

AZSOMB Juvenile Guidelines and Standards Subcommittee Meeting-20260611_202950UTC-Meeting Recording

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Okay. Welcome, everyone. This is our monthly meeting for the Juvenile Subcommittee of the Arizona Sex Offender Management Board. My name is Scott Naegele. I'm the chair of this committee. I think the 1st order of business is to do a quick roll call to make sure we have on the record who all is present and accounted for.

Today is June 11th, 2026, and the time is 1:30 PM. Chairman Naegele is here.

Mr. Barney.

Was going to be joining us virtually, but I don't see him there. Doctor Gray is excused. Mister Galarneau.

Present.

Miss Opheim is running just a few minutes late. She'll be here shortly.

Doctor Rivera.

Present.

and Judge Young.

 **Young, Anna** 1:21

Present.

Hello out there.

Chairman, you have four members present, which is a quorum.

The first item on our agenda is to give one of our two new subcommittee members a chance to introduce themselves to everyone else, and we'll roll from there.

Renee.

My name is Renee Rivera. I work at Psychological Consulting Services and Consulting Services. Since 2015, I'm the clinical director there. Previous to that, I worked at Devereux. I have experience with the juvenile length.

both in therapy and working with probation and such.

Here's doing that, too, and...

We share that Devereaux experience in common. I was there many, many, many moons ago, back when it was in Scottsdale. I don't know if that program is still in there.

RTC program.

Yeah, I started there before I went to.

Thank you.

I do

Have to talk about some of those fun times.

The next item on the agenda is for us to give the folks from the Department of Juvenile Corrections an opportunity to tell us about their programming. So, Levi, if I can pass the wand to you.

Yeah, yeah, we have a PowerPoint for you.

Dr. Levi Cragun. I am one of the psychologists at the Department of Juvenile Corrections, Adobe Mountain School. I'm the psychologist that oversees our youth's sexually maladaptive behavior program. So we house all of the youth that have been adjudicated with some sort of sexual offending.

or if the courts, for whatever reason, order them to participate in treatment, we house them all on the same unit, unit Journey. I have here with me Ms. Gafsi. She is our PSA, our psych associate that is assigned to that unit Journey.

as well as Ms. Jackson. She is our doctoral student from NAU that has been working on that unit for the last year as well. So they'll be doing portions of the presentation.

I just want to say first that they both do an excellent job with the youth. They are both relatively new to this sub area in the field. And so it's been a little bit of a

learning journey for them, but they've done really well. They work really well with the youth. They have great rapport with these youth. They do just a really great job. So I just want to say that first. So Ms. Jackson's going to start.

off with just some basic information about Adobe Mountain School, and then we'll transition more into our unit specifically.

Hello, everyone. So at Adobe Mountain, the only juvenile, we're the only juvenile correctional facility in the state. And the juveniles who enter Adobe, they have to have a felony adjudication. At the end there, it says deep end of juvenile justice system. That's a quote from the director sergeant.

So we are the last stop for youth. After they enter Adobe, if they get any other sorts of referrals, they will be entering adult corrections.

This next slide right here, the dark colors represent the youth at Adobe, and the light colors represent the youth on parole. So as of currently, we have a total of 155 youth, 141 males, and 14 females. So just focusing on the youth at Adobe,

The majority of the youth have two to three adjudications. Oh, sorry, the next slide. Sorry about that. So just focusing on the youth at Adobe, majority of the youth have two to three adjudications. So you could see there the dark color again is the youth currently incarcerated and the light colors represents the youth on parole.

Can I ask a quick question? Of everyone, I guess. Of those 141 juvenile males that are currently there, do you know how many of them were sentenced to Department of Juvenile Corrections directly versus how many ended up not succeeding on juvenile probation and then got Shifted.

I don't know off the top of my head.

But I could probably find that out.

That'd be great. Just...

Yeah, I could probably find that out. I just don't know if I...

And I will say a lot of the youth that I work with, a lot of them have violated parole, so they've come back. And we have a slide for that as well.

So just to be clear, I'm saying how many of them were previously on juvenile probation in the counties and then didn't succeed for whatever reason?

There's a fair amount for sure. I think just off the top of my head, I think right now in our unit, there's maybe four or so of them that that's the case. Usually with our youth on journey unit, it's also associated with treatment discharges unsuccessfully. So they, you know, that the violation will go hand in hand with an unsuccessful discharge. So there's quite a few of them in that situation on our unit for the whole facility. I'm not, I'm not sure, but I could probably find that out.

Thank you.

So on this one right here, looking at the youth on Adobe, that's a dark color again, and the youth that are on parole is a light color. So as you can see, the majority of the youth have 13 or more referrals. That's A lot. And then over the 40 youth, Okay, it is a lot. I'm sorry, I'm nervous right now.

You're doing great.

But this just shows that majority of the youth who come in, again, this is their last stop. So they're coming in with a pretty, you know, long list of criminal activity behaviors.

Again, this could be, this is not as current. Again, we're facing a lot more youth now, especially on unit journey. So we have a lot of incoming youth. So these numbers might not reflect as current numbers.

Can I ask another question? The definition of referrals.

Is that both technical violations and reasons why they were adjudicated in the 1st place?

Yes.

I have a question. How do you guys, how do you count recidivism? Is it coming back to you guys?

We're going to get to that. Yeah, we'll get there.

Yeah. I'm late. I'm sorry. I'm not asking any questions.

People ask 2. Okay. I'll just ask what those were later.

Yes, OK. That's Miss Gafsi. So we're going to transition.

So speaking of, I'm Aida Gafsi. I said that a little bit earlier. I think I've met some of you guys. But I'll be taken over. So as far as recidivism, excuse me, recidivism rates, this pertains to representation of both adults and youth. So over here we have new offenses and technical violations.

just new offenses in general, and then sexual offenses. So those are all reasons to why a youth might return to us or an adult may return to the Arizona Department of Corrections. This is just a timeframe as far as their time in the community before these things may occur. As far as new offenses and technical violations, some examples could include

perhaps maybe violating curfew, right? That could be something maybe not complete in mandated treatment that they're supposed to complete. Maybe not staying in touch with their parole officer, maybe going missing or showing up to court, not showing up. As far as new offenses, I would say that's more of like, then being in the community and then committing an offense that's not related to sexual nature. So the caveat to this graph not displaying sexual offenses is pretty much what we've been made aware of is there has been few youth who do come back on new sexual charges. If anything, it's more so a technical violation related to a previous sexual offense. So that could include maybe they're not supposed to have access to a smartphone, yet they were found with one. It could also mean maybe they're not supposed to be in a relationship, yet they were found with a girlfriend. So just something to be or to keep in mind. Otherwise, statistically, from what I've learned, about 13% of youth were found to re-offend sexually, I believe.

Non-sexually.

Non-sexually, I'm sorry.

And then, which is relatively low compared to the general recidivism rate, which is about 50 to 60 percent.

Can I ask a couple questions?

Sure.

The time period that you're talking about is the time period that they're under your jurisdiction, correct?

From their release, whether they're on parole and onward, yes.

Or aged out. Yeah.

Okay. So it's not long-term recidivism rates.

It's... This is, yeah, you'll see under there the...the number of months.

So like 12 months, 24 months, 36 months. And then as far as new offenses, I believe that's specifically for... Those numbers are post-release from the institution or from, yeah, parole at all.

From either. So if they turned 18 and they're now out of our jurisdiction from the institution, or if they are...

put on parole, once they're put on parole.

Separate question. You made mention of adults. Are you talking about the extended jurisdiction kids?

We were talking about when you said that.

Both.

So once that includes if say we have a 17 year old, he doesn't get in trouble with the law for five years or I guess in this case, maybe 36 months, and now he's an adult and he, say, picked up new adult charges, we are still counting that. But we only count or can keep track of the individuals that remain in Arizona. So this is, yeah, the youth and adults in the state of Arizona.

If they leave state. No longer keep track of them.

Can you tell us what the mechanism by which you're tracking them is in Arizona?

Yeah, these databases, they they use the courts database and then the DOC.

And then our own, obviously.

Okay, so as Dr. Cragun mentioned earlier, our SMB housing unit is called Journey. So those kids who have been court ordered to complete SMB treatment will be housed on unit Journey. So this is as far as like going back to January 2023.

Right now, currently, we have about 17 youth on our unit. Generally, I would say on average, we usually see about 14 on unit journey. I would say that's relatively low compared to some of the other units in the facility. Extended jurisdiction, I know you mentioned that a little bit earlier.

Out of the youth that we do have or since as back as 2023, I would say about 34%

are extended jurisdiction. So what that means is instead of aging up at that standard age of 18, the court is allowing them an extra year to complete treatment, maybe receive some rehabilitation services, or even complete some educational, excuse me, goals instead of throwing them at the adult system.

So roughly 1/3 of them.

Yes.

Different question.

How many of those, I know this may be a question you got to get back to me on too, how many of the extended jurisdiction cases are kids that were sent directly to Department of Juvenile Corrections versus were on probation initially and did not succeed?

I don't know. That's a good question.

I mean, that's something that we can look.

Just gonna write it down.

Yeah, I don't know. I can't even.

No, and I appreciate that. The reason I'm asking is, is knowing those, knowing that information may help us in terms of deciding what we are and aren't doing with some of those kids, where if more of them are juvenile court kids, then directly sent there.

that we're failing on some level at the juvenile court level for whatever reason that they're ending up having their probation violated. And then they go,

I don't know if I, I'm so sorry. I don't know if I mentioned that earlier, but with the 13% compared to the 50 to 60, that's the youth that have completed the SMB program. So that made a difference is them going through the program, I think obviously contributed to less of them, you know, being likely to.

But that's after our program not leading into it. So.

Scott, what's your question exactly? My question is. jurisdiction first before going here? Well, that's my question. How many of those 34% got sent to? directly to

They get probation chance and they get extended jurisdiction chance, but if they if they can't succeed, then I mean, yeah, I don't know anybody's but they have to be

they have they have to be sentenced initially to extended jurisdiction. That's the way they have to be sentenced. They can't move from probation standard probation as defined by the age of 18 to extended jurisdiction. They have to be sentenced initially. Judge Young, if you're still out there, help me on this. Am I right?

YA Young, Anna 16:12

Yeah. Yeah. So, well, we don't sentence kids. Well, they go to disposition. And so if they're adjudicated, so at any time prior to adjudication, the county attorney can file a notice of intent to retain jurisdiction until 19. But those are for kids who are over 17, and that's on new charges only.
that's not on a petition to revoke.

Right. So that's the initial disposition then.

YA Young, Anna 16:39

Yeah.

Okay. Yeah, that's it.

YA Young, Anna 16:41

Yeah. So if you if you've had a kid who's on a sex offender probation conditions like at 16, those kids are not going to be extended jurisdiction kids. It's going to be the kids who pick up the charges after they're 17. And then those kids are eligible for extended jurisdiction until 19, if that if that helps clarify it.

In that and that gets decided though at the moment of adjudication.

YA Young, Anna 17:05

Yes, it has the notice of intent to retain jurisdiction has to be filed by the county attorney prior to the adjudication.

Thank you. Thank you for that.

I will just add, some of our youth, that they're there for a sexual offense, they might not have been placed on an extended jurisdiction for that sexual offense. So often it's, you know, if they have like a gun charge or drug charge or something else, as well, that could be the reason why they're on extended jurisdiction. A lot of it's not solely the sex offense.

But then these kids, the ones that are in your program, if that's the case, they were placed on extended jurisdiction for those other reasons. Yes. Something. about the process up to that point has revealed a need for this kind of intervention. Is that, am I getting that right? If they're in your, if they're in your journey program?

But sometimes, I mean, sometimes we've had a few, not, it's not common, but it does happen where they're in our facility.

they pick up a new charge, maybe mostly it's like a staff assault or something against staff, and then they'll receive an extended jurisdiction for that instead of facing adult charges. So it might not be a failure in the system leading up to us. It might be their continued behavior while in the system. Yeah, something occurring. Got it. It's more rare that that's the case, but

That does happen.

Thanks.

And then I think I left on.

YA Young, Anna 18:43

If I could just pipe. Can I pipe up for a second? There's a monthly email that we all receive. I was just looking through my email, but I deleted it already. It's just the facts. It's the monthly snapshot that gets sent out. That has a lot of the information, I think, that Mr. Naegele has been asking about as far as the kids who are in Adobe, whether how many charges they had and how many

YA Young, Anna 19:08

whether they came in on like a petition to revoke. It's got really good information about the population on a monthly basis for ADJC. And all the judges, we get that every month.

Okay.

And so since January of 2023, I think I left off on the total discharged. So that pertains to both youth that have aged out and then also youth that have successfully completed parole. So we've seen about 42 of those. I believe it's a little bit more, but 42.

Since we are the only juvenile correctional facility in the state of Arizona, just some background here. We get kids from all over the state from different counties. For the most part, we have 56.5% coming from Maricopa, 11.3% from Pinal, 8.1% from Pima, and then 4.8% from Cochise County. And then a sprinkle of other youth that come from. Smaller counties.

All right, and then just to give you guys an idea of some treatment protocols here at Adobe Mountain School, and this goes for all the youth in our facility. They go through what we call a phase system before we're able to recommend for their release back to the community. And that consists of five different phases. And I'll go into it more on the next slide.

But each of those phases have their own expectations that they have to meet before they're able to promote.

So for our unit journey youth, in addition to the sexual offending treatment that they have to complete, there's also some non-sexual offense specific treatment that they're also required to complete. It really just all depends on their intake process, what records we have to indicate what might benefit them the most as far as like the treatment groups that we have listed here. But that could all look like criminogenic treatment that they have to participate in, dialectical behavioral treatment, aggression replacement training, and seven challenges of substance use disorder treatment.

I'll go into it some more in the next slide as well.

So a little bit more on the phase system. So like I had mentioned earlier, it's a total of five phases before they can be recommended for release back to the community. Phase one and four are those four listed up here. So the first one is the acknowledgement phase. So essentially they're acknowledging why they're there. They're committing offenses, understanding the severity of their situation, application phase is the third one, and then demonstration of obviously positive

changes that they've already started to make while under our custody. And then I would say give or take, each of those phases take at least a minimum of six weeks before they're able to promote to the next phase.

Each of those youth that we have in our facility are assigned in what we call a multidisciplinary team. So we make that decision as a team of whether or not we feel like a youth is ready to promote to the next phase. And obviously, as PSAs, we're part of that decision because we're supposed to monitor their treatment progress.

So the three expectations that they essentially have to meet within those phases to be eligible for promotion are passing education. So there's like grades that they have to obviously get. They already have their high school diploma or GED that fulfills that requirement in itself.

for the remainder of their time with us. Behaviorally, there's expectations for each phase. As you can tell over here, obviously, as far as like the violations that they receive, there's a limit to that, and the expectations increase as the phases move up. And then treatment progress is very important. So depending on their consistency and engaging in treatment, being open and honest, and meeting the expectations, engaging in an SMB, et cetera, will determine whether or not they're ready.

And then phase five is essentially the last one. So the difference here is it's only three weeks, and then a JCRB date is set. And that's Juvenile Correctional Review Board. So what happens here is during those three weeks, they can ask for assistance from either us

or their caseworker on creating like a JCRB script that they read in front of the board on that date. And during that time, it's really nice to be a part of very rewarding, but they're able to invite who they want to be a part of that process. So that includes like maybe approved family members,

their PSA, their MDT team, especially, maybe people that they've met along their way that have contributed to their experience. And then too, something important to note is a victim, a registered victim can also attend. And that's an opportunity for them to provide their own input of whether they or not they feel like the youth is ready to go back to the community.

So that's an opportunity for everyone to kind of share their feedback. And then ultimately a decision is made that day of whether or not the youth will be released back to the community. And then I want to say it's like phase four, that they are administered in ASIAs and what happens there by their parole officer

it'll determine their risk level in the community. So depending on how they score, it's a minimum of, I believe, three months to up to like nine months, again, depending on how they score as far as how long they'll be on parole when they're in the community.

Can I ask real quick question?

Sure.

Is there any training or any type with the families that they're returning back to?

Training how?

Like, do you provide any treatment, training for the family?

Family therapy?

We do family therapy. Yeah, we'll do family therapy occasionally. Each month when the youth, they have a staffing with their MDT, the families are present either virtually or in person.

and will often go over their needs and what they're struggling with, their strengths and so on in those meetings as well. But we do try to convey to their parole officers the expectations as well. And parole has an addended parole restrictions and terms that for these youth specifically. So it has like no cell phone, no internet, et cetera. And so the families are aware of that through both parole and through us throughout the process.

They're aware of restrictions, but not necessarily.

if they're triggered.

Yeah, no, it's definitely more leaning towards the restrictions and like safety kind of pieces. We are, you bring it up and we have a slide on it, but we are trying to move more in that direction of family therapy and bringing in the the families and the caregivers more heavily throughout the process. Right now, they're kind of like we give updates and we get the feedback, you know, at least once a month, sometimes more. But we are, as a facility and especially as our unit, we're moving more in that direction.

My mind was along the same lines just about treatment aftercare.

after care treatment. How do you guys recommend? Do you insist? I mean, when you people leave kids are leaving short to start group homes, it's like we want them in outpatient, regardless of how well they did inpatient.

Yeah, so going off of what Dr. Cragun had mentioned just now is I think starting at phase three, I believe, we'll start working on post-treatment summaries. And we'll share that with the rest of the team. And we'll make our recommendations as far as like, what would benefit the youth once they are released. So maybe it's continued treatment, making sure that that's all set up before they are released. That way they have the services that they need to be able to make the change to maintain. obviously, and then hopefully successfully complete parole.

And we do it, sorry, we do a lot of that with their community care team, so their parole and their transition specialists. Youth transition specialists. So we might not necessarily find a provider. In some cases we do. And we give them that referral directly, but often it's some of those other team members that are finding the specific providers. I mean, I guess that goes along with the family care. I don't know the percentage of kids that go home versus like you guys calling. I've gotten the call before, we have a kid leaving, although it's been quite a few years for I've got the AGC kids saying they need aftercare, they need a place to live, they need, they're not 18 yet or. or they're just a little bit before 18, can they stay at your DCS house till after? But I just didn't know where you guys can send them. I'm sure you don't just open the gate, but you should, but I'm sure it's very hard. I know dealing with my 18 to 22 year olds, it's a hard population to place. And then my other thing was the ASIAs really isn't very, it's not specific to SMB at all, but do you guys do any other kind of End of end of treatment assessments.

Yeah, and I'll talk about it in a bit, but we we we personally on our unit will utilize the JSOAP often, or sometimes like the PROFESOR is another one that we don't we we use every once in a while.

So, ASIAs is used in the criminal setting, it doesn't do much for our SMB kid. We contract with a psychologist in the community and they'll often do an end of treatment psychosexual.

And I will add during the monthly staffings, as we see them communicate with their family and gather new information as they're as they progress in treatment, we're able to gauge what

other necessary recommendations we are giving to the youth. A lot of the times, families will expect that their youth comes back home, but as they progress in treatment, sometimes we gather more information that reveals their safety will be compromised if they were to return back home. Or the safety of a victim or brothers or siblings or family members.

Is it a sound assumption to make that the percentage of those kids that come from whatever counties, those kids are going back to those counties? Or do we?

Not necessarily. A lot of them will stay in Maricopa, just because that's where a lot of the resources are. I was going to say. Sometimes, well, and in some extreme cases, maybe mom and dad have moved out of state or were out of state to begin with and while they committed their offense here and were adjudicated.

Well, they might even just leave the state and on an interstate compact, but most of the time they'll probably, we try to send them back to the home county. We try to send them home with mom and dad if when it's appropriate. You know, that's our kind of our number one.

idyllic goal is getting them back home with some sort of parent or family member. But if that's not appropriate or not possible, they're probably going to stay in Maricopa.

Thanks.

Sure.

Just to touch more on the general criminogenic treatments that they receive while we have them. So obviously all of the youth are told during their intake that they will be engaged in an individual session. So that's usually the PSAs. And we'll meet with the youth more likely than not, because they do have a lot of treatment work, right? at least once a week. Sometimes it's biweekly, just really depends, but that's usually where we try to stay within. And then like I said, it's usually determined in intake as far as like their history, what they will all participate in or what's all required of them while they're here when it comes to the treatment groups.

All youth that come to Adobe Mountain School are required to complete DBT. So that's one of our continuous groups. So it starts as soon as they come in and then up until they leave. That's usually two hours a week. And then they're all required again to like participate. And if they don't, that could end up being a behavioral violation that they receive.

for not programming. Aggression replacement training. So depending on like a

history of aggression or violence, and even if they're engaging in a lot of fights while we have them, we could also make that recommendation for them to participate in what we call ART. And that's in total 10 weeks.

Three hours a week, they'll be told to participate in. And then the last one that we have listed here is 7 challenges. So that's our substance use treatment group. So if that youth has an extensive history of substance use in their background, we'll make that recommendation for them to complete that. It's more of like a continuous processing group.

They're given like journals, 7 journals, and they'll complete them. They'll be given feedback. Sometimes they have that opportunity to share and connect with the other youth that are also part of the group. And then I'm going to pass it on to Dr. Cragun.

Yeah, so for the SMB specific treatment,

We utilize the stages of accomplishment workbooks. Some of you might be familiar with those. Those are published by Safer Society, very similar to like Pathways or any of those others. So there's four workbooks. The first workbook is more of an introduction.

getting them familiar with the expectations of treatment, introducing some basic treatment concepts.

Second workbook is more introspective. You're going to be more introduced, even more into the CBT kind of framework. They start to understand their cognitions and behaviors and emotions and how they interplay with each other.

Third workbook is more focused on a behavioral. The books use behavioral cycle. It's essentially a fun cycle.

And then workbook 4 is heavily focused on empathy and victims, clarification, moving forward, success planning.

On top of that,

Can I ask a quick question? Those are Phil Rich's workbooks, right?

I believe so, yeah.

On top of that, we have them do some additional exercises as well. They'll complete at the very beginning an autobiography type of assignment. We're going to go into like their personal history, their offense and sex history, as well as any sort of treatment.

And then they'll do a healthy sexual fantasy. This is primarily, especially for the youth that continue to demonstrate some sort of deviant arousal and struggle controlling it. So we'll utilize a healthy fantasy for them, as well as it helps demonstrate healthy sexual knowledge.

As you can imagine, a lot of the youth, they've learned about sex and relationships from all the wrong places. And so we want to make sure they actually have a proper understanding. All the youth will complete a victim awareness workbook.

For all the other youth in the facility, they'll also do that workbook, but only when they have a registered victim. For our youth, they all do it. It doesn't matter if they have a registered victim or not. So that is a separate workbook that's really heavily focused on empathy building.

And then towards the end of the treatment, they obviously do a relapse prevention plan. And then their JCRB script is.

It's not our assignment per se, but it's, we really help them try to focus on clarifying with victims, empathy, demonstrating empathy, demonstrating accountability. It's a really good opportunity for them to voice all of those things. And they'll read it like Ms. Gafsi mentioned, they'll read it at the JCRB hearing, where often their parents are there, their families, they're potentially a victim representative or a victim themselves are there. So it can be a really important and powerful piece of their treatment.

You mentioned that sometimes registered victims come to that meeting.

Yeah.

How often does that happen?

Not often. Yeah, it's pretty rare. Sometimes they'll send a representative. That's a little more often. But even that, it's rare. The state will have, they have victim.

representative staff, those are usually there if they have the registered victim.

Someone will be from the victim advocacy will be there, but like the victim themselves or a family member.

For your to the offense, often are they identifying additional victims that are not registered?

What do you think?

I would say the youth that I've worked with, few have disclosed more victims.

Maybe like 1/3 of the time? Yeah,

I wouldn't say more than that. Yeah.

Yeah, probably. Usually as they progress within their treatment workbooks, they start adapting more to the interventions and they start to disclose a lot more.

And you guys do not facilitate, obviously, if you're kind of just kind of getting with the family therapy, I'm assuming that the clarification process doesn't necessarily happen with you guys either. No, they'll do like a victim clarification type of a letter and towards the end of the workbooks. It's just read in the group, not necessarily sent to a victim.

It's no.

No, no, no. And there's been some cases where we've made referrals out for reunification. But the problem is by the time they're kind of ready for that stage or that step in the process, they're leaving us. And so we don't want to start it and then like have them like change it. And it's just kind of a...

awkward time frame. So once they get there, then they're usually leaving our facility. So we'll usually make the referrals out.

This is kind of what the timeline looks like. We try to keep them pretty in line with the corresponding phase, just so they don't get kind of treatment heavy or phase heavy in one way or the other. And, you know, all of a sudden they're a phase four, but they haven't done any of the workbooks. And before.

I'd.

I've been at the facility with the agency for about a year. Before, there wasn't kind of this set timeframe with it. And with the phases, there was really heavy emphasis on behavior and not as much on the treatment.

And as a lot of you know, a lot of these kids, this might be their only involvement with the criminal justice system. This might be their only behavioral issue. And they know how to keep their nose clean for six weeks. And they were just flying through the phases, but then they were getting to the end and they weren't really ready treatment wise. So

by slowing them down a little bit, making sure that the treatment is actually there as well. And it's not just, I'm going to keep quiet for six weeks, do my time and then get out and I'm not have to talk about any of this. We want to make sure it's actually appropriate.

I already brought this up. Do you guys do group therapy as well? Is all that's happening in group or is it happening to individual?

The SMB is mostly individual.

So the more criminogenic other groups, those are happening in groups. We've in the, from my understanding, they've done it in the past. Part of what has made them reluctant to do stuff in a group setting is confidentiality. And there's just been a lot of concerns surrounding that, whether it's youth to other youth or otherwise. So it's, we're. Are they not all housed separately at the moment?

Our SMB youth are, but they'll intermingle every once in a while. Well, luncheon, yeah, school and school, but they don't already know why they're separately housed. They do, but the but the details are sometimes.

And.

worse to know. So they might know that they're on journey, but, you know, if their victim is a minor versus age similar victim, that can, you know, cause more problems for them or the nature of their offense might cause more problems.

Yeah, that's differently, like a picture, yeah, versus like, you know, direct. So, an administrative decision was made to do more primary individual therapy than do group Therapy.

Yeah. That said, and we'll talk about it later, we are moving more into more groups. So it won't be as much of A process-oriented groups, but more psycho-educational in nature. So we are moving in that direction to include more. But as of right now, really the majority of any SMB treatment is going to be in an individual setting.

Maybe.

Often the courts will request treatment summaries. So we'll provide these. They're not set to any specific cadence. It's really just when the youth has a hearing approaching. Often, if the youth is being considered for registration, then the the courts will want some sort of treatment update along the way. We'll usually include their progress in treatment in any of the other treatment groups, the number of violations, and then if relevant, any sexual behavior or comments or anything inappropriate in that way will

Include some details on.

So this might seem a little counterintuitive, but this is our average length of stay for, again, this is unit journey.

For the youth who aged out of our facility, so they've turned 18 or 19 while in our facility, it's just over 40 weeks. For the youth who have earned parole, it's actually a little bit longer, closer to 50 weeks. So, and if you want to go to the next slide, it'll make a little more sense.

The average age of the youth who age out in custody is just under 17 years old. Those who age out on parole, so they haven't met the full parole discharge, but Oh.

They're about 16 and a half. And those who earn an absolute discharge, they do everything right. They are completely off paper while still as in our technically under our jurisdiction. Their average age of intake is 15 and three quarters. So the age at when we get them is a huge factor.

on how much treatment is done, how successful they can be. The younger we tend to get them, apparently it seems like the better the outcome. Now, obviously, there's caveats to that, but we're really fighting against their age.

Absolute discharge just means they successfully discharge. Yeah, they successfully completed parole. As opposed to just aging out. Yeah.

Yeah, and then this graph here, you can see.

just kind of how it breaks down. So of the youth who earned parole, this yellow section, about 58% of them aged out on parole, about 16% earned an absolute discharge, and then about 25% had their parole revoked. And for unit journey since 2023, there hasn't been any youth that have earned parole twice. That does happen occasionally, but not for our youth. Of the youth that have had their parole revoked, about 42%, about 43% have been like sex offense related. So as Ms. Gafsi mentioned earlier, the terms of the parole that were violated were related to their sexual offense terms. So pictures possessed, cell phones possessed, stuff like that. Technical violations. Yeah, so it's... It's kind of like a, it's kind of recidivism-y because they are possessing say like ***** or something, but it's not an actual offense.

Does that make sense? Not conduct that could be criminal. Yeah, yeah, so it, yeah, exactly.

Just some recent trends that we've noticed. So in the last year, we've had three youth from Cochise ordered to register prior to being placed at our facility. So when they're coming in, either as they get ordered to stay with us or beforehand, They've already been ordered to have to register.

Yeah, we were surprised too. This is, yeah, and that happened as a piece of the transfer from probation to correction. Yeah, you, yeah, so.

Fifteen, yeah, 15, 15, and so.

There's clearly some assumptions that are being made, whatever those might be on the part of the judges in that jurisdiction.

All of these were hands-off offense, if that helps...

They were all hands off. Hands off.

Interesting. Even more interesting.

Yeah. Hands off. Two. Well, no. So I have to be. Yeah, two were like a revenge **** type of a case. revenge **** and I think the other one was conspiracy to commit rape.

Yeah. Well, did he get charged for that or was it just images? Yeah, it was just child sex abuse material. So. Yeah, hands off. And then two youth after completing their stay with us have been ordered to register.

and those were both in Maricopa. I've counted today because I was curious, that's two out of 12. So not bad. Yeah, not terrible, but one of our, you know, really huge major focuses for the youth

that are in our state is that they don't have to register. That's a huge goal for us.

When they already have to register, it kind of undermines a lot of our, you know, like that's our care. Pieces of leverage. Yeah, that's our carrot and our stick, right? So it's usually motivation for them to do.

that opportunity for them to earn some sort of, or earn that not have to register.

That's a big motivator. Yeah.

Is this lifetime registration or just up to 25?

Yeah. Yeah.

And then more recently, in the last six months, we've seen more AI involved cases. So one where the youth was producing child sex abuse material through AI, and then another where as part of his offense history, he was using AI chat bots for sexual conversations.

That same youth was actually also in online chat rooms and Roblox. I'm sure some of you are familiar. His Roblox character, he had reported he had raped another Roblox character in this online virtual

setting. So obviously there was no charges associated that with that, but it was part of his sexual history. Those direct referrals to you, both of those? No.

No, well, was. I think one was. One was.

Like I mentioned, some of our future focus and kind of where we're evolving towards, we're going to be tracking more of our registration rates right now. We don't have an official record of that. And we've had to just kind of go back in our own history. So we're going to keep more of an official tracking of that to.

And that will at least for now continue to be Arizona only data.

Yes.

Yeah. I mean, one of the things that I think that, and I don't really know what all the barriers are because obviously I haven't taken this on myself, but we need to figure out how to be able to do broader based.

recidivism stuff, as kids move from one state to another into being adults, for us to really answer some of our own questions about the effectiveness of our programming in Arizona as it relates to these kids no matter where they land.

And our recidivism studies only go 36 months. That's the, they don't.

But if an adult gets caught and if it's on probation for sex crime, it's not going to show up.

Yeah, if it's if it's after the 36 months, we won't know if it's within,

No, no, and that This was part of this, this was part you, you, you probably, I don't know if you were here or online listening to the discussion, we had the juvenile court people here, I probably unintentionally offended people by saying that we don't really know what the recidivism rates are because we don't have any long-term recidivism data to know those answers. Because really what they're talking about is while they're under our jurisdiction, or in your case, elongated a little bit.

Yeah, at least 36, yeah, 36 months.

But that's not, but that's not real recidivism.

Yeah, most of the even the risk measures go past that, right? So, yeah, and and I will say...

our recidivism is probably going to look a little bit different in the sense of they've already recidivated a few times to get to us.

Well, you have a biased sample. Yeah. There isn't any clue about that. So they've already done that a few times. That's why they're here with us. And so if our...

Presumably you would have selected...

A higher risk sample,

Yeah, yeah, if if the systemic decision making has been anchored in some sound, right, hopefully, hopefully, yeah, and as Miss Gafsi mentioned, are the for the journey youth or the youth that participate in the SMB programming.

Their general recidivism is still quite lower than the rest, but...

Again, it's only, we're limited to in-state for 36 months as far as we do. Well, you have that, and I, and kudos to you all for being, to having that, because I'm not sure that that exists in most.

Our continuous improvement research bureau does a really good job at keeping track of that. They're very thorough. Another future focus.

is that family involvement, like we had talked about, or looking at trying, whether it's like a parent kind of group, or maybe we introduce more family therapy. We have to be mindful just ethically and legally of

some of those restraints, but that is a huge focus, like I said, facility-wide, but also really especially for us.

And then, again, I mentioned earlier, we're trying to introduce more SMB related groups. So whether it's psycho education or otherwise trying to have it so they are able to receive treatment in both settings.

I think that's it for us.

Any other final questions? You guys have been great.

Guess not. Okay. Great. Well, thank you so much for having us.

Thank you, guys.

Thank you.

Thank you.

Okay, moving on to the next item on the agenda under old business. The first thing we have is a discussion of framework and format for psychosexual evaluation reports. I guess I just open it up for discussion about this, but Judge Young, I'm particularly interested in what you might have to say about what you're seeing in the psychosexual evaluations that you're getting in Yavapai County, and then perhaps Melanie can help us with what is in them.

in Maricopa County and otherwise. Because part of what we're charged with doing, and I think in fairly short order, is making a presentation to the larger board about what our recommendations are for what should be included in a psychosexual evaluation.

So I just open it up to discussion. Blake, hey, you as well. Nice to see you.

BB

Blake Barney 53:35

Thank you. Yeah, I will participate as much as I feel like is necessary. Judge Young, I'm

also curious to hear what you have to say. So I'm going to hold back and then listen to what you share and then I'll jump in as necessary.

YA Young, Anna 53:55

I actually have one pulled up so I can kind of run through because they tend to be a very standard format, same testing that's done. So procedure used is, you know, they do the clinical interview with the young person, collateral interviews with probation, with parents, they administer the Kaufman Brief Intelligent Test, the 2nd edition, the WRAT 5, which is the Wide Range Test Of Achievement.

Yeah.

YA Young, Anna 54:30

The MACI-II.

The ABEL, Becker and Kaplan Adolescent Cognition Scale, the Adolescent Sexual Interest Card Sort, the PHASE Sexual Attitudes Questionnaire, the Trauma Symptom Checklist for Children, the ABEL Assessment,

YA Young, Anna 54:53

of sexual interest, and that's two. And then the JSOAP, the juvenile sex offender assessment protocol, second edition. Those are the tests that I see in every single psychosexual that I receive. And then the doctors always go through and they give me a list of the documents that they've reviewed.

in anticipation of doing it. And then the clinical interview, they do family history, social history, educational history, vocational history, legal history, substance abuse history, medical history, psychiatric history, sexual history.

Then there's a description of the offense, behavioral observations, and then they go through all the tests administered, the outcomes of those tests.

See.

Then...

And they'll do diagnostic impressions from DSM-5, conclusions and recommendations. And, you know, they're normally 20 plus pages, the report that I get. And so I get a psychosexual on every kid who is adjudicated of a sex offense. I

can't remember the last time I had a kid who wasn't adjudicated of a sex offense where we didn't do a psychosexual, so, so that's the that's the basics of what's included in the reports that we get up here, so.

Questions from anybody about what they heard there?
How many providers do you have in your county, Judge?

YA **Young, Anna** 56:53

Well, we don't have any providers in our county, unfortunately. So all of our kids are seen by providers from Maricopa. And we know it's an AOC contract. And I think maybe there are three or four different providers that I see.

Yeah. I just wondered if any of them were local, but then it's probably the same ones I'm familiar with.

YA **Young, Anna** 57:15

Probably, yeah, because we don't have anybody up here that does them, so yeah.

Is there anything, I mean, the only thing that stands out to me that is in your psychosexual evaluations that I think is not routinely in them here in Maricopa County is they are in fact doing the ABEL assessment in your evaluations. I mean, I think there are a lot of psychosexuals being done in Maricopa County.

YA **Young, Anna** 57:37

Ohh yeah.

I want somebody to tell me I'm wrong that don't have ABEL assessments in them. Am I correct about that? I think it depends on the case.

ABEL is not included in the psychosexual contractual psychosexual pre adjudication psychosexual.

So people request it. It's not in the it's not in the evaluation. So I'm a little baffled by how those decisions are getting made. I and perhaps there's not anybody in the room who can.

Help answer that, but, but...

If that's not routinely in the evaluations that are being done in Maricopa County, I think that that's an oversight. I think that that's potentially problematic, but that's why we're having a meeting to discuss and try to pound out some protocol here. So I mean...

In the absence of polygraph data, which is a, which is obviously a much bigger beast to take on, not having an ABEL in a pre adjudication psychosexual leaves out potentially some really, really important information. And I have people nodding their heads in this room, so.

I mean, I'm...

I'm inclined to to suggest that we make a recommendation as we put this protocol together that pre-adjudication psychosexuals need to have an ABEL assessment or a Look assessment. But we can have a discussion about that too. The problem in my experience with the Look is

is it's only a visual reaction time test and it doesn't have any questionnaires. So you're not gathering any history as a result of administering the Look. It does have, I think, some potential advantages on the VRT side of things in that it's got an expanded set of categories for males and females.

Um, but it doesn't have a questionnaire, so I, I, I put put that out there.

It does not have a completely separate measure, but the methodology used in completing the Look, I think, is easier and more comprehensible for most people to understand.

Blake.

BB

Blake Barney 1:00:13

Yeah, so I was going to just jump in and base it off of what I learned from Idaho and what they do with their juvenile PSEs. And it basically says that the ABEL, Becker Card sort and the ABEL itself are only if it

Seems appropriate and is.

determined necessary by clinical risk from the clinician doing the assessment. So even in Idaho, it's not something that they are doing at all times, you know, with all

of them. They're doing the JSOAP second edition, the ERASER, the aim 2 in every single one of them. And then it's kind of up to the

BB **Blake Barney** 1:00:57

clinician at the time to determine what is the most appropriate. But it specifically states that the ABEL is only when it's determined clinically appropriate. So I'm with you. I agree that we should probably have that in there. But even in Idaho, which we know has taken most of their stuff from Colorado, its not a required assessment in PSE for the Juveniles

Yes.

Yeah, so, so.

BB **Blake Barney** 1:01:25

It is kind of interesting because it does have a lot of benefits as far as, you know, giving us a good insight on, you know, sexual interests, and so...

I'm with you. I think that we could do that, but other states, it appears that they're not doing that either.

YA **Young, Anna** 1:01:37

And if I...

Go ahead, go ahead.

YA **Young, Anna**

If I can, if I can add something, so the ABEL is listed in the contract for psychosexuals for that AOC for the AOC contractors.

So, so you're saying there should already be it, it should already be part of the ongoing matrix for psychosexual evaluations.

Judge, you're talking about like in the specs in the AOC specs, they're saying that the ABEL is included in that evaluation.

YA Young, Anna 1:02:03

That's my understanding.
Yes.

It's not because it is a separate code as well.

YA Young, Anna 1:02:16

What do you mean a separate code?

You mean it's a standalone assessment? A separate SAF. Service authorization, we do not, we have a separate SAF that does not include, it's not included in our psychosexual evaluation SAF.

YA Young, Anna 1:02:21

Okay.

They don't know about the SAF form. I'm just telling you that it's that my understanding is listed in the contract for psychosexuals. I just asked, I just asked the AOC while we were sitting here, so...

So, so.

All right. Yeah. But

Is there no national standards or ATSA guidelines about?

Well, there are ATSA guidelines around this issue. Yes, there are. And I think they recommend with some caveats that the issue of sexual interest be evaluated. But they're not going on record saying absolutely it should. But the struggle I have, Blake, with what I hear you saying, and it sounds like you do too, is how is somebody determining whether, I mean, it's kind of backwards, frankly. How are they determining that there isn't a need to do an ABEL assessment when they really don't know anything about the kid other than what the referring issue is when they

when they get the referral.

They don't do any, there are no polys are being done.

BB **Blake Barney** 1:03:29

I think maybe because of the, right, I think maybe because of the interview itself taking place first, maybe through the interview process, they're able to say this doesn't seem like it's necessary. And so they're leaving it up to the clinician to make that determination.

Yeah.

Yeah.

Yeah, so, so, so what?

BB **Blake Barney** 1:03:50

But I think it should be, I think it should be more of a, this is going to be included unless we determine it shouldn't be. Not, it's not included and we should determine if it should be.

Yeah. I mean, with all due respect, I've been doing this for over 30 years, and I'm not grandiose enough to say that in a preliminary interview with a juvenile client and their family, that I think I got all of the information. I mean, that's just that's just naive. And in the in and so I mean, I, you know, perhaps Blake, part of what you're saying makes sense that that it ought to be included. And if you can garner information that says, that it doesn't need to be included, but we probably need to be thoughtful about defining what that looks like, then it not be included. But I also hear Judge Young saying that's what the specs say in the AOC contract already anyhow, so I don't understand why that isn't happening.

BB **Blake Barney** 1:05:03

It sounds like it's happening for Yavapai County. So would it happened in all the counties, technically?

That's it.

YA Young, Anna 1:05:06

Yeah. And if I'm using, yeah, if I'm using the same contractors, I'm wondering why we're saying it's not happening elsewhere. I mean, do you guys want me to reach out to my colleagues in other counties and ask them if they're getting it?

It, it does.

Well, I think the reason I would say that I think it's not happening, to what extent I don't know, is I've seen evaluations that don't have it in it.

I personally have a psychologist that does psychosexual evaluations. He never does a ABEL. He has to be asked separately because it's a separate code for billing for the ABEL. He does an assessment with the ABEL. I'm not saying he wouldn't want to, but to be quite frank, the cost that the AOC pays for the psychosexual already does not cover, almost does not cover his services. We make absolutely no profit on his psychosexuals. They are very underfunded from the AOC. Again, no offense to anybody from the AOC on things, but the ABEL's a separate whole thing because they charge us 150 bucks to look at the ABEL. So we're not about to stick it in if somebody doesn't ask for it.

I'm not saying it's not necessary. I'm telling you where we're coming from, business, financially, and requesting. Maricopa probation officers never expect it. It's never in it. So maybe you're using a different contractor, but it's a separate code. It's a separate billing for AOC. So if everybody's putting it in, they're being very generous because it's not being paid for.

Out of that contract, out of that out of that out of that code, yeah.

That's just right. I mean, again, I'm not saying I.

YA Young, Anna 1:06:34

Okay, so, so you're, so, so Mel, just like if I can kind of clarify what you're what you're saying, because I don't think I'm understanding. So you're saying the psychologist you use or the psychologist you have on staff who does psychosexuals?

I have a staff. I have Dr. Davis, my psychologist.

YA Young, Anna 1:06:49

Okay.

Okay, all right. And so you're saying when he does his AOC contract with psychosexuals, if he wants to include the ABEL, he has to have a separate billing code together with the psychosexual code. Is that what you're saying?

Correct. Correct. And it really comes down to who's requesting it. If A Maricopa probation officer does not request an ABEL, sometimes we can ask for one, but like you guys are saying, it's kind of backwards. I agree. That's just the way we've kind of been doing it. You know, unless we see a need for the ABEL, not we, unless it's seen as a need, it has not been included for

YA Young, Anna 1:07:03

Okay.

for the time that we've been doing it. We've never done an ABEL just because in the evaluation.

And just to clarify, I think we're having a discussion about the necessity of it being part of the pre-adjudication psychosexual. That, that, that, I mean. these carve outs or whatever we want to call them, where sometimes it's included and sometimes it's not, I think does a disservice to the task at hand. That's my belief. And I know that Mel speaks the truth when she says the contracted fee for a psychosexual is, frankly, hardly covers the time costs and the cost of the testing materials, let alone, you know, anything else. And so I don't, I mean, I would understand if somebody felt that they needed a psychosexual and enable that they request them separately just from a funding standpoint alone.

But that shouldn't be why we're making decisions about what should be in our defined protocol for what a psychosexual is.

And it just goes, it's more of a recommendation to the top, like contracts should include this, should be paid for this and to compensate, you know, testing fees for

the ABEL. But I agree, it's not like we can't recommend that when we say best practice for psychosexuals.

So, sounds like, um...

perhaps some more information needs to be gathered around that piece of this discussion. I mean, I guess the question I would ask everybody to ask themselves as we're sitting here having a discussion about it is, is the protocol that Judge Young outlined for what she routinely gets, does that include everything in it that we would want to have in it?

I would answer the question for myself as saying no.

And I can expound upon that if, if, if, if that's where we want to start this discussion. I think.

The list kind of went quick for me. I have my own list and I was listening to the judge trying to kind of cross off, but, but I don't know. I'm sure you.

So go ahead, Mel. Yeah, no, please.

We do the Shipley, we do the WRAT, we do the PAI, the TSSC.

Just the Adolescent Cognition Scale, we do the SAVRY, the PROFESSOR, the JSOAP. I was trying to look at an actual redacted copy as well. Obviously, we do the clinical stuff, we do, you know, the summary, we do that, we check out the ASIAs, talk to probation or parole, who, you know, we're consulting with anybody.

I already said the Shipley.

Is this for the Shipley or the ABEL? No, none of the abel. Again, we don't put the ABELS in ours. No. None of the ABELS. No. Protective risk observations. We did PROFESOR, Trauma symptom checklist and then just, you know, so yeah, I'm sure we're missing stuff too, but that's kind of what we've been putting in ours.

Wow.

And it wasn't too long ago that the AOC came out and told us what to put in there. But they, I mean, they kind of had some pretty strong recommendations. Yeah. Well, so let me ask this question of the group.

Is there any reason to not?

Include the JSOAP, the eraser, and the professor in.

these psychosexual evaluations. Is there any reason why that shouldn't be done?

Because I would argue that it should be done.

YA Young, Anna 1:11:10

What about compiling a list of what everybody's saying in the different ones around the counties and doing kind of an exhaustive list of all the options?

So that's a great idea. So I would ask everybody.

I guess the point of aggregating that would be would be to send that to the to the to the board staff and and we all have access to it then.

Is that is that is that the way to do it? And I'm seeing the staff say yes. I just want to clarify, though, if you're saying all of the counties, but ultimately they're all using the same four or five AOC contracted people, correct? Or are you talking about outside the AOC? No.

YA Young, Anna 1:11:57

Don't know. I mean, that's why I'm saying I need to reach out to my colleagues and say, hey, what are you guys getting in your psychosexuals?

Yeah, in judge Young, that would be super great if you could do that.

YA Young, Anna 1:12:07

Yeah, yeah, I'm happy to do that, yeah.

Yeah, because yeah, you're right. I mean, you only know who you're using, right? You don't know who else is out there and who the other counties are using. So yeah.

YA Young, Anna 1:12:16

Right.

Yeah.

Okay.

But back to my question, I mean, just for discussion purposes, does anybody think my proposal about all of those being in a psychosexual is for some reason

unnecessary or inappropriate?

What were the three again?

So the JSOAP 2, the eraser, and the professor. The first two, you know, were... the tried and trues for a long time in terms of empirically based risk assessment skills for working with juveniles. The third one came along later. Both the eraser and the professor are Jim Worling's instruments. Jim himself has made a decision to cease using the eraser in lieu of using the professor. I just think that that having the JSOAP and the eraser data, while there's overlap, gives us a slightly broader picture of what might be going on with a kid. And the professor, for me, for my purposes, I view it very much as a treatment plan. The kinds of things that need to be worked on versus the kinds of things that don't need to be worked on. And the more we know, obviously, the more we can be accurate in our assessments. That's a whole other part of this discussion in terms of routinely figuring out a way to assess status in programming and status in treatment and status with respect to risk. risk and all that stuff. But I think in the end it comes back to let's compile a great big list and see what that all includes. Yeah, because what I'm hearing is some of the reason perhaps why the ABEL is not included is because of cost. That's correct. So there are some that are overlapping. You may have to.

And I think we quit using the racer when Jim said to use the professor. We went to trainings and it was like, this is. So I mean, we can't.

He also said, though nobody tends to say this out loud, he said, you can still use it. I'm not telling you not to use it. It has, it has, it has value.

But I'm just telling you for my purposes, this is how I'm proceeding. That's what he said. And I took him at face value. And he and I have talked about my continuing to use it. And he doesn't bemoan that or say that that's inappropriate. I just think much like, though not the same thing,

We have these actuarial risk assessment scales for adults that have crossover in them, but they also have some things in them that are slightly different that collectively they help inform us to a greater extent about what's going on with somebody. That's the reason I'm saying I think there's an argument to be made for using all three of them.

So maybe, yeah, let's just start with the list first and then...

Then, so...

The sooner the list...
can be made available to the staff that assist us with our process, the sooner we can all gain access to it. So I would ask that everybody
is a week too long to, because we're going to have to have a discussion of some kind about this at the larger board meeting, which a couple of us are not going to be present to attend because of a rescheduling issue. And I just want to be prepared. I want that to be prepared to be discussed about.
at the June 22nd large board meeting.
You want the results of querying the 15 counties? I want us to be able to talk about where we're at in the process and to be able to report on, we all now are in possession of the information from all the counties and our next step is to make a decision about, you know,
outlining the structure and categories of the overall risk assessment protocol.
So Judge Young, are you going to collect that from the 15 counties then? Is that what you offered to do, just for clarification?

YA Young, Anna 1:16:30

I'm going to collect it from the 15 presiding juvenile judges. I'm actually composing the email right now. So I get it out quickly. And so I will send that out to all other 14 counties, I should say. And I'm sending what I'm doing is I'm sending them my list of what I always see and I'm asking them to add to it.

Okay.
Right.

YA Young, Anna 1:16:50

and then just to respond directly to me and then I'll compile the information that I get and then I'll send it on to Jenna or whoever I'm directed to send it to and then yeah.

Perfect. And just for everyone's clarification, in order to include it in the background material for the June 22nd full board meeting, we would need all background materials by noon on Tuesday, June 16th. Okay, so. That really only gives us a few

days. I don't know if she'll have responses from all.

14 counties, thank you. Or so just let me know if you want me to include what we have or if you want me to wait until we have all 15.

I think we include what we have, because we're not making a final decision about this at the June 22nd meeting anyhow. So I think we just include what we have. And when we have the next meeting after that, which sounds like it'll be the first week of August.

then we'll have more and we can continue the discussion at that point. Okay, thank you. Yeah.

BB **Blake Barney** 1:17:49

So Scott, in digging a little bit deeper with the Idaho ones, I was just trying to see what the most common additional risk assessment tools. It seems like the MSI2 adolescent is almost always, it says, included.

BB **Blake Barney** 1:18:09

So I think that it's interesting that they have that, but not.

Mhm, I'm support that.

BB **Blake Barney** 1:18:15

Like, that's a almost always, but the Abel is as, you know, as deemed appropriate, so...

Yeah, there's, I mean, there's got to be ghosts in the machine with the respect to what the answers are for that. And the reality is, is the MSIs is self-report history, just like the questionnaire part of the ABEL is. So depends on who's sitting in front of the test at the time and what stage of treatment they're in.

in terms of what we get from that stuff. But that shouldn't limit us saying that we should put it in there because at a minimum, it's a baseline for where we're going from there. So I mean, I support and will advocate for the MSI being a piece of that. If not the MSI, but I'm looking for somebody who knows more about it, who's actually used it.

But I don't know if there's a juvenile version of the MIDSA. I don't, I'm not aware that there is, but...

But yeah, it comprehensively is, as a single measurement, helps us gather a lot of data, much in the same ways that we're trying to gather some other data.

So, let's get, let's get.

BB **Blake Barney** 1:19:26

So, is it is it is it something, Scott, that we need to consider?

you know, the age for assessments, right? Nobody under the age of 13 or...

the gender aspect of it where there's issues with, you know, this one's not really geared for females and so it can't do that or.

those who are not identifying as either male or female. Is that anything that we need to be conscious of when we're coming up with this list? Because a lot of these assessments have those shortcomings. So

For sure.

Yeah, for sure. For sure it is. You know, as we as we as we move forward with defining what a psychosexual is, we need to be clear about the target populations for whatever measurements we include for whatever subgroup of persons we're talking about. The MSI exists for juvenile females and adult females.

The MSI exists for both juvenile and adult males. The ABEL questionnaire, I'm not aware of one. I'm not aware of a juvenile female ABEL questionnaire.

BB **Blake Barney** 1:20:26

Mhm.

But I don't remember, to be perfectly honest.

Being there.

BB **Blake Barney** 1:20:49

I don't believe that there is. I've never administered or seen one if there is.

Yeah, yeah.

Yeah. So yeah, those things do we do need to consider, Blake. The answer to your question is yes. Those need to all be part of the defined framework. When we take whatever a psychosexual is to the board and ask for a vote, those things need to be spelled out.

BB Blake Barney 1:21:18

So the goal is to be as inclusive as possible. We can't include everybody because I don't think any assessments make it possible to do that, but as inclusive as possible.

No, I no, I think we define them for different subpopulations.

I think that's what we do. We don't have one. We define those measurement pieces as it relates to each of those different evaluations for the older males, the younger males, perhaps, and the same with the girls.

BB Blake Barney 1:21:34

Okay.

And yes, there's slim pickings when it comes to the girls.

BB Blake Barney 1:21:59

Yeah, OK.

YA Young, Anna 1:22:01

I don't think I've seen a psychosexual on a girl, and...
at least the last decade. Yeah.

Yeah, exactly. So I don't think it's going to be a huge, huge thing.

All right, so we're going to gather a list. We're going to everybody have it to Major Mitchell by no later than the 16th.

And we're going to go from there.

Anything else about the framework and format of psychosexual evaluations?

before we move to the next item that I'm not entirely sure how we're going to talk

about it without

the individual involved being part of our discussion, other than to make people aware of the fact that it's there. So the next item on the agenda is discussion regarding documentation from juvenile court practices for juveniles with sexually abusive behaviors as submitted by board member Joe Kellroy from the AOC.

All I would say is it's there on the board website for everybody to gain access to and to familiarize themselves with. I don't know beyond that if we need to talk about that much. And frankly, I would hope that everybody on this board is kind of up to speed with what those things say anyhow. But if you haven't familiarized yourself with the documentation that Mr. Kelroy made available to the board and is now on the website, please take some time to do that.

Yes.

Yes, and just for everyone's clarification, those were posted as background material for the juvenile subcommittee meeting on May 14th of 2026. We had to table that discussion because of the presentation. So we didn't repost that as background material for this meeting, but it is there under the page.

Yeah, I knew it was there. I just didn't know what it was. Thank you. Put on the record. Thank you. Thank you.

Okay, so last item on today's agenda is future agenda items. At the top of the list is returning to discussion about the juvenile guiding principles. Wasn't on today's agenda as an agenda item, so therefore we're not really in a position to have that discussion, but we need to have that discussion, and that needs to be on the next meeting's agenda. Those information related to, well, let me back up. At our last large board meeting, the board as a whole approved accepting Colorado's juvenile guidelines as our guidelines at this point in time. So that's already happened. Since that time, as agreed upon in that meeting, a couple people have provided written feedback, and those have been posted on the website as well.

If you haven't seen that feedback, I would ask you to make sure that you familiarize yourself with that feedback. What I did in anticipation of today's meeting, because I didn't know we weren't going to be talking about it today, is I literally went through the proposed changes

That Joe Kelroy submitted regarding the juvenile guiding principles after his calling feedback from, I'm not entirely sure who the whole group was, but I know

that he reached out to people in every county to ask them to provide feedback to him. And the document that he submitted is purportedly inclusive of that feedback that he got back. Okay. So I took Joe's document and I took the Colorado guidelines and I went through them line by line prior to this meeting. What I would say, what I would say is, If anybody else has done anything like that, they can weigh in here. But what I would tell you is I don't see anything substantive having taken place other than what I would consider perhaps some wordsmithing to try to be, to try to acknowledge the fact that juveniles with sexual behavior problems are not the same as adults with sexual behavior problems. So there was a bunch of that kind of changing in wordsmithing going on in the document that Joe provided using the original guidelines as a point of departure. But I didn't see anything that was terribly significant. Though I will say that some of the wordsmithing probably didn't go as far. If we're going to accept the wordsmithing, and I suggest we do because it makes sense to me, others can comment on that, then we need to go back to the document and be included. to be 100% comprehensive about the language we're using because we changed some things and we seem to have left some things the way they were with some of this wordsmithing and that doesn't make sense to me. We need to fix that. Am I, am I making sense with what I'm talking about there?

YA **Young, Anna** 1:27:31

Can weigh in for a second. How that information was gathered is Joe and I sent a joint email. I chair the Committee on Juvenile Courts for the state, and all the presiding juveniles are members of that. So what we did was we sent a joint email to all of the presiding juvenile judges, as well as to all of the directors of juvenile court and juvenile probation chiefs for the whole state.

Yes.

YA **Young, Anna** 1:27:56

state and we asked everybody to take a look at it. And then what we did was we, when we got the feedback, that feedback was synthesized from the different counties that we heard back from. And so that was the generation of that document that you're referencing.

Got it. Thank you for the more comprehensive description of who got it, 'cause 'cause I 'cause I honestly didn't know.

YA Young, Anna 1:28:14

Yeah.

Yeah, it was so every juvenile probation chief around the state and every presiding juvenile judge received it. So.

Okay. So we can feel fairly confident that people around the state who hold important positions as it relates to juveniles have had a chance to weigh in on that.

YA Young, Anna 1:28:34

Yeah, they've had the opportunity. You know, we didn't hear back from every county, frankly. You know, I mean, some counties have a very, very small population and some counties have judges who, you know, do everything in the county. I mean, we have some one judge counties in the state and they just don't have a lot of kids. And so some counties we didn't hear from. We got a lot of really good feedback from the larger county, which was helpful.

Sure.

Yeah.

YA Young, Anna 1:28:56

But yeah, I think everybody would be open to more wordsmithing to really make sure that we are acknowledging the fact that juveniles who sexually offend are totally different than adult sex offenders and they need to be treated differently. And that's why, you know, the language matters so much.

Yeah, agreed.

YA Young, Anna 1:29:16

Thanks.

Okay, so I just ask that everybody, you know, in anticipation of our next juvenile subcommittee meeting take the time to familiarize themselves with the proposed changes that came from what Judge Young just described so that we can seek to have those approved by the larger board as our guidelines and principles moving forward.

Yes.

OK, are there any other issues?

that need to be added as future agenda items for

Our next gathering.

Don't be bashful.

Any additional presentations you're interested?

Yeah, that's a good question. I don't know who else we would need to hear from.

Who else do we need to hear from? I mean, have we heard from?

everybody that we need to at this point.

YA **Young, Anna** 1:30:24

I think it would be good to get some more information from the AOC about things like the contracts and things like that.

Because, I mean, all these kids are having evaluations. They are all juvenile justice or court involved in some way. And so, you know, unless they're kids who are only involved with the Department of Child Safety, then the AOC contract is the one, you know, that's governing things like the psychosexuals. So maybe getting some more information from AOC about that would be helpful.

And.

We'll work on that. You all agree. You know what you bringing up the DCS involved cases triggered me to say out loud that

It's my belief, and I guess I want to hear others, when we're talking about creating a protocol for psychosexuals for youth who present with sexual behavior problems, we're not just talking about the court-involved kids. We're talking about the kids that are DCS kids too, who for whatever reason did or didn't get adjudicated.

I just want to make sure that we're all thinking that way, because what we're proposing, I think, needs to have implications for the youth of Arizona, irrespective of whose jurisdiction it is.

Yes.

YA Young, Anna 1:31:52

Right, and you know the kids who are DCS involved.

It might be good to hear from someone. I'm assuming, I'm trying to think who would be paying for psychosexual evaluations for kids who are only dependent and not delinquent. I don't know if those run through CHP, the comprehensive health plan that all those kids are on. I don't know whether that would be paid through CHP or whether that's paid through.

some kind of other DCS mechanism, I think that might be interesting information to collect from DCS as well.

Yeah. It's not through DCS. Yeah, so I would tell you that I would think few of them will come from DCS payment and the others will come from the Regional Behavioral Health Authority. Yeah. The Title 19 system. All the behavioral health or the TIP.

YA Young, Anna 1:32:33

Right. But all of those, yeah, but all those kids now, they're under a different health plan. They're under the CHP, which is under DCS. And so that's a Mercy Care CHP plan. And so.

Do you know about this? Yeah, if they're DCS, but we do have a lot of access. I just don't want to leave all the other access plans out because we can't seem to contract with them. They do not want our psychosexuals, even though we are begging for psychosexual services. Either they don't pay or they make it very difficult, but there's very few and far between providers that do that.

throughout all the other DCS kids. If they have the chip, if they have the Mercy care, then they can be covered, but it goes to the behavioral health homes. But yeah, but I can't tell you how many referrals we get for a group home, a BHRF that there's no psychosexual done. And then we say we won't even take them without one. We need

an evaluation to make sure they're in the right, and people kind of look at us like, we don't know how to do that.

YA Young, Anna 1:33:10
Mel.

So, there's a lot of education or a lot of...

YA Young, Anna 1:33:29
Right, but well, I think that's apples and oranges though. What I'm talking about is the kids who are involved with the Department of Child Safety, their health care plan is CHP through Mercy Care. And so

YA Young, Anna 1:33:44
We need to know whether or not it's CHP that pays for that or whether DCS has a separate fund that would pay for something like a psychosexual. That's what I'm saying.

So we need to ask that question of somebody from DCS. And we have a person on the board who, if they don't have the answer, they can find the answer to that question. I'm getting you answers to that as well. Yep.

YA Young, Anna 1:33:59
Yeah.
Yeah, because I honestly have no clue how that gets paid if a kid is only a DCS kid without juvenile justice involvement. Yeah.

Yeah.
But this little smaller subgroup of kids that Mel's talking about, we need to figure out how to talk about as well. Because something's happening where they're not all under this one plan, it sounds like.
And she's nodding her head at that. So that's a Maricopa County thing.

YA Young, Anna 1:34:39

No, it's a statewide health plan. And so all kids statewide who are in out-of-home placement.

No. But the kids that aren't DCS, they could be at home, kids could be at home with access, but not DCS. I'd say there's a whole other subset that are under your radar with DCS or probation, and they're out there as well with no services.

YA Young, Anna 1:34:46

Yeah.

Yes, right, yeah.

Right. Yeah, that's the third set of kids. You know, we've got the DCS kids, we've got the juvenile justice kids, and then we've got all other kids. Yeah. Yeah.

Yeah, the mental health kids, the Title Nineteen kids, and those are hard to get evals on, yeah, to even.

YA Young, Anna 1:35:06

Yes.

Right, because there's no court involvement at all on those kids. Yeah.

Yeah.

But we can't forget that that group exists out there, and we, and we need to, and I think we need to be advocates for...

YA Young, Anna 1:35:15

Right, yeah.

Same kids, same service. I mean, we have, yeah, all those things have to be worked out, but what we're talking about should be applied to kids that are presenting with sexual behavior problems, wherever they're coming from. Yeah, okay.

Alright, anything else for today?

Sounds like no.

Oh.

YA Young, Anna 1:35:52

My deadline is, what's my deadline again for getting this information, Jenna?

Thank you for agreeing to do this for us, Judge Young. I really appreciate it. If we want to put it as background material for the full board meeting on the 22nd, we need it by noon on June 16th. So next.

YA Young, Anna 1:36:09

Okay, I'm going to tell everybody to get back to me by June on the 15th then. So, okay. Perfect.

OK.

And you can send it to us as raw as you need to. You can just forward email, whatever is easiest for you. And that'll give us some time to put it together.

YA Young, Anna 1:36:23

Thanks, I appreciate that.

Thank you. Thanks for doing that. Yes. And I apologize for not having the guiding principles on the agenda. It was on there originally. We took it off and then we got the comments, and I was out of the office. So I do apologize for not having it on the agenda today.

Thanks.

All right, unless there's something else that someone wants to throw out there for today, if I could get a motion for adjournment, we will stop for today.

I motion to adjourn the meeting.

Can I get a second?

I second.

We are adjourned.
Thank you.
Thank you.
Thank you for having us.

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