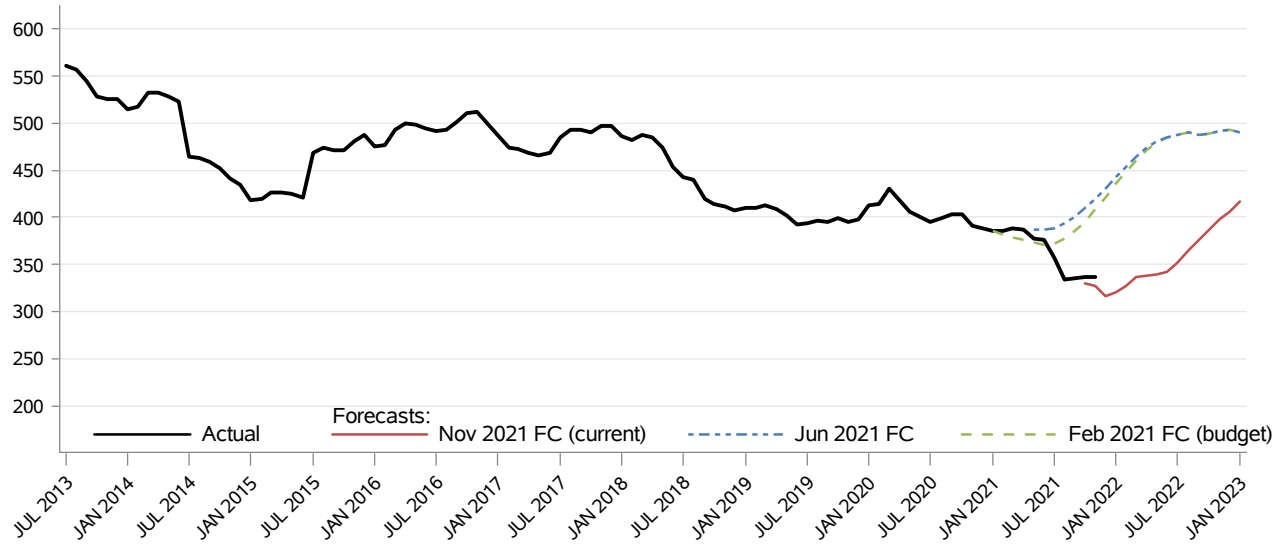


Corrections Juvenile Residential

CFC Monthly Monitoring Report

The **Juvenile Rehabilitation Administration (JRA)** is housed within the Department of Children, Youth, and Families (DCYF) and provides care, custody, and treatment for juvenile offenders committed to the state by juvenile courts. The JRA forecast is the residential population in facilities operated or contracted by JRA. The forecast includes youths in residence and those on authorized/unauthorized leave for two weeks or less.



Month	Actual	Forecasts			Budget Forecast and Variance			Current Forecast and Variance		
		Feb 2021	Jun 2021	Nov 2021	Feb 2021	N	%	Nov 2021	N	%
JUN 2021	377	370	387		370	7	1.8%			
JUL 2021	357	372	389		372	-15	(4.0%)			
AUG 2021	334	377	393		377	-43	(11.5%)			
SEP 2021	335	385	401		385	-50	(13.0%)			
OCT 2021	337	396	410	330	396	-59	(15.0%)	330	7	2.1%
NOV 2021	336	408	420	328	408	-72	(17.6%)	328	9	2.7%
DEC 2021		422	431	316	422			316		
JAN 2022		435	443	320	435			320		
FEB 2022		449	454	327	449			327		
MAR 2022		461	464	336	461			336		
APR 2022		472	473	338	472			338		
MAY 2022		480	481	339	480			339		

Data Source: Department of Children, Youth, and Families (DCYF) (last update: 12/09/2021)

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Descriptions:

- **Actual:** Average daily JRA residential population (ADP), including youths in institutions, group homes, and escape status less than 14 days.
- **Budget Forecast:** Caseload forecast adopted by the Caseload Forecast Council to serve as the basis for the biennial or supplemental budget. The actual budget may incorporate adjustments to this forecast to reflect legislation and policy decisions by the legislature subsequent to the development of the forecast.
- **Current Forecast:** Most recent forecast adopted by the Caseload Forecast Council; may be the same as the Budget Forecast.

Disclaimer of Liability:

Although the Washington State Caseload Forecast Council does all that it can to assure the accuracy of its forecasts and the data on which its forecasts are based, no warranty expressed or implied is made regarding accuracy, adequacy, completeness, legality, reliability, or usefulness of any information contained herein. This disclaimer applies to both isolated and aggregate uses of the information. If you find any errors or omissions, we encourage you to report them to the Caseload Forecast Council.