

Juvenile facility latest virus hot spot

Local child tested twice; families fight for answers

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Editor's note: To protect the privacy of minor children, names and some identifying descriptions have been omitted from this report.

RICHMOND — The boys are quiet when they call now.

They used to be animated, talking about their days and activities. But for more than two weeks, they've spent 23 hours a day in relative isolation — cut off from their counselors, educators, and families.

When they call home now, there's just not much to say.

The residents of Bon Air Juvenile Justice facility in Chesterfield County, just outside of Richmond, have been on lock-down since a child there tested positive for the new coronavirus on April 5 — three weeks after Virginia schools closed.

Gov. Ralph Northam ordered schools closed on Friday, March 13, and visitation to Bon Air was cancelled that day, in an attempt to keep the virus from infiltrating the facility. But despite early pleas from parents and stern warnings from advocacy groups, it's too late. As of Friday, April 17, there were a reported 25 residents who tested positive at Bon Air. It is the new “hot spot” of COVID-19 in Virginia — engulfing a facility with 205 mostly minor children, including a boy from Highland County.

The last time anyone has been able to visit a child there was seven weeks ago, March 11. The families are scared for their loved ones, and say the facility was not only slow to respond to guidelines on social distancing, continuing education, and counseling, but woefully poor in communicating with them about what's been happening inside.

What's going on?

The sister of one youth at Bon Air is worried her brother is not getting support during the lockdown. The boys were in contact with educators, counselors, and ministers, but now, none of those support staff have been allowed in since mid-March, she said.

She used to hear from her brother 2-3 times a week. “Now, I only hear from him once a week, and only for two minutes. He's depressed. He does nothing but sleep, and sit on the floor of his room.” Also, he acts funny when he calls, she said. “They rush them off the phone; they're not really getting to talk.”

She said her brother told her the person who gets him out of his room one hour a day wears gloves, but not masks. “I'm worried. I'm worried about him getting sick, mostly,” she said. “But I'm also worried about him being locked down 23 hours a day. I'm worried whether that will prompt him to make a bad decision when he comes out. I'm worried about him emotionally, mentally, and about him getting sick.”

When the coronavirus began to spread at Bon Air, she said, “No one called me. No one called Mom.”

Virginia's Department of Juvenile Justice oversees other detention facilities, too. One mother is worried about her son incarcerated at the Chesapeake city jail. She speaks with him every day, and says to her knowledge, he has not been tested. “Some in his unit have already been released,” she said. “They are not on lockdown, but there is no area where

they meet together ... He just sits in his room — no books, no radio,” she said. “I worry about how he’s passing the time because he no longer has his group meetings ... I’m really worried about him getting sick,” she said. “He’s in pretty good health, but I don’t think he fully understands what’s going on. They are not explaining things to them.”

Another mother noted her son at Bon Air is missing therapy he needs. She said there was talk of video counseling, but that hasn’t happened.

“My son and I, before COVID, he would call, and we’d get other family members on the phone and we’d talk ... twice a week he’d call his sister,” she said. And he could talk freely. “Everyone would get a chance to say hello.” But now, she said, there’s always someone there with him when he’s on the phone, if he can call at all.

“When I had not heard from him recently, I asked (staff) for an update and I got this horrible reply. He’s young, he’s got a mental health condition, then you hear ‘extraction team’ ... He had a roommate at the beginning of March, but I don’t know if he still has one.”

Her son has an Individual Education Plan (IEP) like many other residents, but “they’re not doing any education right now ... It just brings me to tears to hear these residents are on 23-hour lockdown ... it’s only exacerbating their depression,” she added.

The boys can be easily misunderstood in this state, she said. Then, if there’s an altercation or they get in trouble, they’re penalized. “I’m trying to keep from getting anxious,” she said. “It’s unfortunate the facility is not reaching out. I get more information second- and third-hand, and it’s more confusing.”

She is dismayed by the lack of support from staff. “The expectation we’re told is: Get over it,” she said. “There’s no support.”

Before the isolation, she said, “My son was well-mannered. They would tell me about his smile, how he was engaging. He still had an opportunity to regain a place in society. He loves sports, and math, and he wants to know about the world, and what happens in life ... He has the ability for empathy and genuine respect. I know he wants to continue to stay on a positive track.”

She was relieved at the progress he’d made over the previous several months. “But now, not being able to hear from him ... Regression. That’s my biggest fear for him.”

A vacuum of information

The Highland County boy, who turned 17 in February, has been at Bon Air for about 16 months. As the virus spread statewide, his mother was desperate for answers. She wrote DJJ director Valerie Boykin on March 18, five days after visitors were barred from Bon Air. Her worries were exacerbated because her son has severe allergies and asthma.

“I would like to know the plan for dealing with a resident or staff member that becomes infected with COVID-19,” she told Boykin. “What are the details of the policy? There are children at Bon Air that have medical conditions that put them at a higher risk. Has anyone looked at medical records or consulted with parents to find out who may be at a higher risk?” Before the pandemic, it had taken this mother six weeks to get medical staff to put her son on his seasonal allergy medication.

She asked Boykin about social distancing. “How is that accomplished in a unit of 16 boys where rooms are being shared? How is this accomplished by closing units down and adding additional boys to the remaining units? Apparently, recreation is being offered every day in the form of basketball. We appreciate the fact that an effort is being made to

give the boys exercise, but no one else in the country is able to play basketball due to the risks. How is it fine to play daily at Bon Air?” she continued. To this point, she had received only one call from Bon Air staff. “I, as well as all of the parents of residents at Bon Air, deserve answers to these questions.”

Boykin replied promptly, but didn’t answer specific questions. “Our managers have been in consultation with medical staff and the Virginia Department of Health to plan for and address situations regarding the COVID-19 situation,” Boykin told her. “I am happy to report that at this time, all youth are safe and none are exhibiting any symptoms of the illness ... We are trying to share what we can as quickly as we can to keep parents informed of their child’s well-being.”

This mother heard nothing further.

Eight days later, on March 24, she again wrote to the director, wondering how online classes would continue. “I understand that teachers may not be able to come in, but it seems that staff at Bon Air could easily be trained on how to turn on the computers and monitor resident activity,” she wrote. “Currently, my son is sitting in the day room of his unit with staff and the other boys that he attends online classes with. They are watching TV, playing cards, and getting restless. He is not able to go to his room and work or read, as there is not enough staff to do door checks.”

A reply came from Melinda Boone, interim superintendent of education at DJJ, saying they were working on the logistical challenges of restoring the online curriculum.

“Restructuring our educational delivery system will take some time, however, our goal is to test our implementation, including technology, by early next week,” she said.

That never happened. Meanwhile, things worsened statewide. Cases of COVID-19 were increasing parabolically.

The mother again wrote the director, on March 31. “What is DJJ, and Bon Air in particular, doing to ensure the safety of these children? Is there six feet between bunks of bunk beds? Is there enough room in a dayroom to keep 16 boys and three staff six feet apart? I am sure that you struggle with these questions but there are parents that deserve answers ... My child does not have a counselor for me to contact and his PO (parole officer) made it clear that she was not involved at all with what is happening there ... There have been many empty promises made by senior leadership at the state level. The guidelines that are being handed out sound lovely but are not being carried out at the working level.”

Again, there was no response.

The Recorder followed up, asking similar questions. The director replied April 3, after the first staff member at Bon Air tested positive. Boykin explained DJJ is “making every effort to communicate accurate, timely, and regular information.” She said social distancing is occurring at Bon Air “to the extent possible.” She said distancing “is feasible in most units based on the square footage of the dayrooms. The facility staff is enforcing social distancing as completely as possible without being punitive and without the use of force. Only 16 rooms have youth sleeping in bunk beds,” she said. The rest, about 173 youths, are in single rooms or open dormitory style sleeping quarters, with beds farther than six feet apart.

DJJ slow to respond

Parents, and the public, have been largely left in the dark about how COVID-19 took hold at Bon Air. A staff member who had been on the campus March 22 and displayed no symptoms, tested positive. That person was treated at home, and according to DJJ, had no close contact with youth. Not long afterward, another staff member tested positive. Then, April 5, a resident tested positive, and things took a sudden turn.

All but essential staff members were sent home. The kids were locked in their rooms for 23 hours a day. Gov. Northam had for weeks stressed the need for social distancing, yet about 30 boys remained in bunk beds a mere three feet away from one another — right up until a few days ago.

April 5, the day of the lock-down, the parents of the boy from Doe Hill remained desperate for information. It would be 48 hours before they heard their son's voice again.

April 6, his mother tried to reach someone inside. "I have been worried to death and haven't been able to talk to (my son)," she told one staff member.

Director Boykin had issued a press release and staff memo April 3, neither of which family members immediately saw.

Boykin's internal memo to DJJ staff explained, "We have two non-security employees at Bon Air who have tested positive for the virus along with one CSU employee and one youth in a contracted program ... Please note that the two Bon Air staff had close contact with one another. They had limited contact with other staff and youth ... The youth is improving rapidly and no other youth at the program have demonstrated any symptoms," she continued. "The Bon Air employees showed no symptoms when last reporting to work and developed symptoms a few days later. Both employees are being treated at home and we wish them a speedy recovery. Per the VDH and Centers for Disease Control recommended protocols, the employees and youth who had contact with these individuals are being notified of the recommended precautions based on their individual circumstances," Boykin wrote.

Boykin asked all DJJ staff to keep using CDC protocols. "We will continue to do screenings each day at Bon Air as employees arrive for their shifts. We will continue to monitor the youth for symptoms and screen them every 72 hours ... We have no youth who have demonstrated symptoms of COVID-19; however, we will more closely monitor a few of them who had contact with the employees as an added precaution."

Two weeks later, more than two dozen cases of COVID-19 had erupted.

DJJ's chief physician, Dr. Christopher Moon, issued a statement last Friday, April 17. Of the 25 Bon Air residents who tested positive, he said, 21 of them had no outward symptoms, and four had symptoms no more severe than a cold or flu.

Two weeks of confusion

Between Boykin's memo April 3, and the doctor's announcement April 17, families say little information was forthcoming.

On April 6, the Highland boy's father expressed his dismay to Boykin. "The communication coming from Bon Air or DJJ has not been sufficient to calm the anxiety of parents who have no idea what is going on with their children other than letters that come with stale information ... imagine what the 205 mothers of the boys at Bon Air feel not hearing anything for four days, which was how long it has been since the DJJ website was updated."

He did not get a reply.

April 8, one of the Bon Air staff told them, “I do know that the plan is for them to be in lockdown for a total of 14 days, basically a quarantine for the kids since they have more than likely been exposed. That would end the Sunday after next, provided that is what the facility determines is in the best interest of the residents.” She suggested this mother ask her son whether he or staff are wiping down the phone or game controls between each resident using it. “Otherwise, they will be spreading the virus,” this person said. That day, when the boy called his parents, their call was interrupted when staff came to test him for COVID-19.

His mother wasn’t informed ahead of time. Did he have a fever? Why wasn’t she called? When would the test results be available? Was he exposed? If so, how? The questions stormed her brain. On the DJJ website, it said parents would be notified. But it would be another 48 hours before she got answers. Finally, medical staff called to let her know their son’s test was negative.

About a day later, however, the boy told his mother he couldn’t talk long because he was being moved to another room; his roommate had tested positive, he said — the roommate he had shared a room with 23 hours a day for more than a week.

His mother called another parent, hoping to learn more. That father said there had been no COVID-19 reported on his son’s unit.

“Maybe my child just fell into the one unit with problems,” she guessed.

She consulted a nurse practitioner on staff, expressing her worries. He called her back, saying that while he could not provide information about her son’s roommate, he assured her that her son would be tested again Friday, April 17.

Per protocol, this mother learned, kids who had been exposed were tested within five days of exposure, or sooner if they showed symptoms. That verified for her what her son had said — his roommate tested positive. She was told they would sanitize the room the boys shared, but could not get any information about that process. She was skeptical. Bon Air medical staff told her they did not set the protocols for sanitization, and didn’t know what would be done. The questions loomed again — how many residents were infected? How many staff members? Where they all wearing Personal Protection Equipment? She knew some boys were being reviewed for release at this point — ones with “indeterminate” sentences. How does anyone determine who might get released? She wondered. How do they make that list?

April 9, she reached out to Boykin again. “I truly appreciate your willingness to communicate. It says a lot about you, as none of your upper level staff have contacted me about any of my concerns. It is this lack of communication that fuels fear and anxiety ... Can you please tell me what is going on? Why was my son tested for COVID-19 and we were not informed? Why can he not call ... why has no one communicated any information to my husband or me? When will results be known? What is the plan for the residents going forward? Are these not legitimate questions? Is it not possible for DJJ to respond?”

Boykin replied the same day, apologizing. “It is my understanding that your son had a mild fever one day and met our criteria for testing. I must say that it was my expectation that parents be contacted to advise of the testing. I am looking into the matter further. I appreciate you sharing that you did not get notice ... I apologize for any confusion regarding the testing ... I did ask that youth be allowed to make free calls home during the medical isolation period so that might explain it.”

The next day, this mother heard from Robin Binford-Weaver, behavioral services unit director at DJJ. “As noted in the letter that Director Boykin sent you on April 7, Bon Air staff is working tirelessly to ensure that residents and staff are safe and that their needs are addressed. In your communication on April 8, you noted questions and concerns in regards to the following areas: the length of time that residents would be in medical isolation; residents’ access to radios and writing and drawing paper; and ability of residents to use their time in positive and constructive ways.”

Binford-Weaver said surfaces were frequently sanitized, and cloth masks were made available to staff and residents.

Another mother’s son has been at Bon Air for 23 months. When she learned of the situation, she said, “It was very, very alarming. I had spoken with him about a week before everything changed, then nothing. No return calls. No answers ... parents such as us, we need support; we need information to make sense of what’s taking place.”

One Bon Air staff member reached out to a few parents, saying, “We are considering offering some support video get-togethers for those of you interested in staying in touch during this difficult time.” They never heard another word about that possibility.

Why are parents still paying?

Concerns were also raised about mandatory payments. The families of children in juvenile facilities are required to pay court-ordered child support, which goes into a general fund.

“They are insisting I need to pay,” one mother said last week. Even though the court has not determined how much her payment should be, she was told to “start paying something” now anyway.

Gov. Northam was asked about these payments in late March, when many Virginia families began to face unemployment. Secretary of Public Safety Brian Moran took the question, and said the governor’s staff would look at suspending the child support payments in a revised order later.

To date, none of the families contacted by The Recorder have been notified those payments were suspended; they’ve struggled to make them for fear the state will come after them for the money.

Anxiety redoubles

Mental health was a primary concern for one mother. “I can hear the stress in his voice,” she said of her son. “He’s got no school work to do. They had already taken him off his anxiety medication. There’s no tele-health counseling going on. These are real problems, for all those boys,” she said. “If (he) tests positive, that’s going to mean another two weeks of isolation. If he tests negative, then what? What’s the plan? They don’t seem to have a plan ... how long will they be locked down? What services will be provided while they’re in isolation 23 hours a day? What are they doing for them? They only have access to the books in their unit’s library; (my son) has already read them all. Why can’t they push a new book cart around?”

As her son’s anxiety increased, she urged him to stay healthy.

“I don’t know how to stay well now, Mom,” he told his mother.

She was heartbroken. “No mother should ever have to hear that,” she said.

“He sleeps so much now, day after day, and I’m sure they use sleep as a way to pass the time, but I’m concerned because it’s also a sign of depression; there’s a link there.” Her son has PTSD; doctors at his trial each testified about his need for intense, ongoing, one-on-one counseling to prevent the condition from worsening. Once he was at Bon Air, he never got anything close to what the doctors said he needed, his parents said. And now, there’s nothing.

“The boys are not getting any mental health support now, and we know they all had some need for it,” the mother said. “They are receiving no mental health services at a time of great anxiety and great stress. They are just pent up in their rooms.”

Advocacy groups step in

The lack of information from Bon Air staff and Director Boykin has left families fearful, and desperate.

One boy told his mother all the residents were finally given masks to wear when they come out of their rooms, but didn’t always wear them. Also, security staff on the units daily now wear masks, but no gloves, he reported. Then, he and his roommate moved out. The next day, five other boys moved out, but parents couldn’t get information about why. The sister was asked whether her brother was OK. “Well, we used to have flowing conversations, you know? Now, he gives us no details. It’s just straight to the point stuff. It’s not like we’re strangers. We know each other very well, but now it’s pulling teeth just to get yes or no answers,” she said.

For youth at Bon Air, she said, “We need to come up with a better communication system. I don’t know anything about the kids inside. I don’t know why they can’t come up with a plan. I’m just a regular girl but to me, this communication system? It’s not even a system at all.”

“She hit the nail on the head,” another mother said. “That lack of communication just drives fear and anxiety. It’s a problem. It’s a problem they know they have. And if you don’t have internet access, you have to wait on letters, which are a week old by the time you get them.”

Valerie Slater, executive director for RISE for Youth, said her group has continuously told the department, “do not use isolation” — there are numerous studies that show the severe consequences of solitary confinement. “And now some parents are not even getting phone calls,” she said.

“And they’re not going outside at all, either,” one mother added. “There aren’t enough staff there to take them ... and I really have to work to get (my son) talking. I think they just don’t know what to say. They’ve got nothing to report.”

For nearly a month, Gov. Northam and staff at the Department of Corrections have stepped up actions to release adult prisoners who are not a threat to society — people who are within a year of completing their sentences. But at the same time, little happened to address the children under the state’s care early on, despite those who begged the governor to take action before outbreaks occurred.

Slater said her group and about 40 others repeatedly urged the state to take steps to release children who are not a demonstrable threat. “These places are tinder boxes,” Slater said a week ago. “They must act now ... the governor’s actions are not enough yet.”

Monday, April 13, the ACLU gathered nearly 70 participants in a video call to explain what they believe was a crisis not getting enough attention.

Joseph Platania, commonwealth's attorney for Charlottesville, explained how police and local jail superintendents came up with a strategy 8-9 years ago to keep jail populations at a minimum there. When COVID-19 broke out, they agreed on releasing those who were medically vulnerable, or within six months of completing a sentence. The jails provided GPS units at no cost to those released. "We had great cooperation from the police department," he said. "We've released 171 people since March 16 for time served, or out on bond ... as of this morning, we've had zero confirmed cases in our jails, and no symptoms. So far in the last four weeks, only one offender was returned to court, charged with a new nonviolent offense."

Slater said it's well documented that youth in state facilities are at extremely high risk for COVID-19. "Young people are not immune to this," she stressed. "We need to protect all these children ... the state needs an immediate police response with judges and prosecutors involved, similar to Albemarle, and review all cases."

Steve Descano, the Fairfax commonwealth's attorney, agreed the state was not doing enough. "This is an opportunity for us to examine our whole justice system," he said. "We can divert people from (imprisonment) ... we must standardize Virginia's legal response."

ACLU of Virginia's executive director Claire Gastañaga said the governor's excuses about not using blanket clemency powers rang hollow. "The governor has complete discretion to exercise clemency authority, even on individualized decisions," she said. "He can use clemency and conditional pardons."

The message was clear: What Gov. Northam and Secretary Moran say is happening is not happening.

"Everything we've heard so far is boilerplate," Slater added. "They're not even testing all boys on the same unit (at Bon Air) where one tested positive. They should all be tested."

The ACLU of Virginia joined the Legal Aid Justice Center, the Humanization Project, RISE for Youth and other organizations to form the Virginia COVID-19 Justice Coalition.

April 9, the coalition called for the release of any person in custody who does not pose a demonstrable, imminent threat of bodily harm to others. The group also called for accountability and data transparency from state and local officials.

"We urgently need statewide action now," said Ashna Khanna, legislative director for the ACLU of Virginia. "The actions so far from the governor and his administration do not go nearly far enough in addressing this pandemic within Virginia prisons, jails and custodial facilities."

Legal wrangling

Khanna noted local jurisdictions need more guidance on the most effective way to decarcerate facilities. "Without this guidance, local officials such as commonwealth's attorneys, judges, and sheriffs, are not consistently following CDC health guidelines to protect people in custody from COVID-19," she said. "People in custody are among the most vulnerable to this outbreak, yet too often, they are denied basic health care and precautionary measures."

The Legal Aid Justice Center also weighed in. “Virginia’s 41 state prisons, 72 local and regional jails, and nine secure juvenile facilities house over 60,000 people. The inevitable arrival of COVID-19 to these facilities not only poses a life-threatening danger to the incarcerated population, but the surrounding local communities as well.”

The center called on the governor to use executive clemency powers to grant pardons to high-risk people and those nearing their release date; approve all properly filed requests for medical clemency; and provide clear instructions to the Parole Board on expediting determinations and exercising its discretion in light of the pandemic.

Last week, DJJ announced plans to release youth from Bon Air as its authority allows. The department stated, “Indeterminately committed youth are being reviewed for possible releases from Bon Air and our contracted programs. Based on length of stay guidelines, treatment completion, and a viable placement and parole plan, youth are being released.”

Due to the pandemic, at the urging of Gov. Northam, the Virginia Supreme Court on March 16 ordered halts to civil procedures and other court actions, declaring a judicial emergency, then later extended the order through April 26. But no consistent guidance was provided, leaving prosecutors and judges to make their own determinations. In one case, a judge heard a motion to release a resident, but no record of the proceeding was filed because the judge did not have the hearing recorded.

The Legal Aid Justice Center reports its clients have had trouble getting private calls with legal representatives, and even flat denial of access to the courts even through video conferencing.

Secretary Moran explained during one of the governor’s press conferences that the new orders about releasing inmates applied also to juvenile facilities. “We will address them in this order,” he said. “We are concerned about the safety of those kids, and DJJ will assess them . . . the governor has recommended to reduce the capacity in those places, to reduce the population.”

Later, Moran addressed questions about the adult inmates under the Department of Corrections. Moran acknowledged there have been inconsistencies among judges, parole boards and lawyers. He made no mention of the children in juvenile facilities.

April 13, Moran again was asked about plans for adult inmates. Their release, he said, requires the General Assembly to act on the governor’s recommendations when it returns to session April 22. “The budget language is for allowing the DOC to determine who is released,” he explained. “Special care needs to be given to those in confined spaces.”

He also pointed to Virginia’s four-year record of having the lowest recidivism rate in the nation. That, he said, is due to Virginia’s “robust” plans giving released inmates a plan for success when they get out. They get support for finding housing, employment, substance abuse counseling, and access to mental and physical health needs. And now, it’s tougher than ever to provide that support.

The Highland County father pleaded with Director Boykin one more time, on April 14. “I know you are committed to fostering consistent communication among our son, us, and the staff at Bon Air because of how vital it is to keeping (him) on the right track to leave Bon Air, finish his high school education, and go on to college. But right now, there is no way for there to be consistent communication among any of us. The normal staff members who are so vital to (my son) are not even going into the facility on a regular basis. All the kids at Bon Air, not just (my son), are anxious, afraid, and have no idea

what is happening to them. Most need mental health therapy on a good day, and there is no way to provide that now. Each day we speak to our son, the anxiety level in his voice is more intense,” he said.

“My son is serving a sentence he was not sentenced to. He is not getting the education the judge was told he would get at DJJ; he is not getting the mental health services the judge was told he would get at DJJ, and he has no support structure right now to relieve his anxieties.”

By Wednesday, April 15, these parents had learned two boys from their son’s unit had been sent home; one had been sent to the infirmary; and five were in the COVID-19 “sick unit.” Their son reported staff members in the central infirmary were wearing PPE, but regular daily staff members were not.

On Friday, April 17, the governor reported local jails were making moves to keep their populations down, but made no mention of Bon Air or other juvenile facilities, even as the news broke that Bon Air had become the latest hot spot for COVID-19.

As of that day, DJJ’s Dr. Moon said, 13 of the residents with COVID-19 had already been released from medical isolation.

But it’s the lack of information and slow reaction time that concerns advocacy groups. In Friday’s news release, Director Boykin insisted, “We keep our residents’ parents and loved ones informed and up to date. We had previously declined to release the number of youth who tested positive for COVID-19 to protect the privacy of our underage residents. This practice was in line with other youth-serving agencies in the commonwealth and other juvenile justice agencies across the country. Over the past two weeks, we have begun to see some of these agencies reconsider such policies. As the number of cases has risen, DJJ believes the privacy of individual residents can be protected,” she said.

Since mid-March, according to Boykin, Bon Air’s population has been reduced by about 10 percent.

By Monday, the Legal Aid Justice Center again urged the state to take action, noting the children’s civil rights were being violated.

“Youth incarcerated in Bon Air report that they have not been provided with adequate personal protective equipment, that they lack widespread testing, and that they have received poor communication about positive diagnoses,” the center wrote. They also outlined concerns that DJJ was using excessive room confinement, and threatened legal action.

In the federal justice system, they pointed out, “The prolonged solitary confinement of a juvenile is prohibited by statute.”

Monday, Director Boykin explained, “We are reviewing all cases internally through treatment teams to determine eligibility for possible early release, both indeterminate and determinate commitments. DJJ does not have the authority to release determinate commitments. Even if it were determined appropriate by the department, the judge or possibly a substitute judge in the court where the youth was originally committed will be the decision maker for the release. This would be based upon a timetable set by the court, assuming the court was even willing to hear such a case.”

Further, Boykin told The Recorder, “The Supreme Court of Virginia issued an order, dated March 16, 2020, setting out parameters for the types of hearings that will be heard during the public health emergency. These cases may or may not qualify based upon the practices of a specific jurisdiction and court.”

Boykin added, “Unfortunately, there is quite a bit of misinformation that is being stated by various individuals and groups. DJJ is unable to determine the source of the misinformation. However, the information on our website is accurate, although the situation is very fluid and can change daily.”

The Highland County parents got their son’s second set of test results Monday morning. They were negative, but he’s not out of danger. He has been quarantined for another week — more isolation — and will be checked daily for symptoms, they were told.

Tuesday, he was excited to report to his mother he would get 30 minutes outside that day. As of Monday, there were nine active cases among the residents at Bon Air, and 17 who had recovered and were no longer in medical isolation. Among staff, seven active cases remain, and none has returned to work.

Tuesday, Boykin announced 77 youth had been tested — 26 were found positive; and five test results were pending. “While the number of positive tests is concerning, only four of those youth had any symptoms,” she said. “In case you are wondering,” she added, “we are unable to test all youth. The health department does not recommend it. We check temperatures twice per day and once the doctor rules out other problems, we are then able to request the test.”

She said it is hoped that medical quarantine can be relaxed this week. “We are awaiting our outside cleaning contractor to complete the sanitization of the common areas,” Boykin said.

None of the Bon Air families knows when they’ll see their children again.