# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIPPI JACKSON DIVISION HONORABLE DANIEL P. JORDAN III, U.S. DISTRICT JUDGE

# J.H., ET AL, VS HINDS COUNTY MISSISSIPPI 3:11-CV00327 DPJ-FKB

**Monitoring Compliance Report:** 

Report Draft Date November 28, 2012 Report Date December 12, 2012

> Submitted by Leonard B. Dixon, MSPA 24420 Crescent Drive Woodhaven, MI 48183 734 642-7412

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# The Second Monitor's Report Henley-Young Juvenile Justice Leonard B. Dixon

#### **Background**

On March, 28, 2012, Hinds County, Mississippi entered into a settlement agreement ordained and adjudged by Judge Daniel P. Jordan III, for the United States District Court Southern District of Mississippi, Jackson Division, regarding conditions of confinement at the Henley-Young Juvenile Justice Center, located in Jackson, Mississippi. According to the order the settlement agreement and its specifics requirements "shall apply to Henley-Young and any contractor that may provide services to Henley-Young in the future. The term "youth" herein often refers to individuals confined at Henley-Young. "The parties" understand that the requirements contained herein will be implemented without undue delay as soon as practicable. Unless otherwise indicated herein, the parties will collaborate to make all reasonable efforts to ensure that within 90 days of the effective date of the agreement, policies, and procedures consistent with the agreement are drafted, in the process of being implemented, and that all detention staff received training on the requirements. The parties agree and understand that the implementation will be an ongoing process that extends beyond the initial 90 days of the agreement. As part of the settlement agreement the defendant shall contract with Leonard Dixon, within 30 days of the court entry of this settlement agreement to serve as an expert who will be reasonable for documenting the defendant's compliance with the terms of the agreement and for providing and/or arranging technical assistance and training regarding compliance with this settlement agreement. I will have full and complete access to detained youth, institutional files, medical files, mental health files, education files, video tapes, and youth, staff records and all other information and other reports by staff, grievances, incident reports, and other relevant documents and files maintained by Henley-Young.

All non-public information obtained by the expert shall be kept confidential, except that on a quarterly basis the expert shall file a report with the court documenting the progress of compliance. Neither party, nor any employee or agent of either party, shall have any supervisory authority over the expert's activities, reports, findings, or recommendations. The expert shall file with the Court and provide the parties with reports describing the Defendant's steps to implement this Settlement Agreement and evaluate the extent to which the Defendant has complied with each substantive provision of this agreement. Such reports shall be issued quarterly, unless the parties agree otherwise. The reports shall be provided to the parties in draft form for comment at least two (2) weeks prior to their submission to the Court. These reports shall be written with due regard for the privacy interests of individual youth and staff and the interest of the Defendant in protecting against disclosure of non-public information. The expert shall have a budget sufficient to allow him to fulfill the responsibilities described in this Settlement Agreement. Mr. Dixon may consult other experts or consultants retained by either party. All parties shall receive copies of all draft reports from the other experts to Mr. Dixon prior to the issuance of Mr. Dixon's report, and shall have the option of being present at briefings from such experts to Mr. Dixon and Defendant. Mr. Dixon may initiate and receive ex parte communications with the parties and their respective experts and consultants.

## Recommendations based on findings and observations

Result of visit on September 24-28, 2012.

#### Documentation provided and reviewed

Lock Down, Seclusion and Segregation Forms

Phone Log

**Grievances Report** 

Southern Poverty Law Center letter dated August 30, 2012

Southern Poverty Law Center letter dated September 13, 2012

Southern Poverty Law Center letter dated September 21, 2012

Southern Poverty Law Center letter dated October 26, 2012

Southern Poverty Law Center letter dated November 5, 2012

Youth Court School Exceptional Education Process Report

List of Exceptional Education Students Detained at HYJJC from 8/7/2012 to 9/28/2012

Jackson Public School Individualized Education Program – Resident WB

Jackson Public School Individualized Education Program - Resident JC

Jackson Public School Individualized Education Program – Resident DH

Jackson Public School Individualized Education Program – Resident AJ

Jackson Public School Individualized Education Program – Resident LC

Jackson Public School Individualized Education Program – Resident AC

Jackson Public School Individualized Education Program – Resident NR

Jackson Public School Individualized Education Program – Resident RP

Proposed School Schedule - Youth Court School

Transfer of Records (Youth receiving Exceptional Education services last 4 months)

Proposed Curriculum (White Binder labeled "Pacing Guides 2012-2013")

Youth Court School – Proposed Screening

Number of Youth Suspended

Refusal of Educational Services signed by Resident TA

Refusal of Educational Services signed by Resident KT

Incident Report on Resident CC

Incident Report on Resident JC

Incident Report on Resident KT

**Detainee Incident Reports** 

Use of Force Forms (13)

Proposed Staffing for 2012-2013

Total Number of Filled and Vacant Direct Care Positions

Number of Supervisors by Shifts

**Organization Chart** 

**Daily Population Sheets** 

**Records Showing Current Staffing** 

Visitation Logs from June 5, 2012 to July 31, 2012 (one slip not dated)

Proposed Recreation Schedule

Residents Taking Medication dated 9/21/2012

Residents Taking Medication dated 9/24/2012

Complaints and Inquires June, July, August 2012

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## Inspections

Food Establishment Inspection Report dated 8/24/2012

Food Service Facility Inspection Results dated 8/24/2012

American Fire Sprinkler Inc., Report of Inspection dated 12/9/2011

Fire Inspection Report issued by Jackson Fire Department dated 3/1/2012

Pre-Engineered Restaurant Fire Suppression Systems Report dated 4/18/2012

Backflow Prevention Assembly Test and Certification Report dated 4/23/2012

Food Permit issued by Mississippi State Department of Health dated 1/20/2012

Menu/School Lunch Program Changes for two weeks

Use of Force Form

#### Maintenance

Purchase Requisitions for fire alarm system dated 8/10/2012

Purchase Requisitions for electrical work dated 8/13/2012

Purchase Requisitions for repair a/c units dated 8/1/2012

Purchase Requisitions for repair generator dated 8/30/2012

Purchase Requisitions for repair washer dated 9/12/2012

Purchase Requisitions for clean facility dated 8/6/2012

Purchase Requisitions for painting the pods and secure area dated 8/6/2012

#### Maintenance and Service

Maintenance Service Schedule dated 7/21/2012 to 9/13/2012

Draft Henley-Young Juvenile Justice Center Policy and Procedure Manual

Revised 10/2012

#### Draft Policies/Procedure

Draft Resident Grievance

**Draft Mechanical Restraints** 

Draft Intake & New Admission

**Draft Clothing Exchange** 

Draft Resident Mail

**Draft Resident Telephone Calls** 

**Draft Daily Showers** 

Draft Resident Hygiene

Draft Recreation Activities Program (RAP)

Daily Schedule

#### Draft Emergency Drill/Procedure

**Draft Emergency Communication Policy** 

Draft Emergency Plan – Release of Residents Policy

**Draft Escapee Policy** 

**Draft Evacuation/Relocation Policy** 

**Draft Fire Drills Policy** 

**Draft Fire Evacuation Policy** 

Draft Fire/Smoke Alarm Response Policy

**Draft Hostage Situation Policy** 

**Draft Natural Disaster Policy** 

Miscellaneous documents

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#### Staffs interviewed

Carmen Davis County Administrator

Dale Knight Director

Eddie Lee Burnside Jr., Intake Counselor Aide and Safety and Security

Lisa Ross Attorney for Hinds County

Crystal Martin, Attorney for Hinds County

Charie Prince, Attorney for Hinds County

Eric Dorsey, Intake Counselor Aide

Steven Pickett, Resource Officer for the Henley-Young Detention Facility in the Courts Paula Van-Every, Project Director for Safe Schools and Health Students Jackson Public Schools Sandra Parks, Division Director for Children and Youth Services for the Department of Human

Services, State of Mississippi

Evelyn Sullivan, SICU Counselor

Timothy Stallworth, Training, Monitoring and House Arrest for the Hinds County Court

Dr. Ginger Smith, PhD, School Director of the Henley-Young Juvenile School (JPS)

Brandy Finley, Exceptional Educational Instructor

Angela Cook, Court Administrator

Kelli Bennett-Richards, Youth Service Counselor

James Taylor, Detention Officer

Nathaniel Younger Jr., Detention Officer

Quannah Blue Sr., Senior Detention Officer

Dr. Calvin Lockett, Special Projects, (JPS) Alternative education

Janelle McCain, Detention Officer

Vicky Berryhill, LPN

#### Youth interviewed

Youth AH 15 years old

Youth AJ 12 years old

Youth AD 16 years old

Youth JS 15 years old

Youth LH 15 years old

Youth TB 14 years old

Youth CA 16 years old

Youth BW 17 years old

Youth JB 17 years old

#### Introduction

This is my report of my second official visit to the Henley-Young Juvenile Justice Center. I visited the facility from September 24, through 28, 2012. Again, I would like to thank the County and facility staff for their cooperation and accommodations. Both staff and youth were forthright and open regarding the issues of the facility, which consisted of an inadequate number of staff, inadequate amount of activities, limited training, boredom, low pay, residents being locked down too often and for too long, and the need for more programming, teachers, computers etc. Since my last visit the facility has made some major improvements in the physical plant. All units have been painted with brighter paint, which gives the facility a more organized,

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neat and presentable look and it is more visually appropriate for the staff and the youth residing there. This is a far cry from the facility I visited months earlier, which was dark, dungeon-like and dirty. The refurbished units are now better conducive for rehabilitation of youth and a better environment for staff to work. The facility has also discarded old furniture and other items that were not being utilized. This is a huge step in the right direction in bringing this facility out of its unpleasant and unwelcoming state, to that of a working, supportive and functional physical plant. "Beauty is the Silent Teacher." Floyd Starr.

Research demonstrates that significant predictors of a child's improved sense of self-efficacy are order, organization, and cleanliness of the classroom. In other words, if you want to produce the desired effects in the youth and staff, order and cleanliness are a must for any successful program. Although, this is a major accomplishment, the facility needs to continue with repairs and the refurbishment of the rest of the building and ensure that maintenance programs are put in place.

Another area of improvement has been the beginning of the writing of policies and procedures. Although not fully developed or implemented, it is another move in the right direction. According to the County Administrator, they are in the process of funding 13 new positions for the facility. This, although a start, is very significant because new staff coming in will enter into the profession with a clear understanding of their job responsibilities and work in an organized structure (i.e. policies and procedures). The key now is to train the existing staff to ensure consistency. There is still much work to be done, but this is a start. It should be noted that the facility director attended the national detention conference this year. I continue to stress the importance of staff participating in such conferences and trainings, as a way to enhance knowledge and understanding of the work they are engaged in.

The County now needs to begin to implement the staffing structure we developed during this visit. This organizational chart will show the beginnings of a well structured facility (see attachment). The administration now needs to begin the transition from the old system of operations to this new system. It will provide an organized accountability system that is more efficient when implemented properly with the right number of staff. In addition, the new structure provides the facility the capability to acquire a consistency and predictability in managing its daily work routines, in which the tasks and subtasks are arranged. Also, the new structure will force everyone to work together towards a common set of goals. Again this new structure should be implemented as soon as possible. It should be noted that of the 71 provisions that were non-compliant based on my last review, 12 of the provisions (17%) have moved to beginning compliance. It should also be noted that some policies and procedures are developed and others are drafts that need further development. As part of my next visits we will work with the facility on the draft policies for further development.

#### School

Education in Juvenile Detention is a major component of programming. Juveniles should have access to competency based educational and special education services. There should be year round educational programming consistent with the needs of the juvenile. The school located within the Henley-Young Facility is operated by the Jackson Public School district. During this

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visit I looked at the school as it relates to operations and functions. My observations found that the school and facility are at opposite ends of the spectrum as it relates to them being integrated. From my previous visits and my more focused observation during this visit, the school is dysfunctional. Although, I found the teachers and principal to be good people, they do not see themselves as a part of the overall success of the facility. It presently feels as though the facility and the school are two different places.

The principal who has been with the facility for many years feels that she has become disconnected from the facility due in part to the constant change in the facility's administration. As a result, the principal has created her own school program that falls outside of the standard educational programs within juvenile detention. The youth who are considered "drop outs" only participate in school one hour daily and, youth who are eligible for the regular school program only participate in school approximately 4 hours daily. School is compulsory for all youth whether at home or in a detention facility. The school is also removed from the facility operational training program. This training is very important to the school personnel and the facility staff because there is a need for school staff and custody staff to be familiar with all aspects of safety and security, first and foremost. Also, the following should be a shared part of the overall process of any juvenile detention facility: establishing techniques for de-escalation of youth behavior, providing youth support for filling a grievance or other involvement in the grievance process, and ensuring that youth understand facility policies and procedures. The facility, the school and all other entities within the physical plant must operate as one team with youth as the primary concern. No one entity is more important than the other and if one fails they all fail. Therefore, structured weekly meetings with all parties should begin as soon as possible.

The school also has no system in place to deal with youth who are disruptive in school. If youth have problems, they are just removed without any systematic way of resolving them. There should be consequences for good and bad actions which should be part of the overall behavioral management program of the facility. A point or level system where points are awarded or taken away by the teachers based on school behavior is one of many proactive ways to deal with behavior. Further, whatever system is agreed upon between the facility and the school, policies and procedures should follow. These policies should identify what constitutes appropriate behavior within the confines of the school. In implementing the policies, the facility's staff and the school staff must be trained. Additionally, the residents must be informed orally and in writing, of behavioral expectations in school. Further, the facility staff and the school staff have to agree on how they will work together to manage the classroom. This requires policies, procedures, and development. In addition, the posting of rules within the school area and the school being a part of the behavior modification system will reduce youth acting out in school.

Another issue for the school is that of staffing. The school does not have enough regular or special education instructors. It needs at a minimum, an additional math teacher, a physical education instructor, a GED (ACT) and other school graduate processing teacher, and a special education teacher. I found no policies and procedures for operating the school. Well operated educational programs in juvenile detention facilities have an incredible stabilizing effect on the facility's populations. Educational programs that are operated well increases safety within the facility for both youth and staff. Although, the following are my recommended solutions and plans for the Henley-Young School, I recommend that a complete review of the school be done

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by an outside educational expert. I also recommend that school administrators visit detention schools in various states i.e. Michigan, Illinois and Georgia to name a few.

#### Recommended School Plan:

- 1. The Henley-Young Facility will create and implement a plan to provide all of the following services and programs within their control related to the aspects of residents' education:
  - a. maintain an adequate physical facility for education,
  - b. provide adequate security and support in the classroom,
  - c. establish an in-school points system based on rewards and consequences for behavior.
  - d. establish and implement a schedule for transporting residents to and from school that assures that residents will have the opportunity to receive the required hours of educational services mandated by law.
- 2. Develop policies and procedures for all of the areas discussed above.

#### Solution/Plan

- 1. The Henley-Young Facility will make every effort to develop and formalize an interagency agreement between the Jackson Public School System and the HYC that:
  - a. Provides adequate security within the school premises (including classrooms) for all youth including those youth requiring protective services or other special needs.
  - b. Youth requiring protective services or other special needs shall have the same or equivalent educational services as other youth.
  - c. Create an alternative educational plans for youth removed from the classroom for medical or behavioral issues.
  - d. Provides a schedule for transporting residents to and from school that ensures that residents will have the opportunity to receive the hours of educational services mandated by law.
  - e. Outline a cross training curriculum for HYC school employees and detention employees, which include an orientation and a safety curriculum and mandatory annual refreshment training for employees of the school.
  - f. Ensure trainings will provide educational staff with appropriate facility policies that relate to or overlap with the school's operations to include the policies regarding rules, discipline and the behavior management program.
  - g. Include development of a plan and appropriate materials for various educational levels, to be distributed and explained to youth in the health care unit, in room confinement or otherwise unable to participate in normal school classroom activities.
  - h. Ensure the class schedules are driven by the security of the facility and that the school looks toward developing individual learning plans for each student in the school.
- 2. The Facility Director or designee shall review the circumstances surrounding the placement of all residents who are in isolation or seclusion, or residents who do not attend school for medical reasons and other behavioral maintenance processes to assess the feasibility of an early release to attend school each day.

- a. A list of the residents that are not allowed to attend school and the reasons for the administrative restriction shall be documented and distributed to the Principal of the HYC School.
- b. The Facility Director shall designate a liaison to interact with school daily and the JPS Administration should create a position for Compliance Administrator to review the progress of the school on a weekly basis.
- c. All instances in which school activities are suspended by the facility due to incidents or other extraordinary circumstances shall be reported to the Compliance Administrator within 24 hours.
- d. When the School Principal or designee is having issues, whether of a safety nature or any other problems, they should be reported to the Compliance Administrator and the facility director or designee immediately.

Below are the compliance ratings that will be used in this report. Please be reminded that though most are in non compliance, policy development is most important and the start of this process.

#### **Compliance Code Measurements**

**Substantial Compliance** (**SC**): Practices follow the county-approved policies, training materials or other documents; practices follow policy with rare exception and exceptions lead to corrective action; trained staff fill all positions and vacancies are filled within 3 months; the County has completed work in an acceptable manner; policies, procedures and practice and training are operational and quality-assurance audited and audit exceptions lead to corrective action; outcomes meet or exceed agreement requirements.

**Partial Compliance** (**PC**): Policy and procedure is implemented in some but not all locations or times; staff are hired but not trained; the County is working on implementation but tasks are not completed; system implemented at some but not all locations or times, outcomes meet or exceed agreement requirements some of the time and in certain area.

**Beginning Compliance (BC)**: Policy and procedure is written by the county but has not been implemented; funding and hiring authority are approved by the County but positions are not filled; training materials prepared and approved by the county but training has not started.

**Non Compliance** (NC): No action taken and immediate steps needed to maintain schedule or prevent further delay. A policy may exist, but the policy may need significant revision or modifications and rarely translates into practice.

| Compliance Matrix |                                    |        |
|-------------------|------------------------------------|--------|
| Provision         | Intake                             | Rating |
| 1.(1)             | All Youth Admitted to Henley-Young | NC     |

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| 1.(2)     | MAYSI-2 Mental Health Screening   | NC |
|-----------|---|----|
| 1.(3)     | Prescription Medications  |    |
| 1.(4)     | Meal Compliance   | NC |
| 1.(5)     | Telephone Usage   | BC |
| 1.(6)     | Strip Search Policy   | BC |
|           |   |    |
| Provision | Staffing and Overcrowding   |    |
| 2.(1)     | Direct Care Staff Ratio   | NC |
| 2.(2)     | Maximum Capacity Adjustment   | NC |
| 2.(3)     | One-Person Cell   | NC |
|           |   |    |
| Provision | Cell Confinement  |    |
| 3.(1)     | Structured, Rehabilitative & Educational Programming                        | NC |
| 3.(2)     | Appropriate Access to Living Unit   | NC |
| 3.(3)     | Dangerous Youth   | NC |
| 3.(4)     | Isolation   | NC |
| 3.(5)     | Direct Care Staff on Units  | NC |
|           |   |    |
| Provision | Structured Programming  |    |
| 4         | Educational, Rehabilitative, and/or Recreational Programs                   | NC |
|           |   |    |
| Provision | Individualized Treatment Plans/Treatment Program for Post-Disposition Youth |    |
| 5.(1)     | Youth Access to Adequate Rehabilitative Services                            | NC |
| 5.(2)     | Health and/or Substance Abuse Treatment                                     | NC |
| 5.(3)     | Treatment Plans   |    |
| 5.(4)     | Review of Individual Treatment Plans  | NC |
| 5.(5)     | Evening And Weekend Programs And Activities                                 | NC |
| 5.(6)     | Quality Assurance Program NC  |    |
|           |   |    |
| Provision | Disciplinary Practices And Procedures                                       |    |

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| -         |  |    |
|-----------|--|----|
| 6.(1)     | Implement a Discipline Policy and Practice             |    |
| 6.(2)     | Policy for Youth Violations                            |    |
| D         | Haraf Daggaring  |    |
| Provision | Use of Restraints                                      | BC |
| 7.(1)     | Mechanical Restraints                                  | BC |
| 7.(2)     | Mechanical Restraints Transportation                   | BC |
| 7.(3)     | Misuse of Mechanical Restraints                        |    |
| 7.(4)     | Mental Health—Use of Mechanical Restraints             | NC |
| 7.(5)     | No Restraint Chairs, Chemical Restraints and/or Tasers | BC |
| 7.(6)     | No Hogtying in Facility                                | ВС |
| 7.(7)     | Mechanical Restraints—One-On-One Supervision           | NC |
| 7.(8)     | Mechanical Restraints—Notice to Medical Professional   | NC |
| 7.(9)     | No Electronic Restraints                               | BC |
| 7.(10)    | No Firearms in Facility                                |    |
| ъ         | TI OF  |    |
| Provision | Use of Force   |    |
| 8.(1)     | No Misuse of Use of Force                              |    |
| 8.(2)     | Notice to Medical Professional After Use of Force      | NC |
| Provision | Meals and Nutrition                                    |    |
| 9.(1)     | All Meals and Snacks Must Be Nutritional               | NC |
| 9.(2)     | Comply with Nutrition Guidelines                       | BC |
| 9.(3)     | Provide Drinking Water Throughout the Day              |    |
| Provision | Clothing   |    |
| 10        | Provide Basic Clothing Items                           | NC |
|           | -  |    |
| Provision | Hygiene And Sanitation                                 |    |
| 11.(1)    | Provide Appropriate Hygiene Products                   |    |
| 11.(2)    | Provide Sleeping Mats and Blankets                     |    |
| 11.(3)    | No Deprivation of Mats and Blankets                    |    |

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| 11.(4)    | Sufficient Sanitary Mats and Blankets   |    |  |
|-----------|---|----|--|
| 11.(5)    | Clean and Sanitary Environment  |    |  |
| 11.(6)    | Fire Safety, Weather Emergencies, Sanitation Practices,<br>Food Safety and Provide Safe Environment |    |  |
| 11.(7)    | Clean Drinking Glasses and Eating Utensils  | NC |  |
|           |   |    |  |
| Provision | Medical Care  |    |  |
| 12.(1)    | Provide Youth With Adequate Medical Care  | NC |  |
| 12.(2)    | Provide Medical Professional When Needed  | NC |  |
| 12.(3)    | Implement a Sick Call Policy to Ensure 24 Hr. Services  | NC |  |
| 12.(4)    | Prescription Medications Only Dispensed by Medical<br>Staff   | NC |  |
| 12.(5)    | Provide Medical and Mental Health Services  | NC |  |
| 12.(6)    | Proper Monitoring Youth Who Require Individualized Attention  | NC |  |
|           | ,   |    |  |
| Provision | Mental Health Care  |    |  |
| 13.(1)    | Provide Adequate Mental Health Services   | NC |  |
| 13.(2)    | Youth and Psychotropic Medications  |    |  |
| 13.(3)    | Within 72 Hours of Admittance Complete an Individual Mental Health Treatment Plans                  | NC |  |
| 13.(4)    | Implement Policies and Procedures for Referrals   | NC |  |
| 13.(5)    | Sufficient Psychiatric Services   | NC |  |
| 13.(6)    | Psychiatrist and/or Counselors to Record Review to Ensure Proper Care                               | NC |  |
|           | T T   |    |  |
| Provision | Suicide Prevention  | NG |  |
| 14.(1)    | Multi-tiered Suicide Prevention Policy  | NC |  |
| 14.(2)    | Evaluate Highest Level of Suicide Watch Every12 hours<br>By Medical Professional                    | NC |  |
| 14.(3)    | Closely Monitor Suicide Watch Youth During All Activities   | NC |  |
| 14.(4)    | Court Shall be Notified Within 24 hours of Any Youth on Suicide Watch                               | NC |  |
| Provision | Family Support and Interaction  |    |  |
|           |   |    |  |

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| 15.(1)    | Visitation Shall Not be Restricted or Withheld   |    |
|-----------|--|----|
| 15.(2)    | Provide Accommodations for Contact Visits  | NC |
| 15.(3)    | Visitation Shall be Regularly Scheduled  | NC |
| 15.(4)    | Phone Calls Shall be Allowed Based on Policy   | NC |
|           |  |    |
| Provision | Miscellaneous Provisions   |    |
| 16.(1)    | Provide Equal Access To All Services   | NC |
| 16.(2)    | Provide the Opportunity To Participate In Large Muscle Exercise Every Day                            | NC |
| 16.(3)    | Prohibit The Use Of Profanity In The Presence Of Youth   | NC |
| 16.(4)    | Provide Adequate Grievance Policy  | BC |
| 16.(5)    | Provide Youth Of All Ages With The Opportunity To<br>See Their Attorney and/or Youth Court Counselor |    |

The following are my observations and recommendations specific to the provisions of this agreement.

#### 1. Intake

| 1. Intake              |  |  |
|------------------------|--|--|
| Provision1.1<br>Intake | All youth admitted to Henley-Young shall receive a health screening, within 1 hour of admission or as soon as possible as reasonably thereafter, by appropriately trained staff as required by Mississippi Code Annotated § 43-21-321. Information obtained during the screening shall include, but shall not be limited to, the juvenile's: (a) Mental health; (b) Suicide risk; (c) Alcohol and other drug use and abuse; (d) Physical health; (e) Aggressive behavior; (f) Family relations; (g) Peer relations; (h) Social skills; (i) Educational status; and (j) Vocational status." Mississippi Code Ann. § 43-21-321(1).  During this screening, Henley-Young shall obtain information regarding the youth's educational status by having the youth or intake officer complete an education screening form developed and provided by the Jackson Public School District.   |  |
| Status                 | Non Compliance   |  |
| Discussion             | The facility still needs to develop policies and procedures to govern the intake processes which include all areas of the above-mentioned provision. This is an operational imperative. In addition, the lack of staffing forces the supervisors to pull people from important positions within the facility to provide coverage in intake. The administration must identify the difference between intake which is a court function, and admission, which is a facility function. When a youth is committed to the facility by the court or the letter of the law, this is a legal function which the facility has no control over. At this point the facility functions at the behest of the law. Once the youth has been committed through any legal function that youth has to then go through the process of being admitted to the facility as a resident. This is when all of the screenings as discussed in this provision begin. |  |
| Recommendations        | <ol> <li>Fully develop admitting policies and procedures</li> <li>The court should provide staffing for intake purposes</li> <li>The facility should provide enough staff to fully cover the care and custody issues in the facility</li> <li>Ensure all staff who admit youth are properly trained</li> <li>Develop training records</li> <li>Provide documentation in a organized way on youth being screened/admitted</li> <li>Ensure all youth records are available for my review with all areas of the provisions placed in the youth's file</li> </ol>  |  |
| Evidentiary Basis      | Document review, observation, interviews   |  |

| Provision 1.2<br>Intake | All youth shall receive a MAYSI-2 mental health screening upon admission, as required by Mississippi Code Annotated § 43-21-321. The screening will be conducted in private by appropriately trained staff of Henley-Young. If the screening indicates that the youth is in need of emergency medical care or mental health intervention including, but not limited to, major depression, suicidal ideation, withdrawal from drugs or alcohol, or trauma, the detention staff shall refer those juveniles to the proper health care facility or community mental health service provider for further evaluation immediately or as soon as reasonably possible.  |   |
|-------------------------|---|---|
| Status                  | Non Compliance  |   |
| Discussion              | The facility needs to ensure there is no intrusion or disruption when the MAYSI-2 is being administered. The area used to administer the test should be restricted to youth taking the test, along with the staff member supervising the area when the test is being administered. In addition, when youth are upset or angry upon admission, the test should not be administered immediately, however can be administered within the first few hours after admission. During my September visit, I observed a female resident who was extremely upset upon entering the facility. A staff member attempted to administer the MAYSI-2 to her in a public area. I asked the staff member to discontinue the test because the youth was not in a proper state to respond to the screening and I informed the staff member that the screening should be conducted later. There were several female youths in the area at the time which provided no privacy. I found no indication the residents who have received initial mental health screenings had any follow up. Please review my previous report which indicated that at least 60% to 70% of youth in detention facilities suffer from mental health issues. Therefore, policy development for mental health screening should involve some of the following tenets; |   |
|                         |   | e program objectives for mental   |
|                         | program wa  | eteristics or common traits the nts to identify for emergency or inical consultation?                 |
|                         | choose as th  | SI-2 scores will the facility e signal for the program staff nical consultation or services;          |
|                         | available wh  | I health follow-up services are nen youth MAYSI-2 score at they are needed?                           |
|                         | which create<br>needs in the  | must develop a data base es a profile of mental health population and program d adjustments needed to |

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|                   | improve ment   | tal health services for youth.   |
|-------------------|--|--|
|                   |  |  |
| Recommendations   | <ol> <li>Develop comprehensive policy a</li> <li>Develop youth files that are organized</li> </ol> | *  |
|                   | 3. Develop training and provide do   |  |
|                   | 4. Identify person or person(s) whinstrument   | ose responsibility is to score the   |
|                   |  | reviews the instrument and note<br>he youth in the facility and what<br>he youth leaves the facility |
| Evidentiary Basis | Document review, observation, interviews   |  |

| Provision 1.3<br>Intake | Prescription medications will be secured for all youth who have a valid, current prescription within 8 hours of admission, if possible, but in no case, longer than 24 hours after admission, including weekends and holidays. If during a youth's detention, a medical professional either prescribes a new medication or renews a youth's previous prescription medication, Henley-Young will secure the prescription medication within 8 hours of receiving the prescription, if possible, but in no case, longer than 24 hours after receiving the new prescription, including weekends and holidays. Henley-Young shall procure and/or purchase all prescription medications prescribed to confined youth. |  |
|-------------------------|---|--|
| Status                  | Non Compliance  |  |
| Discussion              | Based on interviews with the administration they are in the process of securing a contract to provide medical services for the facility. If the facility is going to contract these services, the facility administration and the health authority shall establish written policies and procedures for health screening protocols.  |  |
| Recommendations         | <ol> <li>Develop written policy and procedures or protocol for this provision</li> <li>Document staff training on distribution and side effects of medication</li> <li>Provide documentation on efforts to obtain prescription drugs</li> </ol>   |  |
| Evidentiary Basis       | Document review, observation, interviews  |  |

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|-------------------------|--|-------------------|--|
| Provision 1.4<br>Intake | Upon admission to Henley-Young, all youth shall be offered a snack or meal in compliance with the United States Department of Agriculture's School Meals Program standards.  |                   |  |
| Status                  | Non Compliance   |                   |  |
| Discussion              | There is still no indication that youth are being provided with snacks upon entering the facility. There needs to be developed documentation regarding this matter to better ensure that all youth are afforded some form of sustenance when they enter the facility. Of the nine youth I interviewed, only one youth acknowledged that when he was admitted to the facility it was close to dinner time that he was offered dinner. This is appropriate because it occurred in this manner; however there should be a record to identify that this happened. The other youth I interviewed did not acknowledge they received a snack or meal when they arrived based on the interviews. |                   |  |
| Recommendations         | Develop policies and procedures for this provision. Procedures should be part of intake/admission procedure.   |                   |  |
| Evidentiary Basis       | Document review, observation, interviews   |                   |  |
| Provision 1.5<br>Intake | l a parent or legal guardian tree of charge and to take a shower before being  |                   |  |
| Status                  | <b>Beginning Compliance</b>  |                   |  |
| Discussion              | During my visit, I observed two youth who had taken showers as part of their admission processing. I do not know if they were allowed to make phone calls. Nevertheless, I reviewed the policies and procedures that have been written on the matter. However, they have yet to be implemented.  |                   |  |
| Recommendations         | Develop a consistent way to document the intake process that shows that a phone call and shower were completed.  |                   |  |
| Evidentiary Basis       | Document review, observation, interviews   |                   |  |
| Provision 1.6<br>Intake | Within 60 days of the date of this agreement, Henley-Young shall develop and implement policies that limit strip searches to instances where Henley-Young staff has an articulable suspicion that a youth may possess weapons or contraband. Anytime a strip search is conducted, Henley-Young staff must document, in writing, their suspicion, obtain permission from a supervisor, and conduct the search in a manner that minimizes the intrusion into the youth's privacy.  |                   |  |
| Status                  | <b>Beginning Compliance</b>  |                   |  |

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| Discussion        | The facility has policies and procedures for this provision.  |
|-------------------|---|
| Recommendations   | Staff must be provided with the necessary training with information stating the trainer, name of the training class/course, time, date and location where the training took place. This documentation should be kept and logged in facility records. I will review this process during my next visit. |
| Evidentiary Basis | Document review   |

# 2 Staffing and Overcrowding

| Provision 2.1<br>Staffing and<br>Overcrowding | Within 90 days of the date of this agreement, Henley-Young shall operate with a direct care staff to youth ratio of 1:8 from the hours of 6:00 a.m. until 10:00 p.m. and a ratio of 1:10 from the hours of 10:00 p.m. to 6:00 a.m.   |  |
|---|--|--|
| Status  | Non Compliance   |  |
| Discussion                                    | The facility does not meet this provision. The administration is in the process of adding staff to the facility. As mentioned above, the court should be responsible for the intake staff. In addition, below is an organization chart that includes some of the needed staff, (approximately 13 additional personnel). And reflects an operational structure that better fits the needs of the facility. However, during this visit, I observed that youth were still being locked down because of the lack of staffing, Although, the facility has begun to hire additional staff, it must continue to work on increasing the staff to equal the requirements of the chart below. The present organizational structure creates operational inefficiency and supports a dysfunctional workflow. |  |
| Recommendations                               | Duty Post Staffing/Adms  |  |

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|                   | Units  | Day Shift      | Evening Shift | Night Shift | Total |
|-------------------|--|----------------|---------------|-------------|-------|
|                   | A officer  | 3              | 3             | 2           | 8     |
|                   | B officer  | 3              | 3             | 2           | 8     |
|                   | C officer  | 3              | 3             | 2           | 8     |
|                   | D officer  | 3              | 3             | 2           | 8     |
|                   | Intake   | 1              | 1             | 1           | 3     |
|                   | Master Control   | 1              | 1             | 1           | 3     |
|                   | Staff for Court<br>Transportation  | 2              | 2             |             | 4     |
|                   | Internal Transportation  | 2              | 2             |             | 4     |
|                   | Laundry  | 2              | 2             |             | 4     |
|                   | *Director  | 1              |               |             | -     |
|                   | *Deputy Director   | 1              |               |             |       |
|                   | *Operation Manager   | 1              |               |             |       |
|                   | Supervisors  | 3              | 3             | 2           | 8     |
|                   |  | 26             | 23            | 12          | 61    |
|                   | 61 Direct care/supervisor/laundry staffing X 1.5 Relief Factor—Total staff need to effectively operate the facility—91.5 1 to 8 Awake—2 to 10 Sleep  Misc. post coverage Medical/MH Hospital Runs One on One MH/Medical Visitation *Administration |                |               |             |       |
| Evidentiary Rasis | *Maintenance   | hservation in  | terviews      |             |       |
| Evidentiary Basis | Document review, o   | bservation, in | terviews      |             |       |

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| Provision 2.2<br>Staffing and<br>Overcrowding | If the staff-to-youth ratio falls below the requirements of section 2.1 for longer than two (2) days, the Director or his assignee shall immediately identify youth accused of nonviolent offenses who are eligible for less restrictive alternatives to secure detention and request an emergency release for eligible youth from the appropriate Youth Court. The maximum capacity of Henley-Young shall be calculated by determining how many direct care staff members can supervise youth in accordance with section 2.1. The current maximum capacity of Henley-Young is 84. |  |
|---|--|--|
| Status  | Non Compliance   |  |
| Discussion                                    | The facility still does not meet the standards for this provision. There is no technology (data), policy or tool used by the facility in place that would screen youth for possible early release. Also the facility has no requirements and has not identified youth who may be eligible for early-release or less restrictive alternatives. There are no policies and procedures developed to respond to this provision if and when it becomes an issue.   |  |
| Recommendations                               | Development of policies and procedures regarding this provision which includes court.  |  |
| Evidentiary Basis                             | Document review, observation, interviews   |  |
| Provision 2.3                                 |  |  |

| Provision 2.3 Staffing and Overcrowding | No more than one youth shall be placed in a one-person cell.  |  |
|---|---|--|
| Status                                  | Non Compliance  |  |
| Discussion                              | During this visit I again found no indication that the facility had more than one youth in a room. However, the administration has yet to develop policies and procedures for this provision. |  |
| Recommendations                         | Develop policies and procedures for this provision  |  |
| Evidentiary Basis                       | Document review, observation  |  |

## 3 Cell Confinement

| Provision 3.1<br>Cell Confinement | Youth shall be engaged in structured, rehapprogramming outside of their cells during p.m. each day, including weekends and ho | the hours of 7:00 a.m. to 9:00 |
|-----------------------------------|---|--------------------------------|
| Status                            | Non Compliance  |                                |

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| Discussion                        | In the introduction of this report, I wanted to emphasize the need and importance of a good educational program in the overall management of any juvenile detention facility. I will not restate that discussion; rather, I will refer you back to the section on the school in the introduction.  Although, I noticed that the residents were afforded more time out of their cells during this visit as opposed to the last visit, there were not enough structured activities throughout the day. The youth were still on lockdown for too many hours. The facility has begun writing policies and procedures to address this provision and schedules of activities have been placed on all of the units. These activities have not been made operational by the facility. But, the officers need to be out on the unit with the residents to improve communication, provide better security, and develop relationships with the residents. These relationships can do much to improve the overall flow of activities in the facilities. Staff should not spend their time in the towers on units and should be available more on the units. During my interviews, both residents and staff members that stated there is a need for more activities and a greater enhancement of the present activities. Many of the residents stated "we are only out because y'all are here." As I think on these interviews, I recognize that there was an air of reality to their statement. This is again caused by the lack of enough staff in the facility.  1. Develop policies and procedures for this provision.  2. Review the schedules to be sure that they adequately reflect all daily activities.  3. Develop positive behavior management systems with rewards and consequences.  4. Remove the dark film from the Plexiglas in towers on unit which would allow staff to view the unit without there being visual obstruction (when lights on). |  |
|-----------------------------------|--|--|
| Evidentiary Basis                 | 6. See all of the recommendations for school in the introduction.  Document review, observation, interviews  |  |
|                                   |  |  |
| Provision 3.2<br>Cell Confinement | Except when youth are in protective custody or confined subject to section 3.3 of this Settlement Agreement, youth placed in the Suicide or Booking cells shall be allowed to spend the hours of 7:00 a.m. to 9:00 p.m. on the appropriate living unit and to have the opportunity to engage in structured, rehabilitative, and educational programming, unless medically counterindicated.  |  |
| Status                            | Non Compliance   |  |
| Discussion                        | During this visit, I still found no indication that the edicts of this provision were taking place. Policies and procedures to address this provision have not been written.   |  |

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| Recommendations                   | <ol> <li>Follow recommendations as set forth in section 3.1.</li> <li>Develop adequate policies and procedures for this provision.</li> <li>Develop data collection for youth who are placed in protective custody or confinement.</li> </ol>   |  |
|-----------------------------------|---|--|
| Evidentiary Basis                 | Document review, observation, interviews  |  |
|                                   |   |  |
| Provision 3.3<br>Cell Confinement | Youth who pose an immediate, serious threat of bodily injury to others may be confined in their cells for no longer than 12 hours at a time without administrative approval. Youth who are placed on cell confinement for this reason shall be released from their cells daily to attend school, maintain appropriate personal hygiene and to engage in one hour of large muscle exercise. Staff must perform visual checks on youth who are subject to cell confinement every 15 minutes. Staff must document all instances of cell confinement in writing and must document the justification for determining that a youth poses an immediate, serious threat of bodily injury. |  |
| Status                            | Non Compliance  |  |
| Discussion                        | I found no indication that the facility has made any progress in addressing this provision. There was no procedural due process system in place to determine if youth were placed in their rooms for half day, two days or ten days. The facility is working on policies and procedures toward actions taken in matters of due process-isolation. The recommendations remain the same.  |  |
| Recommendations                   | <ol> <li>Develop adequate policies and procedures for this provision.</li> <li>For youth placed in their rooms, develop forms that indicate the time youth will be in their rooms and post it on their doors.</li> <li>Ensure that supervisors sign off on the form in 15 minute staggered visual checks when youth are placed in their rooms.</li> <li>Develop a system of major and minor consequences for behavior.</li> </ol>   |  |
| Evidentiary Basis                 | Document review, observation, interviews  |  |
| Provision 3.4<br>Cell Confinement | Youth shall not be automatically subjected to cell confinement and/or isolation upon their admission to Henley-Young unless he or she would be subject to cell confinement under section 3.3.   |  |
| Status                            | Non Compliance  |  |
| Discussion                        | As stated in provision 3.3 the facility has only begun to address this issue as to policies and procedures. Until these are in place the question of cell confinement cannot be effectively addressed. See recommendation is provision 3.3.   |  |
| Recommendations                   | <ol> <li>Develop adequate policies and procedures for this provision.</li> <li>Ensure all staff is trained and document training.</li> </ol>  |  |

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| Evidentiary Basis                 | Document review, observation  |                              |
|-----------------------------------|---|------------------------------|
| Provision 3.5<br>Cell Confinement | At all times between the hours of 7:00 a.m. to 10:00 p.m., at least one direct care staff shall be stationed on any living unit where two or more youth are placed, and direct care staff shall be actively engaged with youth. From 10:00 p.m. to 7:00 a.m., staff shall conduct visual checks on youth every 15 minutes. Henley-Young shall ensure that every cell has an operating intercom that allows youth to communicate with staff at all times.  |                              |
| Status                            | Non Compliance  |                              |
| Discussion                        | Because of the lack of staff, it is very difficult for the facility to address this provision. In some cases residents were left unsupervised. For example, on Thursday night September 27, I was in a room adjacent to the visitation room interviewing one of the female residents when a staff member had to leave the female residents unsupervised in the visitation area because; she was called to the housing unit. Later, there were female residents being housed in the intake/admitting area that were left unsupervised for approximately 30 to 40 minutes. These residents were using this area as a living space because their unit was being refurbished. This however, does not allow for any supervision and theoretically, because these girls were not in their normal living space they required more supervision, not less.  Moreover, during my interviews with the female residents they reported that they were sometimes left without supervision for short periods of time with no direction and no safety or security. This creates a highly insecure atmosphere and an unsafe space. |                              |
| Recommendations                   | <ol> <li>Develop adequate policies and pro</li> <li>Provide adequate staffing.</li> </ol>   | ocedures for this provision. |
| Evidentiary Basis                 | Document review, observation, interviews  | S                            |

# **4 Structured Programming**

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| Provision 4 Structured Programming | Henley-Young shall administer a daily proholidays, to provide structured educational recreational programs for youth during all permitted out of their cells, pursuant to se include:  a. activities which are varied and youth; b. structured and supervised activalleviate idleness and develop sportsmanship; and c. Supervised small group leisure of card and table games, arts a discussions. | al, rehabilitative, and/or hours that youth shall be ction 3.1. Programming shall appropriate to the ages of the vities which are intended to concepts of cooperation and e activities, such as a wide variety |
|------------------------------------|---|--|
| Status                             | Non Compliance  |  |
| Discussion                         | The facility is developing policies and procedures to address this provision. There have been an activities schedule developed and posted on the units; however, it has not been put into operation. During my visit, I observed that residents still do not spend enough time out of their cells during the waking hours.  |  |
| Recommendations                    | <ol> <li>Continue to develop adequate policies and procedures for this provision.</li> <li>Provide adequate schedules for weekdays and weekend programming and act on it.</li> <li>Purchase televisions for each units and board games for each unit.</li> <li>Develop an adequate monthly recreation schedule with age appropriate games and programs.</li> </ol>                                  |  |
| Evidentiary Basis                  | Document review, observation, interview   | s  |

5 Individualized Treatment Plans Treatment For Post-Disposition Youth

| Provision 5.1 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall ensure that youth have services. Henley-Young shall ensure that post-disposition will receive constitutional services.   | children placed in the facility |
|--|---|---------------------------------|
| Status   | Non Compliance  |                                 |
| Discussion   | If the facility plans to continue with the 89 day program, it must have a rational and standardized way of operation; with adequate staffing and adequate programming. Please see prior report. |                                 |
| Recommendations  | <ol> <li>Develop adequate policy and proc</li> <li>Either fund properly or discontinue</li> </ol>   |                                 |

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|                   | <ol> <li>Review light weight youth in program (i.e. disturbing the family peace) and find alternative placement for them.</li> <li>Develop individualized treatment plan for youth in 89 day program.</li> <li>Develop alternative community programming for youth in 89 day program that can be serviced in community.</li> </ol> |
|-------------------|--|
| Evidentiary Basis | Document review, observation, interviews   |

| Provision 5.2 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall ensure that youth in need of mental health and/or substance abuse treatment and/or who are in the facility post disposition shall have appropriate treatment plans developed and implemented in accordance with generally accepted professional standards of practice for mental health and rehabilitative services.  |   |
|--|--|---|
| Status   | Non Compliance   |   |
| Discussion   | During my last visit I saw no indication of such programs being initiated or being in place. We must remember that we are working with youth in crisis; their mental stability and substance abuse issues only add more problems to children that are trying to handle more than they possibly can. According to the director, the residents are being seen by the Hinds Behavioral Health Counselors; however, the facility still needs to have policies and procedures governing the requirement of these outside vendors. The County should ensure that all stakeholders are involved in the development of these policies and procedures. These policies should meet the requisite standards for these services. |   |
| Recommendations  | <ol> <li>Develop adequate policies and pro</li> <li>See recommendations under (5.1).</li> </ol>  | * |
| Evidentiary Basis  | Document review, observation, interviews   | S |

| Provision 5.3 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall implement policies and procedures for the required content of treatment plans, which shall include;  a. That the treatment plan be individualized; b. An identification of the mental and/or behavioral health and/or rehabilitative issues to be addressed; c. A description of any mental health, medication or medical course of action to be pursued, including the initiation of psychotropic medication; d. A description of planned activities to monitor the efficacy of any medication of the possibility of side effects; e. A description of any behavioral management plan or strategies to be undertaken; f. A description of any counseling or psychotherapy to be provided; g. A determination of whether the type or level of treatment needed can be provided in the youth's current placement; and h. A plan for monitoring the course of treatment, and if necessary, for revising the treatment plan. i. A description of the precise terms the of the facility's long-term and short-term objectives for the youth, the full range of services to be provided, and procedures, and timetables and staff assignments for the implementation of such treatment plan; j. A plan for regularly engaging the family in the youth's treatment plan; k. A comprehensive re-entry plan that will assist the youth re-enroll in their home school and access medical, mental health, vocational and rehabilitative services based in the community. |  |
|--|--|--|
| Status   | Non Compliance   |  |
| Discussion   | As stated in the previous report, the facility still needs to develop policies and procedures as it relates to these provisions. After a more careful review the county needs to develop a strategy on how they plan to operationalize the treatment of post dispositional youth assigned to the 89 day program. If there are no bodies exclusively dedicated to this program, you have a program that is de facto detention housing only. I found no indication during my visits, interviews and document review that the facility was complying with this provision.   |  |
| Recommendations  |  |  |

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|  | behavioral modification, modeling, psychotherapy, reality therapy, group therapy and group dynamics and other skills required to successfully facilitate the goals of the 89 day program.  b. Create treatment teams c. Develop case planning and program development d. Assessment of the program to determine if it meets the needs of the court placed youth. e. Assessment tool to regularly monitor the success or lack of success of all youth in the program.  5. Provide auxiliary training to all other direct care staff. |  |
| Evidentiary Basis  | Document review, observation, interviews  |  |
| Provision 5.4 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall institute a program of periodic staff reviews every three weeks and evaluations of each youth's progress under his/her individualized treatment plan and of the appropriateness of the plan itself and Henley-Young's plan for such review.  |  |
| Status   | Non Compliance  |  |
| Discussion   | There has been no change in this provision. Please see the previous report.   |  |
| Recommendations  | <ol> <li>Develop comprehensive policies and procedures for this provision.</li> <li>Provide training to all staff.</li> <li>Identify roles and responsibilities of direct care, treatment and educational staff as it relates to the staffing for 89 day program through policies and procedures and adequate funding and staffing.</li> </ol>  |  |
| Evidentiary Basis  | Document review, observation, interviews  |  |
| Provision 5.5 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall develop and implement a program that provides for evening and weekend programs and activities that allow youth to engage in meaningful activities.   |  |

The facility is in the process of developing adequate programs for the

weekends. According to the residents I interviewed, the Friday night live program only consisted of conversations on STDs and abstinence. The residents stated that they basically are confined to "their rooms/cells in the evenings and on the weekends but sometimes they are allowed

**Non Compliance** 

Status

Discussion

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|                   | outside during the day shift". On the afternoon shift they are locked down and only see the same movies over and over again.  |  |
|-------------------|---|--|
| Recommendations   | <ol> <li>Develop comprehensive policies and procedures to meet the needs for this provision.</li> <li>Provide adequate staffing for this program.</li> <li>Develop a monthly recreational program.</li> <li>Keep records of activities provided and note those that were not provided and why.</li> </ol> |  |
| Evidentiary Basis | Document review, observation, interviews  |  |

| Provision 5.6 Individualized Treatment Plans Treatment Program for Post- Disposition Youth | Henley-Young shall develop and implement an adequate quality assurance program.  |  |
|--|--|--|
| Status   | Non Compliance   |  |
| Discussion   | The facility is still in need of an adequate quality assurance program for both the facility and school, to insure that there are individualized treatment plans for post dispositional youth; and to ensure the effectiveness of treatment plans. Additionally, the quality assurance program should address the recommended areas below.   |  |
| Recommendations  | <ol> <li>Develop comprehensive policies and procedures to meet the needs for this provision for the facility and school program.</li> <li>Health Care: continuously assess the quality and adequacy of the health services provided, accurately evaluate the performance of staff providing health services and address identified deficiencies.</li> <li>Recreation and Social programs: continuously assess the quality and adequacy of social and recreational programming provided; accurately evaluate the performance of staff in providing these programs.</li> <li>Environmental Health and Safety: continuously assess the quality and adequacy of environmental health and safety, accurately evaluate the performance of staff in providing a safe and healthy environment and properly address identified deficiencies.</li> <li>Discipline and order: continuously monitor use of discipline and promptly address misuse or over use of discipline and other identified deficiencies.</li> <li>The facility will develop monthly performance measures to indicate achievement in the desired area.</li> <li>Review State of Florida Quality Assurance Model and for assistance in developing contact CJCA Performance Based Standard for</li> </ol> |  |

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|                   | Juvenile Detention Programs, also use ACA standards to establish policy guidelines. |
|-------------------|---|
| Evidentiary Basis | Document review, observation, interviews  |

6 Due Process/Isolation/Disciplinary Practices and Procedures

|   | /Isolation/Disciplinary Practices and Pro   | ceaures |
|---|---|---------|
| Provision 6.1 Disciplinary Practices and Procedures | Henley-Young shall implement a discipline policy and practice that incorporates positive behavior interventions and supports. This policy shall include guidelines for imposing graduated sanctions for rule violations and positive incentives for good behavior.  |         |
| Status  | Non Compliance  |         |
| Discussion  | The facility is working on its due process isolation system. There has been development of sanctions of rule violations. They now have lockdown, seclusion and segregation forms of which I had the opportunity to review 12 of the forms. Of the 12 forms I reviewed I found, no indication of the violation for which the resident was being disciplined. There were no standards by which these disciplinary actions were taken. Nothing that indicated that there was due process. I found residents were lockdown from three hours to eight days without any records of hearings or any other processes. It is interesting that the resident that was locked-down for eight days was disciplined by a directive from the facility's director. Although, there are times when administrative action may be appropriate, if that is the case there should be in place a plan to ensure that the resident is being seen by a health and/or mental health professional. Also, there should be a plan developed to reintegrate the resident back into general population. |         |
| Recommendations                                     | <ol> <li>Develop adequate policies and procedures for this provision.</li> <li>Develop new resident handbook. Youth are to receive these handbooks during orientation. They shall include youth rights, major and minor rule violations and the grievance policy. The handbook will explain to youth in their own language the rules and shall also be explained by staff that will have them sign and date a form indicating that both processes have occurred. These rules shall be posted on each unit.</li> <li>Due process rules shall be posted on each unit.</li> <li>Develop positive behavior intervention programs.</li> <li>Assign and train an independent person(s) to handle due process isolation hearings. The person(s) must be independent of the unit staff.</li> <li>Ensure youth who are in isolation are provided recreation and education services.</li> </ol>   |         |
| Evidentiary Basis                                   | Document review, observation, interviews  |         |

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| Provision 6.2<br>Disciplinary<br>Practices and<br>Procedures | Youth who violate major rules may be subject to cell confinement for up to 24 hours for a single rule violation. An occasion in which a youth is alleged to have contemporaneously violated multiple major rule violations shall count as a single rule violation for the purposes of this section. No youth shall be confined to a cell for longer than 8 hours for a single rule violation without receiving written notification of the alleged rule violation and the occurrence of a disciplinary review/due process hearing before an impartial staff member, which includes participation by the accused youth. Under no circumstances shall youth be subjected to involuntary cell confinement for longer than 24 hours for disciplinary purposes. Youth who are placed on cell confinement shall be released daily from their cells to attend school, maintain appropriate personal hygiene, and to engage in one hour of large muscle exercise. |  |
|--|---|--|
| Status   | Non Compliance  |  |
| Discussion   | Nothing has changed. See provision 6.1.   |  |
| Recommendations  | <ol> <li>Develop policies and procedures for this provision.</li> <li>Develop sheets to place on door of any youth in confinement that identifies the reason for confinement and is review and signed by supervisor.</li> <li>Ensure youth in confinement receive education and recreation services.</li> <li>See 6.1 recommendations.</li> <li>Provide training for all staff on these policies and procedures.</li> </ol>   |  |
| Evidentiary Basis  | Document review, observation, interviews  |  |

# 7 Use of Restraints

| Provision 7.1<br>Use of Restraints<br>Mechanical | Mechanical restraints shall not be used to punish youth or for the convenience of staff. Mechanical restraints shall only be used to prevent self-harm and/or harm to others, subject to section 7.4, and for transportation to and from court, subject to section 7.2.   |  |
|--|---|--|
| Status   | Beginning Compliance  |  |
| Discussion                                       | The facility has developed policies and procedures to address this provision.   |  |
| Recommendations                                  | <ol> <li>Officers shall receive training on policy and procedures.</li> <li>Officers shall be trained on when it is appropriate to use mechanical restraints.</li> <li>All training shall be documented.</li> <li>The policy will require the documentation of any use of mechanical restraint and use of force incidents.</li> </ol> |  |
| Evidentiary Basis                                | Document review, observation  |  |

| Provision 7.2 Use of Restraints Mechanical | Nothing in this section shall prohibit mechanical restraints from being placed on youth who are being transported to and from court or out of the facility, if staff have reason to believe that a youth presents a flight risk or is an imminent danger to the youth or others, or will engage in violent behavior. However, mechanical restraints should be removed immediately after the youth is placed in a cell and at no time shall a youth be placed in a cell wearing mechanical restraints. |  |
|--|---|--|
| Status                                     | <b>Beginning Compliance</b>   |  |
| Discussion                                 | The facility has developed policies and procedures regarding this provision.  |  |
| Recommendations                            | <ol> <li>Develop and provide adequate training for this provision.</li> <li>All training shall be documented.</li> <li>The policy will require the documentation of any use of mechanical restraint and use of force incidents.</li> <li>Operationalize the edicts of this provision.</li> </ol>  |  |
| Evidentiary Basis                          | Document review, observation  |  |

| Provision 7.3<br>Use of Restraints | Restraints shall not be used to secure youth to a fixed object such as a restraint chair, bed, post, or chair.   |  |
|------------------------------------|--|--|
| Status                             | <b>Beginning Compliance</b>  |  |
| Discussion                         | During my last visit, I found no evidence that this practice has continued. The facility is in the process of developing policies and procedures on the appropriate time to use mechanical restraints and how they are to be used. The facility now needs to provide the appropriate person or persons to train all staff including detention employees, medical staff, mental health staff, as well as school staff and any employees within the facility that may come into direct contact with residents. |  |
| Recommendations                    | <ol> <li>Complete the comprehensive policies and procedures for this provision.</li> <li>Provide training for staff within the facility as described above on this provision and provide documentation of training.</li> <li>Develop and use a mechanical restraint log.</li> <li>Provide training on de-escalation techniques to try to use mechanical restraints only as a regular part of facility transport.</li> </ol>  |  |
| Evidentiary Basis                  | Document review  |  |

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|                                    |   | December 12, 2012 |  |
|------------------------------------|---|-------------------|--|
| Provision 7.4<br>Use of Restraints | No youth shall be restrained for longer than 15 minutes, unless restraints are approved by a mental health professional or if determined to be necessary under section 7.2 or as reasonably necessary to prevent the youth from engaging in acts of self-harm or harm to others. If a youth must be restrained for longer than 15 minutes in order to prevent self-harm, that youth shall, as quickly as possible, be evaluated by a mental health professional or transported to a mental health facility. |                   |  |
| Status                             | Non Compliance  |                   |  |
| Discussion                         | (See discussion in 7.3)   |                   |  |
| Recommendations                    | <ol> <li>Develop comprehensive policy and procedures for this provision.</li> <li>Provide training for staff on policy and procedures and document training.</li> <li>Provide training on de-escalation techniques.</li> </ol>  |                   |  |
| Evidentiary Basis                  | Document review   |                   |  |
|                                    |   |                   |  |
| Provision 7.5 Use of Restraints    | Henley-Young shall not use, or allow on the premises, restraint chairs, chemical restraints and/or tasers.  |                   |  |
| Status                             | Beginning Compliance  |                   |  |
| Discussion                         | The facility has developed comprehensive policies and procedures for this provision. I found no indication that any restraint chairs, chemical restraints or tasers were being used. The policies developed policies and procedures have prohibitions against the use of these restraints.  |                   |  |
| Recommendations                    | <ol> <li>Provide training for staff on policies.</li> <li>Document all training provided to all staff.</li> </ol>   |                   |  |
| Evidentiary Basis                  | Document review   |                   |  |
|                                    |   |                   |  |
| Provision 7.6 Use of Restraints    | Henley-Young shall not subject youth to "hogtying," which is the practice of placing a youth face down on a bed, floor, or other surface, and securing the youth's hands to his feet.   |                   |  |
| Status                             | <b>Beginning Compliance</b>   |                   |  |
| Discussion                         | There is still no indication that the facility subjected the residents to hogtying. Additionally, they have placed in their comprehensive policies and procedures the restriction of hogtying.  |                   |  |
| Recommendations                    | <ol> <li>Provide training for staff on policies</li> <li>Document all training provided to all staff.</li> </ol>  |                   |  |
| Evidentiary Basis                  | Document review   |                   |  |

| Provision 7.7 Use of Restraints | When a youth is placed in mechanical restraints, staff must provide one-on-one supervision for the duration of the restraint, except when mechanical restraints are deemed to be necessary for the reasons specified in section 7.2. |  |
|---------------------------------|--|--|
| Status                          | Non Compliance   |  |
| Discussion                      | This provision still has no comprehensive policies or procedures.  |  |
| Recommendations                 | <ol> <li>Develop comprehensive procedures for this provision.</li> <li>Provide training for staff on policies and procedures.</li> <li>Document all training provided to all staff.</li> </ol>                                       |  |
| Evidentiary Basis               | Document review  |  |

| Provision 7.8 Use of Restraints | Henley-Young shall notify a medical professional whenever a youth is placed in mechanical restraints for reasons other than those specified in section 7.2. A medical professional shall examine the youth as soon as possible after restraints are removed, except when the youth was restrained for the reasons specified in section 7.2. |  |
|---------------------------------|---|--|
| Status                          | Non Compliance  |  |
| Discussion                      | The facility still needs to develop comprehensive policies and procedures for this provision. Provisions 7.2, 7.7 and 7.8 are inextricably juxtaposed. It is impossible to consider one without the other two. The facility must stay aware of the way they are intertwined and address them as a whole rather than in parts.               |  |
| Recommendations                 | <ol> <li>Develop comprehensive policies and procedures for this provision.</li> <li>Provide training for on policies and procedures.</li> <li>Document all training provided to all staff.</li> </ol>   |  |
| Evidentiary Basis               | Document review   |  |

| Provision 7.9 Use of Restraints | Hinds County does not currently and shall not in the future allow officers to enter the secure detention area of the facility with any electronic restraints, including, but not limited to, tasers. |  |
|---------------------------------|--|--|
| Status                          | <b>Beginning Compliance</b>  |  |
| Discussion                      | The facility has developed policies and procedures which have prohibitions against the use of tasers.  |  |
| Recommendations                 | <ol> <li>Provide training for staff on policy.</li> <li>Document all training provided to all staff.</li> </ol>  |  |

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| Evidentiary Basis                   | Document review   |  |
|-------------------------------------|---|--|
|                                     |   |  |
| Provision 7.10<br>Use of Restraints | Henley-Young is required to ensure that no officer enters the secure detention area of the facility with a firearm.   |  |
| Status                              | Non Compliance  |  |
| Discussion                          | During my visit, I saw no one with firearms in the facility. However, the facility has to provide policies and procedures to address this issue. These policies should address the question of firearms in the intake and admissions area, indicating that even in these areas no firearms are allowed. |  |
| Recommendations                     | <ol> <li>Develop comprehensive policies and procedures for this provision.</li> <li>Provide training for staff on these policies and procedures.</li> <li>Document all training provided to all staff.</li> <li>Have signs displayed at all entrances.</li> </ol>                                       |  |
| Evidentiary Basis                   | Observation   |  |

# 8 Use of Force

| Provision 8.1<br>Use of Force | Physical force shall not be used to punish youth. Staff shall only use physical force to stop youth from causing serious physical injury to self or others or to prevent an escape. If physical force is necessary, staff must use the minimum amount required to safely contain the youth. Whenever possible, staff shall avoid the use of force by first attempting verbal deescalation techniques. Staff shall be required to fully document in writing every instance of use of force.  |  |
|-------------------------------|---|--|
| Status                        | Non Compliance  |  |
| Discussion                    | There is still physical force used and there is no indication that any formal verbal de-escalation techniques are used prior to the use of physical force. In addition, there are still no policies and procedures or training program in place for staff. The key in this policy is that staff needs a major training curriculum that will contain be constant documentation of the continuing training on de-escalation techniques and behavioral modification techniques that precede any need for use of force. In other words, there should be a structure that captures the flow of incidents that occur as it relates to physical force. Incident reports should provide a picture of what occurred, prior to, during and post incident. This provides the administration with a clear understanding of the sequence of events and whether staff followed protocol and prescribed by the policies and procedures set forth. During my interviews with the residents, there were still complaints that staff used profane language with them and make inappropriate derogatory statements to them. In interviewing staff members they also said the residents cursed at the staff. When these behaviors continue in the facility it lends itself to a |  |

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|                   | youth rights, ethical behavior around youth, de-escalation and behavior modification is so important to the operations to the facility. Further, it is incumbent on the staff to direct the residents in the way of respectful and acceptable behavior. It is in this vein that youth be trained in good social skills, which will help them to learn how to respond in a respectful manner. This helps to reduce the need for use of force. Also youth who are receiving mental health service should never be handcuffed unless approved by a medical or mental health professional. |  |
|-------------------|--|--|
| Recommendations   | <ol> <li>Develop policy and procedures for this provision.</li> <li>Provide training for on policies and procedures</li> <li>Document all training provided to all staff.</li> <li>Adapt an appropriate curriculum for training staff on the use of verbal de-escalation skill and safe use of physical restraints or mechanical restraints.</li> <li>Contact the National Partnership for Juvenile Justice for recommendations on training program in this area.</li> </ol>   |  |
| Evidentiary Basis | Document review, interviews  |  |

| Provision 8.2<br>Use of Force | Henley-Young shall notify a medical professional, including but not limited to the licensed practical nurse on duty whenever physical force is used against a resident. A medical professional shall examine a youth immediately after the use of physical force.   |  |
|-------------------------------|---|--|
| Status                        | Non Compliance  |  |
| Discussion                    | Based on my review, this provision still needs to be addressed with policies and procedures. It is also important that appropriate staff be put in place to man the facility 24/7. In my interview with the facility director and the county administrator, they explained that they are working on procuring a contract the medical services to meet the demands of this provision, which will provide the necessary bodies and services to the facility. Once the contract is implemented the County should ensure that policies and procedures are developed that meet the medical standards and needs of the residents in the facility. |  |
| Recommendations               | <ol> <li>Complete procurement of services as quickly as possible.</li> <li>Develop comprehensive policies and procedures for this provision.</li> <li>Provide training to staff on policies and procedures.</li> <li>Document all training provided to all staff.</li> <li>Review nursing schedule and provide more hours at facility.</li> <li>Provide written documentation of examination of youth by medical professional in every instance.</li> <li>Provide additional medical services after hours and on weekends.</li> </ol>   |  |
| Evidentiary Basis             | Document review, observation  |  |

## 9 Meals and Nutrition

| Provision 9.1<br>Meals and<br>Nutrition | Youth shall be provided three meals and a snack daily. If a youth misses a meal because he or she is attending court, or some other appointment, he or she shall receive the missed meal upon his or her return to detention.  |  |
|---|--|--|
| Status                                  | Non Compliance   |  |
| Discussion                              | I found no indication in my interviews that the residents were not getting meals, yet they still continue to complain about not getting enough food. However, there are still no policies and procedures for food service for this provision. When I return for my next visit, I would like to meet with the food service supervisor and the County's dietitian to ensure that the food portions meet the prescribed dietary needs of the residents. In my experience in managing the National School Lunch Program, we found that although the program calls for specific guidelines as it relates to portions they are established pre cooked. For example, a 6 oz. hamburger becomes 4 oz. once it is cooked. This means that the planned meal becomes inadequate. These are the type of issues I will be discussing. |  |
| Recommendations                         | <ol> <li>Review portions to ensure youth receive enough food during meals.</li> <li>Develop policy and procedures for this provision.</li> <li>Provide training for kitchen staff and all other staff members involved with handling food and preparing meals.</li> </ol>  |  |
| Evidentiary Basis                       | Document review, observation, interviews   |  |

| Provision 9.2<br>Meals and<br>Nutrition | All meals and snacks served to youth at Henley-Young shall, at a minimum, comply with the nutrition guidelines set forth in the United States Department of Agriculture's School Meals Program standards. |  |
|---|---|--|
| Status                                  | <b>Beginning Compliance</b>   |  |
| Discussion                              | The facility still needs to develop policy and procedure for this provision. See provision 9.1.   |  |
| Recommendations                         | Develop policy and procedures for this provision.   |  |
| Evidentiary Basis                       | Document review, observation, interviews  |  |

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| Provision 9.3<br>Meals and<br>Nutrition | Youth shall be provided access to drinking water throughout the day.  |  |
|---|---|--|
| Status                                  | Beginning Compliance  |  |
| Discussion                              | There is water available to the residents through the Igloo coolers that have been purchased. During this visit there were igloo water coolers placed on all units. However, the residents are still complaining they have no access to water after bedtime. The facility needs to repair the plumbing throughout the facility. Afterwards, the facility should contact the State environment office to inspect the water system. This would end the need for igloos. |  |
| Recommendations                         | <ol> <li>Contact County or State Environmental office to conduct test on water system.</li> <li>Ensure youth receive water during school and recreational periods and at night.</li> <li>Develop a policy for incidents regarding water quality and procedures to address them.</li> <li>Repair inoperable drinking fountains.</li> </ol>   |  |
| Evidentiary Basis                       | Document review, observation, interviews  |  |

## 10 Clothing

| Provision 10<br>Clothing | Henley-Young shall provide basic clothing items for youth at all times. These items must include, at a minimum, socks, underwear, uniform, shoes, and undershirts. For girls, these items must also include a brassiere. When appropriate, Henley-Young shall also provide youth with a coat, hat, and gloves. Youth must be provided with a clean uniform, socks, undershirt, underwear, and brassiere, if applicable, upon intake and at least once per day. No youth shall be deprived of these basic clothing items for any reason, including, but not limited to, as a punishment, because these items are being washed, or due to overcrowding.  |  |
|--------------------------|--|--|
| Status                   | Non Compliance   |  |
| Discussion               | When I was at the facility in September I observed that the facility continues to have a problem with their clothing system. Youth are still being provided clothes that are torn, tattered and dingy or not clean. Also, the female residents are still washing clothes for the facility. I also observed that the washer and the dryer were inoperable. The dryer was inoperable for several days. Wet clothes were sitting in the dryer, becoming mildewed and unsanitary; absolutely unfit for wearing. There was also clothing taken from the washer and haphazardly tossed on a table. The County would be better served by purchasing a new washer and dryer for the facility. Since my first visit to this visit, the washer and dryer have been broken and inoperable too |  |

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|                   | often.   |
|-------------------|--|
|                   |  |
| Recommendation    | <ol> <li>Develop policies and procedures to adequately address this provision.</li> </ol>                |
|                   | 2. Check washer and dryer to ensure they are working properly.   |
|                   | 3. Ensure that girls and boys are equally involved in cleaning and folding clothes.                      |
|                   | 4. Hire 2 laundry staff to ensure clothing is handled properly.  |
|                   | 5. Ensure that all staff and youth wear protective material (smocks and gloves) when handling chemicals. |
|                   | 6. Discard clothing that is torn, dingy and in poor condition.   |
|                   | 7. Develop schedule for distribution.  |
| Evidentiary Basis | Document review, observation, interviews, photographs  |

## 11 Hygiene and Sanitation

| Provision 11.1<br>Hygiene and<br>Sanitation | Youth shall be provided with the means to maintain appropriate hygiene, including soap and shampoo for showers, which will occur at least once daily, soap for washing hands after each time the youth uses the toilet, and toothpaste and a toothbrush for tooth brushing, which will occur at least twice daily, a comb and brush, that if shared, shall be sterilized between uses by youth. Girls must be provided with panty liners on a daily basis and other feminine products as needed. Youth will be issued a comb and brush upon entering the facility; however, if youth are issued a recycled comb or brush or a comb or brush that has been used by another youth, Henley-Young shall ensure that the comb and brush is sterilized and in good condition.   |  |
|---|---|--|
| Status                                      | Non Compliance  |  |
| Discussion                                  | The facility needs to have a system in place to provide youth with hygiene kits and specified times for the residents to perform their hygienic care twice a day. However, at this point in time, the residents are still being awakened at 5:00 am to take showers rather than simply teeth brushing and washing their faces to prepare for breakfast. This process is counterproductive. Evening is the better time for youth to take a shower after the residents have spent their day in different activities, including sports or exercise. Such a practice supports better sleeping habits and it will also help to keep the linen clean and the residents' rooms more sanitary. This is very important to the overall operation of the facility because it supports a smoother transition for morning awakenings to evening bedtime. There is a need for proper staffing to ensure that this provision is properly addressed. See previous report. |  |

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| Recommendations   | <ol> <li>Develop adequate policies and procedures for this provision.</li> <li>Ensure that hygiene kits are properly labeled and youth are not using each other's hygiene products or items.</li> <li>Ensure items such as hair brushes, if shared, are sterilized and in good condition.</li> <li>Provide training for staff on these policies and procedures.</li> <li>Ensure that clean face towels are available for youth.</li> <li>Develop a schedule for distribution of hygiene kits.</li> </ol> |  |
|-------------------|--|--|
| Evidentiary Basis | Document review, observation, interviews   |  |

| Provision 11.2<br>Hygiene and<br>Sanitation | Youth shall be provided with sleeping mats and blankets that are clean and odorless sleeping mats shall be sanitized between uses by youth, and youth shall receive clean blankets weekly.  |  |
|---|---|--|
| Status                                      | Non Compliance  |  |
| Discussion                                  | The facility has yet to address this issue. As with the issue of clothing, the sleeping mats should be sanitized and the bedding needs to be thoroughly cleaned. Worn, tattered mats provide a place to hide contraband. The facility should dispose of these worn and tattered mats and ragged bedding. With good equipment (washer and dryer) this can be accomplished. See the discussion in provision 10. |  |
| Recommendations                             | <ol> <li>Develop policies and procedures for this provision and train staff on them.</li> <li>Discard all blankets and mattresses that are tattered and have holes in them.</li> <li>Clean and maintain laundry area in orderly fashion.</li> <li>Label and designate an area for towels, sheets, clothing etc.</li> </ol>  |  |
| Evidentiary Basis                           | Observation   |  |

| Provision 11.3<br>Hygiene and<br>Sanitation | Under no circumstances shall youth be deprived of mats and blankets.   |  |
|---|--|--|
| Status                                      | Non Compliance   |  |
| Discussion                                  | The facility still needs to produce policies and procedures on this provision.   |  |
| Recommendations                             | <ol> <li>Develop comprehensive policies and procedures for this provision</li> <li>Provide training to staff on policy and procedure.</li> </ol> |  |
| Evidence                                    | Observation  |  |

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| Provision 11.4<br>Hygiene and<br>Sanitation | Henley-Young shall maintain a sufficient number of clean, sanitary mats and blankets that correspond with the facility's maximum capacity. |  |
|---|--|--|
| Status                                      | Non Compliance   |  |
| Discussion                                  | See discussions in provisions 10 and 11.3  |  |
| Recommendations                             | See discussions in provisions 10 and 11.3  |  |
| Evidentiary Basis                           | Observation  |  |

| Provision 11.5<br>Hygiene and<br>Sanitation | Youth shall be provided with a clean, sanitary environment.  |  |
|---|--|--|
| Status                                      | Beginning Compliance   |  |
| Discussion                                  | Although, the facility is still in need of repair, i.e., sinks, shower stalls, water fountains, holes in the walls and electrical sockets; there has been major progress made in other areas. The County has painted all of the units; and replaced light fixtures that were not functioning. The living conditions in the units are now more conducive to a rehabilitation model. The area is brighter and more cheerful and the atmosphere is more appropriate for youth.  |  |
| Recommendations                             | <ol> <li>Develop policies and procedures for this provision.</li> <li>See areas in discussion that should be addressed.</li> <li>Develop housekeeping and cleaning schedule.</li> <li>Develop checklist or inspection report for each unit and area.</li> <li>Develop work order system to ensure that when problem arise they are addressed.</li> <li>Develop corrective action plans as needed.</li> <li>Provide training for staff on policy and procedures.</li> <li>Ensure delivered food items are dated and rotated from old to new.</li> </ol> |  |
| Evidentiary Basis                           | Document review, observation, interviews   |  |

| Provision 11.6<br>Hygiene and<br>Sanitation | Hinds County shall ensure that Henley-Young complies with relevant law regarding fire safety, weather emergencies, sanitation practices, food safety, and the elimination and management of environmental toxins. |  |
|---|---|--|
| Status                                      | Non Compliance  |  |
| Discussion                                  | The facility still needs to develop an adequate policies and procedures for this provision.   |  |

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| Recommendations   | Develop policies and procedure and plans for fire safety, evacuation etc.                                |
|-------------------|--|
|                   | 2. Develop adequate staff training regarding fire safety.  |
|                   | 3. Properly maintain and repair fire equipment.  |
|                   | 4. Ensure intercom systems are operating properly.   |
|                   | 5. Ensure all mattresses used by youth are fire resistant.   |
|                   | 6. Routinely test all fire equipment and system.   |
|                   | 7. Ensure that all electrical outlets, wires and equipment (lights) are properly working.                |
|                   | 8. Develop work order system to ensure items are repaired.   |
|                   | <ol><li>Ensure that all areas in this provision are addressed by a certified<br/>professional.</li></ol> |
| Evidentiary Basis | Document review, observation   |

| Provision 11.7<br>Hygiene and<br>Sanitation | Youth shall be provided with clean drinking glasses and eating utensils.  |  |
|---|---|--|
| Status                                      | Non Compliance  |  |
| Discussion                                  | The facility needs to develop overall policies on cleanliness and hygiene. In doing this, it will bring several of the provisions up to beginning compliance. |  |
| Recommendations                             | Develop policies and procedures for this provision.   |  |
| Evidentiary Basis                           | Document review, observation  |  |

#### 12 Medical Care

| Provision 12.1<br>Medical Care | The parties agree, however, that henceforth, Henley-Young shall provide youth with adequate medical care, including: prompt screenings; a full physical exam within 72 hours after their detention hearing or disposition order, as applicable; access to medical professionals and/or prescription medications when needed; and prompt transportation to a local hospital in the case of a medical emergency. Hinds County is responsible for procuring and/or paying for all medications provided to residents. |  |
|--------------------------------|---|--|
| Status                         | Non Compliance  |  |
| Discussion                     | The County Administrator and the Director of the facility have advised me of the procurement of medical services. See previous report.  |  |
| Recommendations                | <ol> <li>Develop policies and procedures for this provision.</li> <li>Develop policies and procedures and protocols based on standards for Health Services in Juvenile Detention and Confinement facilities.</li> </ol>   |  |

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|                   | 3. Provide training for staff members who administer medication to youth on proper usage and possible side effects. Also, train the staff on emergency protocols if side effects occur. |
|-------------------|---|
|                   | 4. Have a licensed medical professional review and sign off on policy and procedures.   |
|                   | 5. Have a licensed health professional periodically review and provide supervision to the nurse at facility.  |
|                   | 6. Develop forms to coincide with provision.  |
|                   | 7. Remove medication from bags and place them in secure, organized areas and develop forms to determine what medications are present in the facility at all times.                      |
|                   | 8. Hire or have on contract a physician to review medical area.   |
|                   | 9. Ensure that youth receive vision exams, dental screenings, mental health screenings, hearing tests, etc.   |
| Evidentiary Basis | Document review, observation, interviews  |

| Provision 12.2<br>Medical Care | Henley-Young shall ensure that a medical professional is available to examine youth confined at the facility to identify and treat medical needs, when necessary.  |  |
|--------------------------------|--|--|
| Status                         | Non Compliance   |  |
| Discussion                     | The County Administrator and the Director of the facility has advised me of the procurement of medical services. See previous report.  |  |
| Recommendations                | <ol> <li>Hire qualified medical professional for nights and weekend care.</li> <li>Develop policies and procedures for this provision.</li> <li>Provide training for staff on this provision.</li> </ol> |  |
| Evidentiary Basis              | Document review, observation, interviews   |  |

| Provision 12.3<br>Medical Care | Henley-Young shall implement its sick call policy and practice which ensures that confined youth who request non-emergency medical attention are examined by a medical professional within 24 hours of a youth placing him or herself on sick call, excepting weekends and holidays.   |  |
|--------------------------------|--|--|
| Status                         | Non Compliance   |  |
| Discussion                     | The County Administrator and the Director of the facility has advised me of the procurement of medical services. See previous report.  |  |
| Recommendations                | <ol> <li>Develop policies and procedures for this provision.</li> <li>Place a kite box on each unit.</li> <li>Provide training for staff on this provision.</li> <li>Nurse or designated person, making daily rounds to retrieve kites (Request for Medical Service Forms).</li> </ol> |  |

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| Evidentiary Basis              | Document review, observation, interviews  |  |
|--------------------------------|---|--|
|                                |   |  |
| Provision 12.4<br>Medical Care | Prescription medications shall only be distributed by licensed medical staff or Henley-Young staff who has been trained by licensed medical personnel.  |  |
| Status                         | Non Compliance  |  |
| Discussion                     | The County Administrator and the Director of the facility has advised me of the procurement of medical services. See previous report.   |  |
| Recommendations                | <ol> <li>Develop policies and procedures to address this provision.</li> <li>These policies and procedures must include the appointment of a medication administration protocol.</li> <li>There must be a medication record of all medicines administered.         <ul> <li>a. One record to reflect all medicines leaving the pharmacy;</li> <li>b. An additional record kept in each youth's case file.</li> </ul> </li> <li>Ensure that the training is comprehensive make certain that all medical contingencies are considered.</li> </ol> |  |

provision.

Document review, observation, interviews

**Evidentiary Basis** 

5. The staff should be trained on what side effects to look for drugs commonly prescribed to youth with mental health needs.6. Provide training to staff on the policy and procedures for this

7. All training should be documented and conducted annually.

| Provision 12.5<br>Medical Care | Medical and mental health services shall be provided in a manner that ensures the confidentiality of youth's health information.   |  |
|--------------------------------|--|--|
| Status                         | Non Compliance   |  |
| Discussion                     | The County Administrator and the Director of the facility has advised me of the procurement of medical services. See previous report.  |  |
| Recommendations                | <ol> <li>Develop policies and procedures to 2. Get HIPAA requirements and institution 3. Designate the persons who have accords within the facility and outs juvenile justice system.</li> <li>Provide training to staff on policie 5. Provide training to staff on HIPAA training.</li> <li>Designate a HIPPA Privacy Office</li> </ol> | tute them the facility. ccess to the youth's medical side of the facility, but within the s and procedures. A requirements, and document |
| Evidentiary Basis              | Document review, observation, interviews   |  |

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| Provision 12.6<br>Medical Care | Henley-Young shall develop procedures for monitoring youth who require individualized attention because of medical issues that do not involve requiring the youth to sleep on a mat in the visitation room.   |  |
|--------------------------------|---|--|
| Status                         | Non Compliance  |  |
| Discussion                     | The County Administrator and the Director of the facility have advised me of the procurement of medical services. See previous report.  |  |
| Recommendations                | <ol> <li>Develop policies and procedures to</li> <li>Develop processes of continuous medical issues, i.e. the care for a dinsulin regiment.         <ol> <li>What are the medical requimonitoring?</li> <li>Who is responsible for the c. How are the records kept o</li> </ol> </li> <li>Provide training to staff on the pol provision.</li> <li>Annual competency training.</li> </ol> | nonitoring youth with stable iabetic youth who are on an rements of the youth who need monitoring? |
| Evidentiary Basis              | Document review, observation  |  |

#### 13 Mental Health Care

| Provision 13.1<br>Mental Health<br>Care | Henley-Young's contractor, Hinds Behavioral Health Services, shall provide adequate mental health services to all confined youth with a mental health diagnosis or serious mental health need, as indicated by the MAYSI-2. This shall include, but is not limited to, the provision of individual and group counseling sessions upon the request of a youth or the youth's parent/guardian, access to a mental health professional at the detention center, and the distribution and medical monitoring of psychotropic medications by a medical professional.  |  |
|---|--|--|
| Status                                  | Non Compliance   |  |
| Discussion                              | The facility still has not developed policies and procedures in place to address this provision. As I stated above in provision 1.2 a youth entering the facility was extremely upset and the staff member tried to administer the MAYSI-2 to this youth. I instructed her to discontinue the process because the youth was crying, clearly distressed and unable to provide appropriate responses. Her initial state of being should have been the priority. In addition the staff member was attempting to administer the test in an open area with other youth present. All mental health assessments should be administered in a private area keeping the rules of HIPAA in mind. See previous report. |  |
| Recommendations                         | Ensure that the facility has a Standardized Assessment Tool i.e. the MAYSI-2 to use during the intake process.   |  |

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|   | December 12, 2012   |
|---|---|
|   | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Provide training to staff on policies and procedures and provide documentation of training.</li> <li>Develop documentation that will track youths' progress during their stay at facility.</li> </ol>  |
| Evidentiary Basis                       | Document review, observation, interviews  |
| Provision 13.2<br>Mental Health<br>Care | Youth who are confined for longer than thirty (30) continuous days and who are prescribed psychotropic medications, shall be evaluated by a psychiatrist every thirty (30) days. Such evaluations may be performed by and through employees of Hinds Behavioral Health.   |
| Status                                  | Non Compliance  |
| Discussion                              | The facility still has not developed policies and procedures for this provision. It has been recommended to the facility director that Hinds Behavioral Health work with the facility to develop policies, and procedures to provide services to youth diagnosed with mental health issues, youth receiving mental health services, and youth requiring mental health follow-ups. In addition, any youth receiving mental health services should be checked daily by a mental health professional. Also, youth receiving mental health services should not be placed in handcuffs as a means of controlling their behavior. |
| Recommendations                         | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Provide training to staff on policies and procedures.</li> </ol>   |
| Evidentiary Basis                       | Document review, observation, interviews  |
| Provision 13.3<br>Mental Health<br>Care | Within 72 hours of a youth's admission to the facility, staff shall develop individual mental health treatment plans for youth who are under the care of a mental health provider. Treatment plans shall emphasize continuity of care and shall ensure that whenever possible, youth are transported to appointments with their regular mental health provider, whether the appointments are standing or made after the youth's initial detention.  |
| Status                                  | Non Compliance  |
| Discussion                              | The facility still does not have policies and procedures for this provision. See provision 13.2.  |
| Recommendations                         | <ol> <li>Develop policies and procedures to address this provision</li> <li>Provide training to staff on policies and procedures.</li> <li>Policies and procedures shall be reviewed and signed by a licensed mental health professional (psychiatrist, etc.).</li> </ol>   |

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| Evidentiary Basis                       | Document review, observation, interviews   |  |
|---|--|--|
| Provision 13.4<br>Mental Health<br>Care | Henley-Young shall develop and implement policies and procedures for referring youth in need of psychiatric services to a licensed psychiatrist for a timely mental health evaluation. Such services may be provided by and through employees of Hinds Behavioral Health.  |  |
| Status                                  | Non Compliance   |  |
| Discussion                              | The facility still does not have policies and procedures for this provision. See provision 13.2.   |  |
| Recommendations                         | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Provide and document training to staff on policies and procedures.</li> </ol>   |  |
| Evidentiary Basis                       | Document review, observation, interviews   |  |
| Provision 13.5<br>Mental Health<br>Care | Hinds County shall employ or contract for sufficient psychiatric services to permit a psychiatrist to fulfill the following functions:  a. conduct needed psychiatric evaluations prior to placing youth on psychotropic medications;  b. Monitor, as appropriate, the efficacy and side effects of psychotropic medications;  c. Participate in treatment team meetings for youth under the psychiatrist's care;  d. Provide individual counseling and psychotherapy when needed;  e. Evaluate and treat in a timely manner all youth referred as possibly being in need of psychiatric services; and  f. Provide adequate documentation of treatment.  g. All evaluations and services outlined above may be performed and/or provided by and through employees of Hinds Behavioral Health or any other duly qualified Mental Health agency. |  |
| Status                                  | Non Compliance   |  |
| Discussion                              | The facility still does not have policies and procedures for this provision. See provision 13.2.   |  |
| Recommendations                         | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Provide training to staff on policy and procedures and document training.</li> </ol>  |  |
| Evidentiary Basis                       | Document review, observation   |  |

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| Provision 13.6<br>Mental Health<br>Care | The psychiatrist and/or counselors shall review, if necessary, incident reports, disciplinary reports, suicide watch logs, and lockdown logs of youth under their care to determine whether their treatment is working and, if not, how it should be modified.  |  |
|---|---|--|
| Status                                  | Non Compliance  |  |
| Discussion                              | The facility still does not have policies and procedures for this provision. See provision 13.2.  |  |
| Recommendations                         | <ol> <li>The mental health of the youth in the custody of the facility needs to be closely monitored at all times.</li> <li>The facility needs to develop policies and procedures to address this provision.</li> <li>Provide and document training to staff on policies and procedures and document training.</li> <li>Facility needs documentation from a mental health organization on plan of action for youth receiving a mental health services.</li> </ol> |  |
| Evidentiary Basis                       | Document review, observation  |  |

#### 14 Prevention

| 14 Trevention                        |  |  |
|--------------------------------------|--|--|
| Provision 14.1<br>Suicide Prevention | Henley-Young shall develop a multi-tiered suicide prevention policy that has at least three stages of suicide watch. Suicide watch shall not be used as punishment. The "suicide cell" shall be reserved for youth for whom the "suicide cell" is deemed necessary in conjunction with this suicide prevention policy. |  |
| Status                               | Non Compliance   |  |
| Discussion                           | The facility still does not have policies and procedures for this provision. See previous report.  |  |
| Recommendations                      | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Provide and document training for staff on policy and procedure.</li> </ol>   |  |
| Evidentiary Basis                    | Document review, observation   |  |
|                                      |  |  |

| Provision 14.2<br>Suicide Prevention | Any youth placed on the highest level of s by a mental health professional, ideally will longer than 24 hours of his or her placement the highest level of suicide watch is not exprofessional within 24 hours, the youth shall a local mental health facility or emergency treatment. | ithin 12 hours, but in no case ent on suicide watch. If a youth on valuated by a mental health all immediately be transported to |
|--------------------------------------|--|--|
| Status                               | Non Compliance   |  |

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| Discussion        | The facility still does not have policies and procedures for this provision. See previous report.   |
|-------------------|---|
| Recommendations   | <ol> <li>Develop policies and procedures to address this provision.</li> <li>The facility needs mental health professionals to help develop these policies and procedures as they are the authorities in this area.</li> <li>Provide training for staff on policies and procedures and document training.</li> <li>Identify a mental health agency to help develop policies, procedures and protocols.</li> </ol> |
| Evidentiary Basis | Document review, observation  |

| Provision 14.3<br>Suicide Prevention | Youth on suicide watch shall participate in recreation, school, and any other structured programming. Youth shall not be required to wear a "suicide gown" unless locked in a cell. Staff shall closely monitor youth on suicide watch, which includes logging activities every 15 minutes. |  |
|--------------------------------------|---|--|
| Status                               | Non Compliance  |  |
| Discussion                           | The facility still does not have policies and procedures for this provision. See previous report.   |  |
| Recommendations                      | <ol> <li>Develop policies and procedures to address this provision with the assistance of a mental professional.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol>  |  |
| Evidentiary Basis                    | Document review, observation  |  |

| Provision 14.4<br>Suicide Prevention | When a youth is placed on any level of suicide watch, a report shall be made within 24 hours to the youth court, as well as to the youth's guardian, and his or her defense attorney.               |  |
|--------------------------------------|---|--|
| Status                               | Non Compliance  |  |
| Discussion                           | The facility still does not have policies and procedures for this provision. See previous report.   |  |
| Recommendations                      | <ol> <li>Develop policies and procedures for making and distributing the reports in this provision</li> <li>Provide training for staff on policies and procedures and document training.</li> </ol> |  |
| Evidentiary Basis                    | Document review, observation  |  |

## 15 Family Support and Interaction

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|   |  | December 12, 2012  |
|---|--|--|
| Provision 15.1 Family Support and Interaction       | Visitation shall not be restricted or withheld from youth unless the detention center director determines that a visit will violate the security of Henley-Young or will endanger the safety of residents, visitors, or staff. Visitation should not be restricted as a form of punishment.  |  |
| Status  | Non Compliance   |  |
| Discussion  | During this visit, I reviewed the visitation facility is in the process of developing pol this provision. However, there will be a nadequate space to accommodate visitors and security during the visitation process. should include the principles of the above  | icies and procedures to address<br>eed to ensure that there is<br>nd proper staffing to ensure safety<br>In addition, the procedures |
| Recommendations                                     | <ol> <li>Develop policies and procedures for this provision.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol>   |  |
| Evidentiary Basis                                   | Document review, observation   |  |
| Provision 15.2<br>Family Support<br>and Interaction | Within 90 days of the effective date of this Young shall provide accommodations that visits with their families.   |  |
| Status  | Non Compliance   |  |
| Discussion  | Although the facility does not have policies provision; during this second visit I found of developing them. Visitation is still being intercom system. Please see previous repo   | that the facility is in the process g conducted through the existing   |
| Recommendations                                     | <ol> <li>Develop policies and procedures to address this provision.</li> <li>Identify area where contact visitation will take place.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol>   |  |
| Evidentiary Basis                                   | Document review, observation   |  |
| Provision 15.3 Family Support and Interaction       | Visitation shall be regularly scheduled at least three times per week, which shall include evening and/or weekend visitation times in order to encourage family visitation. Henley-Young shall permit the minor siblings of confined youth to participate in visitation, as long as the minors' parent or guardian is present during the visit and the siblings are not harmful to the youth who is detained at Henley-Young. Henley-Young shall also permit a confined youth's own child (ren) to participate in visitation |  |
| Status  | Non Compliance   |  |
| Discussion  | The facility still has not developed policie provision. See the previous report.   | es and procedures to address this  |

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| Recommendations   | <ol> <li>Develop policies and procedures and practices to address this provision.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol> |
|-------------------|---|
| Evidentiary Basis | Document review, observation  |

| Provision 15.4 Family Support and Interaction | Youth may receive phone calls from their attorneys. At the discretion of the Director or assignee, in emergency situations, youth may receive phone calls from parents, primary caretakers, or legal guardians. Emergency phone calls and phone calls from attorneys should not be restricted as a form of punishment |  |
|---|---|--|
| Status  | Non Compliance  |  |
| Discussion                                    | The facility still does not have policies and procedures for this provision. See previous report.   |  |
| Recommendations                               | <ol> <li>Develop policies and procedures and practices to address this provision.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol>   |  |
| Evidentiary Basis                             | Document review, observation  |  |

#### 16 Miscellaneous Provisions

| Provision 16.1<br>Miscellaneous<br>Provisions | Male and female youth shall be provided with equal access to educational and rehabilitative services, medical care, and indoor and outdoor recreation.   |   |
|---|--|---|
| Status  | Non Compliance   |   |
| Discussion                                    | The facility still does not have policies and found during my second visit that the fem complaining about the little time they receprograms (i.e. gym, board games and rehat program) as opposed to the male residents facility continues to hold the female residents duty. Although all residents participated in everything else remains the same. As I reverged that the female residents get everything else remains the same. See previous | ale residents were still eived in outdoor recreational bilitative services 89 day a. Also, as mention above, the ents solely responsible for laundry in the educational program viewed this process again, I further en less recreational time due to a |
| Recommendations                               | <ol> <li>Develop policies and procedures a</li> <li>Cease in the designation of female responsible for laundry; this is a drawell as females.</li> <li>Develop monthly recreational schedules.</li> <li>Develop comprehensive facility schedules.</li> <li>Provide training for staff on policies.</li> </ol>  | residents as being solely aty male residents can perform as edules.   |

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|                   | training.                                |
|-------------------|--|
| Evidentiary Basis | Document review, observation, interviews |

| Provision 16.2<br>Miscellaneous<br>Provisions | The parties agree, however, that henceforth: All youth shall have the opportunity to engage in at least one hour of large muscle exercise a day.  |  |
|---|---|--|
| Status  | Non Compliance  |  |
| Discussion                                    | This is still an issue because of the lack of appropriate staffing and the lack of an organized facility and recreational schedules. The facility still does not have policies and procedures for this provision.   |  |
| Recommendations                               | <ol> <li>Develop policies and procedures and implement practices to address<br/>the needs of this provision.</li> <li>Develop and implement programming and recreational schedules.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol> |  |
| Evidentiary Basis                             | Document review, observation, interviews  |  |

| Provision 16.3<br>Miscellaneous<br>Provisions | Henley-Young shall implement a policy which prohibits staff from insulting youth or calling them names, and using profanity in the presence of youth   |  |
|---|--|--|
| Status  | Non Compliance   |  |
| Discussion                                    | Again the residents complained about the staff uses profanity and making derogatory statements in their presence. This also again documented in SPLC reports I reviewed. See discussion in provision 8.1.  |  |
| Recommendations                               | <ol> <li>Develop policies and procedures and practices to address the needs of this provision.</li> <li>Provide training to staff in the proper de-escalation techniques of youth.</li> <li>Administration must provide enough supervision to reduce or eliminate insulting behavior by staff.</li> <li>Discipline and retrain staff as needed.</li> <li>Provide training for staff on policies and procedures and document training.</li> </ol> |  |
| Evidentiary Basis                             | Document review, observation, interviews   |  |

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| Provision 16.4<br>Miscellaneous<br>Provisions | Henley-Young shall implement an adequate grievance policy that is accessible to all youth regardless of literacy levels, and that provides youth with the opportunity to appeal facility level determinations. Youth shall obtain the grievance forms from the school liaison.  |  |
|---|---|--|
| Status  | Beginning Compliance  |  |
| Discussion                                    | The facility has produced policies and procedures to address this provision. Now it is important to develop the appropriate training for staff and the residents on the correct use of the grievance process. This is a major component in the operations of a juvenile detention facility and needs to be up and operational as soon as possible. It is a means by which the residents can express their concerns and a tool for the administration to gage what is happening within the facility. In my interviews with residents, they expressed concerns with the grievance procedure because they felt that the staff was using their grievances as excuses to keep them locked down. The residents do not trust the system in its present form. The administration must emphasize the importance of the grievance process to staff and assure the residents that it cannot and will not be used as a tool against them. |  |
| Recommendations                               | <ol> <li>Place grievance boxes on each unit and school.</li> <li>Provide training for staff on policies and procedures and document training.</li> <li>Provide training for youth on policies and procedures and document training.</li> <li>Ensure that youth are adequately familiarized with the grievance process during their orientation into the facility.</li> </ol>  |  |
| Evidentiary Basis                             | Document review, observation, interviews  |  |

| Provision 16.5<br>Miscellaneous<br>Provisions | Hinds County denies that Henley-Young of adequate policy whereby youth can request Youth Court counselor. The parties agree, Henley-Young shall develop and implement youth of all ages and literacy levels with their attorney and/or Youth Court counsel requesting a visit from his/her counselor from Young agrees to collaborate with the Plain comprehensive juvenile justice pre-service for detention center staff. Training shall in mandatory reporting requirements for direct of the Prison Rape Elimination Act, verbal adolescent brain development and develop communication with adolescents, effective | however, that henceforth: ent an adequate policy that allows the opportunity to request to see or. Youth shall obtain the form from the school liaison. Henley- ntiffs to design and implement a e and in-service training program fielde, but is not limited to, the fect care workers, the requirements and de-escalation techniques, formental issues, effective feed documentation, appropriate use |
|---|---|---|
|   | of force and restraint, and best practices for detention center administration.   |   |
| Status  | Non Compliance  |   |

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| Discussion        | The facility still needs to develop adequate policy and procedures for this provision. During my interview with the residents they constantly complained about not seeing their legal counsel and their court counselors. |  |
|-------------------|---|--|
| Recommendations   | <ol> <li>Develop policies and procedures and practices for this provision.</li> <li>Provide and document training for staff on policies and procedures.</li> </ol>  |  |
| Evidentiary Basis | Observation, interviews   |  |

#### **Conclusion**

This is my second official visit to the Henley-Young Detention Facility. As stated in my introduction, the facility has made some improvements but still has a long way to go. The lack of staffing is still of major concern. Without proper staffing, the residents and staff are being neglected. In part, because staff members are burnt out, the residents are not safe. In this environment there are always short cuts taken, which could at some point jeopardize the County because it is constantly placing the County at risk of liability and reduces any well developed detention/rehabilitative model. The County Administration is on the right track but needs a great deal of assistance from all stakeholders. Also, the provisions that relate specifically to medical healthcare and mental health issues and the lack of an organized process to get access to these services are of an enormous concern. The proposed contracts for these services should be executed with no delay. Additionally, as stated in my introduction the Henley-Young School should be fully evaluated by an outside educational professional. I also recommend that the school administrator and principal visit various educational detention programs i.e. Michigan, Illinois and Georgia that will give better insight into educational services provided from an institutional standpoint. As it relates to the facility's care and custody side, they have made some improvements and should continue to make progress fully developing policies and procedures and hiring of additional qualified staff. As stated in my last report, this will be a long process and I am optimistic that the leadership from the County Administrator will help move this process forward. Again, I would like to thank the facility's director and staff for their cooperation and accommodations.

LEONARD B. DIXON

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#### Attachment

