this crisis was to suspend in-person visiting due to the health risks, and then to once again suspend in-person visiting this fall when the virus levels increased in New York City. We will

continue to review this policy as the public health situation warrants. In the meantime, youth remain connected with their families through video visits and phone calls.

To enable youth to both continue video visits with their families, and appear by video at court hearings, ACS created secure and private “booths” at both facilities. We are in the process of upgrading the wifi, and procuring new tablets, to make these video visits and court appearances more seamless. Since the start of the pandemic, ACS has arranged for over about 3,500 video visits and approximately 2,500 video court appearances for youth in detention. As has always been the case, youth have access to free phone calls, can write and send unlimited letters to parents and family members, and can make unlimited calls to their attorneys.

Especially during these trying times, we believe it is crucial to provide structure for youth and maintain our youth-focused model of care. As discussed, youth in detention continue to receive quality medical and mental health care, access to education and programming, and they are maintaining connections with their families.

Close to Home

In 2012, the State and the City partnered to create Close to Home, New York City’s juvenile justice placement system in which adjudicated juvenile delinquents are placed in residential programs near their homes, schools and communities. Our Close to Home non-secure and limited-secure placement residences are located at 28 sites throughout the City and in Dobbs Ferry. They are run by seven nonprofit provider

agencies. Close to Home is grounded in a child welfare framework, and all of our providers are deeply experienced in serving the complex needs of the youth in our care.

Despite raising the age of criminal responsibility, ACS has seen a decline in the Close to Home census. In the past five years, ACS has seen admissions to Close to Home decrease 54%. Prior to Close to Home, 540 NYC youth were placed in upstate juvenile placement settings run by New York State. In 2018, there were 110 youth placed in Close to Home. Currently there are 72 youth in Close to Home placements and 34 on aftercare.

All Close to Home programs offer structured residential care for youth in a small, supervised, and home-like environment. In contrast to the traditional larger juvenile placement facilities model, Close to Home programs have been intentionally designed to enhance participation in programming while preserving the safety and security of youth, staff, and the community.

Close to Home allows for engagement to occur simultaneously with the youth, the family and the community to ensure that factors leading to juvenile justice system involvement are addressed before the youth returns to the community. In partnership with DOP, ACS has adopted a Risk-Need-Responsivity (RNR) framework and an evidence-based assessment tool—the Youth Level of Services (YLS)—to guide our intervention and ensure we reduce youth likelihood to recidivate.

Each Close to Home program is required to implement an evidence-based therapeutic program model that serves as the primary mechanism of behavioral

support. Through the chosen program framework, youth address their interpersonal relationships, communication skills, and emotional regulation.

Close to Home allows youth to be placed close to their families and home communities which has made it easier to include the youth's family at every level of intervention. The pandemic has made integrating families more challenging, with on-site family visits now limited due to the rates of COVID positivity. Much like ACS's residential foster care programs, however, Close to Home providers have integrated virtual visits to maintain the family connection. Youth and families have been equipped with all the necessary devices to make virtual visitation possible.

Youth in Close to Home participate in DOE's Passages Academy. Prior to the pandemic youth in Non-secure Placement (NSP) attended either Belmont or Bronx Hope and youth in Limited Secure Placement (LSP) attended school on-site, but now, like many of their peers, they are participating in remote learning. DOE and ACS's providers have ensured that all youth have DOE Chromebooks and are provided with additional assistance as needed.

At the start of the pandemic, ACS created 4 isolation sites for youth in foster care or Close to Home who may have been exposed to COVID-19 or tested positive for COVID-19. These isolation sites included 24 hour nursing services and enabled ACS and our providers to quickly and safely quarantine youth who might be able to spread the virus from other youth. Currently, we have two isolation sites available to serve youth in foster care or Close to Home – one in the Bronx and one in Staten Island.

Youth returning to the community receive aftercare supervision from their Close to Home provider. The goal of Close to Home aftercare is to build on the skills youth acquire while in placement and help develop a network of support that will allow them to succeed in the community. While in placement, youth form positive, trusting relationships with caring adults. These relationships are critical to facilitate each youth's growth, skill development, and progress as they learn new ways of thinking and changing their behaviors. Residential providers build on their relationships with youth during aftercare, also leveraging broader agency resources and relationships with community-based organizations, to supervise youth in the community with support from ACS, to ensure each youth's needs are being met.

State Budget

Given that it is New York State budget season, I want to take this time to remind you that the State has cut back its support for the most vulnerable children and youth in New York City—and for the youth in our juvenile justice continuum in particular. And the most recently proposed State Executive budget adds additional cuts.

When state legislation created Close to Home in 2012, the state committed funding of up to \$40 million to support New York City's program; however, in the State 2018-2019 budget, the state eliminated ALL of its funding for Close to Home and continues to provide \$0 for the care of these youth. In addition, despite implementing Raise the Age legislation that the State committed to pay for, and appropriating \$250 million, New York City continues to receive \$0 to support Raise the Age because the

statute only provides funding to counties that remain below a 2% property tax cap (which thereby excludes NYC).

The current proposed legislation adds to these cuts. The State budget proposes to cut the state's reimbursement rate for detention by 5%, which would be a \$2 million annualized cut. In addition, the State budget proposes to cut to the reimbursement rate for prevention services, which includes community-based alternative programs such as FAP and JJI, to a 59% share despite the statutory state share of 65%. This will result in a cut of over \$25 million to ACS's full prevention services system. We hope that we can rely on our partners in the City Council to fight these cuts that will negatively impact children and families.

Vaccines

It has now been nearly a year that we have been managing our juvenile justice system in the face of the COVID-19 pandemic. While we have been able to provide for the health, safety, security, education, and programming needs of the youth, we look forward to the day when our youth can attend school in person, see their families in person, have their cases move more swiftly through the court process, and even eat their meals without having to be socially distanced. The availability of COVID-19 vaccines now seem to be a light at the end of this very long tunnel.

We strongly believe that the COVID-19 vaccines are a game-changer for the health and safety of our staff, our providers' staff and for the youth in our care. As soon

as vaccines became available to New Yorkers, ACS advocated to the State and the City for the staff in our congregate care facilities (e.g. detention, nonsecure detention and Close to Home) to be prioritized for vaccination. We were very pleased when these staff were added to Priority 1B in early January. We are now advocating that youth in our congregate facilities, who are 16 or older, also be prioritized. In addition, we are working closely with the Vaccine Command Center, our Chief Medical Officer, and Floating Hospital to provide vaccines for youth in our care who are 16 and over with comorbidities, where there is proper consent for vaccination.

We understand the history of medical racism in this country, and thus the hesitancy about vaccines among many of our staff, and New Yorkers at large. We are working with our Chief Medical Officer, the unions and other medical staff in our facilities to educate our staff about the vaccines so they can make informed decisions about getting vaccinated.

Conclusion

In conclusion, I would like to thank our staff working in detention and Close to Home for all their efforts to provide a safe, supportive, caring and programmatically engaging environment for youth during this incredibly challenging time. I know that this has meant staff going to work to care for youth while fearing for the health and safety of themselves and their families. Their dedication and commitment to the youth in our care has not gone unnoticed, and I wanted to be sure to use this opportunity to thank all of our incredible juvenile justice staff for their efforts throughout the pandemic.

And finally, I want to thank the General Welfare Committee for holding this hearing and for your interest in learning more about the programs and services in the juvenile justice continuum, particularly during the pandemic.

Thank you and we look forward to taking your questions.