Judges Express Opinions on Child Protective and Juvenile Justice Systems

In August 1998, Tennessee juvenile court judges were surveyed about Child Protective Service and juvenile justice reform proposals. The judges had concerns about the services Tennessee’s dependent and neglected children were receiving. For more information about the survey process, see Page 5.

Child Protective Teams

Each county is required by law to have a Child Protective Team (CPT) made up of representatives of the DCS, the district attorney general’s office, a juvenile court officer, and a law enforcement officer. It may also include a mental health professional. The teams conduct child protective investigations of reported child sexual abuse and also support and provide appropriate services to sexually abused children. The team determines the level of risk for the child and the services, including medical evaluations, psychological evaluations and short-term psychological treatment, and casework and coordination.

Two-thirds of respondents expressing an opinion said the CPT in their courts was doing a good (50 percent) or very good (16 percent) job functioning.

Sixty-two percent of those expressing an opinion said that DCS was doing a good or very good job of coordinating the teams.

More than 75 percent of those expressing an opinion said the CPT was doing a good or very good job of providing for the investigation of child sexual abuse and also doing a good or very good job of providing for comprehensive services for sexually abused children by referring them to DCS or the district attorney.

However, fewer (52 percent) felt efforts were successful in preserving the family life of the parents and children, to the maximum extent possible, by enhancing the parental capacity for adequate child care.

NOTE

The deinstitutionalization of status offender chart in the May 1999 newsletter was printed with errors in the Shelby County and Rutherford County numbers. A corrected copy is included on Page 7.
Recommendations for Improvements (see chart on Page 1). A dual-track system, recommended by 59 percent of respondents with an opinion, would have DCS and law enforcement jointly investigating serious cases and DCS assessing cases with less serious, more social service needs. Other responses included “provide the child with a guardian ad litem for legal representation,” “improve attendance by other agencies,” “improvements at DCS would bring about improvements at CPT,” and “need more caseworkers.”

Foster Care Review Boards

Juvenile Court judges may appoint five or more members to the Foster Care Review Board in each county. The boards must have a doctor, a lawyer, a staff member of a social service agency, a staff member of a mental health agency, a young adult (18 to 25 years old), and a parent of a minor child.

Nearly four-fifths of the respondents stating an opinion (79 percent) said the Foster Care Review Board was valuable or very valuable.

While approximately three-fourths of respondents rated DCS assessments good or very good (76 percent for custodial assessments and 72 percent for non-custodial assessments), only 53 percent gave a positive rating to permanency plans and 15 percent rated them poor.

Permanency plans are the written plans for each child in DCS custody. They set out requirements for family reunification or for other outcomes for the child. This is validated by TCCY’s 1998 C-PORT evaluation, which found that the majority of Plans of Care (treatment plans) or Permanency Plans in the randomly selected cases studied were inadequate.

<table>
<thead>
<tr>
<th>Types of Placements Needed for DCS</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Reported as the percent of all replying to this question who selected each category)</td>
</tr>
<tr>
<td>Residential Treatment 79%</td>
</tr>
<tr>
<td>Substance Abuse Treatment 77%</td>
</tr>
<tr>
<td>Wilderness Programs 74%</td>
</tr>
<tr>
<td>Dual Diagnosis Placement 59%</td>
</tr>
<tr>
<td>Foster Homes 56%</td>
</tr>
<tr>
<td>Sexual Offender Treatment 56%</td>
</tr>
<tr>
<td>Training Schools 52%</td>
</tr>
<tr>
<td>Group Homes 50%</td>
</tr>
<tr>
<td>Adoptive Homes 42%</td>
</tr>
<tr>
<td>Other responses included respite care, secure placements, boot camps, acute psychiatric care.</td>
</tr>
</tbody>
</table>

DCS and Children in Custody

Although 60 percent of respondents with an opinion said children were usually assigned to appropriate placements, 37.7 percent said they seldom were.

Sixty-nine percent of respondents with an opinion said children were being held in temporary placements, such as detention, diagnostic or emergency shelters, or temporary holding resources, for extended periods prior to placement. An overwhelming majority of respondents with an opinion said a lack of available placements usually (67 percent) or always (18 percent) is the reason that prevented DCS from placing children in the most appropriate placements. The TCCY 1998 C-PORT results indicated a large majority of children (89 percent) were in appropriate placements at the time of the review. However, a number of children experienced excessive stays in temporary placements before arriving at an appropriate placement.
Appropriate Treatment

One respondent (1.7 percent) said children in state custody always received appropriate care, but only 45 percent said children usually received appropriate care. More than half (53 percent) said children seldom receive appropriate care. No respondent chose “never” as a response.

Communication

When asked about the quality of information received from DCS, 43 percent rated it good; 11 percent, very good; and 14 percent, poor.

Internal DCS Coordination. Thirty percent of respondents stating an opinion said internal DCS coordination was poor, an additional 39 percent called it fair. Only 7 percent gave it a very good rating, and 24 percent good.

Services

Family Reunification. Sixty percent rated these DCS services as fair (44 percent) or poor (16 percent). The rest rated them good or very good.

Forty-five percent of respondents said DCS did a fair job of helping families get the services needed to prevent children from entering state custody. Thirteen percent thought DCS did a very good job, and 10 percent felt it did a poor job. The remainder (32 percent) gave DCS a good rating in this area.

A majority of respondents (55 percent) said children often had to enter state custody in order to get access to services, especially mental health services. One respondent said this was always necessary, but 14 percent said it never happened. Another respondent said that custody was always required if the child is severely emotionally disturbed and the parents lack insurance to pay for treatment.

Juvenile and Family Crisis Intervention Teams. Prior to committing an unruly child to custody, the DCS Crisis Intervention program must certify that no less drastic solution is possible. These teams are on 24-hour call to respond to juvenile-family crises. One-fourth of the respondents said the Crisis Intervention Teams were doing a poor job of preventing unruly children from going into state custody, 30 percent said they were doing a fair job. Only 12 percent of respondents with an opinion said the teams were doing a very good job. One called them a “joke,” but another said they were steadily improving. “Crisis intervention turned out to be much less than was promised to get TCA 37-1-168 changed,” one respondent said.

The majority of those making comments said DCS workers had too many cases. Many said that over work and low pay drove dedicated workers out of the field or to higher paying jobs with private agencies. One person said the DCS employees should be fired and complained of the former DHS employees, but others said former DYD employees did not work well with dependent/neglected children.

Adoption and Safe Families Act. Only 11 percent of the respondents feared implementation of this law would overburden courts. Twelve percent thought it would have no impact, the rest felt it would have positive effects, including speeding the court processes.

Supreme Court Rule 13. More than half of the

Continued on Page 4.
respondents (56 percent) said they used this rule to provide legal counsel for parents often or always, and only 6 percent said they never did.

Legal Representation in Juvenile Court

District attorneys rarely appear in court in cases regarding dependent/neglect and unruly children, according to respondents, 47 percent of whom said DAs never attended the former, and 41 percent, saying they never attended the latter.

Public defenders appear often (46 percent) or always (24 percent) in delinquency cases, according to respondents. Sixty-one percent said that children seldom are represented by private attorneys, and 66 percent said parents rarely have private counsel.

Juvenile Justice Reform Commission

The Juvenile Justice Reform Commission was formed by the governor to recommend changes in Tennessee’s juvenile justice laws. Subcommittees have made recommendations to the full commission, which has scheduled three meetings this summer, June through August, to consider these recommendations.

Goals of Juvenile Court. The highest number of respondents considered rehabilitation to be the top goal of juvenile justice in Tennessee (76 percent of those making a choice ranked it either No. 1 or No. 2). Public and community safety was ranked second (70 percent ranked it No. 1 or No. 2). A few ranked punishment, crime prevention, and education.

Respondents who indicated a preference in these areas supported prevention programs and other interventions

Proposed Changes in Law.

Three-fourths of the respondents said they did not want changes in the current transfer law. There was strong support for maintaining discretion in juvenile court. Statutory disposition criteria requiring specific dispositions for specific offenses was opposed by 68 percent of respondents even if they would produce more uniform dispositions.

Fifty percent of the respondents said juvenile court jurisdiction should be eliminated for youth ages 16 or older who are charged with murder.

Detention. Though 18 percent of respondents recommended no changes in current detention criteria, others recommended “authority to detain without findings” for youth charged with auto theft (29 percent), burglary (32 percent), sale/possession of drugs for resale (32 percent), and firearms charges (33 percent). Youth charged with these offenses can be

Continued on Page 5.
detrained under current law “with findings” indicating the reason for detention. Approximately one-third of respondents recommended no changes in the current time requirements for detention hearings. Those recommending changes wanted to lengthen the time between custody and detention hearings varying lengths of time for certain classes of delinquent offenses.

**Teen Courts**, which are not being considered by the Juvenile Justice Reform Commission, use volunteer adolescents to handle minor juvenile cases. Teen volunteers learn from their involvement in the community, and teen defendants truly are judged by a jury of their peers. Only 51 percent of respondents said they were familiar with Teen Courts. Seven percent were very interested in having a teen court, and 36 percent said they were somewhat interested in teen courts.

**Balanced and Restorative Justice.** Even fewer (40 percent) were familiar with “Balanced and Restorative Justice.” Restorative justice programs include the victim and the community in the response to crime and work to help offenders understand the harm they have caused, accept responsibility for it, and atone for it. Of those who had an opinion, 43 percent were somewhat interested, and 25 percent were very interested in its implementation.

**Youthful Offender System**

Eight-three percent of those responding to the survey said they would support a Youthful Offender System, a system that bridges between the juvenile justice and adult correctional system to address the special needs of juveniles who commit serious crimes. In a Youthful Offender System, teens who have been convicted as adults on violent offenses or are identified as chronic offenders may have their adult sentences replaced with sentences in the Youth Offender System.

Eighty-eight percent of survey respondents said participants in a YOS should be housed separately from adult offenders. A YOS with dual sentencing was supported by 56 percent of respondents. This would involve a regular adult sentence and a youthful offender sentence that would permit early release with extended probation (5 years) for those who demonstrated rehabilitation, but imposition of the adult sentence for serious violation of program rules or probation violations. Forty-nine percent of the respondents said the YOS should include intensive educational and vocational training, and 43 said it should include substance abuse treatment.

### About This Survey

At the August 1998 annual conference of the Tennessee Council of Juvenile and Family Court Judges, TCCY distributed a comprehensive survey to collect information on juvenile justice funding, minority overrepresentation, the impact of Zero Tolerance laws and implementation on courts, child custody services, and juvenile justice reform issues. This is the second of two reports on the survey.

### Who was Surveyed.

The survey was distributed to the 113 judges presiding over the state’s 98 courts that serve juveniles and to court referees. Sixty-nine judges and seven referees responded to the survey. Eighteen respondents (23 percent) had served in the courts for less than one year, and many had just been elected when the surveys were distributed. Nearly three-fourths (73 percent) of the respondents also served as general sessions judges. Judges also presided over domestic relations (34 percent) and probate courts (30 percent).

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What change do you recommend for determinant sentencing laws in Tennessee?

<table>
<thead>
<tr>
<th>Change</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Changes</td>
<td>24%</td>
</tr>
<tr>
<td>Eliminate determinant sentencing</td>
<td>10%</td>
</tr>
<tr>
<td>Add determinant sentencing for a specified period</td>
<td>42%</td>
</tr>
<tr>
<td>Change upper age for determinant sentencing</td>
<td>23%</td>
</tr>
</tbody>
</table>

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The Advocate • June 1999

Tennessee’s economy is booming. The per capita income increased 25 percent from 1992 to 1996. What does this mean for Tennessee children?

“Unfortunately, this economic prosperity does not benefit all Tennessee children” said Linda O’Neal, executive director of the Tennessee Commission on Children and Youth, which released the report, Kids Count: The State of the Child in Tennessee 1999, and has annually evaluated conditions of Tennessee’s children since 1990.

O’Neal added that in spite of a strong overall economy in Tennessee:
- One in three Tennessee children participates in the free and reduced price lunch program;
- More than one in three receives health services through TennCare;
- More than one in five lives in poverty; and
- More than one in ten lives in extreme poverty.

The state’s wealthy urban counties, which rank No. 2 through No. 5 in per capita income, have the largest populations participating in TennCare, Families First, and the Food Stamp Program. However, the per capita income in 19 counties in Tennessee is less than two-thirds of the state average.

“TennCare has contributed to positive outcomes for children through improvements in prenatal care and reductions in infant mortality,” O’Neal reported. “The health status of Tennessee’s children has improved during the nineties, but some of the state’s children have lagged behind.”

Although Tennessee trails the nation on many measures of child well-being, it is making progress. Between 1990 and 1997, the percent of births in Tennessee with adequate prenatal care increased from 67.7 percent to 74.3 percent, and the infant mortality rate declined from 8.9 percent in 1994 to 8.5 percent in 1997.

In spite of overall improvements in infant mortality, the rate for African-American babies was two-and-a-half times greater than the rate for white children.

During this decade the state has increased access to health care for children through the TennCare program, but changes in the program could jeopardize the state’s gains and the lives of Tennessee’s infants and children.

Approximately 37.5 percent of all Tennessee’s children are enrolled in TennCare. If TennCare is at risk, these 507,726 children are placed at risk. “Children make up nearly half of the TennCare enrollment,” O’Neal said, “however, now for the first time, TennCare is funded at the level recommended by an actuarial report.” Efforts are essential to stabilize the program, she added.

The Tennessee Commission on Children and Youth is the Tennessee partner of the KIDS COUNT program, which is funded by the Annie E. Casey Foundation, the nation’s largest philanthropy devoted exclusively to disadvantaged children. For more information about Kids Count or the Tennessee Commission on Children and Youth, see the agency’s Web site (www.state.tn.us/tccy).

For more information, contact Linda O’Neal, executive director or Pam Brown, KIDS COUNT director at (615) 741-2633 or a TCCY regional coordinator listed on Page 7.
KIDS COUNT Major Findings

Health

- As of April 1, 1998, 507,726 children under the age of 18 – 37.5 percent of Tennessee children and nearly half of the entire enrollment - were enrolled in TennCare.
- 23.5 percent of Tennessee’s entire population, nearly one in four, was enrolled in TennCare as of September 1998.
- Between the years of 1995 and 1997, Tennessee’s child death rate declined to 29.3 per 100,000, still worse than the national average of 26 per 100,000 in 1996.
- In 1997 male teens were one-and-a-half times more likely to die from injuries than female teens.
- More than half of the total 296 deaths to teens ages 15-19 were due to motor vehicle accidents.
- The infant mortality rate for African-American babies (16.3 per 1,000) was two-and-a-half times greater than the rate for white babies (6.4 per 1,000).
- 4,267 births in the state were to teen mothers between the ages of 15 and 17.
- 8.8 percent of Tennessee’s babies had low birth weights.
- Since 1995, there has been a 14.9 percent decrease in sexually transmitted diseases in teens.

1997-98 DSO Violations

<table>
<thead>
<tr>
<th>County</th>
<th>DSO Violations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Violations</td>
</tr>
<tr>
<td>Bradley County</td>
<td>4</td>
</tr>
<tr>
<td>Davidson County</td>
<td>9</td>
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<tr>
<td>Hamilton County</td>
<td>2</td>
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<tr>
<td>Knox County</td>
<td>185</td>
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<td>Madison County</td>
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<td>Putnam County</td>
<td>5</td>
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<tr>
<td>Warren County</td>
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<td>Jackson County</td>
<td>4</td>
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<td>DeKalb County</td>
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<tr>
<td>Bledsoe County</td>
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<tr>
<td>Rhea County</td>
<td>17</td>
</tr>
<tr>
<td>Overton County</td>
<td>1</td>
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<tr>
<td>Johnson City (Washington)</td>
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</tr>
<tr>
<td>Carter County</td>
<td>3</td>
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<tr>
<td>Johnson County</td>
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<tr>
<td>Robertson County</td>
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<tr>
<td>Rutherford County</td>
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<tr>
<td>Maury County</td>
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<td>Wilson County</td>
<td>1</td>
</tr>
<tr>
<td>Scott County</td>
<td>1</td>
</tr>
<tr>
<td>Shelby County</td>
<td>121</td>
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<tr>
<td>Sumner County</td>
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</tr>
<tr>
<td>Williamson County</td>
<td>19</td>
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<tr>
<td>Blount County</td>
<td>25</td>
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<tr>
<td>Dickson County</td>
<td>13</td>
</tr>
<tr>
<td>Loudon County</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>484</td>
</tr>
</tbody>
</table>

*Number of total related to Department of Children’s Services custody or placement issues.
**Held in Scott County Juvenile Detention Unit

Correction

The chart included in the May 1999 newsletter was in error. The correct information is in the chart below.

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Meetings and Events

Council Activities

Northeast
Sept. 24, Juvenile Justice Conference, “Planning for the Unimaginable,” tba

East Tennessee
Sept. 1, Council Meeting, tba.

South Central
Oct. 1, Council Meeting, tba

Southwest
August, Council Meeting. “July 1, 2001 What will be the status of Tennessee’s children and the services for them?”

Memphis/Shelby
July 29, Council Meeting, tba

Children’s Program Outcome Review Team (C-PORT)
July 12-16, Mid-Cumberland Region, Exit Conference: July 23, 10 a.m.
Aug. 9-13, East Tennessee Region. Exit Conference: Aug. 20, 10:30 a.m.
Aug. 30-Sept. 3, Memphis/Shelby County Region. Exit Conference: Sept. 10, 10 a.m. Contact: (615) 532-1588.

Special Events


July 20-23, Juvenile Justice Reform Commission. Legislative Plaza, Nashville. Contact: (615) 741-2687 to confirm times and agenda.


July 31-Aug 2, American School Health Association Conference. Sheraton Music City, Nashville. Contact: (615) 532-6260.

Aug. 1-4, TN Council of Juvenile and Family Court Judges/TN Juvenile Court Services Association 16th Joint Conference on Juvenile Justice. Hyatt Regency Hotel, Knoxville. Contact: (615) 741-3980


September 1-3, CWLA National Center for Consultation and Professional Development Leadership Retreat. Omni Ambassador East, Chicago, IL. Contact: (202) 942-0289.


Sept. 14-17, SEARCH Institute Asset-Building Communities, Radison Hotel Airport, Atlanta, FAX 612-376-7553 for more information.