



ILLINOIS

JUVENILE JUSTICE COMMISSION

To:

Anne M. Burke, Chief Justice, Illinois Supreme Court
Marcia Meis, Director, Administrative Office of the Illinois Courts
Dan Hunt, Assistant Director, Administrative Office of the Illinois Courts, Probation Services Division

From:

Rick Velasquez, Chairperson
Illinois Juvenile Justice Commission

Date:

March 27, 2020

Re: Protecting the Health and Well-Being of Justice-System-Involved Children and Youth

With the spread of the COVID-19 pandemic, Illinois' judicial branch leaders will play a key role in protecting the health of young people in detention facilities as well as those on probation or pretrial supervision caseloads. Now is the time to act to keep these youth safe. Illinois communities have closed schools, canceled gatherings of all sizes and restricted operations of non-essential businesses; youth in the justice system should not be left behind in public health efforts.

We are not health experts or epidemiologists. However, as advocates and practitioners committed to the well-being of young people, families and caregivers in contact with justice systems across the state, we echo the statements by many of our national and statewide partner organizations when we recommend the following steps, which are consistent with guidance from medical professionals.

Stop new admissions to juvenile detention, correctional, and placement facilities. Unless youth pose an immediate and substantial risk to public safety, alternatives to out-of-home placements, including placement at home with terms and conditions, should be the default response. To reduce admissions, courts and probation departments should:

- Suspend the use of detention as a response to technical violations of the conditions of probation.
- If a probation revocation process is necessary or has already been initiated, delay these hearings (and possible detention admissions) until after the public health crisis has abated, unless the youth presents a demonstrable risk to public safety.

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- Consider early termination of probation terms, especially for young people who have followed conditions to this point, to prevent subjecting them to technical revocation processes and potential detention sanctions as their conditions change in light of this public health crisis.

Release as many young people from secure and congregate care settings as possible as quickly as possible. This includes taking advantage of pre-adjudication and post-adjudication release processes and policies to release youth unless they present a substantial public safety risk. Children under the age of 14 should be prioritized for release, as should youth who have pre-existing conditions that may make them particularly vulnerable to COVID-19 symptoms and youth who are exhibiting COVID-19 symptoms themselves. These youth should not be released to other congregate care settings where the virus can spread; the default should be a presumption that the youth will return to a family member or guardian's home. Agency officials should take steps to ensure that youth have a place to live, have a plan to meet their basic needs, have a plan to receive medical care, and have immediate access to Medicaid, if eligible.

For youth who are in secure detention or placement or another out-of-home setting, ensure that youth are not deprived of legally and developmentally necessary supports and services. For the small number of youth who must be in an out-of-home congregate care setting, ensure that youth receive written and verbal communications on COVID-19, prompt access to medical care, continued access to education and special education services, continued access to legal counsel (through in-person visitation or teleconferencing), continued access to family members, caregivers and supportive individuals (through in-person visitation or teleconferencing), and access to unlimited and free phone calls to family members and supportive individuals.

To protect the health and well-being of all youth in detention or congregate care, detention staff and all Illinois communities, implement immediate steps to prevent or slow the spread of disease, including:

- Screen everyone entering secure facilities for COVID-19 symptoms, including staff, volunteers, contractors, attorneys and visitors.
- Conduct frequent health checks of detained youth and all staff.
- Develop medical treatment plans for response to positive screens or diagnoses among youth and staff.

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- Screen youth prior to release, plan for testing when necessary and develop plans to release youth testing positive to a setting with appropriate medical care.
- Communicate to youth the plans for their care and non-punitive responses to health care needs, to avoid creating fear of isolation or stigma, which may discourage self-reporting of symptoms.
- Ensure adequate staffing levels throughout the crisis.
- Ensure access to soap and working sinks and hand sanitizers in facilities.
- Increase the frequency of laundry service for clothing and bedding.
- Limit unnecessary congregation of youth and staff.
- Increase and maintain vigilant “deep cleaning” of the facility.
- Balance the need to practice social distancing within the facility with enriching activity for detained youth, including educational and recreational programming.
- Avoid indiscriminate isolation of youth within facilities.
- Ensure that youth can communicate often with families; eliminate any fees for phone calls and make electronic communications devices (laptops, for example) available when possible.
- Ensure that youth have access to counseling and supportive staff interactions.
- Reduce or eliminate restrictions on access to reading materials.

For youth on probation or some form of community supervision, suspend requirements that are at odds with public health recommendations, and stop the use of incarceration for technical violations. For youth supervised in the community, officials should suspend regular meetings with probation officers, individuals, programs, and groups. Any necessary contact should take place by phone or videoconference. Additionally, officials should allow youth to travel to access medical care, stay isolated if necessary or ordered by public health officials, and take care of themselves and loved ones.

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Finally, officials should ensure that youth are not incarcerated or placed out of home for technical violations of probation during this time period. Additionally, courts and probation departments should:

- Consider early termination of probation terms.
- If a probation revocation process is necessary or has already been initiated, delay these hearings (and possible detention admissions) until after the public health crisis has abated, unless the youth presents a demonstrable risk to public safety.
- Encourage youth to participate in therapeutic interactions (counseling sessions, etc.) through the use of technology.
- Suspend the imposition of technical violations related to school attendance or participation.
- Avoid requiring youth to engage in activities that would require travel on public transportation.
- Avoid unnecessary use of electronic monitoring and movement restrictions for youth who may need to leave home to allow vulnerable family members or caregivers to avoid exposure (to obtain groceries, medications for family members, etc.).
- Develop screening processes for everyone entering probation offices and develop plans for testing and medical responses when necessary.
- Communicate with families and caregivers to ensure they know changes in expectations and procedures for youth and can support young people during this time of crisis; ensure that supportive adults know who to call for more information or assistance.

We strongly support efforts by the Illinois Supreme Court and the Administrative Office of the Illinois Courts to guide and support local justice system leaders and stakeholders in taking all possible steps to protect the health and well-being of young people and families – and all the justice system professionals who serve them – in the coming days and weeks. Thank you for your leadership in this difficult time.

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