Monthly Report
June 2017

Bruce Rauner
Governor

Heidi Mueller
Director
The Illinois Department of Juvenile Justice has two goals:

- Make Illinois communities safer for all residents.
- Foster better life outcomes for youth in the Department's custody by providing appropriate and effective rehabilitation.

In March 2015, the Department unveiled its comprehensive strategic plan focusing on five core principles:

- Right-Size: Reduce the use of secure custody for low-risk youth
- Rehabilitate: Improve programs to meet the needs of high-risk youth
- Reintegrate: Improve programs to ensure successful reentry
- Respect: Create a safe and respectful environment for youth and staff
- Report: Increase transparency and accountability

This monthly report is part of the Department's commitment to enhance reporting and transparency. This allows the Department to more effectively inform stakeholders and the public about operations and outcomes.
Table 1: FY 2017 Population by Facility

<table>
<thead>
<tr>
<th></th>
<th>07/2016</th>
<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
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The population is measured as the number of youth in a facility on the last day of the month. During the 2016 fiscal year, the Department experienced a 44% decrease in population. This decrease continues the downward trend in populations that has been occurring since 2000. The same decrease was not seen in FY 2017, however, populations have remained relatively stable.

Table 2: FY 2017 Security Staff Headcount by Facility

<table>
<thead>
<tr>
<th></th>
<th>07/2016</th>
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<th>09/2016</th>
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<td>492</td>
<td>487</td>
<td>514</td>
<td>534</td>
<td>521</td>
<td>518</td>
<td>521</td>
<td>553</td>
<td>548</td>
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</table>

The headcount of security staff is obtained by examining the number of security staff on active payroll for each facility. As facilities must be staffed 24 hours a day, 7 days a week, it takes 3 or 4 staff to fill one post, full time. The number of security staff includes security supervisors and interns.

* FY refers to the fiscal year.
Table 3: Percent of Youth on Psychotropic Medication

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<th>FY2017</th>
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<tbody>
<tr>
<td>July</td>
<td>27.34%</td>
<td>42.30%</td>
</tr>
<tr>
<td>August</td>
<td>31.02%</td>
<td>42.80%</td>
</tr>
<tr>
<td>September</td>
<td>31.83%</td>
<td>37.62%</td>
</tr>
<tr>
<td>October</td>
<td>32.12%</td>
<td>39.17%</td>
</tr>
<tr>
<td>November</td>
<td>35.86%</td>
<td>42.90%</td>
</tr>
<tr>
<td>December</td>
<td>37.57%</td>
<td>47.13%</td>
</tr>
<tr>
<td>January</td>
<td>39.25%</td>
<td>42.66%</td>
</tr>
<tr>
<td>February</td>
<td>40.86%</td>
<td>46.79%</td>
</tr>
<tr>
<td>March</td>
<td>36.25%</td>
<td>46.32%</td>
</tr>
<tr>
<td>April</td>
<td>38.43%</td>
<td>48.40%</td>
</tr>
<tr>
<td>May</td>
<td>44.14%</td>
<td>46.87%</td>
</tr>
<tr>
<td>June</td>
<td>42.80%</td>
<td>47.33%</td>
</tr>
</tbody>
</table>

IDJJ Average 36.46% 44.19%

Nationally, the rates of incarcerated youth on psychotropic medication tend to range between 20 and 40%. Additionally, greater numbers of incarcerated females utilize psychotropic medications than males and have higher rates of diagnosis for mental disorders.

Table 4: FY 2017 Rate of Self-Harm Attempts by Severity per 100 Youth

<table>
<thead>
<tr>
<th></th>
<th>Mild Self-Harm Attempts</th>
<th>Moderate Self-Harm Attempts</th>
<th>Severe Self-Harm Attempts</th>
<th>Total Attempts or Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>1.78</td>
<td>0.25</td>
<td>0.00</td>
<td>2.03</td>
</tr>
<tr>
<td>August</td>
<td>4.79</td>
<td>0.50</td>
<td>0.00</td>
<td>5.29</td>
</tr>
<tr>
<td>September</td>
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<td>0.00</td>
<td>1.52</td>
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<tr>
<td>October</td>
<td>1.02</td>
<td>0.26</td>
<td>0.00</td>
<td>1.28</td>
</tr>
<tr>
<td>November</td>
<td>1.51</td>
<td>0.50</td>
<td>0.00</td>
<td>2.01</td>
</tr>
<tr>
<td>December</td>
<td>1.11</td>
<td>0.83</td>
<td>0.00</td>
<td>1.94</td>
</tr>
<tr>
<td>January</td>
<td>1.09</td>
<td>0.27</td>
<td>0.00</td>
<td>1.36</td>
</tr>
<tr>
<td>February</td>
<td>3.14</td>
<td>0.00</td>
<td>0.00</td>
<td>3.14</td>
</tr>
<tr>
<td>March</td>
<td>2.91</td>
<td>0.26</td>
<td>0.00</td>
<td>3.17</td>
</tr>
<tr>
<td>April</td>
<td>2.65</td>
<td>0.00</td>
<td>0.00</td>
<td>2.65</td>
</tr>
<tr>
<td>May</td>
<td>2.33</td>
<td>0.52</td>
<td>0.00</td>
<td>2.85</td>
</tr>
<tr>
<td>June</td>
<td>2.09</td>
<td>0.00</td>
<td>0.00</td>
<td>2.09</td>
</tr>
</tbody>
</table>

IDJJ Average 2.16 0.28 0.00 2.44

Self-harm rates are measured by the total number of incidents and do not reflect the number of youth who have attempted self-harm. A mild attempt is when a youth verbalizes, threatens, or gestures self-injurious behavior. A moderately severe attempt is when a youth attempts self-harm and appears to be motivated by suicidal intent and as such inflicts superficial harm to self that may require minor medical attention. A serious attempt is when a youth self-harms and as such inflicts harm to self that requires medical attention or whose attempt is believed to be potentially lethal and is scheduled for medical observation.

Table 5: FY 2017 Distribution of DSM-5 Diagnoses of Youth in Facilities

<table>
<thead>
<tr>
<th>Youth with No Diagnosis</th>
<th>Youth with One Diagnosis</th>
<th>Youth with Two Diagnoses</th>
<th>Youth with Three Diagnoses</th>
<th>Youth with Four or More Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>2.80%</td>
<td>12.21%</td>
<td>27.23%</td>
<td>26.72%</td>
</tr>
<tr>
<td>August</td>
<td>3.19%</td>
<td>11.30%</td>
<td>28.50%</td>
<td>28.26%</td>
</tr>
<tr>
<td>September</td>
<td>2.95%</td>
<td>10.81%</td>
<td>28.50%</td>
<td>27.52%</td>
</tr>
<tr>
<td>October</td>
<td>2.53%</td>
<td>10.91%</td>
<td>30.71%</td>
<td>27.16%</td>
</tr>
<tr>
<td>November</td>
<td>2.56%</td>
<td>11.79%</td>
<td>27.18%</td>
<td>27.95%</td>
</tr>
<tr>
<td>December</td>
<td>4.04%</td>
<td>11.86%</td>
<td>26.42%</td>
<td>28.84%</td>
</tr>
<tr>
<td>January</td>
<td>4.70%</td>
<td>8.09%</td>
<td>28.46%</td>
<td>31.85%</td>
</tr>
<tr>
<td>February</td>
<td>6.17%</td>
<td>9.51%</td>
<td>24.16%</td>
<td>32.13%</td>
</tr>
<tr>
<td>March</td>
<td>4.33%</td>
<td>7.38%</td>
<td>25.19%</td>
<td>32.82%</td>
</tr>
<tr>
<td>April</td>
<td>5.43%</td>
<td>11.37%</td>
<td>23.77%</td>
<td>32.30%</td>
</tr>
<tr>
<td>May</td>
<td>5.34%</td>
<td>12.21%</td>
<td>22.90%</td>
<td>32.57%</td>
</tr>
<tr>
<td>June</td>
<td>5.25%</td>
<td>13.00%</td>
<td>22.25%</td>
<td>29.75%</td>
</tr>
</tbody>
</table>

IDJJ Average 4.11% 10.87% 26.27% 29.82% 28.92%

The Diagnostic and Statistical Manual of Mental Disorders, 5th Edition, is a commonly used tool in the psychology field to provide standard criteria and descriptions of mental disorders. It contains a variety of mental disorders including depression and bipolar disorder and also includes diagnoses of conduct disorder and substance abuse disorders. Nearly all youth in IDJJ facilities have a minimum of one diagnosis according to DSM-5 definitions. Nationally, research estimates that between 40 and 60% of incarcerated juveniles have a diagnosable mental disorder. These estimates tend to exclude substance abuse and conduct disorders.
Table 6: FY 2017 Number of Substance Abuse Treatment Participants

<table>
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<th>09/2016</th>
<th>10/2016</th>
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<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
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<tr>
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<td>43</td>
<td>48</td>
<td>49</td>
<td>44</td>
<td>46</td>
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<tr>
<td>IYC St. Charles</td>
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<td>16</td>
<td>17</td>
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<td>13</td>
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<td>13</td>
<td>14</td>
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<tr>
<td>IYC Warrenville</td>
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<td>20</td>
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<tr>
<td>IDJJ Total</td>
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Table 7: FY 2017 Primary Substance Abused by Youth in Treatment

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<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
<th>Average</th>
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<tr>
<td>Marijuana</td>
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<td>75.0%</td>
<td>75.0%</td>
<td>72.4%</td>
<td>66.3%</td>
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<td>64.4%</td>
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<td>71.1%</td>
<td>76.9%</td>
<td>80.9%</td>
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<td>9.8%</td>
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<td>12.4%</td>
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<td>7.7%</td>
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<td>9.8%</td>
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<td>5.4%</td>
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<td>5.6%</td>
<td>5.5%</td>
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<td>7.0%</td>
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<td>5.4%</td>
<td>10.3%</td>
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<td>13.1%</td>
<td>15.6%</td>
<td>11.3%</td>
<td>9.9%</td>
<td>6.5%</td>
<td>6.4%</td>
<td>4.8%</td>
<td>9.2%</td>
</tr>
</tbody>
</table>

Each of the IDJJ facilities have an in-house substance abuse treatment program. Treatment at the facilities utilize education and group therapy to help decrease future substance use. The number of treatment participants is the total number of youth enrolled in a substance abuse program during the month of interest. Due to treatment failure, drop out, and rolling acceptance into the programs, the number of youth reported in a program tends to be greater than the actual number of youth enrolled at one time. Primary substance abused is the primary drug of choice for a youth in treatment. Many youth enrolled in treatment are polysubstance users and are treated accordingly.
Table 8: FY 2017 Students Enrolled in School

<table>
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<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
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<td>73</td>
<td>71</td>
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<tr>
<td>IYC Harrisburg</td>
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<td>306</td>
<td>313</td>
<td>301</td>
</tr>
</tbody>
</table>

Table 9: FY 2017 Teachers Employed

<table>
<thead>
<tr>
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<th>07/2016</th>
<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
<th>11/2016</th>
<th>12/2016</th>
<th>01/2017</th>
<th>02/2017</th>
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<tr>
<td>IYC St. Charles</td>
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</tbody>
</table>

Table 10: FY 2017 Percent of Special Education Students

<table>
<thead>
<tr>
<th></th>
<th>07/2016</th>
<th>08/2016</th>
<th>09/2016</th>
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<th>11/2016</th>
<th>12/2016</th>
<th>01/2017</th>
<th>02/2017</th>
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<th>04/2017</th>
<th>05/2017</th>
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</tr>
</thead>
<tbody>
<tr>
<td>IYC Chicago</td>
<td>36.6%</td>
<td>33.3%</td>
<td>36.2%</td>
<td>46.8%</td>
<td>44.1%</td>
<td>49.2%</td>
<td>49.1%</td>
<td>44.3%</td>
<td>30.1%</td>
<td>29.6%</td>
<td>37.0%</td>
<td>36.5%</td>
</tr>
<tr>
<td>IYC Harrisburg</td>
<td>44.1%</td>
<td>51.5%</td>
<td>50.5%</td>
<td>52.4%</td>
<td>51.9%</td>
<td>41.4%</td>
<td>38.0%</td>
<td>55.9%</td>
<td>48.4%</td>
<td>41.1%</td>
<td>45.4%</td>
<td>48.3%</td>
</tr>
<tr>
<td>IYC Pere Marquette</td>
<td>48.3%</td>
<td>31.6%</td>
<td>20.0%</td>
<td>30.0%</td>
<td>38.5%</td>
<td>41.7%</td>
<td>30.8%</td>
<td>33.3%</td>
<td>38.2%</td>
<td>40.0%</td>
<td>31.8%</td>
<td>47.6%</td>
</tr>
<tr>
<td>IYC St. Charles</td>
<td>24.4%</td>
<td>21.1%</td>
<td>22.7%</td>
<td>27.5%</td>
<td>25.8%</td>
<td>17.5%</td>
<td>18.4%</td>
<td>38.5%</td>
<td>35.1%</td>
<td>37.3%</td>
<td>34.0%</td>
<td>32.3%</td>
</tr>
<tr>
<td>IYC Warrenville</td>
<td>29.7%</td>
<td>31.0%</td>
<td>38.7%</td>
<td>45.2%</td>
<td>44.8%</td>
<td>31.0%</td>
<td>37.9%</td>
<td>51.4%</td>
<td>41.2%</td>
<td>59.3%</td>
<td>63.0%</td>
<td>62.1%</td>
</tr>
<tr>
<td>IDJJ Average</td>
<td>35.6%</td>
<td>35.5%</td>
<td>35.8%</td>
<td>40.5%</td>
<td>40.1%</td>
<td>33.9%</td>
<td>34.3%</td>
<td>46.9%</td>
<td>38.9%</td>
<td>38.9%</td>
<td>40.6%</td>
<td>41.9%</td>
</tr>
</tbody>
</table>

Table 11: FY 2017 Overall Diplomas Awarded

<table>
<thead>
<tr>
<th></th>
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<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
<th>11/2016</th>
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<th>02/2017</th>
<th>03/2017</th>
<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>IYC Chicago</td>
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<td>3</td>
<td>5</td>
<td>7</td>
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<td>0</td>
<td>11</td>
<td>3</td>
</tr>
<tr>
<td>IYC Pere Marquette</td>
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<td>4</td>
<td>2</td>
<td>2</td>
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<td>4</td>
</tr>
<tr>
<td>IYC St. Charles</td>
<td>3</td>
<td>3</td>
<td>0</td>
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<td>5</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>IYC Warrenville</td>
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<td>1</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>IDJJ Total</td>
<td>23</td>
<td>7</td>
<td>13</td>
<td>11</td>
<td>14</td>
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<td>13</td>
<td>14</td>
<td>10</td>
<td>26</td>
<td>22</td>
<td>175</td>
</tr>
</tbody>
</table>

School District 428 offers three types of diplomas for students: 8th grade, high school, and general equivalency. The District offers blended learning, utilizing both online and in-person instruction. An estimated 10% of youth admitted to the Department receive some sort of diploma during their stay. Nationally, it is estimated that about 40% of youth held in juvenile facilities have a need for special education services. School district data is collected on the final day of the month.
Table 12: FY 2017 Rate of Reportable Incidents per 100 Youth

<table>
<thead>
<tr>
<th></th>
<th>07/2016</th>
<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
<th>11/2016</th>
<th>12/2016</th>
<th>01/2017</th>
<th>02/2017</th>
<th>03/2017</th>
<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth on Youth Assaults</td>
<td>7.9</td>
<td>7.6</td>
<td>6.3</td>
<td>5.4</td>
<td>6.6</td>
<td>6.1</td>
<td>11.1</td>
<td>8.6</td>
<td>9.3</td>
<td>11.9</td>
<td>9.3</td>
<td>9.7</td>
</tr>
<tr>
<td>Youth Fights</td>
<td>13.7</td>
<td>14.1</td>
<td>12.2</td>
<td>13.1</td>
<td>12.4</td>
<td>12.7</td>
<td>14.4</td>
<td>18.3</td>
<td>17.2</td>
<td>14.3</td>
<td>9.3</td>
<td>13.3</td>
</tr>
<tr>
<td>Youth on Staff Assaults</td>
<td>7.1</td>
<td>1.5</td>
<td>3.1</td>
<td>5.4</td>
<td>6.7</td>
<td>7.2</td>
<td>7.6</td>
<td>7.1</td>
<td>6.6</td>
<td>5.8</td>
<td>5.2</td>
<td>9.4</td>
</tr>
<tr>
<td>Overall Reportable Incidents</td>
<td>28.7</td>
<td>23.2</td>
<td>21.6</td>
<td>23.8</td>
<td>25.5</td>
<td>26.0</td>
<td>33.1</td>
<td>34.0</td>
<td>33.1</td>
<td>32.0</td>
<td>23.8</td>
<td>32.4</td>
</tr>
</tbody>
</table>

Reportable incidents measure incidents of disruption in a correctional facility. The numbers provided are rates per 100 youth in IDJJ custody. Youth on youth assaults are when one or more youth strikes another youth or youths. Youth fights are when two or more youth mutually engage in a fight. Youth on staff assaults are when one or more youth commit physical violence against one or more staff members.

Table 13: FY 2017 Uses of Chemical Restraints

<table>
<thead>
<tr>
<th></th>
<th>07/2016</th>
<th>08/2016</th>
<th>09/2016</th>
<th>10/2016</th>
<th>11/2016</th>
<th>12/2016</th>
<th>01/2017</th>
<th>02/2017</th>
<th>03/2017</th>
<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>IYC Chicago</td>
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<td>0</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>IYC Harrisburg</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
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<td>1</td>
<td>0</td>
<td>3</td>
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<tr>
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<td>0</td>
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<td>0</td>
</tr>
<tr>
<td>IYC St. Charles</td>
<td>8</td>
<td>3</td>
<td>1</td>
<td>6</td>
<td>4</td>
<td>3</td>
<td>6</td>
<td>6</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>IYC Warrenville</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>IDJJ Total</td>
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<td>7</td>
<td>4</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td>8</td>
</tr>
</tbody>
</table>

Uses of chemical restraints are instances of the use of pepper spray as a use of force. The table provides a total number of uses at each facility per month. After any use, youth are checked by a medical professional and have an opportunity to shower.

Table 14: FY 2017 Uses of Mechanical Restraints

<table>
<thead>
<tr>
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<th>09/2016</th>
<th>10/2016</th>
<th>11/2016</th>
<th>12/2016</th>
<th>01/2017</th>
<th>02/2017</th>
<th>03/2017</th>
<th>04/2017</th>
<th>05/2017</th>
<th>06/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>IYC Chicago</td>
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<td>1</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>4</td>
<td>6</td>
<td>20</td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>IYC Harrisburg</td>
<td>17</td>
<td>10</td>
<td>18</td>
<td>18</td>
<td>34</td>
<td>18</td>
<td>24</td>
<td>38</td>
<td>51</td>
<td>34</td>
<td>29</td>
<td>59</td>
</tr>
<tr>
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<td>0</td>
<td>1</td>
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<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
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<td>20</td>
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<td>22</td>
<td>70</td>
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<td>40</td>
<td>63</td>
<td>30</td>
<td>19</td>
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<tr>
<td>IYC Warrenville</td>
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<td>4</td>
<td>4</td>
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<td>3</td>
</tr>
<tr>
<td>IDJJ Total</td>
<td>63</td>
<td>58</td>
<td>32</td>
<td>48</td>
<td>81</td>
<td>49</td>
<td>103</td>
<td>88</td>
<td>121</td>
<td>111</td>
<td>65</td>
<td>95</td>
</tr>
</tbody>
</table>

Uses of mechanical restraints are the temporary application of handcuffs as a use of force. The numbers provided are the total number of uses at each facility per month. If there is an incident where two youth are placed in mechanical restraints at the same time, that is counted as two uses. After any use, youth are checked by a medical professional.

Table 15: Uses of Confinement for June 2017

<table>
<thead>
<tr>
<th></th>
<th>Number of Uses</th>
<th>Rate of Usage</th>
<th>Average Length of Hold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extended Behavioral Holds</td>
<td>93</td>
<td>24.3</td>
<td>532</td>
</tr>
<tr>
<td>Time Outs</td>
<td>219</td>
<td>57.2</td>
<td>111</td>
</tr>
<tr>
<td>Cool Downs</td>
<td>96</td>
<td>25.1</td>
<td>37</td>
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</tbody>
</table>

In summer 2015, IDJJ began piloting new policies and procedures regarding the use of confinement and removal of youth from regular programming and housing. These policies and procedures redefine “confinement” broadly and created subtypes based on the reason for its use. The Department also developed new ways of measuring the use of confinement. October 2015 was the first month using the new measurement strategy. To aid public understanding of confinement use, data is being presented on the number of uses of types of confinement, the rate of use per 100 youth in facility, and the average length of a confinement hold in minutes. The numbers represent uses of confinement and not youths confined. An extended behavioral hold is a placement of a youth in secure location used when the youth’s behavior poses a serious and immediate threat to safety or security. A time out is where a youth is placed in a secure location due to behavior that is out of control, violent, or aggressive. During this time, youth are routinely de-escalated and counseled by staff. A cool down is the temporary removal of youth from programming to an unsecured location while under constant staff supervision. Cool downs are used for youth behaving disruptively and are a non-secure tactic to de-escalate behavior.
### Table 16: Youth on Aftercare

<table>
<thead>
<tr>
<th>Month</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>917</td>
<td>920</td>
<td>913</td>
<td>912</td>
<td>905</td>
<td>884</td>
<td>893</td>
<td>903</td>
<td>886</td>
<td>881</td>
<td>875</td>
<td>854</td>
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<tr>
<td>Community</td>
<td>383</td>
<td>370</td>
<td>377</td>
<td>359</td>
<td>369</td>
<td>383</td>
<td>383</td>
<td>374</td>
<td>381</td>
<td>390</td>
<td>374</td>
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<tr>
<td>Facilities</td>
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<td>372</td>
<td>386</td>
<td>379</td>
<td>371</td>
<td>371</td>
<td>382</td>
<td>372</td>
<td>359</td>
<td>369</td>
<td>356</td>
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<td>150</td>
<td>139</td>
<td>147</td>
<td>133</td>
<td>132</td>
<td>132</td>
<td>130</td>
</tr>
</tbody>
</table>

### Table 17: Caseloads in Aftercare (Per Specialist)

<table>
<thead>
<tr>
<th>Month</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caseload</td>
<td>17.7</td>
<td>18.4</td>
<td>18.3</td>
<td>18.2</td>
<td>17.9</td>
<td>19.3</td>
<td>19.4</td>
<td>20.4</td>
<td>20.3</td>
<td>21.9</td>
<td>17.7</td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td>9.1</td>
<td>9</td>
<td>9.2</td>
<td>8.8</td>
<td>9</td>
<td>9.3</td>
<td>9.8</td>
<td>9.6</td>
<td>10.3</td>
<td>10.5</td>
<td>11</td>
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<tr>
<td>Facilities</td>
<td>8.5</td>
<td>9.4</td>
<td>9.1</td>
<td>9.4</td>
<td>9.2</td>
<td>8.6</td>
<td>9.5</td>
<td>9.8</td>
<td>10.1</td>
<td>9.7</td>
<td>10.9</td>
<td>8.7</td>
</tr>
</tbody>
</table>

There are three groups of youth served by Aftercare. Youth in facilities are currently held in an IDJJ facility, but preparing for their transition to the community. Youth in the community are currently supervised through Aftercare after release from a facility. Youth suspended or with warrants are in violation of the terms of their supervised release and are supervised in the community or being held in a facility pending a legal hearing or have a warrant issued for their arrest. The average number of youth on caseload provides the average number of all types of youth that one Aftercare Specialist will supervise.

### Table 18: Aftercare Specialist Contact per Youth by Office in June 2017

<table>
<thead>
<tr>
<th>Aftercare Regional Office</th>
<th>Overall Contacts</th>
<th>Contacts per Youth</th>
<th>Community Contacts</th>
<th>Contacts per Youth in Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago</td>
<td>191</td>
<td>2.7</td>
<td>170</td>
<td>3.6</td>
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Contacts between Aftercare and a youth start to occur prior to their release from an IDJJ facility. Contacts, both overall and in the community, are face-to-face meetings that occur between Aftercare Specialists and youth, their host site, placement staff, and engaged friends and family members. Contacts per youth provides an average number of contacts an Aftercare specialists will have for each youth on their caseload. Contacts per youth in community only examines contacts regarding youth that are actively monitored in the community. Per Departmental policy, Aftercare Specialists are meant to have one to four meetings per month with each youth, depending on their level of supervision.