

Youth Detention Facility Assessment Report

COUNTY JUVENILE JUSTICE SYSTEM

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Table of Contents

Introduction	2
Section I: Classification & Intake	1
Section II: Health & Mental Health.....	4
Section III: Access	6
Section IV: Programming	8
Section VI: Training & Staff Supervision.....	10
Section VI: Environment.....	13
Section VII: Restraints, Room Confinement, Due Process, & Grievances	17
Section VIII: Safety	20
Thematic Review of Standards	22

Introduction

The County Family Court has a long history of working to promote alternatives to detention. One important component of that work is a consistent and thorough examination of the conditions of confinement that youth experience within youth detention facilities. Therefore, our County Family Court began working to complete a facility assessment of the youth detention facility.

The facility assessment involves the close examination of eight important topic areas within the youth detention facility, including:

- Classification & Intake
- Health & Mental Health
- Access
- Programming
- Training & Staff Supervision
- Environment
- Restraints, Room Confinement, Due Process & Grievances
- Safety

Each of these topic areas were assessed by at least two assessors and through three different methods of assessment, including the review of policies and procedures, direct observation, and interviews with staff and youth. The remainder of this report will provide the detailed results of what the assessors learned about the youth detention facility in each of these eight sections, including the degree to which the national standards were met by the facility.

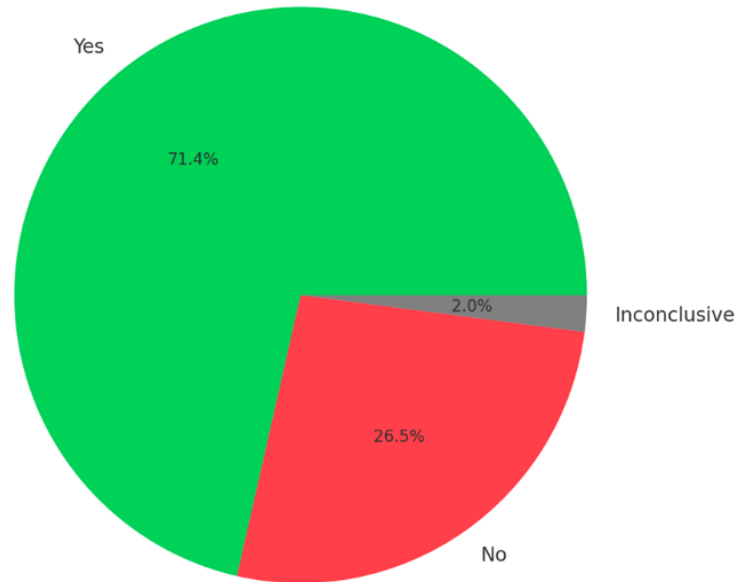
The completion of the youth detention facility assessment was truly a team effort and therefore much appreciation should be given to those who were part of the process. First, much appreciation to the team of assessors who volunteered their time and expertise to review documents of policies and procedures, visit the detention facility, and talk with youth and staff. The facility assessment would have never been completed without their commitment.

Second, many thanks to the young people who met with the assessors and provided vital insight about their experiences while in the detention facility. Third, thank you to the detention staff who took time out of their days to welcome the team of assessors, provide tours of the facility, and meet with assessors for interviews. t, to the leadership team at the County Family Court, who committed to completing the youth detention facility assessment and helped guide the team of assessors throughout the entire process. All of these people working together is how positive change for our youth happens.

Section I: Classification & Intake

Classification & Intake focuses on the first stages that youth experience when entering the youth detention facility, including the initial assessment, classification, and orientation.

Overall Assessment for 'Classification and Intake' Section



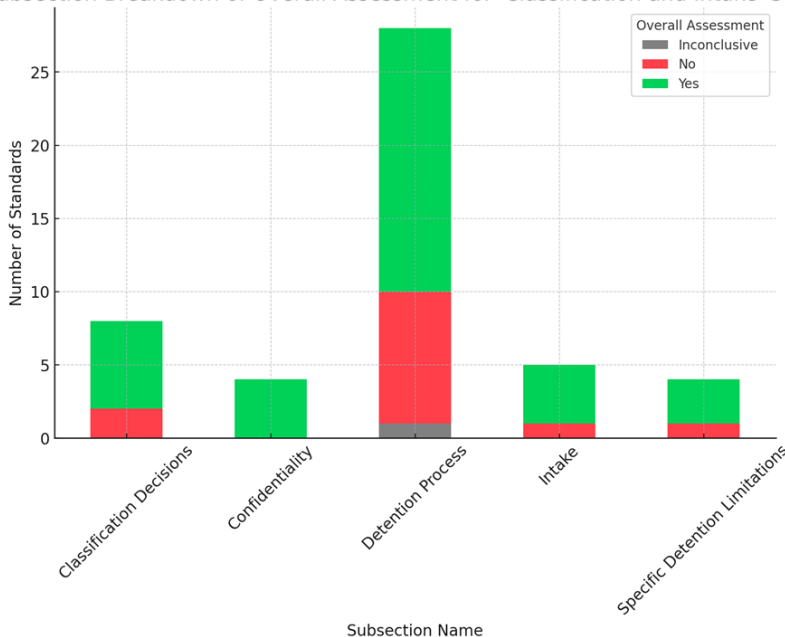
Overall Assessment

The overall assessment for the Classification & Intake section demonstrates that assessors responded “Yes, the facility meets the standard” for approximately 71.4% of the standards.

The audit of the Classification and Intake section of the youth detention facility revealed several strengths. Notably, the facility demonstrates compliance with standards that prioritize the dignity and rights of the youth during the intake process. This includes providing orientation to institutional rules and ensuring youth have access to phone calls for reaching family members immediately after admission. Such practices are crucial in affirming the humanity and potential of youth, setting a positive tone for their stay at the facility.

The overall assessment for the Classification & Intake section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 26.5% of the standards. Therefore, the audit revealed several critical areas for improvement in the Classification and Intake section.

Subsection Breakdown of Overall Assessment for 'Classification and Intake' Section



Specific Areas Needing Improvement

Immigration Status Inquiries

Issue: The facility's practice of inquiring about the youth's immigration status during intake poses a risk of discriminatory treatment and can be distressing for the youth.

Recommendation: Revise intake procedures to eliminate questions about immigration status, aligning with best practices that focus on the immediate needs and rights of the youth, irrespective of their immigration status.

Detention Criteria for Younger Youth

Issue: There is inconsistency in the application of detention criteria for youth under the age of 13, with some cases indicating detention of very young individuals.

Recommendation: Develop and implement clear, written policies that limit the detention of youth under 13 years of age, considering the developmental and psychological impacts of detention on younger children.

Language Access

Issue: The facility shows partial compliance in assessing and meeting the language needs of non-English speaking youth, which is critical for their understanding and participation in the intake process.

Recommendation: Standardize a thorough language assessment procedure upon intake to identify and address the language assistance needs of each youth. Ensure the availability of interpretation services and translated materials to facilitate effective communication.

Orientation and Information Accessibility

Issue: Some youth reported not receiving adequate orientation regarding their rights and responsibilities within the facility.

Recommendation: Ensure that all youth receive a comprehensive orientation immediately upon admission, including both written and verbal explanations in a language they understand. Regularly update and translate orientation materials to reflect current policies and practices.

Documentation and Record Keeping

Issue: In several instances, documentation was incomplete or missing, particularly in areas related to youth intake and assessment.

Recommendation: Enhance documentation practices to maintain complete and accurate records of all intake and assessment procedures. Implement a regular review process to ensure documentation is up-to-date and compliant with standards.

By addressing these specific areas for improvement, the facility can significantly enhance its compliance with standards in the Classification and Intake section, leading to a more equitable and effective environment for all youth in detention.

Conclusions & Recommendations

The facility has shown compliance with all critical standards (Mexico Scale = 1), indicating a commitment to maintaining high-priority areas. This compliance plays a vital role in ensuring that the fundamental rights and needs of the youth are not compromised and that the facility operates within the required legal and ethical boundaries.

The audit revealed deficiencies in documentation practices. In several instances, documents were either not available or only partially completed, undermining the facility's ability to track and assess its adherence to standards effectively. Accurate and comprehensive documentation is vital for accountability and continuous improvement. Thus, enhancing documentation practices should be a priority.

In conclusion, while the facility exhibits strengths in certain areas of the Classification and Intake section, there are notable areas for improvement, particularly concerning policies around intake procedures and documentation practices. Recommendations include:

- Review and revise policies regarding inquiries about youth's immigration status to prevent potential discrimination.
- Establish clearer guidelines for the detention of youth under the age of 13.
- Implement consistent language assessment policies to ensure all youth have equitable access to information and services.
- Improve documentation practices to ensure accurate and complete records are maintained.

These recommendations aim to enhance the facility's operations in the "Classification and Intake" section, contributing to the overall goal of providing a safe, respectful, and legally compliant environment for detained youth.

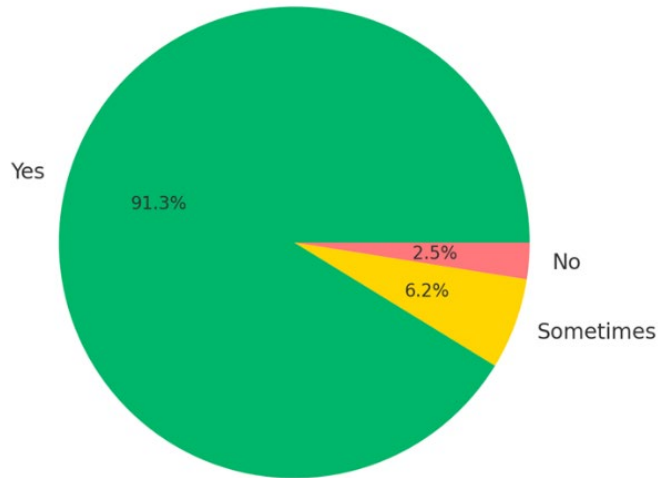
Section II: Health & Mental Health

Health & Mental Health focuses on the medical and mental health needs of youth while in the youth detention facility.

Overall Assessment of Health and Mental Health Care Standards

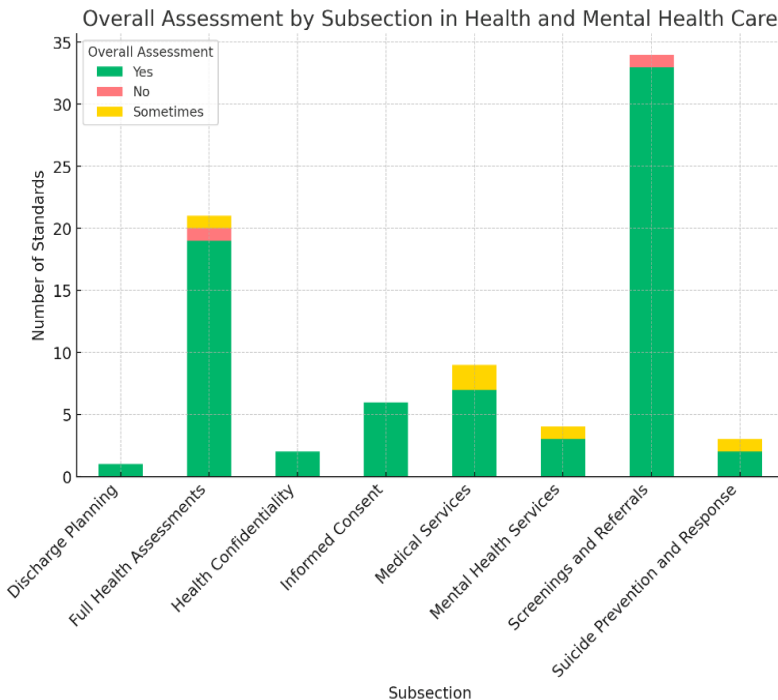
Overall Assessment

The overall assessment for the Health & Mental Health section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 91.3% of the standards.



The facility shows a high level of compliance with most health and mental health care standards. A significant portion of the standards were met, indicating a robust framework in place for addressing the health needs of the youth.

The overall assessment for the Health & Mental Health section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 2.5% of the standards or “Sometimes the facility did meet the standard” for approximately 6.2% of the standards. Therefore, the audit revealed several critical areas for improvement in the Health & Mental Health section.



Specific Areas Needing Improvement

Medical and Mental Health Screenings

Issue: A critical gap was identified in the standard concerning medical and mental health screenings conducted by qualified medical professionals. This shortfall suggests potential risks in the accuracy and effectiveness of the health assessments. Youth and staff interviews revealed inconsistencies in the execution of these screenings, raising concerns about the adequacy of health evaluations and subsequent care plans.

Recommendation: Establish a strict protocol ensuring that all medical and mental health screenings are conducted exclusively by qualified medical professionals. This could

involve periodic credential reviews, additional hiring of certified staff, and regular audits of screening

procedures. Implement a system of checks and balances where screenings are periodically reviewed for quality and compliance.

Staff Training and Protocol Compliance

Issue: Staff interviews indicated a lack of adherence to certain health care protocols, possibly due to gaps in training or understanding of the procedures. This non-conformance could lead to inadequate health care responses, especially in critical situations.

Recommendation: Develop and execute a comprehensive staff training program specifically focused on health care protocols, including the importance of adhering to standards for medical screenings. Organize regular training sessions, workshops, and refresher courses. Include scenario-based training to enhance practical understanding and implementation of health care protocols.

Standardizing Health Care Response Measures

Issue: Need standardization of health care response measures. For example, having a qualified medical professional conducts a medical and mental health screening within 72 hours after admission. Or having the full health assessment include contact with the child's primary care physician or a review of previous medical records within seven days of admission.

Recommendation: Standardize response measures for health care concerns raised during youth and staff interviews to ensure consistency and adequacy of care. Develop a clear, accessible guide for health care response measures and ensure it is widely disseminated and understood among the staff.

Conclusion & Recommendations

The analysis highlights the facility's commitment to maintaining a high standard of health care for its youth. However, specific areas, particularly in medical screenings and staff training, need focused attention to uphold and enhance the quality of care. Implementing these recommendations will bridge the identified gaps, leading to improved health outcomes for the youth in the facility.

Section III: Access

Access focuses on ensuring opportunities for youth to maintain connections with family members, legal assistance, and resources while in the youth detention facility.

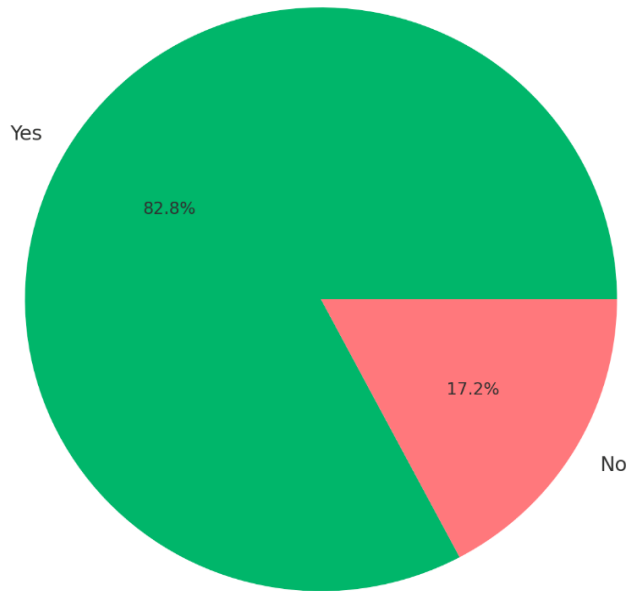
Overall Assessment

The overall assessment for the Access section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 82.8% of the standards.

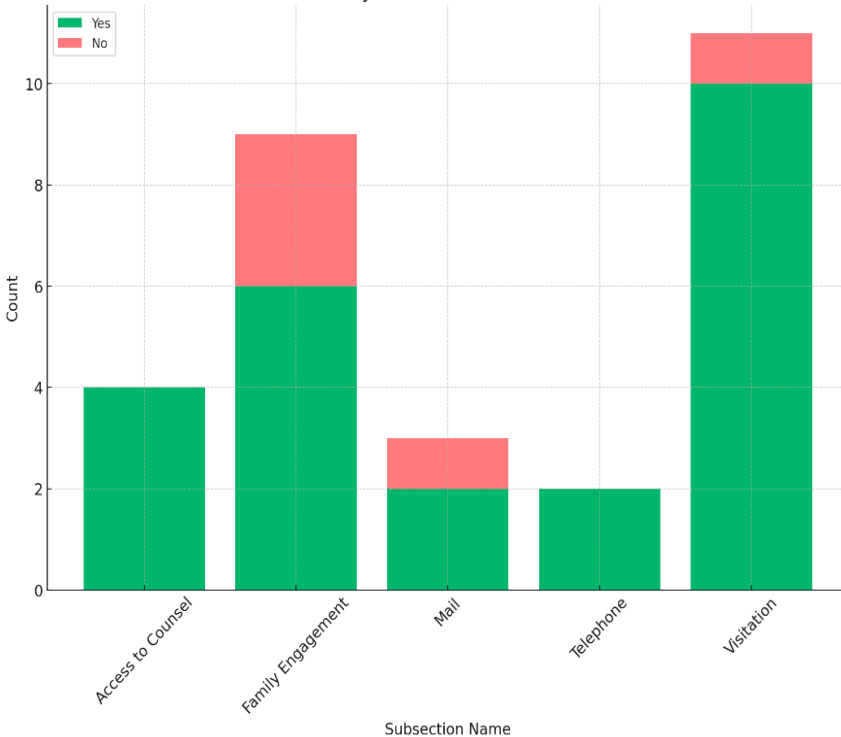
The audit of the Access section revealed a commendable level of compliance with established standards. The facility successfully showcased its commitment to providing adequate access and communication channels for the youth.

The overall assessment for the Access section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 17.2% of the standards. Therefore, the audit revealed several critical areas for improvement in the Access section.

Overall Assessment Distribution in Section III: Access



Subsection Breakdown by Overall Assessment in Section III: Access



Specific Areas Needing Improvement

Inadequate Family Engagement Issue: The facility has not met all standards related to family engagement. This indicates a lack of structured forums for family involvement and insufficient policies on family participation in case planning and decision-making processes. **Recommendation:** Develop and implement a comprehensive family engagement policy. This should include regular, structured forums where families can participate in discussions about their child's care and facility policies. The policy should also outline clear guidelines for family involvement in case planning, ensuring that their insights and concerns

are considered in decision-making processes.

Deficiencies in Visitation Policies

Issue: The audit results indicate unclear and potentially restrictive visitation policies. These deficiencies may limit the quality of interactions between youth and their visitors, impacting the youth's emotional and social well-being.

Recommendation: Conduct a thorough review of the current visitation policies. Revise them to ensure they are clear, fair, and conducive to maintaining healthy relationships between the youth and their families. This should include clearly defined visitation hours, the length of visits, and the provision for special visits under extenuating circumstances. Additionally, consider introducing virtual visitation options to accommodate families who cannot visit in person.

Language Access and Communication Barriers

Issue: Non-conformance in the 'Language Access' grouping points to a significant gap in the facility's ability to provide services to non-English speaking youth and their families. This lack of language support could lead to miscommunications and hinder the youth's ability to fully participate in programs and access services.

Recommendation: Implement a robust language access program. This should include hiring bilingual staff, providing regular training in cultural competence, and ensuring access to professional translation and interpretation services. Additionally, develop a system to identify and document the language preferences of each youth upon intake and ensure that all critical documents and communication are available in the most frequently needed languages.

Documentation and Record-Keeping

Issue: The facility has shown deficiencies in maintaining proper documentation, especially regarding family engagement and visitation records. Accurate and thorough documentation is essential for legal compliance, quality control, and continuous improvement.

Recommendation: Overhaul the documentation process to ensure comprehensive and accurate record-keeping. This includes maintaining detailed records of family interactions, visitation logs, and any exceptions or special arrangements made. Regular audits of these records should be conducted to ensure compliance with policies and standards.

Conclusion & Recommendations

The audit of the "Access" section reveals a facility that largely meets the required standards but faces challenges in documentation, family engagement, and language access. Recommendations include:

- Implement structured forums for regular family engagement. Clarify and document policies regarding family involvement in case planning and facility visitation.
- Develop comprehensive language support services, including hiring bilingual staff and providing translation services.
- Regularly review visitation policies to ensure they align with best practices and meet the needs of the youth and their families.
- Establish a systematic approach to regularly monitor and review compliance with all standards, ensuring consistent adherence and addressing any discrepancies promptly.

Addressing these issues is crucial for the holistic development and well-being of the youth. By implementing the recommended changes, the facility can enhance its effectiveness in providing a supportive and accessible environment for the detained youth.

Section IV: Programming

Programming focuses on the quality of the educational and extracurricular offerings within the youth detention facility, including teacher compensation, availability of educational resources, parental involvement, and adherence to federal laws concerning special education.

Overall Assessment

The overall assessment for the Programming section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 95.5% of the standards.

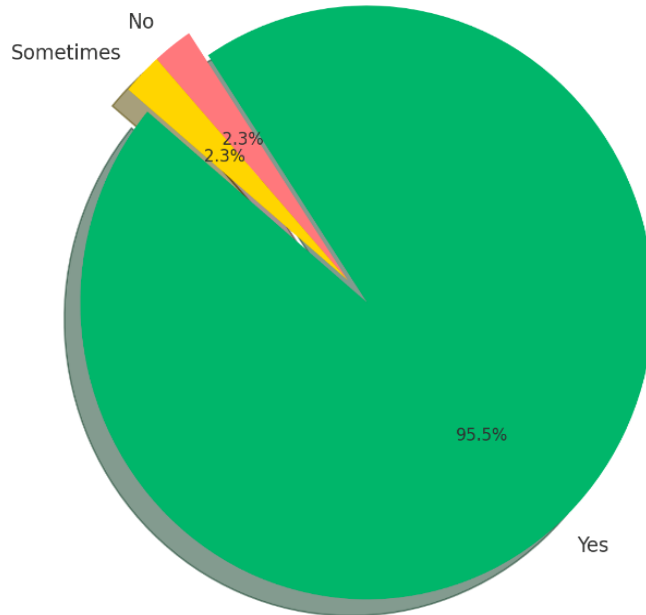
This impressive figure underscores the facility's dedication to maintaining a robust educational program that aligns with or even exceeds community standards. This indicates a strong alignment with the goals of providing comprehensive, inclusive educational programming and suggests that with minor adjustments, the facility could achieve complete compliance.

The overall assessment for the Programming section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 2.3% of the standards or “Sometimes the facility did meet the standard” for approximately 2.3% of the standards. Therefore, the audit revealed several critical areas for improvement in the Programming section.

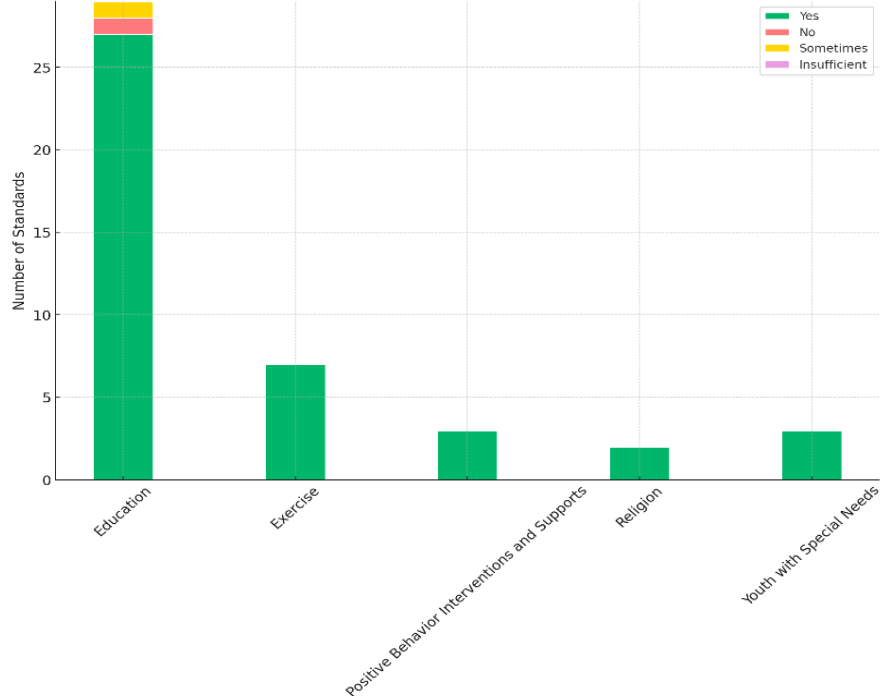
Specific Areas Needing Improvement

Enhance Educational Resources Recommendation: Further diversify and update educational materials, with an emphasis on incorporating more digital learning tools and platforms. This will prepare youth for a technology-driven educational landscape and accommodate various learning preferences.

Overall Assessment of Programming Section



Overall Assessment by Subsection in the Programming Section



Expand Parental Engagement Initiatives

Recommendation: Develop and implement a more comprehensive parental engagement strategy, including regular updates on their child's educational progress, workshops on supporting learning at home, and opportunities for parents to contribute to the educational programming.

Address Areas of "No" and "Sometimes" Assessments

Recommendation: Conduct a detailed review of standards assessed as "No" and "Sometimes" to identify specific areas for improvement. Develop targeted action plans to address these areas, potentially focusing on enhancing the inclusivity of programming and ensuring that all educational materials are current and relevant.

Continuous Professional Development for Educators

Recommendation: Invest in ongoing professional development opportunities for educators, focusing on special education, digital learning tools, and innovative teaching strategies. This will ensure that the educational staff remains at the forefront of best practices and can effectively meet the diverse needs of detained youth.

Conclusion & Recommendations

The Programming section of the youth detention facility audit reveals a commendable commitment to providing detained youth with educational and recreational programming that not only meets, but in many aspects exceeds the standards. With an impressive 95.45% of standards within the Education subsection receiving an overall assessment of "Yes," the facility demonstrates a substantial compliance level, showcasing a robust framework that supports the educational growth and well-being of its residents.

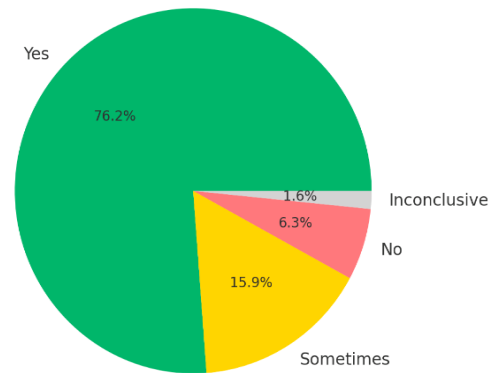
By addressing these targeted areas, the facility can further solidify its position as a leader in providing high-quality, inclusive, and comprehensive programming that supports the holistic development of detained youth. This commitment to excellence not only benefits the youth directly but also contributes to the broader goals of rehabilitation, reintegration, and the fostering of positive outcomes for these individuals as they navigate their paths forward.

In conclusion, while the facility exhibits a high degree of compliance and dedication to quality programming, embracing the recommendations provided will ensure that it continues to evolve and adapt in response to the changing needs and best interests of the youth it serves. This proactive approach will undeniably strengthen the facility's capacity to offer programming that is not only compliant with standards but also innovative, impactful, and reflective of a deep commitment to the welfare and future success of every young person in its care.

Section VI: Training & Staff Supervision

Training focuses on the hiring, training, and supervising of staff in the youth detention facility.

Pie Chart of Overall Assessments for 'Training and Supervision of Employees' Section



Overall Assessment

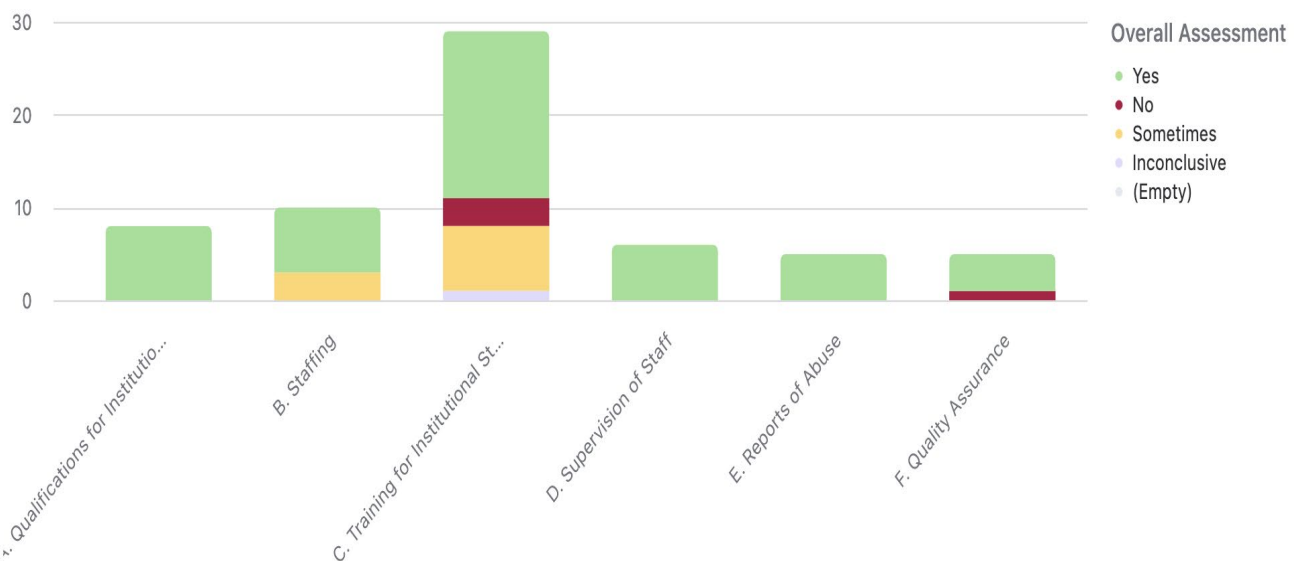
The overall assessment for the Training & Staff Supervision section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 76.2% of the standards.

The overall assessment of the facility in this section shows a commendable level of compliance with the standards.

The overall assessment for the Training & Staff Supervision section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 6.3% of the standards or “Sometimes the facility did meet the standard” for approximately 15.9% of the standards. Therefore, the audit revealed several critical areas for improvement in the Training & Staff Supervision section.

Training and supervision of staff

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Specific Areas Needing Improvement

Staff Language Skills and Cultural Competence

Issue: There is a notable gap in staff ability to communicate in languages other than English, which is critical given the diverse linguistic background of the youth. Additionally, the cultural competence of the staff appears limited, affecting their ability to connect with and effectively manage youth from various cultural backgrounds.

Recommendation: Implement a structured language training program, focusing on languages most commonly spoken by the facility's youth. Develop a cultural competence curriculum that includes modules on understanding cultural nuances, effective communication strategies, and inclusive practices. Regular assessments of staff language skills and cultural awareness should be documented and reviewed periodically.

Staff-to-Youth Ratio

Issue: The facility sometimes fails to meet the ideal 1:8 staff-to-youth ratio, especially during peak hours and activities, impacting the quality of supervision and safety.

Recommendation: Conduct a thorough analysis of current staffing patterns and identify specific times and areas where the ratio falls short. Develop a strategic staffing plan that includes hiring additional staff or rearranging existing staff schedules. Documentation should include detailed shift schedules, staff attendance records, and periodic reviews of staff-to-youth ratios.

Backup Staff Support

Issue: The facility's current system for backup staff support is inadequate, leading to delayed responses in critical situations.

Recommendation: Create a comprehensive backup staff plan, which includes a roster of on-call staff members and a clear protocol for emergency situations. Document each instance where backup support is called upon, including response times and the effectiveness of the support provided.

Designation of Responsibilities

Issue: There is ambiguity in the roles and responsibilities of staff members, leading to operational inefficiencies.

Recommendation: Revise and clearly define job descriptions for all staff roles. Develop a comprehensive responsibilities matrix that outlines the specific duties of each staff member. Regularly update this matrix and ensure it is accessible to all staff. Documentation should include signed acknowledgments from staff members, indicating their understanding of their roles and responsibilities.

Facility Administrator Oversight

Issue: Inconsistent oversight by the facility administrator in living and programming areas hampers the facility's ability to maintain standards and address issues proactively.

Recommendation: Establish a mandatory schedule for the facility administrator to conduct regular inspections of all areas. Develop a standardized inspection checklist that covers all critical aspects of facility operations. Document each inspection, including findings and follow-up actions taken.

Youth Advisory Board

Issue: The absence of a youth advisory board limits the opportunity for youth participation in facility improvements and decision-making.

Recommendation: Expedite the formation of a youth advisory board, ensuring representation from various backgrounds and ages. Establish regular meetings and document agendas, discussions, and outcomes. Ensure that feedback from the board is actively incorporated into facility policies and practices.

Other issues include: a lack of comprehensive records detailing staff qualifications, training history, and performance evaluations. Documentation related to program planning, implementation, and evaluation that is

incomplete or outdated. Inconsistencies in documenting incidents and staff responses, including details on the nature of incidents, actions taken, and follow-up measures. Inadequate documentation of ongoing compliance monitoring efforts and corrective actions taken for non-compliance issues. Providing training on procedures for appropriate referrals of medical and mental health needs, including transportation to medical or mental health facilities. Providing training on policies and practices regarding signs and symptoms of mental illness and emotional disturbance and signs and symptoms of medical emergencies, including acute manifestations of chronic illnesses (e.g., asthma, seizures) and adverse reactions to medication.

Conclusion & Recommendations

The facility demonstrates a commendable level of compliance with the standards. However, specific areas require immediate action, particularly in enhancing staff capabilities, ensuring appropriate staff-to-youth ratios, and improving documentation practices. Addressing these areas will significantly enhance the facility's effectiveness and the well-being of the youth.

Section VI: Environment

Environment focuses on the surroundings and quality-of-life for youth in the youth detention facility, including cleanliness, clothing, and food.

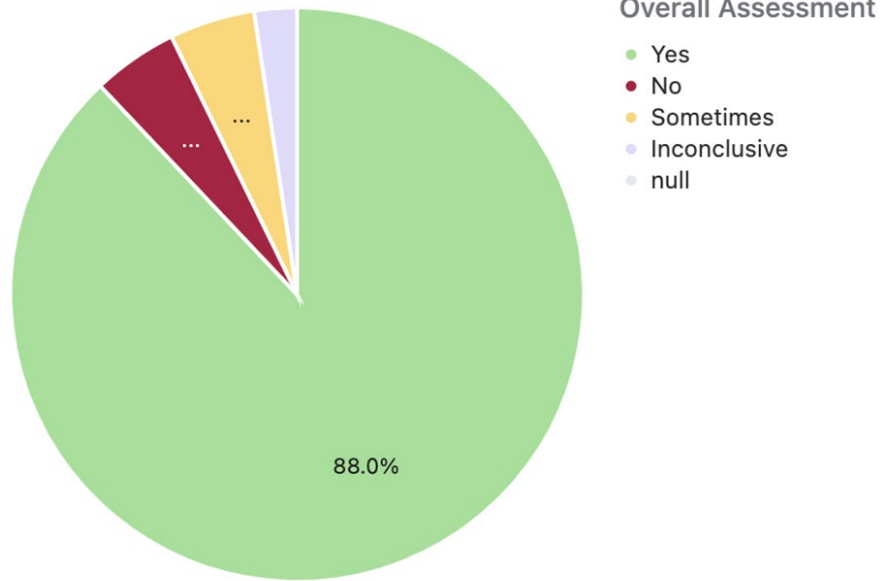
Overall Assessment

The overall assessment for the Environment section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 88.0% of the standards.

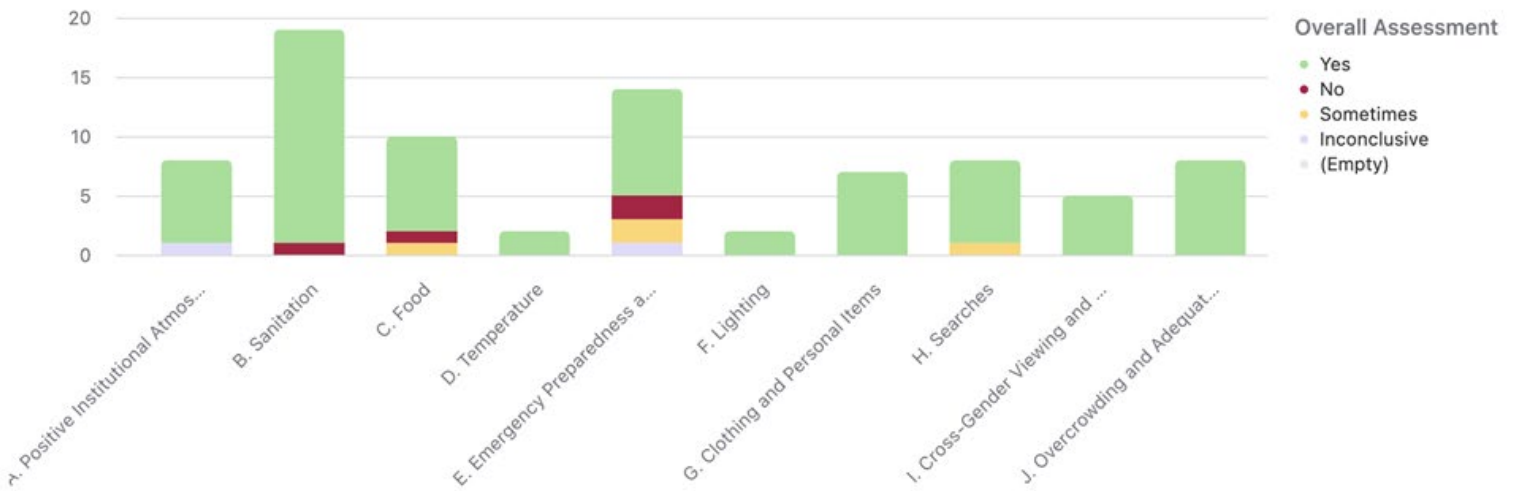
The audit of the Environment section reveals a commendable level of compliance with established standards, showcasing the facility's dedication to creating a supportive and positive setting for youth.

The overall assessment for the Environment section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 4.82% of the standards or “Sometimes the facility did meet the standard” for approximately 4.82% of the standards. Therefore, the audit revealed several critical areas for improvement in the Environment section.

Environment



Environment



Specific Areas Needing Improvement

Enhanced Staff Training and Youth Engagement

Issue: Limited instances of 'No' and 'Sometimes' ratings may reflect gaps in staff training or youth engagement in positive behavior support programs.

Recommendation: Implement comprehensive staff training focused on positive reinforcement techniques and youth-centered engagement practices. Encourage youth participation in program development to ensure interventions are responsive to their needs.

Facility Environment and Personalization

Issue: The physical environment plays a significant role in establishing a positive atmosphere. Areas marked as 'Insufficient' or 'No' suggest room for improvement in creating a more welcoming and personalized space.

Recommendation: Undertake initiatives to enhance the living and communal areas with input from youth. This could include art projects, facility beautification efforts, and personalization of living spaces to make the environment more conducive to positive outcomes.

Language Access and Cultural Sensitivity

Issue: The 'Yes' rating in language access indicates good practices but also highlights the ongoing need for cultural sensitivity and inclusiveness.

Recommendation: Expand language access services and cultural competency training for staff to ensure all youth feel respected and understood, regardless of their cultural or linguistic background.

Consistency in Search Procedures

Issue: The "Sometimes" assessments suggest variability in how search procedures are applied, which may lead to inconsistencies in practice.

Recommendation: Standardize search procedures through enhanced staff training and clear policy guidelines to ensure consistent application of searches across all situations and staff members. Regularly review and update search protocols to reflect best practices and feedback from youth and staff.

Youth Privacy and Dignity during Searches

Issue: While the majority of searches respect youth privacy and dignity, the "Sometimes" rating indicates there may be occasions where these aspects could be better protected.

Recommendation: Implement additional measures to safeguard youth privacy and dignity during searches, such as the use of privacy screens or ensuring searches are conducted by staff of the same gender as the youth. Additionally, consider introducing or reinforcing the use of less-invasive search techniques where feasible.

Training and Awareness

Issue: Ensuring that all staff are fully trained and aware of the search policies and the importance of conducting searches respectfully is essential for full compliance.

Recommendation: Conduct regular training sessions for all staff on search protocols, emphasizing the importance of respecting youth privacy and dignity. Include scenario-based training to cover a range of search situations, ensuring staff are prepared to conduct searches appropriately in all circumstances.

In conclusion, the "Searches" subsection demonstrates a commendable level of compliance with established standards, reflecting the facility's commitment to conducting searches in a respectful and appropriate manner.

By addressing the identified issues with targeted recommendations, the facility can further enhance its search procedures, ensuring consistent adherence to best practices and the protection of youth rights and dignity.

Areas Not Meeting Sanitation Standards

Issue: The standards rated as "No" suggests certain areas or practices within the facility fail to uphold the required sanitation levels, potentially compromising the health and safety of the youth and staff.

Recommendation: Conduct a detailed review of the specific areas or practices failing to meet sanitation standards. Implement immediate corrective actions, such as enhanced cleaning protocols, repair or replacement of sanitation facilities, and additional staff training on hygiene practices. Regular audits should be conducted to ensure sustained compliance.

Enhancing Sanitation Awareness and Practices

Issue: While the majority of sanitation practices are compliant, continuous education and reinforcement are essential to maintain and improve these standards.

Recommendation: Develop ongoing sanitation and hygiene education programs for both staff and youth, emphasizing the importance of cleanliness and personal hygiene in preventing illness. Incorporate regular feedback sessions to identify areas for improvement and ensure that sanitation practices evolve to meet health and safety needs effectively.

Monitoring and Evaluation of Sanitation Standards

Issue: Continuous monitoring is crucial to ensuring that sanitation standards are consistently met and maintained throughout the facility.

Recommendation: Establish a robust monitoring and evaluation system for sanitation practices, involving regular inspections and audits. Utilize checklists and reporting tools to document compliance and identify areas requiring attention, facilitating timely interventions to address any deficiencies.

Consistency in Meal Quality and Nutrition

Issue: The "Sometimes" rating indicates occasional lapses in maintaining consistent meal quality and nutrition, which are essential for the health and development of detained youth.

Recommendation: Review and standardize meal planning and preparation processes to ensure consistent adherence to nutritional standards. Implement regular training for food service staff on nutritional guidelines and quality control measures. Conduct frequent meal quality audits to identify and address any variations.

Addressing Non-Compliance in Food Service Standards

Issue: The standards rated as "No" highlight specific deficiencies in meeting certain food service standards, potentially impacting the quality and safety of meals provided to youth.

Recommendation: Conduct a comprehensive review of all food service operations to pinpoint the causes of non-compliance. Develop and implement a corrective action plan that may include equipment upgrades, process improvements, and enhanced food safety protocols. Engage a registered dietitian to ensure meal plans meet the dietary needs of all youth, including those with special dietary requirements.

Improving Meal Service Experience

Issue: Variability in the meal service experience, as suggested by the "Sometimes" assessments, may affect youth's satisfaction with meals and their overall dining experience.

Recommendation: Solicit feedback from youth regarding their meal service experience and use this input to make improvements. Consider introducing meal choice programs, where feasible, to increase youth satisfaction. Ensure that dining areas are welcoming and conducive to a positive mealtime atmosphere.

Conclusion & Recommendations

The audit of the "Environment" section at the facility, encompassing the critical subsections of Searches, Sanitation, Food, Emergency Preparedness and Fire Safety, alongside the broader considerations of creating a Positive Institutional Atmosphere, provides a comprehensive overview of the facility's commitment to maintaining a safe, healthy, and supportive environment for detained youth. The analysis reveals a commendable level of compliance across several areas, with a significant majority of standards receiving a "Yes" in their overall assessment, underscoring the facility's dedication to upholding high standards of care and safety.

However, the audit also highlights specific areas requiring attention and improvement. The presence of "No" and "Sometimes" assessments across the subsections indicates inconsistencies and gaps that, if addressed, could elevate the facility's operational standards to even higher levels of excellence. Recommendations provided in each subsection report aim to address these identified issues, focusing on enhancing staff training, improving facility policies and procedures, and ensuring that all practices fully align with best practices and regulatory requirements.

In conclusion, the facility demonstrates a strong foundation in environmental standards critical to the well-being and rehabilitation of youth in detention. By continuing to address the identified areas for improvement, the facility can further enhance its environment, ensuring it not only meets but exceeds the necessary standards for youth care and safety. The dedication of facility staff and management to reviewing and implementing these recommendations will be pivotal in achieving these goals, ultimately fostering a more positive, healthy, and safe environment for all youth in their care.

Section VII: Restraints, Room Confinement, Due Process, & Grievances

Restraints, Room Confinement, Due Process, & Grievances focuses on the policies for restraints, room confinement, discipline, due process, and responses to incidents.

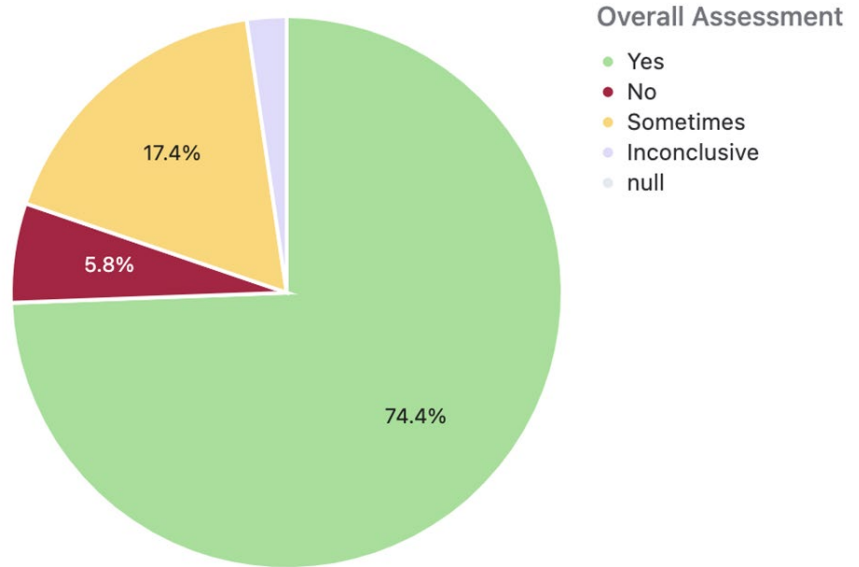
Overall Assessment

The overall assessment for the Restraints, Room Confinement, Due Process, & Grievances section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 74.4% of the standards.

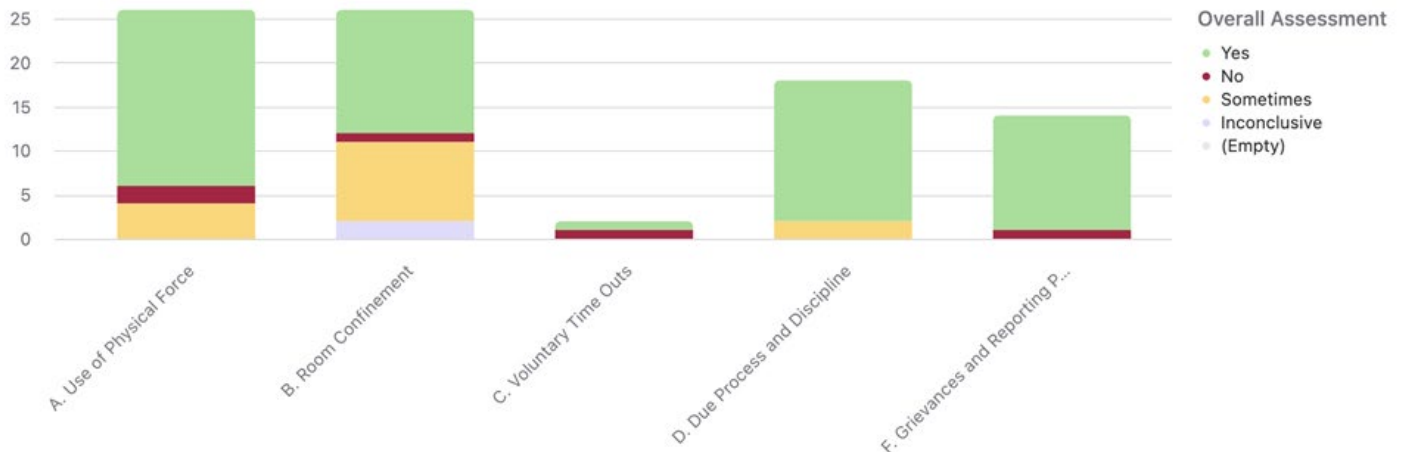
In the review of the Restraints, Room Confinement, Due Process, & Grievances section, the audit reveals a robust framework aimed at safeguarding the rights and well-being of youth in the detention center.

The overall assessment for the Restraints, Room Confinement, Due Process, & Grievances section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 5.8% of the standards or “Sometimes the facility did meet the standard” for approximately 17.4% of the standards. Therefore, the audit revealed several critical areas for improvement in the Restraints, Room Confinement, Due Process, & Grievances section.

Restraints, room confinement, due process and grievances and



Restraints, room confinement, due process and grievances and



Specific Areas Needing Improvement

Inconsistent Documentation of Restraint Use:

Issue: Two standards regarding the documentation of physical force and restraint use did not meet full compliance, receiving an "Overall Assessment" of "No".

Recommendation: Implement a comprehensive review and update of documentation practices to ensure all instances of physical force and restraint use are accurately recorded. Enhance staff training on documentation requirements and establish regular audits of restraint use records to enforce compliance.

Partial Involvement of Qualified Professionals:

Issue: The involvement of qualified medical and mental health professionals in reviewing restraint incidents and the development of written policies and procedures for restraint use received "Sometimes" in their assessments, indicating inconsistency in practice.

Recommendation: Strengthen the policy framework to mandate the review of all restraint incidents by qualified professionals. Facilitate cross-departmental collaboration to ensure these policies are effectively implemented and monitored. Increase training for staff on the importance of these reviews in safeguarding youth health and well-being.

Suboptimal Restraint Review Processes:

Issue: The existence and effectiveness of a restraint committee, as well as the assurance that youth subjected to restraints receive a follow-up, were areas of partial compliance.

Recommendation: Reevaluate the structure and operation of the restraint committee to include broader expertise and representation, particularly from mental health professionals. Formalize follow-up procedures for youth subjected to restraints, ensuring they receive appropriate medical and psychological support.

Inconsistent Use of Least Restrictive Techniques:

Issue: The application of least restrictive techniques before resorting to room confinement was identified as inconsistent, with one standard rated "No" and several "Sometimes".

Recommendation: Enhance staff training on de-escalation techniques and alternative interventions to ensure that room confinement is used only as a last resort. Develop clear guidelines and decision-making frameworks to guide staff in exploring all possible alternatives prior to confinement.

Lack of Specialized Programming for Confined Youth:

Issue: There is a notable gap in the development of individualized programming for youth placed in room confinement, as indicated by multiple standards assessed as "Sometimes".

Recommendation: Implement a structured approach to developing tailored, constructive programming for youth in confinement. This should include educational activities, mental health support, and other rehabilitative services designed to address the specific needs of each confined youth.

Inadequate Documentation and Review of Confinement Incidents:

Issue: The documentation of incidents leading to room confinement and the subsequent review of these incidents by facility administrators and qualified professionals is inconsistently performed.

Recommendation: Standardize and enforce comprehensive documentation procedures for all incidents of room confinement. Establish regular review protocols to ensure oversight, accountability, and continuous improvement in confinement practices.

Communication with Parents or Guardians:

Issue: The process for notifying parents or guardians about their child's confinement and the reasons behind it remains unclear, with some standards rated as "Inconclusive".

Recommendation: Formalize and consistently apply procedures for promptly informing parents or guardians of any instance of room confinement, including the rationale and expected duration. This communication should be respectful, informative, and supportive of family engagement in addressing underlying issues.

Inadequate Documentation of Voluntary Time Outs:

Issue: One standard related to the documentation of voluntary time outs was assessed as "No," indicating a lack of proper record-keeping for these incidents.

Recommendation: Implement a standardized documentation process for all voluntary time outs, ensuring that each incident is recorded accurately and thoroughly. This will facilitate review and oversight, enabling staff to monitor the use of voluntary time outs and assess their effectiveness as a self-regulation strategy.

Consideration of Individual Needs:

Issue: The facility's consideration of a youth's disability, mental health, and trauma history in the context of voluntary time outs was marked as "Sometimes," suggesting inconsistent practices.

Recommendation: Develop and implement guidelines that require staff to consider each youth's unique needs and background when facilitating or offering voluntary time outs. Training should emphasize the importance of this individualized approach, ensuring that staff are equipped to support each youth effectively.

Protection of Basic Rights:

Issue: The standard ensuring that youth are not deprived of basic rights during voluntary time outs received a "Sometimes" rating, raising concerns about the consistent application of policies.

Recommendation: Reaffirm and enforce the policy that under no circumstances should youth be deprived of basic rights, including access to restrooms and necessary medical care, during voluntary time outs. Regular training sessions should reinforce this policy, and compliance should be closely monitored through audits and reviews.

Limited Involvement of Third Parties in the Grievance Process:

Issue: The facility's current practices restrict third parties, including legal counsel and parents, from assisting youth in the grievance process, as indicated by a standard assessed as "No."

Recommendation: Revise the facility's grievance policies to explicitly permit and facilitate the involvement of third parties in supporting youth throughout the grievance process. This should include clear guidelines on how third parties can contribute and the steps the facility will take to ensure these individuals are integrated effectively into the process, respecting the youth's rights and confidentiality.

Conclusion & Recommendations

The facility has work to do to maintain a safe and respectful environment is evident through the high percentage of standards met. The audit focused on the use of restraints, ensuring that policies and procedures are in place and effectively implemented to protect the youth. The results underscore the importance of continuous improvement and the need for targeted actions in areas of partial compliance and non-compliance.

Section VIII: Safety

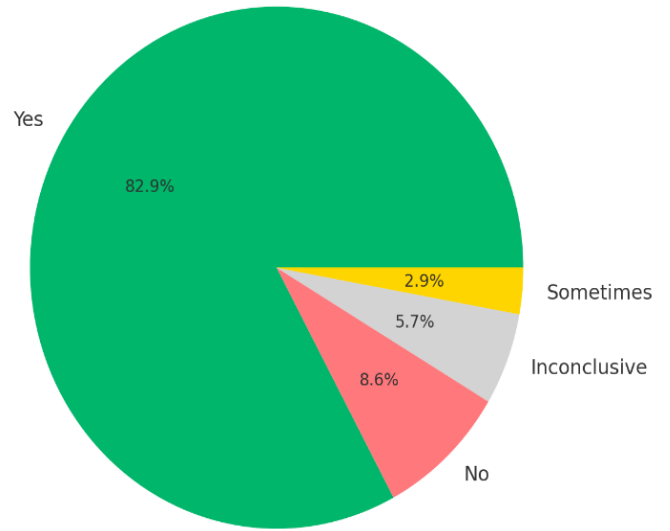
Safety focuses on protections for the safety of youth and staff, including prevention, responses to incidents, and support.

Overall Assessment

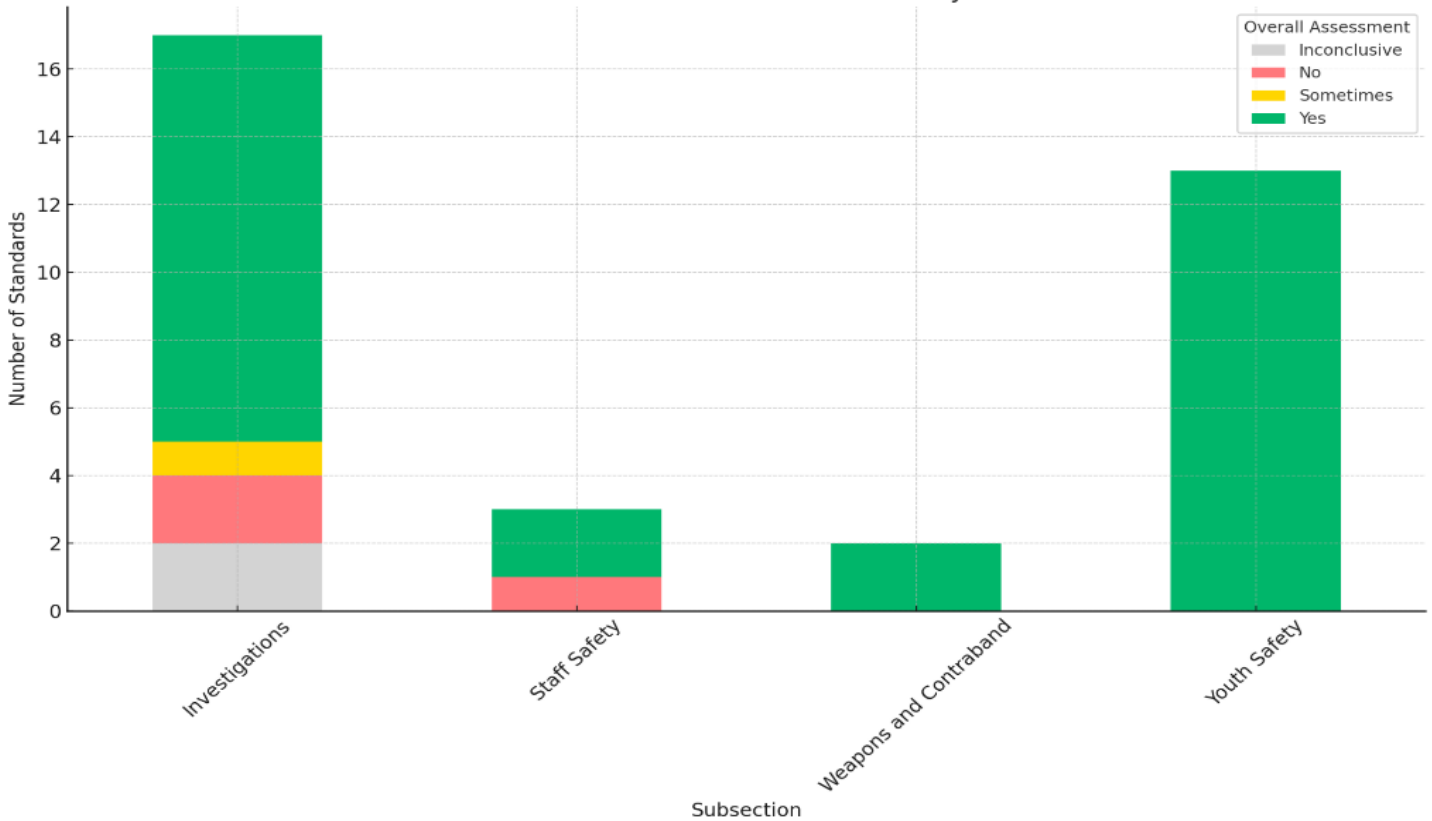
The overall assessment for the Safety section demonstrates that assessors responded “Yes, the facility met the standard” for approximately 82.9% of the standards.

The overall assessment for the Safety section also demonstrates that assessors responded “No, the facility did not meet the standard” for approximately 8.6% of the standards or “Sometimes the facility did meet the standard” for approximately 2.9% of the standards. Therefore, the audit revealed several critical areas for improvement in the Safety section.

Pie Chart of Overall Assessment Responses



Stacked Bar Chart of Overall Assessment by Subsection



Specific Areas Needing Improvement

Standards Not Met

Issue: There were 3 specific standards within the safety section that the facility failed to meet. These unmet standards are critical touchpoints that directly impact the overall safety and well-being of the youths in the facility.

Recommendation: Conduct an in-depth review of these particular standards to understand the underlying reasons for non-compliance. Develop a targeted action plan that addresses these specific gaps, with a clear timeline and accountability measures. Regular audits should be conducted to monitor the implementation of these action plans.

Family Engagement

Issue: Under the grouping of 'Family Engagement', one standard was not met. This indicates a gap in the facility's practices related to involving families in the safety and welfare of the detained youths. Family engagement is crucial for the holistic well-being and rehabilitation of youths.

Recommendation: Enhance protocols and practices to increase family involvement. This could involve developing family-oriented programs, regular communication channels, and feedback mechanisms where families can contribute to the safety protocols. Training sessions for staff on the importance of family engagement and how to effectively facilitate it could also be beneficial.

Continuous Monitoring and Improvement

Issue: While the facility has shown commendable compliance with most standards, continuous improvement is essential to maintain these standards and adapt to any changes or new challenges that may arise. The absence of critical standards (Mexico Scale 1) being unmet should not lead to complacency.

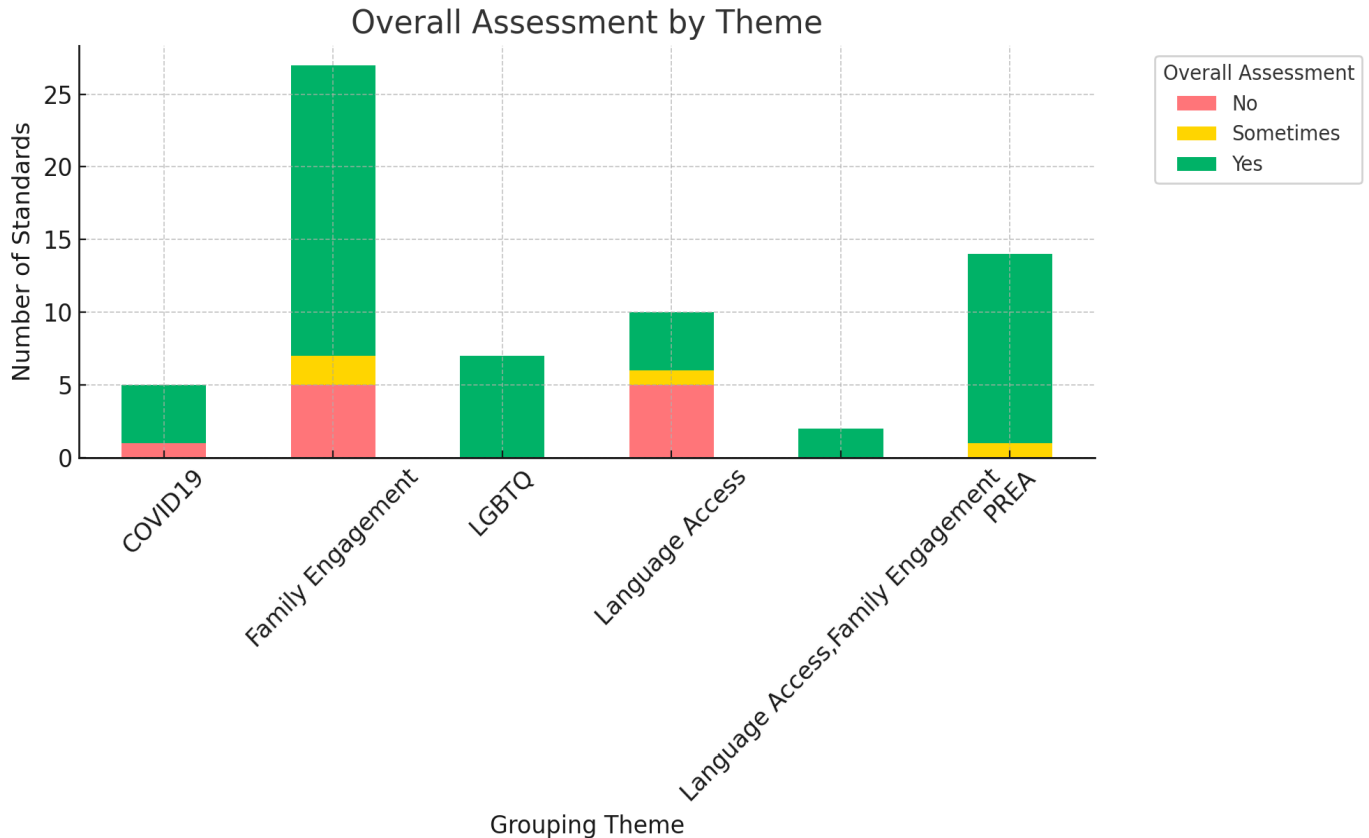
Recommendation: Implement a continuous quality improvement program that includes regular audits, staff training, and updating of safety protocols. This program should also incorporate a mechanism for feedback from youths, families, and staff to identify areas of improvement. Regular training sessions should be held to keep the staff updated on best practices and changes in safety protocols.

Conclusion & Recommendations

The facility shows strong adherence to safety protocols in many areas, but specific attention is needed on the few standards that are not met, especially in terms of family engagement. Continuous improvement efforts are key to sustaining high standards of safety and care.

Thematic Review of Standards

Within the assessment, there were several topics that were present in multiple sections and therefore did not neatly fit into one section or another. This section provides an overview of the results of the assessment on each of these themes, including COVID-19, Family Engagement, LGBTQ Concerns, Language Access, & PREA.



Specific Areas Needing Improvement

COVID-19

Issue: The single "No" assessment indicates a critical area where the facility's COVID-19 protocols may fall short of best practices or compliance standards. Given the lack of specific details on which standard was marked "No," recommendations will focus on general improvements in COVID-19 management within detention facilities.

Recommendation: Enhance COVID-19 prevention and management protocols by ensuring that:

- All staff and youth undergo regular, timely testing to promptly identify and isolate cases.
- Vaccination efforts are maximized for both staff and youth, providing education on the benefits and facilitating access to vaccines.
- Hygiene and sanitation practices are rigorously enforced, with ample access to handwashing stations and hand sanitizer.
- Physical distancing measures are implemented effectively within the facility, considering the unique challenges of the detention environment.

- The facility develops a clear, comprehensive plan for responding to outbreaks, including quarantine protocols that minimize the impact on youth's mental and physical well-being.
- Communication with youth and their families about COVID-19 policies and health status is clear, consistent, and compassionate, ensuring that all parties are well-informed and reassured about the measures in place to protect their health.
- Given the absence of specific details on documentation deficiencies related to the COVID-19 standards in the provided data, the recommendation is to ensure that all policies, procedures, and COVID-19 related interventions are thoroughly documented. This includes keeping detailed records of testing, vaccination, isolation cases, and communications with public health authorities. Such documentation will be crucial for ongoing monitoring, evaluation of protocol effectiveness, and for making informed adjustments as the pandemic evolves.

Family Engagement

Issue: Inconsistent Family Engagement Practices

Despite a strong showing of compliance in many areas, the six "No" assessments indicate that certain practices or policies may not fully support or facilitate family engagement. These could include limitations on visitation, communication barriers, or insufficient programming that includes family participation.

Recommendation:

- **Enhance Visitation Policies:** Increase the flexibility of visitation hours to accommodate varying schedules of family members. Consider virtual visitation options to supplement in-person visits, especially for families who live far away or for health-related concerns.
- **Improve Communication:** Ensure that all families are provided with clear, comprehensive information about how they can engage with and support their detained family members. This could include orientation sessions, written guides, and a dedicated staff member to answer questions and facilitate engagement.
- **Family Involvement in Programming:** Develop and implement programs that allow for meaningful family participation, such as family therapy sessions, educational workshops, and special family events.

Issue: Partial Compliance in Some Areas

The "Sometimes" assessments suggest that while the facility may have policies in place to promote family engagement, their implementation may be inconsistent or their effectiveness varies.

Recommendation:

- **Regular Policy Review & Staff Training:** Conduct regular reviews of family engagement policies to identify and address any barriers to their effective implementation. Provide ongoing training for staff on the importance of family engagement and best practices for facilitating it.
- **Feedback Mechanism:** Establish a structured feedback mechanism for families to share their experiences and suggestions for improving family engagement practices. Use this feedback to make informed adjustments to policies and programs.
- **Documentation:** Given the specific challenges identified through the "No" and "Sometimes" assessments, the facility should ensure that all interactions, programs, and policies related to family engagement are well-documented. This includes records of visitations (both in-person and virtual), communication attempts and successes, and participation in family-inclusive programming. Such documentation will be essential for evaluating the effectiveness of family engagement strategies and for making data-driven improvements.

Language Access

Issue: Inadequate Provision for Non-English Speakers

The six "No" assessments suggest that certain aspects of the facility's operations may not adequately accommodate non-English speakers. This could involve insufficient translation services, lack of multilingual staff, or inadequately translated materials.

Recommendation:

- **Expand Translation Services:** Ensure that translation services, both in-person and through technology, are readily available for all aspects of the detention experience, including intake, medical care, legal discussions, and family communication.
- **Multilingual Staff and Training:** Strive to hire staff fluent in the languages most commonly spoken by the youth and their families. Additionally, provide language access training for all staff, focusing on the use of translation services and cultural competence.
- **Comprehensive Material Translation:** Translate all relevant materials, including orientation guides, legal rights information, and family communication resources, into the primary languages spoken by the detained youth and their families.

Issue: Partial Compliance and Inconsistency

The "Sometimes" assessment indicates that while the facility may have policies intended to provide language access, their implementation is inconsistent or their effectiveness is variable.

Recommendation:

- **Policy Review and Implementation Oversight:** Regularly review language access policies to identify barriers to their effective implementation. Establish a system for monitoring and ensuring consistent application of these policies across all areas of facility operation.
- **Feedback and Continuous Improvement:** Create mechanisms for receiving feedback from non-English-speaking youth and their families regarding the effectiveness of language access services. Use this feedback to make continuous improvements.
- **Documentation:** The facility should ensure comprehensive documentation of all language access services provided, including records of translation and interpretation services used, materials translated, and staff language training. Such documentation is crucial for evaluating the effectiveness of the language access program and identifying areas for further enhancement.

PREA (Prison Rape Elimination Act)

Issue: Incomplete Compliance in Specific Areas

While the absence of "No" assessments indicates broad compliance with PREA standards, the singular "Sometimes" assessment points to areas where implementation may be inconsistent or partially effective. This could relate to staff training, youth education on PREA rights and reporting mechanisms, or the thoroughness of incident investigations.

Recommendation:

- **Enhanced Staff Training:** Ensure that all staff, including new hires and contractors, receive comprehensive PREA training that is regularly updated to reflect best practices and legal requirements. Training should emphasize the importance of vigilance, the procedures for reporting and responding to allegations, and the support available to victims.
- **Youth Education and Awareness:** Strengthen efforts to educate youth on their rights under PREA, the importance of reporting sexual abuse or harassment, and the mechanisms in place to ensure their reports are taken seriously and acted upon. This education should be accessible to all youth, regardless of language proficiency or literacy level.

- Investigation Protocols: Review and refine investigation protocols to ensure that all allegations of sexual abuse or harassment are investigated promptly, thoroughly, and impartially. This includes securing evidence, interviewing involved parties, and taking appropriate action based on investigation findings.
- Documentation: To support the effective implementation of PREA standards, the facility must maintain meticulous documentation of all training activities, educational sessions for youth, reported incidents of sexual abuse or harassment, investigation outcomes, and follow-up actions. This documentation will be critical for ongoing monitoring, ensuring accountability, and facilitating continuous improvement in PREA compliance.