AMERICAN CORRECTIONAL ASSOCIATION

Staff and Consultants
William J. Taylor, Assistant Director
Rosalee Rozetti, Assistant Editor
Elaine Smith, Assistant Editor
Colleen Harkins, Staff Assistant
Anita Flynn, Staff Assistant
Marsha Lenny, Staff Assistant
David Marsden, ACA Consultant
Sid Zirin, ACA Consultant
Charles Relka, ACA Consultant
Joseph Kulick, ACA Consultant
David Rothen, ACA Consultant
Ted Rubin, ACA Consultant

Resource Agencies
Department of Correction, Indianapolis, Indiana
City of New York, Department of Juvenile Justice
Department of Public Safety, Division of Correctional Services, Newark, New Jersey
Juvenile Attention System, Canton, Ohio
Southern Regional Juvenile Detention Center, Princeton, West Virginia
Jefferson County Family Court Detention Center, Birmingham, Alabama
Galveston County Youth Services Center, Galveston, Texas
Bureau of Juvenile Correction, Wilmington, Delaware
Stevenson House, Milford, Delaware
Shawnee County Youth Center, Topeka, Kansas
Regional Youth Service Center, Greerburg, Pennsylvania
Calhoun County Juvenile Home, Marshall, Michigan
Salt Lake County Detention Center, Salt Lake City, Utah
Twenty-Second Judicial Circuit of Missouri, St. Louis, Missouri
Clark County Juvenile Court Services, Las Vegas, Nevada
Youth Service Center, Port Angeles, Washington
Shawnee County Youth Center Services, Topeka, Kansas
Missouri Juvenile Justice Association, Jefferson City, Missouri

Resource Agencies
Family Court of Jefferson County, Birmingham, Alabama
West Central Regional Juvenile Detention Center, Parkersburg, West Virginia
Bureau of Juvenile Correction, Wilmington, Delaware
Bureau of Juvenile Correction, Milford, Delaware
Department of Youth Services, Seattle, Washington
Juvenile Division, St. Louis, Missouri
Clay County Juvenile Justice Center, Liberty, Missouri
Santa Cruz County Juvenile Detention Center, Nogales, Arizona
Calhoun County Juvenile Home, Marshall, Michigan
The County of Galveston, Galveston, Texas
Coconino County Courthouse, Flagstaff, Arizona
Attention Center for Youth, Lincoln, Nebraska
Jackson County Juvenile Detention, Medford, Oregon
West Central Regional Juvenile Detention Center, Parkersburg, West Virginia
Juvenile Court of Clay County, Clay County, Missouri
Juvenile Services Administration, Department of Health and Mental Hygiene, Baltimore, Maryland
Training School for Boys & Girls, Jerseyville, New Jersey
Louisiana Department of Corrections, Baton Rouge, Louisiana
Agency for Children & Youth, Tioga County, Wellsboro, Pennsylvania
Juvenile Division, Ann Arbor, Michigan
Cumberland County Juvenile Center, Cumberland, New Jersey
Scott County Juvenile Detention Center, Davenport, Iowa
Utah County Youth Home, Provo, Utah
Minnehaha County Juvenile Court Center, Sioux Falls, South Dakota
Regional Youth Service Center, Cranberg, Pennsylvania
Shuman Center Juvenile Detention Home, Pittsburgh, Pennsylvania
These Guidelines are intended to assist both juvenile detention facilities who are developing policies and procedures and those who are revising and/or upgrading them. Because the model policies are keyed to the Standards for Juvenile Detention Facilities published by the Association with the Commission on Accreditation for Corrections, facilities seeking accreditation will find them particularly helpful. The Guidelines translate the Standards into specific administrative and procedural activities. The Guidelines may also be useful in developing new laws, rules and/or regulations to improve the operation of local detention facilities.

The Guidelines for the Development of Policies and Procedures - Juvenile Detention Facilities were created with helpful input from great numbers of juvenile staff members, country-wide. Special thanks go to William J. Taylor, Assistant Director of the Project, to Rosulie Rossetti, Assistant Editor and to Elaine Smith, Assistant Editor who provided vital assistance in producing the final publication.

The development and publication of the Guidelines was supported by cooperative agreement #83-JS-AX-K002 awarded by the Office of Juvenile Justice and Delinquency Prevention, United States Department of Justice. Terry Donahue, Barbara Allen-Harr and Dianne Liburd of that office were especially helpful in completing the project. Acknowledgment is extended to the Advisory Committee who constructively reviewed the original drafts.

Requests for additional information should be directed to: William J. Taylor, Assistant Director, Membership, Training and Contracts, American Correctional Association, 4321 Hartwick Road, College Park, Maryland 20740.

Anthony P. Travisono
Executive Director
American Correctional Association

Introduction

Although the average length of stay in a juvenile detention facility is only about 10 days in a given year, the detention centers nationwide process about 80% of all juvenile justice admissions. Numerically, this percent translates into over 400,000 admissions each year. The detention facility, furthermore, is usually the juvenile’s first contact with the Justice System and this initial stay impacts seriously on the juvenile. It is imperative that the Juvenile Detention Facilities have and operate under policies and procedures based on sound standards.

Many facilities involved in reorganization and/or internal policy development have already indicated a need for sample policy and procedure formats. For these reasons, these Guidelines have been developed specifically as a reference tool. The policies and procedures reflect the standards of the American Correctional Association, The National Advisory Committee for Juvenile Justice and Delinquency Prevention and the American Bar Association. They were developed after gathering and carefully reviewing the many existing juvenile detention facility manuals listed in the preceding pages under resource agencies. At various stages of development, experts in the juvenile detention process were asked to review drafts and make suggestions for improvements or changes. Before the final edition of the Guidelines, experts from each facet of the juvenile detention process were consulted to ensure accuracy and applicability of policy content. This volume, Guidelines for the Development of Policies and Procedures (Juvenile Detention Facilities), is intended to be a companion to the Standards Manual for Juvenile Detention Facilities.

Definitions

The terms “policy” and “procedure” are, by definition, distinct and specific. A policy answers the question “why” and “what.” A policy states the facility’s philosophy and therefore determines its present and future decisions. It is a definitive statement of the facility’s position on an issue of concern to the administration or to the operation of the facility.

A procedure answers the question “how.” A procedure is a detailed, step-by-step description of the sequence of activities necessary for achieving a specific policy.

Structure of The Guidelines Manual

This publication contains three sections: 1) a Guide to Developing a Policy and Procedures Manual; 2) the “User’s Key,” and 3) sample policies and procedures.

The “Guide” is meant to be an aid to staff members responsible for developing or updating/upgrading a comprehensive policy and procedures manual. This “Guide” should be viewed as a set of suggestions - in terms of processes, writing style and format - based on the practical experience of many agencies, facilities and individuals. Each facility is encouraged to use it.
The "User's Key" is a detailed explanation of policy format. Additional sample heading blocks are also included.

The sample policies and procedures section make up the major portion of this publication and are referenced in the standards.

'Sample' Facility

Since no one set of sample policies can relate directly to all sizes and types of detention facilities, program staff created a "sample" facility and wrote specific policies and procedures geared to apply to that facility. Although these policies address a 50 bed facility, it is in no way intended to imply an ideal size. Nearly 60% of the functioning detention facilities, however, fall closely into the 50 bed range. Other facilities may easily adjust these Guidelines by increasing or decreasing numbers to meet their individual capacity. All of the sample documents, therefore, are applicable to a facility based on these assumptions:

1. A detention facility housing 50 juveniles.
2. A facility with an adequate staffing pattern, that is:
   a) all positions required by the facility are filled and
   b) a sufficient number of careworkers are present at all times ensuring that juveniles are never left unsupervised.
3. A facility with available separate sets of comprehensive manuals providing detailed instructions for operating most facility sections, i.e., accounting, procurement, food services, safety, personnel, security, etc.

The titles used in the samples were selected after reviewing many policy and procedure manuals from various operating juvenile detention facilities. In these samples, the Parent Agency is the controlling body of the facility, responsible for financing and coordinating it; the Director is responsible for the organization and day to day management. A similar approach was used to develop a "typical" organizational chart (See l.5). Sample forms (and in some instances, several variations of the same form) have been attached to the policies as guides to the types of forms required for local use.

Conclusion

As a management tool, a policy and procedure manual gives direction to staff and promotes efficiency and consistency of operations within the framework of over-all facility philosophy. As a public document - open to the scrutiny of the tax-paying public as well as courts - the manual will protect the issuing facility from charges of illegitimate, unprofessional or inefficient practices.

A GUIDE TO DEVELOPING A POLICY AND PROCEDURES MANUAL

I. INTRODUCTION

This resource manual has been prepared to guide local juvenile detention facilities in developing their own comprehensive policy and procedures manuals. This guide will address the pertinent questions: Who, what, why, when, where and how.

WHAT is a Policy and Procedures Manual:

- A management tool directing staff behavior by communicating the facility's philosophy and work plan.
- An aid in promoting consistency, efficiency and professionalism in staff performance by standardizing facility responsibilities.
- A mechanism for introducing new ideas and concepts to the staff.
- A mechanism for transferring authority and responsibility for accomplishing facility goals and objectives to the staff.
- A foundation for comprehensive staff training and development programs.
- A form for documenting facility defense against juvenile-initiated court action. (In fact, the courts have ruled that the absence of written policies and procedures is - as a point of law - "gross negligence and shifts the burden of proof..." to the facility administrator.)
- A prerequisite to achieving accreditation status by the American Correctional Association (ACA) and other corrections-related agencies and organizations.

Developing a policy and procedure manual is not a matter of simply writing down what the facility does and how it does it. Rather, it is a systematic process of self-evaluation, research and analysis and presenting that information in a style and format which encourages its use. Initially, developing a useful manual may require three to six months to accomplish and may involve every functional facility section and every facet of its operation.
Because of the diversity, in size and function, which exists among juvenile detention facilities, developing a resource manual that is universally applicable would be impossible. The information contained in this manual, therefore, should be considered general guidelines for policy and procedure development rather than hard and fast rules. Each facility is encouraged to use only that information which is relevant and implementable.

II. DEFINITIONS

POLICY: A definitive statement of the facility's position on an issue of concern to the administration or operation of the facility.

PROCEDURE: A detailed, step-by-step description of the sequence of activities necessary for achieving a specific policy.

In general, a policy reflects the facility's philosophy about a particular issue. It defines WHAT the facility intends to do on a consistent basis and WHY the facility intends to take the defined action. A procedure, on the other hand, describes sequentially, HOW and inherent in such a description, WHO, WHEN, and WHERE - the facility intends to implement the policy.

Policies and procedures may apply to:

THE FACILITY AS A WHOLE - Example: A policy about the facility's non-discriminatory attitude about juveniles.

ONE FUNCTIONAL SECTION OF THE FACILITY - Example: A policy and procedure(s) about the methods used by Food Service staff in preparing meals for juveniles pertains only to the Food Service section.

TWO OR MORE FUNCTIONAL SECTIONS OF THE FACILITY - Example: A policy and procedure(s) about the transportation of juveniles to activities conducted by the Program section may affect both Management Services and Program Operations.

THE FACILITY OR ONE OR MORE OF ITS FUNCTIONAL SECTIONS AND EXTERNAL AGENCIES OR ORGANIZATIONS - Example: A policy and procedure(s) about providing educational programs for juveniles by the local school district may affect both the Program and Management sections of the facility and the local school district, an external organization.

III. STAFF INVOLVEMENT IN DEVELOPING POLICIES AND PROCEDURES

To ensure acceptance and successful implementation, as many staff members as possible should be included in the policy and procedure development process. In fact, if this project becomes all inclusive:

- The staff will have a personal investment in the policies and procedures and will feel a sense of responsibility for ensuring their implementation.
- The staff will not only understand the policies and procedures - because they helped to develop them - but they will also be aware of the alternatives that were considered and reasons why they were rejected.
- The facility can capitalize on the staff members' collective knowledge and expertise (which, if tapped, can increase the practical quality of the policies and procedures significantly).

A. TASK FORCES

Perhaps the best method of involving large numbers of staff in the policy and procedure development process is formulating structured task forces. In large measure, the number and types of task forces necessary depends on the size and complexity of the facility. Every effort, however, should be made to ensure that all sections are included. The primary work in the process of policy and procedure development should be assigned to a task force chairperson (or coordinator) and includes:

1. Identifying policy and procedure topic items.
2. Collecting and analyzing available resource documents related to specific policy issues.
3. Dividing tasks among sections.
4. Developing initial and subsequent drafts of policies and procedures.
5. Validating the accuracy and sequencing of procedural steps.
6. Formatting the completed manual.

At a minimum, the following task forces are needed:

ADMINISTRATION - The Administration Task Force should be responsible for developing policies and procedures directly related to:
- General facility administration.
- Fiscal affairs, including purchasing.
- Personnel services.
SUPPORT SERVICES - The Support Services Task Force should be responsible for developing policies and procedures directly related to:
- Food services.
- Health Care Service.
- Laundry.
- Supplies and storeroom.
- Maintenance.
- Communication: Mail, visiting, telephone.

PROGRAMS - The Programs Task Force should be responsible for developing policies and procedures directly related to:
- Court liaison.
- Intake and Admission Procedures.
- Programs, including religious, educational and recreational services.
- Release preparation.
- Citizen involvement.

SECURITY - The Security Task Force should be responsible for developing policies and procedures directly related to:
- Security and Control.
- Juvenile Supervision.
- Rules and Discipline.
- Emergency Preparedness

Figure 1 represents a model organizational chart for the policy and procedure task forces.

B. THE NATURE OF TASK FORCES

The task forces coordinator is the single most important person in the policy and procedure development process. He/she serves as the central nervous system for the process - receiving and providing information, facilitating communication between the task forces, setting and enforcing work schedules as well as deadlines for deliveries.
FIGURE 1: Policy and Procedure Task Forces Organizational Chart
and, above all, integrating the products of the various task forces into a policy and procedure manual that is uniform in style and format.

Members of each task force should be selected based on their knowledge, expertise and willingness to serve rather than on their relative positions in the facility. The size of each task force should be limited to a manageable number. Individuals, however, may serve on more than one task force. In smaller facilities, individuals from outside the facility, who represent agencies and organizations associated with the facility, may be asked to serve on the task forces to augment facility staff. Care should be taken, however, to ensure that such individuals are knowledgeable about the activities of the functional sections included in the tasks on which they will serve.

While the use of task forces represents the most effective method of involving staff in the policy and procedure development process, other methods are also available. Policies and procedures may be developed on a sectional basis, with the section supervisor responsible for soliciting input from the section staff by assigning specific topic items to individuals or groups of staff members. The section supervisor would then be responsible for taking the materials developed by his/her staff and preparing the final policy and procedure drafts, adding his/her substantive input. As another alternative, policies and procedures may be developed by the administrative staff members, with the first drafts submitted to staff for review and comment prior to final approval by the facility director. Whichever method is used, staff involvement is essential to the ultimate success of the policy and procedure manual.

IV. DEVELOPING WRITTEN POLICIES AND PROCEDURES

A. POLICY AND PROCEDURE CONTENT

The next step in the process is to decide what topic areas are to be covered, beginning with broad subject areas within these specific topics. Since the development of a new or upgraded manual provides an opportunity for taking stock, the manual must not be limited to only a sanctioning of existing practices which sometimes are based on outdated directives and memoranda and/or do not take into account the major advances that have occurred (and will continue to occur) in corrections and/or they may not adequately reflect facility philosophy.

Established practice, however, is an important source of information for procedural content - and to a lesser degree, policy content - because it reflects the operational realities of the facility. Practice, in fact, is procedural in nature; the distinction between policies and procedures is often lost if established practice becomes the only source of content.

Properly developed policies and procedures must not only reflect established practice, but also constitutional Professional Requirements and philosophy of the facility.

1. Constitutional and Professional Requirements

Since the early 1970's, the courts - through their decisions and orders, and various corrections-related agencies, through standards they have developed, have drastically changed the philosophy, ethics and practice of the profession. Consequently, all policies and procedures being written must reflect these current constitutional and professional requirements. Among the resource documents reflecting the "state of the art" for input on policy and procedure content are:

a. Court decisions and orders - which determine constitutional requirements for facility operations. Since various courts rule differently on particular issues, it is advisable to rely heavily on decisions made by state and federal courts in one's own or neighboring jurisdictions.

b. State statutes and administrative rules and regulations applicable to the operation of detention facilities.

c. National and state corrections standards:
- The American Bar Association (Interim Status, Architecture of Facilities).
- The American Medical Association.
- The National Sheriff's Association.
- The Office of the U.S. Attorney General.
- "Model" policy and procedures manuals from the American Correctional Association, other states, agencies or facilities.
- Local fire safety, sanitation, health and building codes.

Although some of these documents may not be pertinent to your particular facility, they should be viewed as an integral part of the ongoing growth of the facility. They should, in fact, be reviewed and analyzed in depth before any attempt is made to use them in the development of policies and procedures. These documents (or portions of documents) found to be applicable and implementable should be used as a point of reference to ensure the consistency of a particular policy or procedure with constitutional and professional requirements.
2. Facility Philosophy

Unfortunately, few directors take the time to formally write out statements of their philosophies for the operation of their facilities or to communicate these statements to their staffs. As a result, facility operations are sometimes fragmented and inconsistent and staff members become frustrated because they lack a clear, overall picture of the purpose of the facility and their roles in the fulfillment of that purpose.

The same holds true for the development of policy statements. Without a philosophy statement to provide overall focus, the policy and procedure manual will, in all probability, contain policies which lack direction and are contradictory, resulting in confusion in their implementation.

The facility philosophy statement is essential to the proper development of policy statements because it defines:

- The purpose of the facility.
- The facility's responsibility to its juvenile population and other major constituencies, including the community, local government, social agencies and other departments of the local criminal justice system.
- The direction in which the facility is (or should be) headed.

In developing a philosophy statement, the following criteria should be used:

- The philosophy statement must be sufficiently broad in nature yet provide direction. It must, for example, be general enough to encompass all organizational activities but specific enough to address the facility's major responsibilities of security, safety and service - and reflect professional, ethical and constitutional standards.
- The philosophy statement must be realistic and attainable. This criterion is especially important when addressing the direction in which the organization is headed.
- The philosophy statement must be worded positively; its meaning must be concise, clear and unmistakable.

The philosophy statement should be developed and distributed to staff prior to the initiation of any effort to develop policies and procedures. It should be the primary point of reference for all policy development; each policy, in fact, should be reviewed for its consistency with the philosophy statement.

B. POLICY AND PROCEDURE CONSTRUCTION

Policies and procedures are not classic works of literature but, rather, useful statements which communicate the facility's philosophy and work plan. The policy and procedure writer, therefore, needs only an ability to write in a style which is readable, easily understood by staff, and consistent from policy to policy and from procedure to procedure. The most effective policies and procedures are those whose language is direct, relatively simple and precise.

1. Policy Construction

a. The policy statement should indicate what action is to be taken in the precise policy topic area. (Exactly how the action is to be performed should appear in the procedures.

b. The statement should include the rationale for the policy.

c. To be clear as well as concise, the following stylistic guidelines should be followed:

(1) Policy statements should be written in complete sentences.

(2) They should be direct and simple. Several short sentences are preferable to long, complex sentences.

(3) Simple present tense or future tense, is preferred.

d. Policy statements should be general but directive. In limited instances, an information item, such as specific time or location, is of such importance to the comprehension of the policy that it must be included in the policy statement. In most instances, however, such detail should be left out of the policy statement and included in the attendant procedure(s).

e. Policy statements must be clear and unmistakable in their meanings. The best way to determine whether the meaning of a policy statement is clear is to have several individuals read it and state in their own words what they perceive the statement to mean.

2. Procedure Construction

Like the policy statement, procedures should describe specific actions concisely and clearly and be written with simple, direct sentences in present and future tense. As procedures usually involve a series of actions to be performed by certain responsible persons and under certain circumstances, the following considerations should be taken:
A procedure cannot exist without a policy. Procedures implement policy; they cannot, therefore, exist independently.

Be sure steps involved in completing the action are listed in the order in which they occur. A common error in developing procedures is to order the steps by the individuals or functional section(s) responsible for their completion. Unfortunately, in this format, the flow of the procedure is lost, increasing the chances of a mistake in completing the procedure.

Indicate the individual (by title) or operational section responsible for the action(s) described in the procedure. Inclusion of this information fixes responsibility for the completion of the procedure and minimizes the recriminating behavior which often occurs when a mistake is made.

Indicate time(s) and location(s) relevant to the operating procedure. If precise information cannot be given, some reference should be made to indicate approximate or relative time(s) and location(s).

If relevant, list precise form(s) to be completed. Identify forms both by name and number.

Identify modes of communication. In most procedures, some form of communication - written, verbal, telephone, radio, intercom, etc. - occurs in one or more of the procedural steps. In instances in which communication occurs between staff and juvenile, also indicate, in general terms, what the staff is to communicate.

C. POLICY AND PROCEDURE FORMAT

As previously indicated, the task forces coordinator must consolidate all constituent policies and procedures and assure that they are issued in a clear, useful and attractive manual format.

1. Final Format: Since the manual will be used by all staff as a source of quick and frequent reference and will be changed periodically in parts, the following format may be most practical:

a. Manual format

(1) Manual pages are put in three-ring binders.

(2) Manual chapters (and other main parts such as an appendix) are separated by cardboard dividers, with tabs (preferably color coded) identifying the chapter by number and title.

b. Document format: Many variations in format may be used to present the policy statement and procedures. Certain elements and facts should be included in any format selected to provide the reader with adequate information which can be placed either in a masthead or in the body of the document:

(1) A classification/policy number which identifies and separates each policy and procedure.

(2) A date to indicate when the policy was issued.

(3) An indication of whether the policy/procedure supersedes another policy/procedure document, memorandum or directive.

(4) A chapter title which covers a particular area such as "Budget and Financial" or "Personnel."

(5) A subject title which describes or identifies the specific subsection of the chapter such as "Budget Request and Justification" or "Personnel Records."

(6) A signature which indicates that the policy/procedure has the approval of an issuing authority.

(7) A citation which references the official document, law, regulation or opinion (including the specific article, chapter, section, etc.) that serves as the foundation of the policy. The appropriate authority for the policy could be a state law, regulation or guideline, a court decision or attorney general's opinion, or an executive order.

(8) A briefly stated purpose or goal of the policy.

(9) An indication of the division, department or personnel to whom the policy is directed.

(10) A list of definitions which provide explanations for key terms and phrases which have a specific meaning in the policy/procedure or which could be misinterpreted.

(11) An implementation schedule or statement which indicates when the policy will be put into effect and the frequency of review and updating.
2. Organization and Content of Manual

a. The task force determines the sequencing of the policies and procedures chapters, making sure that these correspond to functional sections within the facility. Chapters may be preceded by a table of chapter contents for easy reference.

b. Policies and procedures may include additional materials of general, administrative interest such as organizational charts, personnel rules and regulations, copies of relevant forms to be shared with all staff, etc. These optional addenda should be carefully selected so that the manual does not become a catch-all of miscellaneous, and only marginally valuable materials.

c. When the manual chapters and other materials have been put in proper sequence, a table of contents should be written for the entire volume and a title page designed.

d. The manuals may include a “Revision Record” form by which the responsible person keeps track of changes made. The following format may be used:

<table>
<thead>
<tr>
<th>Revision No.</th>
<th>Date Inserted</th>
<th>Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

V. IMPLEMENTATION OF THE POLICY AND PROCEDURE MANUAL

The successful implementation of a policy and procedure manual depends on several key activities. Failure to accomplish any one of the activities discussed below could significantly affect the use of the manual.

A. FINAL REVIEW OF CONTENT: When the manual has been assembled final review of a few copies should be made.

1. Validation and testing procedures should be conducted.
2. Review by experts from within the facility as well as outside is advised. This is consultant time well used.
3. It is also productive to share the draft with other facilities for commentary.
4. Legal assistance ensuring that the policies and procedures are in conformity with the law is indispensable to this process.

B. SUBMISSION FOR FINAL AUTHORIZATION: When task force members are satisfied with the final draft, the policies and procedures manual is submitted to the appropriate authorities for approval.

C. DISTRIBUTION OF MANUAL: For the policy and procedures manual to serve its purpose, it must be made easily accessible to all facility staff and other relevant parties. A small facility may find it feasible to issue a copy to each staff member. In most cases, however, the cost involved prohibits facility wide issuance. At a minimum, the following distribution should be made:

1. Each functional section should receive a copy, issued to the section chief who assures staff accessibility.
2. Each agency with a direct working relationship with the issuing facility should receive a copy.
3. Several copies centrally located should be on hand for public use.

A log should be kept in the central office indicating the number, recipient and location of each manual.

D. TRAINING OF STAFF: A comprehensive training program should be developed to ensure that all staff become familiar with those agency policies and procedures directing them in their assigned responsibilities. It should be designed to provide:

1. Initial as well as on-going training.
2. General as well as specific training.
3. Classroom as well as hands-on experience.
4. Required levels of achievement (established by tests).

VI. MONITORING, ENFORCING AND MAINTAINING THE MANUAL

A system of monitoring the staff's compliance with policies and procedures should be developed to ensure the policies and procedures will have their intended effect. Sanctions for non-compliance should be built into the personnel policies of the facility.

The policy and procedures manual must be treated as a living organism, responsive to change, growth and refinement. To ensure that it continues to reflect current facility philosophy and goals, viable operational procedures and up-to-date legal considerations, the manual must be reviewed and revised as needed—both periodically and on an ad hoc basis.
A. ESTABLISH PROCEDURES FOR PERIODIC REVIEW OF ENTIRE MANUAL:
The manual should be reviewed at least annually in its entirety. The following should be considered:
1. Policies and procedures which have proved to be unclear, inconsistent, or untenable should be rewritten.
2. Policies and procedures which have become outdated should be removed.
3. Policies and procedures should be added, as needed, to reflect new or expanded facility operations and practices.

B. ESTABLISH PROCEDURES FOR CHANGES IN THE POLICIES AND MANUAL ON AN "AS NEEDED" BASIS: In a healthy facility, operations are in a continuous stage of growth and change. Provisions should be made for changing relevant sections in the manual as soon as a policy and/or procedure has been modified, removed or added.

C. ESTABLISH PROCEDURES FOR STAFF RECOMMENDATIONS FOR REVISIONS: An involved and knowledgeable staff is one of the best sources for input into the on-going policies and procedures development; steps should be taken to ensure that staff recommendations will reach and be acted on by the proper authority.

D. ESTABLISH STANDARD PROCEDURE FOR CHANGES IN MANUAL: A standard procedure should be developed for all manual changes. Revised policies and procedures should be issued in the same format used in the manual and be distributed to all manual holders with instructions about:
1. Page(s) to be removed.
2. Location for new page(s) inserts.
3. Effective date of change in policy and/or procedure.

E. ESTABLISH PROCEDURES FOR NOTIFYING STAFF OF CHANGES IN THE MANUAL: All staff must be notified immediately when changes in policies and procedures occur. Since often a section, rather than each staff member, has been issued a manual, bulletins should be distributed to inform all staff as pages in the manual are revised, removed or added.
THE CATEGORIES USED

Each policy document is divided into three distinct sections: the Policy itself, Definitions and Procedures.

I. Policies

The policy statement is the focal point of each document. It must be stated clearly and concisely. Usually, it contains two parts: 1) the reason for the policy and 2) the policy itself. Although the length of policies will vary, they should not exceed two paragraphs. In many manuals, procedural steps tend to be included in the policy, making it difficult to understand and retain. Standards from the National Advisory Commission for Juvenile Justice and Delinquency Prevention, the American Correctional Association and the American Bar Association were used jointly to develop these guideline policies.

II. Definitions

Because some terms are unique to the correctional field and/or may be interpreted in more than one way, a section for definitions is necessary to clarify explanations and to reduce confusion or misinterpretation on the part of the new staff member.

III. Procedures

The procedure statements describe who, when, where and how the policy will be implemented. Statements are detailed, sequential, step-by-step descriptions of the activities needed to implement the policy.

SAMPLE HEADING BLOCKS

For local use, the variety of heading block formats is unlimited. The following samples are typical of information frequently used in policy and procedure manuals.
# TABLE OF CONTENTS

**PREFACE**

**INTRODUCTION**

A GUIDE TO DEVELOPING A POLICY AND PROCEDURES MANUAL

**USER'S KEY**

SAMPLE POLICIES AND PROCEDURES FOR JUVENILE DETENTION FACILITIES

**CHAPTER 1**

ADMINISTRATION, ORGANIZATION AND MANAGEMENT

1.1 Establishing the Facility and Delineating its Mission

1.2 Coordination with Community Agencies and Educational Institutions

1.3 Establishment of Facility Director and Defining Criteria for Selection

1.4 Roles of Consultants, Contract Employees & Employees of Other Agencies

1.5 Organizational Staffing Chart

1.6 Communications

1.7 Establishment & Maintenance of Manuals

1.8 Referral, Screening and Placement of Juveniles

1.9 Facility Program Reporting and Review

1.10 Legal Assistance for Director and Staff

1.11 Relationships with Public, Media and Other Agencies

1.12 Supervision of Non-Staff

1.13 Monitoring and Reporting Abuse and Neglect
CHAPTER 2
FISCAL MANAGEMENT
2.1 Fiscal Responsibility and Budgeting
2.2 Accounting for Appropriations and Expenditures of Funds
2.3 Juvenile Fund Accounts
2.4 Internal Control and Monitoring of Accounting Procedures
2.5 Inventory Control
2.6 Procurement
2.7 Position Control & Procurement of Community Program Services
2.8 Insurance Coverage
2.9 Juvenile Canteen Accounts and Audits of the Account

CHAPTER 3
PERSONNEL
3.1 Personnel Selection, Retention, and Promotion
3.2 Affirmative Action Plan
3.3 Performance Evaluation of Probationary Staff and Annual Performance Ratings for all Staff
3.4 Staff Pay Comparability and Expense Reimbursement
3.5 Staff-Supervisors Relations and Grievances
3.6 Establishment and Review of the Personnel Manual
3.7 Code of Ethics
3.8 Regular Review of Staffing Requirements
3.9 Personnel Records

CHAPTER 4
TRAINING AND STAFF DEVELOPMENT
4.1 Training & Training Criteria

CHAPTER 5
ADMINISTRATIVE INFORMATION & RESEARCH
5.1 Administrative Information Systems

CHAPTER 6
INTAKE
6.1 Juvenile Intake Procedures

CHAPTER 7
ADMISSION PROCEDURES
7.1 Juvenile Admission Procedures
7.2 Personal Property

CHAPTER 8
RECORDS
8.1 Admission Record Requirements
8.2 Case Record Maintenance
8.3 Master Index and Daily Population Movement Report

CHAPTER 9
PHYSICAL PLANT
9.1 Requirements for Facility Service Areas
9.2 Preventive Maintenance Program
9.3 Independent Audits of Conditions of Environmental Health
9.4 New Facility Planning and Remodeling
CHAPTER 10
SAFETY AND EMERGENCY PROCEDURES

10.1 Control and Use of Flammable, Toxic and Caustic Materials

10.2 Safety Program and Evacuation Plans for Fire and Bomb Threats

10.3 Fire Prevention Procedures and Fire Drills

CHAPTER 11
SECURITY AND CONTROL

11.1 Control Center

11.2 Perimeter Security

11.3 Juvenile Supervision and Movement

11.4 Post Orders

11.5 Count Principles & Procedures

11.6 Transfers & Transportation of Juveniles Outside the Facility

11.7 Facility Inspections, Use of Permanent Logs

11.8 Searches of Juveniles and Various Locations

11.9 Key Control

11.10 Tool Control

11.11 Use of Official and Personal Vehicles

11.12 Control of Firearms and Other Security Equipment

11.13 Use of Force

11.14 Facility Emergency Plan

CHAPTER 12
FOOD SERVICE

12.1 Nutritional Adequacy of Diet for Juveniles

12.2 Menu Planning and Meal Service

12.3 Safety & Sanitation for Food Service Standards

CHAPTER 13
SANITATION AND HYGIENE

13.1 Housekeeping and Inspection of Sanitation Practices

13.2 Waste Disposal & Pest Control

13.3 Bathing and Hair Care Facilities for Juveniles

CHAPTER 14
MEDICAL AND HEALTH CARE SERVICES

14.1 Medical Program Administration

14.2 Hospital Facilities and Equipment

14.3 Physical Examinations

14.4 Mental Health Care Program

14.5 Emergency Dental Care

14.6 Sick Call

14.7 Special Health Care Programs

14.8 Prohibition on Medical Experimentation

14.9 Informed Consent

14.10 Notification of Illness or Death

14.11 Use of Pharmaceutical Products

14.12 Medical Records

CHAPTER 15
JUVENILE RIGHTS

15.1 Legal Rights of Juveniles

15.2 Environmental & Programmatic Rights of Juveniles

15.3 Juvenile Access to the News Media

15.4 Juvenile Grievance Procedure/Juvenile Advocacy/Ombudsperson
CHAPTER 16
RULES AND DISCIPLINE
16.1 Rules and Regulations
16.2 Minor Violation Resolutions
16.3 Disciplinary Reports
16.4 Disciplinary Procedures for Major Rule Violations and Adjustment Committee

CHAPTER 17
PROGRAMS
17.1 Juvenile Education Program
17.2 Religious Programming
17.3 Library
17.4 Other Services
17.5 Counseling

CHAPTER 18
COMMUNICATION: MAIL, VISITING AND TELEPHONE
18.1 Juvenile Correspondence
18.2 Access to Telephone and Telegraph
18.3 Juvenile Visiting

CHAPTER 19
RELEASE PREPARATION AND TRANSFER
19.1 Review and Modification of Initial Detention Decisions
19.2 Release, Transfers and Leaves

CHAPTER 20
CITIZEN INVOLVEMENT AND VOLUNTEERS
20.1 Volunteers
**CHAPTER 1**

**ADMINISTRATION, ORGANIZATION AND MANAGEMENT**

**COMMENTARY**

This chapter encompasses American Correctional Association Standards 2-8001 through 2-8007, 2-8009 through 2-8026, 2-8030, 2-8033 through 2-8041, 2-8072 through 2-8074, 2-8184, 2-8198, 2-8212

National Advisory Committee Standards In. M-1, 1.1, 1.11, 1.12, 1.23, 1.29, 1.429, 2.31, 3.131, 3.134, 3.151, 3.152, 3.153, 3.2, 3.33, 4.1, 4.2121, 4.2122, 4.2192, 4.24, 4.26, 4.262, 4.263, 4.44

American Bar Association Standards 2.9, 6.6, 10.4, 10.6, 11.2

The policies are about establishing the facility, assigning management authority and developing a framework for facility programming and relationships with the community.

When developing policies and procedures for a facility, the parent agency must decide the level of central administrative control desired and the degree of managerial latitude to be extended to the local Directors and Assistant Directors. In this chapter the project staff have chosen to propose that power. The sample policies, therefore, establish broad outlines leaving more detailed operational procedures to the local Director and his/her staff.

---

**Sample Policies and Procedures**

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>5</td>
</tr>
</tbody>
</table>

**JUVENILE DETENTION FACILITIES**

**Chapter:**

ADMINISTRATION, ORGANIZATION AND MANAGEMENT

**Subject:**

Establishing the Facility and Delineating its Mission

**Related Standards:**

ACA: 2-8001 through 2-8004, 2-8033 through 2-8041

NAC: 1.1, 4.1, 4.26, 4.263

ABA: 11.2

**I. POLICY:** This facility is established to provide short term care in secure custody to juveniles who are accused or adjudicated pending prompt court action or awaiting transfer to another facility and who cannot be served in an open setting. Specifically the facility shall:

A. Provide for the juvenile's basic needs, such as shelter, food, clothing and medical care.

B. Prevent the abridgment of the juvenile's legal rights during his/her detainment at the facility.

C. Provide for physical, emotional, religious, educational and social needs of juveniles during detainment.

D. House the juvenile in a safe, humane environment, maintaining the level of security necessary to prevent escape and assure that juveniles live free of fear of assault or intimidation by staff or other juveniles.

**II. DEFINITIONS:** As used in this document, the following definitions shall apply:

A. Parent Agency: The controlling body of the facility, responsible for coordinating the local juvenile detention center.

B. Director: Responsible for organizing and managing the facility. His/her responsibilities include fiscal management, personnel management, management information and research, medical and health care services and inter/intra-facility communication.

**III. PROCEDURES:**

A. Legal Establishment:

1. The facility or its parent agency has a local governing authority.
2. The facility operates under a constitution or articles of incorporation that meets all of the legal requirements of the governmental jurisdiction in which the facility is located.

3. The facility has bylaws, approved by the governing authority, filed with the appropriate local, state and/or federal body. At a minimum, the facility bylaws include:
   a. Membership (types, qualifications, community representation, rights, duties).
   b. Size of the governing body.
   c. Method of selection.
   d. Terms of office.
   e. Duties and responsibilities of governing officers.
   f. Times authority will meet.
   g. Committees.
   h. Quorums.
   i. Parliamentary procedures.
   j. Recording of minutes.
   k. Methods of amending the bylaws.
   l. Conflict of interest provisions.

4. If services for adult and juvenile offenders are provided by the same parent agency:
   a. The statement of philosophy, policy, program and procedure shall distinguish between criminal codes and the statutes which establish programs for juveniles.
   b. A separate service delivery system for juveniles shall exist.

5. The facility or its parent agency has identified, documented and publicized its tax status with the Internal Revenue Service.

B. Development and Management: The Director shall develop and manage all phases of the facility within parameters established by law and the parent agency. The Director in cooperation with the parent agency shall develop a mission plan for the facility. This plan shall include the facility's purpose, philosophy and long range goals based on accepted practice, current constitutional regulations (such as court decisions and state statutes) and professional requirements (such as national and state standards). Detention facilities for juveniles are separate and distinct from facilities such as jails for adults; this separateness implies that the juvenile's experience should be different from that he/she might have in an adult institution. The facility's mission statement, therefore, shall include these implications:

1. That juveniles need protection from abuses that might occur in an adult institution.
2. That the detention period should be structured to reflect the adolescent phase of the juvenile.

The mission statement shall also include the facility's long range goals about:

1. Facility philosophy for:
   a. Purpose of detention.
   b. Secure custody of juveniles (while maintaining their right to live free from fear of assault and intimidation by others).
   c. Legal rights of detained juveniles (listing specific procedures for preventing violation of these rights).
   d. Physical and psychological care of juveniles (including shelter, food, clothes, etc.).

2. Facility programs in:
   a. Diagnosis and Prescription: The careworkers shall:
      (1) Assess the juveniles strengths and weaknesses through the use of a variety of screening techniques.
      (2) Identify the reasons for any difficulties experienced by the juveniles in school and transmit that information to the probation officer or caseworker.
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMINISTRATION, ORGANIZATION AND MANAGEMENT</td>
<td>Establishing the Facility and Delineating its Mission</td>
<td>1.1</td>
</tr>
</tbody>
</table>

- (3) Distribute the assessment data collected to the probation officer/caseworker.
- (4) Arrange for any specialized medical and/or psychological testing deemed essential or court ordered.
- (5) Offer a diagnostic perspective of the juvenile's educational needs to school, court, and other involved agencies/individuals.

b. **Education**: This program shall:

- (1) Replace patterns of failure in the juvenile's education experience with a sense of achievement.
- (2) Encourage the juvenile to complete his/her education.
- (3) Provide educational services to temporarily detained juveniles so that they may continue their education.
- (4) Provide occupational and vocational counseling, emphasizing the skills, knowledge, habits, and attitude required for employment.
- (5) Introduce community resources to the juveniles.

c. **Counseling (Individual and Groups)**: These sessions shall:

- (1) Deal primarily with problems involving the day-to-day detention living, and secondarily with the potential problems the juvenile may face after leaving the facility.
- (2) Provide information to the juvenile to reduce anxieties about his/her living situation.
- (3) Improve the quality of staff-juvenile relationships helping the juvenile respond more positively to adults as authority and guidance figures.
- (4) Assist the juveniles in finding solutions to problems for themselves.

d. **Recreation (Arts and Crafts)**: These programs shall:

- (1) Provide activities that upgrade the juvenile's self concept through developing personal skills and aptitudes and providing opportunities for achievement and success.
- (2) Provide activities that expend energy and allow physical and psychological release for the juvenile.

c. **Annual Review**:

1. The Director shall hold meetings at least annually with the facility administration to enhance communication, establish policy, explore problems, etc.
2. The mission statement that describes philosophy, goals and purpose of the facility, shall be reviewed and updated at least annually to reflect changes in the juvenile detention process.
3. Goal predictions shall be:
   - (a) Assigned to specific staff members.
   - (b) Assigned a specific date for completion.
   - (c) Designed to enable periodic goal achievement.

**Effective Date**

**Approved By**
I. POLICY: The Director shall coordinate planning efforts with community related groups and service providers to assure maximum use of available resources for detained youth. He/she shall also cooperate with other departments, divisions and agencies of the state, its political subdivisions and municipalities, as well as appropriate private agencies and organizations, to assist in providing necessary services for those juveniles who must be detained.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Community Based Programs: Programs in which the community and the consumer (or juvenile involved) participates in the planning, operation and evaluation aspects of the program.

B. Educational Resources: Public school boards, colleges and other institutions of higher learning and/or individual school programs or services offered to non-institutionalized youth.

III. PROCEDURES: Since severely reducing a juvenile's ties with family, peers and other support systems within the community can only increase the juvenile's feeling of alienation, even for a short detention stay, the facility Director shall maintain as close a tie with the community as is possible.

A. Coordination with Community Based Programs and Services:
1. Maintaining ties with the community requires at least:
   a. Opportunities for the juvenile to visit with family and friends.
   b. Involvement in appropriate community activities.
   c. Permitting volunteers from the community to work directly with the juvenile.
   d. Fully using community services and resources and not duplicating them at the facility.

2. Citizen's Advisory Board shall be appointed by the Parent Agency. The members shall be a representative group of citizens who are active in community affairs and have a broad background in juvenile welfare interests. Varying degrees of authority shall be delegated to the Advisory Board including evaluating, advising, recommending and supporting policies and procedures that are in the best interest and general well-being of the juveniles. Its specific functions are:
   a. To evaluate existing programs and funding needs.
   b. To assist in securing needed funds from governmental sources, etc.
   c. To provide input about detention facility decisions affecting the public.

3. Interagency Cooperation:
   a. Since the operation of a facility both affects and is affected by other agencies within and outside the juvenile justice system, an information sharing mechanism shall be established to maintain contact with advisory committees, justice councils, state and regional planning organizations and other community resources.
   b. General guidelines and procedures for referral shall be developed in cooperation with the juvenile court, intake staff, probation officer and the community-based program about conditional and unconditional release of juveniles to these programs, payment for services, emergency use, etc. These agreements shall be monitored and updated as needed or at least on an annual basis. (See 19.1 & 19.2.)

4. Facility and Community Based Programs:
   a. The facility Director in conjunction with the state agency shall develop and maintain a current inventory of all state and local juvenile justice and delinquency prevention services. This inventory would aid the facility's planning process by both identifying existing programs and determining program needs.
b. The facility Director shall keep an up to date file on available community based programs and services which can be used as referral sources for youth whose circumstances do not (or no longer) require secure confinement.

B. Coordination of Educational Resources:

1. Based on assessments of detainees' educational needs and problems, the state or local educational institution shall be notified of the general educational service needs of this population, as well as special cases requiring remedial assistance. Notification will be made in time to assure that annual budgetary planning and fiscal arrangements can be made to assure effective delivery of educational support services.

2. The facility shall collaborate with local colleges and universities in programs of mutual concern. Qualified persons from these institutions shall:

   a. Serve as advisors for policies and facility programs.

   b. Arrange special training conferences and seminars when appropriate.

A specified facility staff member shall be designated to initiate and maintain contact with these institutions. (See 17.1.)

C. Professional Membership: Staff members are encouraged to apply for membership in related professional organizations to enable them to stay abreast of developments in the field, and to upgrade their skills through participation in workshops and conferences.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMINISTRATION, ORGANIZATION AND MANAGEMENT</td>
<td>Coordination with Community Agencies and Educational Institutions</td>
<td>1.2</td>
<td>1.3</td>
<td>2</td>
</tr>
</tbody>
</table>

I. POLICY: To operate the facility in accordance with state and federal laws, parent agency policies, executive orders and judicial decisions, a Director shall be appointed to manage the total operations of the facility.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Chief Executive Officer of the Parent Agency: The employee responsible for management and direction of the parent agency.

B. Bachelor's Degree: A degree given by a college or university to a person who has successfully completed a four year course program.

III. PROCEDURES:

A. Appointment of the Director: The appointment shall:

1. Be made by the Chief Executive Officer of the parent agency.

2. Be made from the best qualified group of applicants with the following minimum qualifications:

   a. A bachelor's degree in an appropriate discipline.

   b. Two years of experience working with juveniles and/or

   c. Three years of related administrative experience equivalent to a bachelor's degree.

B. Skills of Director:

1. The Director should have broad-based training:

   a. In the law and procedures of the family court.

   b. In the relevant policies of pertinent agencies, including local law enforcement, etc.
c. In the common legal problems of juveniles.

d. In the causes of delinquency and family problems.

e. In crisis intervention techniques.

2. The Director must be trained in management, planning, research, evaluation and program coordination.

C. Term of Office of the Director: Each Director shall be appointed to continuous service after completion of a one year probationary period.

D. Removal of the Director: Termination may be accomplished only by the appointing officer, for good cause, and, if requested, following a formal and open hearing on the specific charges.

I. POLICY: To avoid confusion, the duties and responsibilities of consultants and contractors who provide a service to the facility should be clearly specified in a contract or other type of agreement. If services for adult and juvenile offenders are provided for by the same agency, statements of philosophy, policy, program and procedure distinguish between criminal codes and the statutes which establish and give direction to programs for juveniles; there is a separate service delivery system for juveniles.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Service Providers: Persons who perform duties and/or services in the facility on an infrequent basis, i.e., meter readers, repairpersons, police officers investigating charges unrelated to facility operations, tax agents, tour groups, vendor representatives, etc.

B. Part Time Service Providers: Persons who have on-going relationships with the facility. These persons shall be given identification cards enabling them to conduct business within the facility.

III. PROCEDURES:

A. Issue of Identification Cards: I.D. cards may be issued by the Assistant Director for Program Operations after receiving:

1. A completed application form listing all information relevant to the program or service offered.

2. Approval by the appropriate supervisors and/or the Director.

3. Written agreement from the provider to abide by the:

   a. Rules of conduct expected with juveniles.
   
   b. Code of ethics requirement.
   
   c. Security and disciplinary procedures of the facility.
4. Identification cards shall:
   a. Display the photograph of the service provider.
   b. List name, address, assignment, work schedule, and social security number.
   c. List section sponsoring the service provider and contact person for that section.
   d. Be valid for one year or until completion of the assignment.
   e. Display the Director's signature.

B. Card Distribution: Notification of approval by the Assistant Director for Program Operations of all part-time providers shall be made to the:
   1. Director.
   2. Control Center
   3. Front Entrance.
   4. Sponsoring Section.
   5. Section Chief.
   6. Service Provider.

C. Records: The Office Manager shall maintain a file of both:
   1. A current list of all valid cardholders.
   2. A list of expired or invalid cards.

D. Supervision of Part Time Agents: Identification cards authorize service providers to proceed through the facility under minimal staff supervision and direction.

I. POLICY: The organizational staffing chart shall be developed to assure an adequate staffing plan to meet the needs of the juveniles and the mission of the facility and shall define responsibility, place staff into related units promoting efficiency and provide a clear chain of command from the entry level position to the Director.

II. DEFINITIONS: Titles used on the sample organizational chart are optional and can be applied to any facility. Listed below are brief descriptions of the duties and requirements of some of the administrators and staff members.

A. Parent Agency: The controlling body of the facility, responsible for operating and coordinating the local juvenile detention center.

B. Director: Responsible for organizing and managing the facility. His/her responsibilities include fiscal management, personnel management, management information and research, medical and health care services, and communication.

C. Assistant Director for Management Services: Responsible for food service, building supervision, transportation, and sanitation and hygiene, as well as staff development in these areas.

D. Assistant Director for Program Operations: Responsible for juvenile care and programming, juvenile records, safety and emergency procedures, juvenile rights, rules and discipline, intake and admission procedures, release preparation and transfer programs, citizen and volunteer involvement, shift supervisors, and juvenile care workers, as well as staff development in these areas.
E. Program Staff:

1. Juvenile Careworker: (At a minimum; 2 per living unit.) Responsible for all direct care services; should have a high school degree or its equivalent and at least one year of full-time paid experience in working with juveniles in facilities or in the community.

2. Classroom Teacher: (At a minimum; 1 full time teacher for every 10 juveniles.) Responsible for diagnosing and prescribing individualized educational plans for each admitted juvenile, for developing and implementing lesson plans and for motivating the juvenile in the classroom; should have at least a teaching certification under the law of jurisdiction; special education certification is desirable.

3. Dietician: (One full time.) Responsible for planning, ordering and preparing all meals at the facility; should be licensed or certified under the law of jurisdiction, having special training in allergic reactions, hyperactivity, etc.

4. Recreation Staff: (One full time.) Responsible, in conjunction with Assistant Director for Program Operations, for organizing and supervising physical activities; should be trained in physical education.

III. PROCEDURES:

A. Constructing the Organizational Chart: The Director is responsible for constructing and maintaining the organizational chart.

B. Organizational Chart Review: The organizational chart shall be reviewed annually by the supervisor of each function who shall submit all revisions with comments from the staff, to the Director for review, approval or revision. This review shall be completed at the beginning of each fiscal year.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMINISTRATION, ORGANIZATION AND MANAGEMENT</td>
<td>Organizational Staffing Chart</td>
<td>1.5</td>
</tr>
</tbody>
</table>
*Section Chiefs
I. POLICY: To operate in an efficient and consistent manner, appropriate channels of communication shall exist.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Meetings: A series of meetings shall be held at various levels and at specified intervals. These meetings should take a minimum of time without losing effectiveness. Suggested levels include:
   1. Administrative meetings.
   2. Sections Chiefs' meetings.
   3. Administration - Juvenile Careworkers meetings, etc.

B. Administrative Conferences: To ensure the early identification of problems such as inappropriate length of stay, weaknesses in admission control, etc., and to ensure an accurate flow of information between staff and probation agencies, courts, police agencies, and other justice system agencies, regular meetings and case conferences between administration and juveniles' court caseworkers must be conducted.

C. Director's Staff Meetings: Director's staff meetings shall be held each month:
   1. An agenda of discussion items shall be distributed prior to the meeting.
   2. Attendees shall include Assistant Directors and Section Chiefs.
   3. The Director shall discuss policy/program changes and directives which are of general interest to the group.

D. Staff Communication: All staff and volunteers shall have the opportunity to initiate, advise and consult in forming policies, procedures, and programs at the facility.

1. Bi-weekly meetings between the Section Chiefs and staff of each section shall be held to discuss on-going operations and recommended changes. Minutes shall be forwarded to the appropriate Assistant Director for feedback.

E. Communications Techniques: Communication between juveniles and staff is essential to efficient operation of the facility. The Assistant Director for Program Operations shall encourage verbal and written communications conducted in an orderly and systematic procedure.

1. Office assignment shall place program oriented staff in proximity to the juvenile group.
2. A facility internal mail service shall be organized to offer juveniles a system through which to contact staff members most apt to respond to the juvenile's request.
I. POLICY: To disseminate policies, procedures and rules, a facility program description shall be established. These program descriptions shall be both general enough to address overall parent agency and facility goals, and specific enough to assist the administrative staff to perform their duties effectively.

II. DEFINITIONS: None.

III. PROCEDURES: The program description shall be written by the administrative staff, reviewed and commented upon by all staff, and approved by the parent agency. A copy shall be given to each staff member and revised as necessary to reflect the policies and operations of the facility. Further, it shall be used as a training manual for all new staff during the orientation period.

A. Development: The program description shall begin with broad mission statements and goals, and phase down accordingly to specific facility objectives. The following step process shall be used in developing the manual:

2. Goals: Statements of specific intentions based directly on the facility mission. Goals can be accomplished by developing one or more measurable objectives for each goal.
3. Objectives: Statements of specific activities worded in objective, quantifiable terms with specific measurable criteria for each objective.
4. Tasks: Statements of individual functions based directly on the objectives. These tasks become the basis for staff performance evaluation.

B. Description: The program description shall include:

1. The rules, regulations and laws of the parent agency.
### Sample Policies and Procedures

**Chapter:** JUVENILE DETENTION FACILITIES

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.8</td>
<td>3</td>
</tr>
</tbody>
</table>

**Related Standards:**

- ACH: 2-8005, 2-8006
- NAC: 3.151, 3.152, 3.153
- ABA: 2.9, 6.6, 10.4

**Subject:** Referral, Screening & Placement of Juveniles

---

**I. POLICY:** Proper referral, screening and placement shall be provided for all alleged or adjudicated delinquent juveniles accepted at the facility. Abused, dependent or neglected children and juveniles charged with offenses that would not be crimes if committed by an adult are not held in the facility.

**II. DEFINITIONS:** As used in this document, the following definitions shall apply:

- **A. Status Offenders:** Juveniles who commit acts that would not be against the law if committed by an adult.
- **B. Diversion Services:** Contracted beds and foster homes which provide a less restrictive environment.
- **C. Delinquency:** Any crime under federal, state, or local law committed by a juvenile.

**III. PROCEDURES:**

**A. Referral Criteria:** Juveniles may be admitted into secure detention for the following reasons:

1. Juveniles who are arrested, who have an outstanding bench warrant or who do not fall into the mandatory release guidelines.
2. Juveniles who are ordered into secure detention by the Juvenile Session of the District Court.
3. Juveniles who are in custody of out-of-county police agencies who have a detention/custody/court order allowing detention while in transit or an out of state juvenile being held by order of another state's authorization.
4. Juveniles whose parent or guardian cannot be contacted, or will not come to get the juvenile, or the juvenile refuses to go home. Status offenders will be referred immediately to the diversion services, unless otherwise ordered by the court.

5. Those juveniles eligible and referred to diversion programs who are rejected because no current space exists for placement.
6. Those juveniles verbally ordered to be held by a judge after normal court hearing hours; the court order, however, must be sent the following day.

**B. Screening:**

1. Release to parents/guardians/responsible adults all juveniles who fall within the mandatory release or discretionary guidelines for release.
2. Place in diversion services those status offenders for whom a full release cannot be obtained.
3. Before admission to the facility, all juveniles must be screened for acute illness, injury and substance intoxication.

**C. Service Provision:** The Shift Supervisor shall ensure proper admission procedures:

1. Detention screening to determine eligibility for release.
2. Pre-admission medical and social history screening.
3. Determination of outstanding bench warrants.
4. Initial intake completed.
5. Examination and completion of legal paperwork and admission information.
6. Diversion services placement, if appropriate.
7. Detailed medical screening and strip search for contraband.
8. Drug/alcohol history screening.
9. Notification of admission to parent or guardian.
10. Assignment of section according to age, sex, type of offense, size, maturity, prior behavior, etc.
11. Assessment testing for educational levels and entry into an educational plan.
12. Psychological and psychiatric services when appropriate.
13. Adjustment counseling on a daily basis for at least the first week of residency.

D. Classification of Juveniles: No formal treatment classification system is warranted in a short-term detention facility. The following, therefore, is a quick, assessment procedure to classify the juvenile, without compromising his/her pre-adjudicated status. Juveniles may be classified according to:

1. Sex
2. Age
3. Risk factor (seriousness of offense)
4. Special problems (homosexuality, medical/mental problems, suicidal, etc.)

E. Termination Procedures: Only those juveniles who have been in court, and who have been ordered released from detention or do not fall under mandatory admission guidelines, are released. Once released into the custody of a parent or guardian, court ordered placement, or other supervisory authority, juveniles will have all personal items returned to them and may leave the facility. (See 19.1.)
8. EEO program accomplishments.

9. Staff training.

10. Community activity.

C. Correction Performance Monitoring Procedures: To enable the Director to report on whether the detention center is meeting its intent, that is, keeping both the public and the juveniles safe; accepting only those juveniles who belong in a secure setting because they are unable to function in a less restrictive environment; and providing a humane atmosphere during the juvenile's brief detention stay. Performance Monitoring Procedures (see end of policy) shall be implemented at least annually.

1. The Parent Agency in conjunction with the facility Director can use the information provided by these monitoring procedures:

a. To assess the status of the facility in meeting professional requirements and standards.

b. To determine the efficiency of the detention process from initial intake through adjudication to release or transfer.

c. To motivate juvenile detention careworkers and staff to upgrade and/or maintain high quality treatment and services.

d. To identify specific problem areas; to determine alternate solutions and cost to the facility.

e. To increase accountability of the detention center staff to the public and to elected officials.

2. Evaluating every aspect of the facility on one form would prove cumbersome and therefore, ineffective. Only four major objectives of the detention facility operation shall be addressed on this form:

- Security and Control
- Intake and Admission
- Humane Treatment
- Release and Transfer
OBJECTIVES

Security/Control

Intake/Admission

Institutional Abuse

Humane Treatment-Life and Safety

Facility Atmosphere

Overcrowding

Safety/Emergency

Fire Safety

Sanitation/Hygiene

Physical Health

Education

Recreation

Religious

Citizen/Community Involvement

Policies and Procedures

Sample Juvenile Detention Facility

Corrections Performance Measures

Table: Performance Measures

<table>
<thead>
<tr>
<th>Objective</th>
<th>Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security/Control</td>
<td>1. Inmate Frequency</td>
</tr>
<tr>
<td>Intake/Admission</td>
<td>2. Number of Inmate Incident Reports/Incidents</td>
</tr>
<tr>
<td>Institutional Abuse</td>
<td>3. Written Criteria For Initial Juvenile Reports/Incidents</td>
</tr>
<tr>
<td>Humane Treatment-Life and Safety</td>
<td>4. Written Criteria For Initial Staff Reports/Incidents</td>
</tr>
<tr>
<td>Facility Atmosphere</td>
<td>5. Number of Inmate Days Spent In Custody</td>
</tr>
<tr>
<td>Overcrowding</td>
<td>6. Average Population, Total Population</td>
</tr>
<tr>
<td>Safety/Emergency</td>
<td>7. Number of Injuries Per 100 Inmates</td>
</tr>
<tr>
<td>Fire Safety</td>
<td>8. Number of Injuries Resulting in Hospitalization</td>
</tr>
<tr>
<td>Sanitation/Hygiene</td>
<td>9. Number of Injuries Resulting in Hospitalization</td>
</tr>
<tr>
<td>Physical Health</td>
<td>10. Number of Suicides</td>
</tr>
<tr>
<td>Education</td>
<td>11. Number of Inmates Diagnosed with Mental Health Problems</td>
</tr>
<tr>
<td>Recreation</td>
<td>12. Number of Inmates Diagnosed with Mental Health Problems</td>
</tr>
<tr>
<td>Religious</td>
<td>13. Number of Inmates Diagnosed with Mental Health Problems</td>
</tr>
<tr>
<td>Citizen/Community Involvement</td>
<td>14. Number of Inmates Diagnosed with Mental Health Problems</td>
</tr>
</tbody>
</table>

I. POLICY: The Director and all staff shall be provided with adequate and appropriate legal advice in the performance of their duties. This shall include legal representation before courts and other appropriate bodies.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Statute: A law enacted by a representative legislative body and set forth in a formal document.

B. Legal Performance: Actions conforming to and permitted by law.

III. PROCEDURES:

A. Counsel Availability: The office of the State/County/City Attorney is available for advice, consultation and/or representation to the Director and other staff for any or all:

1. Legal actions against the Director and/or staff.
2. Court decisions.
3. Offender rights issues.

B. Legal Advice: Consultation is available on:

1. Legal actions against the Director and/or staff.
2. Court requirements.
3. Inmate medical requirements.

C. Requests for Legal Assistance: Requests for legal assistance may be made verbally or in writing to the Director or the parent agency. All requests must be accompanied with adequate background information and/or supporting documents to explain the need for assistance.
D. Evaluation of Requests for Legal Assistance: The parent agency shall provide appropriate representation to all staff members of the facility who are legitimately conducting their respective duties. Should substantial evidence indicate the staff member's conduct was negligent, illegal or intentionally outside his/her scope of authority, legal representation may be denied. If a staff member is denied legal representation, written decision justifying the reason for the decision and right of appeal information shall be provided by the State/County/City Attorney, including the Director and Staff; 1.10

E. Channels of Communication: Facility staff shall direct all requests for legal advice or representation to the Director. All requests shall then be forwarded to the office of the State/County/City Attorney along with the Director's comments and recommendations.

I. POLICY: To promote an understanding of the facility's philosophy and goals, a public information program shall be developed. All facility staff shall strive to maintain integrity and credibility with the general public and with those persons and organizations legitimately involved with the facility.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Executive Correspondence: Individually addressed and signed letter not to include form letters or routine forms to which facsimile signatures are attached.

B. Executive Staff: Director, Assistant Director for Management Services and Assistant Director for Program Operations.

III. PROCEDURES:

A. Coordination of Communication: The Director is designated as the facility's public information officer. The duties of the office shall include:

1. Written Communication:
   a. Executive Correspondence: Initial reviewing of all executive correspondence from legislative bodies, courts, law enforcement agencies and representatives of the news media.
   b. Mandatory Response: Preparing written response to all letters within three working days of receipt.
   c. Correspondence Records: Recording all incoming and outgoing executive correspondence and copies of the correspondence.
Chapter Subject Policy

ADMINISTRATION, ORGANIZATION AND MANAGEMENT

<table>
<thead>
<tr>
<th>Chapter Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationships with Public Media and Other Agencies</td>
<td>1.11</td>
</tr>
</tbody>
</table>

1. **Routing Method:** Informing appropriate officials of applicable correspondence. All replies to requests for information shall be answered unless some question about the validity of the information or an individual's right of privacy exists. Those requests may be referred to the office of legal counsel.

2. **Verbal Communication:**
   
   a. **News Media Visits:** Visits from the news media are encouraged and shall be handled directly through the Director's office. The Director shall:
      
      1. Allow media access to all program areas of the facility.
      2. Preserve the juvenile's individual right of privacy.
      3. Portray a factual picture of the facility.
      4. Ensure that representatives of the news media are aware of security restrictions.
   
   b. **Media Statements:** News statements on legislation or government policy affecting detention purposes or function of the community are the responsibility of the parent agency. The Director and Assistant Directors have authority to comment on daily operations.
   
   c. **Contact with the Public:** Staff contact with the public is expected to be conducted with professionalism. All staff shall receive special training to ensure prompt, courteous and correct responses to inquiries. This training shall include:
      
      1. The Right of Privacy Act.
      2. Public information legislation.
      3. Approved telephone procedures.
      4. Basic instruction in policies relating to contact with the public.
   
   d. **Release of Official Information:**
      
      1. Individual staff members receiving requests for official information from groups mentioned in this policy statement shall forward all such requests to the Director. All inquiries must be answered promptly, accurately and completely in compliance with local, state and federal laws governing public information and rights of privacy.

3. **Parental Involvement:**
   
   a. **Notification:** Admissions personnel must notify parents immediately upon a juvenile's admission. Parents should also be notified immediately of illness, transfer or transfer to another facility.
   
   b. **Visiting:** Regular visiting hours are established, but special arrangements may be made with the Director or Assistant Directors' approval. Visiting hours shall be posted in a prominent place in the visiting area.
   
   c. **Telephone/Mail:** Policies for use of telephone and mail encourage parental involvement.
   
   d. **Open House:** The facility shall have an open house annually, to which parents and the general public will be invited. Tours, informational programs and access to supervisors and staff shall be made available.

4. **Communication Standards:**
   
   a. All public statements should agree with policies approved by the parent agency and be confined to areas of direct responsibility.
   
   b. Juveniles may not be interviewed or photographed for news coverage connected with their delinquency charges.
   
   c. Juveniles may be interviewed or photographed for news coverage of the facility programs, with the signed consent of the juvenile and his/her parent/guardian and attorney.
   
   d. No information on juveniles or their charges may be given to the media.

5. **Tours:** In accordance with the established policy, the following specific procedures are required for tours:
   
   a. Approval shall be given by the Director.
2. A designated staff person will conduct approved tours.

3. Request for tours must be in writing, including a specific date and time, listing the first and last names of all participants, and stating the reason for the request.

4. Tours will be limited to a schedule that provides the least interference to the operations of the facility.

5. Tours will exclude minors, as determined by state law.

E. Community Education: Staff of the facility shall participate in informational programs for the general public to improve the community’s understanding of the mission, goals, and programs of detention. Secondary purposes include providing a channel for community input, recruiting volunteers, and developing community support.

1. A committee of staff persons shall coordinate the program by arranging speaking engagements with schools and community organizations.

2. A record is kept of where community visits take place and how many people were reached.

3. Data is compiled from evaluative questionnaires answered by the audience.
D. Except in a riot situation where a juvenile has obtained a projecile firing weapon, and then only upon the approval of the Director, no firearm or riot control equipment is to come beyond the vestibule door. Under no circumstances will approval be granted for admission of chemical agents used for security purposes.
III. PROCEDURES:

A. Legal Responsibility: As mandated by law, anyone who knows or suspects that an incident of alleged child abuse or neglect has occurred must immediately report this to the local Division of Youth and Family Services. Reports should include the following information, if possible:

1. Name and address of the facility and the name and address of the juvenile’s parents or legal guardians.
2. Age of juvenile.
4. Any previous injury or maltreatment.
5. Name of alleged perpetrator; and
6. Any other helpful information.

1. Any person making such a report shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed.

2. Failure to report known or suspected child abuse is a disorderly person’s offense, which is punishable by a fine or imprisonment. In addition, a person who fails to report suspected child abuse is liable for civil action.

3. After the Division of Youth and Family Services has been notified, facility procedures for investigating such incidents to the Department of Corrections should be implemented.

B. Office of Youth Advocate, Division of Youth and Family Services: A state government agency having authority and responsibility extending over all juvenile facilities includes investigation and reporting misfeasance and malfeasance.

C. Department of Corrections, Juvenile Detention and Monitoring Unit: An office within the Department of Corrections that monitors all operations within juvenile facilities.

B. Reporting Alleged or Suspected Incidents of Child Abuse:

The Director shall be immediately notified of all alleged or suspected incidents of child abuse.

1. Upon receipt of an allegation of child abuse, the Director or designee shall promptly determine the facts surrounding the incident and ensure DYFS has been notified.

2. The Director shall record the facts surrounding the incident.

3. A copy of the initial report and subsequent findings and actions shall be placed in a permanent file at the facility.

4. The original report shall be forwarded to the local Department of Corrections, Juvenile Detention and Monitoring Unit and shall include copies of all pertinent documents, such as incident reports, log book entries, medical reports, etc. The report shall be forwarded within 24 hours of the incident.

5. In the event of the death or serious injury of a juvenile, the Juvenile Detention and Monitoring Unit shall be notified immediately by telephone.

C. Responsibility of the Division of Youth and Family Services: The DYFS is obligated to report to the Prosecutor cases involving suspected criminal conduct on the part of any person. Reports must be made. This obligation will be satisfied if DYFS refers to the Prosecutors all cases involving any of the following:

1. Death of a child.
2. The subjecting or exposing of a child to unusual or inappropriate sexual activity.
3. Any type of injury or condition resulting in hospitalization or emergency room treatment.
4. Any type of injury or condition that requires more than superficial medical attention (e.g., treatment for a broken bone at physician’s office); or
5. Repeated instances of physical violence committed against a child(ren), or substantially depriving a child(ren) of necessary care over a period of time. 
D. Disciplinary Procedure: At the discretion of the Director, the alleged perpetrator may be suspended without pay or transferred to another facility until the investigation is completed. Loss of employment may result if abuse or neglect is proven.
CHAPTER 2

FISCAL MANAGEMENT

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8042 through 2-8059 National Advisory Committee Standards 1.133, 4.4 describing basic fiscal requirements.

Effective fiscal controls require using more specific and detailed operating manuals for adapting these sample policies and procedures. Good fiscal management requires complete and accurate recordkeeping.

<table>
<thead>
<tr>
<th>Sample Policies and Procedures</th>
<th>Policy Number</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>JUVENILE DETENTION FACILITIES</td>
<td>2.1</td>
<td>2</td>
</tr>
<tr>
<td>Chapter:</td>
<td>FISCAL MANAGEMENT</td>
<td>Related Standards:</td>
</tr>
<tr>
<td>Subject:</td>
<td>Fiscal Responsibility and Budgeting</td>
<td></td>
</tr>
</tbody>
</table>

I. POLICY: The Director has responsibility for the facility fiscal policy and shall develop accounting procedures that conform to the mandates of the parent agency and applicable statutes and judicial rulings. Fiscal policies shall be directly related to and coordinated with the goals and objectives of the facility program plan and will act as a guideline to improve program efficiency and measure goal achievement.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Allocation: The distribution of assets such as money, positions, or equipment according to approved plans.

B. Budget: Guidelines for estimated revenues and expenditures.

C. Annual Facility Budget: A listing of all planned expenditures of funds for a facility for one year.

III. PROCEDURES:

A. Budget Preparation: All facets of on-going programs, new programs proposed and long range goals shall be evaluated for their budget requirements. Assistant Directors and Section Chiefs shall assist in the budget planning process by:

1. Evaluating existing and projected staff needed for each section.

2. Evaluating existing space and projected needs for capital improvements.

3. Evaluating existing and projected needs for consumable and non-consumable items for each section.

4. Evaluating existing and projected travel and staff training needs.
B. Budget Submission: Annually, the Director shall submit a written facility budget to the parent agency, six months prior to beginning a new fiscal year. Detailed evaluations and justifications should be included in the budget submission and the Director should be prepared to meet with the parent agency, in the beginning of each fiscal year, to discuss any portion of the report that needs further clarification.

C. Budget Reallocation: Facility funds may be reallocated from one appropriation to another only when specific written authorization has been obtained from the Director.

D. Budget Revision: When appropriate, the Director shall submit a request to the parent agency for budget revision. Detailed evaluation and justification should be included in the request.
C. Petty Cash: A petty cash fund shall be established in an amount authorized by the Director and the Accounts Clerk shall have overall responsibility for maintenance of and disbursements from the fund.

D. Staff and Volunteer Reimbursement: When a request is submitted to the Accounts Clerk the following shall be observed:

1. Disbursements shall not exceed an amount established by the Director, unless an additional authorization has been obtained from the Director.

2. Disbursements for purchases must be supported by a register receipt or its equivalent. The register receipt shall be checked for accuracy and attached to the petty cash voucher.

3. All petty cash vouchers shall be signed by the staff member approving the disbursement as well as by the individual receiving the petty cash funds.

E. Staff Payroll:

1. Time Accounting Procedures: Are used in conjunction with time sheets to provide consistency and accuracy.
   a. Staff members will sign in on the time sheet when they report for their shift.
   b. Staff members will sign out when relieved of their shift assignment.
   c. All overtime shall be authorized on the time sheet by the Shift Supervisor. Overtime will be paid in quarter hour increments, rounding up or down to the nearest fraction.

2. Time Sheets: Payroll and auditing purposes require the submission of time sheets to the Office Manager at the end of each month.
   a. Each Section Chief shall review time sheets for accuracy of dates, times in and out, and total hours worked.
   b. Overtime is to be documented and approved by staff member's supervisor.
   c. The Assistant Directors shall review time sheet information, make any necessary corrections and sign the verification.
d. The Section Chief shall be responsible for submitting all time sheets to the Office Manager no later than three days following the end of the pay period.

e. The Office Manager shall enter salary and wage information from the payroll listing onto each time sheet.

f. Leave slips will be compared with time sheets and will be recorded.

3. Bank Payroll Service: Should the facility use a bank payroll service, time sheet information is transferred to preprinted computer sheets. The computer sheets shall be balanced, totaled and transported to the bank. The bank shall calculate withholdings and other deductions. Within 48 hours, the bank shall have individually printed payroll checks with back-up documentation available for pick-up by the Office Manager.

4. Verification Procedures: The Accounts Clerk shall verify the accuracy of each paycheck by comparing with the computer sheets. If errors occur the bank should be notified, the paycheck voided and a supplementary check issued. The corrective action taken shall be noted on the computer sheet. Information from the sheets shall be posted to a payroll journal. This journal shall be divided according to project or program function. Total payroll figures must balance with the net payroll plus deductions.
Sample Juvenile Detention Facility
PURCHASE REQUEST

(TO BE TURNED IN TO THE ACCOUNTS CLERK'S OFFICE)

Staff Member: ____________________________

<table>
<thead>
<tr>
<th>Unit Measures</th>
<th>Quantity</th>
<th>Item Requested</th>
<th>Suggested Vendor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Director

Date Submitted to Accounts Clerk: ________________________

---------------------------------------------------------------------------------------------------------

To be filled out by Accounts Clerk:

Date Received: ________________________

Problems with Order (if any): ________________________________________________________________

---------------------------------------------------------------------------------------------------------
I. POLICY: Juvenile fund accounts shall be established to discourage theft and inappropriate use of cash that could present a security and control problem. These accounts shall be controlled and maintained by accepted accounting procedures.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Monthly Accounting Report: Verification of the accuracy of entries on the juvenile fund account sheets.

III. PROCEDURES:

A. Collection:
   1. All money in the possession of a juvenile at the time of admission shall be taken by the admitting Shift Supervisor, counted in front of the juvenile, placed in an envelope which is then sealed, dated and signed by both the supervisor and juvenile. A juvenile fund account sheet shall be filled out at that time and placed in the appropriate file in the administrative office, and noted in the appropriate section on the inventory of the juvenile's personal possessions.
   2. All money received either through the mail or at the time of a visit shall be similarly taken and accounted for by the Accounts Clerk on the juvenile's fund account sheet, with a receipt given to the depositor for all amounts of cash.

B. Securing Funds: Juvenile funds shall be given to and maintained by the Accounts Clerk. Funds will be held in a safe located in a secure area.

C. Transactions and Purchases: All juvenile fund account transactions must have the approval of the Assistant Director for Program Operations and shall be entered on the fund's account sheet.

D. Closing Accounts: When a juvenile is released from the facility, all money, minus authorized expenditures, shall be returned to the juvenile. The juvenile shall sign a receipt for the funds received, and the juvenile's fund records will be placed in their permanent case record file.

E. Monthly Accounting Report: At the beginning of each month, the Assistant Director for Program Operations shall verify the mathematical accuracy of all entries on the juvenile fund account sheets. He/she shall prepare a juvenile fund account report, which compares the balance with cash on hand, and shall submit the report to the Director no later than the fifth working day of the month.
I. POLICY: Regulations and practices for internal control and monitoring of accounting procedures are designed to ensure the safekeeping of all facility funds and require ongoing monitoring of fiscal activities by internal and external auditors. Fiscal policies require:

A. Internal control of petty cash, staff bonding, and signature control for checks and vouchers.

B. Annual reporting to the parent agency of the facility’s fiscal activities.

C. External audits of fiscal activities conducted annually.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Security of Funds: The Director is responsible for administration of collection, safekeeping and monitoring the use of facility funds. In carrying out these duties, the following tasks shall be accomplished:

1. Cash and negotiable funds will be stored in a fireproof safe in a secure location.

2. Safeguard the transfer of all cash and/or negotiable funds in the following manner:
   a. Issuing receipts for all funds received.
   b. Requiring receipts and documentation for all facility funds passed from one staff member to another.
   c. Physically transferring funds to the bank daily.

B. Signature Control of Checks: The Director or his designee are the only persons authorized to sign checks.

C. Annual Accounting Report: An annual report of accounting procedures shall be prepared by the Director for submission to the parent agency and shall:
   1. List receipts, disbursements and balances for each segment of the facility account.
   2. Explain any problem areas.

D. Internal Audits: A review of fiscal activity shall be conducted quarterly and reports prepared by the auditor.
   1. A report of findings specifically related to the following shall be forwarded to the Director:
      a. Compliance with parent agency policy for fund control.
      b. Compliance with facility policy for fund control.
      c. Accuracy of funds compared with records.
   2. The Director shall review the report and forward one copy to the parent agency. When appropriate, suggestions for improvement or corrective action shall be given to the Assistant Directors.

E. External Audits: A review of fiscal activity shall be conducted regularly by an independent audit company. Detailed reports shall be provided to the parent agency and the facility Director. These audits shall examine:
   1. Level of compliance with standard fiscal procedures.
   2. Level of compliance with the parent agency’s requirements.
   3. Level of compliance with legislative requirements.

F. Audit Schedule: Legislation currently states a preference for external audits being conducted annually, but at least not exceeding three year intervals.
I. POLICY: Accountability for all facility property and supplies shall be provided through the use of regular inventories. The Director shall systematically review space and equipment requirements at least annually and report deficiencies and suggest plans to the parent agency.

II. DEFINITIONS: None.

III. PROCEDURES: The Assistant Director for Management Services shall be responsible for:

A. Inventory: All facility property shall be divided into appropriate categories and inventoried.

1. Storerooms shall be inventoried on the last day of each calendar month. This process shall be simplified by regular use of bin cards located in close proximity to the stock item. This card contains a chronological record of an item on hand, received, issued and balance. Typically storeroom items include:
   a. Food supplies.
   b. Stationery.
   c. Cleaning supplies.
   d. Clothing.
   e. Standard items used by the Building Supervisor such as plumbing and carpentry supplies, tools and similar items.

2. Minor equipment and furnishings, with values of at least $200.00 but less than $1,000.00, shall be inventoried at least annually. Equipment record cards, listing the location of all such property, are maintained in the administrative office. Section Chiefs shall have duplicate records of all property assigned to their sections. Records shall include:
   a. Description.
   b. Location.
   c. Responsible supervisor.
   d. Purchase date and acquisition price.
   e. Current value.

3. Equipment with current values of $1,000.00 or more shall be inventoried by the Director's office at least annually. Records of this property shall be maintained in the administrative office and contain the information listed in section 2a through e above. The records shall also include:
   a. All major equipment that is permanently installed having a value of $2,000.00 or more. Typically major fixed equipment includes:
      (1) Air conditioner compressors.
      (2) Boilers.
      (3) Commercial ovens.
      (4) Dining room serving tables.

4. Major property shall include buildings, plant facilities and land. Records and descriptions of this property shall be maintained in the administrative office.

Inventory Assignments: Staff shall compile inventories in accordance with the following schedule:

<table>
<thead>
<tr>
<th>Items</th>
<th>Responsible Staff</th>
<th>Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Storeroom stock</td>
<td>Food Service Supervisor &amp; Building Supervisor</td>
<td>Monthly</td>
</tr>
<tr>
<td>2. Equipment &amp; Furnishings Valued over $200.00</td>
<td>Each Section Chief</td>
<td>Annually</td>
</tr>
<tr>
<td>3. Major Fixed Equipment valued over $1,000.00</td>
<td>Assistant Director for Management Services</td>
<td>Annually</td>
</tr>
<tr>
<td>4. Major Property</td>
<td>Assistant Director for Management Services</td>
<td>Annually</td>
</tr>
</tbody>
</table>
C. Inventory Discrepancy: When a discrepancy is noted a written report shall be completed and forwarded to the Director for review and initiation of appropriate action. Typically this shall include:

1. A listing of items not located.
2. A listing of any item not properly recorded on inventory cards.
3. Any deviation from parent agency or facility policy regarding inventory control.

D. Property Disposal: When an item is no longer needed in a particular section or is determined damaged beyond repair, a written report shall be submitted to the Director for appropriate action.
I. POLICY: A procurement process shall be developed for fair and impartial bidder selection. The method shall encourage the participation of qualified competitive bidders who are able to meet the requirements for supplies, equipment or services.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Purchasing Agent: A staff member specifically designated and authorized by the parent agency to procure goods and services within the framework of parent agency and facility rules and regulations. (May be a staff member of the parent agency.)

III. PROCEDURES:

A. Procurement: All purchases shall be accomplished by:

1. The Purchasing Agent securing the best products at the lowest cost. Where practical, competitive bidding shall be used, requiring the facility to submit proposed prices from more than one vendor.

2. Each Assistant Director authorizing "immediate need" purchases, not exceeding $150.00 during the fiscal year, without securing competitive prices. A purchase order shall be completed and sent to the Purchasing Agent when an "immediate need" purchase is indicated.

B. Bid:

1. The Purchasing Agent shall be responsible for posting public notices inviting bids and providing prospective bidders with copies of the plans and specifications. To facilitate competitive bidding among responsible bidders, the Purchasing Agent may require a refundable certified check or bid bond with each bid.
2. Any prospective bidder who believes any part of the plans, specifications or invitations to bid are unclear or are in need of modification shall call such problems to the attention of the Purchasing Agent who will initiate appropriate action.

3. The complaining bidder, if dissatisfied with the Purchasing Agent's recommendation, shall have the right to communicate a written objection directly to the Director prior to the opening of bids.

4. The Purchasing Agent shall return all bid deposits, certified checks, specifications and plans of the unsuccessful bidders within five working days of contract award.

C. Opening of Bids:

1. All bids for contracts shall be opened by the Purchasing Agent and the Director during a duly called meeting and all bidders shall have the right to examine the bids after their opening.

2. At the time of opening bids, the Purchasing Agent shall note for the record any objections, criticism or challenges made, and the Director shall review them prior to contract award.

D. Award of Contracts: The Purchasing Agent shall award the contract as soon as practical, but within 30 days after the opening of bids. Award will be made to the lowest, responsible, qualified bidder. This requirement, however, may be waived after submission of a statement to the Director and parent agency indicating the reasons for objection to the lowest bidder. Contract awards shall be publicly posted.
I. POLICY: The Director shall have the responsibility for assessing presently assigned positions and determining projected staff needs to meet facility goals and objectives. Responsibilities also include effective and efficient use of contract personnel.

II. DEFINITIONS: As used in this document the following definitions shall apply:

A. Reconciliation: To compare the consistency of staff and facility records; to settle or resolve any variation between the two sets of records.

B. Position Control: A regular, consistent evaluation of the staff requirements for the total facility and all its segments.

III. PROCEDURES:

A. Coordination of Staff and Fiscal Records: The Director shall monitor the coordination between the staff record section and the payroll function. At each month's end, the Office Manager shall submit to the Director a complete list of staff records which can be compared with the payroll. This list shall include:

1. Total number and type of positions filled.
2. Total number of vacancies.
3. Total number of positions authorized.

B. Reconciliation: The Director shall compare the actual payroll records with the listing provided by the Office Manager. This comparison shall ensure:

1. All positions are authorized officially.
2. Attendance, payroll and personnel records match.
3. Funds are available to meet the payroll costs.

C. Purchase of Community Services: Some services are not available in the facility and should be contracted from appropriate community sources. Non-profit or governmental organizations shall be given first consideration in procurement of such services, which may include:

1. Medical care.
2. Religious activity.
3. Educational programming.
I. POLICY: Staff members shall be covered by insurance at all times while in performance of their duties. State or county law provides for self insurance coverage for all staff, including workers' compensation, unemployment compensation, employee civil liability, liability for accidents involving official vehicles, and public employee blanket bond.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Self Insurance Coverage: A statewide system designed to ensure the payment of all legal claims for injury or damages incurred as a result of the actions of governmental officials, employees or their agents.

B. Workers' Compensation: A statewide system of benefits for employees who are disabled by job related injury.

III. PROCEDURES:

A. Accident Reporting:
   1. All accidents shall be reported in writing to the Shift Supervisor within one day of the occurrence. Any claim, notice, summons or complaint shall be forwarded to the Director and applies to all injuries or damages; real, imagined, or alleged.

2. All reports of injuries, damages or loss shall contain the following information:
   a. Time and date of loss or injury.
   b. Place of loss or injury and name and address of the person(s) involved.
   c. Description of how loss or injury occurred.
   d. Description of property loss or damage.
   e. Description of activities at the time of the loss or injury.

B. Workers' Compensation: Benefits are available to staff injured in the course of duty and information is available in the administrative office.
Policy Number: 2.9
Page: 2

I. POLICY: Controls shall be maintained over canteen operations and regular accounting procedures are to be followed. Juveniles shall have the opportunity to obtain miscellaneous items not normally provided by the facility.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Canteen: A store available to juveniles for the purchase of miscellaneous items not available through regular program operations.

III. PROCEDURES:

A. Canteen Transactions:

1. The canteen shall conduct sales daily. Sales are to be made against canteen slips.

2. A debit entry is made at the time of purchase with the juvenile initialing the debit, in lieu of a receipt. An entry is made on an adding machine tape for each juvenile transaction, subtotaled for each customer and totaled for each night's sales.

3. At the close of each day's operation, the Food Service Supervisor reconciles the sum of juvenile debits against the adding machine tape.

4. The adding machine tape shall be placed in the safe until the next business day.

5. The Food Service Supervisor shall enter total sales in a ledger using the amounts shown on the adding machine tape and the tape shall also be retained.

6. At the end of the week, a check issued against the juvenile's account is deposited into the canteen account to reimburse for sales.

B. Transactions with Vendors:

1. Each week the Food Service Supervisor checks canteen stocks and determines order quantities for items in low supply.

2. Vendors are selected on the basis of price and reliability. At least once each quarter price quotations are solicited from competing vendors to take advantage of favorable price changes.

3. The Food Service Supervisor shall complete order forms supplied by vendors listing items, quantities, unit prices, total prices and discounts.

4. When deliveries are made the Food Service Supervisor will check the goods against the packing list and sign for the delivery.

5. Deliveries from vendors shall be placed in the canteen and kept separate from inventory. The Food Service Supervisor shall, again, check the order against the packing list before the goods are added to inventory. Shortages are reported to the vendor for corrective action.

6. Invoices shall be forwarded to the Accounts Clerk.

7. Checks are issued for each vendor from the canteen account.

C. Monthly Bank Statement: The current monthly bank statement for the canteen checking account is reconciled against the canteen ledger by the Accounts Clerk.

D. Canteen Audits:

1. Internal audits shall be conducted quarterly by the Accounts Clerk.

2. External audits shall be conducted annually.
CHAPTER 3
PERSONNEL

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8031, 2-8032, 2-8060 through 2-8085 and National Advisory Committee Standards 1.4, 1.41, which emphasizes the importance of a sound personnel program.

Statutes and regulations related to personnel administration vary widely from one jurisdiction to another. These guidelines are published with the expectation that, while being used in conjunction with an extensive personnel manual, judicious use will require revision to conform with local conditions.

---

I. POLICY: The facility administration shall provide employment opportunities to the widest possible range of candidates and shall select from that group the bestqualified persons to meet program needs. Selection, retention and promotion shall be based upon merit, applicable statutes and personnel policy as set forth in directives from the parent agency. Consultants, volunteers, and contract personnel who work with juveniles shall agree to comply with written policies of the facility, especially on confidentiality of information.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Lateral Entry: Transfer, at the same grade and salary level, to another section or facility.

III. PROCEDURES: Procedures that shall be followed by both the Director and Assistant Directors include:

A. Personnel Management Principles: The essential components are:

1. To determine and develop an effective organizational system.

2. To recruit, promote and retain the best possible candidates on the basis of merit and specified qualifications to carry out the facility's policies.

3. To assure equal opportunities for all candidates as well as for the existing staff.

4. To assure that proper counseling toward better job performance and career achievement is available to all staff.

5. To assure that a career goal is available to all staff and that appropriate training is provided to each staff member.
6. To provide internal promotion opportunities for staff whenever possible, balanced with the need of the facility for experience not available within the facility.

7. To develop a personnel management philosophy but to implement a decentralized personnel operation.

8. To aggressively pursue an affirmative action program which recruits persons who might not otherwise seek employment with the facility.

9. To maximize job satisfaction and involvement on the part of each staff member by encouraging individual decision-making and involvement in establishing policies.

B. Employment Prospecting: The Office Manager shall:

1. Take job applications and maintain files for each job description.

2. Contact names on register for interest in employment.

3. Call or type letter indicating employment interview with the Director.

C. Staff Selection and Promotion:

1. Initial selection and promotion shall be made based on experience, education, physical condition, training and performance.

2. Employment and promotion requirements shall be evaluated by written testing, oral interviews and background investigation verification, or any combination of the three.

3. Lateral entry into the facility shall be permissible at all levels. No section shall initiate or allow any practice which will restrict selection or promotion of qualified staff from outside the section.

4. Salary levels and employee benefits for facility staff shall be competitive with other parts of the juvenile justice system, as well as with comparable occupational groups in the private sector.

5. Staff members must be able to demonstrate that they have the skills required to perform specific job related tasks.

6. The Director shall give personnel within the facility the first opportunity for advancement.

7. Staff shall be subject to reassignment. Such changes will be made with due consideration of the staff member and the needs of the parent agency, as well as the facility program.

D. Interview Committee: Supervisors may request an interview committee to assist them in any procedures for hiring of new staff, promotion, termination, etc. The interview committee will consist of:

1. Supervisor of the area that is being hired for.

2. Senior staff of the same area.

3. One other administrative staff member (rotating assignment).

The decision of the interview committee will be in the form of a recommendation to the responsible supervisor. Final authorization, if necessary, will be the responsibility of the Director.

E. Physical Examinations: To ensure that candidates can accomplish the required duties of the position, physical examinations shall be conducted and the findings and recommendations of the examining physician forwarded to the Personnel Officer. Annual physical examinations including a T.B. test are required of all staff to ensure their continuing ability to function effectively. Any staff determined by the responsible medical authority to be unfit for duty is to be removed or reassigned according to appropriate laws and regulations.

F. Records Check: The names of all prospective staff shall be referred to the personnel office of the parent agency for background investigation. Because of the sensitive nature of juvenile detention facilities, appropriate steps are necessary to ensure:

1. Accuracy of information furnished on application and/or interview.

2. Evaluation of criminal record. A criminal record shall not bar employment automatically, but must be evaluated according to the seriousness of the offense and its relation to and probable effect upon job performance. An arrest or conviction occurring after the date of hire, particularly for an offense that relates to the employment, may be subject to disciplinary action or suspension.

3. That anyone adjudicated for child neglect/abuse shall not be considered for employment.
4. Possession of current certificates, licenses or registrations as evidence of competence to perform specific duties. Proof of license will be kept on file.

G. Appeals: Any staff or potential staff member who believes they are unfairly treated may submit a written request for review to the Director. If dissatisfied with the response, the complainant may appeal further to the parent agency for final decision. Responses to such requests shall be prompt and in keeping with grievance procedures.

H. Review:
1. The parent agency’s personnel officer shall provide the Director with a comprehensive personnel policy report at the end of each fiscal year. The Director shall review this report and evaluate progress as relates to overall parent agency and facility program goals.
2. Reports of progress and/or major deficiencies in the personnel program reviews shall be discussed with representatives of the parent agency.

I. Provisional Appointments: Unusual and/or emergency situations sometimes require employment of temporary or part-time staff. The parent agency’s personnel office shall develop rules to govern provisional appointments within the following framework:
1. Selection of provisional staff is restricted to persons possessing at least minimum qualifications for the position.
2. Provisional staff shall be provided with training, salary, leave accrual, days off and other staff benefits enjoyed by regular full time staff in the appropriate job category. Such benefits shall be prorated for the provisional staff working less than full time. Benefits may never exceed those for full time workers.
3. No provisional appointment may exceed one year in duration and may be extended only by the Director with written approval by the parent agency. A provisional appointment may never exceed two years.

J. Staff Hiring:
1. For non-supervisory positions, the Director is authorized to hire candidates with subsequent notice to the parent agency.
I. POLICY: The facility administration shall establish and implement an affirmative action plan which offers equal opportunities to all persons in all phases of employment.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Affirmative Action: A concept designed to ensure equal opportunities for all persons regardless of race, religion, age, sex, or ethnic origin. These equal opportunities shall include all personnel programming including selection, retention, rates of pay, demotion, transfer, layoff, termination and promotion.

B. Administrative Staff: The Director, the Assistant Director for Management Services, the Assistant Director for Program Operations and all Section Chiefs.

C. Affirmative Action Committee: A committee established to conduct all business related to affirmative action and to accomplish the broad objectives described.

III. PROCEDURES:

A. Sex: The nature of some program operations dictate that some sex-sensitive job assignments be made and that some positions be restricted by sex. Each of these assignments and restrictions shall be fully reviewed by the Office of Affirmative Action and the local or state equal employment opportunity/affirmative action committee to assure that they comply with the bona fide occupational qualification exceptions recognized in Title VII of the Civil Rights Act.

B. Affirmative Action Committee Membership: Committee members and coordinators shall be selected by the administrative staff and approved by the Director. This selection shall be based on a staff member's demonstrated ability to present effectively the objectives and procedures of affirmative action.

C. Duties of the Committee: The Committee shall:
   1. Meet at least quarterly.
   2. Request corrective action for any situations or conditions which deter equal opportunity recruitment, retention or promotion.
   3. Develop practices designed to attract qualified women and minorities for recruitment.
   4. Develop positive plans to contact women and minority groups about employment.
   5. Examine and evaluate facility progress in affirmative action and prepare a quarterly report to the Director. The report shall address at least the:
      a. Percentages of women and minority staff members by category.
      b. Progress of stated goals.
      c. Major accomplishments and problem areas.

D. Review Procedures: The Director shall review the minutes and reports of the quarterly committee meetings. The document shall be forwarded to the parent agency along with comments and suggestions for implementing proposed actions.

E. Discrimination Charges: Discrimination charges and their resolution (whether filed internally or with external civil rights agencies) are reviewed to assure that policies which have been unintentionally discriminatory are revised.
I. POLICY: Performance of all staff, permanent and probationary, shall be evaluated regularly against the standards expected for the assigned position.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Performance Appraisal: A continuous process of measuring performance against defined standards.

B. Service Rating: Measurement of performance compared to others performing the same tasks and past performance of the individual staff member.

C. Critical Element: A component of a staff member's job that is essential to performing it effectively.

D. Non-Critical Element: Any component of the job which, although important, is not deemed critical in relation to other aspects of the job.

E. Performance Standards: The level of achievement established by the administration for the duties and responsibilities of a position. Performance standards may include, but are not limited to, quality, quantity and timeliness.

F. Probationary Staff: A staff member who has not attained permanent status.

III. PROCEDURES:

A. Probationary Period: The probationary period of a term of not less than 6 months nor more than one year extends the assessment and selection process by allowing the staff member to demonstrate his/her capability to perform the duties and responsibilities of the position. During this time, probationary staff shall receive an intensive program of job direction/skills that will enable them to perform effectively.
B. Performance Appraisals: Performance appraisals shall be implemented by the Director to encourage the staff to evaluate their own work habits. Annual appraisals shall be required for all non-probationary staff. This system shall provide for:

2. Communicating to staff both the performance standards and the critical elements of the position.
3. Evaluating staff performance during the appraisal period.
4. Recognizing and rewarding staff whose performance warrants it.
5. Assisting in improving unacceptable performance.
6. Reassigning, reducing in grade or removing staff who continue to have unacceptable performance, but only after they are given opportunity to demonstrate acceptable performance.
7. Establishing major job elements (critical and non-critical):
   a. Critical and non-critical elements are the specific projects/tasks which define the position. These elements and corresponding performance standards shall be communicated to each staff member at the beginning of the rating period.
   b. The individual performance standards and appraisals must evaluate:
      (1) Improvements in efficiency, productivity and quality of work or service.
      (2) Timeliness of performance.

C. Service Ratings: Service ratings for permanent staff provide both an evaluation of work performance and a review of work related goals. A service rating must also be completed on an individual separating from the facility to provide a final record of work performance.

1. An annual service rating must be completed, by the supervisor, on all permanent staff on their anniversary date.
2. A service rating must be completed, by the supervisor, on all staff who separate, due to resignations, retirement, suspensions, dismissals, military leave, or transfer from the facility.
3. The service rating must be completed, by the supervisor, in quadruplicate. The original and one copy must be forwarded to the parent agency by the first week of the month following the month of review. One copy is placed in the individual's personnel file. One copy is given to the individual.
4. Service rating can be done on a monthly or more frequent basis as a counseling device to improve work performance of staff.
5. After completion of the service rating, the supervisor shall arrange a private interview with the staff member being evaluated. The interview should involve a review of the prior service rating as a comparison to the service rating that has just been completed. The staff member's strengths and weaknesses should be discussed and he/she should be encouraged to express his/her opinions.
6. After a review and discussion of the service rating the staff member will be given an opportunity to make written comments before signing the rating form. The employee's signature does not imply agreement but only that the conference was conducted and the staff member read the service rating. If the employee refuses to sign, the supervisor should note this fact and add any pertinent comment.
7. Service Rating Description: The service rating contains five elements ranging from one through ten points for each element. The average of the total points for the elements constitutes the service rating score.
   a. The scores nine and ten are excellent. To achieve these points the individual must have performed all assigned tasks in a superior/outstanding manner. A brief narrative of how the individual performed should be provided when these points are earned.
   b. The scores seven and eight are very good. The individual's performance must have exceeded the requirements of satisfactory job performance.
### Performance Evaluation 3.3

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page of</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSONNEL</td>
<td>Performance Evaluation</td>
<td>3.3</td>
<td>5/5</td>
</tr>
</tbody>
</table>

c. The scores five and six are satisfactory. The individual must meet the full job requirements as defined by the supervisor. In instances where the supervisor has not established clear job requirements, a rating of at least five is appropriate.

d. The scores three and four are fair. The individual must have failed to meet specific job performance requirements. A brief narrative should be provided detailing job requirements not met and the specific requirements needed to improve.

e. The scores one and two are unsatisfactory. Performance at this level is so deficient in meeting job requirements that release from employment is justified. A narrative is required specifying the performance deficiencies of the individual. If the individual is to be retained, the retraining program the individual must have shall be specified in the goals section of the service rating.

### D. Termination of Employment

After completion of the probationary period, termination or demotion is permitted only for good cause and subsequent to a formal hearing on specific charges conducted by a civil service commission or other career service organization, if requested.

1. The supervisor will give two weeks written notice to a staff member who is being terminated for reasons other than disciplinary.

2. The Director, after clarifying the situation and with approval of the parent agency, may discharge any staff member whose behavior is contrary to the policies of the facility. The director and supervisor will discuss the matter with the staff member before taking action.

3. If a staff member wants to end his/her position at the facility, a minimum of two weeks notice, in writing, must be given.

### E. Exit Interview

An exit interview will be performed by the Director upon termination of any staff member. This interview will become a permanent part of the staff member's record.

---

### Sample Juvenile Detention Facility

#### Professional Service Rating

<table>
<thead>
<tr>
<th>Points Awarded</th>
<th>Rating Category</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dependability</td>
<td>Trustworthy and reliable in completing assignments; observance policy; meets commitments in spite of difficulties.</td>
<td></td>
</tr>
<tr>
<td>2. Quality of Work</td>
<td>High quality is maintained under pressure. Does all parts of job, even new tasks, to high standards; work is neat and orderly.</td>
<td></td>
</tr>
<tr>
<td>3. Cooperation</td>
<td>Able to get along with and work harmoniously with fellow employees; establishes rapport with all people with whom there is contact. Able to work with supervisor in order to develop as a better employee.</td>
<td></td>
</tr>
<tr>
<td>4. Communication Ability</td>
<td>Able to describe and explain problems; content and logic is organized. Able to listen; persistent in trying to understand others; expresses self in clear terms.</td>
<td></td>
</tr>
<tr>
<td>5. Judgment</td>
<td>Decisions are always sound in keeping with agency policy. Able to react in a crisis and arrive at solutions. Consistent in taking correct action.</td>
<td></td>
</tr>
<tr>
<td>6. Favorable Job Attitude</td>
<td>Looks for, finds and follows methods for self-improvement. Consistently promotes the agency; is a self-starter; frequently finds improved ways of doing job.</td>
<td></td>
</tr>
</tbody>
</table>

Total Points

<table>
<thead>
<tr>
<th>Report Period</th>
<th>Overall Service Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Degree Past Goals Have Been Achieved
SAMPLE JUVENILE DETENTION FACILITY
EMPLOYEE PERFORMANCE APPRAISAL REPORT

Name: ________________ Date: _____________
Job Title: ________________ Division: ____________
Last Appraisal: ________________ Date Employed: ____________

Quality of Work -(Do not consider amount of work. Is work done correctly and accurately? Does work meet the required standards of quality? Are errors more frequent than normal in this stage of training?)

- Work is carefully done or not done correctly. Makes very few errors.
- Work is acceptable. Makes some errors.
- Work is of high quality. Makes few errors. Work can be depended upon.
- Work is of highest quality. Does job exactly as it should be done.

Supporting evidence:
Specific training needs:

Quantity of Work -(Do not consider quality of work. Production: How does production compare with job standards or normal? "Nona- normal at this stage of training"

- Low production. Takes time to complete work.
- Production normal. Works fairly smoothly. Does job in reasonable manner.

Supporting evidence:
Specific training needs:

Ability to Understand and Follow Instructions: Does employee understand instructions?

- Requires repeated and constant instructions. Needs detailed instructions on every move. Must be reminded of original instructions.
- Understands instructions reasonably well. Requires only normal follow-up.
- Understands and follows instructions. Rarely has to have instructions repeated.
- Understands with group meet and follows through. Seeks to anticipate instructions.

Supporting evidence:

Attitude Toward Supervision -What is employee's attitude toward supervision? How does employee react to instructions? Does employee cooperate willingly?

- Neglects work or supervision and criticism. At times uncooperative.
- Noisy or hasty or extreme at times.
- Normally cooperative in answering instructions and criticism. Phrase and cooperateness.
- Full cooperation. This is to be expected.

Supporting evidence:

Personality: Is employee accepted by fellow workers? Does employee get along with other workers? Does employee have any objectionable characteristics which affect staff members?

- Not fully accepted by fellow workers. May have friction.
- Tolerated by group. Not particularly useful or cooperative with fellow employee.
- Accepted as one of the group. Can work with fellow workers. Cooperative with others.

Supporting evidence:

Health and Physical Conditions - How does employee's health and physical condition affect his or her work?

- Poor health. Physically undependable.
- Not in the best health. Some physical conditions which affect job.
- Has reasonably normal health.
- Has good health and energy. Keeps up good physical shape.
- Always fit. Has pep and energy.

Supporting evidence:

Absence and punctuality record:

Greatest Strengths:

 Needs improvement in:

General Comments:

This Performance Appraisal was discussed with the employee on __________ and we reviewed together what is needed for further development and progress.

Employee's reaction to job (quote): __________________________________________________________________________

Our plan for action:

- ____________________________________________________________________________
- ____________________________________________________________________________
- ____________________________________________________________________________
- ____________________________________________________________________________

Employer's signature: ____________________________

Supervisor's signature: ____________________________

Approved: ____________ Assistant Director ____________________________

Approved: ____________ Director ____________________________
POLICY: The parent agency shall provide staff salary levels and staff benefits which are competitive with other parts of the juvenile justice system as well as with comparable occupational groups in the private sector. Staff shall be reimbursed for legitimate expenses incurred in the conduct of official business.

DEFINITIONS: As used in this document, the following definition shall apply:

Occupational Groups: Managers, tradespersons or professional staff assigned duties, responsibilities and authority similar in nature and level of difficulty.

PROCEDURES:

A. Competitive Pay: The Director of each facility shall submit an annual report to the parent agency including a list of the pay scale for comparable staff in the area.

1. Actual salary.
2. Fringe benefits:
   a. Medical care.
   b. Insurance benefits.
   c. Leave allowances.
   d. Pension plans.
   e. Other programs.
3. Consideration of:
   a. Commuting distances.
   b. Job stress.
   c. Assignment hours.

B. Expense Reimbursements: The Accounts Clerk shall reimburse staff for all approved expenses under specific conditions:

1. Staff expenditure is authorized in advance by the supervisor and approved in writing by the Director.
2. Reimbursement does not exceed actual expenses incurred.
3. Reimbursement does not exceed the maximums allowed by state/county legislation or policy.
4. Requests for reimbursement are accompanied by proper documentation, and approved by the Director.

C. Personal Mileage Reimbursement Policy: Staff shall be reimbursed for use of their own vehicle for work related business only when authorized and properly documented on the appropriate travel expense report.

1. All claims for travel expense shall show date, departure and destination and points inbetween, beginning and ending full odometer reading, number of miles (rounded off to whole mile), vehicle, license number, owner of vehicle, signature of owner with date, and initials of supervisor.
2. All travel must be by the most direct route. For travel to the same destination more than once, the mileage must be consistent. If travel by the most direct route cannot be taken due to a detour or road hazard, this must be noted on the travel expense report.
3. When travel is out of the jurisdiction, receipts for tolls, and lodging need to be attached to the report. Meals are paid on a per diem basis. Any other expenses not listed must be receipted and approved by the Director before payment.
4. Two copies of the completed travel expense report are to be reviewed and initialed by the immediate supervisor and then sent to the Administrative Office for processing.
I. POLICY: The facility administration strongly encourages that relationships between supervisors and staff be mutually respectful and, when differences occur, that resolution be as informal as possible. If differences cannot be resolved informally, the grievance shall be concluded at the earliest possible step of the procedures outlined in this document. Staff on permanent status shall be terminated only for just cause and, if requested, only after the completion of grievances and appeals procedures including an open and formal hearing on specific charges.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Supervisors: That group of persons with authority to manage, direct, supervise or prepare evaluations of performance for subordinate staff.

B. Staff: Any full time or part time persons in the facility who have been properly selected and assigned probationary or permanent status by the parent agency or Director.

C. Grievance: An alleged breach or violation of policies and procedures or a dispute arising from the interpretation or application of the same.

D. Grievant: Any staff member or group of staff claiming the alleged breach or violation of policies or application of policies.

E. Discrimination: Any action taken against staff because of race, color, religion, sex, age, handicap, national origin, or any other non-merit factor.

III. PROCEDURES:

A. Staff-Supervisors Relations Committee: A relations committee, established by the Director of each facility shall be composed of the following members:

1. Assistant Directors -- Chairpersons.
2. One supervisory person from each section (to be appointed by the Assistant Director of the section).
3. One non-supervisory person from each section (selected by the staff).

B. Meetings: Committee meetings shall be held quarterly.

1. Staff concerns about any of the following conditions shall be discussed:
   a. Proposals for program changes.
   b. Safety practices.
   c. Training plans.
   d. Legislative actions pending.
   e. Anticipated changes in facility operations.
   f. Policy and procedure changes as required by law or other jurisdictional authority.

2. The agenda, conduct of the meeting and preparation and distribution of the minutes shall be required by the Chairpersons. The Chairpersons shall examine the minutes of each meeting, evaluate the concerns expressed and, if necessary, take corrective action. Such actions may include:
   a. Requiring additional information from appropriate Section Chiefs.
   b. Appointing a group to evaluate a situation and prepare recommendations for corrective action.

C. Program Involvement: Effective staff-supervisor relationships benefit from staff involvement in facility programs planning. For example, staff can participate in:

1. Monthly section staff meetings.
2. Specialized training program meetings.
### Grievance Procedures

These procedures shall provide a just and equitable method for the administrative resolution of discrimination complaints and/or grievances. These procedures shall apply to any staff who believe they have experienced unfair treatment in any area subject to parent agency control.

#### Staff Rights and Restrictions:

1. Each staff member shall have the right, at their own expense, to enlist the assistance of an advocate at any level of the grievance procedure and/or discrimination complaint procedure.

2. A staff member will be allowed a reasonable period of time, during working hours, to prepare his/her case.

3. No staff shall suffer harassment or any other form of retaliation as a result of exercising the right to appeal, contained in the grievance procedure.

4. The facility must supply the staff with non-confidential information necessary for the processing of the grievance procedure, i.e., written forms, personnel policies, etc.

5. A staff member selected as a representative, or a witness in a grievance related act, is required to give his/her immediate supervisor reasonable advance notice so that his/her absence will not unduly interfere with facility operations.

#### Exceptions to the Grievance Procedures:

- Matters subject to final action outside the parent agency such as legislative acts or regulations promulgated by other agencies.
- Content of legislation or policies promulgated by the parent agency.
- Selection or non-selection for promotion made from a group of properly ranked and certified candidates.
- Action terminating a temporary promotion.
- Decisions not to adopt a suggestion, or bestow a performance award or other honorary or discretionary award.
- A preliminary warning or proposed notice of adverse action against a staff member.
- Termination of the services of a probationary staff member.
- Fitness for duty examinations.
- Health benefits decisions.
- Violation of military restoration rights.
- Salary retention decision.
- Violation of re-employment rights.

#### Implementation of Grievance Actions:

A staff member must present any grievance within 15 calendar days after the alleged incident occurs.

#### Grievance Rejections:

A grievance may be rejected if:

- The staff fails to complete the informal procedures outlined in this document.
- The grievance is not filed in a timely manner.
- The grievance relates to a matter beyond parent agency control.
- The requested relief is not personal to the grievant.
5. Notification of Rejections: Notification of grievances rejected shall be provided in writing by the parent agency indicating the reason for rejection and advisement of an appeal procedure.

6. Informal Grievance Procedures: A staff member must complete an informal procedure before a grievance will be accepted under the formal procedures grievance. A grievance over a disciplinary action, however, may be initiated at a higher level if the supervisor does not have the authority to grant the relief sought. In all other cases the following two steps are required:

a. The staff member alleging a grievance must present the matter orally to his/her immediate supervisor, either alone or accompanied by a representative. The immediate supervisor shall consider all available facts and notify the staff member of the decision as soon as possible but not later than five calendar days following the date of the grievance presentation.

b. If dissatisfied with the decision of the supervisor, the staff member and/or designated representative may present the grievance to the next higher supervisory official within five calendar days following the initial resolution attempt.

7. Formal Procedure:

a. If the grievance is not satisfactorily resolved through informal procedure, the staff member or representative may present a written grievance to the Director within five calendar days following the final informal decision. This written grievance shall contain, at a minimum, the identity of the aggrieved staff member, the specific nature of the grievance, the corrective action sought and the signature of the staff member and/or representative. The Director shall review the grievance and give the staff member a decision in writing.

b. If still dissatisfied, the staff member may make written request within five calendar days that the matter be referred to a grievance examiner. The Director shall contact the parent agency within five calendar days to arrange for an examination. The Chief Executive Officer of the parent agency will appoint a disinterested third party to act as examiner. His/her inquiry shall be conducted according to the regulations of the parent agency and will begin as soon as possible after an examiner has been appointed. The examiner shall forward the findings and recommendations to the Director no later than 30 calendar days after completion of the inquiry.

c. The Director shall then give full consideration to the entire grievance file, including the examiner’s findings and recommendations, and make a final decision within five calendar days of receipt. Exceptions to this process are:

1. If the legality of the examiner’s decision is questioned, the decision may be forwarded to the parent agency legal counsel, who will render a binding legal opinion.

2. If the examiner’s recommendations are unacceptable, the grievance, along with a statement about why the findings are unacceptable, shall be forwarded to the next highest level deciding official within five calendar days of receipt of the examiner’s findings. The staff member affected shall be given a copy of this statement.

d. The next highest level deciding official shall review the file, including the examiner’s recommendations, and make a decision in writing within ten calendar days of receipt. No further right of appeal will be accepted.
I. POLICY: The facility administration shall maintain a policy manual which covers all parent agency and facility policy and procedures about personnel matters.

II. DEFINITIONS: As used in this document, the following definitions shall apply:
   A. Employment Categories: The grouping of occupationally related staff.

III. PROCEDURES:
   A. Format of the Manual: The personnel manual shall be organized into related chapters. The language used shall be in layman's terms without technical jargon or references not known by the reader.
   B. Content of the Manual: The content of the manual shall include but not be limited to:
      1. Recruitment policies and procedures.
      2. Organization of the facility.
      3. Job qualifications and descriptions for all employment categories.
      4. Directions for acquiring additional information about additional job specialities.
      5. Equal opportunity information.
      7. Benefits for staff.
      8. Holidays.
      9. Leave and work hours.
     12. Training requirements.
     13. Promotions.
     15. Resignation and termination policies.
     16. Staff-supervisors relations.
     17. Physical fitness policy.
     18. Disciplinary, grievance and appeal procedures.
     19. Policy about political activity.
     20. Insurance.
     22. Position responsibilities.

C. Manual Availability: The personnel manual shall be made available to all staff members. Complete copies of the manual shall be kept in the administrative offices of the facility and in the staff library.

D. Training: The contents of the personnel manual shall become an integral part of the staff orientation program. All new staff shall be provided with a summary of the personnel manual. This summary shall include the major elements of personnel policies most directly affecting staff programming.

E. Personnel Manual Review: This manual, along with all personnel policies and practices, shall be reviewed annually by the Director. A written report shall be forwarded to the parent agency containing comments about existing policies and any recommendations for revision, addition or deletion.
I. POLICY: The facility requires the highest possible level of conduct from all staff, protects the integrity of the parent agency, and facilitates the recruitment and retention of the highest caliber staff. A written code of ethics, therefore, prohibiting the facility from using their official position to secure privileges for themselves or others and from engaging in activities constituting a conflict of interest shall be established.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Code of Ethics: A system of principles governing a facility which conforms to accepted professional standards of conduct.

III. PROCEDURES:

A. General Standards of Conduct: Any effort to realize personal gain through public employment, beyond compensation provided by the parent agency, is a violation of public trust, as is any conduct which would create a justifiable impression in the public mind that such trust is being violated.

B. Conflicts of Interest:

1. No public employee may lawfully engage in any activity which, directly or indirectly, constitutes a conflict of interest. The following activities determine a conflict of interest:

   a. No staff member with an interest, financial or otherwise, in any business entity shall participate in a decision or action affecting the facility.

   b. No staff member shall act as attorney, agent, broker, representative or employee for, or receive compensation or anything of value from, any firm, person or corporation transacting any business with the parent agency. This includes participating in any litigation or proceeding adverse to the parent agency or giving opinions or evidence against the interests of the parent agency or agencies of the state.

   c. Employment with persons or organizations subject to licensing, approval, reimbursement or other review by the facility may not be undertaken without prior approval.

   d. Employment with persons or organizations engaging in business transactions with the facility may not be undertaken without prior approval.

2. The following activities relate specifically to relationships with juveniles and are prohibited:

   a. Accepting gifts or favors from any juvenile's family, or providing gifts or favors to any juvenile, family of a juvenile, or agent, except as authorized in the official performance of duties. This does not include the transfer of items normally associated with social manners.

   b. Developing relationships with juveniles other than those necessary in the normal conduct of business. Staff shall not use their position to become emotionally, physically and/or romantically involved with juveniles.

3. Political Activity: Staff may not use their official authority or influence for interfering with or affecting the result of an election, and they may not take an active part in political campaigns of a partisan nature.

C. Outside Employment: Staff may not engage in outside employment without the permission of the Director. This applies to self-employment, and/or to membership on boards or in other activities where a potential conflict with their duties or responsibilities may exist, or which may otherwise adversely affect their performance. The following guidelines identify some potential areas of conflict:

1. The outside employment may not occur during normal working hours without permission and coverage.

2. The outside employment may not create or seem to create a conflict of interest with policies and programs of the facility.

   a. Employment with persons or organizations subject to licensing, approval, reimbursement or other review by the facility may not be undertaken without prior approval.

   b. Employment with persons or organizations engaging in a business transaction with the facility may not be undertaken without prior approval.

3. The outside employment may not diminish the effectiveness of the staff member in the performance of his/her duties by causing physical or mental fatigue or by discrediting the policies or programs of the facility.
D. Confidential Information:

1. No staff member shall use confidential information obtained in the course of official duty, for any purpose not related to agency objectives.

2. A staff member found guilty of dispensing confidential information may be prosecuted according to parent agency rules and/or county, state or federal statutes.

E. Distribution of Information: The Director shall initiate actions to provide each staff member (full time, part-time, contract and volunteer) with copies of the code of ethics. A signed receipt shall be filed in each staff member’s personnel folder.

F. Training: The Assistant Directors shall include information about the code of ethics in all basic training classes and at least one hour of training annually for all full time staff.
B. Evaluation of Operations:

1. Section Chiefs shall evaluate section operations and propose operational improvements within allotted resources.

2. Section Chiefs shall provide realistic coverage for all essential posts and coverage required for training, days off, annual and sick leaves and other authorized and unauthorized absences.

3. Section Chiefs shall be prepared to present the Director with a written or oral presentation of staffing requirements at each budget and planning committee meeting.

C. Staffing Evaluation: The Director shall regularly evaluate the facility staffing needs to ensure the best use of manpower resources. The evaluation process shall include consideration of existing needs, staff suggestions and recommendations, as well as current and projected plans and goals for the facility. The appropriate staff-juvenile ratio shall be maintained at all times.

D. Seniority:

1. Shall be considered the length of continuous service with the facility as a permanent staff member. A seniority date is established only when a staff member achieves regular status. Staff on probation, students, emergency hires, and seasonal hires do not establish a seniority date for the purpose of shift selection.

2. Shall not govern the number of shifts a staff member is entitled to work. Such determination is within the Assistant Director's discretion.

3. Loss of Seniority: A staff member loses seniority status when:
   a. He/she resigns.
   b. He/she is discharged for just cause.

E. Status of Personnel Program: The Director shall report the status of the personnel program regularly to the parent agency. These reports may be made by separate correspondence or included in the Director's regular narrative reports to the parent agency. The report shall include at a minimum statistics on:

1. Total number of authorized staff.
2. Total number of staff on duty.
3. Vacancies by category.
4. Affirmative action data.
5. Unusual vacancies.
6. Staff-supervisory relations.
I. POLICY: The Assistant Directors shall maintain adequate personnel records for each staff member, ensure the confidentiality of those records and provide staff access to them. Staff members shall have the right to challenge information in their personnel files.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Official Personnel File: A current and accurate record of a staff member's job history including all important information relating to that history.

B. Mandatory Acknowledgements: Signed receipts from staff which indicate acceptance to abide by mandatory rules and regulations.

III. PROCEDURES:

A. Official Personnel File: The Office Manager is directed to establish a permanent, separate and confidential record for each facility staff member. The record shall be divided into recruitment, performance, awards and adverse actions, current assignment and education/training. Each section shall contain, at a minimum, the following information:

1. Recruitment:
   a. Application for employment.
   b. A summary of verification of applicant's background, including training, education, employment history and salary records.

2. Performance:
   b. Current completed performance rating.

b. Previous completed performance ratings.

c. Correspondence and/or notations related to performance.

d. Provisions shall be made to remove adverse actions, i.e., letters of reprimand, written warnings, etc. from the personnel file after two years, given that no recurrent adverse actions on the part of the staff member occurs.

4. Current Assignment: Current assignment material should be organized to allow easy access and accuracy. Each file must include at a minimum:

a. Staff member's name.
b. Social security number.
d. Current salary and grade.
e. Date appointed and type of position.
f. Location of position: city, county, state.
g. Facility.
h. Receipt signatures for all mandatory acknowledgements (i.e., code of ethics, affirmative action agreement, oath of office, grievance manual, or other documents for which staff member receipts are required by the parent agency and/or facility).

5. Education and Training: The following information shall be included in a staff member's file:
a. A complete record of verified educational achievements
b. A summary and/or copies of certificates for all specialized education
c. A summary of the staff member's current achievement toward mandatory training required by the parent agency and facility

B. Supplement to Supervisory Evaluations: If a staff member is not satisfied that supervisory evaluations accurately reflect either the fact or the totality of the events being described, the staff member shall have the right to supplement the personnel record with documentation designed to correct the perceived discrepancy.

C. Personnel Record Security: All records shall be maintained in a physically secure area with locking devices to prevent unauthorized entry. The records shall always be stored in fireproof vaults or cabinets except during preparation, assembly and review of material.

1. Information Confidentiality: All information in a staff personnel file is considered confidential and may be released only with written consent of the staff member. Any staff member or official who discloses information of a confidential nature obtained from the staff member's personnel file may be guilty of illegal conduct or conduct in conflict with parent agency and/or facility regulations. This restriction does not include review of the material by personnel so authorized in writing by the Director or parent agency. Such authorizations for review are usually limited to administrative office employees, supervisory staff and parent agency officials whose duties require an understanding of the background and qualifications of the staff member.

D. Review and Challenge by Staff: Staff are encouraged to review the contents of their personnel files periodically to ensure that the information is accurate and complete.

1. Review:
   a. Reviews should be conducted under visual observation of a staff member of the administrative office.
   b. The review may reveal the need for additional updating information.

2. Challenges: Incorrect or misleading material may be challenged by the staff.
   a. Preparation of a written statement describing the information to be challenged and the reason why the information is believed to be incorrect.
   b. Presentation to the staff member's immediate supervisor of dated information. The supervisor will examine the evidence and prepare a written recommendation for action to the Director.
   c. Review by the Director of controversial material and information presented by the staff member and the supervisor. The Director shall render a written decision to the staff member within 30 days of receipt of the initial date of presentation to the supervisor. The Director may decide:
      (1) To allow the information to remain in the file.
      (2) To allow portions of the information to remain in the file.
      (3) To remove the information and all references to it.

3. Appeal of Decision: If dissatisfied with the decision as rendered, the staff member may submit the material and all relevant information to the parent agency for review. The parent agency shall respond in writing within 30 days of receipt of the initial date of presentation to the supervisor. The parent agency may:
   a. Allow the Director's decision to stand.
   b. Modify the decision.
   c. Reverse the decision of the Director and remove or modify the controversial information as requested by the staff member.

Effective Date
Approved By:
PERSONNEL DATA SUMMARY

NAME OF PERSON

1. LAST NAME
   FIRST NAME
   MIDDLE INITIAL
2. SOCIAL SECURITY NO.
3. TELEPHONE NO.

POSITION APPLIED FOR

AT INSTITUTION

1. ADDRESS: STREET, R.O.D.
2. CITY
3. COUNTY
4. STATE
5. ZIP CODE

ARE YOU A U.S. CITIZEN?

[ ] YES    [ ] NO

HOW LONG A RESIDENT

[ ] YES    [ ] NO

ARE YOUR SCHOOL/EMPLOYMENT RECORDS LISTED UNDER ANOTHER NAME?

[ ] YES    [ ] NO

VETERANS CREDIT CLAIMED

[ ] YES    [ ] NO

ARE YOU AN A.M.A. MEMBER?

[ ] YES    [ ] NO

1. LIST OFFICE MACHINES YOU OPERATE

   A. TYPEWRITER
   B. TRANSMITTER
   C. DICTATION
   D. FOREIGN LANGUAGES SPOKEN

2. EMPLOYMENT RECORD

   LIST YOUR COMPLETE EMPLOYMENT RECORD INCLUDING PERIOD OF UNEMPLOYMENT STARTING WITH YOUR PRESENT POSITION AND WORKING BACKWARDS. INCLUDE PAID EMPLOYMENT, VOLUNTEER OR UNPAID WORK, AND MILITARY SERVICES WHICH IN YOUR OPINION HELPS TO QUALIFY YOU FOR THE JOB YOU WANT.

   A. NAME AND ADDRESS OF EMPLOYER
   B. POSITION TITLE
   C. NAME AND TITLE OF IMMEDIATE SUPERVISOR
   D. DATES OF EMPLOYMENT
   E. NO. HOURS WORKED EACH WEEK

3. LIST ANY PROFESSIONAL ORGANIZATIONS TO WHICH YOU BELONG (DO NOT LIST ANY ORGANIZATION THAT WOULD REVEAL YOUR RACE, COLOR, RELIGIOUS CREED OR NATIONAL ORIGIN.)

4. LIST ANY OTHER TRAINING AND EXPERIENCE YOU HAVE THAT YOU BELIEVE PARTICULARLY APPLICABLE TO THE TYPE OF WORK FOR WHICH YOU ARE APPLYING.

5. VETERANS CREDIT CLAIMED

   [ ] YES    [ ] NO

6. EMPLOYMENT RECORD

   LIST YOUR COMPLETE EMPLOYMENT RECORD INCLUDING PERIOD OF UNEMPLOYMENT STARTING WITH YOUR PRESENT POSITION AND WORKING BACKWARDS. INCLUDE PAID EMPLOYMENT, VOLUNTEER OR UNPAID WORK, AND MILITARY SERVICES WHICH IN YOUR OPINION HELPS TO QUALIFY YOU FOR THE JOB YOU WANT.

   A. NAME AND ADDRESS OF EMPLOYER
   B. POSITION TITLE
   C. NAME AND TITLE OF IMMEDIATE SUPERVISOR
   D. DATES OF EMPLOYMENT
   E. NO. HOURS WORKED EACH WEEK

7. ARE YOU EVER CONVICTED OF A CRIMINAL OFFENSE OR HAVE YOU EVER POSTED BOND OR COLLATERAL IN CONNECTION WITH A CRIMINAL PROCEEDING OR ARE YOU NOW PENDING ONLY TO AN ALLEGATION OF CREATION?

   YES    [ ] NO

I HEREBY CERTIFY THAT ALL STATEMENTS ARE FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM AWARE THAT ALL STATEMENTS CONTAINED HEREIN WILL BE VERIFIED AND THAT FALSE OR MISREPRESENTATION WILL RESULT IN DISMISSAL.

DATE

SIGNATURE
CHAPTER 4
TRAINING AND STAFF DEVELOPMENT

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8086 through 2-8100 and National Advisory Committee Standards 1.425 through 1.429, about an organized plan to achieve specific learning objectives.

To create a common understanding of facility objectives and policies, initial as well as on-going training of all staff members is necessary. Each facility must determine the resources and degree of training available within their budget constraints.

I. POLICY: Training programs for all staff members shall be planned, coordinated and implemented by a qualified employee at the supervisory level who has completed 40 hours of training as a trainer in areas in which the training is being conducted. This training shall include all maintenance and operation service personnel, food service workers, clerical staff and other service personnel, such as juvenile careworkers, school teachers, and the administrative staff. The inclusion of all personnel in training programs establishes a common understanding of objectives and policies, facility rules of juvenile conduct, and the sanctions available. Programs shall be planned to meet the needs of each staff member's respective job classification and shall be pertinent to their work with juveniles.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Facility Training Plan: The program plan for the facility which describes and outlines the major program elements, requirements and schedule to be followed.

B. Individual Training Plan: The specific training schedule tailored to meet mandatory training requirements of the facility and training needs of the individual as identified by the staff member and the staff member's supervisor(s).

C. Training: Includes formal classroom instruction, on-the-job training under the direction of an instructor, training meetings or conferences which include a formal agenda and instruction by a teacher, supervisor or official, and physical training, etc. Training programs usually include requirements for completion, attendance recording and a system for recognizing completions.

III. PROCEDURES: The Assistant Directors shall be responsible for planning and coordinating all training programs to conform to the policy requirements. Individual conferences with Section Chiefs should be held regularly according to a definite plan for staff development. Weekly staff meetings should be held for all personnel in direct contact with juveniles. Space and equipment shall be provided for training and staff development.
A. Program Design: The Assistant Director, working in conjunction with the Section Chief of the training section shall design and implement a training program which includes:

1. Pre-service orientation for new staff.
2. In-service training in the existing practices, procedures, and skills necessary for working with juveniles.
3. Professional development and skills/techniques development in keeping with the latest information in the various components of the facility program.
4. Professional and career advancement training.

B. Basic Training Objectives: General program objectives shall be implemented by the supervisory staff:

1. To familiarize the new staff member with the facility grounds and physical plant.
2. To inform the new staff member of the parent agency mission and facility goals.
3. To provide staff with improved skills in their specialties.
4. To provide a cadre of resource people for facility sections and programs.
5. To develop human relation skills to establish productive, meaningful and professional relationships with juveniles.

C. Curriculum:

1. Juvenile: Theories of juvenile development, juvenile delinquency, family dynamics and the part these forces play in juveniles.
2. Staff: Study of organizational structures, the process of communication, counseling skills and supervision.
3. External Environment: Study of the police, courts, probation officers, and other facilities and organizations having direct or indirect impact on the detention process.

D. Fundamental Training: Depending on the staff member's title and position within the facility, the following types of training are considered fundamental:

1. All staff:
   a. Human relations.
   b. Communication skills.
   c. Special needs of juveniles.
   d. Facility philosophy, policies and procedures.
   e. Emergency procedures.
   f. First aid and life sustaining functions.
   g. Rights and responsibilities of juveniles.
   h. Staff rights and responsibilities.

2. Support Staff (secretaries, maintenance engineers, nurses, cooks, clerks, typists, consultants and drivers):
   a. Basic skills development.
   b. New technologies in area of specialty.

3. Supervisory Staff:
   a. Management theory.
   b. Planning and evaluation systems.
   c. Staff-supervisors relations.
   d. Public relations.
   e. Relationships with other agencies.
### 4. Juvenile Care Staff:
- a. Crisis intervention techniques.
- b. Problem solving and guidance counseling.
- d. Juvenile grievance and disciplinary process.
- e. Physical restraint procedures.
- g. Significant legal issues.
- h. Use and misuse of authority.
- i. The juvenile justice system.
- j. Key control and security awareness.
- k. Social and cultural lifestyles of juveniles.
- l. Relationship building techniques.
- m. Transportation of juveniles.

#### E. Training Modalities: The training staff shall use:
1. Training packages and programs.
2. Instructors and speakers from within the facility.
3. Area specialists (court officials, university professors, consultants, public safety officers, fire marshals, and similar specialists.
4. Audio-visual programs.

#### F. Mandatory Training Requirements by Category of Employment:
1. All new staff members shall receive 40 hours of orientation training prior to independent assignment.
2. Clerical and support personnel with minimal juvenile contact shall receive 16 hours training during the first year of employment in addition to training specified, and 16 additional hours each year thereafter. This training should minimally include:

#### 3. Support personnel who have daily contact with juveniles must receive an additional 40 hours of training during their first year of employment and 40 hours each year thereafter. Training for this group may include categories previously in these procedures. These minimum training areas include:
- b. Basic counseling techniques.
- d. Emergency procedures.
- e. Section relationships as they affect parent agency and facility goals.

#### 4. Personnel who work with juveniles confined separately from the total population shall receive specialized training.

#### 5. All new juvenile care/supervisory staff must receive an additional 120 hours of training during the first year of employment and 40 hours of additional training each subsequent year. Training must include:
- a. Leadership/supervision of juveniles.
- b. Behavior observation/adolescent psychology.
- c. Social work and counseling skills.
- d. Dealing with violent juveniles/crisis intervention.
- e. Significant legal issues.
- f. Decision-making.
- g. Security procedures.
Training and Staff Development

Training Criteria

4.1

Chapter Subject Policy Page

TRAINING AND STAFF DEVELOPMENT Training & Training Criteria 4.1 Page 6 of 8

h. Key control.
i. Social/cultural lifestyle of juveniles.
k. Emergency procedures/first aid.
l. Child growth and development.

6. Administrative and supervisory personnel are required to receive 80 hours of training during their first year of employment and 40 hours of training each subsequent year, including:
a. General management and related subjects.
b. Labor law.
c. Staff-supervisors relations.
d. Criminal justice.
e. Public relations.

G. Part-Time and Volunteer Staff: Shall be required to participate in training according to the number of hours each week on-the-job. If a volunteer works the same number of hours as a full-time staff member, the volunteer shall receive the same training opportunity as a full-time staff member. Orientation for part-time and volunteer staff must be appropriate to their needs and based upon prior experience, frequency of juvenile contact and program responsibility.

H. Advanced In-Service Training: Shall be determined by the Staff Training Officer and shall include advanced social service practice and theory, i.e., legislative action affecting the practice of social work, ethical issues, management skills, etc. Participation in advanced in-service training shall include in-house, local or out-of-town training. Professional conferences and seminars shall be made available for staff who have shown consistent, above-average performance on-the-job.

I. Training Records: Staff training records shall be kept by the respective Assistant Director. A separate training record shall be established for each staff member and include:

1. Staff members name.
2. Assignment category (i.e., caseworker, clerical and support, professional specialist, administrative/supervisory or part-time).
3. Entry on duty date.

4. Annual training hours required.
5. An up-to-date chronological list of training completed by the staff member.

J. Training Record Review: Review of each staff member's training record shall be accomplished by the Assistant Director at the end of each quarter. A complete listing of the staff member's training status and a summation of the training and achievements shall be completed quarterly by the Assistant Director and forwarded to the Director for review.

K. Library and Reference Services: Shall be available to complement the training and staff development program. Professional literature, including technical books, audio-visual equipment, and journals dealing with detention, delinquency, juvenile guidance and related fields should be available for reading.

L. Professional Organizations and Education: Provisions should be made for staff education development and participation in criminal justice associations, professional organizations and activities at both local and national levels. Combinations of academic education programs, professional seminars, workshops and conferences, and similar work-related activities are invited. Funds are available to provide administrative leave and/or reimbursement for such participation when approved in advance by the Director.

M. Educational Reimbursement: A complete listing of all requests shall be made to the Director.

1. Requests submitted to the Director should contain:
a. Name of accredited institution.
b. Course title and description.
c. Number of credits.
d. Tuition and fees.
e. Dates of course.
2. The Director may approve or disapprove. If approved, the Director may recommend:
a. Total funding.
b. Partial funding.
c. Referral to outside funding.

d. Administrative leave.

N. Outside Resources: The training staff may refer to other outside resources such as colleges, universities, or federal agencies for guidance and assistance in developing and conducting the training program.
CHAPTER 5
ADMINISTRATIVE INFORMATION & RESEARCH

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8101 through 2-8109, 2-8121 and National Advisory Committee Standards 1.21, 1.24, 1.31, 1.32. The policy and procedures are about management information systems.

An important management tool is the ability to access accurate and timely information. Within budget constraints, systems of collection and dissemination must be developed.

I. POLICY: To facilitate decision-making based on accurate and carefully evaluated data, an information system should be set up so that research and timely responses to juveniles needs' and outside inquiries can be made.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Demand Information: Required information such as the number of admissions or releases during the specific 12 month period by offense, length of stay and type of release, usually generated only when a special report is required.

B. Standard Information: Information required for administrative control as defined by goals and objectives, such as the number of admissions and releases each week and the number of juveniles in the facility at a given time.

C. Research Activities: Activities which systematically investigate a phenomenon or series of phenomena.

D. Social Science Research: Includes, but is not limited to, studies involving the use of interviews, questionnaires and reviews of case records. This does not include any study which will expose research subjects to the possibility of physical, psychological or other harm as a consequence of their participation in the study.

III. PROCEDURES:

A. Maintaining an Information System: The facility shall maintain an information system consisting of files and records, both manual and computer-assisted, concerning all major aspects of facility operations.

B. Operating an Information System: The Director shall determine the system's capability for demand information by performing the following tasks:
1. Surveying similar programs to determine types of information being collected.
2. Analyzing reports generated in the past to determine types of information usually required.
3. Providing a written summary of the staff's findings to ensure potential demand information is incorporated in the system.

C. Organizing an Information System: The Director shall assign staff to participate in developing and revising systems for the collection, verification, processing, storage, access and handling of necessary operation and planning data for the facility. These procedures should be reviewed by the Director at least quarterly.

D. Retrieval and Review of Information Collected:
1. The system shall generate typed quarterly reports summarizing the data collection.
2. Reports shall be reviewed by the Director and other designated staff and submitted to the parent agency.
3. Program adjustments and future program plans shall be developed as a result of these reports.

E. Security of Information Collected: All proposals for outside research must be reviewed and approved by the Director. The Director or designee shall discuss opportunities for research projects as well as specified research and evaluation needs of the facility. All research requests shall be answered as soon as possible. Applications to conduct outside research shall include:
   1. Title of study.
   2. Name, address and telephone number of the principal researcher and all research staff.
   3. An endorsement by a recognized research organization, such as a university, college, private foundation, consulting firm or public agency that has a mandate to perform research, certifying that the research proposal is for valid scientific, educational or other public purposes.
   4. A summary of the goals of the study and the justification for the research.

5. A detailed research design including:
   a. The facility resources and personnel that may be needed for the study.
   b. The sampling procedures for selecting juvenile subjects or juvenile records for the research as well as criteria that will be used for sample selection.
   c. The procedures for data collection, copies of research instruments to be used including interview schedules, questionnaires, data collection forms and tests.
   d. The security procedures to be followed to protect the privacy of participants and confidentiality.
   e. Details of compensation.

6. A proposed research contract let by the facility or parent agency should include a full budget breakdown.

F. Procedure for Obtaining Approval:
1. Two copies of the application shall be submitted to the Director for review.
   a. If the study requires the direct involvement of juveniles, such as response to interviews or completion of questionnaires, the Director may ask a representative group of staff to review the proposal and to submit a recommendation for approval or disapproval.
   b. The Director shall forward to the parent agency one copy of the application, together with his/her decision.

2. The Director shall ensure that all researchers are informed of parent agency policy concerning research. A signed agreement shall be completed prior to initiation of the project.
3. The Director shall approve the plan for using and disseminating the research, and shall review and comment on the final findings prior to actual dissemination.

G. Conduct of Outside Research: Research in the facility must comply with county, state and federal guidelines as well as the parent agency on the use and dissemination of research findings.
1. The researcher shall obtain signed forms from juveniles, parents/legal guardians and staff scheduled to participate in the research.

2. A staff member shall be assigned to monitor the research project and shall ensure confidentiality.

3. The principal researcher shall explain the study and its justification to all potential subjects. A written summary, in laymen's language, shall be prepared and a copy given to each potential subject. It shall be made clear to all juveniles and parents that their participation in the research is not required and shall in no way affect the terms or length of their detention.

4. The principal researcher shall maintain adequate records enabling the Director to ascertain the status of a study at any time.

5. Any data collected during the course of the research shall be used only as agreed to by the subjects prior to their entry into the study.

6. No juvenile shall receive compensation, renumeration or payment of any kind in connection with a research study without the written permission of the Director.

7. No staff shall receive compensation, renumeration or payment of any kind from the researcher without written authorization of the Director.*

8. Access to research data collected identifying juveniles shall be limited to research staff charged with collecting and evaluating the data, and to the Director or designee.

9. All research data and findings shall be reviewed for accuracy by the Director prior to publication or dissemination.

*Approval of the parent agency is required if the Director is to receive compensation.

H. Follow-Up Reports on Outside Research:

1. Immediately following the facility phase of any research study, a brief report shall be prepared by the principal researcher. This report, including a summary of the content of the study, shall be copied for the Director.

2. When the entire research is completed a copy of any report shall be provided to the Director by the principal researcher.

3. In any report of results, researchers shall not use correct names of subject or describe any juvenile in such detail that they might be identified.

I. Violations of Outside Research Regulations:

1. Permission to conduct the current study and any further research may be discontinued for any violations of these regulations or of other parent agency regulations in the course of the research.

2. Violations of the regulations may subject the violator to civil or criminal liability.
CHAPTER 6
INTAKE

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8335 through 2-8348 National Advisory Committee standards 3.141 through 3.147, 3.151, 3.152, 3.154, 3.155 American Bar Association Standards 2.9, 3.1, 3.4, 6.1 through 6.7.

The sample policy applies only where statutes require that facility personnel are responsible for the juvenile intake function.

This chapter assigns authority and outlines how, why and when a juvenile should be accepted into the facility.

I. POLICY: To prohibit placing status offenders, abused, neglected or abandoned juveniles as well as those juveniles charged with delinquent offenses but not requiring secure confinement into the detention facility, an intake unit shall be established and operative 24 hours each day. Intake staff shall be responsible for admitting only those juveniles with legal and/or proper authorization and for ensuring expeditious scheduling and review within the legal process. Their duties involve but are not limited to 1) dismissal of complaints, 2) referral for service to a non-court agency and 3) filing petitions and using temporary detention.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Intake Unit: A unit established to review complaints submitted pursuant to the jurisdiction of the court over delinquency and/or non-criminal misbehavior, and to make the initial determinations about release or retention.

B. Intake Official: The Intake Official responds to all referrals from arresting agencies directed to this section and assists any other agency that has custody of a juvenile on probation to this facility. He/she also determines:
   1. Whether the use of secure detention is necessary.
   2. Whether a formal petition shall be initiated in court if the intake is performed while the juvenile is on probation.

C. Abused Juvenile: A person under the age of 18 years whose parent, guardian, or other person having custody and control:
   1. Inflicts, or allows to be inflicted, physical injury by other than accidental means which causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ.
2. Creates or allows creation of a substantial or ongoing risk of physical injury by other than accidental means which would be likely to cause death or serious or protracted disfigurement, or protracted loss or impairment of the function of any bodily organ.

3. Commits or allows commitment of an act of sexual abuse.

4. Impairs the physical, mental, or emotional condition or places the juvenile in imminent danger of becoming impaired as the result of the failure to exercise a minimum degree of care:
   a. In supplying adequate food, clothing, shelter, education, medical or surgical care though offered financial or other reasonable means to do so.
   b. In providing proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or substantial risk thereof, including the infliction of excessive corporal punishment; or by any other act of a similarly serious nature requiring the aid of the court.

5. Willfully abandons the juvenile.

D. Neglected Juvenile: A juvenile is to be considered neglected when his/her parent or other person responsible for the juvenile's care fails to provide adequate food, clothing, shelter, education, medical and surgical care or permits mental, emotional or physical impairment resulting from the failure to provide an adequate degree of care and supervision.

III. PROCEDURES:

A. Preliminary Investigation and Determination:

1. On referral of a juvenile or a juvenile's case to the facility the Intake Official shall conduct a preliminary investigation to determine:
   a. The person is a juvenile within the meaning of this title and this judicial district is the appropriate jurisdiction.

b. There is probable cause to believe the juvenile engaged in delinquent conduct.

c. Further proceedings in the case are in the interest of the juvenile or the public.

2. If the Intake Official determines that the person is not a juvenile, that this matter is outside the jurisdiction of the district court, or that probable cause and further proceedings are not warranted, the juvenile shall not be detained.

3. If it is determined he/she should be detained a written notice shall be filed with the court, together with a copy of the complaint, specifying the terms of detention, the basis for imposing such terms, and the less restrictive alternatives, if any, that may be available. A copy of the notice should be given to the family court section of the prosecutor's office, the juvenile, and the juvenile's attorney and parents, guardian, or primary careworker.

4. If a juvenile is not released, a request for a detention hearing shall be made to the court, and an informal hearing shall be held promptly, but not later than the second court day after the juvenile is taken into custody.

5. Delinquency petitions shall be referred to court when:
   a. Juveniles and their parents or attorneys request a formal hearing, there are substantial discrepancies about the allegations, denial of a serious offense or protection of the community is an issue.
   b. The appropriate prosecuting official determines the legal sufficiency of the case and the need for referral.

6. If detention is continued, the judge should explain, on the record, the terms of detention and the reasons for not recommending less restrictive alternatives.

7. If an accused juvenile remains in detention after the initial court hearing, the Intake Official should review in detail the circumstances of the arrest and the alternatives to continued detention. A report on these investigations, including any information that the juvenile's attorney may wish to have added, should be presented to the court at the status review hearing.
8. A review detention hearing will be held every seven court days for juveniles remaining in detention.

B. Authorization for Admission: There are four (4) ways a juvenile will be accepted into the admissions area:
   1. An arrest report from a local, state, or special law enforcement agency indicating specific public offenses.
   2. Bench warrants issued by the Juvenile Session of the Court.
   3. Order of Detention issued by the Juvenile Session of the Court indicating that the juvenile is remanded for secure detention with a pass court date, remanded for referral to diversion services, or remanded to be released to a parent/guardian or other agency.
   4. A juvenile returning from diversion services.

C. Reasons for Detention: A juvenile taken into custody may be detained prior to the hearing on the petition only if:
   1. He/she is likely to abscond or be removed from the jurisdiction of the court; or
   2. Parent, guardian, custodian, or other person is unable to return the juvenile to court when required; or
   3. He/she is accused of committing a felony offense and may be dangerous to self or others if released; or
   4. He/she has a prior offense pending at the time of the present offense and is likely to commit an offense if released; and
   5. No less restrictive alternatives are suitable or available.

D. Receipt for Juvenile Procedures:
   1. A receipt for the juvenile is prepared in triplicate and signed by the arresting officer and his supervisor.
   2. A copy of the receipt notice shall be given to and signed by the parent, guardian, or custodian.
   3. The notice, together with a report of the Intake Official's disposition of the case, shall be promptly filed with the law enforcement agency for which the officer works. In addition to information about the circumstances of the alleged misconduct, the report shall include:
      a. The grounds on which the arresting officer believes custody was authorized, the efforts taken to contact parents/guardians and the reasons why the juvenile was not released to his parents/guardians.
      b. A statement of whether the juvenile is on juvenile probation or parole, or has another delinquency offense pending.
      c. The arresting officer's signature, or that of his supervisor or juvenile law enforcement officer if he/she aided in the disposition of the case.

E. Juveniles Under the Care, Custody and Control of Another Agency:
   1. Will not be detained simply because of agency rules or policy violations.
   2. Will be processed the same as a juvenile who is not under an agency's supervision if he/she violates the law. The Intake Official will notify the caseworker from the other agency.

F. Juvenile Abuse or Neglect: During the intake process, if abuse or mistreatment is apparent or suspected, the Director should be notified immediately and appropriate actions should be initiated. If medical treatment appears to be necessary, treatment will be arranged promptly.
   1. Guidelines for Identifying an Abused Juvenile: A juvenile is to be considered physically abused when his/her parent or parent substitute inflicts or allows to be inflicted:
      a. Any marks and/or welts, cuts, punctures, scratches, broken bones and skull fractures, burns, human bites, internal injuries, suspicious scars, or evidence of sexual assault.
   2. Guidelines for Identifying a Neglected Juvenile: Neglect may be recognized in, but not limited to, such symptoms as:
### Chapter INTAKE

<table>
<thead>
<tr>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
<th>of 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Juvenile Intake Procedures</td>
<td>6.1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Main nutrition, dehydration, exposure, social retardation, deformity, death, failure to thrive, emotional disturbance, untreated ongoing medical problems, infected skin lesion, and untreated dental problems.

3. Reporting Alleged or Suspected Incidents of Juvenile Abuse to the Division of Youth and Family Services:

   a. Legal Responsibility: As mandated by law, anyone who knows or suspects that an incident of alleged child abuse or neglect has occurred must immediately report this to the local Division of Youth and Family Services.

   b. Reports: Include the following information, if possible:

      1. Name and address of the juvenile and his/her parents or custodians.
      2. Age of juvenile.
      4. Any previous injury or maltreatment.
      5. Name of alleged perpetrator.
      6. Any other relevant information.

---

### Sample Juvenile Detention Facility

#### INTAKE FORM

Received this date________________________ at a.m. __________________________________________

The custody of__________________________________________________

From___________________________________________________________

Department____________________________________________________

Address________________________________________________________

Authority_______________________________________________________

Condition: _____________________________________________________

Received by____________________________________________________

Witness________________________________________________________

Witness________________________________________________________

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Approved By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CHAPTER 7
ADMISSION PROCEDURES

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8349 through 2-8353, 2-8267, and National Advisory Committee Standard 4.263. This sample is written as an aid to the juvenile’s transition into the facility, as well as establishing a foundation for positive staff and juvenile relations.

Personal property is often the subject of litigation and the sample policies stress use of effective identification methods and secure storage.

I. POLICY: To reduce the anxiety level for all newly admitted and transferring juveniles, an admission and orientation program shall be conducted immediately following their arrival at the Detention Facility.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Commitment Papers: The written, court order confirming placement of a juvenile, sometimes referred to in legal terms as a "mittimus."

III. PROCEDURES:

A. Initial Screening:

1. Prior to accepting a juvenile for admission, the Intake Official will review the authorizing document for name, age and charge. Court Orders and Bench Warrants should be reviewed for name and instructions.

2. If the Intake Official has any question about the authorizing document he/she should clear it prior to allowing the transporting officer to leave. The juvenile should also be screened for injury, intoxication, acute illness. Should the Intake Official have any doubt about the physical or mental condition of a juvenile, he/she should call the Medical Staff for screening prior to accepting. Should no one from the Medical Staff be available, and the Intake Official believes the juvenile needs medical attention, the Intake Official shall refuse admission until he/she is presented with proper documentation from the transporting officer.

B. Admissions Intake Card: For each juvenile brought to the facility, an admissions intake card shall be completed. If a juvenile has had a prior admission, the admissions intake card should be updated. This card includes:

Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.1</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chapter:</th>
<th>Related Standards:</th>
<th>Subject:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMISSION PROCEDURES</td>
<td>ACA: 2-8349 through 2-8351, 2-8353, 2-8267</td>
<td>Juvenile Admission Procedures</td>
</tr>
<tr>
<td>NAC: 4.263</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Statistical Data:
   a. Name and alias.
   b. Height.
   c. Weight.
   d. Hair color.
   e. Eye color.
   f. Telephone number.
   g. Date of birth.
   h. Age.
   i. Sex.
   j. Race.
   k. School.
   l. Grade.
   m. Person juvenile lives with.
   n. Parents' name and address.

2. Offense Information: For each admission enter:
   a. Admission date - date juvenile arrived.
   b. Time - time into admissions office.
   c. Number - from admissions log book.
   d. Referral - who brought juvenile to admissions.
   e. Admitted by - name of admissions staff responsible for accepting the juvenile.
   f. Offense - charge indicated on police record, petition, court order or bench warrant.
   g. Discharge date - date juvenile left facility, either from the admissions area, secure area, or diversion services placement.
   h. Time - time of release.
   i. Release Person/Agency:
      (1) To whom the juvenile is released, i.e., Department of Human Resources, parents, mother, etc.
      (2) By whom the juvenile is released, i.e., name of admissions staff releasing juvenile.
      (3) By whom the juvenile is authorized release, i.e., rolling juvenile court, etc.

C. Orientation Process: The Intake Official shall treat the juvenile in a pleasant, courteous way, explaining each step for the admissions procedure clearly before beginning:

1. Showering Process: The juvenile shall be escorted into the showering area; if a male juvenile, the staff member shall also be male; if a female juvenile, the staff shall be female.
   a. Ask the juvenile to disrobe. Staff should label and record all personal clothing and its condition. Explain to the juvenile that if he/she prefers wearing facility clothes, his/her personal clothing will be laundered and neatly stored away, or else sent home, at the discretion of the juvenile. The juvenile should also be given shampoo to use in the genital, underarm and top of head areas. During this period the staff should be aware of possible disorientation problems, substance inclusion, cuts or marks, tattoos, etc. A record should be made of any remarkable physical characteristics noted during this time.
   b. If, during this process, abuse or mistreatment is apparent or suspected, the Director should be notified immediately and the appropriate actions, outlined in Chapter 6.1, shall be followed.
   c. Staff should give the juvenile toiletry articles to be stored outside of his/her room:
      (1) Wash cloth.
      (2) Bar of soap.
      (3) Clean towel.
(4) Comb.
(5) Toothbrush.
(6) Tube of toothpaste.

d. After the shower, the juvenile should receive:

(1) A Juvenile Handbook.
(2) A shirt or blouse.
(3) A pair of jeans or shorts.
(4) An undershirt or bra.
(5) A pair of shorts or panties.
(6) Socks or stockings.
(7) Sneakers.
(8) Pajamas.
(9) A robe.
(10) A sweatshirt.

All of these articles shall be recorded in juvenile's admission file.

D. Adjustment Period:

1. Once the juvenile has been assigned to a room and the assignment noted on the daily population movement sheet, the Shift Supervisor shall review the Handbook with the juvenile and answer any questions he/she may have about the program.

2. During this adjustment period, the Shift Supervisor must review the expected behaviors (i.e., the rules) and the possible penalties for breaking those rules. Stress should be placed on the positive rewards of program participation and privileges which can be earned by acceptable behavior in the facility. He/she should also inform the juvenile of the sick call process. At this time, the juvenile may make two phone calls at facility expense. If the juvenile does make the calls, the numbers should be logged on the appropriate form. If the juvenile refuses or declines, that fact should also be noted.

E. Program Integration: Once the above process has been completed, the Shift Supervisor shall take the juvenile to the living section and introduce him/her to the other juveniles. To ease the initial adjustment process, the Shift Supervisor shall introduce him/her to a juvenile who is outgoing but not overbearing. Stress the fact, privately, that if the juvenile is nervous for the first few days, that is natural and he/she should realize that his/her room is a sort of retreat from the feeling of pressure.

F. Final Admissions Procedures:

1. The Medical Staff should be notified of the incoming juvenile and alerted to schedule the health appraisal. Kitchen staff should be advised of the new arrival and to acquaint other staff members with the juvenile. Overall impressions about him/her should be noted in the log.

2. The Intake Official shall complete the initial interview and develop the individual detention plan.
**Sample Juvenile Detention Facility**

**RECEPTION AND RELEASE LOG**

<table>
<thead>
<tr>
<th>Juvenile’s Name</th>
<th>DOB</th>
<th>County of Residence</th>
<th>Admission #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charge(s) Against Juvenile</td>
<td>(cite appropriate legal code number, as well as charge)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FIRST RECEPTION**

<table>
<thead>
<tr>
<th>Date</th>
<th>Weekday</th>
<th>Time</th>
<th>am/pm</th>
<th>From Whom</th>
<th>Name</th>
<th>Title</th>
<th>Agency</th>
<th>Received By</th>
<th>Name</th>
<th>Title</th>
<th></th>
</tr>
</thead>
</table>

**FIRST RELEASE**

<table>
<thead>
<tr>
<th>Date</th>
<th>Weekday</th>
<th>Time</th>
<th>am/pm</th>
<th>Released To</th>
<th>Name</th>
<th>Title</th>
<th>Signature</th>
<th>Identification Verified By</th>
<th>Driver’s License, Agency ID, Etc.</th>
<th></th>
</tr>
</thead>
</table>

**SECOND RECEPTION**

<table>
<thead>
<tr>
<th>Date</th>
<th>Weekday</th>
<th>Time</th>
<th>am/pm</th>
<th>From Whom</th>
<th>Name</th>
<th>Title</th>
<th>Agency</th>
<th>Received By</th>
<th>Name</th>
<th>Title</th>
<th></th>
</tr>
</thead>
</table>

**SECOND RELEASE**

<table>
<thead>
<tr>
<th>Date</th>
<th>Weekday</th>
<th>Time</th>
<th>am/pm</th>
<th>Released To</th>
<th>Name</th>
<th>Title</th>
<th>Signature</th>
<th>Identification Verified By</th>
<th>Driver’s License, Agency ID, Etc.</th>
<th></th>
</tr>
</thead>
</table>

**ADMISSIONS CHECKLIST**

<table>
<thead>
<tr>
<th>NAME:</th>
<th>DATE:</th>
<th>TIME:</th>
</tr>
</thead>
</table>

**Authorization of Admissions:**

- Admissions No: ____________________
- Police: ____________________
- Court Order: ____________________
- Warrant: ____________________
- Div. Serv: ____________________

**Process Check (Initials Only)**

- Frisk Search: ____________________
- Bench Warrants checked. Warrant on record? Yes No: ____________________
- Data Sheet Completed: ____________________
- Admissions Intake Card Completed: ____________________
- Probation, if Appropriate: ____________________
- Strip Search, if Detained: ____________________
- Properties and Monies Inventoried, if Detained: ____________________

**Detention Screening**

<table>
<thead>
<tr>
<th>Releasable:</th>
<th>Charge</th>
<th>Detained:</th>
<th>Charge</th>
</tr>
</thead>
</table>
- Parents Notified of Release/Hold: ____________________
- Parents will pick up at: ____________________ | time: ____________________
- Parents refuse to pick up because: ____________________

**Diversion Services Placement:**

- By Court Order: ____________________
- Admissions Staff: ____________________

**Accepted:** ____________________

**Rejected:** ____________________ | Why? ____________________

**Staff Making Placement:**

<table>
<thead>
<tr>
<th>Time Released:</th>
<th>Time to Secure:</th>
</tr>
</thead>
</table>

**Admissions Staff:**

**RPPU:**
### Sample Juvenile Detention Facility

#### YOUTH ADMISSION DATA

<table>
<thead>
<tr>
<th>Juvenile Name</th>
<th>Program Case No.</th>
<th>Admission Number</th>
</tr>
</thead>
</table>

**Principle Household Data at time of Admission:**
- **Head of Household or Name of Agency:**
- **Relationship to Juvenile:**
- **Address:**
  - Street and Apt. Number
  - City
  - State
  - Zip

**Parent/Guardian Name (if different from Head of Household):**
- **Address:**
  - Street and Apt. Number
  - City
  - State
  - Zip

**Employer or School:**
- **Name:**
- **Phone:**
- **Grade:**
- **SASS #:**
- **Driver Lic #:**

**Legal Data:**
- **County:**
- **Court:**
- **Case No.:**

**Authority for Admission:**
- **Court Order:**
- **Probationer/Parole:**
- **Parole:**
- **Warrant:**
- **Unspecified:**

**Legal Status:**
- **Currently on Probation:**
  - Yes
  - No
  - Currently on Parole:
    - Yes
    - No

**Petition Date:**
- **Arraignment Date:**
- **Next Court Date:**

**Charge/Behavior Specification:**
- **Two Responsible Officials to be Contacted in an Emergency (24 Hour Availability):**
  - **Name:**
  - **Address:**
  - **Phone:**
  - **Badge:**

#### ADMISSION DATA

- **Date:**
- **Time:**
- **am:**
- **First Admission:**
- **Readmission:**

**Health Status of Juvenile:**
- **Mark if applicable:**
  - Injured
  - Ill
  - Disoriented
  - Intoxicated

**General Comments:**
- **(if any):**

**Name of RSDSF Admitting Staff:**
- **Signature:**

---

The staff member who initially admits each juvenile to the facility is responsible for filling in ALL sections of this form and for signing it. Any parts left blank must be complete. If the Juvenile's health condition warrants it, follow medical emergency procedures. (Juvenile's)

1. **English is the Juvenile's primary language:**
   - Yes [ ]
   - No [ ]

2. **Does the Juvenile say he or she has a venereal or communicable disease, is pregnant, has any reason to immediately need medical help, or has rashes or infestations?**
   - Yes [ ]
   - No [ ]

3. **Is the Juvenile presently using a prescribed medication, or taken any drugs in the last 8 hours?**
   - Yes [ ]
   - No [ ]

4. **Is the Juvenile currently under treatment for an illness or injury?**
   - Yes [ ]
   - No [ ]

5. **Is the Juvenile an epileptic or a diabetic?**
   - Yes [ ]
   - No [ ]

6. **Medication present:**
   - Yes [ ]
   - No [ ]

7. **Was the Juvenile offered two telephone calls?**
   - Yes [ ]
   - No [ ]

8. **Was Juvenile informed of orientation process?**
   - Yes [ ]
   - No [ ]

9. **Did Juvenile receive a copy of personal property inventory:**
   - Yes [ ]
   - No [ ]

10. **Was the Juvenile offered explanation of rules and sanctions; rewards; visiting process?**
    - Yes [ ]
    - No [ ]

11. **Did Juvenile receive a copy of personal property inventory?**
    - Yes [ ]
    - No [ ]

12. **Was grievance procedure explained?**
    - Yes [ ]
    - No [ ]

**Medical Services access:**
- **Yes [ ]
- **No [ ]

**Medical Services access:**
- **Yes [ ]
- **No [ ]

**Medical Services access:**
- **Yes [ ]
- **No [ ]

---

**Sample Juvenile Detention Facility**

**Staff Signature**
- **Date:**

---

**COMMENTS:**
Sample Juvenile Detention Facility

MEDICAL AND ACTIVITIES PERMISSION FORM

In the matter concerning ____________________________,

I, the undersigned, certify that I am the ____________________________

of the above named juvenile, and I hereby give my permission

for the (Sample Juvenile Detention Facility) to provide any
dental, medical, or surgical treatment necessary to the welfare

of such juvenile while under the jurisdiction and care of the

facility. I understand that, except in cases of emergency, I

will be notified of any surgery or emergency medical treatment

being considered provided that my whereabouts can be determined.

I hereby consent to the participation of the above juvenile in

such field trips and activities as may be sponsored by the

(Sample Juvenile Detention Facility) staff while such juvenile

is under the jurisdiction of the facility.

Medical Insurance Information: 
Employer ____________________ 
Insurance Co. ____________________
Policy No. ____________________
Medicare or Medicaid No. ____________________

Dental Insurance Information: 
Insurance Co. ____________________
Policy No. ____________________

EMERGENCY TELEPHONE NO. ____________________

(witness) ____________________
(title) ____________________
(parent/guardian signature) ____________________
(date) ____________________
I. POLICY: To further program goal achievement and preserve a degree of personal identity consistent with facility safety and security requirements, juveniles shall be allowed to retain a reasonable amount of personally owned property.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Authorized Personal Property: The following personal property items may be retained by juveniles:

1. Legal documents.
2. Family pictures (not to exceed 10).
3. Prescription glasses.
4. Dentures.
5. Address book or list of addresses and correspondence.
6. Value limitation shall prohibit possession of any article exceeding $25.00; any article exceeding this limit must be approved in writing by the Director.

B. Personal Property Taken at the Time of Admission:

1. The Shift Supervisor shall collect items such as watches, rings, wallets, and other articles from the juvenile. All items shall be checked for contraband.
2. Money will be placed in the strong box by the Shift Supervisor and noted on the personal property card.
3. All property collected such as purses, suitcases, etc. will be tagged and listed on the juvenile’s personal property card, including a description, and if applicable, the brand name. Those items stored either in the Shift Supervisor’s safe or in a storage room will be so indicated on the property card.
4. The Shift Supervisor will have the juvenile sign the personal property card and will countersign and date the card.
5. The Shift Supervisor must store all property prior to the end of the shift.

C. Special Storage Items: Hazardous items such as guns, bullets, large knives, fireworks, etc., must be stored separately and securely until proper disposition can be safely made.

D. Verification and Security of Property:

1. Following written completion of the juvenile property record form, the Shift Supervisor shall complete the process in the presence of the juvenile. The Shift Supervisor shall:
   a. Address and seal the package(s) to be shipped.
   b. Seal all boxes or cartons to be stored with clear identification of juvenile’s name and date stored.
2. All property must remain in a securely locked area and/or under direct staff supervision at all times until it is delivered to the shipper or returned to the juvenile.

E. Unclaimed Personal Property:

1. When a juvenile is released without claiming his/her personal belongings the Shift Supervisor will complete an unclaimed items card. The juveniles name, locker, status and a description of the items are to be recorded on the card.
2. The Office Manager will review the card and notify the juveniles parents by phone and certified mail to claim the items within four weeks.
3. To claim the items, the juvenile or an authorized representative must sign both the face sheet and the unclaimed items card acknowledging receipt of the items.
4. If the items remain unclaimed after eight weeks, the Office Manager shall determine the approximate value of the items.
   a. If the value of the items is judged to be less than twenty five dollars, the Office Manager will arrange for their disposition on a case by case basis.
Under no circumstances will any of these items, regardless of value, be converted to the personal use of any staff member.

c. Any amount of money left unclaimed will remain available for claim by the juvenile.

5. The disposition of the items will be recorded both on the unclaimed items card and the juvenile's complete folder.

6. Unclaimed items valued in excess of twenty-five dollars will remain the responsibility of the facility.

   a. Clothing in this category will be relocated to long-term storage and noted on the unclaimed items card and the juvenile's folder.

   b. Valuables kept in sealed envelopes will remain on file in the administrative office.

7. The parents and probation officers of juveniles with unclaimed items will be contacted annually in an attempt to return the items.

I find the above listing of personal belongings to be correct.

Juvenile's Signature:
Witness:

I received personal property, taken upon admission, which I have examined and find correct.

Juvenile's Signature:
Witness:

Date: ____________________  Time: ____________________
Sample Juvenile Detention Facility  
PERSONAL PROPERTY SHEET

| NAME:            |  
| ADMISSION DATE:  |  
| RELEASE DATE:    |  

<table>
<thead>
<tr>
<th>MONEY</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PERSONAL PROPERTY</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CLOTHING</th>
</tr>
</thead>
</table>

SIGNATURE OF JUVENILE AT ADMISSION:  
SIGNATURE OF JUVENILE AT RELEASE:
CHAPTER 8
RECORDS

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8110, 2-8111, 2-8113 through 2-8122. National Advisory Committee Standards 1.51, 1.52, 1.53, 4.46. American Bar Association, Architecture of Facilities 5.8.

The policies are about juvenile records and suggest procedures for implementing these policies.

Recognizing the wide range of legislative and administrative requirements, certain procedures have been outlined that are in general use in most jurisdictions.

Before implementing policies and procedures based on these samples, review the most recent judicial rulings and adjust the sample documents to meet those requirements.

I. POLICY: An accurate admission record shall be developed for each juvenile, maintained in a secure location and available to only authorized persons. At a minimum, each record shall contain:

A. Initial intake information.
B. Documented legal authority to accept juvenile.
C. Record of court appearances.
D. Medical information, detailing any special problem or medication needed.
E. Personal belongings inventory.
F. Record of cash being held.
G. Referrals to other agencies.
H. Release information.

DEFINITIONS: As used in this document, the following definitions shall apply:

A. Citation: Document directing the juvenile to report to the intake section, specifying the juvenile's name and address, the name and address of the person, if any, to whose care and supervision the juvenile is being released; the time, manner and place of conduct which the individual is alleged to have committed; date of issuance, and the address and telephone number of the intake section staff member.
B. Summons: Specifies the issuing court and alleged violation, the court date, directions and explanations.
C. Order To Take Juvenile Into Custody: Authorizes law enforcement officers to carry out the court order.
D. Projected Release Date: Date the juvenile will be released if all variables remain unchanged.
E. Release Date: Date of juvenile's release from parent agency control.

III. PROCEDURES:
   A. Immediately following the arrival of a juvenile, the Shift Supervisor shall examine the juvenile's commitment papers, certificates and receipts to ensure compliance with appropriate legislation and parent agency rules. The Shift Supervisor shall establish an admission file which contains all information and material related to commitment and confinement. If there are any questions regarding the legality of commitment, the parent agency will be notified.
   B. An admission form shall be completed for every juvenile admitted to the facility and shall contain at least:
      1. Date and time of admission and release.
      2. Full name and any nickname.
      3. Offenses.
         a. Alleged.
         b. Adjudicated.
      4. Name of caseworker.
      5. Signature of the admitting Shift Supervisor.
      7. Date and place of birth.
      8. Race.
      9. Education and school attended.
      10. Religion (if volunteered).
      11. Name, relationship, address and phone number of parent(s), guardian(s), or person(s) with whom the juvenile resided at the time of admission.
      12. Date of preliminary hearing.
      13. Medical information, including any special medical problems.
      15. Special comments.
Sample Juvenile Facility

RECORDKEEPING AND EVALUATION

Date: ____________________

THE JUVENILE RECORD

NAME OF JUVENILE: ____________________

Check ( ) if included. Note reasons, if not.

____ Face sheet including name, sex, birthdate, birthplace, address, police district, offense, parents' marital status, physical condition, dates of admission, verification of personal property, date and person to whom discharged.

____ Admission form including name, history number, birthplace, date of admission, parents' names and addresses, reason for detention, problem areas, signature of nurse and intake/probation staff.

____ Copy of delinquent petition.

____ Record of detention service plan.

____ Court order committing to detention and other legal documents.

____ Parental consent for medical/surgical care.

____ Health records, including medication administered.

____ School records.

____ Record of juvenile's grievance reports, procedures, findings.

____ Record of disciplinary actions.

____ Record of denial of visiting privileges.

____ Record of documentation on isolation including incident reports, authorization and monitoring reports.
I. POLICY: Records maintenance shall include clearly identifying and storing case records in a secure area.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Initiation of the Record: The Shift Supervisor shall be responsible for initiation and development of the juvenile case record.
   1. Information shall be filed in folders stamped "Confidential."
   2. Folders shall be assigned identifying numbers.
   3. Folders shall be placed in alphabetical order for easy reference.
   4. Format and organization of material shall be standardized.
   5. All material shall be filed immediately.

B. Establishment of Case Records:
   1. Documents: At a minimum, the file shall contain:
      a. Initial intake information.
      b. Documented legal authority to accept juvenile.
      c. Information on referral source.
      d. Record of court appearances.
      e. Name of probation officer or caseworker.
      f. Medical history.
      g. Signed receipt from juvenile which indicates acceptance of the facility Rules and Disciplinary Policy Handbook.
h. Signed informed consent form.

i. Notations of temporary absences from the facility.

j. Visitors' names and dates of visits.

k. A record of telephone calls made and received.

l. Progress reports.

m. Grievance and disciplinary record.

n. Referrals to other agencies.

o. Final discharge or transfer report.

2. Format: The file shall be set up in the following manner:

a. Left Side of Folder:
   (1) Legal status data.
   (2) Admission data.
   (3) Outside agency data.

b. Right Side of Folder:
   (1) Educational program data.
   (2) Daily life program data.
   (3) Discharge data.

C. Security: Records shall be stored inside a locked metal file cabinet and shall be directly supervised and controlled by an authorized staff member. If a record is removed, a receipt indicating reason for removal should be signed by the staff member. Only authorized person(s) shall have access to records.

D. Access to Records: Access to records and files shall be restricted to:

1. The juvenile who is the subject of the record and his/her counsel.

2. The parents or guardian of the juvenile named in the record and their counsel.


4. Individuals and agencies for the express purpose of conducting research, evaluative or statistical studies, provided the proper consent has been obtained.

5. Members of the administrative staff of the parent agency when essential for authorized internal administrative purposes.

E. Informed Consent: Prior to the release of information, the juvenile shall sign an informed consent statement which contains:

1. Name of person, agency or organization requesting information.

2. Name of facility releasing the information.

3. Specific information to be disclosed.

4. Purpose for which the information is being released.

5. Date consent form is signed.

F. Records Review: Shall be conducted at the time of transfer or release. The Shift Supervisor shall evaluate information for accuracy. Documents no longer appropriate or relevant shall be removed and the staff person(s) concerned notified. To prevent destruction of any document, a written objection may be entered within 30 days.

G. Transfer of Records:

1. Certain records accompany a transferring juvenile:
   a. Medical records.
   b. Copies of detainment papers.

2. All of the remaining record shall be updated and forwarded to the receiving facility within 72 hours of the juvenile's transfer.

H. Records of Released Juveniles: Records shall be forwarded to the parent agency where they will be stored and then sealed or destroyed after a specified period of time.
Sample Juvenile Detention Facility

FOLDER SUMMARY

Name: ____________________ Birth Date: ___________ Admitted: ___________ Released: ___________

Father/Guardian: __________

Staff Member: ___________ Mother/Guardian: ___________

Date Visitors/Trips/Meetings Date Telephone Calls Date Medical

() () () ()
Sample Juvenile Detention Facility

INFORMED CONSENT FORM

<table>
<thead>
<tr>
<th>Name of Facility Making Disclosure</th>
<th>Signature of Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name or Title of Person or Organization to Which Disclosure is to be Made:</td>
<td></td>
</tr>
<tr>
<td>Name of Juvenile:</td>
<td></td>
</tr>
<tr>
<td>Purpose or Need for Disclosure:</td>
<td></td>
</tr>
<tr>
<td>Extent or Nature of Information to be Disclosed:</td>
<td></td>
</tr>
</tbody>
</table>

This consent is subject to revocation at any time except to the extent that action has already been taken in reliance thereon.

Date, Event or Condition upon which this consent expires:

<table>
<thead>
<tr>
<th>Date Signed by Juvenile</th>
<th>Signature of Juvenile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Staff Witness to Juvenile</td>
<td>Signature of Staff Witness to Juvenile</td>
</tr>
<tr>
<td>Date of Staff Witness to Juvenile</td>
<td>Date of Staff Witness to Juvenile</td>
</tr>
<tr>
<td>Signature of Consenting Parent or Guardian</td>
<td>Date of Signature</td>
</tr>
<tr>
<td>Signature of Consenting Law Guardian (if applicable)</td>
<td>Date of Signature</td>
</tr>
</tbody>
</table>
I. POLICY: The facility shall keep an accurate record showing the location of juveniles at all times. The Director shall designate staff to maintain a master index file identifying the location in the facility, or if temporarily out of the facility in a satellite section or other location, and shall list all unusual incidents or misbehavior. This information shall be readily accessible.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Master Index File: A complete alphabetical listing of all juveniles officially assigned to the facility.

III. PROCEDURES:

A. Master Index: An alphabetic card file locator shall be kept in the administrative office. Accuracy of this file is essential. All movement shall be recorded immediately, never carried forward beyond the close of the shift and a daily review shall be made by a designee of the Assistant Director for Program Operations. All discrepancies shall be reported immediately to the Director. Locator cards shall contain:

1. Names of all juveniles in the facility, showing their room assignments.

2. The names of all juveniles temporarily out of the facility for various reasons (i.e., trips, court, etc.).

B. Daily Log: The daily log is the primary record of daily occurrences in the facility. The maintenance of this log is the responsibility of each Shift Supervisor.

1. No entry in the log shall be erased. A correction shall be added as an entry in the log.

2. Incident Report: The Director shall ensure that a written procedure for reporting unusual incidents is used.

1. Whether a participant or an observer of an incident, each staff member has a responsibility to report an unusual incident to the Director.

2. Definition of Unusual Incident:

a. A juvenile's physical or sexual assault on another individual.

b. A staff member's physical assault on another individual.

c. Use of force by a staff member.

d. Serious illness or death of a juvenile or staff member.

e. Suicide attempt.

f. Escape, attempted escape, runaway, or unauthorized absence.

g. Fire.

h. Major property loss or damage.
i. Any juvenile or staff action which could lead to a criminal charge.

j. Any incident that is considered to be media-sensitive.

k. Other incidents the Director has stated should be reported.

D. Daily Report of Juvenile Movement: The administrative office shall prepare a summary report of all juvenile movement and shall include:

1. Results of all juvenile counts.
2. All new juveniles, including names and room assignments.
3. A list of all releases, including names and destinations.
4. All room changes, section relocations, etc., which affect the location of any juvenile.
Sample Juvenile Detention Facility
Recordkeeping and Evaluation
Shift Supervisor's Report

<table>
<thead>
<tr>
<th>Section</th>
<th>Population at close of the shift</th>
<th>Restrictions (names of juveniles and type of restriction)</th>
<th>Medical Problems (name of juvenile and the type of problem)</th>
<th>Serious Behavior problems occurring during the shift (name and type of problem)</th>
<th>Strip Search</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Escapes: _______________________
Isolation: _______________________
Submitted by: _______________________

Approved By: Assistant Director for Program Operations

Shift Supervisor: _______________________
Date: _______________________
Shift Time: _______________________

(1)
Sample Juvenile Detention Facility

INCIDENT REPORT

NAME OF PERSON FILING REPORT: _________________________ DATE OF REPORT: _________________________

NAMES OF ALL PERSONS INVOLVED: _________________________ DATE AND TIME OF INCIDENT: _________________________

LOCATION OF INCIDENT: _________________________

EACH STAFF MEMBER DIRECTLY OR INDIRECTLY INVOLVED IN THE INCIDENT SHOULD FILE A SEPARATE
INCIDENT REPORT. DO NOT COLLABORATE IN WRITING ONE REPORT. TRY TO ANSWER IN YOUR REPORT
THE WHO, WHAT, WHERE, WHEN AND WHY QUESTIONS. BE OBJECTIVE IN YOUR STATEMENTS.

NATURE OF INCIDENT: _________________________

ACTION TAKEN: _________________________

RESULTS OF ACTIONS: _________________________

YOUR OPINION AS TO WHY THE INCIDENT TOOK PLACE: _________________________

OTHER OR ADDITIONAL INFORMATION: _________________________

The design and administration of the physical plant are often subjects of litigation and, with increasing frequency, courts are considering the adequacy of the conditions of confinement. Space requirements and conditions listed throughout the chapter are based on ACA Standards.

The difficulty in implementing many of these requirements as detention facility populations continue to expand is acknowledged. There are growing indications, however, that certain conditions of confinement may indeed aggravate and accelerate behavior patterns officials are so often expected to correct.
C. Exits: Designated exits in the facility are located to permit prompt evacuation of juveniles and staff members in an emergency and have at least two identifiable exits in each juvenile housing area and other high density areas.

D. Initial Reception and Release Area: This area, located inside the security perimeter, is designed to completely separate new juveniles from other juveniles until the admissions process is completed and includes:

1. Temporary reception room.
2. Medical examination area.
3. Secure storage area for juveniles' belongings.
4. Telephones.
5. Interview room.
7. Temporary holding rooms with sufficient fixed seating for all juveniles at its rated capacity.

E. Living Space:

1. Day Rooms: Day rooms are available for each general population housing section. Day rooms contain a minimum of 35 square feet for each juvenile in the housing section, and are available for reading, writing, television and table games.

2. Sanitation Facilities: Adjacent to each day room an area is provided, for each five juveniles housed in a section, that contains at least:
   a. One toilet.
   b. One wash basin with hot and cold water.
   c. Drinking water.
   d. One thermostatically controlled shower.
   e. Mirrors located at convenient heights for juveniles.

3. Sleeping Areas: Sleeping areas are primarily designed for single occupancy and:
   a. Sleep only one juvenile.
   b. Have at least 70 square feet of floor space.
   c. Have natural light.
   d. Have toilet above floor level.
   e. Have wash basin with hot and cold running water.
   f. Have drinking water.
   g. Have a bed above floor level.
   h. Have adequate storage space for personal belongings.

4. Multiple Occupancy Rooms: These rooms sleep no more than three juveniles at a time. Occupants shall be segregated by sex in sleeping rooms and carefully screened prior to admission for suitability to group living. The rooms have:
   a. A minimum floor area of 50 square feet per occupant.
   b. Bedspace not exceeding 20 percent of the room.
   c. Staff observation panels in doors.
   d. Natural light.
   e. Toilet above floor level.
   f. Wash basin with hot and cold running water.
   g. A bed above floor level for each occupant.
   h. Storage space for each occupant.

5. Confinement Rooms: Juveniles are provided living conditions that approximate those of the general population. The room used for confinement permits juveniles to communicate with staff and has a door which permits observation by staff. It shall be equipped with plumbing and security furniture.

6. Special Consideration Rooms: When a seriously ill, mentally disordered, injured or non-ambulatory juvenile is held in the facility, a single occupancy room is provided that allows continuous staff observation.
**Chapter Subject Policy**

**Requirements for Facility Service Areas**

F. **Activity Areas:** If the facility houses male and female juveniles, space is provided for co-educational activities.

1. **Indoor Activity Areas:** The total indoor activity area, outside the sleeping area, provides space of at least 100 square feet per juvenile. This area has exercise and indoor sports equipment such as ping pong tables and barbells.

2. **Outdoor Recreation Areas:** Outdoor recreation space is at least twice as large as the indoor activity area and is enclosed by a high fence, shielded from sight or easy reach of passersby. A portion of the outdoor area is paved for use after wet weather and for sidewalk games. A variety of fixed and movable equipment is used in this area, such as: tetherball, basketball, volleyball and softball.

G. **School Classrooms:** Designed in conformity with local and state educational requirements, classrooms have:

1. Adequate space for desks to accommodate three-fourths of the design capacity of the facility.

2. Several individual booths where easily distracted juveniles can work alone and still be under the supervision of the teacher.

3. Space for a large table for active, short-term projects.

4. Storage space for classroom supplies.

H. **Library:** The library is located near the classrooms and has adequate shelf space and library tables for the juveniles use.

I. **Religious Services:** A multipurpose room is used for religious services and there is access to this space when needed.

J. **Visiting Areas:** Visiting areas allow for privacy during visits.

K. **Kitchen:** Kitchen floor space is equivalent to 10 square feet per juvenile, with a minimum space of 200 square feet. Equipment and food storage areas are adequate for the quantities of food prepared.

**L. Dining Areas:** There is at least 15 square feet of floor space per person for those using the dining area at the same time.

**M. Laundry Areas:**

1. Space is available for a sufficient number of washing and drying machines.

2. Linen supply rooms are located in each living area section.

**N. Storage Areas:** Storage space is provided for supplies and equipment in sufficient size to ensure its safe, sanitary and healthy use.

1. Janitor supply storage areas are provided for each living section, work area and/or activity area, are well ventilated and have:
   a. Broom and mop storage racks.
   b. Sinks and supplies for cleaning of the equipment.
   c. Shelving for storage.
   d. Cabinets.

2. Separate and adequate space is provided for mechanical equipment.

3. Space is provided for secure storage of juveniles' personal property.

O. **Medical Room:** There is a central medical room with medical examination facilities.

**P. Control Rooms:** Adequate space is provided in each housing section for staff conferences and storage of section records. The control rooms are located in an area that enables constant visual supervision.

**Q. Administrative Areas:** Space, enabling supervision, communication and interaction with the general living area, is equipped with a telephone, and is provided for administrative, custodial, professional and clerical staff and includes:

1. Conference rooms.

2. Staff lounges.

3. Storage room for records.

4. Public lobby.

---

**Effective Date Approved By:**
Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Chapter: RELATED STANDARDS</th>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHYSICAL PLANT</td>
<td>9.2</td>
<td>3</td>
</tr>
</tbody>
</table>

Subject: Preventive Maintenance Program

I. POLICY: To provide for emergency repairs, replacement of equipment and general upkeep, a written plan for preventive and ongoing maintenance of the physical plant shall be developed.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Building Supervisor: A designated person who performs all required inspections.

B. Preventive Maintenance Log: A permanent record of inspections performed, by whom and the work performed.

C. Yearly Inspections: Scheduled technical inspections of all buildings to determine their physical condition with respect to prescribed standards, carried out by authorized personnel.

III. PROCEDURES:

A. Program Responsibility: The Assistant Director for Management Services shall:

1. Create preventive maintenance routines for critical items of building systems and equipment to minimize out-of-service time due to failures as well as to reduce costly breakdown repairs.

2. Detect maintenance deficiencies in their early stages of development and take corrective action.

3. Plan and schedule resulting maintenance work to provide a reasonably controlled work flow.

B. Inventory of Plant and Facilities: The Assistant Director for Management Services shall be responsible for an inventory of all items of works and buildings. Items may be found in plans, plant records and property records. An identification number shall be assigned to each item or unit of equipment and affixed by a tag or other means to the unit. To be useful, the inventory must be kept current.

C. Inventory Records: Inventory records are crucial to the preventive maintenance program as they indicate what is to be inspected, complete with details about the make, model, serial numbers, etc. Such information provides realistic estimates for replacement. Inventory records shall include:

1. Buildings listed on the record sheets in numerical order.

2. Installed equipment within each building listed under that building's entry.

3. A remarks column on the record sheet recording the log book number to which the equipment is assigned.

4. Entries made in the "Unit" and "Capacity/Quantity" columns corresponding with the unit and capacity/quantity entries in the table of inspection.

5. Description of the equipment, including make, model and serial number.

6. Check list numbers or codes that apply to each item.

D. Inspection Check Lists: The preventive maintenance inspection check list maintained by the Assistant Director for Management Services shall:

1. Contain a description of the servicing, checks and/or adjustments that must be performed during the inspections.

2. Be based on manufacturers' service manuals.

3. Be updated as various types of equipment and systems become available. Some sources of information are:

   a. Manufacturer's service manuals: Valuable guides on how a piece of equipment should be installed, operated and maintained, as well as data about adjustments, servicing, parts replacements and overhauls, etc.

   b. Operators: The operators of equipment systems can often provide current and technical information on maintenance problems.

E. Corrective Action: Inspectors' reports provide a basis for corrective maintenance. The urgency for repairs varies and shall be divided into three categories: urgent, essential and projected.
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHYSICAL PLANT</td>
<td>Preventive Maintenance Report</td>
<td>9.2</td>
</tr>
</tbody>
</table>

F. Work Requests: Work requests for defects shall be prepared by the Building Supervisor and submitted to the Assistant Director for Management Services who will issue the necessary work orders. Corrective action shall be recorded on the work request, cross-referenced to the inspection folder and dated before being returned to the Assistant Director for Management Services.

G. Facility Evaluation: Facility evaluation shall be accomplished by the Building Supervisor and the Assistant Director for Management Services and shall include:

1. Operator inspection reports.
2. Shop inspection reports.
3. Yearly inspection reports.
4. Inventory records.
5. The maintenance schedule.
6. Work requests.
7. Work order completions.

H. Annual Reports: Reports of the annual evaluation shall be prepared and forwarded to the Director on or before January 1 of each year. Copies of the report shall be distributed to all members of the senior staff and one copy provided to the parent agency.

---

Sample Juvenile Detention Facility
BUILDING SERVICES REQUEST
COMBINED DAMAGE AND REPAIR REPORT

Date: ___________ Time: ___________ AM/PM
Location: __________________________________________
Request: __________________________________________
Department ________________________________________
Department ________________________________________
Department ________________________________________
Department ________________________________________
Staff Member ________________________________________
Staff Member ________________________________________
Staff Member ________________________________________
Staff Member ________________________________________

Damage: Accidental_____ Deliberate_____
Who Created Damage: ________________________________________
Damage Incurred: ________________________________________

Cost of Repair: ________________________________________
Nature of Repair: ________________________________________

Outside Source: Yes____ No____

Building Services Supervisor: ____________________________

Effective Date: ___________ Approved By: ___________
I. POLICY: To ensure and verify the level of compliance with environmental health standards, annual inspections shall be completed by independent outside sources who will document that the interior finishing material in juvenile living areas, exit areas and places of public assembly are in accordance with recognized national fire safety codes.

II. DEFINITIONS: None.

III. PROCEDURES:
A. Requirements:
1. Lighting: Lighting requirements are determined on the tasks to be performed and include: interior surface finishes and colors, type and spacing of light sources, outside lighting and shadows and glare.
2. Ventilation: Ventilation is at least 10 cubic feet of outside or recirculated filtered air each minute for each occupant for living areas and staff areas and 20 cubic feet each minute for dining areas.
3. Temperature: Temperatures are appropriate to the summer and winter comfort zones with consideration for the activities performed.
4. Sanitary Facilities: Toilets and wash basins are accessible to all persons using activity areas.
5. Fire Safety Codes: The interior finishing material in juvenile living areas, exit areas and places of public assembly must be in accordance with recognized national fire safety codes.

B. Administrative Action:
1. The Director, in cooperation with the Assistant Director for Management Services, shall contract with qualified agents to conduct tests and examinations in these areas at least annually to determine whether the established requirements are being met.

2. Reports of inspection results shall be prepared by the Assistant Director for Management Services. Copies of these reports shall be retained for at least five years in the administrative office.

3. Monitoring shall be conducted regularly by Section Chiefs and inspectors. Any suspicions of non-compliance shall be reported immediately.
I. POLICY: Standards of design and construction shall provide juveniles and staff with living and working conditions complying with modern correctional practices as stated in standards published by the American Correctional Association and conforming to applicable federal, state and local building codes.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Construction Conditions:

1. Minimum Construction Requirements: All renovation projects or an expansion of the existing facility shall conform to all applicable zoning ordinances.
   a. Conformance to electrical safety codes and to fire safety codes.
   b. Ventilation rates of at least 10 cubic feet each minute for each juvenile in all housing and activity areas, except where shop areas require additional exhaust levels based upon the specific activity involved.
   c. Lighting of 30 footcandles at desk height in both housing and activity areas such as classrooms, dining and living rooms.
   d. Individual bedrooms with natural (exterior) lighting and windows constituting at least eight percent of the facility exterior wall area; bedrooms should have at least 70 square feet of interior space.
   e. Lavatories which are accessible from activity and living areas, with a minimum of one sink, toilet and shower for every five juveniles, with lavatories screened for privacy and with at least one lavatory for staff to permit separate use.

2. Safety Features:
   a. Shower water shall be thermostatically controlled to prevent scalding under any circumstances or misuse of shower facilities. A control valve shall be installed between the boiler and the shower controls which restricts the shower hot water to not more than 110 degrees Fahrenheit.
   b. Electric circuit breakers shall be under staff control, as shall emergency water shut-off valves.
   c. Architects, designers and construction staff shall conform to all provisions of the National Fire Protective Association's code on electric wiring, building dimensions, construction, number and location of exits, heating and venting systems, and building materials.
   d. Only flame retardant, non-polyurethane mattresses shall be used in the facility.
   e. Wired-in smoke detectors, heat sensors and sprinklers shall be installed in any newly constructed areas, especially where flammable materials are stored.
   f. Night lighting of at least two candlepower shall be available in all sleeping areas, and tamper-proof, recessed lighting shall be used in areas of greater security need.
   g. Floor drains shall be provided in all living/activity areas, with tamper-proof covers.
   h. All exterior doors used as emergency evacuation routes shall be clearly marked with an "EXIT" sign over such door, and the sign shall be illuminated 24 hours each day.

3. Location and Design: The facility is geographically accessible to juvenile justice agencies (law enforcement, prosecutor, courts), community agencies, juvenile's lawyers, families and friends.
   a. If the facility is on the grounds of any other type of detention facility, it is a separate, self-contained unit.
PHYSICAL PLANT

New Facility Planning and Remodeling

Policy #: 9.4

Page 3 of 5

b. The population in housing or living sections does not exceed the rated capacity of the facility.

c. The facility is designed and constructed so that juveniles can be grouped according to a simplified classification plan.

d. At least 80 percent of all beds are in rooms designed for single occupancy.

4. Handicapped Persons: Handicapped juveniles are housed to provide for their safety and security. Rooms designed for their use should provide the maximum possible integration with the general population. Appropriate programs and activities shall be accessible to all handicapped juveniles confined in the facility.

a. New facility construction provides for the removal of architectural barriers to physically handicapped persons.

b. All parts of the facility accessible to the public are accessible to handicapped staff and visitors.

5. Day Rooms: A day room for each housing section or detention room cluster having a minimum of 35 square feet of floor space for each juvenile shall be separate from the sleeping area which is immediately adjacent and accessible.

6. Exercise and Recreation Areas: In facilities with bed space for less than 100 juveniles, indoor and outdoor exercise areas provide a minimum of 15 square feet for each juvenile. In facilities with bed space for more than 100 juveniles, exercise areas shall be a minimum of 30 x 50 square feet. The facility shall have a well-drained outdoor recreation area that is at least twice as large as the indoor activity area.

7. Emergency Systems: The facility is constructed with floor drains in all living and activity areas and is equipped with emergency water shut-off valves. Ventilation is available in the event of a power failure. An alternate power source that will maintain essential services is available.

8. Mechanical Equipment: Separate and adequate space is provided for all mechanical equipment.

9. Justification for Project: Each plant modification shall be fully described with photographs or sketches indicating current problem conditions and the scope of the proposed work. Justification for the project shall also include:

a. A cost-benefit analysis indicating the return on the investment (e.g., estimated savings in annual heating costs through improved insulation; decrease in repairs/maintenance costs by replacement of antiquated systems, etc.).

b. Any specific building code violations which might be involved, so a complete analysis can be done to ensure that notwithstanding such violation(s), the project will meet necessary building and fire safety regulations, and shall meet the minimum standards of the parent agency.

c. The number of juveniles affected by the project, including discussion of the psychological impact on the overall program.

d. The previous damage or extensive maintenance costs incurred to the structure during the preceding three years.

e. The adverse effects or program modification/constraints required if the project is not approved, as well as a description of the interim measures required pending completion of the project (e.g., juveniles must be transferred to other facilities, woodworking shop activities must be suspended, etc.).

f. The alternative measures or solutions which could alleviate the immediate problem and restore a semblance of order to the program operations.

g. The specific steps necessary to make the facility or modification accessible to the handicapped.

B. Administrative and Staff Activities:

1. Designing and Planning: All members of the facility and parent agency design and planning sections shall incorporate the requirements of this policy into the working process of all future construction or remodeling projects. The new detention facility or existing facility is expanded only after a needs evaluation study has been prepared by the parent agency in conjunction with the juvenile court and the statewide juvenile detention agency.

2. Review: Prior to the final approval of all future projects, the following officials shall review plans and indicate compliance with these policies:
a. Parent Agency Certification Officer.
b. Facility Planning Certification Officer.
CHAPTER 10
SAFETY AND EMERGENCY PROCEDURES

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8170 through 2-8176, 2-8180, 2-8181, 2-8182, 2-8183, and American Bar Association, Architecture of Facilities, Standard 3.5. The policies are about safety and emergency procedures and most of the standards are mandatory.

The subject dictates a need for overemphasis rather than risk elimination of vital sample material.

The chapter makes frequent reference to local and state regulations and these sources, within the jurisdiction, should be consulted.

I. POLICY: Strict control of procurement, storage and inventory of all flammable, toxic and caustic materials shall be maintained.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Caustic: A material able to burn or corrode persons or objects by chemical action.

B. Toxic: A poisonous material that can destroy the life or health of a living animal or plant.

C. Flammable Material: Any product which will ignite when contacted with flame or spark, at or below 100 degrees Fahrenheit.

III. PROCEDURES: Prior to making any purchase, careful attention should be given to a product's label. Oftentimes seemingly harmless items have extremely hazardous natures under certain circumstances (i.e., polyurethane foam emits toxic fumes when burned). Every effort should be made to replace a hazardous substance with one less hazardous in nature or less likely to be abused in a detention setting.

A. Hazardous Materials: Some of the more commonly used items that require special handling and storage are:

1. Gasoline.
2. Insecticides.
3. Lye.
4. Anti-freeze.
5. Caustic acids.
6. Yeast.
7. Explosives.
SAFETY AND EMERGENCY PROCEDURES

Chapter Subject Policy # Page of 3

SAFETY AND EMERGENCY PROCEDURES
Flammable, Toxic and Caustic Materials 10.1 Page 2 of 3

8. Cleaning fluids.
11. Flammable materials with a flash point below 100 degrees Fahrenheit.
12. Other poisonous substances.

B. Use of Flammable Materials:
1. Where flammable liquids with a flashpoint below 100 degrees Fahrenheit are used, ventilation shall be provided at a rate of not less than one cubic foot per minute per square foot of solid area.
2. Under no circumstances shall gasoline be used for cleaning. Commercial solvents, cleaning liquids or kerosene with a flashpoint above 100 degrees Fahrenheit shall be used.
3. An approved cleaning agitator shall be used for the cleaning of metal parts (i.e., carburetor parts, etc.); not a bucket. Approved parts cleaner cabinets (with fusible linked lids) will be used.
4. Juveniles shall not have access to or use of any item listed above, nor any other material determined hazardous by the Assistant Director for Management Services, unless direct and constant supervision is provided by a qualified staff member, having obtained written authorization from the Assistant Director for Management Services.

C. Storage Facilities for Flammable and Explosive Items: National Fire Protection Association (NFPA) requirements shall be closely observed in storage of flammable liquids. Copies of this document are available from the Assistant Director for Management Services.
1. Flammable liquids shall be kept in covered containers when not in use.
2. The quantity of flammable or combustible liquid that may be located outside of an inside storage room or storage cabinet shall not exceed 120 gallons if all the liquid is in a single portable tank.

D. Inventory Control: The Section Chiefs shall contact the Assistant Director for Management Services for assistance in defining caustic, poisonous, flammable or hazardous fluids, substances or chemicals in their section. These substances shall never be stored in living areas.
1. Each section shall keep an inventory of all types and amounts of these substances.
2. A copy of this inventory shall be forwarded to the Assistant Director for Management Services and the Director on the first day of each new quarter, beginning January 1.
3. The Assistant Director for Management Services shall inspect all storage areas and inventories, note any discrepancies and report to the Director for appropriate action.
4. Upon request of the Assistant Director for Management Services, Section Chiefs shall assist in inspections and inventories.

Effective Date Approved By:
I. POLICY: Under the guidance of the Director specific procedures to be followed in emergencies shall be developed and copies made available to all staff members. There shall be on-going training programs and emergency procedures shall be reviewed and updated at least annually.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Qualified Outside Fire Inspectors: Local or state fire officials or other person(s) qualified to perform fire inspections. Qualifications shall be verified through state licensure or certification.

B. Fire Drill: The total evacuation of all persons from an area. Fire drills are practice sessions designed to teach participants the best means of escape in case of fire. Night shift drills will consist of walking staff through the procedure, but with no movement of juveniles.

C. Standpipe: A vertical hydrant into which water is forced by mechanical means to obtain pressure sufficient to reach the top of the tallest building in the facility.

D. Hydrostatic Test: Examination of a fire extinguisher to determine the balance of the chemical contents.

E. Class A Fires: Fires in ordinary combustible materials, such as wood, cloth and paper where the quenching and cooling effect of quantities of water or solution containing large percentages of water are of first importance.

F. Class B Fires: Fires in flammable liquids such as gasoline, fuel oil, alcohol or grease where a blanket effect in smothering the fire is essential.

G. Class C Fires: Fires in electrical equipment where the use of an electrically non-conductive extinguishing agent is of primary importance.

III. PROCEDURES:

A. Fire Plan Responsibility and Training: The Assistant Director for Management Services shall ensure the adequacy of the fire plan and shall be delegated authority and responsibility for plan implementation. Familiarity with the fire plan and the procedures to be followed in the event of a fire shall be included in the orientation process for all new staff. Provisions for follow-up and supplemental training in fire procedures shall be made in coordination with the local fire department.

B. Distribution and Posting of Fire Plan:

1. A copy of this plan shall be posted, by the Assistant Director for Management Services, in each building in the facility.

2. A copy of the general emergency instructions shall be displayed in a conspicuous place in each building and a copy of the floor plan for that area which reflects the location of fire extinguishers, exits and emergency equipment.

C. Emergency Fire Procedures and General Instructions: The staff member first detecting the fire shall:

1. Notify the control center immediately by:
   a. Pulling the fire alarm pull station nearest the emergency if one is available.

   b. Call the control center to report the emergency with an exact description of the situation including:
      (1) Severity.
      (2) Location and spread.
      (3) Smoke Color.

      (a) Yellow: Indicative of toxic gases: evacuate immediately. Do not attempt to extinguish.

      (b) Grey-brown wisps: Indicative of electrical fire — stay clear. Evacuate immediately.

      (c) Grey black: Indicative of primary fire. Extinguish if possible after immediate area is evacuated. Do not attempt to extinguish in thick smoke.

2. Release all juveniles from security rooms.


3. Turn off all electrical switches.
4. Close all windows and doors.
5. Initiate evacuation procedures. If fire occurs after the secure night count, juveniles shall be evacuated to a designated safe area and remain there until further determination.
6. Staff members shall remain at their assigned posts until all juveniles have been evacuated.
7. Do not disturb the fire scene. If emergency extinguishing equipment is used, short bursts shall be used at the flame base. Do not disturb the extinguished powder by prodding or fanning. Additional extinguishing powders shall be used if necessary.
8. Protect the fire scene until an investigation can be conducted.
9. A count will be called as soon as possible following evacuation.

D. Security: Every effort shall be made by staff on duty to prevent escapes during an emergency. However, safety of the juveniles shall take precedence over the matter of security.

E. Evacuation Procedures: The Assistant Director for Management Services shall ensure the existence of emergency evacuation plans. The evacuation plan shall include, at a minimum:
1. The route of evacuation and the subsequent disposition and housing of juveniles.
2. Provisions for medical care and emergency transportation for injured juveniles and staff.
3. Evacuation plans for visiting areas and areas normally accessible to visitors which clearly indicate primary and secondary exits.
4. Notification procedure for contacting additional law enforcement personnel for assistance.
5. Provisions for immediate release of juveniles from locked areas.

F. Authority and Responsibility During a Fire:
1. During an emergency situation, the Director or highest ranking staff member on duty, shall have absolute and total authority for decisions made affecting the facility, the emergency, and security of the premises.
2. Upon arrival, the local fire department shall be delegated sufficient authority to control and extinguish the fire.

G. Fire Related Duties for Administrative Office: When notified of a fire, staff shall be especially alert in the observation of the fire alarm panel. This is a combined signal consisting of a light and buzzer. This panel is activated by smoke detectors located throughout the facility. Staff notified of a fire shall initiate the following procedures:
1. Immediately call the fire department through the local emergency number, providing all available fire related information and the exact location of the fire.
2. Notify the affected areas, if necessary, to begin evacuation procedures. This notification shall consist of both telephone instructions to the Shift Supervisor, when possible, and verbal instructions via the public address system.
3. Advise all radio units of the emergency situation directing available staff to proceed to the affected area.
4. Make all emergency keys available to authorized staff, immediately upon notification of the emergency.
5. Alert the medical section.
7. Maintain an accurate record of notifications and times pertaining to the emergency in the emergency log.

H. Fire Related Duties of Physical Plant Staff: Maintenance staff shall be notified and placed on stand-by to perform any necessary emergency repair work.

I. Medical: Medical staff shall be placed on stand-by alert to treat any injuries.
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.2</td>
<td>Safety Program and Evacuation Plans for Fire and Bomb Threats</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

J. Fire Plan Review: The Assistant Director for Management Services shall review the fire and emergency plan as specified in this document and annually revise and update if necessary.

K. Fire Investigations:
1. The Assistant Director for Management Services shall investigate all reported fires in the facility, no matter how minor.
2. In some instances, where the cause of fire is not easily found, the State Fire Marshal’s office shall be notified and asked to assist in the investigation.
3. A report shall be prepared of all investigations and forwarded to the Director with copies for the parent agency.

L. Post Fire Investigation: A facility investigator shall be assigned by the Director for all major fires. The investigator shall be responsible for conducting a thorough investigation of the incident and providing recommendations regarding juvenile and/staff accountability. This investigation shall be conducted jointly by the local fire department officer on the scene, the State Fire Marshal and the facility investigator.

M. Firefighting Equipment and Firefighting Personnel:
1. Firefighting equipment and highly trained personnel are available to the facility through the local fire department. The central emergency number for fire, paramedics and ambulance assistance from the fire department is posted on every phone in the facility. The central emergency dispatcher should be provided all information necessary to make a dispatch of the unit nearest the facility.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.2</td>
<td>Safety Program and Evacuation Plans for Fire and Bomb Threats</td>
<td>6</td>
<td></td>
</tr>
</tbody>
</table>

2. Smoke Detectors: All living sections are equipped with smoke detection systems designed and installed to provide early warning of smoke within the juvenile living section. Local alarm systems are connected also to an annunciator panel in the control center.

3. Automatic Sprinklers:
   a. Security-safe automatic sprinklers are installed in the housing sections and the main storerooms. Sprinkler systems, like smoke detectors, are connected to an annunciator panel in the control center.
   b. Clearance between sprinkler deflectors and the top of storage shall be in accordance with NFPA guidelines for combustible and noncombustible commodities.

4. Emergency Lighting: All housing sections shall have emergency lighting installed that provides sufficient illumination to exit areas and stairwells.

5. Generator and Radio Transmitter: An emergency power generator and radio transmitter is located inside the powerhouse to provide essential lights, power and communication during emergencies. This equipment shall be tested at least once monthly by the Building Supervisor and a report of findings forwarded to the Director.

6. Hydrants: Fire hydrants are accessible and properly maintained. The water supply system is regularly checked to assure that adequate pressure and flow are maintained for operating the fire protection equipment.

7. Standpipe Hose: All living sections have standpipe hose stations, conveniently located and with adequate footage of hose, not to exceed 100 feet per station, to reach all areas of the section. Standpipe hoses are equipped with an adjustable non-metal nozzle. (Brass and other metals used in nozzles are unsafe when used around electrical equipment or outlets as well as being available for use as a weapon.)

8. Extinguishers: Fire extinguishers for various types of fires, i.e., water, powder, carbon dioxide, are placed throughout the facility and especially in the control center. One extinguisher is available for every 3,500 square feet of floor space and not over 75 feet of travel
required to reach an extinguisher. In all new construction, extinguishers shall be placed in breakglass front cabinets or other cabinets which can be opened and should be conspicuously located and mounted where they are readily available. Only fire extinguishers, clearly marked as to type of fires they are made to control shall be used.

9. Extinguisher Servicing: Portable extinguishers shall be kept in fully charged and operable condition and stored in designated places.
   a. Maintenance: Every extinguisher shall have a current valid inspection tag securely attached showing last maintenance or recharge date.
   b. Hydrostatic Testing: At intervals not exceeding five years, extinguishers shall be hydrostatically tested. Discharged fire extinguishers shall be immediately replaced and recharged. Testing is generally performed by an extinguisher service company. An exception to this requirement is dry chemical extinguishers which are hydrostatically tested every 12 years.

10. Self-Contained Breathing Apparatus: A sufficient number of self-contained breathing apparatus are available to enable evacuation of juveniles in fire and smoke.

11. Tools: Security-safe sledge hammers and crow bars are available.

12. Inspection Follow-Up: Following the annual inspection by the State Fire Prevention Inspector, Office of the Fire Marshal, every effort shall be made to correct all deficiencies noted. When corrections are complete, the Assistant Director for Management Services shall notify the State Fire Prevention Inspector who shall reinspect the facility.

O. Bomb Threat: In the event of a bomb threat, the staff member receiving the threat will:

1. Notify another staff member.
2. Written Threat: Save all the material including any envelope or container. Handle the material as little as possible, to preserve possible finger prints. Turn over all material to the Shift Supervisor immediately.
3. Telephone Threat: Pay particular attention to and record the following information:
   a. Exact words of the caller.
   b. Exact time the call was received and ended.
   c. Questions to ask:
      (1) When is the bomb going to explode?
      (2) Where is it? Try to get specifics.
      (3) What type of bomb is it?
      (4) What does it look like, etc.
   d. Description of the caller's voice.
   e. Report the call to the Shift Supervisor immediately.
   f. Call central emergency number to report the threat.

4. After a bomb threat has been received, the juveniles will be taken to their assigned sections immediately and secured. Under no condition are they to be alarmed over the threat by actions of the staff.

5. Exterior searches will be conducted by the Assistant Director for Management Services starting with the areas nearest the facility that present the greatest danger to the juveniles.

6. If any strange items are found in an area that would present a danger to the juveniles, the juveniles shall be moved to a safe location.

7. All reports will be recorded in memo form and action taken should be indicated.

8. In the event that a bomb is detonated in the facility, procedures as outlined in the fire policy will be followed.
I. POLICY: Juveniles, staff and visitors are provided with a safe environment through the effective use of fire prevention and safety procedures.

II. DEFINITIONS: As used in this document, the following definition shall apply:

NFPA: National Fire Protection Association, 470 Atlantic Avenue, Boston, Massachusetts 02210.

III. PROCEDURES: The Director and Assistant Director for Management Services shall have overall responsibility for safeguarding juvenile housing and will use the Life Safety Code of the NFPA as their guideline.

A. Building Material: All interior finish shall be Class A as defined by NFPA. All material, except floor coverings, shall have a flame spread rating of less than 25 and smoke development rating of less than 450 as certified by an acceptable testing laboratory.

1. Walls and Partitions: Wall and partition construction shall be of masonry or steel studs with sheetrock or plaster. No wood framing shall be used in future construction of juvenile housing areas. Existing walls not meeting standards shall have combustible paneling removed and replaced with 5/8" gypsum board. Fire stops must be used between wood studs before applying new wall covering. Walls may be painted or covered with material so long as the material has a Class A finish rating.

2. Ceilings: Ceiling material must meet the Class A fire rating. Existing ceiling materials not meeting this rating or which have accumulated enough coats of paint to make the rating invalid shall be scraped and repainted.

B. Furnishings: Polyurethane padding on furniture and cubicle dividers of plywood or plastic are prohibited. However, wood furniture and cubicle dividers clad with laminate meeting Class A interior finish rating are acceptable.

1. Floor Coverings: Upkeep and excessive wear are prime considerations in evaluating type and choice of floor covering. However, all carpeting not meeting these requirements must be removed.

2. Curtains, Drapes, Blinds: All curtains, drapes and adjustable blinds shall be made of Class A rated materials. Any existing combustible window coverings must be removed.

C. Trash Receptacles: Located throughout the facility, shall be monitored by the Building Supervisor to reduce the possibility of fire. Trash receptacles shall:

1. Be constructed of fireproof material.
2. Be readily accessible.
3. Be covered with tightly fitted lids.
4. Be emptied and cleaned at least daily.

D. Smoking:

1. Staff members will not carry lighters, matches, cigarettes, cigars, pipes or tobacco while on duty. These items shall be kept in the Shift Supervisor's office or a locker room. Smoking will only be permitted in designated areas at designated times.

2. Under no circumstances may a staff member give a juvenile a cigarette for a job well done (or for any other reason).

3. Juveniles who meet the legal age requirements of the jurisdiction and have written permission from their parents or guardians shall be permitted to smoke only at designated times in designated places. Smoking is a privilege earned through good behavior, and if abused, can be rescinded.
**SAFETY AND EMERGENCY PROCEDURES**

### Fire Prevention Procedures and Fire Drills

**Policy #:** 10.3  
**Page 3 of 4**

#### E. Open Burning Prohibition:

1. **Burning:** Trash or garbage burning is prohibited except in extremely unusual situations. Transport to and disposal in a landfill or dump is contracted by the facility for disposal of waste material. Environmental protection is vitally important to the health, morale, safety and economy of the facility and the neighboring communities.

2. **Notification:** Open burning may be authorized only by the Assistant Director for Management Services when requested by a Section Chief. If approval is given, the Assistant Director for Management Services shall notify the Office Manager, the Assistant Director for Program Operations, and the Director.

3. **Requirements:** Open burning shall only be authorized in accordance with local and/or state ordinances. Environmental Protection Agency (EPA) regulations shall be followed when open burning is to be performed. These restrictions do not include fires used in cook-outs, fireplaces, and similar activities.

#### F. Fire Prevention:

Facility staff should always be on the lookout for fire hazards such as altered electrical outlets, overloaded electrical units, expended fire extinguishers and improper trash storage. It is essential that all staff make fire prevention a basic part of their daily activities. All staff shall be attentive to maintaining good housekeeping standards to augment fire safety, including:

1. Proper storage of combustible material.
3. Training for juveniles in fire safety procedures.
4. Fire drills.
5. Fire control equipment checked regularly.

#### G. Fire Drills:

Fire drills shall be conducted monthly at the direction of the Assistant Director for Management Services as follows:

1. The Assistant Director for Management Services shall schedule the drills and notify the Director, Assistant Director for Program Operations and Section Chiefs of the scheduling. Prior notification of the drill shall be limited so as to increase drill effectiveness.

---

### SAFETY AND EMERGENCY PROCEDURES

**Fire Prevention Procedures and Fire Drills**

**Policy #:** 10.3  
**Page 4 of 4**

2. The Assistant Director for Management Services and the Assistant Director for Program Operations shall monitor drill operations.

3. The drill shall begin when the "fire" location is established and not be complete until all juveniles and staff assigned to the location have been evacuated and identified and the fire apparatus has arrived on the scene.

4. Traffic through all gates shall be cleared immediately to facilitate fire apparatus access.

5. When the building is clear a section count shall be conducted if requested by the Director.

6. When the count is clear, all persons shall return to their regularly assigned areas.

7. Fire drills shall be timed to measure effectiveness and efficiency of the fire plan.
Sample Juvenile Detention Facility

FIRE DRILL REPORT

Facility: __________________ Report: __________________
Date: __________________ Supervisor's Name: __________________
Time (Begin): ___________ Time (Finished): ___________
Number of Participants: __________________
Any Injuries During Drill: ___________ If Yes, Explain: __________________

Unusual Incidents During Drill: __________________

Was Fire Equipment Checked? ___________
Other: __________________

Date: ___________ Signature- Director: __________________

Sample Juvenile Detention Facility

SMOKING CONSENT FORM

Facility Director
Juvenile Detention Facility

Dear Sir:

I understand that the Juvenile Detention Facility will permit juveniles in detention to smoke when they have earned that privilege through good behavior.

( ) I hereby give the Facility permission to allow my child to smoke in accordance with Facility regulations.

( ) I do not wish my child to smoke.

( ) I will leave it up to the discretion of the Facility to allow my child to smoke or not.

I also hereby state that I am the parent/legal guardian of ___________ and that I have the right to make the above determination.

Very truly yours,

Signature
Relationship
Date
CHAPTER 11
SECURITY AND CONTROL

COMMENTARY

This chapter encompasses
American Correctional Association Standards 2-8185 through
2-8202, 2-8206, 2-8208, 2-8210 through 2-8216
National Advisory Committee Standards 2.31, 4.2192, 4.2194,
4.48, 4.5, 4.6, 4.61
American Bar Association Standards 10.7, 10.8
which establishes minimum requirements for detention facility
security. These samples arrange the separate elements into
groups of related subjects.

Users are reminded that each document will require careful re-
visions and tailoring to conform to local practices and, in
several instances, will require the development of detailed
Manuals of Operation to implement the policy requirements.

I. POLICY: To maintain the internal security of the facility, the
control center shall integrate all external and internal security
functions and communication networks.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Staffing the Control Center: The center shall be staffed 24
hours a day. The Shift Supervisor may assign additional staff
as the situation dictates or for training purposes.

B. Special Training for Control Center Staff:
1. Control center operation shall be a part of both the pre-
assignment and annual training curricula.
2. Training shall include a thorough study of the security
manual as well as knowledge of the center's daily opera-
tions.

C. Accessibility to the Control Center: Doors to the center shall
remain locked at all times. No unauthorized staff shall be
permitted inside the control center.

D. Major Responsibilities of the Control Center Staff:
1. Maintain an updated list of all staff's telephone numbers.
2. Contact the local police force, rescue squad and/or fire
department for necessary assistance when so directed by the
Shift Supervisor.
3. Issue appropriate keys to staff members from the opera-
tions key board.
4. Operate telephone equipment during evening hours and
direct all calls appropriately.
5. Notify the facility Director or his designee of any trouble signals from any of the monitoring systems.
6. Maintain continuous communication with any area of disturbance on the special telephone extension or two-way radio.
7. Operate the public address system.
8. Conduct check of all communications systems, surveillance systems, emergency signal systems, electronic gate security systems at the beginning of each shift. This shall include:
   a. Fire detection and smoke alarms.
   b. Emergency alert scan system.
   c. Emergency gates.
   d. Two-way radio and walkie-talkies.
   e. Visual recorder system.
   f. Closed circuit monitor system.
10. Maintain all appropriate information on juvenile security, releases and movements.
11. Announce and clear regular and special juvenile counts.
12. Control all access to and from the facility.

E. Command Post: When a disturbance occurs anywhere within the facility, the control center staff shall be notified first. They shall immediately notify the Shift Supervisor and other appropriate staff. The staff must remain calm, gathering and relaying information thoroughly and delegating duties indicated by the situation.

F. Regulations:
1. Juveniles are not permitted in the control center except during intake and release; and only one juvenile is permitted in at a time.
2. Juveniles are not permitted to loiter around the control center door.
3. Staff will not congregate in the control center for general conversations.
4. Unauthorized reading materials and audio visual equipment are not permitted in the control center.
5. The intercom will be kept on to monitor juveniles' rooms.
**JUVENILE DETENTION FACILITIES**

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECURITY AND CONTROL</td>
<td>Perimeter Security</td>
<td>11.2</td>
<td>2</td>
</tr>
</tbody>
</table>

**I. POLICY:** All security perimeter entrances and designated doors shall be kept locked except when used for admission or exit of staff, detained juveniles or visitors and in emergencies.

**II. DEFINITIONS:** As used in this document, the following definitions shall apply:

- **Security Patrols:** Staff which maintain the perimeter security for the facility by regularly monitoring, observing and inspecting the perimeter.

**III. PROCEDURES:**

A. **Front Entrance:** The front entrance is usually the major pedestrian traffic point for entrance or exit from the facility. Staff assigned to this post shall:

1. Identify all persons entering or leaving the facility by:
   a. Official identification card with picture.
   b. Written authorization by the Director.

2. Record admission and departure information including:
   a. A complete record of all visitors entering and leaving the facility and their destination.
   b. A complete record of all persons entering or exiting the facility who are not in possession of an official identification card.
   c. A complete and separate record of all juveniles who pass through the sally port.
   d. Name, identification, nature of business, arrival and departure times and a brief notation of any unusual circumstances surrounding the visit.

B. **Security Door Regulations:** The Assistant Director for Management Services shall ensure that:

1. Security doors are kept locked at all times. Authorized persons entering or exiting through a security door must be sure it is locked when leaving.
2. Unoccupied areas and storage rooms are kept locked.
3. Only authorized persons are admitted through security doors. Authorized persons are:
   a. Juvenile Court staff.
   b. Agency Caseworkers.
   c. Case Attorneys.
   d. Police Officers. For a police officer to visit a detained juvenile, he/she must have the approval of the juvenile's attorney or the assigned probation officer, and a waiver must be voluntarily and freely signed by the juvenile and parents.

4. Staff shall routinely check all "closed" doors as they walk past.

C. **Vehicular Entrance:** The rear entrance is usually used primarily for vehicular traffic (police vehicles and deliveries) entering and leaving the facility. To eliminate the possibility of escape through the gate, departing vehicles shall be carefully monitored by the Building Supervisor.

D. **Internal Security:** All Section Chiefs must ensure that all doors, windows, locking devices and equipment are used correctly and are in good working condition.

E. **Perimeter Security:**

1. Prior to taking the juveniles outside, a juvenile careworker shall make a security check of the outdoor area including the fence and the ground along the fence which should be checked for contraband.
2. When the juveniles are in the outside recreational area, there will be a minimum of one (1) staff member to each eight (8) juveniles. Deviations may be permitted by the Shift Supervisor.
3. Staff will place themselves in strategic locations around the recreational area and will not participate in any outside activities.

4. Juveniles will not purposely touch or hang on the fence, nor will they converse with people outside the fence.

5. If a juvenile talks of running from the outside area at any time, that juvenile will not be permitted outside on the particular day of the threat. A lengthened outside restriction is at the discretion of the Shift Supervisor.

6. When bringing the juveniles in, several staff members shall remain between the fence and the juveniles.

I. POLICY: To ensure juvenile and public safety, juveniles will never be left unattended in any area inside or outside the facility. Intensive staff supervision is intended to reduce reliance on security hardware, to promote a positive relationship between staff and juveniles as the primary means of control.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Movement Supervision:
1. The juvenile careworkers should be aware of the location of all juveniles at all times. At least one of the juvenile careworkers should have visual contact with each juvenile. He/she should not leave his/her area of responsibility without first informing the Shift Supervisor.

2. Juvenile careworkers should know the exact number of juveniles in detention assigned to their section and be able to recognize them on sight. If a juvenile leaves the section of the facility, for any reason, this fact must be communicated to all appropriate staff. The careworkers should make periodic head counts to ensure the earliest possible detection of an absent juvenile.

3. In moving juveniles from one area of the facility to another, one juvenile careworker should walk behind the group to avoid a juvenile leaving the group. A head count should be conducted when the group arrives at its destination.

4. All juveniles must receive permission from staff to move about the facility for any reason.

B. Groups Outside:
1. Expectations are to be explained by a juvenile careworker to juveniles before going outdoors. They may:
Chapter 1. POLICY: Written operational shift assignments or post orders shall state the duties and responsibilities for each assigned position in the facility; these shift assignments are reviewed at least annually and updated if necessary.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Location of Post Orders: Shift Supervisors shall make copies of post orders available both in a central location within the facility and on each facility post.

B. Scope of Orders: The post orders shall cite specific and general instructions for the operation of every facility post. They cannot, however, cover every incident or eventuality which may occur. The staff assigned to the post shall use good judgment and tact and pay careful attention to detail in discharging his/her duties whether referenced in post order or not.

C. Use of Orders:

1. All juvenile careworkers and Shift Supervisors shall use facility post orders to familiarize themselves with the extent, duties and changes that may occur on the post.

2. The Shift Supervisor shall instruct all newly recruited juvenile careworkers to read, date and sign the orders for the post to which he/she has been assigned. The Shift Supervisor shall also initial the form.

3. At the beginning of each quarter or shift change, the rotating staff must read and sign the new post order. The Shift Supervisor in charge of that shift shall initial that the staff member has read the post orders.
D. Changes to Post Orders: Juvenile careworkers are encouraged to submit to their supervisor a written list of changes that have occurred or, in their opinion, should occur in the operation of their post. The Shift Supervisor shall edit these suggestions and submit them to the Assistant Director for Program Operations for review and/or action. No changes will be made in any post order without the approval of the Assistant Director for Program Operations.

E. Security of Post Orders: Post orders are for the exclusive use of facility staff and shall, at no time for any reason, be shown to juveniles or unauthorized persons.

I. POLICY: To ensure around-the-clock accountability of all juveniles within the facility, a system to physically count juveniles shall be established. The Director shall inform the County Juvenile/Family Court Judge when the facility has reached its design capacity. In the event that the resident count exceeds design capacity, caseworkers will initiate a review of each case to determine if conditions warrant a transfer to a non-secure program or a recommendation for conditional release pending final disposition of the case(s).

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Formal Counts: Counts that are conducted at specific times of the day or night in an organized manner.

B. Informal Counts, Irregular Counts, Census Checks: Counts made while juveniles are working, engaged in daily living or recreational activities. These counts are made at irregular times and reported only when a juvenile is missing.

C. Outcounts: Counts that are not conducted in juvenile quarters or accustomed counting areas.

III. PROCEDURES:

A. Responsibility: The juvenile careworker has primary responsibility for the completion of an accurate count and must be familiar with the specific ways of counting juveniles in different types of locations, i.e., housing sections, open areas, recreation areas. The juvenile careworker must encourage juveniles acceptance of the count as a necessity.

B. Principles of Counting:

1. Informal, irregular counts, or census checks, shall be made by all staff supervising juveniles to verify that all juveniles are present. Typically, counts of this kind are made while juveniles are working, engaged in daily activities within the housing section, etc. These counts are reported only when a juvenile is missing.

2. The Shift Supervisor responsible for maintaining the master count record must be provided up-to-the-minute information about all juvenile housing moves, work assignments, admissions to the hospital, releases and any other changes that could affect accountability.
3. Counts in areas such as clothing issue, laundry, food service or other open type sections must never be made by one staff member only. One juvenile careworker shall count while a second careworker observes all juveniles' movement.

4. Numerous escapes have been affected by the skillful use of dummies. Juvenile careworkers must be positive they see a living human body before verifying a juvenile's presence.

5. When making night counts, staff shall use flashlights judiciously; enough light, however, should be thrown on the juvenile to ensure that a dummy is not being counted.

6. Each count must be made accurately, visually and promptly. If the correctness of the count is doubted, a recount should be made.

7. A headcount/bedcheck will be taken after shift changes, and the shift going off duty will not leave the building until all juveniles are accounted for. A female juvenile careworker will count the girls, and a male juvenile careworker will count the boys, when such staffing is available.

8. Juveniles in segregation will be checked, at least, every twenty (20) minutes at irregular intervals. Each check will be recorded in the control logbook by the staff member making the check. When a juvenile(s) is/are suspected of self-destructive behavior, the requirement for room checks will be increased (i.e., the time interval between checks will be shortened). Any juvenile who has demonstrated self-destructive tendencies must be treated as a potential suicide.

C. Official, Formal Count: At least one official, formal count at each shift at a time determined by the Assistant Director for Program Operations is mandatory. All juveniles will be counted simultaneously; each juvenile is counted at a specific location; and all movement of juveniles ceases before the count begins and remains so until the total facility count is clear and correct. A report of each count is telephoned to the responsible control room staff. All reports are then coordinated to verify that the total count is correct and all juveniles are present. After telephoning in a count each juvenile careworker shall immediately prepare a "Count Slip," forward this slip to verify the telephoned count, and remain in the count area. No movement of juveniles out of the count area is permitted until the Shift Supervisor accepting the count announces that it is clear and correct.

1. Staff Accepting Count: The control center staff shall calculate the official count from the control center records after the count is called. As each area reports its count, he/she shall so indicate on the "count sheet," "Outcounts" shall be noted and checked. If after all counts are received and tabulated a discrepancy exists, a recount shall be called. If the count remains incorrect a second time, staff shall be sent to the count area to assist with a third count. Note: No count shall be cleared until all counting errors have been corrected or until the cause of error has been located and corrective action taken.

2. Count Slips: Each juvenile careworker must prepare "Count Slips" carefully. These slips shall not be accepted by the control center staff if they are completed incorrectly or have erasures, strike outs or alterations of any kind. The juvenile careworker making the count will sign the Count Slip as will any other juvenile careworker involved in the count.

D. Emergency Counts: An emergency count is an official count taken at other than one of the times specified for a regular official count. If anyone suspects a juvenile is missing, a count must be taken to determine who and/or how many may be gone. After a major disturbance is under control, a second count must be taken to determine that no one has escaped or is in hiding. The Shift Supervisor must produce an up-to-the-minute count sheet for such use. During emergency counts, all juveniles shall be returned to their housing sections.
I. POLICY: To ensure the security and safety of juveniles during transfers, proper security safeguards shall be used at all times by staff member responsible for transportation.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Transportation:
1. A vehicle shall be provided for transport.
2. Any vehicle used in transporting juveniles shall be properly licensed and inspected according to state law.
3. The Detention Driver shall be properly licensed.
4. The number of passengers shall not exceed the number of seats. At no time shall more than three people be in the front seat.
5. No juvenile is permitted to drive facility or staff vehicles.
6. Bodily injury liability and property damage liability shall be provided for vehicles.
7. Juveniles shall not be transported in open truck bodies.
8. Juveniles shall be restrained when necessary by appropriate safety devices.

B. Transportation Clothing:
1. The Shift Supervisor shall decide what articles the juvenile is permitted to have in his possession during the trip. These articles should be kept to a minimum.
2. The juvenile may exchange the clothes he is wearing for clean clothing which shall be searched thoroughly before being given to the juvenile.

C. Use of Restraints:
1. Juveniles in custody are not to be struck, pushed, or otherwise physically or forcibly handled. Situations will exist, however, where reasonable force is necessary to maintain the safety of the juvenile himself, or others, including staff.
2. Approved security devices are to be used only in extreme circumstances. The use of such devices must be determined on an individual basis by the facility Director. Each time restraining devices of any kind are used, a written report will be submitted to the Assistant Director for Management Services at the end of the work day or the beginning of the next workday.
3. In situations where larger juveniles are being transported in number, trips should be scheduled so that two staff members are assigned. Juvenile careworkers will have the right to physically hold juveniles being escorted to and from the transportation vehicle. Female staff should be present if a female juvenile is being transported.
4. Mace or other chemical deterrents are not to be used, at any time, under any circumstances.
5. In such instances where a juvenile physically resists being transported and cannot be persuaded to cooperate, handcuffs should be used in preference to engaging in a physical struggle where both the juvenile and juvenile careworker are endangered.
6. For reasons of safety, as well as security, inside door latches of the transportation vehicles will be removed, and all windows will be screened.
7. No juvenile will ever be latched to the vehicle while in transit, nor will juveniles be handcuffed to each other in any vehicle when it is in motion.

D. Transportation Counts: When seating juveniles in a bus, car or truck, the juvenile careworker shall make a roll call count. A numerical count must again be taken after all juveniles are seated. Numerical counts should be repeated whenever the vehicle stops.

Effective Date | Approved By:
I. POLICY: Since permanent logs and regular security inspections are vital to the efficient operation of the facility, juvenile careworkers in each housing section, shift supervisors in charge of the facility and control center staff shall maintain permanent logs that record emergency situations, unusual incidents and pertinent information about juveniles. These records shall be assembled daily by the Assistant Director for Program Operations and submitted daily to the Director for review.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Types of Logs:

1. The following security inspection logs are to be used by shift supervisors:
   a. Inspection of Quarters Sheets.
   c. Daily Logs.

2. These logs shall be completed by the appropriate staff member and forwarded, at the end of the shift, to the Assistant Director for Program Operations for review/filing.

B. Types of Inspections:

1. Visual inspection of detecting damaged security screens, bent or spread bars, broken welds, cracked or cut bars on window sashes, any sign of steel filings, and other evidence of tampering or weakness such as fresh paint or discolored areas; cluttered and dirty areas of living quarters and other areas, unaccounted for and/or unmarked tools in any area, and fire hazards.
2. Work orders for all maintenance repairs will be forwarded to the Assistant Director for Management Services for his/her approval.

3. Extreme emergency work order requests may be reported by telephones to the Assistant Director for Management Services at any time.

---

I. POLICY: Although control of weapons and contraband is essential to the order and security of the detention facility, indiscriminate searches of juveniles shall be prohibited. Only when there is sufficient reason to believe that the security of the facility is endangered or that contraband is present in the facility shall the search of a juvenile, his/her possessions, rooms and areas of the facility be permitted. A search plan shall be established, reviewed by legal counsel and made available to both staff and juveniles. The search plan shall be reviewed at least annually and updated if necessary.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. "Strip" Search: A search during which a juvenile is required to remove his clothing.

B. "Frisk" Search: A search during which a juvenile is not required to remove his clothing.

C. Body Cavity Search: A visual, manual or instrument inspection of a juvenile's oral, anal or vaginal cavity.

III. PROCEDURES:

A. Purpose of Searches:

1. To prevent the introduction of weapons or other dangerous contraband into the facility.

2. To detect the manufacture of weapons, escape devices, etc., within the facility.

3. To discover and suppress "trafficking" between staff and juveniles, especially in facility stores.

4. To check malicious waste or destruction of facility property.

5. To discover hazards to health or safety that may go unnoticed during a more routine inspection.
<table>
<thead>
<tr>
<th>Chapter Subject</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECURITY AND CONTROL Searches of Juveniles and Various Locations</td>
<td>11.8 Page 2 of 5</td>
</tr>
</tbody>
</table>

B. Searching Juveniles: The search of juveniles by Shift Supervisors or juvenile careworkers requires expertise and a humane attitude on the part of the staff. A juvenile should be informed, quietly and simply, of what is about to take place. The juvenile should not be touched any more than is necessary to conduct a comprehensive search.

1. Strip Searches:
   a. Strip searches shall be performed only when there is reason to believe that weapons or contraband will be found.
   b. A strip search of the juvenile shall be conducted by a staff member of the same sex as the juvenile being searched.
   c. A strip search shall be performed in an area which ensures the privacy and dignity of the individual.
   d. Strip searches shall be performed visually.
   e. In conducting the strip search:
      1. Have juveniles remove all clothing and move away from the articles.
      2. Do not touch the juvenile.
      3. Have juvenile run his hands through his/her hair.
      4. Face juvenile and have the male lift his genitals; have female lift her breasts.
      5. Check rear area and have juvenile squat.
      6. If there are any bandages, they must be removed with the nurse present.
      7. Search clothing carefully and return it to the juvenile as quickly as possible.

C. Housing Section Search:
   1. Searches of housing sections or rooms shall be performed by Shift Supervisors or at least two juvenile careworkers on unannounced and irregular schedules. This search is designed to uncover contraband, prevent escapes, maintain sanitary standards and eliminate fire and safety hazards. When searching a room, staff members should remember:

<table>
<thead>
<tr>
<th>Chapter Subject</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECURITY AND CONTROL Searches of Juveniles and Various Locations</td>
<td>11.8 Page 3 of 5</td>
</tr>
</tbody>
</table>

a. Juveniles should be present at the time of the search. If they are unable to be present, they shall be given written notice of the search and any confiscated articles.

b. Searches should be done systematically. Begin on the right hand side of the door and move around the room inspecting the area including the ceiling. Probe holes, tears in mattresses and any tears in rugs or tiles. Check all light fixtures, cabinets, windows, sinks, toilets and any personal items or books in the room.

c. A room should be left the way it was found, never in disorder. Juveniles personal property shall be respected and not willfully discarded, broken or misplaced.

d. All personal clothing shall be carefully searched for contraband.

e. Each room shall be completely searched before it is occupied by a new juvenile.

2. Body Cavity Examination:
   a. Only when there is probable cause to believe that weapons or contraband will be found shall a body cavity search be permitted. Such a search must have authorization from the Director or his designee and be performed only by the medical staff (i.e., doctor or nurse).

b. With the exception of the mouth, all body cavity searches shall be performed visually, manually or by instrument. At least one member of the examining team must be a member of the same sex as the juvenile being examined.

c. Manual or instrument inspection of body cavities shall be documented fully by the Shift Supervisor with a copy to the juvenile's file and to the Assistant Director for Program Operations. X-rays, instrument or surgical intrusions (including use of anoscope or vaginal speculum) shall be used for medical reasons only as authorized by the facility physician.
3. Frisk Search:
   a. A frisk search is used when a juvenile is returning from a visit or from an outside appointment, i.e., court, doctor, etc.
   b. The juvenile should not be touched any more than is necessary to conduct a comprehensive search.
   c. Using sensitivity, the admitting staff member should:
      (1) Inform the juvenile of the frisk search.
      (2) Have the juvenile place his/her feet apart, arms aside and face the staff member.
      (3) Check the juvenile's hair, ears, nose, mouth, under tongue.
      (4) Have the juvenile turn around and check his/her collar, shoulders, underarms (bra bands and under breast area for females).
      (5) Tuck thumb in waist band and starting from front zipper, slide it all the way around waist.
      (6) Check outside of legs to ankle, inside legs to groin.

D. General Area Search: A general search made by Section Chiefs of any area of the facility, i.e., work areas, corridors, classrooms, elevators and storage areas. This may be done as necessary and preferably, with the knowledge and consent of the Assistant Directors. After such a search, a written report shall be filed with the Assistant Directors describing the scope of the search, the results and a list of all contraband found.

E. Search of Visitors:
   1. Visitors may be required to submit packages, purses, handbags, and briefcases for inspection by facility staff when there is probable cause to believe that weapons or contraband will be found.
   2. No search more extensive in scope than an electronic device or frisk shall be performed. If probable cause to believe that weapons or contraband will be found exists, admission to the facility shall be denied.
I. POLICY: To maintain the security of the facility, all keys necessary to the operation of the facility shall be issued from and maintained in the control center.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Security Key: Any facility key which, if lost or duplicated by juveniles, would jeopardize the security of the facility, facility property, staff, visitors or juveniles.

B. Non-Security Key: Any facility key, as listed by the Assistant Director for Management Services, which, if lost, would not require urgent security actions.

III. PROCEDURES:

A. Accountability: The key control systems require simple and efficient daily checks of all keys and locks within the facility by the Section Chiefs. A current inventory of all keys and key blanks shall be maintained.

B. Recording and Storing of Keys: A key for each lock shall be stored by the Building Supervisor in a locked cabinet. Key hooks in this cabinet shall be numbered. A "three-way" fit shall cross-index keys by alphabetical location of key use, cabinet hook numerical listing and key numerical listing. The cabinet and the "cross-index" listing must be kept in separate secure areas. Both pattern and duplicate keys, identifiable by different colors, shall be kept for each lock. Only duplicate keys shall be issued for use.

1. Locations of locks and padlocks: Records of padlocks and blueprints or maps showing the location of all permanent locks shall be kept by the Building Supervisor.

2. Change of lock location or duplication of keys: Any change in lock location or duplication of any key must be authorized by the Assistant Director for Management Services.

C. Inventory of Keys: Keys shall be recorded and stored for accountability. All keys permanently assigned to a staff member shall be signed for, and the receipt kept in the staff member's personnel folder, with a copy in a separate file kept by the Director.

D. Issue of Keys:

1. Assistant Directors, Section Chiefs, subordinate staff, and other persons approved by the Director will be issued a set of work keys with an identification number. These will be signed out with the Office Manager. All other work keys will remain in a secured key box in the particular living section to which the staff member is assigned.

2. When the staff member goes on duty, he/she is issued a set of keys. When the shift is completed, the keys are returned to the secured key box and the Shift Supervisor verifies that all keys have been accounted for.

3. Staff must have specific approval of the Director to take a facility key home.

4. When on duty, staff shall keep facility keys in their possession at all times. Juveniles are never permitted to handle work keys.

E. Lost or Misplaced Keys and/or Key Rings: A verbal report of any lost or misplaced key or key ring shall be made to the Shift Supervisor immediately, stating when loss was discovered, circumstances surrounding that loss and the key(s) identification. A written report shall be submitted as soon as possible to the Assistant Director for Management Services and the Shift Supervisor. Note: When security keys are lost or misplaced, proper security precautions must be taken to preclude use of the key(s) for unauthorized access or escape from facility areas. If security keys are lost or if there is sufficient reason to believe juveniles have made impressions of the key(s), locks shall be changed.

F. Handling of Keys: All staff will observe the following key control procedures:

1. Carry and use keys as inconspicuously as possible.

2. Securely fasten keys by chain to belt and carry in the pants pocket or in a leather pocket attached to the belt.
3. Check the number of keys when exchanging from one staff member to another (confirm key count with ring tag).

4. Avoid reference to key numbers or any identifying information in the presence of juveniles.

5. Avoid dropping keys. Keys shall be exchanged hand-to-hand, never tossed or thrown.

6. Do not use force to operate locks. If a lock does not function easily, the malfunction shall be reported to the Shift Supervisor.

7. Do not attempt to repair locks. Refer to an authorized locksmith or qualified staff member.

8. Damaged or broken keys shall be returned to the Section Chief for replacement.

G. Emergency Keys: Duplicate fire and emergency key rings shall be kept in separate secure locations, one of which is apart from the area containing operational keys. These keys marked for identification by touch shall be issued in an emergency only. The Assistant Director for Management Services shall routinely check all emergency keys with their locks to ensure proper functioning. These emergency keys shall be color-coded in RED on their respective key boards.

H. Restricted Keys: Some keys stored on the operational key board shall be “restricted” or issued only to designated staff. These restricted keys shall be color-coded. Examples of such keys are food service stockroom, pharmacy, and juvenile records.

I. Duplication of Keys: Unauthorized possession, alteration, marking, duplication, manufacture, or impression making of keys is prohibited. Any such incident shall be reported in writing to the Assistant Director for Management Services. If criminal acts are involved the offender shall be referred for prosecution.
I. POLICY: Since the daily operation of the facility requires that the staff have access to various tools and culinary equipment, a system of internal accountability shall be established.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Restricted, Class A: Tools that can be useful to juveniles either in effecting an escape or causing a death or serious injury, for example, ice picks, bolt cutters, files.

B. Less Restricted, Class B: General mechanical tools, for example, non-security screwdrivers, wrenches, etc.

III. PROCEDURES:

A. Receipt of Tools:

1. The Assistant Director for Management Services is responsible for enforcing tool control policies. The Building Supervisor is responsible for auditing tool inventories, marking tools, color coding, location, storage, security, and overall accountability for tool use.

2. Prior to issue the Building Supervisor shall receive all tools from any source and mark them for inventory.

3. A report is required for all tools received by the facility. The original of this report shall be forwarded to the Assistant Director for Management Services, one copy to the Building Supervisor, and one for the Section Chief in the section where the tool will be used.

B. Tool Inventory Lists: A master inventory list of tools shall be prepared for each section in which tools are stored and/or used. A complete set of master lists shall be kept in the office of the Assistant Director for Management Services. These typewritten master inventory lists, signed by the Section Chiefs, shall be kept in loose leaf binders. Inventories shall be current, filed and readily available for inventory and daily tool accountability.

C. Tool Inventory Control:

1. Daily: A check of tools shall be made by the Building Supervisor.

2. Weekly: A tool report of all tools shall be submitted to the Assistant Director for Management Services with a copy to the Section Chief.

3. Monthly: An audit of inventories, markings and safe and secure storage of tools with suggestions for improvement shall be forwarded by the Building Supervisor to the Section Chief and the Assistant Director for Management Services.

D. Issuance: The Building Supervisor is responsible for issuing and controlling hazardous tools/equipment/supplies and is responsible for disposing of all containers, worn-out tools, etc.

1. Class "A" will be issued to and used only by staff members.

2. Class "B" will be issued to only staff members but may be used by a juvenile under strict supervision.

E. Marking of Tools: All tools shall be marked with etching tool prior to issue and color coded according to tool classification by the Building Supervisor. For consistency, Class A tools shall carry a band of RED paint at least ½ inch wide at the point of least wear.

F. Storage of Tools: All tools shall be displayed on a shadow board. Only one tool shall be displayed on a shadow identical in size and shape to that tool.

G. Turn-In of Tools: When a tool is worn-out or broken, the Section Chief shall request a replacement. No change will be made in the inventory. However, a tool turn-in receipt shall be prepared in triplicate: a copy placed in a file of the Section Chief, a copy to the Assistant Director of Management Services and the original forwarded, along with the unserviceable tool to the Building Supervisor, who shall file the tool receipt and dispose of the tool.
1. Any tool noted lost shall be reported immediately by telephone to the Assistant Director of Management Services, The Assistant Director for Program Management, the Building Supervisor, and the Shift Supervisor and then by written report submitted as soon as possible to the Director. This report shall identify the tool(s) lost or missing and the circumstances surrounding the absence. A copy of the lost tool report shall be kept by the Building Supervisor and the Section Chief until the tool is found or, after three months, removed from inventory.

2. When a Class A tool is lost or misplaced, any juvenile(s) who had access to the tool will be held at that location by the Shift Supervisor until a thorough search has been made.

3. The Building Supervisor shall keep a file listing all tools reported lost or missing. All contraband tools confiscated during search or shakedown will be checked against this file. Identifiable and serviceable tools found shall be forwarded to the Section Chief, with written notice to the Assistant Director for Management Services and the Assistant Director for Program Operations. If replaced, the found tool(s) will be placed in secure storage; if unserviceable, destroyed.

I. Medical Section: Tool control in medical and dental sections presents unique problems. Surgical, dental and other medical equipment shall be kept in the safest manner possible. Tools and supplies of a hazardous nature shall be kept by medical staff in a locked storage area or container. Because of size and character, medical tools shall not be marked.

1. The medical staff shall keep an accurate inventory of instruments such as scalpels and other tools daily.

2. A reserve stock of hypodermic needles and syringes shall be kept in a locked and secure area and a current and accurate inventory maintained by the medical staff. Only the minimum number of syringes and needles for proper operation of the medical section shall be available for daily use. Each shift will maintain a daily perpetual inventory of all needles and syringes, by size. All used syringes and needles shall be crushed or disposed of safely and securely.
POLICY: To prevent the use of a staff or facility vehicle in an escape attempt, the keys of all vehicles parked in the facility parking lot shall be turned into the control center whenever the staff member enters the secure portion of the facility.

DEFINITIONS: As used in this document, the following definition shall apply:

Official Vehicle: Any parent agency owned motor vehicle including passenger cars, trucks, farm vehicles, tractors or construction equipment.

PROCEDURES:

A. Vehicle Assignment: All official vehicles shall be assigned and/or issued to staff by the Assistant Director for Management Services only:
   1. To conduct official business within facility boundaries, and/or the local community.
   2. To conduct official business specifically authorized by the Director.

B. Vehicle Safety:
   1. Keys for motorized vehicles shall be kept in the control center.
   2. A record of all keys issued shall be kept in the control center. This record shall include:
      a. Name of staff member to whom key is issued.
      b. Time and date of key assignment.
      c. Purpose of trip.
      d. Time key is returned.

C. Personal Vehicle Parking: Staff shall park personal vehicles in the assigned staff parking lot. All vehicles shall be locked and windows shut when not in use.

D. Personal Vehicle Use for Official Business: Occasionally staff may be required or permitted by the Director to use personal vehicles for official business. In such instances:
   1. Only persons on official business shall occupy the vehicle.
   2. All federal, state and local laws and facility regulations shall be observed.
   3. The trip shall be authorized in writing by the Director.
   4. The authorization shall indicate clearly the purpose of the trip, points of departure, destination, approximate time, and dates of departure and arrival.
   5. Reimbursement for expenses shall be at a predetermined rate in accordance with the parent agency's travel regulations.

E. Insurance:
   1. Official vehicles are covered under the (county/jurisdiction/facility) insurance policy.
   2. Any staff involved in an accident with a personal vehicle while driving for an approved official business is covered under the (county's/jurisdiction's/facility's) insurance policy.

F. Emergency Transportation: In an emergency situation an ambulance shall be used:
   1. If the situation is so life-threatening that an ambulance can not be waited for, then the official facility vehicle should be used. If it is not available, the senior staff person on duty may authorize the transport in a staff member's private auto.
In all emergency transportation situations, the juvenile shall be accompanied by one staff member, and the juvenile’s medical file. At the emergency facility, the juvenile careworker must maintain visual supervision of the juvenile at all times.

G. Maintenance of Vehicle: The Detention Driver shall be responsible for maintaining the proper operating condition of official vehicles assigned to the facility. The gas tanks shall always be at least half full and the vehicles shall always be legally equipped and inspected.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Availability: The availability, control and use of security equipment shall be the responsibility of the Assistant Director for Management Services. Type and quantity of security equipment shall be based on an analysis of the facility and juvenile population profile. The Section Chief, Shift Supervisors and the Assistant Director for Management Services shall be the only staff within the facility with access to the security equipment storage area.

B. Storage of Security Equipment: Restraining equipment, i.e., handcuffs, may be stored in the control center for emergencies.

C. Handcuffs:

1. Handcuffs will be stored and secured in the control center. At shift change, the handcuffs will be counted by the Office Manager before the departing shift leaves the facility, and the count will be entered in the logbook.

2. All staff members will be sure that the handcuffs do not leave the control center unless they are being used in transporting juveniles, or for other security purposes.

3. The handcuffs serial numbers will be recorded and a monthly inventory of the cuffs will be reported to the parent agency.
### Control of Firearms and Other Security Equipment

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECURITY AND CONTROL</td>
<td>Control of Firearms and Other Security Equipment</td>
<td>11.12</td>
<td>2 of 2</td>
</tr>
</tbody>
</table>

#### D. Issuance:
Security equipment shall be issued by the Director only upon signed receipt made out in duplicate. When the equipment is returned, condition should be noted and a copy of the receipt returned to the staff member. A copy of the receipt shall be retained in the Director's file for one year.

#### E. Law Enforcement Officers and Other Visitors:
At no time shall a law enforcement officer or other visitor be in possession of firearms or other weapons, including night sticks, while inside the confines of the facility. Visitors must place weapons in a secure storage vault and receive receipt for such storage.

---

### Related Standards:

- **ACA:** 2-8198, 2-8204, 2-8210, 2-8211, 2-8212
- **NAC:** 2.31, 4.5, 4.6
- **ABA:** 10.7

---

### Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.13</td>
<td>2</td>
</tr>
</tbody>
</table>

#### I. POLICY:
To prevent the possibility of serious injury to staff and juveniles, only the minimal amount of force necessary shall be used to control a juvenile or situation in the facility. The use of force resulting in injury to staff or juveniles and reported.

#### II. DEFINITIONS:
As used in this document, the following definitions shall apply:
- **Mechanical Restraints:** Mechanical restraints shall be defined as handcuffs or wristlets, chains or anklets, belts, or any other device used to limit the movement of the juvenile's body.

#### III. PROCEDURES:

- **A. Authority:** Only the Director may authorize the use of force and security equipment. Staff so authorized should use appropriate force when an escape is in progress and/or when danger to persons or danger to property may ensue. In an emergency where authorization is not possible, a staff member shall use appropriate force and, later, shall justify that action in a written report.

- **B. Levels of Force:** Force, security equipment and restraint equipment are intended to be used only as control measures and only when absolutely necessary. They are not intended, and shall never be used as a means of punishment. The following levels of force are authorized under the described circumstances.

  1. **Physical Handling:**
     - The first level of force available to a staff member is the use of his/her hands. Physical handling is justified to subdue unruly juveniles, to separate participants in a fight, in self defense and in defending staff, juveniles or other persons. It also may be used to move juveniles who fail to comply with lawful orders.
b. As with any type of force, the amount used in physical handling shall be only as much as is reasonable and necessary in the circumstances.

2. **Restraint Equipment:** Instruments of restraint should be restricted to:
   a. Protection of the juvenile from self-injury.
   b. Prevention of injury to others.
   c. Precaution against escape during transfer.
   d. For medical reasons under direction of medical staff.
   e. Prevention of property damage.

C. **Medical Treatment:** When force has been used against a juvenile, the juvenile should be examined by medical staff as soon as possible. Immediate medical attention shall be given to both staff and juveniles if injuries were suffered.

D. **Use of Force Reports:** The Director should be notified immediately when any type of force is used. A written report, prepared by the staff member who employed force, shall be completed no later than the conclusion of that shift and shall include:
   1. An accounting of the events leading to the use of force.
   2. An accurate and precise description of the incident and reasons for employing force.
   3. A description of the restraining devices, if any, and the manner in which used.
   4. A description of the injuries suffered, if any, and the treatment given and/or received.
   5. A list of all participants and witnesses to the incident.

E. **Disciplinary Procedure:** At the discretion of the Director, the alleged perpetrator may be suspended without pay or transferred to another facility until the investigation is completed. Loss of employment may result if abuse or neglect is proven.

### Sample Juvenile Detention Facility

**PHYSICAL RESTRAINT REPORT**

Date: __________

Name of Juvenile: _____________

Unit: _______________________

Place Where Incident Occurred: _______________________

Incident Requiring Juvenile to be Restrained: Describe Fully:

Signature of Staff Member

---

Effective Date

Approved By:
I. POLICY: Specific procedures to be followed in emergency situations, e.g., fire, disturbance, taking of hostages, shall be written and made available to all staff by the Director; they shall be reviewed and updated at least annually.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Emergency Plans: Actions necessitated by emergency situations to assess vital and vulnerable points, review internal and external resources and establish command, control, communications and deployment procedures.

B. Negotiation: Establishing effective communication between the Director and juvenile leaders/hostage takers to effect safe return of hostages and/or normal functioning of the facility.

C. On-Scene Controller: A senior staff member appointed by the Director to command all staff at the site of an emergency situation and to direct all on-the-spot activities.

D. Hostage Incident: A criminal act in which juvenile(s) forcibly seize and confine a person against his/her will.

III. PROCEDURES:

A. Emergency Plans Development: The Director shall develop specific plans for:

1. An escape control plan.
2. A riot control plan.
3. A bomb threat action plan.
4. A hostage incident action plan.
8. The Shift Supervisor will submit a report of the illness/injury to the Director within 24 hours outlining the circumstances.

9. The Medical Staff will submit a separate report to the Director, as soon as possible, outlining the extent of the injury or illness, and what medical care was administered.

D. Disturbance Control:

1. Steps to the Control of Group Destructiveness in Open Program Areas:
   a. The Shift Supervisor shall notify the Assistant Director for Program Operations and mobilize staff, define the functions of its various members and procure extra assistance from the staff phone numbers list. If necessary the Shift Supervisor should call the local police department.
   
   b. The staff should move to sever the group, removing the staff supportive non-participating juveniles from the area.
   
   c. The Shift Supervisor shall sever the hard-core group by separating them. Most groups can actually be reduced to one by playing on the weakness inherent in the delinquent group.
   
   d. When control is regained isolate and confine key juveniles.
   
   e. Restore program for other juveniles, including clearing away of any damage.
   
   f. Counsel both the participants and non-participants as much as necessary.
   
   g. Write a factual account of the occurrence for the Director in an incident report.

2. Steps to the Control of Destructive Behavior in Rooms:
   a. The Assistant Director for Program Operations or the Shift Supervisor shall mobilize as much extra assistance as is needed and define each staff member's role.
b. During daytime hours, non-participating juveniles may be moved into sections away from the area and supervised by staff.

c. Staff should check the participating juvenile, or juveniles, in their rooms. Should physical force be necessary, more than one staff member should be present. (The work of staff in taking these steps should be methodical and thorough). Remove towels, bedding, mattress, nightwear, shoes, Bible, booklet, toilet paper, and especially the soap.

d. Should the juvenile's control return, he/she may assist in clearing up any damage. If not, the staff should proceed to clear it.

e. The senior staff member shall write the incident report for the Director.

3. Sit Down Strikes:

a. The Assistant Director for Program Operations or Shift Supervisor shall mobilize and define the functions of the staff.

b. Sever the group through separation.

c. Isolate the leader or leaders.

4. Hunger Strikes: Juvenile careworkers shall:

a. Offer the food at each meal to the juvenile.

b. Make note in the logbook – notify the caseworker the next day.

E. Hostages: The policy of the facility is that if hostages are taken, no trades or negotiations will be made for their freedom. If a staff member has been taken hostage, there is a risk that the juveniles may have a complete set of keys to the facility entrance area. A complete take-over of the facility could occur. Specific areas can be secured, however, where juveniles would not gain access. The following steps will apply if any hostage is taken:

1. Do nothing that will excite the juveniles.

2. Notify the control center.
G. Escapes: In the event a juvenile or juveniles attempt to escape from the facility, the following procedures are to be used by the Shift Supervisor and juvenile careworkers:

1. Immediately escort the remainder of the group to a secure setting.
2. Maintain control of the group.
3. If possible, pursue the juvenile(s) immediately.
4. If more than one juvenile careworker is present, he/she will contact the administration office.
5. The following information will be reported by telephone to the control center.
   a. Name(s) of escapee(s).
   b. Approximate time and location of escape.
   c. The direction escapee(s) were headed.
   d. Whether escapee(s) are security risks or dangerous.
   e. Name of staff member (if applicable) in pursuit.
   f. Whether additional staff is needed for pursuit or group control.
6. If the juvenile(s) are successful in getting outside the facility perimeter, the following persons will be contacted:
   a. State and local law enforcement agencies.
   b. Parent agency.
   c. Probation/parole officer.
   d. Parents/guardians.
   e. Assistant Director for Program Operations.
   f. Director.
7. The above information and the date, time and staff member responsible for the notification will be included in the information report. Reporting requirements will be followed.

3. Secure:
   a. Recreation and delivery doors.
   b. Main corridor door.
   c. Area between the administrative office.

   These areas can be secured from the inside and juveniles will not have keys or access to these doors.

F. Mass Juvenile Intake/Admissions: In a mass of more than twenty (20), or on detaining more than twenty (20) juveniles for identification pending a charge, the following procedures will be used:

1. The Assistant Director for Program Operations aided by the Shift Supervisor will coordinate the mass intake.
2. Staff, juvenile careworkers and Shift Supervisor, working in teams of four, will process the identification and intake process. Admissions forms for each juvenile will be filled out, and the specific charge will be added when determined.
3. The arresting agency should have at least two officers present for identifying and establishing appropriate charges.
4. Transportation will remain available until a final intake/admissions or release decision has been made on every juvenile. Released juveniles will be taken out through the intake area.
5. When the admission forms have been completed, the Shift Supervisor and juvenile careworker will notify the parents. All attempts to contact parents, including no answers, busy signals, and times of calls will be recorded on the admission forms and initialed.
6. As the parents of each juvenile report to the admissions area, the juvenile will be brought to the admissions area where he/she will sign for and receive personal property that had been taken. The juvenile will then be taken to the intake area along with the admission form. Only juveniles with admission forms which have been processed, and whose parents have been notified, will be permitted to be taken from the admissions area.
H. Attempted Suicide: On discovery of an attempted suicide, the following action will be taken by the Shift Supervisor:

1. a. If the juvenile has sustained noticeable injury, or if the juvenile shows symptoms of having swallowed a poisonous substance, immediately administer first aid.
   
   b. While administering first aid, another staff member will immediately notify the medical staff. If a staff member is alone, immediately after administering the necessary first aid, he/she shall notify the medical staff.
   
   c. If a self-inflicted injury is of such a serious nature that the life of the juvenile is in danger, immediately request an ambulance in addition to the medical staff.
   
   d. If the juvenile can be moved without imperiling his/her life further, move him/her to a private room and make him/her as comfortable as possible. Reassure the juvenile by being attentive and caring, and keep constant and close observation pending arrival of the medical staff or ambulance.
   
   e. If the juvenile cannot be moved, make sure the juvenile is protected and comfortable, and then move any other juveniles out of the immediate area.

2. Notify the Director and Assistant Director for Program Operations by telephone.

3. a. Regardless of the seriousness of the attempt (attempts include cases where a juvenile is discovered making the arrangements), notify the facility psychiatrist by telephone as soon as possible. If conditions are such that the juvenile careworker is unable to do this within a reasonable length of time, request another staff member to do this.
   
   b. In all of these cases, keep the juvenile under constant and close observation pending arrival of the psychiatrist.
   
   c. All recommendations of the psychiatrist will be complied with.

4. Notify the assigned probation officer by telephone.

5. Notify the juvenile’s parents/legal guardian by telephone. If unable to contact them, advise the assigned probation officer who will assist.
Sample Juvenile Detention Facility

CRITICAL INCIDENT REPORT
TO BE COMPLETED BY DIRECTOR

Director: ________________________________

Juvenile/Staff/Facility Involved: ________________________________

Type of Incident: _____________________________

- Death
- Suicide Attempt
- Major Group Disturbance
- Crime
- Serious Accident/Injury
- Fire/Arson
- Physical Force Resulting in Injury to Juvenile
- All Other (Classified for Restrictive Cases)
- Other (Specify) ________________________________

Occurrence: Date: __________ Time: ______ am/pm
Specific Location: _____________________________

Description of the Incident (Give brief summary here and attach a detailed narrative, if necessary):

_______________________________________________________________________________________

Describe Action (1) Taken: (2) To be taken: (3) Recommended: ______________________________

Initial Report By:__________________________ Name: __________________________ Title: __________

Reported to: ____________________________ Name: __________________________ Title: __________

Report: Date: _________ Time: ______ am/pm Oral: ______ Written: ______

Additional Remarks: ____________________________

Report Forwarded to: ____________________________ Name: __________________________ Title: __________

Additional Copies to: ____________________________ Name: __________________________ Title: __________

Report Completed by: ____________________________ Name: __________________________ Title: __________

Signature: ____________________________ Date: ____________________________
CHAPTER 12
FOOD SERVICE
COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8217 through 2-8221, 2-8227 through 2-8230, 2-8238 and National Advisory Committee Standards 4.2173, 4.52. The samples establish basic conditions that the facility must comply with for operation of the food service program.

The assumption is made that a detailed operation manual will be used in conjunction with the policies and procedures outlined.

CHAPTER 12
FOOD SERVICE

I. POLICY: All juveniles shall be served a varied and nutritionally adequate diet, supervised by a licensed dietician with special training pertaining to allergic reaction, hyperactivity, and other mental, emotional and physical reactions of juveniles susceptible to particular food substances. The Food Service Supervisor shall be trained in food service operations before assuming responsibility to ensure that food served meets or exceeds the nutritional adequacy of dietary allowances stated in the National Academy of Sciences Recommended Dietary Allowances.

II. DEFINITIONS: None.

III. PROCEDURES:

A. The Food Service Supervisor shall prepare quarterly evaluations of the food service section, which include records of:
   2. Menu plans.
   3. Records of all meals served.
   4. Equipment needs.
   5. Staffing patterns including juvenile and volunteer.
   6. Costs.
   7. Special problems.
   8. Sanitation.
   11. Food service survey results.

B. At least annually, but preferably quarterly, a dietician registered with the American Dietetic Association shall:
Chapter 1. Review the records and quarterly evaluations of the Food Service Supervisor.

2. Compare the nutritional values of meals actually served with parent agency standards and ration allowances.

3. Provide a written evaluative report regarding:
   a. Nutritional adequacy.
   b. Menu planning effectiveness.
   c. Meal service procedures.

C. Regular inspections will be made by appropriate government authorities.

---

Subject Policy Nutritional Adequacy of Diet for Juveniles 12.1 Page 2 of 2

---

Table: Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.2</td>
<td>6</td>
</tr>
</tbody>
</table>

---

Related Standards:

FOOD SERVICE

ACA: 2-8219,
NAC: 4.2173, 4.52

---

I. POLICY: All juveniles shall be provided meals which are nutritionally adequate, properly prepared and served in pleasant surroundings.

A. Food shall never be withheld or reduced as a form of punishment or offered as a reward.

B. To the extent possible, food ordering and preparation should take into consideration ethnic tastes and the food preferences of the juveniles.

C. The food service plan provides for a single menu for staff and juveniles.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Standard Ration: The daily food allowance, measured in servings, shall be available to each juvenile. This allowance need not be served in exact proportions each day, but the monthly allowance must be balanced for the period ending at the close of business on the last day of each month. Any monthly variation of ten percent above or below the standard ration must be approved by the Director.

B. Food Grouping Detail: A grouping of similar foods into categories which will enhance menu planning, budgeting and the serving of a nutritionally adequate diet.

C. Therapeutic Diet: Special foods or meals prescribed by a physician or dentist as part of a patient's treatment.

D. Religious Diet: Meal(s), dietary restrictions, or special handling of food required by a religious denomination. The contents of a religious meal may never exceed the contents provided to the general population. These contents are intended to be measured by costs, quality and quantity.
III. PROCEDURES: The Food Service Supervisor is responsible for:

A. Menu Plan: Menus shall be developed by the Food Service Supervisor. Effective menu planning recognizes the needs of the general juvenile population and specific needs of the juvenile group attributable to age, physical activity, sex, medical status, etc. These variances create difficulties in using a system-wide menu plan. Parent agency policy requires that menus be developed within the following framework:

1. Menus shall be based upon budget allocations.

2. Each juvenile shall be served at least the minimum allowance described below in "Standard Ration."

3. Menus shall be prepared and distributed at least one week in advance of serving, and posted where easily read by juveniles.

4. Any changes or substitutions should be noted on menu sheet, with the specific food changed to one of approximately equal nutritional value.

5. Menus shall be designed to provide meals which are not only nutritionally adequate but also have a balance of color, flavor and texture which will add to meal enjoyment.

6. Menus should be kept on file, rotated periodically and take into consideration the average length of time a juvenile is detained.

7. Menus may reflect changes in seasons.

B. Standard Ration: Standard daily food ration allowances for each juvenile are the cornerstones of an adequate food program. The Food Service Supervisor shall ensure that each juvenile is provided foods from four basic food groups, with a daily allowance from each grouping. Establishment of these allowances in terms of servings per person, per day, shall consider waste incidents in normal preparation. All ration allowances are based on standard retail cuts of meat and fresh produce while all canned foods are included as net weights. The standard daily allowance for foods for juveniles shall be:

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Servings</th>
<th>One Serving Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetable &amp; Fruit</td>
<td>4</td>
<td>½ cup salad, ½ cantaloupe, one orange, medium-sized potato, ½ grapefruit</td>
</tr>
<tr>
<td>Bread &amp; Cereal</td>
<td>4</td>
<td>1 slice bread, ½ cup cooked cereal or pasta, 1 ounce ready-to-eat cereal</td>
</tr>
<tr>
<td>Milk &amp; Cheese</td>
<td>3-4</td>
<td>1 cup milk or yogurt, 1-1/3 ounces natural cheese, 2 ounces processed cheese food, 1/2 cups ice cream or ice milk, 2 cups cottage cheese</td>
</tr>
<tr>
<td>Meat, Poultry, Fish &amp; Beans</td>
<td>2</td>
<td>2-3 ounces lean, boneless, cooked meat, poultry or fish, 1 egg, 1-1/2 cups cooked dry beans, peas, lentils, or soybeans, 4 tbs. peanut butter, ½ cup nuts, sesame seeds or sunflower seeds</td>
</tr>
</tbody>
</table>

C. Therapeutic Diets: Shall be provided to juveniles only:

1. When prescribed by appropriate medical or dental staff.
2. When medically indicated and never as a reward.
3. As directed or approved by a registered dietician.
4. As a complete meal service and not as a choice between dietary meals and regular meals.

D. Religious Diets: Religious diets are served:

1. For special occasions when specifically approved in writing by the Chaplain and Director.
2. Utilizing regular menu items unless specifically approved by the Director. These menu items shall not exceed the quantity and/or quality provided to the general population.
3. Providing special handling of food, if necessary, according to the juvenile’s religious beliefs.
4. Substituting foods of approximate nutritional value.
E. Food Preparation: Shall be designed to provide juveniles with the best possible meals consistent with the budget plans and daily ration allowances. Food preparation shall:

1. Utilize a standard recipe system available to all food service staff responsible for the preparation of meals. The receipt system should be designed to:
   a. Standardize costs.
   b. Enhance and preserve food flavors.
   c. Improve appearance.
   d. Provide optimum palatability.

2. Provide maximum utilization of the equipment available to enable serving high-quality meals.

3. Be in compliance with the safety and sanitary conditions stated in 12.3 of this chapter.

F. Meal Service: Dining room service shall be designed to enhance the attractiveness of the meal and to enable the juveniles to enjoy meal periods to the fullest extent possible. The manner in which the meals are presented influences the entire atmosphere of the facility since meals assume a magnified importance in the daily routine of the juvenile. The following criteria shall establish minimum standards for meal service:

1. Holiday and weekend schedules may be developed to provide for a more variable meal schedule to coincide with visiting activities, recreational activities, or similar functions.

2. Dining rooms shall be pleasant and attractive.

3. Good table manners, as well as good eating habits, shall be encouraged.

4. All foods shall be served at the appropriate temperature to maintain quality, taste appeal and texture.

5. All facilities shall provide dining areas for group dining, with a staff monitor at each table.

6. Meal utensils shall be as comparable as possible with home or restaurant style service. Plastic or glass dishes, bowls, cup mugs and saucers are preferable. All juveniles in the general population will be provided appropriate eating utensils including at least a fork, knife and spoon. A count of all utensils should be taken and recorded at completion of each meal.

7. Meal service supervision shall ensure dining complies with the facility policy intent. Adequate and firm supervision shall ensure that meals are served in pleasant surroundings without the slightest degree of favoritism, carelessness or waste.

8. Provisions for at least three meals, two of which are hot meals, at regular intervals during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food serving demands, provided the basic nutritional goals are met.

9. Servings should be ample to meet the needs of growing juveniles. Juveniles should not be allowed to store food in their rooms.

10. Care should be taken to avoid scheduling group meetings or individual conferences of a potentially emotional nature prior to meal times.

11. Good eating habits should be encouraged, but juveniles are not required to eat all of the food served.

12. Meals should only be served in juvenile's room because of illness, initial admission confinement, or confinement for behavioral difficulties.

13. The food service plan provides for a single menu for staff and juveniles.

G. Food Service Management: The facility shall establish a food service staffing pattern appropriate in size to meet their needs. Staff size and organization vary widely depending on juvenile population, physical plant, and the equipment available. The food service section, however, shall provide the following minimum staffing pattern:

1. At least one full time Food Service Supervisor with educational background and experience in the administration and supervision of food service operations.

2. Supporting staff adequate to ensure the preparation and serving of meals as described in this policy.

3. Security supervision at a level appropriate for the facility.
H. Food Service Records for the Standard Ration: Records will be maintained by the Food Service Supervisor to document information related to the serving of the recommended dietary requirements. These shall include:

1. An annual and quarterly budget plan for procurement of foods, supplies and equipment necessary to provide the daily food allowance.
2. A detailed up-to-date daily record of foods served, by allowance, and a comparison of the actual poundage served with the standard ration allowance.
3. A monthly ledger listing all food consumed compared with the ration allowance, forwarded to the Director for review. This ledger shall be accompanied by related reports regarding the food service section for the month, along with an explanation for any major deviation (ten percent, plus or minus) from the standard ration allowance.

I. Food Costs: Administration office records shall be maintained by the Accounts Clerk to document, at a minimum, the following food service operations:

1. Food expenditures which identify per capita costs per meal.
2. Food requirements estimated at least 30 days in advance.
3. Proof of effective procurement procedures which result in the purchase of supplies at competitive wholesale prices.
4. Foods in storage, dates of storage and methods used to ensure that food is not stored beyond its safe shelf life.
Sample Juvenile Detention Facility

**MENU**

<table>
<thead>
<tr>
<th>Week Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MONDAY</strong></td>
</tr>
<tr>
<td><strong>TUESDAY</strong></td>
</tr>
<tr>
<td><strong>WEDNESDAY</strong></td>
</tr>
<tr>
<td><strong>THURSDAY</strong></td>
</tr>
<tr>
<td><strong>FRIDAY</strong></td>
</tr>
<tr>
<td><strong>SATURDAY</strong></td>
</tr>
<tr>
<td><strong>SUNDAY</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LUNCH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Week Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MONDAY</strong></td>
</tr>
<tr>
<td><strong>TUESDAY</strong></td>
</tr>
<tr>
<td><strong>WEDNESDAY</strong></td>
</tr>
<tr>
<td><strong>THURSDAY</strong></td>
</tr>
<tr>
<td><strong>FRIDAY</strong></td>
</tr>
<tr>
<td><strong>SATURDAY</strong></td>
</tr>
<tr>
<td><strong>SUNDAY</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LUNCH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
Sample Juvenile Detention Facility

**Breakfast**

<table>
<thead>
<tr>
<th>Date</th>
<th>Juvenile</th>
<th>Staff</th>
<th>Total Milk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Lunch**

<table>
<thead>
<tr>
<th>Date</th>
<th>Juvenile</th>
<th>Staff</th>
<th>Total Milk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Dinner**

<table>
<thead>
<tr>
<th>Date</th>
<th>Juvenile</th>
<th>Staff</th>
<th>Total Milk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List items such as salt and sugar when you use a lot of it, or when you use the last of it.
Sample Juvenile Detention Facility

PERPETUAL SUPPLIES INVENTORY

<table>
<thead>
<tr>
<th>Item Description:</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Brand</th>
<th>Vendor</th>
<th>Cost (Case)</th>
<th>Qty. Acquired</th>
<th>Qty Used</th>
<th>Qty on Hand</th>
</tr>
</thead>
</table>

Sample Policies and Procedures

JUVENILE DETENTION FACILITIES

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.3</td>
<td>4</td>
</tr>
</tbody>
</table>

Chapter: JUVENILE DETENTION FACILITIES

Related Standards:

FOOD SERVICE

ACA: 2-8228, 2-8229, 2-8230, 2-8238

Subject: Safety & Sanitation for Food Service Standards

NAC: 4.2173

I. POLICY: The facility shall provide a food service section which ensures the highest possible level of safety and sanitary practices and participates in the federal school lunch program. Federal and state occupational safety and health codes serve as standard requirements for all food service.

II. DEFINITIONS: None.

III. PROCEDURES: The Food Service Supervisor and the Assistant Director for Management Services are responsible for:

A. Physical Examinations: A physical examination will be made by the Medical Staff to ensure that all staff, juveniles or other persons working in the food service area are free of transmissible disease. This examination shall be completed prior to job entry and at least annually thereafter. Food service workers must be free of open or infected wounds.

B. Training Related to Safety and Sanitation: Training for food service staff shall be conducted by the Assistant Director for Management Services on a regular basis and records shall be kept on course content and participation. At a minimum, staff shall be trained in:

1. Safe use of each appliance in the kitchen area.
2. Safe use and storage of hazardous tools.
3. Proper storage techniques for foods.
4. Facility and section fire plans.
5. Use of fire extinguishers.
6. First aid procedures for scalds, burns, falls and other injuries.
7. Proper report procedures for accident and/or hazardous conditions.
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOOD SERVICE</td>
<td>Safety and Sanitation for Food Service Standards</td>
<td>12.3 Page 2 of 4</td>
</tr>
</tbody>
</table>

C. **Staff Responsibilities:** All food service staff shall be required to:

1. Have clean hands and fingernails and to wash after using toilet facilities.
2. Practice overall good hygiene and wear clean clothing that is changed daily.
3. Wear a cap or hairnet at all times when in food service areas.
4. Wear sanitary gloves at all times when serving food.
5. Keep the food service section clean and all equipment shall be washed immediately after use.
6. Keep accurate records of all meals served and of any food substitutions made.
7. Notify the Food Service Supervisor or the Director immediately of any health or safety code violations observed.
8. Refrain from smoking in the food service section.

D. **Physical Plant:** Food service sections are important ingredients of a safe and sanitary facility. The Director shall ensure:

1. Floors, walls and ceilings are constructed of materials which will provide a safe and sanitary operation.
2. Toilet and wash basins are located in proximity to all food service areas.
3. Ovens, grills and similar equipment are arranged to enable maximum benefit from the sprinkler system and extinguisher coverage.
4. Adequate fire protection and avenues for exit are available.
5. Adequate storage, loading and garbage disposal areas are available.

E. **Equipment Sanitation:** Food service equipment shall:

1. Be designed to comply with all applicable safety codes.

2. Be designed to enable efficient and thorough cleaning. This is especially important for equipment in direct contact with foods. Work tables, dining tables and similar pieces of equipment shall be constructed of metal or stainless steel, avoiding woods or similar water absorbent materials.
3. Be operated and serviced in accordance with the manufacturer's health and safety instructions.
4. Be equipped with refrigerators, freezers, holding cabinets and serving tables that maintain foods at proper temperatures. Bacteria growth and disease can result from improperly designed, maintained, or operated equipment.
5. Be equipped with sanitary rodent-proof containers for dry products such as flour and sugar and covers for food stored in refrigerators.

F. **Safety and Sanitation Inspections:** Inspections of the food service area are vital to ensure compliance with appropriate health and safety rules.

1. Daily safety and sanitation inspections will be made by the Food Service Supervisor. An inspection report form listing all major areas of the section, with space for rating each area and making recommendations for corrective action will be used. These reports shall be held in files for one year. The Food Service Supervisor shall submit a copy of the daily report to the Assistant Director for Management Services.
2. Weekly safety and sanitation inspections shall be conducted by the Assistant Director for Management Services and shall include:
   a. Examining the daily inspection forms for the previous week and taking appropriate action to correct any problems.
   b. Visiting and inspecting all food service and dining areas of the section, including food preparation equipment and storage areas.
   c. Preparing a written report of the conditions and practices observed.
3. Inspections shall be conducted at least annually by an outside source. At a minimum, these inspections shall
include fire and sanitation inspections covering all
food service areas. Written reports shall be forwarded
to the Director for action and shall be retained for
three years.

---

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOOD SERVICE</td>
<td>Safety and Sanitation for Food Service Standards</td>
<td>12.3</td>
</tr>
</tbody>
</table>

---

**FOOD SERVICE**

Subject

Policy

Standards

---

Effective Date: 

Approved By:
CHAPTER 13
SANITATION AND HYGIENE

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8233 through 2-8246.

Sample policies and procedures are designed to establish and maintain a high level of sanitation.

The sample solutions addressed to waste disposal and pest control are only a few of the many options available. Users should examine other options prior to endorsing the most practical local solution.

Special emphasis is placed upon the need for regular and thorough inspections of the water supply, waste disposal, and other conditions which reflect local standards for sanitation and hygiene that affect the health of staff and juveniles.

I. POLICY: The Director shall provide a method for the regular monitoring of environmental health programs especially related to housekeeping practices, water supply and sanitary practices. The facility will comply with all applicable federal, state and local sanitation and health codes.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Environmental Health: All the conditions, circumstances and surrounding influences which affect the health of persons or groups required to be in the area.

B. Independent Audit: The examination by a qualified person or persons who compare established standards with existing practices and reports findings. To be independent, the examiners shall not be staff members or agents of the facility, nor in any way indebted to the staff directly responsible for the section that is being audited.

III. PROCEDURES:

A. Weekly Inspection: The Assistant Director for Management Services shall be responsible for weekly sanitation, safety, and maintenance inspections of all facility areas. This weekly inspection process shall ensure that:

1. All areas are clean and orderly.
2. Lighting, ventilation and heating equipment function properly.
3. No fire, safety, or health hazards exist.
4. All equipment, tools and security devices perform properly, with a special attention being paid to the security screens in the rooms of each juvenile, and areas where they congregate or have activities.
5. All plumbing equipment, including toilet, bath, showers, sinks, and laundry facilities, operate properly.

6. All exterior grounds of the facility, including along the roadway, are free of trash and debris.

7. All garbage and trash disposal receptacles are clean and not damaged and have lids securely attached.

8. All of the deficiencies noted in the previous week's report have been corrected.

B. Housekeeping Plans: Plans shall be prepared as directed by the Section Chiefs. These plans shall require:
1. A cleaning schedule for the area.
2. Specific assignment of juveniles to sanitary duties.
3. A time schedule for duty completion.
4. Specific instructions for the cleaning of:
   a. Floors and doors.
   b. Juvenile quarters.
   c. Juvenile personal property.
   d. Walls and windows.
   e. Toilet and shower facilities.
   f. Equipment.
   g. Storage areas.
5. Waste disposal procedures which provide for proper collection, storage and disposal of all liquid and solid waste accumulations for the section.
6. Instructions for the acquisition, utilization and storage of cleaning supplies and equipment.

C. Sanitation of Rooms: Each juvenile is required to maintain sanitary living area conditions. The juvenile careworker and Shift Supervisor shall inspect the areas.

D. Inspection Visits: Weekly inspection teams shall visit each section in accordance with a schedule distributed by the Director for each month. Teams shall rotate on a monthly basis thus acquiring an exposure to various sections. Only the Section Chief remains a regular member of the inspecting team in his/her section.

E. Inspection Reports: Reports of inspection shall be prepared as directed by the team chairperson and forwarded to the Assistant Director for Management Services. A narrative report of any area found to be deficient in housekeeping or sanitation responsibilities shall be attached.

F. Annual Independent Audits: Facility sanitary practices shall be reviewed by the federal, state or local health authority or private contractor and the facility will conduct an annual inspection. This independent audit shall be conducted to:

1. Each juvenile shall be responsible for the cleanliness of his/her living area including walls, floors, sink, toilet, windows and other property within the room or living area.

2. Cleaning materials and articles for cleaning shall be issued to each juvenile by the juvenile careworker. The juvenile is responsible for the proper usage and care of these articles.

3. Before leaving the living area each juvenile shall sweep and mop the floor of his/her room and deposit any trash in a trash can.

4. No curtains, screen, paper, cellophane or cardboard, etc., shall be hung in a room or on the rooms door, because of the fire hazard.

5. The juvenile careworker shall inspect rooms and living areas daily and report any infraction of these orders to the Shift Supervisor.

6. The juvenile careworker shall issue written or verbal warning to the juvenile with an unsatisfactory condition and, in cases of continued non-compliance, issue a report of misconduct.
1. Examine compliance with applicable laws and regulations.
2. Identify potential problem areas prior to their becoming major problems.
3. Document any deficiencies existing and provide the Director with information on conditions requiring corrective action.
4. Include an evaluation of water:
   a. Water supply testing to ensure compliance with jurisdictional laws and regulations. In the absence of local law, the Federal Safe Drinking Water Act as published in the Federal Register on December 24, 1973, shall serve as a standard.
   b. Solid waste disposal practices.
   c. Sewage disposal.
   d. Pest control practices.
**SANITATION AND HYGIENE**

**Pest Control**

1. Medical section.
2. Food service section.
3. Housing section.
4. Admissions section.
5. Canteen.

Control programs are conducted on a monthly basis in the remainder of the facility.

**Pest Reporting:** Staff are required to report any observation of insects, rodents or vermin within the facility. The Assistant Director for Management Services will implement appropriate corrective action.

**Inspection Reports:**

1. Inspection of the pest control and waste disposal programs shall be conducted weekly by the Assistant Director for Management Services and a report will be forwarded to the Director.
2. Frequent inspection of living areas shall be made by the Shift Supervisors to aid in the control of body pests. Immediate extermination measures shall be taken when body pest infestation occurs, including spraying or fumigation of bedding, clothing, equipment, and all areas of the building supportive to the existence and reproduction of the pests.

**Bathing and Hair Care Facilities for Juveniles**

**POLICY:** All juveniles must be provided with adequate bathroom and hair care facilities and the articles necessary to maintain acceptable standards of personal hygiene.

**DEFINITIONS:** None.

**PROCEDURES:**

A. The Director shall ensure that each housing section in the facility provides bathing facilities for juveniles that comply with the following minimum requirements:

1. One toilet and sink shall be available for every five juveniles and will be located within 75 feet of the rooms of juveniles expected to use them.
2. Each housing section will have one shower unit for every five juveniles and are available for use seven days a week.
3. Toilet fixtures and showers of a sanitary design and easily cleanable. These are to be kept clean and free of odors.
4. Each room in which a juvenile may be confined for any part of a day shall have a working toilet, above floor level, capable of being flushed from the interior of the room, and a sink with hot and cold running water.
5. Each section which requires especially sanitary conditions shall have shower facilities. These sections include:
   a. Food service.
   b. Medical section.
B. **Shower Safety**: The Director shall ensure that all shower units are designed to conform with the following minimum conditions:

1. Thermostatic temperature controls which will not allow shower water temperature to be above 110 degrees Fahrenheit or 43 degrees Celsius.
2. Non-skid flooring.
3. Hand rails.

C. **Barber Facilities**: Hair care services are available for all juveniles.

D. **Shaving**: All shaving shall be done in the presence of a juvenile careworker, who will be responsible for the issuing of shaving cream and injector razor from which the blade cannot be removed. Each juvenile's razor shall be individually marked and kept in a locked cabinet and shall be issued upon request.
CHAPTER 14
MEDICAL AND HEALTH CARE SERVICES

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8248 through 2-8254, 2-8256 through 2-8266, 2-8268 through 2-8291 National Advisory Committee Standards 4.217, 4.2171, 4.263, 4.410, 4.62

The reader adapting these samples for local use is cautioned to consult with the medical and legal staff to ensure compliance with new, revised or unusual regulations. In this chapter one of many possible management methods for health care services for the facility is illustrated.

Users should select the level of programing and the style of management most responsive to their conditions.

The delivery of medical and health care is expensive. However, compensatory costs for employees and juveniles injured, disabled or killed far exceed the cost of an adequate health care program.

POLICY: Provisions shall be made for short term medical, dental and mental health care services under the control of a health authority. When this authority is not a physician, final medical judgments will rest with a physician licensed in the state.

DEFINITIONS: As used in this document, the following definitions shall apply:

Allied Health Personnel: Professional staff who provide services to patients usually ordered by a physician or dentist. Typically, dental hygienists, registered nurses, occupational therapists, medical librarians and similar professional groups are considered allied health personnel.

PROCEDURES:

A. Medical information for each juvenile will be obtained by the Shift Supervisor at admission or as soon after admission as possible and shall include:

1. Any medications the juvenile is taking.
2. Any chronic health problems such as allergies, seizures, diabetes, hearing or sight loss, heart condition, etc.
3. Medical consent form signed by a person legally authorized to give consent.
4. This information will be included in the juvenile's medical record.

B. After admission a record of each visit to a physician or dentist and any recommended treatment will be kept and will include any medication; dosages, times given, and the name of the staff member administering the medication.
C. Arrangements shall be made with health care specialists in advance of need.

D. The Director shall have a written agreement with physicians, hospitals and/or health care clinics that 24-hour, seven day per week medical coverage will be provided.

E. All staff members shall be familiar with the procedures to be followed in medical emergencies.

F. Medical staff shall be familiar with procedures for:
   1. Obtaining medical consent.
   2. Health appraisal data collecting.
   3. Obtaining non-emergency medical services.
   4. Obtaining dental services.
   5. Emergency medical and dental services.
   6. Deciding the degree of emergency in an illness or injury.
   9. Notifying parent or legal guardian in case of serious illness, injury or death.
   12. Screening, referral and care of mentally ill and retarded juveniles.
   13. Informing staff of special medical problems.
   14. Implementing the special medical program.
   15. Immunizing.
   17. Detoxifying procedures.
   18. Issuing pharmaceuticals.

G. The specific duties of qualified medical staff are governed by written job descriptions approved by the responsible physician and the Director. Copies of appropriate state and federal licensure, verifying current credentials will be filed in the individual staff member's personnel folder. Medical, dental and psychiatric matters involving medical judgment will be performed by a licensed M.D. or, within applicable laws and regulations, under his/her direction.

H. The Medical Staff will comply with current laws, rules and regulations regarding immunization of juveniles.

I. The Medical Staff will comply with current laws, rules, and regulations about acquiring, storing, and administering medications.

J. Medical Administrative Reports: Health care reports shall be forwarded by the Medical Staff and Director as follows:
   1. Reports shall be prepared and forwarded to the parent agency quarterly, statistical summaries, annually.
   2. Quarterly reports shall be prepared as follows:
      a. The report shall consist of a narrative divided into three main sections:
         (1) Achievements.
         (2) Problem areas.
         (3) Future goals.
      b. The "Achievements" section shall focus on any new or completed projects, policies, procedures, staff, equipment and services that have been accomplished during the past three months.
      c. The "Problem Areas" section shall focus on areas currently under revision or in need of improvement, or on specific needs of the section. This could include the need for additional staff, specific supplies or services and revised procedures.
      d. The "Future Goals" section shall focus on areas requiring immediate planning for improvement. Examples of such goals are AMA or ACA accreditation, additional training for staff or additional dental services, etc.
The annual statistical summary report shall meet the following criteria:

a. The Medical Staff shall compile the statistics required to complete the annual statistical summary. Separate logs shall be maintained to record such data, regularly reviewed and updated.

b. The specific items included in the report shall be determined by the Medical Staff. However, at a minimum, the following information shall be gathered and compiled:

1. Number of juveniles receiving complete health appraisals by medical staff.
2. Number of laboratory referrals.
3. Number of positive results of TB tests and other communicable diseases.
4. Number of hospital transfers specifying the hospitals.
5. Number of consultation referrals specifying the hospitals or clinics.
6. Number of ambulance services needed.
7. Number of referrals to facility consultants, e.g., psychiatrist, dentist.
8. Number of medical and dental prostheses needed.
9. Number of transfers to the facility.

I. POLICY: All juveniles are provided health care services appropriate to meet their medical needs. The facility has arrangements with outside local hospitals to provide services not available in the facility's medical section. Facility health care space, equipment and supplies shall be adequate to meet the juveniles' needs.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Emergency Care: Care for an acute illness or unexpected health care need that cannot be deferred until the next scheduled sick call. Emergency care shall be provided by the Medical Staff, physician, local ambulance service and/or outside hospital emergency room and specific written procedures will be followed.

B. Infirmary Care: In-patient bed care for illness or diagnosis which does not require admission to a licensed hospital and is provided through the facility medical section.

C. Outside Hospital: Any hospital or clinic located outside the perimeter of the facility.

III. PROCEDURES:

A. A training program is established by the facility's health authority in cooperation with the Director and juvenile care workers and other staff are trained to respond to health-related situations within four minutes. Training includes:

1. Recognition of signs and symptoms, and knowledge of action required in emergency situations.
2. Administration of first aid and cardiopulmonary resuscitation.
3. Methods of obtaining assistance.
Chapter Subject  | Policy #  | Page
---|---|---
MEDICAL AND HEALTH CARE SERVICES  | Hospital Facilities and Equipment  | 14.2  | 2  of  7

4. Signs and symptoms of mental illness, retardation and chemical dependency.
5. Procedures for juvenile transfers to appropriate medical facilities or health care providers.

B. The facility provides 24-hour emergency medical and dental care availability as outlined in a written plan which includes:
1. Arrangements for emergency transportation.
2. Arrangements for the use of hospital emergency rooms or other appropriate health facilities.
3. Arrangements for emergency on-call physician and dental services when a health facility is not located in a nearby community.

C. Examination Room: The facility maintains an adequately equipped examination room used for treatment, ensuring privacy and dignity for both juveniles and Medical Staff.
1. An examination room, at the minimum, shall be equipped with:
   a. Thermometer.
   b. Blood pressure cuff and sphygmomanometer.
   c. Stethoscope.
   d. Ophthalmoscope.
   e. Otoscope.
   f. Percussion hammer.
   g. Scale.
   h. Examination table.
   i. Goose neck light.
   j. Refrigerator with lock.
   k. Medical record files with locks.

2. An examination room should have a sink equipped with hot and cold running water with "no-hand" operating controls.

D. Routine Transfers: All transfers to the local hospital shall be made only with authorization of the Medical Staff or the physician on call. No transfers shall be initiated without prior doctor-to-doctor communication in accordance with the guidelines set forth below:
1. Whenever possible, non-emergency in-patient care and specialty consultations shall be arranged at least one week in advance.
2. Once each week, the Medical Staff shall provide the Assistant Director for Management Services and the Assistant Director for Program Operations with a list of scheduled hospital or clinical trips for the following week. The Assistant Director for Management Services will arrange for the transport and the Assistant Director for Program Operations will arrange for the security coverage. When ambulance transport is required, the Medical Staff shall make the necessary arrangements with a local ambulance service and then notify the Assistant Director for Program Operations of the need for staff to accompany the juvenile.
3. Referral to a hospital other than the local hospital shall be made at the discretion of the Medical Staff or facility physician.
4. When admission to a hospital is necessary the Medical Staff must monitor the patient's condition and arrange for the return of the juvenile to the facility, or transfer to another hospital as soon as feasible.

E. Emergency Medical Transfers: All emergency transfers shall be accomplished, at the discretion of the Medical Staff, using the procedures outlined in "Routine Transfers."

F. Disaster Plans: The Medical Staff shall prepare a disaster plan and natural disasters, including fire, riot and other mass-casualty situations. The plan shall include provisions for:
1. Emergency evacuation of juveniles.
2. Triage of large numbers of casualties.
3. Use of medical vehicles.
4. Use of local hospital services.
5. Communication procedures for medical staff.


G. Hunger Strike: In all cases the following shall be implemented:

1. The juvenile's parents/guardians shall be contacted.

2. The juvenile shall be offered a medical evaluation by the Medical Staff. The juvenile's acceptance or refusal shall be documented, signed and witnessed.

3. If the juvenile refuses the medical examination, he/she shall be offered vital sign monitoring by the Medical Staff on a daily basis and each encounter must be documented and witnessed.

4. Medical Staff shall view the juvenile at least three times daily for assessment of his physical condition.

5. All meals shall continue to be provided.

H. Use of Restraints: Medical staff shall use restraints only as a last resort for juveniles who present a danger to self and others, e.g., assaultive behavior towards Medical Staff or other juveniles, suicidal behavior, attempts to remove tubes or dressings necessary for their care, self-inflicted skin irritation. Under no circumstances shall restraints be used as a disciplinary measure or as a convenience for the Medical Staff.

1. The use of restraints in the facility medical section shall be approved only by a physician or psychiatrist. Other medical staff may apply restraints after receiving verbal approval from the physician or psychiatrist on call. When verbal approval is obtained, the authorizing physician or psychiatrist shall document the order in writing within 24-hours. All prescriptions for restraints shall be signed by the authorizing physician or psychiatrist and entered into the appropriate section of the medical record.

2. The prescription for such restraint measures shall include the purpose of and clinical justification for the type of restraint used and the length of time for which restraint measures are to be imposed, not to exceed 24-hours. If further restraint is required beyond the maximum 24-hours, a new prescription must be issued by a physician based upon observation of the juvenile's behavior and clinical condition. The determination for restraint removal shall be made by the physician or psychiatrist or, by a member of the Medical Staff following consultation with the physician or psychiatrist.
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICAL AND HEALTH CARE SERVICES</td>
<td>Hospital Facilities and Equipment</td>
<td>14.2 Page 6 of 7</td>
</tr>
</tbody>
</table>

(1) The responsible physician shall arrange for a consultation with parents if possible.

(2) Both verbal and written contact shall be made to arrange an appointment for the juvenile.

(3) Appropriate medical records shall be forwarded, as needed, with prior written consent obtained from the juvenile and parents.

d. The physician and the Medical Staff shall record all pertinent data on the juvenile's medical record.

e. If the physician determines that the medical prosthesis is not required, this decision shall be so noted in the juvenile's medical record. In this case the juvenile or his/her parents may choose to pay for the prosthesis himself.

J. Location and Content of First Aid Kits: The responsible physician will examine, approve and make periodic inspections of the contents and locations of first aid kits.

1. First aid kits shall be placed in the following areas:
   a. Each housing section.
   b. The control center in each section.

2. At a minimum, each first aid kit shall contain:
   a. Rolled gauze.
   b. Sponges.
   c. Triangle bandage.
   d. Adhesive bandages.
   e. Band-aids.
   f. Instruction pamphlets for first aid.
   g. Salves and medication approved by the Medical Staff.
   h. Antiseptic lotion.
   i. First aid book.
   j. Note paper and pencil.
   k. Flashlight.

l. Blunt end scissors, safety pins and tweezers.

m. Ammonia inhalant.

3. The contents, location and use of first aid kits shall be reviewed at least annually by the Medical Staff and an evaluative report shall be forwarded to the Director.

K. Dispensation of Medications: The person administering medications shall have training from the responsible physician and the official responsible for the facility is accountable for administering medications according to orders and records. The administration of medications shall be done in a manner and on a form approved by the responsible physician. This does not include psychiatric medication or medicines given by injection. Such medications should only be administered by trained medical personnel of at least the level of registered nurse. Staff should also be trained to administer "over the counter" items such as aspirin, personal hygiene items, cough drops, etc.

L. Daily Living Program:

1. The juvenile shall be taught, by the juvenile careworker, as a part of his/her daily living the importance of developing sound habits and personal hygiene. Personal grooming as the juvenile prepares for school, housekeeping and cleaning his/her own room, clean clothes, and daily showers shall be stressed as a part of the routine.

2. All staff shall aid in the hygiene process by modeling good personal hygiene habits and by operating a clean facility.

M. Education and Training: Health modules dealing with a broad range of issues such as birth control, smoking, stress, personal hygiene, dental hygiene, etc. shall be an integral part of the curriculum.
I. POLICY: Each juvenile is provided medical care from the time of admission and throughout the period of detention. This continuous care includes medical screening of clinical history for each admission, complete physical examination of each juvenile (except intra-system transferees) following admission, regular physical examinations and medical screens for all juveniles received in transfer from other parent agency facilities.

II. DEFINITIONS: As used in this document, the following definitions shall apply:
A. Physical Examination: A thorough evaluation of a juvenile's current physical condition and medical history conducted by a licensed physician.
B. Medical Screening: An examination of a juvenile conducted by a member of the Medical Staff to identify obvious ailments or injuries and reduce aggravation of any existing condition.

III. PROCEDURES:
A. New Admissions: Physical examinations shall be completed within 24 hours for each juvenile newly admitted to the facility or transferred from another.
   1. Receiving Screening: Prior to placement in the general population, each juvenile shall be screened by a member of the Medical Staff. Findings of the screening shall be recorded on the form approved by the Medical Staff. The receiving screening shall include at least:
      a. Inquiry into current illness and health problems including:
         (1) Venereal diseases.
         (2) Medications taken.
         (3) Special health requirements.
         (4) Use of alcohol and other drugs including types of drugs used, make, amounts, frequency, data of last use and history of problems occurring from withdrawal.
         (5) Other health problems designated by the Medical Staff.
      b. Observation of general behavior including:
         (1) State of consciousness.
         (2) Mental status.
         (3) Appearance.
         (4) Tremor or sweating.
         (5) Body deformities.
         (6) Ease of movement.
         (7) Condition of skin including; trauma, bruises, lesions, jaundice, rashes, infestations, needle marks or other signs of drug abuse.
      d. Recommendations for disposition to general population with referral to the appropriate physician and immediate referral to Medical Staff on an emergency basis.
   2. Delousing: Each receiving screening shall include an examination for lice.
   3. Detoxification: When screening and examination result in a diagnosis of chemical dependency, requirements for that detoxification from alcohol, opioids, stimulants or sedative hypnotic drugs is determined by the Medical Staff or designated physician.
4. Screening for Communicable Disease: Examinations shall be performed by the Medical Staff for all symptomatic cases. Facility staff and juveniles with symptomatic signs will be tested for:
   a. Tuberculosis.
   b. Ova and parasites.
   c. Infectious hepatitis.
   d. Venereal disease.
   e. A.I.D.S. (Acquired Immune Deficiency Syndrome).

Sample Policies and Procedures

Chapter: MEDICAL AND HEALTH CARE SERVICES
Subject: Physical Examinations
Policy Number: 14.3
Page 3 of 3

Chapter: JUVENILE DETENTION FACILITIES
Subject: Mental Health Care Program
Policy Number: 14.4
Pages 4

I. POLICY: All juveniles are provided access to a comprehensive mental health program designed to examine, diagnose and provide access to treatment.

II. DEFINITIONS: As used in this document, the following definitions shall apply:
   A. Mental Hospital: The facility used for juveniles diagnosed as severely psychotic by a psychiatrist. Admissions may be authorized only by the Director in consultation with the Medical Staff.
   B. Parenteral Administration: Not intestinal; administered other than through the digestive tract, i.e., intravenous, intramuscular.

III. PROCEDURES:
   A. Screening Services: Screening, care and/or referral for care of juveniles in need of mental health or mental retardation services will be provided. The specific referral sources shall be designated in advance by the facility physician.
   B. Mental Health Transfers: Any juvenile whose condition is beyond the range of services available in this facility shall be transferred to a specially designed facility which may more effectively meet his/her needs.
   C. Mental Health Services: Mental health services shall be provided by qualified mental health professionals who meet educational and/or licensure/certification criteria specified by their professional disciplines and the following services shall be made available by or through the Medical Staff:
      1. Review of all admission screenings and mental health appraisals.
2. Collection and review of data from staff observations.

3. Evaluation of individual interviews and tests to assess intellect and coping capabilities.

4. Treatment as indicated either by the use of in-house staff, consultant contractors or transfer to another facility equipped to provide the required services.

D. Psychiatric Emergencies: Psychiatric evaluations shall be performed on juveniles as approved by the Medical Staff or the Director when a juvenile exhibits behavior which may be suicidal, homicidal or otherwise extremely inappropriate.

1. During regular business hours:
   a. Juveniles exhibiting suicidal behavior shall be observed under suicide watch by at least one trained juvenile careworker. This watch shall be on a continuous basis until evaluation can be performed by a psychiatrist. Juveniles exhibiting other forms of psychiatric or homicidal behavior shall be referred to the facility psychiatrist for evaluation and advice.

   b. A psychiatric evaluation shall be performed within 12 hours. Should on-site evaluation not be possible, an emergency transfer to an appropriate facility shall be initiated.

2. If a psychiatric emergency arises after regular business hours, weekends or holidays which is likely to require transfer to an appropriate medical facility for evaluation and/or treatment:
   a. The Director shall be notified of the emergency and may approve a transfer. If the juvenile is approved for transfer, the facility shall supply 24-hour a day custody coverage until the juvenile is returned or transferred to another facility.

   b. The Medical Staff shall prepare a written report to be transported with the juvenile. The report shall include:
      1. The date, time and nature of the emergency.

   c. The Medical Staff of the contract facility, or his/her designee, shall be notified of the juvenile's transfer and specific reasons for it.

3. Some suggestions for staff handling of a disturbed juvenile, particularly one who is potentially violent, are:
   a. Take time to analyze the situation and give the juvenile time to regain his composure.
   b. Reassure the juvenile of a desire to help.
   c. Do not abuse or threaten the juvenile in any way.
   d. Remain calm and kind, though firm.
   e. Do not lie or attempt to deceive the juvenile.

4. Serious suicide attempts shall be treated with first aid by the Medical Staff or health-trained juvenile careworkers.

5. Potentially harmful items such as razor blades, belts, matches, pens, pencils, mirrors, glasses and any sharp items shall be removed by juvenile careworkers or Shift Supervisor from the juvenile and the area in which he/she is placed. Any such action shall be recorded in the log book.

6. Written reports of any suicide attempts shall be forwarded to the Assistant Director for Program Operations with copies to the Shift Supervisor and the Director.

E. Recognition of Possible Mental Illness:

1. Systematized delusions of persecutions and/or grandeur with the rest of the personality remaining relatively intact.

2. Intense anxiety or exaggerated levels of fear or panic in the absence of any real or present danger. An example would be a particular phobia (irrational and persistent fear) of some thing or situation, e.g., germs, crowds, heights.
3. Shallow, inappropriate emotional responses, extreme silliness, bizarre delusions, unpredictable hollow giggling.

4. Hallucinations such as hearing, seeing, tasting or smelling something or someone that is not present at the moment.

5. Extreme depression, withdrawal, neglect of hygiene and appearance, slow down, refusal to eat or leave room for long periods of time, periods of uncontrollable crying.

6. Exaggerated mood swings, from elation and over-activity, to depression and under-activity, or a combination or alternation of these.

F. Recognition of Potential Suicide Cases:

1. Severe loss of interest in activities or relationships which juvenile had previously enjoyed or engaged.

2. Depressed state, indicated by withdrawal, periods of crying, insomnia, lethargy (sluggishness, indifference to surroundings).

3. Extreme restlessness, pacing up and down in a robot like manner.

4. Past history of suicide attempts.

5. Active discussion of suicide plans.

6. Sudden drastic change in eating or sleeping habits.

7. Giving valued possessions away.
I. POLICY: Juveniles' medical complaints are monitored and responded to daily by qualified medical staff and referred to a physician when required.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Sick Call: An organized procedure for determining and treating juvenile health problems.

III. PROCEDURES:

A. Facility Staff Assistance: A juvenile careworker shall assist the Medical Staff with control and scheduling of sick call.

B. Sick Call: For non-emergency medical service, conducted by a physician and/or other qualified medical staff, is available to each juvenile at least once a week. Juveniles shall be permitted to register a health care complaint to be scheduled for an appointment with the Medical Staff at any time.

C. Sick Call Log: Daily sick call records listing all juveniles attending sick call, their complaints and the disposition of their cases, shall be maintained by the Medical Staff conducting the daily sick call and/or the assisting juvenile careworkers.

D. Emergency Sick Call: Daily 24-hour coverage is available at the facility. Any staff member who believes a juvenile is in need of emergency care shall contact a Medical Staff person, who will evaluate the complaint and examine the juvenile unless adequate medical information suggests more appropriate action.

E. Restricted Juveniles: Sick call for juveniles restricted or isolated for disciplinary reasons shall be conducted daily following the procedures required by the Medical Staff. Staff persons conducting the restricted sick call shall record and indicate dispositions for all complaints fully.

F. Review: Sick call reviews shall be conducted by a physician on a regular basis. Review shall include:

1. An examination of the log book for sick call.
2. A review of referrals made by the Medical Staff.
3. Oral discussion with the Medical Staff member who conducted the sick call.
I. POLICY: A written individual medical treatment plan that includes directions for medical and non-medical personnel outlining their roles in the care and supervision of these patients shall be developed by the appropriate physician, dentist or other qualified health practitioner for each juvenile who has special health care needs. The plan shall include a statement of short term and long term medical goals, specific sources of therapy and provisions for referral to supportive and/or rehabilitative services when necessary.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Plan Development: The Medical Staff or the attending physician shall develop a written treatment plan for each juvenile who requires a special health care program. Identification of these patients shall be made through staff referral, sick call, physical examination or juvenile self referral.

B. Convalescent Care: Medical Staff determine the proper medical placement for patients requiring close observation during post-operative recovery or recovery from other illness or injury.

C. Detoxification and Alcohol or Chemical Dependency: Whenever a juvenile is diagnosed as chemically dependent by the Medical Staff, the responsible physician shall develop an individualized treatment program.

1. When detoxification is required, the physician shall consult with Medical Staff for possible placement in an appropriate addiction center.

2. The Medical Staff shall inform the appropriate juvenile careworker and Shift Supervisors of the diagnosis of chemical dependency. This staff shall be responsible for arranging referrals to community resources, when necessary.

3. Addiction programs are available to enable each juvenile to participate in regularly scheduled sessions. The Medical Staff shall refer all patients to the appropriate addiction program for alcohol and drug abuse.

D. Prenatal and Postnatal Care: A treatment plan that includes any special care; regular medical check-ups, special dietary or recreational needs, will be developed when a pregnancy has been diagnosed.

E. Health Education: Programs should be provided through the Medical Staff, teachers and juvenile careworkers for all juveniles on the importance of preventive medicine in developing sound personal health care. These educational programs shall include:

1. Initial admission-orientation sessions.

2. Regular distribution of instructional health materials through internal publications.

3. Educational programming for juveniles including:
   a. First aid procedures.
   b. Medical emergency procedures.
   c. Personal hygiene.
   d. Self care for chronic illnesses.
   e. Effects of smoking, drug and alcohol abuse.
   f. Communicable disease control including tuberculosis and venereal disease.
   g. Dental hygiene.
   h. Dangers of self medication.
   i. Information about the services and facilities available for specific health care problems.

F. Disabled Juveniles: All disabled and infirmed juveniles shall be housed in facilities appropriate to their needs. Every effort shall be made to allow disabled juveniles to participate in regular programing. Any juvenile who is unable to participate in regular programing shall be evaluated for transfer to a more appropriate facility.
G. Refusal of Admission or Transfer Referral:

1. The Director reserves the right to refuse, refer or transfer a juvenile who because of mental illness, developmental disability, physical condition or need of detoxification services cannot perform adequately in the facility, or who for some other reason is in need of more sophisticated services than are available at the facility.

2. Such a determination shall be made after consultation with a physician and with the approval of the Director. Notification to the court of placement shall be immediate, if possible, and the rationale for the refusal, referral or transfer shall be written by the Medical Staff and forwarded to the court immediately following the action by the facility.

I. POLICY: This policy prohibits the use of juveniles for medical, pharmaceutical or cosmetic experiments but does not preclude individual treatment of a juvenile based on his/her need for a specific medical procedure that is not generally available.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Medical Experimentation: All biological experimentation involving juvenile subjects.

B. Drug Experimentation: All research involving the testing of drug effectiveness and side effects using juvenile subjects.

III. PROCEDURES: Any staff member who receives a request for or observes an action which involves, or appears to involve, medical or drug experimentation using juvenile subjects immediately shall report such contact and/or observations to his/her supervisor in writing and forward copies of the report both to the Medical Staff and the Director.

A. The Medical Staff shall permit statistical and management studies involving the study of patient use patterns and management.

B. Psychological and psychiatric research may be conducted only as allowed by the regulations governing social science research.
I. POLICY: All informed consent standards in the jurisdiction are observed and documented for medical care. The informed consent of parent, guardian or legal custodian applies when required by law. When health care is rendered against the juvenile’s will, it must be in accord with state and federal laws and regulations. Any juvenile desiring medical treatment is accorded the same right to bodily integrity available from a community medical facility. 

II. DEFINITIONS: As used in this document, the following definition shall apply:

Informed Consent: Voluntary agreement to a treatment, examination or procedure by the juvenile after the juvenile is informed of the nature, consequences, risks and alternatives of the proposed treatment, examination or procedure.

III. PROCEDURES:

A. Explanation of Risk: Prior to initiating a medical procedure, such as invasion of a body cavity, or surgery considered dangerous and/or involving a risk to the individual’s life or health, the physician or dentist shall explain the procedure, alternatives and risks to the juvenile.

B. Written Consent: The juvenile shall sign a written consent form authorizing the specific treatment, which will be included in the juvenile’s medical record.

C. Refusal of Treatment: If a juvenile chooses to refuse treatment recommended as necessary by the Medical Staff, a form stating refusal to submit to treatment shall be signed. A Medical Staff member shall witness the form which will be filed in the juvenile’s medical record. Refusal violates the Public Health and State Licensing requirements plus the safety of other juveniles.

Effective Date

Approved By:
**B. Documentation of Incident:** Records and reports required for all deaths occurring within the facility or on facility property shall meet the following requirements.

1. All staff who possess information about circumstances surrounding the death shall complete a report of incident form.
   a. Any staff member who was on the scene at the time of an incident leading to or possibly related to the death.
   b. Any staff member discovering the body.
   c. Any Medical Staff who attempted life-saving emergency treatment.
   d. Any medical staff on the scene at the time during which other staff were undertaking such life-saving measures.

2. All incident reports shall be dated and signed by the documentor and completed as soon as possible following the incident or discovery of the body. Report shall include role, names of other persons on the scene, observations and the timing of events.

3. Where emergency life-saving measures are attempted by Medical Staff, a designated member of the Medical Staff on the scene shall take notes of the procedures used. Containers of any medications used to revive the juvenile as well as specific pieces of equipment used for such life-saving measures must be saved.

**C. Notification of Next of Kin:** This shall be accomplished as soon as possible after the physician determines that the patient is either deceased or is in imminent danger of death due to serious illness or injury. Notifying next of kin shall be conducted in the following manner:

1. Person(s) previously designated by the juvenile shall be informed.
2. Notification shall be by a person specially trained in crisis intervention and counseling, usually the Chaplain or a member of the Medical Staff.
3. The notifier should not include conclusions or opinions based other than on proven fact provided by the attending physician and/or investigating officials.

4. Telephone notification shall be followed by a telegram delivered to the next of kin within 24-hours from time of death or critically ill list placement.

5. In death notifications, the telegram wording shall request permission for autopsy and instructions for the disposition of the body.

6. The administrative office shall forward a letter to next of kin within one week of juvenile's death or placement upon the critically ill list. This letter shall inform the relative(s) of the nature of the crisis and express appropriate concern for the situation. This letter should discuss disposition of personal assets and/or property, as well as facility policy about medical bills and/or funeral expenses.

**D. Child Abuse Notification:** Any person who has reasonable cause to suspect ‘child abuse or neglect’ shall immediately inform the Director who will take appropriate action, which includes:

1. Having the juvenile examined by the facility physician who will initiate appropriate care.
2. Notifying parents/guardians.
3. Adhering to local and state laws regarding the reporting and actions that shall be taken.
**I. POLICY:** State and federal regulations relating to the dispensing, distributing and administering of medications shall be distributed or administered only by qualified orders.

**II. DEFINITIONS:** As used in this document, the following definitions shall apply:

A. Controlled Substances: Any medication requiring a written prescription listing the prescribing physician's or dentist's Drug Enforcement Administration registration number.

B. Formulary: A list of medicines with their formulas and directions for compounding them.

C. Administering Medication: Providing a single dose of medication, or other means upon the direction of a medical doctor or dentists.

D. Direct Order: A written or verbal order signed by the responsible physician or other authorized personnel to instruct medical staff to carry out a specific treatment or medical procedure on a given patient.

E. Dispensing Medication: The issuance based on a medical or more single doses of medication by a registered pharmacist or dentist acting for his or her own or another physician or dentist acting for his or her own patient in a suitable container, properly labeled in compliance with law, for subsequent administration.

F. Drug: A medication of any chemical compound or narcotic (listed in the United States Pharmacopoeia or National Formulary) that may be administered to humans as an aid in the diagnosis, treatment, relief of pain or suffering; or to control or improve any physiologic or pathologic condition.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICAL AND HEALTH CARE SERVICES</td>
<td>Use of Pharmaceutical Products</td>
<td>14.11</td>
</tr>
<tr>
<td>Chapter</td>
<td>Subject</td>
<td>Policy #</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
<td>----------</td>
</tr>
<tr>
<td>MEDICAL AND HEALTH CARE SERVICES</td>
<td>Use of Pharmaceutical Products</td>
<td>14.11</td>
</tr>
</tbody>
</table>

7. All prescriptions shall be signed by a qualified health professional licensed and authorized by the appropriate jurisdiction.

C. Medication Distribution or Administration:

1. No medication is to be administered to any juvenile except:
   a. On an individual (case-by-case) basis.
   b. By single dosage (exception: certain drugs that are allowed to be carried (Nitroglycerine, Cafegot, Ergostat, Inhalants, eye and ear drops).
   c. At prescribed times.
   d. By a designated staff member (physician, licensed nursing staff, or by other staff who have been trained in medication administration).
   e. As authorized by a medical doctor or dentist.

2. The administration of all medications shall be recorded on a form approved by the Medical Staff and shall become part of the juvenile's medical record. Each dose shall be documented with the date and time of administration and shall be signed or initialed by the staff member administering it.

3. Should a juvenile refuse a prescribed medication, that juvenile shall be required to sign a refusal form approved by the Medical Staff. If the juvenile refuses to sign the form, the form shall be witnessed by a staff person other than the Medical Staff person responsible for administering the medication.

4. Any medication prepared for administration later in the day or by another staff member is to be placed in a container identified with at least:
   a. The juvenile's name, number, and location.
   b. The time and date the medication is to be administered.
   c. All special instructions.
   d. The name of the person who prepared the medication.

D. Security and Storage of Controlled Substances:

1. Controlled substances, except for narcotics, methadone and insulin, shall be stored by the Medical Staff in locked containers which are securely fastened to a major structural support, i.e., steel beam, concrete floor.

2. All narcotics (methadone and insulin) shall be stored in a safe located in an area inaccessible to juveniles or unauthorized staff. Access shall be limited to pharmacy staff and Medical Staff members as authorized by the Director.

3. Insulin, pre-filled insulin syringes and other medications requiring refrigeration shall be stored by the Medical Staff in a locked refrigerator.

4. Needles, syringes and over-the-counter drugs shall be stored by the Medical Staff in locked metal containers.

5. Over-the-counter medications shall be stored in limited supply in the examination rooms or other areas as authorized in writing by the Medical Staff and the Director.

6. Each container for dispensed medication is to be labeled by the Medical Staff with at least:
   a. Name and number of the juvenile.
   b. Name of the person who filled and dispensed the prescription.
   c. Name of the medication and directions for its use.
   d. Date of filling and dispensing.
   e. Name and address of the pharmacy or doctor.
   f. Amount dispensed.

7. All controlled dangerous substance stock on hand shall be verified at least once a year by physical inventory by the licensee and the person responsible for its security and recordkeeping. Working stock shall be verified at least monthly or sooner, preferably at each work shift change. Any theft or unexplained loss of a controlled dangerous substance shall be reported immediately to the State Bureau of Narcotics and Dangerous Drugs of the State Department of Health and Human Resources as well as the Director and the parent agency.
E. Inventory: Complete records of controlled substances and related equipment shall be maintained by Medical Staff as follows:

1. Narcotics, prescription drugs, needles and syringes shall be inventoried weekly by the Medical Staff.
2. A report of inventory shall be submitted to the Director.
3. All prescription drugs, needles and syringes shall be recorded in the medication log, which will serve as a perpetual inventory.
4. At least weekly, the Medical Staff shall review the medication logs citing medications received and used.
5. All inventories and review of inventories, shall be documented in writing in the medication log with the staff member's signature and date.
I. POLICY: A complete health record shall be kept for each juvenile to accurately document all health care services provided throughout the period of detention. These records, in accordance with parent agency rules relating to security and privacy, shall be retained after a juvenile's release for a period of time sufficient to allow treatment continuity.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Clinical Record: Record having to do with medical study or practice based on active treatment and observation of patient.

B. Inactive Record: Record of a juvenile who has been released from the facility.

III. PROCEDURES:

A. Medical Records include:

1. The completed receiving screening form.
2. Health appraisal data forms including history of immunizations.
3. All findings, diagnoses, treatments, dispositions.
4. Prescribed medications and their administration.
5. Laboratory, x-ray and diagnostic studies.
6. Signature and title of documentor.
7. Consent and refusal forms.
8. Release of information forms.
9. Place, date and time of health encounters.
10. Health service reports.

11. Medical treatment plan.
12. Progress reports and discharge summary.

B. Collection and Recording of Health Data: Only qualified facility Medical Staff shall collect and record health history, vital signs and other health appraisal data onto the approved medical record forms.

C. Storage of Records: The Medical Staff office shall maintain a system for identification and filing ensuring rapid access to each patient's medical record. The facility provides adequate space and equipment for the storage of all medical records in a manner safe from fire and water damage and secure from unauthorized use.

1. The medical records are the responsibility of the Medical Staff which shall control access to the medical reports.
2. Medical records shall be kept in separate locked cabinets located in the medical records section.
3. All inactive medical records which shall be separated from the active records shall be accessible only to those persons approved by the Director.
4. Inactive files shall be forwarded to the parent agency storage area after the juvenile's release.

D. Confidentiality of Medical Information:

1. The active health record shall be maintained separately from the detention record.
2. Medical records shall be confidential and secure, and shall be safeguarded against loss, defacement, tampering and use by unauthorized persons.
3. Authorized staff shall not discuss any information in medical records with anyone not directly involved in the therapeutic care, treatment, or monitoring of the quality of care.
4. An authorization from the Director is required for release of medical information to persons not otherwise authorized to receive this information.
5. A juvenile requesting his medical record may review it in the presence of Medical Staff.
E. Transfer of Health Records: Whenever a juvenile is transferred to another detention or health care facility, a summary of the medical record, prepared by Medical Staff, shall accompany the juvenile. Security staff shall notify the Medical Staff at least 24-hours prior to a routine transfer whenever feasible. Any portion of the medical record which reasonably cannot be copied at the time of transfer shall be forwarded to the receiving facility within 72 hours. The following information shall accompany all juveniles being transferred:

1. Medication needs during transit.
2. Special medical problems or needs, such as diabetes or epilepsy.
3. Psychiatric problems, especially suicidal tendencies.
4. Handicaps which may require special procedures during transportation.

---

| MEDICAL AND HEALTH CARE SERVICES | Medical Records | 14.12 | Page 3 of 3 |

---

### JUVENILE PHYSICAL FORM

Date:

| Physical Provided By Public Health Nurse, Physician Assistant or Medical Doctor. |
| Name: |
| Height | Weight | Temperature |
| BP(R) - | BP(L) - | AP - RP |
| HGB | UA |
| Time Test | Results |

Chief Complaint:

### General Appearance:

Skin

Hair & Nails

Head & Face | Neck

Eyes | Corrective Lenses | Last Eye Exam

Ears | Nose

Mouth & Pharynx

Chest & Back | Breasts

Lungs

Cardiovascular

GI & GU

Extremities | Neurological

---
Sample Juvenile Detention Facility

GENERAL MEDICAL INFORMATION:
Name(Last, First, M.I.) __________________________ D.O.B. __________ M_F
Address __________________________ Telephone __________________________
Parent or Guardian/Relationship __________________________ Address __________________________ Telephone __________________________

Family Physician __________________________ Date of Last Physical __________________________

Allergies __________________________ Special Diet __________________________

*Medication __________________________ Reason __________________________

Health Problems __________________________

Does juvenile complain of pain, illness, or abuse? __________________________

Family History: (if deceased state age and cause of death)
Father: Age ______ Illnesses __________________________
Mother: Age ______ Illnesses __________________________
Brothers: Age ______ Illnesses __________________________
Sisters: Age ______ Illnesses __________________________

Would anyone in the family benefit by a nurse coming to their home? __________________________

Family History: -- cont. (indicate relationships)
Diabetes __________________________ Seizures __________________________
Cancer __________________________ Allergies or Asthma __________________________
Heart Disease __________________________ Tuberculosis __________________________
Mental Illness __________________________ Other __________________________

Have you received all your immunizations? __________________________

*Side Effects of Medication: __________________________
AUTHORIZATION FOR EMERGENCY MEDICAL CARE

I, ________________________, hereby grant permission to ______________________ to take whatever measures are necessary to provide hospitalization and medical care, including surgery, in case of emergency, for _______________________.

This authorization is valid only in situations requiring emergency medical care as directed by a qualified physician, and after reasonable effort has been made to contact the parent, guardian or custodian in order to obtain consent to the specific medical procedures recommended by the physician.

This authorization is not be construed as covering non-emergency surgery or hospitalization for which my specific consent must first be obtained.

Signed ______________________

Signed ______________________

Date ______________________

Witness ______________________
## Sample Juvenile Detention Facility

### Medical Record Charges

<table>
<thead>
<tr>
<th>Item</th>
<th>Date</th>
<th>Description</th>
<th>Unit Cost</th>
<th>Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of Stay</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical Examination</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laboratory Tests</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Medical Authorization:**

**Billing Authorization:**

**Director:**
CHAPTER 15

JUVENILE RIGHTS

COMMENTARY

This chapter encompasses

American Correctional Association Standards 2-8292 through 2-8294, 2-8296 through 2-8309

National Advisory Committee Standards 3.191, 3.192, 4.41, 4.44, 4.45, 4.48, 4.81, 4.82

American Bar Association Standard 10.7.

These standards are not intended to convert detention centers into luxurious facilities but are designed to establish certain basic conditions which should be provided for all detained juveniles.

Topics presented here as juvenile rights are regularly the theme of litigation and grievance actions. All policies on juvenile rights should be carefully and thoroughly reviewed by any user who is establishing local related policy, to ensure compliance with local legislation and court rulings.
I. **POLICY:** All juveniles will be protected from discrimination based on race, national origin, color, creed, sex, physical handicap or political beliefs and will have equal access to programs and activities. They will be assured that seeking judicial relief will not be met with reprisal or penalty and will have uncensored, confidential contact by telephone, in writing, or in person with their legal representative.

**DEFINITIONS:** As used in this document, the following definitions shall apply:

A. **Legal Representative:** Assigned or retained attorney at law or paralegal who assists an assigned or retained attorney at law.

B. **Confidential Legal Visiting Areas:** Areas in which a juvenile may discuss legal matters privately with a legal representative or other legal authority, where a staff member may visually observe but neither listen to nor record the conversation.

II. **PROCEDURES:**

A. **Juveniles Without an Assigned or Privately Retained Attorney:**

1. Some juveniles (e.g., first time defendants or juveniles outside of the court's jurisdiction) may not have had the opportunity to be advised by legal counsel. The Shift Supervisor or Assistant Director for Program Operations may contact the court coordinator to check if there is an attorney of record for a particular juvenile.

2. The Shift Supervisor or juvenile careworkers may inform juveniles of legal resources available to them but at no time are they to engage in conversation which might in any way be construed as offering legal advice regarding the juvenile's case and under no circumstances should staff question juveniles regarding the alleged offense.

**I. POLICY:** All detained juveniles have certain rights and responsibilities that must be recognized. These are clearly defined and both juveniles and staff shall be familiar with them. Complaints of abridgment of the rights set forth shall be subject to the grievance process and juveniles who do not accept those responsibilities which would result in rule violation are subject to disciplinary process.

**A. Juvenile Rights:**

1. Juveniles have the right to be treated respectfully, impartially and fairly, and will be addressed by name in a dignified conversational form.

2. Juveniles have the right to be informed of the rules, procedures and schedules concerning the operation of the facility.

3. Juveniles have the right to not be subjected to corporal punishment, harassment, intimidation, threats, harm, assault, humiliation or interference with the normal bodily functions of eating, sleeping or bathroom functions by any other juvenile or staff person. They will be under the supervision and control of trained staff and/or trained volunteers only.

4. Juveniles have the right to not be discriminated against because of race, national origin, color, creed, sex or physical handicap and will have the same access to all services and programs.

5. Juveniles have the right to participate in religious services and religious counseling on a voluntary basis, subject only to the limitations necessary to maintain order and security. They will have access to clergy, spiritual advisors, publications and related services which allow them to adhere to their religious practices.
B. Communication by Phone with Legal Representative:

1. First Phone Call: Initial contact should be made during the screening process. The Shift Supervisor will place a call to the juvenile's legal representative or the public defenders office, upon request. If the juvenile is unable to make contact, the parents/guardian should be asked to assume responsibility for completing the call.

2. On-Going Calls:
   a. Limitations: Calls are usually limited to once a day to avoid unnecessary intrusion upon the legal representative and facility staff. However, if a juvenile indicates important information needs the prompt attention of his legal representative the call will be placed.
   b. During Regular Business Hours: Upon request the juvenile careworker shall contact an attorney by phone. If the attorney is not available a message will be left to return the call.
   c. Contact At Other Times: Juveniles will be permitted to phone their attorney at any time. If, however, an attorney has communicated to the staff that calls shall only be placed during specific time periods the staff will comply with this schedule.

C. Written Communication with Legal Representative:

1. A juvenile's written or dictated message will be mailed or distributed to the juvenile's legal representative by the Shift Supervisor or juvenile careworker.

2. Written messages will be unopened and uncensored. Dictated messages will not be censored, and will not be opened once the message has been completed for delivery.

3. Mail from the court or other legal authority will not be opened.

D. Visits/In-Person Communication with Legal Representative:

A juvenile's legal representative may visit at any time. If a juvenile requests a visit with their legal representative a juvenile careworker will see that the request is relayed.
16. Juveniles have the right to report any problems or complaints they have while in the facility without any fear of punishment.

17. Juveniles have the right to appeal any disciplinary measure taken against them for the violation of a facility rule and have the right to have a response to the appeal in accordance with the appeal procedures.

B. Responsibilities: Guidelines clearly establish expectations and require the acceptance of certain basic responsibilities:

1. Juveniles have the responsibility of following the rules, procedures and schedules and directions of staff while in the facility.

2. Juveniles have the responsibility of not discriminating against other juveniles or staff, or not using language or behavior in a manner which would imply prejudice or discrimination.

3. Juveniles have the responsibility of helping to clean and maintain living quarters.

4. Juveniles have the responsibility of asking for medical and dental care when they need it.

5. Juveniles have the responsibility of conducting themselves properly during visits, and of not accepting or passing contraband, and not violating the law through the mail.

6. Juveniles have the responsibility of maintaining their clothes in a clean and odor free condition. It is also their responsibility to keep hair clean. Hair care services are available to them upon request.

7. Juveniles have the responsibility of reporting any infringement of their rights to staff members of the facility.

8. Juveniles have the responsibility of following the grievance procedures in making any complaint and of reporting to facility supervisors any actions taken against them by other juveniles or staff because of their complaint.

9. Juveniles have the responsibility of starting an appeal and using the appeal procedures for any disciplinary action they feel resulted in their being treated unfairly.
II. DEFINITIONS: As used in this document, the following definitions shall apply:
A. Discrimination: An abridgement of rights based upon a person's race, religion, color, sex, age or national origin.
B. Corporal Punishment: A penalty inflicted directly on the body that will cause pain or injury.

III. PROCEDURES: Specific procedures to fulfill the above requirements are detailed in other chapters of this publication. To assure compliance with the Juvenile Rights policy's intent refer to chapters listed below:
7 Physical Plant
8 Safety and Emergency Procedures
9 Security and Control
10 Food Services
11 Sanitation and Hygiene
12 Medical and Health Care Services
14 Rules and Discipline
18 Communication, Mail, Visiting and Telephone
19 Release Preparation and Transfer Programs

Effective Date: 
Approved By: 
3. Use of a juvenile's name and identifiable photographs or voice recordings is strictly prohibited at all times.

4. The Director may suspend media visits during a facility emergency.

5. A juvenile detained in the facility may not act as a reporter or publish under a byline.

C. Personal Interviews: Personal interviews with juveniles shall be conducted within the framework above, and in addition:

1. A juvenile may not receive compensation or anything of value for an interview.

2. Either a juvenile or a media representative may initiate a request for a personal interview.

3. The Shift Supervisor shall notify a juvenile, parents/guardian and legal representative of any request and shall, as a prerequisite, obtain written consent from the juvenile, parents/guardian and legal representative prior to the interview.

4. The Director shall approve or disapprove an interview request within 48 hours.

5. Any disapproval shall be documented. A denial may be given for any of the following reasons:
   a. Refusal or failure to adhere to any of the foregoing conditions.
   b. The juvenile is physically or mentally unable to participate. This must be substantiated by the Medical Staff in writing and a copy placed in the juvenile's record.
   c. The juvenile's written consent is not completed.
   d. The interview, in the opinion of the Director, would endanger the health or safety of the interviewer or would adversely affect the order of the facility.
   e. The juvenile is involved in a pending court action and the court, having jurisdiction, has issued an order forbidding such interviews.
   f. The juvenile is a "protection" case and notice of his whereabouts would endanger the juvenile's safety.

Effective Date

Approved By:
Sample Juvenile Detention Facility
MEDIA ACCESS TO JUVENILE
CONSENT FORM

I. TO BE SIGNED BY THE JUVENILE

I hereby consent to the (Sample Juvenile Detention Facility) authorization of an interview and limited photographing of me by (name of interviewer) of (name of employer) on (date(s)) at (Sample Juvenile Detention Facility). This consent is subject to the absolute conditions that:

1. My identity will be kept confidential and will not be revealed to the interviewer, to those associated with the interviewer, or to those who will see, hear or read any product of the interview.
2. No photographing or filming will be allowed that could reveal my identity.
3. I may refuse to participate in or continue to participate in the interview and/or filming at any time.

(date) (signature)

II. TO BE SIGNED BY THE DIRECTOR

I certify that I read the above information to (name of juvenile) and witnessed his/her signature.

(date) (signature)

III. TO BE SIGNED BY PARENT/GUARDIAN

I hereby, as the parent/guardian of the above named juvenile, consent to the foregoing.

(date) (signature)

[witness to above signature] (printed name of parent/guardian)

IV. TO BE SIGNED BY JUVENILE'S LEGAL REPRESENTATIVE

I hereby, as the legal representative of the above named juvenile, consent to the foregoing.

(date) (signature)

[witness to above signature] (printed name of legal representative)
Sample Juvenile Detention Facility

The [Sample Juvenile Detention Facility] authorizes name of individual, representing name of employer or representing

To the [Juvenile] under the care of the [Sample Juvenile Detention Facility]:

Access is authorized subject to the following conditions:

1. Any juvenile interviewed may refuse to participate in the interview at any time; and
2. agrees not to reveal either identifiable descriptions or the identity of any Juvenile interviewed; and
3. No photographs or filming will be done which, when developed, might reveal the identity of the Juvenile so photographed or filmed; and
4. Should the identity of any Juvenile interviewed be revealed to any person or persons associated with the identity; and
5. agrees that the work product of the interview will not contain any information which would lead to the identification of the Juvenile interviewed.

Date

Director

hereby accept authorization to interview Juveniles under the care of the [Sample Juvenile Detention Facility] pursuant to the terms and conditions set forth above, and agree to comply with those terms and conditions.

Signature of Individual Applicant

Title

Policy Number Pages

Sample Policies and Procedures

JUVENILE DETENTION FACILITIES

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.4</td>
<td>6</td>
</tr>
</tbody>
</table>

Chapter: JUVENILE RIGHTS

Related Standards:

ACA: 2-8296
NAC: 4.81, 4.82

Subject: Juvenile Grievance Procedure/ Juvenile Advocacy/Ombudsperson

I. POLICY: Upon admission, juveniles shall be informed of their right to grieve any behavior or disciplinary action of staff or other juveniles. Grievances that have not been resolved informally shall be filed according to the procedures outlined below. All grievances shall be handled expeditiously and without threats of or reprisals against the individual grievant.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Grievance: A circumstance or action considered to be unjust and grounds for complaint or resentment.

B. General Counsel: The senior attorney of the parent agency.

C. Ombudsperson: A professional person, familiar with the system, who has substantial experience in juvenile law, youth services and investigation.

D. State Office of Youth Advocacy: An independent agency not administratively responsible for managing the facility.

III. PROCEDURES:

A. Informal Resolution: The juvenile should first try to resolve a grievance against a staff member informally. If informal resolution cannot be made, the juvenile should complete a grievance request and submit it to the Shift Supervisor. If assistance is needed to complete or make delivery of the grievance request, a juvenile careworker or volunteer staff member should be asked. Upon request, the juvenile careworker should also submit the grievance request to the Shift Supervisor.

B. Grievance Process:

1. A juvenile may select a representative or spokesperson from the staff, volunteers, legal community or juvenile population at any time during the grievance process.
2. No reprisals shall be taken against anyone using or participating in this process.

3. Reasonably brief time limits shall be established and all responses to a grievance shall be in writing. Failure to respond within the required time limits entitles the juvenile to proceed to the next level of review.

4. A juvenile with an emergency grievance (isolation, lack of essential medical care) shall receive action which can provide immediate redress.

5. The grievance procedure itself will be used to determine whether a specific complaint falls within the jurisdiction of grievance procedures.

6. The Director must be notified immediately of all complaints against staff members. The Assistant Director for Program Operations must be notified immediately of all complaints against other juveniles.

C. Filing a Formal Grievance:

1. Availability of forms: Juveniles will have full access to forms.

2. Content of forms: The forms shall contain the name of the juvenile, the date, person or policy grieved, and the nature of the grievance.

3. Submitting the forms: Grievance forms should be submitted to the Shift Supervisor. He/she will notify both the Assistant Director for Program Operations and the Director. If a juvenile cannot gain direct access to the Shift Supervisor, a juvenile careworker will make the delivery.

D. First Level: Hearing by Review Committee:

1. Committee composition and selection: The review committee shall be composed of three persons, either juveniles and/or staff; one selected by the grievant, one by the person whose behavior is grieved (or representative for the policy grieved) and one shall be an independent party named by the parent agency.

2. Time Limits: The review committee shall convene within three days of the report. They shall submit their findings in writing to both the juvenile and the Director within three additional days. Emergency grievances, however, will be reviewed during the next shift.

3. Conduct of the hearing: At the hearing the juvenile may relate his/her side of the story, call witnesses and question facts presented. Recommendations of the committee may include:
   a. The transfer of the juvenile to another section.
   b. Disciplinary action against the staff member or juvenile responsible for the behavior that is grieved.
   c. Further investigation.
   d. Changes in policies or procedures, or any and all of the above.

E. Second Level: Administrative Review:

1. The findings of the review committee may be appealed to the Director (in his absence, the Assistant Director for Program Operations).

2. The Director shall review the matter within three days of receiving the review committee report, and submit his findings in a written report to the juvenile within three additional days.

F. Third Level: Independent Review by Appeal Board:

1. The findings of the Director may be appealed to an independent appeal board, whose decision is final.

2. The appeal board shall be composed of one member of the parent agency, who shall act as chairperson, one representative of the court and one of a community organization.
G. Juvenile Advocacy/Ombudsperson Program:

1. Rationale: The role of the Ombudsperson encompasses more than the formal facility grievance procedure. This office:
   a. Facilitates a flow of information to groups outside the agency.
   b. Provides a perspective of juveniles' needs and programs different from that of staff.
   c. Provides an on-going evaluation mechanism monitoring the quality of life issues in the facility.
   d. Offers statutory protection for any statements made to the Ombudsperson.

2. Duties of Ombudsperson: An ombudsperson may:
   a. Investigate matters not raised in facility grievance procedures.
   b. Initiate an investigation even when a juvenile has not made (or does not want to make) a formal complaint.
   c. Investigate matters not appropriate for a facility grievance procedure such as:
      (1) Malfeasance by facility administration.
      (2) Quality of treatment.
      (3) Compliance with state laws requiring specific standards for programs and supervision.

3. Procedures:
   a. Any juvenile, parent of juvenile, attorney, staff member or facility volunteer may initiate the ombudsperson process. The grievance must be submitted within three working days of the action or incident involved unless there is good reason, acceptable to the ombudsperson, for the delay in reporting.
H. Civil Action Resulting From A Grievance: If a juvenile believes that, after the appeal or ombudsman process is exhausted, his/her civil rights have been violated, and are still in jeopardy, he/she shall not be prevented or restrained from filing a law suit to address grievances.

I. Evaluation: The Assistant Director for Program Operations will assess the grievance procedure as part of a progress report submitted to the parent agency. The report will evaluate:

1. Volume - Do juveniles use the procedures?
2. Effect - Do complaints result in clarification and change in the policies and practices?
3. And make recommendations for improving the procedure.
SAMPLE JUVENILE DETENTION FACILITY

JUVENILE GRIEVANCE PROCEDURE

If you have a complaint or grievance, please follow the steps given below and give the completed report to the juvenile careworker on duty. The juvenile careworker must give the report to his or her shift supervisor. All written grievances will be answered. This does not mean we will agree or disagree with them. Corrective action will be taken if your situation requires it.

1. Write down, in your own words, what you think the problem is and why it happened.

2. Write down why you think what happened is unfair.

3. Write down what you think should be done to prevent it from happening again.

SIGNATURE

[Signature]
CHAPTER 16
RULES AND DISCIPLINE

COMMENTARY

This chapter encompasses
American Correctional Association Standards 2-8310 through 2-8334
National Advisory Committee Standards 4.47, 4.51 through 4.54

Prior to implementing policies or procedures based on these
samples, local counsel in the facility's jurisdiction must be
consulted to determine compliance with state and local regula-
tions.

Information from many sources was evaluated and used in an effort
to present samples complying with ACA standards and current
judicial rulings. No section of this publication is more con-
sistently the subject of juvenile grievance and litigation than
rules and discipline.

Due to the extreme importance of this chapter it has been re-
viewed by representatives from several separate jurisdictions
in the United States and Canada.

I. POLICY: Rules of conduct as well as the penalties that may be
imposed are included in the "Juvenile Rule Book" and shall be
used as a guideline for both juveniles and staff.

II. DEFINITIONS: As used in this document, the following definitions
shall apply:

A. Corrective Action: An on-going practice used to instruct and
direct behavior, attitude and responsibility, not involving
physical contact.

B. Physical Restraint: Actual holding of a juvenile.

C. Room Restriction: Remaining in a room, at the request of a
staff member, until given permission to leave.

III. PROCEDURES:

A. Rule Book Distribution, Interpretation and Translation:

1. A copy of the Juvenile Rule Book, containing chargeable
offenses and the penalties and disciplinary procedures
that may be imposed, will be given to each juvenile upon
admission.

2. Arrangements will be made by the Shift Supervisor for
translation when a juvenile speaks another language or
interpretation if a juvenile has a problem with reading
or understanding any portion of the rule book.

B. Staff Training: All staff members will be given a copy of the
Juvenile Rule Book. Staff that have direct contact with juve-
niles will receive at least two hours of in-service training
annually to ensure familiarity with the rules, sanctions
available and the rationale for the rules.

C. Offense Priority: Prior to initiating a report or a disciplinary
action, careful attention should be given to the rule book in
determining the seriousness of the misbehavior. In the order
of increasing seriousness, fifteen examples are:
1. Horseplay: This is a minor offense. However, it is important that the staff member knows the difference between two juveniles who are simply playing around and two who are attempting to cover up a more serious problem.

2. Out of Assigned Area: This could be an absence in the classroom or from the location of an assigned errand. It is an issue of intent. In most cases this is a relatively minor offense when considered on a one time basis.

3. Failure to Carry Out Assignment: Again, a single incident would be considered minor. The frequency with which this behavior repeats itself determines the seriousness.

4. Aggravating or Harassing Others: This could cover such areas as language, making fun of, or in any other way holding a peer up to ridicule.

5. Verbally Disrespectful: This must be confronted and could conceivably be considered for disciplinary action, but it is not considered to be uncontrolled behavior.

6. Destruction of Property: The seriousness will be affected by the degree of destruction and the value of the property destroyed. Staff must always distinguish between intentional and accidental destruction.

7. Stealing: The seriousness will be affected by the value of what is stolen.

8. Sex Offense: Would involve voluntary participation. It does not include a forced encounter. Once force is used, the offense become assault, and is of a much more serious nature.

9. Disobeying a Direct Order: Refusal to stop or refusing to initiate a particular behavior or activity ordered by a staff member is considered an offense.

10. Intimidation or Threatening: Intimidation and threatening another person must be considered a serious offense warranting significant consequences.

11. Possession of Contraband: Any item that can be utilized as a weapon or for purposes of escape, matches, alcohol and drugs or money, or has not been specifically authorized is considered a serious offense.

12. Verbally Uncontrolled: This is a situation in which a juvenile is cursing, threatening, and, after being warned to cease, has refused to do so.

13. A.W.O.L. or Escape: This is a law violation and would warrant placement of charges with the court. An attempted escape warrants immediate room placement.

14. Fighting: Any physical violence should be considered one of the more serious offenses and warrants immediate room placement.

15. Assault: An intentional physical attack on an individual, inflicting serious injury or harm should be considered a very serious offense and warrants immediate room placement. In addition, placement of charges with the court may be indicated.

D. Incentive System: Based on positive reinforcement, involves rewarding desirable behavior and not rewarding undesirable behavior. Fines or recompense are not part of the system. Juveniles are eligible for participation in special activities on the basis of points earned. Juvenile careworkers award points on each shift according to guidelines set forth. Positive reinforcement of desirable behavior is the goal.

E. Discipline:

1. Staff will make every effort to maintain control of juveniles through methods of positive reinforcement.

2. Discipline will be administered in a way to create a learning experience for the juvenile and will be commensurate with the seriousness of the misbehavior.

3. Discipline will never be of a nature or administered in a way that will degrade or humiliate.

4. The following actions will never be used as a means of discipline or punishment:
   a. Corporal punishment.
   b. Physical restraint: Used only when necessary for the safety of the juvenile, or other juveniles and staff.
   c. Psychological intimidation.
   d. Denial of regular meals.
   e. Denial of medical care.
RULES AND DISCIPLINE

Chapter Subject Policy # Page
16.1

f. Denial of sufficient sleep.
g. Denial of sufficient exercise.
h. Denial of contact with parents/legal guardians.
i. Denial of legal assistance.

5. Room restriction will only be used when it is absolutely necessary for the protection of juveniles or staff or for controlling self destructive behavior. The juveniles will be returned to their regular program as soon as possible.

6. All disciplinary action will be reviewed by the Shift Supervisor and the Assistant Director for Program Operations.

F. Physical Restraint: This is used only when the juvenile is acting in a manner that is assaultive, injurious and dangerous to himself, peers, staff and/or property. As a part of ongoing training, staff members shall be oriented to the techniques of physical restraint.

G. Reporting: Based on the facts of the incident, only the Shift Supervisor or his designee may authorize temporary room restriction and/or use of physical restraint. For room restrictions beyond the initial "cooling off" period of one hour, and/or the use of physical restraint, the staff member shall:

1. Write an Incident Report, describing the situation and the juvenile behavior.
2. Note the juvenile's room restriction in the Temporary Restriction Log. The Log shall contain:
   a. The name of the juvenile.
   b. The date and time of the juvenile's restriction/restraint.
   c. Name of the staff member requesting such restriction/restraint.
   d. Name of Shift Supervisor authorizing such restriction/restraint.
   e. Reason for juvenile's temporary restriction/restraint.
   f. Date and time of juvenile's release from restriction quarters.

3. A Room Confinement Check Sheet shall be marked every 15 minutes the juvenile is kept on restriction.
4. When the juvenile is released from his/her room, the Incident Report and the Room Confinement Check Sheet are to be placed on file.

H. Annual Evaluation and Review:

1. The Assistant Director for Program Operations shall review the policies relating to the juvenile rules and discipline, examine the existing practices and consider suggestions for revisions.
2. The Assistant Director for Program Operations shall complete a written evaluation including any recommendations and forward to the Director.

Effective Date
Approved By:


Sample Juvenile Detention Facility

Incident Report

RE: ___________

DATE: ___________
TIME: ___________

OTHERS INVOLVED:

DESCRIPTION OF INCIDENT:

WITNESS: (WITNESSES):

DISPOSITION:

APPROVED:

(Family Careworker)

(Shift Supervisor)

Sample Policies and Procedures

RULES AND DISCIPLINE

ACA: 2-8313 through 2-8316 2-8333

NAC: 4.47, 4.52, 4.54

I. POLICY: There are written guidelines for informally resolving minor juvenile misbehavior when circumstances dictate immediate, informal action.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Informal Resolution: The solution of a minor rule infraction between a juvenile and a supervisor of the staff member reporting the infraction, designed to reduce paperwork and encourage prompt and fair disposition of minor offenses without entry of disciplinary action in the juvenile's file.

B. Sanctions: Logically this follows the commission of a negative act and is imposed for the dual purpose of creating a concrete consequence of behavior while diminishing the likelihood of repetition.

C. Restriction: The curtailment of activity as a disciplinary action, used only if consultation and advisement with the erring juvenile fails.

III. PROCEDURES:

A. Activity Restriction: A juvenile careworker or Shift Supervisor may exclude a juvenile from participation in activities for a period of time depending on circumstances. This is imposed as a result of misbehavior. Misbehavior in the cafeteria may warrant a cafeteria restriction while poor conduct in another area could result in a restriction of a different activity.

B. Room Restriction: A juvenile may be restricted to his/her room for minor misbehavior for a specified period of time. The amount of time varies depending on the nature of the violation and circumstances, but shall not exceed one hour.
RULES AND DISCIPLINE

Minor Violation

Resolutions

Policy # 16.2

Page 2 of 2

without approval of the Director. Prior to room restriction the reason shall be explained and the juvenile will have an opportunity to explain his/her behavior. During room restriction the door will remain unlocked and staff contact will be made at least every fifteen minutes, depending on the juvenile’s emotional state. The juvenile’s attitude assists in determining the end of the restriction period. Any room restriction may be followed by a section restriction if appropriate.

C. Group Restriction: There shall be no total group restriction without approval of the Assistant Director for Program Operations. The exceptions to this are:

1. Up to a maximum of one hour of group restriction may be initiated by the juvenile careworker, based upon general group misbehavior.
2. Immediate group restriction is allowed if there is an obvious security or safety factor. In these cases the Shift Supervisor and the Assistant Director for Program Operations or the Director should be notified immediately for further instructions.

D. Early Bedtime: Scheduled bedtime will be reduced in units of one hour. A juvenile may receive a one hour or a two hour earlier bedtime at the discretion of the Shift Supervisor when disciplinary action is warranted.

E. Paper Assignments: The primary discipline used to modify behavior is a paper assignment having a specific topic that relates to the misbehavior. The number of papers should be a function of repeat and on a basic educational reading level. Paper assignments should escalate in page number in direct relationship with the frequency of the misbehavior and may be given in conjunction with early bedtime or room restriction.

F. Warning: A warning is only applicable for a first offense and may be used without further disciplinary action. The warning shall communicate what the offense was and the expectation, with the understanding that if repeated specific disciplinary action will be initiated.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>RULES AND DISCIPLINE</td>
<td>Minor Violation</td>
<td>16.2</td>
</tr>
<tr>
<td></td>
<td>Resolutions</td>
<td>Page 2</td>
</tr>
</tbody>
</table>

Sample Juvenile Detention Facility

Report of Room Restriction

Juvenile __________________________________ Date __________________
Time of Incident __________________ Location of Incident_____________________
Requested by __________________ Approved by __________________
Time of Confinement ___________ Room ___________________

Reason for Confinement:

- Assault
- Fighting
- Threatening immediate physical violence of another person
- Presents an immediate danger to his/her own physical well-being
- Escape; threatening to escape
- Destruction of property
- Protection; upon written request of juvenile
- Aggravated disobedience; threat to the security of facility
- Possession of dangerous weapon
- Introduction of contraband to facility grounds
- Other (specify)

Brief description of the incident: _______________________________________

__________________________________________
Shift Supervisor
I. POLICY: Staff shall prepare a disciplinary report when a juvenile has committed a violation of facility rules.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Reports of Disciplinary Action: If there is a reasonable belief that a juvenile has committed a violation of the rules and regulations, the staff member may choose to either verbally warn the juvenile or submit a disciplinary report. A disciplinary report should contain:

1. Specific rule(s) violated and the details.
2. Behavior of the juvenile in connection with the violation.
3. All action taken by the staff member(s), including any force.
4. Name(s) of any witness(es).
5. Description and disposition of any physical evidence regarding the violation.
6. Signature of reporting staff member and the date and time of the incident and report.
7. Juvenile’s written account of the incident.
8. Juvenile’s signature verifying that he/she has read the report. If he/she refuses to read or sign, it will be noted on the report.

B. Individual Discipline Plan: This can be used for short-term or extended discipline and serve as a behavior profile for evaluation reports. The plan documents repeated misbehavior. The form used shall include facts important to using discipline.
Sample Juvenile Detention Facility

NOTICE OF DISCIPLINE

Juvenile's Name: __________________ Date: __________ Time: __________

Room Number: __________ Reason for Discipline: ______________________

Type of Discipline: Work Essay Other

Restriction is being used in connection with this discipline: Yes No

Release Information: ________________________________________________

Staff Signature __________________________

Shift Supervisor's Signature __________________________

This form is to be completed in duplicate:

One Copy to Director.

One Copy to Assistant Director of Program Operations

Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>16.4</td>
<td>6</td>
</tr>
</tbody>
</table>

Chapter: RULES AND DISCIPLINE

Related Standards:

ACA: 2-8318 through 2-8332
NAC: 4.54

Subject: Disciplinary Procedures for Major Rule Violations and Adjustment Committee

I. POLICY: When a juvenile violates a facility rule which results in either being confined or receiving a written disciplinary report, he/she has the right to the same living conditions as the rest of the juvenile population as well as the right to a hearing before the Adjustment Committee.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Adjustment Committee: A group of supervisory level staff empowered to conduct hearings and impose disciplinary actions that comply with the policies and procedures of the facility.

B. Confinement: Placement of a juvenile in a locked room to control behavior that is a clear and present danger to the juvenile, to other juveniles, or to staff.

C. Major Rule Violation: These are actions such as: willful destruction of property, stealing, non-forced sex offenses, disobeying direct orders, intimidation or threatening, possession of contraband, attempting to escape, fighting, assault, etc. Please refer to Policy #16.1

III. PROCEDURES:

A. Confinement: After all other techniques and resources have failed and only when the juvenile's behavior presents a clear and present danger to himself, other juveniles or staff should confinement be utilized. The length of confinement should not exceed the point at which the juvenile regains self-control and in the opinion of staff, can safety be returned to the regular programing.

1. Only the Director or his/her designee can authorize confinement. Authorization is valid for a maximum of eight (8) hours and may not be authorized to exceed sixteen (16) hours during any 48 hour period without written consent from the Court. In the absence of the Director, the
Assistant Director of Program Operations is the designee. In the absence of both the Director and Assistant Director, the Shift Supervisor is the designee.

2. The Director or his/her designee must make direct personal contact with the juvenile during confinement. The Director must be informed as soon as possible of any confinement which is authorized by his/her designee.

3. Juveniles placed in confinement separate from their living section must be afforded living conditions and privileges approximating those available to the general juvenile population unless clear and substantial evidence justifies an exception and administrative approval has been secured.

4. All juvenile careworkers are oriented to these procedures and special training in juvenile management and restraint techniques is provided to all juvenile detention personnel.

5. The Shift Supervisor on duty is responsible for recording all incidents of confinement on forms specifically designed for that purpose. The information to be recorded in the report includes:
   a. Name of juvenile.
   b. Date and time period of confinement.
   c. Names of staff members recommending confinement.
   d. Reason(s) for confinement - description of behavior.
   e. Unsuccessful alternatives used.
   f. Authorization signed by the Director.
   g. Person authorizing release from confinement.

6. The Shift Supervisor is responsible for seeing that a copy of the confinement report is placed in the juvenile's record.

7. During confinement:
   a. Potentially dangerous articles shall be removed.
   b. Physical needs of the juvenile must be met.
   c. One staff person will be assigned by the Shift Supervisor to supervise the juvenile.

The assigned staff person will visually check the juvenile every 15 minutes and record attitude changes, reasons for continuing confinement, all visits and statements of physical and emotional condition of the juvenile. This report will be placed in the juvenile's record.

The juvenile will be visited at least twice during each eight (8) hour interval by staff from administration, clinical, social work, religious and medical sections.

A juvenile has a right to a disciplinary hearing when confinement or a disciplinary report has been initiated. The juvenile should be seen by his/her caseworker or probation officer as soon as possible, but not more than 24 hours following the violation.

Adjustment Committee Composition:

1. The Adjustment Committee should be composed of at least three (3) supervisory level staff persons appointed on a rotating basis by the Director. To enhance the Committee's impartiality, a staff person from an independent agency, i.e., probation, etc. should be assigned to the Committee.

2. The designated chairperson shall be required to have completed training in disciplinary procedures.

3. The Committee's composition should be racially and ethnically balanced to meet the needs of the facility.

Adjustment Committee Hearing Procedures:

1. The Adjustment Committee shall commence within 48 hours (or sooner, if possible) excluding weekends and holidays, after the commission of the rule infraction or the discovery of it, unless the juvenile is unable to participate in the hearing.

2. The juvenile, his/her caseworker and probation officer must receive written notice of the facts and charges being presented against him no later than 24 hours following the incident.

3. Juveniles shall have the right to either retain or appoint counsel to prepare their defense or appear on their behalf before the Adjustment Committee. A juvenile shall, upon request, have the assistance of a staff member in the presentation of his/her defense.
4. The juvenile shall be present at the hearing, unless he/she waives that right in writing or through behavior, and may have their caseworker or probation officer present. The juvenile may be excluded during testimony given in confidence and the reasons for the absence or exclusion shall be documented.

5. A juvenile is given an opportunity to make a statement, present documentary evidence, and to have in attendance any person(s) who has relevant information, except when doing so may jeopardize the life or safety of persons or the security or order of the facility.

6. Prior to privilege suspension, the Adjustment Committee will explain the reasons for their decision.

7. The juvenile, his/her caseworker and probation officer must be given a copy of the Adjustment Committee summary. If personal safety or security is jeopardized by certain references in the written record they may be deleted from the juvenile's copy, but the fact that omissions have been made shall be noted on the copy.

8. The Adjustment Committee shall take any of the following actions, based upon the evidence:
   a. Find that the juvenile did not commit the offense. In that case, the Committee shall order that the disciplinary report be dismissed and expunged from the juvenile's record.
   b. Find that further investigation is necessary.
   c. May order that the juvenile be held in an investigative status for up to five (5) days. (This does not imply confinement but may be a limited exclusion from the routine program activities.) Such action is to be terminated immediately if it appears that the investigation will not be successful in proving a violation.
   d. If, as a result of the investigation, it is necessary to amend or modify the original charges, the juvenile shall be issued a copy of that revision. Upon completion of the investigation, the juvenile shall appear before the Adjustment Committee who shall conduct a hearing on the violation report or dismiss the charges.

9. If the decision is adverse to the juvenile, the juvenile must be informed of his/her right to appeal through the grievance procedures.

10. When there is a finding that the juvenile did commit the offense, a copy of the Adjustment Committee summary along with the disciplinary report shall be forwarded to the Director, parent agency and other appropriate authorities and a copy of each report shall be filed in the juvenile's record.

11. The Director may remand the decision of the Adjustment Committee for new proceedings if, upon review, the proceedings are found to be deficient due to:
   a. Inadequate notice, failure to state the correct date of the offense or the failure to provide the juvenile adequate notice of the hearing.
   b. Lack of impartiality of the Adjustment Committee.
   c. Improper exclusion of witnesses.

12. New or additional proceedings may be ordered in other circumstances, determined by the Director. The juvenile shall be provided with notice of the rehearing as soon as possible. The rehearing shall take place within three (3) days. The procedures on remand shall be conducted in accordance with the procedures governing the initial hearing.

13. The Director may remand the decision for additional documentation, correction or clarification of the summary, including the statement for excluding witnesses, or the basis for the finding of guilt and the imposition of sanctions. The Director should receive all reports and information concerning the Adjustment Committee's summary before these materials are forwarded to the parent agency, or other appropriate authorities. The juvenile will not have the right to a new hearing but shall be notified of the decision. After the Committee has amended its summary, it shall be forwarded to the Director in accordance with the procedures in the original disposition.

14. Upon remand, sanctions greater than those imposed at the original hearing shall not be permitted, unless the juvenile is charged with a different offense which provides for a greater penalty than provided under the original violation, or new evidence is produced which justifies the greater disciplinary action.
### E. Computation of Discipline for Multiple Offenses:

1. When a juvenile has been found in violation of more than one rule violation arising from a single incident, the maximum penalty shall not exceed the maximum penalty for the most serious offense he is found to have committed.

2. When a juvenile has been found in violation of more than one rule infraction, arising from separate incidents, the maximum penalty for each violation may be imposed and such penalties shall run consecutively.

### F. Restitution Procedures:

1. The Adjustment Committee may recommend monetary restitution in an amount not to exceed actual loss caused by the juvenile, and shall determine the amount and the conditions of payment.

2. If it is determined that restitution for damage of property or person is appropriate, the juvenile shall be asked to authorize disbursement from his/her trust fund or other source.
   a. If the juvenile agrees to make restitution, the funds shall be disbursed to the appropriate individual.
   b. If the juvenile refuses to authorize disbursement from his current funds or future earnings, the Committee may recommend that a hold be placed on his account for such amount, and may further recommend that his canteen privileges be suspended in whole or part for a definite period of time.

3. Consideration should be given to the juvenile's willingness to make restitution in imposing any other disciplinary sanctions.

4. The Committee may recommend symbolic restitution for damages to property or persons committed by the juvenile. (Symbolic restitution can be the cleaning up of damaged property, etc. or other work assignments within the facility.)

5. Under no circumstances will any juvenile be subjected to greater punishment because he is without funds and therefore unable to make restitution.

---

**Rules and Discipline**

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>RULES AND DISCIPLINE</td>
<td>Disciplinary Procedures for Major Rule Violations and Adjustment</td>
<td>16.4</td>
<td>6 of 6</td>
</tr>
</tbody>
</table>
CHAPTER 17
PROGRAMS

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8354 through 2-8379
National Advisory Committee Standards 4.213 through 4.218, 4.262, 4.263, 4.45
American Bar Association Standards 10.6, 10.7

and describes basic programs. Cooperation and coordination with the community are encouraged. Frequent contact with academic communities offers opportunity to improve quality and quantity of the programs.

Today's economy forces the user to look carefully to all areas of programing to achieve maximum use of funds. It is believed these documents will foster intelligent planning and responsible management of programs.

I. POLICY: To achieve as high a learning potential as is possible within a short detention period, and to provide continuity in learning, the facility shall develop an individualized education plan for each juvenile. To accomplish this major goal, the facility shall maintain a teacher-student ratio of 1:15 or less. Compulsory education laws will apply to all juveniles.

II. DEFINITIONS: As used in this document, the following definitions shall apply:
A. Teachers: Persons who meet the educational certification requirements of the state and who have had experience providing remedial instruction to educationally disadvantaged juveniles.
B. Lesson Plan: A daily schedule of activities which should be readily available in case of the teacher's absence. This plan must be detailed and sufficiently complete for any substitute to carry out the teacher's plans and objectives.

III. PROCEDURES:
A. General Goals: These goals will be achieved to some extent by all juveniles. They will, however, vary according to the individual juvenile's ability and length of stay.
1. Based on diagnostic testing and individualized prescription in the basic subjects, including reading, mathematics, science, each juvenile will receive intensive individualized instruction.
2. Each juvenile will demonstrate proficiency in basic developmental skills and life skills based on his/her level of academic competency in the various subject areas.
3. Each juvenile will function in a positive environment which builds on his/her strengths while recognizing and improving weaknesses.

Sample Policies and Procedures

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>17.1</td>
<td>4</td>
</tr>
</tbody>
</table>

JUVENILE DETENTION FACILITIES

<table>
<thead>
<tr>
<th>Chapter:</th>
<th>Related Standards:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAMS</td>
<td>ACA: 2-8356 through 2-8362, 2-8378</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Subject:</th>
<th>ACA: 2-8356 through 2-8362, 2-8378</th>
</tr>
</thead>
<tbody>
<tr>
<td>Juvenile Education Program</td>
<td>NAC: 4.216, 4.2122, 4.262</td>
</tr>
</tbody>
</table>

ABA: 10.6
B. Facility Education Plan:

1. The Assistant Director for Program Operations shall develop a facility education plan which shall include:
   a. Assessment materials and procedures to determine the need for remedial or special education services.
   b. Outlines of the coursework and individualized education programs provided to meet juveniles’ needs.
   c. Schedules of curriculum activities.
   d. Lists of materials and specialized equipment which meet minimum Education Department standards.
   e. An education staff profile depicting all academic instructors and their appropriate certifications.

2. The facility education program will be reviewed on an annual basis by the education staff of the facility including review of equipment, curriculum, assessment and testing materials, health and safety, certification of general staff, and implementation of the facility education plan.

C. Teacher Responsibilities: Educational and vocational instructors must be licensed and accredited by the state and are required to:

1. Establish a communication link between public school agencies and the facility to provide continuity to the juvenile’s education.
2. Assess the capabilities and needs of individual juveniles assigned to the detention program.
3. Develop and implement an individual educational program that will provide a strongly structured environment for each juvenile.
4. Develop and implement short-term educational units appropriate to each juvenile’s needs.
5. Maintain an on-going record of juvenile progress.
6. Maintain an accurate record of the total number of juveniles taught and the total number of hours of instruction.

D. Exemption from the School Program:

1. As a general policy, juveniles may be removed from the school program for reasons of serious misbehavior for a period of time not to exceed one day without the approval of the facility Director.
2. Juveniles may be exempt from the school program during the first twenty-four hours they are detained.
3. As a general policy, juveniles who are already graduated from high school need not attend, but may do so if they choose and if room is available in the classroom. The juvenile is responsible for verifying graduation.
4. Out-of-state and non-United States citizens detained shall also attend the education program. If the population is high, every effort should be given to provide educational opportunities for these juveniles, i.e., individualized instruction materials.
5. If a juvenile chooses not to attend school, he/she will be given individualized instructional tasks to be completed in his/her room in the section. This arrangement should be worked out in advance with the appropriate juvenile careworker and teacher(s).

E. Class Attendance:

1. No juvenile will leave the classroom without permission of the teacher or a staff member.
   a. Reason for the rule: Since the program for education is an individually structured program allowing juveniles to be in different areas at different times, leaving the classroom would cause a disruption in the program.
   b. Reasons for leaving the classroom:
      (1) Sickness.
      (2) Tutoring.
      (3) Securing material.
      (4) Changing classes.
      (5) Counseling.
(6) Meeting with the psychologist, the caseworker, the probation officer.

(7) Court hearing.

F. Classroom Facilities: Designed in conformity with local and state educational requirements, classrooms have:

1. Adequate space for desks to accommodate three-fourths of the design capacity of the facility.

2. Several individual booths where easily distracted juveniles can work alone and still be under the supervision of the teacher.

3. Space for a large table for active, short-term projects.

4. Storage space for classroom supplies.

G. Education Supplies: Educational supplies include all hardware and software used in the educational program.

1. Software: Since the program is highly individualized, the facility shall maintain (either through purchase, rental or loan) various levels of commercially-made records, film strips and cassette tapes for each subject area. Other software supplies, such as transparencies, chalk, paper, pencils, etc., shall be sufficiently stocked and replaced as necessary.

2. Hardware: The facility shall maintain necessary hardware such as typewriters, calculators, tape recorders and overhead projectors. These items shall be kept in working condition and parts repaired and/or replaced as necessary.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Chaplain: A duly ordained and authenticated representative of legitimate religious practice, be it traditional or unorthodox, who has been approved by the Director following an examination of his/her credentials.

B. Religious Activity: An activity conducted by or under the auspices of a Chaplain, which is designed specifically for worship, religious instruction, spiritual guidance or counseling.

C. Religious Practice: A religion, religious denomination or sect supported by literature stating religious principles and recognized by a group of persons who share common ethical, moral or intellectual views which are not defamatory, racial, political or derisive in nature.

III. PROCEDURES:

A. Needs Assessment: To provide a proper balance in religious services, a system shall be developed by the Assistant Director of Program Operations to determine the religious composition of the juvenile population. Staff responsible for religious programs shall make program adjustments reflecting the changing population with an on-going needs assessment instrument.
### B. Special Religious Needs:

1. Juveniles shall have access to religious publications of their respective faiths. All religious material, however, is subject to review before entering the facility. Arrangements may be made through a Chaplain for a juvenile to obtain personal copies of certain approved religious books and periodicals.

2. The facility recognizes that certain religious faiths impose dietary restrictions upon their members, i.e., abstaining from the use of pork or pork products. These restrictions shall be honored, if possible.

3. When appropriate, liturgical apparel such as skull caps, head shields and prayer shawls may be worn during the religious activity. When not in use, this apparel shall be stored in the chapel storage area. Religious medallions or ornaments may also be worn if they do not interfere with the safe and orderly conduct of the facility.

### C. Religious Services:

1. Attendance shall be voluntary.

2. All chaplains shall prepare for the service thoughtfully.
   a. The message to the juveniles shall be clearly expressed in language readily understood.
   b. The proper atmosphere for the service shall be provided.

3. All juveniles in regular population shall be advised of their right to attend worship services.

4. Religious programs shall be coordinated with the facility's schedule of activities to avoid conflict.

5. Communion services and sacramental rituals shall be conducted on a regular basis.

### D. Specific Denominational, Church or Sectarian Activities:

1. Worship services or religious activities presented by a particular church, denomination, religious group or sect usually shall be restricted to juveniles of that particular religious preference or affiliation. Exceptions may be approved by the Director.

### E. Religious Education:

The Chaplain shall develop and conduct a program of religious education which shall be submitted to the Director for review and approval. The program may include:

1. Religious classes (lectures, instruction, discussions).
2. Religious forums.
3. Prayer groups.
4. Religious choirs, ensembles, and singing groups.
5. Self-study Bible courses.
6. Religious group counseling.
7. Bible study groups in a classroom environment.
8. Spiritual maturity groups.
9. Instructions in doctrines, rituals and ideals of various religious faiths.

### F. Pastoral Responsibilities:

1. Chaplains shall speak to juveniles when requested.

2. Juveniles may request to see the Chaplain at any time.

3. The Chaplain, as a confidant, has a dual responsibility to the juvenile and the facility. He/she must keep pastoral confidences intact, and, at the same time, protect the facility, its staff and the juvenile population.

---

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAMS</td>
<td>Religious Programming</td>
<td>17.2</td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAMS</td>
<td>Religious Programming</td>
<td>17.2</td>
</tr>
</tbody>
</table>

---

2. Chaplains shall anticipate and arrange for the celebration of rituals necessary to meet the minimal requirements of a given religious faith. Work assignments and schedules shall be arranged to accommodate the beliefs and practices of juveniles whose religion requires abstaining from work on religious holy days.

3. All worship services or religious activities shall be conducted and/or supervised by a chaplain, staff designee or religious representative with reasonable frequency.

---

Eftt'rove Dale

Approved By:
I. POLICY: To reduce idleness and to allow juveniles to pursue personal interests which may aid them upon release, reading materials and other related services shall be provided through an in-house library.

II. DEFINITIONS: As used in this document, the following definition shall apply:

Library: A separate room containing bookshelves and tables and chairs, housing reference materials and various levels of educational and recreational books, magazines, etc.

III. PROCEDURES:

A. Function: The library provides all juveniles access to a comprehensive collection of general and specialized reference materials which meet educational and recreational needs and requests. The library also provides instruction on use, reference services, reader's advisory services and intra-library loan services. The library program is authorized by the Assistant Director for Program Operations and services are provided to each section regularly.

B. Services:

1. The juvenile shall be assisted in release planning by information in:
   a. Community resources.
   b. Job opportunities.
   c. Training opportunities.
   d. Educational programming support.
   e. Productive skills development.

2. A library cooperative loan service shall be provided by the County Library.

3. The juvenile library shall be located close to the classrooms: library hours shall be coordinated with the activities schedule.

4. Bookshelves shall be located in each living area for juvenile use during non-library hours.

5. A specified number of books and magazines may be allowed in each juvenile's room for after hours reading.

6. Reading materials shall reflect racial and ethnic interests and be age-appropriate for various levels.

C. Selection of Books: At regular intervals surveys of the juvenile population shall be conducted to determine the needs and selection of books, materials and programs.

1. Materials shall be selected to serve the interests and needs of the juveniles and staff.

2. Selection shall be consistent with the juveniles abilities.

3. Materials of a controversial nature shall be reviewed by an advisory board of both staff and juveniles.

4. Material selection shall be based on recentness and cultural, inspirational and recreational values.

D. Review of Services: Annual review of library staffing patterns and the library programs shall be conducted by the Assistant Director for Program Operations. This review shall:

1. Evaluate juvenile access to the library.

2. Evaluate staff available during peak hours.

3. Evaluate the use or misuse of the library by juveniles.

4. Discuss plans for repairing or replacing damaged reading materials.

5. Compare library staffing patterns with the joint recommendations of the ACA/American Library Association.

6. Compare the operation of the library programs to stated performance goals and objectives.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAMS</td>
<td>Library</td>
<td>17.3</td>
<td>2</td>
</tr>
</tbody>
</table>
I. POLICY: The facility provides recreation and exercise programs to adjudicated and pre-adjudicated juveniles as soon as they are admitted to the facility.

II. DEFINITIONS None.

III. PROCEDURES:

A. Recreation:

1. The Assistant Director for Program Operations is responsible for planning, organizing and supervising activities, including the use of the gym, playground, canteen, arts and crafts program and special events. These activities will be available to all juveniles with limitations only in instances of program capacity or when unacceptable behavior and/or security would prohibit.

2. The programs section will provide for a minimum of one hour of energetic physical exercise and one hour of planned free time during school days with an additional hour of energetic physical exercise on weekends and holidays:

a. Programs staff should develop programs so that juveniles benefit from their detention experience. Programs should provide acceptable leisure time activities to alleviate idleness and boredom, provide positive reinforcement and develop the concepts of cooperation and sportsmanship.

b. Programs should be co-educational and co-recreational whenever possible. At no time will physical recreation be used as punishment.

c. Games and Sports Activities: All program activities should be consistent with the needs and preferences of the juveniles, not the staff. Not all juveniles enjoy organized sports such as basketball, volleyball and softball; non-competitive activities therefore, should supplement organized sports so that all juveniles can feel at least moderately successful. Certain activities such as tumbling, wrestling, weight lifting, etc. should be conducted only if a skilled person is assigned to supervise the activity.

d. Juvenile Participation in Recreation:

(1) All juveniles will be scheduled for activities but will be given the opportunity to choose not to attend. Juvenile careworkers should actively encourage juveniles to participate but failure to do so would not be punished.

(2) If a number of juveniles indicate a lack of interest in a scheduled activity, it should be reevaluated. A “suggestion box” for juvenile input about recreation programs should be available.

e. Activities in the Section: The programs section will facilitate the constructive use of juveniles’ time in the sections by lending games and equipment to staff on a sign-out basis.

f. Arts and Crafts: Since juveniles who show little success in other activities sometimes excel in arts and crafts projects, these should be included in the recreation program.

g. Incentive System: The programs staff in coordination with volunteers, counselors and Shift Supervisors, will develop and implement a behavioral incentive system. The incentive system will provide the opportunity for juveniles to earn additional privileges and activities contingent upon acceptable behavior.

h. Volunteers: The programs section will recruit and coordinate community volunteers to be involved in special recreation programs and events.

i. Roles of Recreation Staff, Volunteers and Juvenile Careworkers: The program staff is primarily responsible for planning, organizing and supervising juveniles. Staff are encouraged to be involved in the sports and games but they should do so only if their involvement does not impair the supervision of the juveniles.
Special Events: The Shift Supervisor shall organize a number of activities in addition to the daily routine programs described above. Activities, however, will not be scheduled outside the perimeter of the facility. The activities may include a weekly full length movie, a weekly party for well-behaved juveniles, a weekly party for the two cleanest sections, parties for holidays and special events, roller skating, organized team sports such as basketball, volleyball and softball, discos, dance instruction, exercise clubs, weight watchers club, sewing club, etc.

Reporting: The Assistant Director for Program Operations shall monitor the quality of these activities regularly and prepare an annual report describing the status of programming and the major progress or problems.

I. POLICY: To support juveniles during the transition and for the duration of the detention process, a juvenile careworker familiar with crisis intervention and short-term counseling techniques, having the ability to aid in directing immediate problems, shall be assigned to each juvenile. When needed, social services shall be made available to both juveniles and their families through contractual agreement with community agencies.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Counseling:

1. Upon admission, each juvenile shall be assigned a juvenile careworker who shall conduct an intake interview and remain responsible for the juvenile's counseling throughout his stay at the detention facility.

2. Individual discussion periods shall be scheduled between staff and juveniles at least one hour each week. Staff shall be immediately available to speak with juveniles on a spontaneous level; office space shall be provided to ensure privacy, if necessary.

3. Where appropriate, the facility management shall make available community resources to meet the needs of the juveniles and their families.

4. The Juvenile Handbook which details information such as schedules, daily living and emergency procedures, and roles and responsibilities particularly in communicating with juveniles shall be distributed to all new counselors. This handbook shall be reviewed on a quarterly basis by the Assistant Director for Program Operations, Shift Supervisors and Counselors and shall be approved in its final form by the Director.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAMS</td>
<td>Recreation</td>
<td>17.4</td>
<td>3</td>
</tr>
</tbody>
</table>
This chapter encompasses American Correctional Association Standards 2-8280 through 2-8394 National Advisory Committee Standards 4.4, 4.41, 4.44 American Bar Association Standard 10.7 Any user planning with these documents as a guideline should consider revising the samples to provide for greater or lesser security as required by local conditions. Such revisions can be accomplished and, at the same time, be in compliance with the standards listed.

Both state and federal courts have been increasingly attentive to the areas of correspondence, mail and visiting for detained juveniles. Various legal rulings have been considered in the development of ACA standards and these sample documents. Each user should, however, develop statements to comply with recent judicial rulings appropriate to their area.

**I. POLICY:** The facility recognizes the juvenile's need for and right to maintain contact with persons outside the facility and, importantly, asserts that he/she may do so with a reasonable degree of privacy.

**II. DEFINITIONS:** As used in this document, the following definitions shall apply:

A. **Correspondence:** Communication to or from juveniles through letters, postcards, greeting cards or parcels.

B. **Contraband:** Any item or article in the possession of a juvenile, or found within the facility, that has not been officially issued, purchased in the commissary or approved by an appropriate staff member.

C. **Money:** Cash, checks, postal notes, money orders or drafts.

D. **Censorship:** The withholding of juvenile correspondence, or reading or deleting any part of it.

**III. PROCEDURES:**

A. **Written policy and procedure governing correspondence of juveniles are made available to all staff and juveniles and are reviewed annually and updated.**

B. **The amount of mail a juvenile may send or receive is unlimited, except when the facility provides postage. Excluding legal correspondence the facility shall provide postage for a minimum of two letters each week for each juvenile.**

C. **Juvenile letters, both incoming and outgoing are not read by staff, except where clear evidence justifies such action. If correspondence is read, the juvenile must be present when the letter is opened. If any contraband is found the letter and its contents should be directed to the Assistant Director for Program Operations. If no contraband is found, the letter should be immediately given to the juvenile.**
D. Legal correspondence is never opened.

E. Juveniles are permitted to send sealed letters to specified persons and organizations, including, but not limited to:
   1. Courts.
   2. Counsel.
   3. Officials of the confining authority.
   4. Administrator of grievance systems.

F. Cash, checks, or money orders removed from incoming mail shall be credited to the juvenile's account or placed by the Accounts Clerk with the juvenile's other secured property.

G. Packages are subject to inspection at the discretion of the facility staff. Juveniles should be present during the inspection and notified of any items withheld from them and the action should be recorded on the juvenile's property inventory sheet.

H. A released or transferred juvenile shall be permitted to take all personal mail. Additional mail received should be forwarded by the Office Manager unopened. If no forwarding address is available, mail should be returned, unopened, to the sender or Post Office.

I. Restricted Magazines, Newspapers or Periodicals:
   1. The facility Director shall retain any material meeting any of the following criteria:
      a. Instructions for the manufacturing of explosives, drugs or other unlawful substances.
      b. Material advocating violence within the facility.
      c. Material advocating racial, religious or national hatred.
      d. Material which encourages sexual behavior, which is criminal and/or violates facility rules.

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Subject</th>
<th>Policy #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNICATION: MAIL, VISITING AND TELEPHONE</td>
<td>Juvenile Correspondence</td>
<td>18.1</td>
<td>2</td>
</tr>
</tbody>
</table>
2. Calls from parents, guardians and other relatives should be referred to the careworker for screening and scheduling.

3. The careworker will ask the caller if the number is listed in the telephone book, or with the telephone company information service.

4. The careworker will then confirm the number in the telephone book or with the directory assistance.

5. If the number is confirmed, the careworker will take the juvenile to the day room, and return the call.

D. Attorney Calls: A juvenile may phone his/her attorney at any reasonable time (excluding weekends and holidays) as often as he/she wishes if their attorney agrees to accept charges for these calls. No time limits shall be placed on these calls.

E. Recording Juvenile Telephone Calls: Where juvenile telephone calls are scheduled and supervised, a telephone log shall be established and maintained by the Shift Supervisors. All local or long distance telephone calls made by the juvenile shall be recorded in this log, including date and time of the call, name and number of the juvenile making the call, the party and telephone number called, time call was completed and cost of the call if it was long distance, and careworker monitoring call should initial the log.

F. Telegraph: On the basis of urgent needs, juveniles shall be permitted to communicate by telegraph at their own expense when other methods are less appropriate.
Sample Juvenile Detention Facility

TELEPHONE CALL RECORD

Please use new sheet for each new day!!

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Juvenile's Name</th>
<th>Check one</th>
<th>Name of Party Called</th>
<th>Number of Party</th>
<th>Relationship</th>
<th>Check one</th>
<th>Juvenile’s Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Sample Policies and Procedures

<table>
<thead>
<tr>
<th>JUVENILE DETENTION FACILITIES</th>
<th>Policy Number</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNICATION: MAIL, VISITING AND TELEPHONE</td>
<td>18.3</td>
<td>3</td>
</tr>
<tr>
<td>Subject:</td>
<td>Juvenile Visiting</td>
<td></td>
</tr>
</tbody>
</table>

I. POLICY: The facility administration encourages juveniles to maintain ties with their families and friends through regular visits, limited only by staff demands and the visiting facilities available.

II. DEFINITIONS: None.

III. PROCEDURES:

A. Authorized Visitors: Attorneys, clergy, government officials, legislators or media representatives may be approved for visitation by the Director on a case by case basis and will not count against the juvenile's normal visiting schedule. A special area is to be set aside for attorney/client interviews. Known ex-offenders other than family are to be prohibited visitation privileges unless prior approval has been granted by the Director.

B. Visitor Sign-In: Every juvenile's visitor shall sign-in on a form approved by the Director. Handbags and packages are to be left at the desk. Briefcases may go in after being checked.

C. Identification: All visitors over the age of eighteen will be required to produce positive identification before entry to the visiting area. Exceptions may be granted only by the Director. Visitors under the age of eighteen must be accompanied by a parent or guardian.

D. Publication and Distribution of Visitation Rules: The facility shall publish the operational procedures governing the visits in the Juvenile Handbook. Such information is to be made available by the Shift Supervisor to the juvenile upon arrival at the facility and shall be made available to visitors prior to their arrival at the facility. The handbook should include:

1. Days and times for visiting, who and the number of visitors allowed at one time.
2. Regulations about special visits.
3. The possibility of being searched.
4. What may be brought into the visiting area by the juvenile and the visitor.
5. The statute which addresses trafficking. This statute is also to be posted in a conspicuous place in the visiting area.
6. A sign should be posted saying visitors are subject to search.

E. Special Visits: Special visits may be granted, with prior approval of the Director on a case by case basis. Every effort will be made to allow special visitation privileges for hospitalized juveniles. Sources of transportation, accessibility to the facility by the visitor, and the distance a visitor must travel are to be considered.

F. Denial of Visitation: A denial of visitation privileges shall be based on the security, safety and order of the facility and the safety of the individuals involved. A denial of visitation shall be given to the juvenile in writing by the Shift Supervisor and shall include the name of the restricted or prohibited visitor, the name of the person making the decision and the right to appeal the decision. A juvenile may deny any visitation.

G. Volunteers: Volunteers are subject to all provisions of these administrative procedures, except that their visit will not count against the juvenile's normal visiting schedule.

H. Searches of Visitors: The visitor shall be informed about why the request for search is being made. Use of metal detectors and inspection of purses, packages and bundles shall be governed by the security needs of the facility.
I. Bodily Contact Between Juveniles and Visitors: Juveniles and their visitors shall not be physically separated unless required by security classification. They shall be allowed as much informality and privacy as possible.

Sample Juvenile Detention Facility

VISITATION AUTHORIZATION AND
RECORD OF VISITS: JUVENILES NAME
DATE ADMITTED
P.O. OR SOC. WORKER

DATES VISITED

NAME
RELATIONSHIP
APPROVED BY
ANYTIME: YES __ NO __ IF NO, INDICATE RESTRICTIONS:
SPECIAL PRIVILEGES OKAYED BY AS FOLLOWS:
INFO. REC'D BY:

NAME
RELATIONSHIP
APPROVED BY
ANYTIME: YES __ NO __ IF NO, INDICATE RESTRICTIONS:
SPECIAL PRIVILEGES OKAYED BY AS FOLLOWS:
INFO. REC'D BY:

NAME
RELATIONSHIP
APPROVED BY
ANYTIME: YES __ NO __ IF NO, INDICATE RESTRICTIONS:
SPECIAL PRIVILEGES OKAYED BY AS FOLLOWS:
INFO. REC'D BY:
CHAPTER 19
RELEASE PREPARATION AND TRANSFER

COMMENTARY

This chapter encompasses
American Correctional Association Standards 2-8395 through 2-8407
National Advisory Committee Standards 3.155 through 3.158, 4.7
American Bar Association Standards 2.5, 2.7, 2.8, 3.1, 5.1, 9.2.

Effective release planning is an essential ingredient in the modern detention system -- an ingredient too often omitted from the daily schedule of activities.

Recognizing a need for and the importance of following precise release procedures, the user has been provided with guidelines suggesting the more important release steps to be taken prior to, and during, the release process.

I. POLICY: The Intake Official shall continuously monitor the written records of juveniles to ensure that each juvenile held in detention is scheduled for review hearings within each seven day period and that a less restrictive alternative to continuing detention is not feasible.

II. DEFINITIONS: None.

III. PROCEDURES:

A. If an accused juvenile remains in detention after the initial court hearing, the Intake Official will review in detail the circumstances of the arrest and the alternatives to continued detention. A report on these investigations, including any information that the juvenile's attorney may wish to have added, should be presented to the court at the status review hearing within seven days after the initial hearing.

B. A written record will be kept of the incidence, duration, and reasons for interim detention of juveniles. Such records will be retained by the Intake Official and staff, and are made available for inspection by the police, the prosecutor, the court, and defense counsel. The Intake Official will continuously monitor these records to ascertain the emergence of patterns that may reflect misuse of release standards and guidelines, the inadequacy of release alternatives, or the need to revise standards.

C. The Intake Official shall initiate scheduling of detention review hearings to be held at or before the end of each seven day period in which a juvenile remains in detention. At the first detention review hearing after the expiration of the time prescribed for execution of the dispositional order, the judge must execute such order immediately, or fully explain on the record the reasons for the delay, or release the juvenile.
D. A list of all juveniles held in any form or interim detention, together with the length of such detention and the reasons for detention, will be prepared by the intake official and presented weekly to the presiding judge. Such reports, with names deleted, should simultaneously be made public to describe the number, duration, and reasons for interim detention of juveniles.

E. The Intake Official shall be responsible for assuring the juvenile's presence for court hearings scheduled by the court.

F. The Intake Official may at any time relax the conditions of a juvenile's interim status if, under rules prescribed by the court or under a specific court order, circumstances no longer justify continuing the restrictions initially imposed. Written notice of any such modification will be filed in the appropriate court. More stringent measures may not be imposed without prior notice to the court and counsel of the juvenile.

I. POLICY: The release process is a final reflection of a juvenile's relationship with the facility. It should ensure that all matters relating to the facility have been completed, and should assist the juvenile in developing a positive sense of closure of his/her experience in secure detention.

II. DEFINITIONS: None.

III. PROCEDURES:
A. Case Management Responsibility: The probation officer must verify release dates, determine the method of transportation to where the juvenile is going (including the person or agency to whom the juvenile is to be released), and assess the necessity for and availability of continuing services in the locale where the juvenile is being released. This responsibility shall include, but not be limited to:
   1. Release arrangements of parent(s) or guardian(s) or to a placement agency.
   2. Continuing medical, dental or mental health services or examinations.
B. General Release Procedures:
   1. Juveniles are scheduled automatically for hearing and review by the releasing authority when they are first legally eligible for release consideration or upon completion of prescribed programs.
   2. The releasing authority has available, in writing:
      a. Information about a juvenile's prior history.
b. Events in the case since any previous hearings.
c. Information about the juvenile's future plans.
d. Relevant conditions in the community.

3. Juvenile offenders have access to the information on which release decisions are made, except that information which, in accordance with the authority's written policy is specifically classified as confidential for good and sufficient reasons.

4. The agency responsible for the community supervision of the juvenile is authorized to petition the placing/releasing authority if it appears that the juvenile has willfully failed to comply with any part of the disposition or release order. A copy of this petition is provided to the juvenile and the juvenile's attorney, parent and/or guardian.

5. Juveniles alleged to have violated conditions of their probation/aftercare are not placed in detention unless it is necessary to protect the public safety, prevent self-injury, facilitate transfer or ensure the presence of the juvenile at subsequent court hearings. In such case they will receive a detention hearing the next court day.

6. Violations of the conditions of community supervision that constitute delinquent offenses are reported to the appropriate authority or law enforcement authorities.

7. In cases of deferral of release, juvenile offenders are given the reasons in writing, and the decision is recorded in the case record.

C. Specific Release Procedures:

1. If the juvenile is being released to the family, the person accepting the juvenile must be identified by appropriate identification (picture ID).

2. If the release is to an agency, agency personnel must show both appropriate identification and verification of authority to receive the juvenile.

3. In either event, persons entering the facility to pick up a juvenile shall sign in the visitors log the date, time and purpose of their visit, and shall sign a custody acceptance form.

4. If the release is not to the parent(s) or guardian(s), such individual(s) shall be notified by telephone as soon after the release as is possible, that the juvenile has left the facility.

5. During the dressing out process, releasing juvenile care-worker shall ensure that no facility property is in the juvenile's possession, and that the inventory of juvenile's personal property is signed indicating he/she has received all possessions. The two juvenile signatures shall be compared to verify the juvenile's identity.

D. Transfers: Transfers between detention programs of similar or dissimilar security levels will be allowed by the parent agency:

1. To provide the level of structure necessary to accommodate the limit-setting needs of a juvenile who cannot be detained in an open setting.

2. To ensure the availability of secure detention beds.

3. For the convenience of a juvenile or his/her family to facilitate visits or other necessary services to the juvenile.

4. Where the juvenile cannot receive necessary mandated services at his/her present facility.

5. Transfer Between Secure Facilities: The decision to transfer a juvenile between detention sites involves authorization by the following individuals or agencies:

a. The Court of Placement: The remand or court order must provide for a non-specific secure detention placement (i.e., "detention" or "secure detention" not the name of a specific detention facility), or else the approval of the court must be obtained and a new remand order secured prior to the transfer.

b. The facility directors of both detention facilities, or their designees.

c. The Director of detention in the county of placement and in the receiving county or, in the case of the Regional Secure Detention Facility, of the Director of Juvenile Facilities Services.

d. Any legal representatives or authorities, as designated by the court of placement.

e. The juvenile involved.
6. Transfer to Less Secure Detention Site: The same process as is outlined above is necessary for the transfer of a juvenile from a secure to a less secure detention when he/she first become involved in the justice process.

7. Transfer to More Secure Detention Site: All transfers from a less secure detention program to the Regional Secure Detention Facility shall be treated as new admissions and subject to all the criteria listed in admissions procedures. In the case of juveniles detained under the Interstate Compact, parole or probation revocation or a WO warrant, the Director shall ensure that all due process requirements of the law have been met prior to acceptance, and these procedures must be documented in writing with copies to the juvenile, his/her parent(s) or guardian(s), and the facility case record.

8. Non-Emergency Medical and Mental Health Transfers: All non-emergency medical (hospitalization) and mental health transfers shall only occur after a written order from the court of placement and in accordance with the provisions of state executive laws and mental hygiene laws.

9. Emergency Medical and Mental Health Transfers: Emergency transfers for either medical or mental health reasons shall be in accordance with the policies already set forth in this manual. The Director shall notify the court of placement as soon as possible after the juvenile leaves the facility, but in no case should notification of this transfer occur later than the next business day.

10. Administrative Transfers:
   a. Initial Classification: A juvenile may be transferred as part of the Initial classification process.
   b. Overcrowding: A juvenile may be transferred with the approval of the Director to relieve overcrowding in the facility.

E. Leave: Occasions when escorted leaves are necessary include:

1. Leave for Services: When it is necessary for a juvenile to receive services in the community, the juvenile may be escorted to the necessary locales. The juvenile shall be accompanied by at least two facility staff members. The time of departure and arrival shall be prearranged with the service provider and the necessary records or other data shall accompany the juvenile.

2. Personal Leave:

   a. When a juvenile must leave the facility to visit a critically ill relative, to attend a family funeral, or for other special personal considerations, the caseworker shall inform the court of placement about the details and necessity for the leave.

   b. The juvenile shall be permitted to leave only under court order, and transportation in this case shall be provided by an agency other than facility staff. The Director may approve and arrange personal leave when the court is not in session.
Sample Juvenile Detention Facility

**RELEASE FORM**

NAME: ___________________________ DATE: __________________ TIME: __________________

The person completing each of the items listed below is required to initial the section.

1. Verification of identification of person juvenile is released to.
2. Release determination.
   - Court Order
   - Policy
   - Request of Nonsecure.
3. Parole date given, if appropriate.
4. Property returned.
   - A. Property sheet pulled and placed in Central file.
   - B. Check written for any monies owed.
   - C. Cost, clothes, property bag returned.
   - D. List of items not located
5. Release from Admissions Log Book.
6. Admissions card updated and refiled.
7. Release form completed.
8. Instructions for forwarding mail:

Does the juvenile have any pending action, such as grievances or claims for damages or lost property? YES ___ NO ___

---

**TEMPORARY RELEASES**

<table>
<thead>
<tr>
<th>Name</th>
<th>Reason</th>
<th>With Whom</th>
<th>Title</th>
<th>Signature</th>
<th>Out</th>
<th>Time</th>
<th>Return</th>
</tr>
</thead>
</table>

**SPECIAL INCIDENT REPORT**
CHAPTER 20
CITIZEN INVOLVEMENT & VOLUNTEERS

COMMENTARY

This chapter encompasses American Correctional Association Standards 2-8408 through 2-8417 and National Advisory Committee Standards 1.41, 1.42. The sample policies and procedures are designed to establish an effective volunteer program. Users should be aware of the need for careful selection and training for all volunteer workers.

The volunteer program can enhance and expand the level of services in the correctional program.

I. POLICY: This facility shall secure citizen involvement where feasible, to enhance and expand the services and programs offered to the juveniles. The use of volunteers permits increased personal contact for the juvenile, broadens community resources for the facility, increases public awareness of the juvenile detention system and develops management skills among staff.

II. DEFINITIONS: As used in this document, the following definitions shall apply:

A. Volunteer: Any person who, of his/her own free will, provides goods or services to the facility with no monetary or material gain. The term volunteer includes regular, occasional and stipend volunteers, material donors and advisory councils. Volunteers are recruited to supplement and enrich, but not to substitute, activities and functions of staff of the facility.

B. Regular Volunteer: Any person who has completed the requirements pursuant to becoming a selected volunteer and is engaged in specified voluntary service activities on a continuous, regularly scheduled basis.

C. Occasional Volunteer: Any person who provides a one-time, on-call or occasional task service.

III. PROCEDURES:

A. Recruitment and Screening: A screening and selection of volunteers shall be conducted by the Director and Assistant Director for Program Operations, encouraging recruitment from all cultural and socio-economic segments of the community.

1. Recruiting:
   a. Recruiting of volunteers is a staff responsibility under the supervision of the Director.
   b. Recruiting efforts shall include civic organizations, appropriate education institutions and individuals.
Eligibility:

a. Any person of good character, at least eighteen years of age and sufficiently mature to handle the responsibilities involved is eligible to become a volunteer.

b. Ex-offenders may be accepted as volunteers, subject to approval by the Director.

c. Relatives of a juvenile may not serve as a volunteer with the juvenile to whom they are related or in the facility where that juvenile is detained.

Application: Prospective volunteers shall complete an application for volunteer service. The Assistant Director of Program Operations shall then interview the applicant to determine whether he/she will meet the needs and where the prospect's talent can be used. Volunteers shall provide professional services only when certified or licensed to do so. Following the interview, appropriate notes and/or recommendations shall be made and forwarded to the Director. Falsification of any information may result in curtailment of privileges of entering the facility. Volunteers shall agree in writing to abide by all facility policies, particularly those relating to screening and confidentiality of information. If rejected, an applicant shall be informed of the reasons.

Assignments and Duties:

Place residents in a supportive and therapeutic environment.

Volunteers shall be placed by the Assistant Director for Program Operations on assignments based on their interests and capabilities. Examples of the assignments are:

1. Individual counseling.
2. Group counseling.
3. Drug therapy.
4. Visiting.
5. Family counseling.
6. Academic teaching.
7. Vocational training.
8. Pre-release training.
10. Clerical work.
11. Switchboard.
12. Religious activities.
13. Individual sponsorship.
14. Legal aid.
15. Consultation.
17. Pre-release training.
18. Library assistance.
19. Clerical work.
20. Switchboard.
21. Library assistance.
22. Religious activities.
23. Individual sponsorship.
24. Legal aid.
25. Consultation.

Volunteer Code of Ethics:

1. Keeps confidential matters that are confidential.
2. Has agreed to work without compensation in money, but having been accepted as a volunteer worker, expects to work according to the same standards as permanent staff.
3. Maintains an attitude of open-mindedness; is willing to be trained.
4. Complements the work of staff and assists in developing good teamwork.
5. Maintains professional attitude toward volunteer work; accepts obligation to the work, to those who direct it, to colleagues, to those for whom it is done, and to the public.
f. Accepts differences in people in terms of cultural or economic background, race, religion and values.

D. Volunteer Identification and Control:
1. Volunteer identification card pictures shall be taken on a pre-arranged date.
2. Volunteer identification passes automatically expire in one year. The Assistant Director for Management Services shall check expiration dates and make arrangements for renewal if indicated.
3. Identification cards on all volunteers should be maintained in personnel files.
4. When deemed necessary to the security of the facility, any individuals may be requested to submit to a search.
5. Search discovery of contraband shall result in detaining the person having such contraband in his/her possession. Supervisory staff shall be notified as well as the local police department.
6. The facility administration has both the authority and responsibility to deny any person whose presence is believed to jeopardize the order, security or safety of the facility, access to the facility. The responsible person taking such action shall submit a written report of circumstances to the Director. The Director shall affirm or rescind the action and determine conditions of reinstatement.

E. Supervision and Evaluation of Volunteers:
1. The Assistant Director for Program Operations shall coordinate and supervise the volunteer program. The Director and Section Chiefs shall work with the Assistant Director for Program Operations to provide adequate control and coordination of the activities of the volunteers as well as assist in evaluating programs with which they are involved.
2. Any staff member to whom a volunteer is assigned shall be that volunteer's direct supervisor and shall:
   a. Provide the volunteer essential information and orientation to the facility and section.
   b. Complete and revise the volunteer agreement forms.

c. Inform the volunteer of expectations and in what areas, if any, the volunteer may make personal and final decisions.
d. Provide thoughtful, effective training.
e. Recognize and demonstrate appreciation of progress in the volunteer.
f. Respect the volunteer's honest opinion and accept constructive suggestions.
g. Offer the volunteer opportunities to grow and to advance to more responsible positions.
h. Share confidential information with the volunteer to assist his/her completion of the assignment.
i. Send volunteer monthly time report forms to the Office Manager.
j. Meet with volunteers on a regular basis.
k. Complete and submit volunteer evaluation forms.

F. Termination of Volunteers: Administration curtails, postpones or discontinues the services of a volunteer or volunteer organization when substantial reasons for doing so exist. Any of the following reasons may warrant this action:

2. Unlawful conduct or breach of facility rules and regulations.
3. Physical or emotional illness.
4. Inability to cooperate with the staff.
5. Activities which threaten the order or security of the facility or the safety of the volunteer.
7. Incompetent service.
Sample Juvenile Detention Facility

VOLUNTEER AGREEMENT

I, __________________________, volunteer to serve as __________________________ for the (Sample Juvenile Detention Facility).

As a volunteer, under the direct supervision of the Shift Supervisor, I agree to:

1. Report to the facility on __________ (days) from __________ (time) to __________ (time).

2. Undergo a training period.

3. Learn supportive procedures for:
   a. Intake
   b. Juvenile Confrontations
   c. Fires and Emergencies

The facility agrees to provide:

1. On-site training.
2. Sound Guidance and Direction.

(signature of volunteer) __________ (date) __________

(Director’s signature) __________ (date) __________