File No	120143	Committee Item No3
		Board Item No.

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee PUBLIC	SAFETY	Date_	3/1/12
Board of Superviso	rs Meeting	Date_	3/13/12
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Completed by:	49	Date	3/8/12
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^{*}An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

[Approval of the Youth Violence Prevention Initiative: Local Action Plan - 2012 Update]

Resolution approving the San Francisco Juvenile Justice Coordinating Council's Youth Violence Prevention Initiative: Local Action Plan - 2012 Update.

WHEREAS. The San Francisco Juvenile Justice Coordinating Council (JJCC) was established in 1999 pursuant to Section 749.22 of Article 18.7 of the Welfare and Institutions Code as a necessary component under the State of California's Juvenile Crime Enforcement and Accountability Challenge Grant Program; and

WHEREAS. The JJCC is charged with developing a comprehensive, multiagency plan, called "The Youth Violence Prevention Initiative: Local Action Plan"; and

WHEREAS. The Juvenile Justice Local Action Plan seeks to establish juvenile justice directives for youth and young adults, ages 10-25; and,

WHEREAS, The JJCC, led by Juvenile Probation Chief Siffermann, Department of Children, Youth, and their Families Director Maria Su, Deputy Public Defender Patricia Lee, and Juvenile District Attorney Julius DeGuia, met on July 28, 2011 at the Youth Guidance Center: and.

WHEREAS. The 2012 Youth Violence Prevention Initiative: Local Action Plan sets juvenile justice funding priorities for various juvenile justice funding streams: the Juvenile Justice Crime Prevention Act (JJCPA), the Juvenile Accountability Block Grant (JABG), and the Children's and General Funds (CCSF streams); and,

WHEREAS, The JJCC unanimously approved this Juvenile Justice Local Action Plan on July 28, 2011; and,

24

25

WHEREAS. The Board of Supervisors held a hearing in the Public Safety Committee on September 15, 2011 on the Youth Violence Prevention Initiative: Local Action Plan; now,

therefore, be it

RESOLVED, That the City and County of San Francisco hereby approves the JJCC Youth Violence Prevention Initiative: Local Action Plan.

Supervisors Avalos, Mar BOARD OF SUPERVISORS



YOUTH VIOLENCE PREVENTION INITIATIVE: LOCAL ACTION PLAN

APPROVED BY THE JUVENILE JUSTICE COORDINATING COUNCIL





JULY 2011
SAN FRANCISCO MAYOR'S OFFICE
DEPARTMENT OF CHILDREN, YOUTH AND THEIR FAMILIES
VIOLENCE PREVENTION AND INTERVENTION UNIT

Department of Children, Youth & Their Families, Violence Prevention and Intervention Unit





Youth Violence Prevention Initiative **Local Action Plan**

Presentation to Board of Supervisors, Public Safety Committee March 1, 2012

2011 Youth Violence Prevention Initiative: Local Action Plan

Purpose



and recommendations for community violence To establish JJCC partner's funding strategies youth and young adults between the ages of prevention and intervention efforts targeting 10 and 25.



Target Population

San Francisco youth/young adults between the ages of 10 & 25 who are:

At-Risk

Highly At-Risk

In-Risk

- System Involved

— In-Custody/Detained

Aftercare/Reentry

Framework



- Violence Prevention and Intervention, "Theory of Change"
- "Circle of Care" Model
- Restorative Justice Principles *
- Community Input
- Evidence Informed Practices

schools and other organization and institutions to bridge the gap between people and organizations in order to increase public safety and capacity for collection to prevent and reduce incarceration and overall youth violence. Restorative Justice Principles involve individual community members, community agencies, law enforcement,

youth, young adults,

DCYF and stakeholder

the Circle of Care

protective factors and promote

organizations

and their families

San Francisco invests in a holistic approach to reducing youth violence and supporting youth, young adults, and families

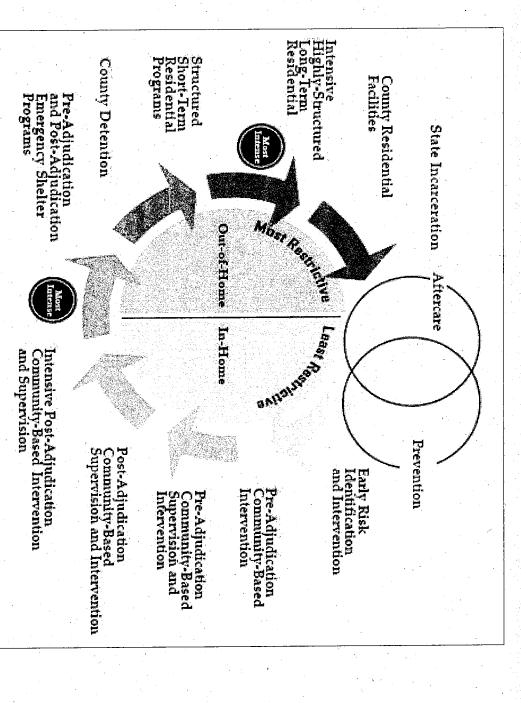
Theory of Change





Framework: "Circle of Care"





Local Action Plan Major Priorities



- Ensure all services are responsive to all youth or young adult's gender, sexual orientation, and cultural identification
- Affirm collaborative partnerships amongst JPD, APD and CBOs to serve in-risk, transitional age youth.
- Continue to strengthen evaluation of funded programming, guided by DCYF's "Theory of
- Standardize assessment tools.
- provided through a *collaborative partnership* between Juvenile Probation Department , Adult Affirm services for youth and transitional age youth within the in-risk population should be Probation Department and Community Based Organizations.
- Promote referrals to existing programs and services such as substance abuse treatment, workforce development, and family support.
- Support agencies to expand their capacity to provide high quality services.

2011 Youth Violence Prevention Initiative: Local Action Plan

Service Strategies and Activities



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Diversion

Detention Alternatives

Detention Based Services

Aftercare/Reentry

Alternative Education

- Street and School-Based Mediation/Crisis Response, Mentorship Enrichment Activities, Shelter, Case management, and Gender Responsive Services
- Street and school-based mediation/crisis response, Conflict Resolution and Mediation, Mentorship, Enrichment Activities, Shelter, Case management, and Gender Responsive Services
- Mentorship, Enrichment activities, Evening Reporting Centers, Home Detention, Case management, and Gender Responsive Services
- Enrichment activities, Alternative Education Activities, and Gender Responsive Services
- Mentorship, Enrichment activities, Intensive Supervision and Clinical Services, Saturday Enhancement Class, Case management, and Gender Responsive Services
- Alternative Education Programs (i.e. alternative schools), GED Programs, and Credit Recovery Programs



2012-13 VPI RFP Allocation

VPI Joint Funders (DCYF, DPH & JPD) Allocation of Funds for an 18 month cycle-01/12-06/13

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Secondary	At-Risk &			
Prevention	Highly At-Risk	\$3,311,250	22%	18
Diversion	In-Risk:			
	System Involved	\$4,158,368	28%	77
Detention	ln-Risk:			
Alternatives	System Involved	\$1,440,000	10%	Ŋ
Detention Based	In-Risk: Detention			
Services		\$402,000	3%	7
Aftercare/Reentry	In-Risk: Aftercare			
		\$3,882,000	76%	19
Alternative	At-Risk, Highly			
Education	At-Risk & In-risk	\$1,701,000	11%	9
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2011 Youth Violence Prevention Initiative: Local Action Plan

Service Strategies and Outcomes



Secondary Prevention

Diversion

Detention Alternatives

Detention Based Services

Aftercare/Reentry

Altiernatiive Education

- Agencies providing secondary prevention services should reduce the number of youth who become involved with the juvenile or criminal justice system.
- Agencies providing diversion services should decrease the number of system-involved youth who progress into deeper involvement with the juvenile and criminal justice system.
- Agencies providing alternatives to detention services should decrease the number of system-involved youth who are placed in the custody of the juvenile or criminal justice system.
- Agencies providing detention-based services should increase the number of in-custody youth who are prepared to exit the juvenile and criminal justice system.
- Agencies providing aftercare/reentry services should support the successful transition of youth and young adults exiting the juvenile and criminal justice system and reentering their communities.
- Agencies that provide alternative education services should increase the number of students that are on-track to graduate or who earn their diploma or GED

Mission Analytics Group Evaluation:

Violence Prevention Initiative and High-Risk Youth **Workforce Development**



Department (JPD) Juvenile Justice Information System (JJIS), the report brief addresses (DCYF) Contract Management System (CMS) and the San Francisco Juvenile Probation Using data from the San Francisco Department of Children, Youth and their Families the following major research questions:

- Who has been served through VPI and YWD-HR, and to what degree are these programs reaching juvenile justice-involved youth?
- •Are different youth and young adults being reached by different service strategies within VPI?
- •What have been the patterns of service use within VPI and YWD-HR?
- For YWD-HR in particular, how many youth and young adults have been placed in
- •Among juvenile justice-involved youth who participate in VPI and YWD-HR, what are the short run juvenile justice outcomes for these youth?

2011 Youth Violence Prevention Initiative: Local Action Plan-Accomplishments



July 2011

JJCC unanimously approved the Youth Violence Prevention Initiative: 2011 Local Action Plan.

August 2011

- The LAP informed the FY 12-13 VPI RFP allocation.
- The LAP was submitted to JJCPA for review and approval.

September 2011

- the LAP The San Francisco Board of Supervisor's, Public Safety Committee held a favorable hearing on
- encouraged sharing lessons learned with neighboring county's JJCPA applauded the City and County of San Francisco for an excellent local action plan and

November 2011

JJCPA selected San Francisco and a JJCPA funded program, Delancey's Life Learning Academy,

to be highlighted in their legislative report.

2011 Youth Violence Prevention Initiative. Local Action Plan-Next Steps



March 2012

- The Board of Supervisors, Public Safety Committee will host a hearing on the Youth Violence Prevention Initiative: Local Action Plan.
- To continue working on the major policy priorities highlighted in the LAP.
 - DCYF and JPD will submit the annual JJCPA application.

April 2012

The JJCC will select major policy priorities and recommendations.

June 2012

JJCPA will announce California city and county allocations.

Iuly 2012

- DCYF will inform of JJCC of any possible changes impacted by the JJCPA allocation.
- The JJCC will implement a plan of action for policy priorities and recommendations adopted

Violence Prevention Plan Revision Process



Revised City and County of San Francisco's
Violence Prevention Plan

Phase I: Complete

SVRI is in the implementation process.

Phase II: Complete

The Youth Violence Prevention Initiative: Local Action Plan is in the implementation process.

Phase III: In progress.

The citywide Violence Prevention Plan will be updated.

Vision: To create a sustainable, violence-free environment for all San Franciscans.



Questions and Answers

Thank You For Your Time!

Intensive Supervision & Clinical Services (ISCS)* SF Violence Prevention Initiative 2011-12

1. What are ISCS Services?

ISCS is part of San Francisco's Violence Prevention Initiative (VPI) funded by DPH, DCYF, and JPD. It is specifically designed to help youth at risk or those already involved with the juvenile justice system, their families and communities. The main VPI goals are:

- a. Preventing recidivism
- b. Promoting healthy development and functioning in youth
- c. Increasing public safety

In 2011-2012, five agencies will be funded to provide the following service options:

- Option 1: Intensive community supervision and clinical services as needed or
- Option 2: Clinical services only

2. Who do we serve?

Services are available to youth under 18 at risk for or already involved with probation. Youth have a moderate to high level of criminogenic risks and behavioral health needs. For these youth, studies have shown that this combination of supervision and clinical services is more effective in preventing recidivism than supervision alone.

3. Who is eligible to receive these services?

Intensive Supervision+Clinical Services: Youth already involved with probation. Must be post-adjudicated and services are ordered by probation and/or the court. Youth must have moderate to high level criminogenic risks as determined by the YASI and behavioral health needs as determined by the CANS.

Clinical Services Only: Youth at risk or already involved with probation. Can be at any point in the system (e.g. pre- or post-adjudicated). Youth must have moderate to high level behavioral health needs.

4. What is the expected duration of services?

a. Intensive Supervision + Clinical Services: 3-6 months After 60 days, providers and probation officers will discuss client progress and whether an additional 120 days of services are needed).

b. Clinical Services only: 12-18 months

5. Level of Care?

ISCS is an <u>intensive</u> community-based outpatient behavioral health service, which is a tier two level service within the system of care. Initially, when youth enter ISCS or CS alone, they should receive a minimum of 3 face-to-face clinical contacts per week, which may be decreased as progress is demonstrated on treatment plan goals. In addition, ISCS clients receive daily supervision as described in the next section.

6. What are the core practices?

a. Interventions must address both criminogenic and behavioral health risks.

b. Supervision and clinical intervention are not at odds but are viewed as necessary and complimentary components of this intervention much the way that effective limit-setting, nurturing and positive attention are essential elements of good parenting.

. Probation and behavioral health staff work together with the youth and family as a unified and

consistent team.

1. When differences arise among team members around plan goals and interventions they are addressed openly and respectfully.

e. Continuous feedback among team members (including youth and family) regarding progress

7. Types of services provided?

For all ISCS clients, the following services will be provided:

a. Standardized assessment with the YASI (Youth Assessment and Screening. Instrument) and the CANS (Child Adolescent Needs and Strengths) Assessment

b. Systematic and collaborative planning and team-based decision making.

c. Ongoing feedback loop and progress reports

d. Clinical services (initially, face-to-face 3x/week) that link and engage youth in education, work and community activities to enhance hope, positive identity and build skills and strengths.

e. When needed as determined by CANS, more intensive, and specialized clinical interventions using EBPs that offer tools and strategies to youth and the important adults in their lives to improve their functioning and reduce their needs in preparation for a healthy and productive adult life.

f. Trauma-focused CBT is available for those who meet criteria

g. Psychiatric services (e.g., consultation, evaluation, or medication).

For clients receiving IS, the following will also be provided:

a. Curfew checks (6 days per week),

b. School checks (a minimum of 1 day per week)

8. System Coordination Expected?

Youth involved with probation are very likely to be involved with other child serving agencies. ISCS providers are expected to work very closely with their clients' probation officers and at a minimum will meet with probation staff and provide progress reports 1x per month. More frequent contact is often needed and encouraged. Probation officers will inform ISCS staff when court progress reports are needed and these reports must be submitted at least 4 business days prior to hearings. While presenting a cohesive report in court is best, at times, differences will arise between the probation officer and case manager and should be worked out prior to court hearings. In preparation for treatment completion, ISCS staff will submit a final report detailing progress and any additional recommendations for additional services or treatment.

For youth with truancy issues, providers are expected to work closely with SFUSD, TARC, NPS and other educational programs (e.g., GED programs) as needed. Clients currently involved with the foster care system will have DHSA case workers with whom ISCS providers must coordinate. In addition within CBHS, multiple providers may be involved and coordination and collaboration are of the utmost importance to insure adherence to the treatment plan, and that services are appropriate and effective.

9. What is the required staffing?

Given the intensive nature of these services, for every 200k of funding, programs are expected to have at a minimum 2.5-3 FTE clinical/case management staff

- a. 1 FTE licensed or license-eligible health care professional (Ph.D., LICSW, or MFT)
- b. 1.5-2 FTE case managers

For example, staffing for a program with 1 FTE clinician and 1.5 case managers could look like this:

- 1 LMFT who provides supervision, therapy as needed, and case management to 5 clients
- 1 license-eligible social worker who provides case management to 10 clients
- .5 paraprofessional who provides case management to 5 clients

10. What is the required service capacity (number of slots)?

At this staffing level, it is expected that programs provide these services to 20 clients at any one time or 10 clients per 1 FTE clinician/case manager. At least half of these slots must be reserved for the ISCS. Ongoing reports on client census are required.

11. What outcomes are expected as a result of these services?

Indicators	Decrease	Increase
Behavioral Needs	Conduct problems, impulsivity, oppositional, substance use, depression, anxiety, impulsivity	Anger control
Risks	Self-harm, danger towards others, legal problems	Recreational, vocational, community activities, judgment, school attendance, school engagement, positive peer network
Youth Strengths	Negative peer or parental influences	Talents/interests, optimism, family & community support
Caregiver Strengths	Substance use, criminal behavior	Mental health, supervision, safety, residential stability

Youth Commission City Hall ~ Room 345 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4532



(415) 554-6446 (415) 554-6140 FAX www.sfgov.org/youth_commission

YOUTH COMMISSION

MEMORANDUM

TO:

Honorable Members, Public Safety Committee, Board of Supervisors

CC:

Honorable Members, Board of Supervisors

Angela Calvillo, Clerk of the Board

Maria Su. Director, Department of Children, Youth and Their Families

William P. Siffermann, Chief, Juvenile Probation Department

FROM:

Youth Commission Youth Justice Committee

Commissioner Rene Ontiveros, Chair Commissioner Angel Carrion, Vice Chair Commissioner Javonte Holloway, Member

DATE:

Thursday, March 1, 2012

RE:

Legislation referred from the Board of Supervisors file no. 120143 [Approval of

the Youth Violence Prevention Initiative: Local Action Plan 2012 Update]

Last Friday, February 24, 2012, the Youth Commission was referred, under section 4.124 of the Charter, Board of Supervisors file no. 120143 [Approval of the Youth Violence Prevention Initiative: Local Action Plan 2012 Update].

In the intervening days, the full Youth Commission has not met. Thus, we cannot provide the Public Safety Committee and the full Board with official "comment and recommendation" on this item.

Nonetheless, we want the Board to know that as a member of the Juvenile Justice Coordinating Council, the Youth Commission Youth Justice Committee took part in the unanimous approval of the 2012 Local Action Plan on July 28, 2011. This Local Action Plan is the result of laudable and important collaboration between the Juvenile Probation Department, the Department of Children, Youth and Their Families and the offices of the District Attorney and Public Defender, as well as the many other partners of the Juvenile Justice Coordinating Council.

The Youth Commission Youth Justice Committee is hopeful that the funding strategies and the framework contained in the Local Action Plan—from its Theory of Change and Circle of Care model and beyond—will have a powerful impact on the lives of our most vulnerable young people.