

**ARROWHEAD REGIONAL CORRECTIONS**

**ARROWHEAD JUVENILE CENTER**

**2014 INTERIM TREATMENT**

**PROGRAM OUTCOME REPORT**

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September 2014

## **INTRODUCTION:**

A full Arrowhead Juvenile Center (AJC) Recidivism Report will be completed in 2015 or 2016. This report is a condensed version with selected elements of the full report. The last full outcome report was the "Arrowhead Juvenile Center Treatment Analysis Report" in 2011, which reported on juveniles discharged from AJC treatment programs in 2007.

## **DATA COLLECTION PROCESS/RECIDIVISM DEFINED:**

### Data Sources:

- JAIMS (Juvenile/Adult Information Management System) for resident information
- CSTS (Court Services Tracking System) for recidivism information
- Cognitive Skills Pre- and Post-Test Surveys
- Resident Satisfaction Surveys
- Parent/Guardian Satisfaction Surveys

### Sample:

Recidivism Sample: Eighty juveniles admitted to the following Arrowhead Juvenile Center Treatment programs in 2012:

- Hillside Female Program
- Kenwood Male Program
- Lakeside Sex Offender Treatment Program
- It does not include youth who were assigned to the following services in 2012:
  - Short-term Female Program
  - Short-term Consequence/Kitchen Program
  - Residents on furlough
  - Detention Unit

Cognitive Skills Program Sample: 33 juveniles who completed the pre- and post-test after completing the Cognitive Skills curriculum in 2014

Resident Satisfaction Survey Sample: 65 juveniles who filled out the "Client Satisfaction Survey" before their discharge in 2014

Parent/Guardian Satisfaction Survey: 13 parents or guardians who filled out the "Parent Satisfaction Survey" before their child was discharged in 2014

### Recidivism Definition:

Recidivism, for the purpose of this report, is defined as conviction for a new felony, gross misdemeanor or misdemeanor offense within one year of discharge from Arrowhead Juvenile Center. Petty misdemeanor offenses were not included.

Note: the report only includes *convictions*, not arrests, because a person could be arrested, but not convicted/adjudicated of an offense. No data on “violation of probation” rates were collected for this report.

Recidivism Comparison Data:

The recidivism results of this interim report were compared to the “AJC Treatment Analysis Report” completed in 2011. That report included recidivism rates for juveniles discharged in 2007, 2006 and 2005. This report only includes recidivism results; it does not include resident demographics, risk/need assessment levels, length of stay or any program-specific data.

**RECIDIVISM RESULTS:**

**Overall, 50% of the AJC treatment residents were not convicted/adjudicated of a new offense within one year of discharge.** Forty of the 80 youth in the treatment programs were convicted/adjudicated of a new offense within one year of discharge.

Residents discharged from the Kenwood Male Offenders Program continue to have the highest recidivism rate, followed by Hillside Female Offender Program residents. The Lakeside Sex Offender Program continues to have the lowest recidivism rate.

RECIDIVISM BY TREATMENT PROGRAM:

Treatment Program	Total participants	Number convicted/ adjudicated of a new offense	Percent convicted/ adjudicated of a new offense	Compared to Past Recidivism Reports		
				2007	2006	2005
Hillside (Female Offenders) Program	16	7	44%	48%	57%	47%
Kenwood (Male Offenders Program)	56	32	57%	66%	58%	39%
Lakeside Sex Offender Treatment Program	8	1	12.5%	6%	11%	6%
Total	80	40	50%	50%	52%	45%

RECIDIVISM BY OFFENSE LEVEL:

Of the 40 residents who were convicted of a new offense, slightly more committed a misdemeanor offense than a felony-level offense.

Offense Level	Number	Percentage
Misdemeanor	18	45%
Gross Misdemeanor	5	12.5%
Felony	17	42.5%

RECIDIVISM BY OFFENSE:

The most common offenses were theft, obstruction with force and assault.

OFFENSE	NUMBER	PERCENTAGE
Theft	6	15%
Obstruction with Force	4	10%
Assault	4	10%
Aggravated Robbery	3	7.5%
Burglary	3	7.5%
Disorderly Conduct	3	7.5%
Shoplifting	3	7.5%
Theft of Motor Vehicle	3	7.5%
Consumption/Curfew	2	5%
DWI/Driving after Revocation	2	5%
Escape from Custody	2	5%
Criminal Sexual Conduct	1	2.5%
Criminal Damage to Property	1	2.5%
Fleeing a Police Officer	1	2.5%
False Name to Police Officer	1	2.5%
Forgery	1	2.5%
TOTAL	40	100%

**COGNITIVE SKILLS PROGRAMMING RESULTS:**

83% of the participants who completed cognitive skills programming in the first half of 2014 showed a similar or improved test score after completing the Cognitive Skills group.

Areas with the biggest score gains were social skills and feedback skills.

Participants also answered open-ended questions regarding aspects of the program that they liked the best, the least and suggestions for improving the program. Most common responses for each question included:

1. What did you like best?

- Learning new social skills
- Learning new problem solving skills
- Learning new ways of thinking – especially thinking instead of reacting
- Role-plays

2. What didn't you like?

- The homework
- Group was too long
- Program is repetitive
- No videos

3. How could the program be improved?

- More realistic, up-to-date situations – especially better/more interesting materials with better topics
- Giving residents a choice whether or not to do homework
- Shorter groups
- More interaction
- Less repetition

## **RESIDENT SATISFACTION SURVEY RESULTS**

Sixty-five youth filled out a 13 question “Client Satisfaction Survey” shortly before their discharge. The average scores were all in the “strongly agree” to “agree” scale.

Clients answered the questions based on a scale of 1 to 5, specifically:

- |                   |                      |
|-------------------|----------------------|
| 1: Strongly agree | 4. Disagree          |
| 2: Agree          | 5. Strongly Disagree |
| 3: No opinion     |                      |

The average score for each question is listed below (strongly agree/agree responses are in red font):

1. My basic care needs were met: **1.8**
2. I felt safe: **1.7**
3. I felt listened to: 2.4
4. Staff was helpful, supportive and understood my problems: 2.2

5. My sexual identity was respected: 1.7
6. I understood what was expected of me: 1.8
7. Disciplinary actions were fair and consistent: 2.5
8. I received medical and dental care when needed: 2.1
9. I received mental health care when needed: 2.1
10. The teachers helped me with my educational goals: 2.2
11. I learned new ideas in groups that will help me manage my life better: 2.0
12. I enjoyed the recreational activities: 2.0
13. Community people who came to AJC met my religious, cultural and treatment needs: 2.3

Overall, residents rated their stay as “Good” (2.4 on a scale of 1=very good, 2=good, 3=fair and 4=poor).

Residents also answered open-ended questions regarding aspects of their stay that they liked the best, the least and suggestions for improving the program. Most common responses for each question included:

1. What was most helpful?
  - Staff
  - T4C groups
  - Cultural activities
  - Community people/organizations
  - Chemical Dependency Treatment
  - Recreation
2. What didn't you like at AJC?
  - Food (breakfast was mentioned most often)
  - Some of the staff
  - Amenities (room, bed, showers)
  - Being locked up/confined to a locked facility/lockdown
  - Bedtimes and rules
  - Peers
3. Comments or Suggestions for Improvements:
  - Improve the food (especially breakfast)
  - Improve amenities (more natural light, better beds, pillows, little cubby holes that youth could use in front of their doors)
  - Less lockdown
  - Opportunities to earn money so they could use vending machines
  - Staff behavior, including:
    - Knowing rules and enforcing them equally
    - Respecting privacy
    - Handing out EBT's in private

- Following through
- Equal treatment for both sexes, all races

## **PARENT SATISFACTION SURVEY RESULTS:**

Thirteen parents or guardians filled out a 28 question “Parent Satisfaction Survey” shortly before their child’s discharge. The average scores were all in the “strongly agree” to “agree” scale.

Parents/guardians answered the questions based on a scale of 1 to 5, specifically:

- |                   |                      |
|-------------------|----------------------|
| 1: Strongly agree | 4. Disagree          |
| 2: Agree          | 5. Strongly Disagree |
| 3: No opinion     |                      |

The average score for each question is listed below (strongly agree to agree responses are in red font) :

1. My child’s basic care needs were met: **1.6**
2. My child’s treatment plan was accurate and helpful: 2.4
3. I was involved in decision-making about my child: 2.3
4. I felt my child was safe: **1.7**
5. I felt my child was listened to: 2.5
6. Staff was helpful, supportive and respectful: 2.2
7. My child understood was expected: **1.7**
8. The relationship my child had with staff was helpful: 2.2
9. Staff were easy to reach: 2.2
10. I was regularly informed of my child’s progress: 2.5
11. I was informed of visiting hours, phone calls and other family rules: **1.8**
12. Disciplinary measures were fair and consistent: 2.2
13. Teachers helped my child with educational goals: 2.0
14. My child received medical and dental care: 2.3
15. My child received mental health care: 2.5
16. My child learned new ideas to help manage life: 2.3
17. My child enjoyed recreational activities: 2.2
18. Community people met my child’s religious, cultural and treatment needs: 2.6
19. My child is ready to return to the community: **1.8**

The survey also asked about parent involvement during their child’s stay. Just over half said they were involved, either with regular visits and/or contact with staff. Those who weren’t involved said there was no plan in place/they were ignored, they were a more distant relative, they never asked or their child was only in the 60/40 program. Only one parent/guardian participated in the AJC/Human Development Center Parent Group, s/he rated it as “very poor”.

Overall, parents/guardians rated AJC services for families as good/fair (2.5 on a scale of 1=very good, 2=good, 3=fair and 4=poor).

They rate their child's stay as good (2.3 on a scale of 1=very good, 2=good, 3=fair and 4=poor).

Parents/guardians also answered open-ended questions regarding (1) ways AJC could help their child succeed, (2) what was most helpful at AJC (3) what they didn't like about AJC and (4) comments or suggestions for improving the program. The most common responses for each question included:

1. How can AJC help you help your child to succeed?

- Continue with the program to help kids succeed in a positive manner
- Follow through on parent's requests and probation orders
- Have a discharge plan

2. What was most helpful at AJC?

- Helpful staff who answered questions, were supportive in meetings and visits, and communicated clearly
- Visiting hours
- Staff support for their child (including giving the child an opportunity to find a job)

3. What didn't you like about AJC?

- Certain staff
- The long drive from Virginia
- Not enough family counseling
- Restrictions on visitors

4. Comments or suggestions?

- Disappointment there wasn't one-on-one therapy for the offender and more family interaction
- Need staff who care about kids, not just checking off list of requirements

## **REFERRING AGENCY SATISFACTION SURVEY:**

In 2015, ARC's Research Analyst will work with MN DOC Juvenile Facilities staff to revise the Referring Agency Satisfaction Survey.