

**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 June 14, 2013
Report Date July 8, 2013**

**Submitted by
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**The
Fourth 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, observations and interviews

Result of visit on May 14-17, 2013

Documentation provided and reviewed

Medical Records on youths M. H., S.D., J. R., M.S., K. B. B.R. and O.C.

Incident Reports on youths D.W. (2), O.T. (10), W.B. (4), unknown youths labeled "A-Pod",
D.E. (2), R.McD.(3), D.P., K.Y., O.C., D.B. (3), L.T., J.B.(3), J.T., A.H., L.P., C.T., A.F.
(4), G.M., C.H.(6), E.B. (4), K.B., J.R., J.J. (8), W.E., S.A., B.R.(2), Q.L., N.R.,
E.McN.(2) O.C., and K.C.

Court/Detention Case Files on youths J.R., B.R., N.Y., K.B., W.A.S., M.S., J.C., A.F., M.H.,
O.C., and S.D.,

HYJDC School Reporting Document re: Resident Behavior on youths O.C., J. T., A.F.

MAYSI on youth B.R.M dated May 7, 2013

Records of current staffing

Officer's Roster

Filled and Vacant Care Staff/Positions by assigned units

Number of Supervisors by Shifts

New Employees Hired

List of Employees Resigned/Terminate

Menu/School Lunch Program for 4 weeks approved February 20, 2013

Restricted Diet Spreadsheet for week 4 dated February 20, 2013

Diet Information Handbook

School schedule

Dr. Ginger Smith's response to monitoring compliance reported dated March 22, 2013

Draft Policies/Procedures

Clothing & Bedding Exchange (2)

Emergency Release (Over Capacity) Adjustment (signed)

Unit Rules & Regulations

Direct Care Staff on Units

Mechanical Restraints

Resident Hygiene

Laundry

Clean & Sanitary Environment

Duties & Responsibility (Kitchen Staff)

Suicide Precaution & Prevention

Resident Telephone Calls

Equal Access

Codes of Conduct

Youth Counselor & Attorney Visit Request

Policy & Procedure (Education)

Due Process Reports (8)

Grievance Reports from 6 residents

Daily Population Sheets from February 1, 2013 to May 2, 2013*

*Missing weekend daily population sheets

Juvenile Detention Center Logs from February 2013 to May 17, 2013

Visitation Schedule Logs for February 2013, March 2013 and April 2013

Note: Visitation should be 3 times a week however after reviewing logs in February completed 9 out of 12 and in March and April completed 12 out of 13

Juvenile Telephone Log for August, February 20, 2013, March 18, 2013, March 25, 2013, March 29, 2013, April 8, 2013, April 19, 2013, April 22, 2013, April 26, 2013*

Note: After review of telephone logs data does not show that phone calls are allowed on a consistent basis. In addition, there is no indication that youth are allowed to mail letters.

Food Service Standard Operating Procedures

Contents
Sanitation
Juvenile

Food Service Diet Handbook

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Southern Poverty Law Center letter dated April 3, 2013

Southern Poverty Law Center letter dated May 22, 2013

Southern Poverty Law Center letter dated May 30, 2013

Staff Interviewed

Dale Knight Director

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

Eric Dorsey, Intake Counselor Aide

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

Evelyn Sullivan, SICU Counselor State of Mississippi

Chanda Rhodes, GED Teacher

Lashonna D. Fletcher, SICU Counselor

Honorable William B. Skinner II, Hinds County Youth Court Judge

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

Youth Interviewed

Youth M.H. 15 years old

Youth S.D. 16 years old

Youth A.T. 17 years old

Youth C.B. 17 years old

Youth J.R. 15 years old

Youth N.Y. 17 years old

Youth W.A.S. 13 years old

Youth B.R.M. 17 years old

Youth C.T. 17 years old

Youth J.Y. 17 years old

Introduction

This is my fourth official visit to the Henley-Young Juvenile Justice Center. I visited the facility from May 14, through May 17, 2013 for the purpose of an official inspection. I would like to thank the facility staff, administration and the County for their continued patience and cooperation during my visit. It is very much appreciated.

As my previous reports have explained the facility still has major areas in need of full development. These areas are staffing, mental health, medical, training, education and special education issues, program development, daily scheduling and record keeping, case management and rehabilitation programs to mention a few. As stated in my previous reports the facility is making incremental (small positive) improvement.

As I have discussed in my prior reports the facility is in need of an adequate facility structure. However, since my last report the County has developed an administrative structure or organizational chart that should assist in a more effective way of operating the facility. This foundation should improve administrative functioning as the structure is implemented. The facility now has an operations manager and two quality assurance coordinators additionally the County is now recruiting for a Director who can concentrate on administrative functions. The director's position is critical to the implementation of the organization's structure. The new director must have strong administrative and management skills; in addition to a strong foundation in the operations of juvenile correction and detention facilities with experience and an understanding of the standards and practices. It should be noted that although the new structure is being implemented, there will be a need for strong support of the new director from the administration. Based on my review and working with the Hinds County administration, the County Administrator will need to have a position created or assigned to help support and sustain this process (i.e. Deputy Administrator or Manager) at her level. This position would help support the implementation of the structure being put in place. As this new administrative structure is developed for the facility the County must ensure that there is enough high level support that the new culture being developed is ossified as it relates to the needs of the facility.

Since my last visit the County has moved **19 additional provisions to the beginning compliance** stage. During this visit it should be noted that the County has contracted its food service through ABL Management Inc. In my interview with youth at the facility, I found no major complaints. Since this is a new company providing this service I will review its compliance areas at some point in my next visit.

While at the Henley-Young facility I reviewed youth facility files, court files and medical files. My review of facility and court files revealed that they were incomplete:

- a. facility files lack proper legal documents,
- b. photos and finger prints of youth were not in files
- c. there were no proper court admittance and release forms and
- d. no incident, grievance or documents that would provide an understanding of the youths stay at the facility.

In addition, there were no case notes to determine any progress or lack of progress the youth may have made during his or her stay at the facility. My review of files also revealed Juvenile Detention Officers have been authorizing and releasing youth without proper court approval

which has been an accepted way of doing things for an extended period of time. This process appears to be long standing which, according to detention staff dates back to when the courts had jurisdiction over the facility. During my interview with the courts they were not aware that this was occurring. As it relate to court files several files had no authorization for youth to be detained in them (i.e. youth K.B., N.Y., B.R. and M.H.). Although the court advised that authorization to continue to detain these youths was in the computer file, there must be a system in place to ensure that detention and release orders are in the court and detention facility files. There is a lack of communication and processing between the detention facility and juvenile courts. This must be addressed to ensure that there is a constant and accurate flow of information between both intermediates.

My review of the health care files revealed a system of filing that is totally inadequate and in poor condition at best. The files reviewed had youth entering the facility multiple times with the same physical exam sheet used repeatedly with lines drawn through the date. On the same form even though the youth entered the facility on three separate occasions the youth's history and physical examination were identical to the first with no new information discernible. This was consistent throughout other medical files I reviewed. Also, progress notes did not have patients name, dates of birth; columns for date and time of entry or signatures of who treated the youth. Worst, the youth I interviewed stated that sometimes they are seen by the nurse with other youth present. On one occasion this caused two female residents to engage in a fight because the one girl returned to the unit and told other residents about the other girl's medical condition. In speaking with the County Administrator they are attempting to address this issue by contracting the medical services. However, in the interim, I would recommend the County work with the University of Mississippi, School of Medicine which could allow medical professionals who are in their training programs to assist the facility with its medical and nursing needs. There is no question that major liability issues are present with the medical care system as it stands presently.

During this visit, I was also invited by the juvenile court judge to observe their drug court program. In drug court programs the court will usually look at the availability of services that will address the youth's needs. There are also other key areas to the drug court program that involves various entities, the Judge, the family, the prosecutor, the youth's attorney, the treatment provider, a school representative and a counselor who are all working collaboratively. Although, I only observed one hearing I found the informal nature of the hearing was valuable for the youth and family present at the hearing. The hearing provided a more relaxed atmosphere and lacked the sometimes intimidating processes most families experience when in a court setting. If all of the other components and resources are in place then the courts is moving in the right direction with this program.

A review of incident reports at the facility revealed that it is very difficult to determine the level of fights or assaults that occurs in the facility. There was no adequate tracking system of incidents as they occurred. The degree of the violation or the outcomes of the investigation of the incident were not reported. In addition, incident reports do not accurately reflect the incidents that take place. For example, there was one youth that was assaulted by a staff member however the incident report said that the youth fell in the shower. It should be noted that the administration did investigate the incident and terminated the employee, which was the correct decision. In a more recent incident a youth's arm was bitten by a staff member in a seemingly

justified restraint situation. However, the report does not indicate how the bite occurred. It appears in this situation, the employee was inadequately trained and failed to use any appropriate training techniques, in addition to reporting how the bite marks occurred. If the officer felt there was no other alternative (but to bite the resident) to regain control of the situation, then this should have been documented in her report. Since the incident was not reported accurately, it stands to reason the officer reverted to primal reflexes to regain control. Two necessary skills for any detention worker are the abilities to observe behaviors accurately and to record them in a clear and concise fashion. The facility must ensure that employees are not only initially trained in proper restraint techniques and proper documentation, but that training is conducted annually. The County is investigating the incident which is good but as stated in my last report the facility has to have one system of incident reporting and review that provides an accurate picture of incidents. They should also have an independent reviewer of incidents of this nature which will protect the youth and staff. The administration is strongly encouraged to collect and monitor data regarding youth-on-youth and staff-on-youth and youth-on-staff violence. Such information is very useful in monitoring the quality of life and is of great assistance in providing for the safety of both youth and staff. The administration should evaluate trends. For example:

- At what time of the day are fights or assaults occurring?
- Where are incidents occurring?
- Do they happen with a certain staff person?
- Are reports reflective of the incidents that occur?

Such information can greatly assist in proactive management of the facility. Although all of the above are important, training is also a major component that must be a part of the solution. It should be noted again that the facility has hired two Quality Assurance coordinators. These two positions should be utilized to help track and address these concerns and with proper direction they will be an extremely valuable tool for henley-young.

Another important area that needs to be addressed is the movement of youth from point to point within the facility which I observed to be somewhat chaotic. On several occasions youth were still left alone in visitation area, classrooms and intake area. The youth (two girls) who were suspended from school for a couple of weeks were placed in the intake cells which are located at the other end of the building. This created a hardship on a facility that lacks adequate staff in the beginning. As a result, staff was running from court, intake, supervising a youth for in GED program who came from outside the facility and also trying to book youth who was being detained. It is **pure luck** that there have been no major occurrences. A facility cannot run based on luck it must be operated based on good policies and procedures proper staffing and contemporary detention standards.

Training

Based on my previous reports I am reiterating that the facility is still in need of an organized training program that holds staff and the facility accountable for their actions and development of the facility's programs. Accountability-based interventions change juvenile offenders through healthy relationships with healthy adults in healthy environments. Despite the many relatively unchanging characteristics of juvenile confinement, effective staff development and training are dynamic concepts shaped by improved strategies on adult learning, advances in technology, and

innovations in juvenile justice interventions. To maintain the momentum of quality improvements, it is vitally important that training tools be developed, reviewed, repaired, improved, or replaced on a periodic basis (i.e. de-escalation and restraint). Again I am recommending the County to contact the National Partnership for Juvenile Services (NPJS) to assist with developing a training plan for Henley-Young. There are fourteen training modules included in the NJDA Detention Careworker Curriculum. The lesson plans range from 2 to 6 hours in length. The intent is for Henley-Young to design their training program—length, content, delivery strategy—to meet the facility’s training needs and time allocation. This was stated in my previous report.

The NJDA Detention Careworker Curriculum—3rd edition is comprised of the following modules:

- Anger Management
- Basic Health Care and Admissions Screening
- Behavior Management
- Behavior Observation and Recording
- Conflict Resolution
- Critical Issues Impacting Juvenile Justice
- Cultural Sensitivity
- Effective Communication
- Juvenile Rights
- Leadership
- Managing Mentally Ill Youth
- Reentry
- Safety and Security
- Suicide Prevention

This is a reiteration of my recommendations from my previous reports. It should be noted again that training will be a significant part of this process. In my last report I noted that the County Administrator, facility Director, supervisor and officer participated in a national juvenile justice symposium held in Biloxi, Mississippi. I continue to stress the valuable nature of these symposiums, because of the information received and the ability to network with other professionals in the field and how critical they are for professional growth and development. It will also, assist the County in broadening its understanding of juvenile issues and provides the facility staff with a better understanding of juvenile detention in general. The key is for the information received to be translated into detention best practices which is a time-consuming course of action.

School

As it relates to the school, during my interview with the school principal; she stated that “There is a system problem at Henley-Young. There is no connectivity to school, GED, detention and courts”. “They don’t plan together.” “They have to plan together.” I would agree. I also interviewed the new part-time GED instructor who has worked at the facility for three months and has over six years of GED preparation experience. She stated the following ideas:

- A. “need policy and procedure”
- B. “everyone needs to know what to do”

- C. “the expectations should be written even kids should know them”
- D. “policy and procedure should be based on standards”
- E. “everyone should have the tools to do their job”
- F. “proper staffing is needed”
- G. “staff should be well trained to deal with this type of population”

These are areas of concern I have discussed in my previous reports. In addition, the school should use small portable classrooms (which can be placed on the grounds of the facility within the security fencing) to help alleviate the congestion for students and teachers who are now forced to teach class in a storage closet, which is not conducive to learning. Again below are my recommendations, from my previous reports and are listed below:

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.

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. **I am recommending again that the Jackson Public School system (JPS) hire a compliance officer to ensure that the school educational standards are being met.**

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. However, as stated above the facility has made progress on some provisions which moved them from Non-Compliance to beginning compliance.

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	1 st Report	2 nd Report	3 rd Report	4 th Report
1.(1)	All Youth Admitted to Henley-Young	NC	NC	NC	NC
1.(2)	MAYSI-2 Mental Health Screening	NC	NC	NC	NC
1.(3)	Prescription Medications	NC	NC	NC	NC
1.(4)	Meal Compliance	NC	NC	NC	NC
1.(5)	Telephone Usage	NC	BC	BC	BC
1.(6)	Strip Search Policy	NC	BC	BC	BC
Provision	Staffing and Overcrowding				
2.(1)	Direct Care Staff Ratio	NC	NC	NC	NC
2.(2)	Maximum Capacity Adjustment	NC	NC	NC	BC
2.(3)	One-Person Cell	NC	NC	NC	BC
Provision	Cell Confinement				
3.(1)	Structured, Rehabilitative & Educational Programming	NC	NC	NC	NC
3.(2)	Appropriate Access to Living Unit	NC	NC	NC	NC
3.(3)	Dangerous Youth	NC	NC	NC	NC
3.(4)	Isolation	NC	NC	NC	NC
3.(5)	Direct Care Staff on Units	NC	NC	NC	BC
Provision	Structured Programming				

4	Educational, Rehabilitative, and/or Recreational Programs	NC	NC	NC	NC
Provision	Individualized Treatment Plans/Treatment Program for Post-Disposition Youth				
5.(1)	Youth Access to Adequate Rehabilitative Services	NC	NC	NC	NC
5.(2)	Health and/or Substance Abuse Treatment	NC	NC	NC	NC
5.(3)	Treatment Plans	NC	NC	NC	NC
5.(4)	Review of Individual Treatment Plans	NC	NC	NC	NC
5.(5)	Evening And Weekend Programs And Activities	NC	NC	NC	NC
5.(6)	Quality Assurance Program	NC	NC	NC	NC
Provision	Disciplinary Practices And Procedures				
6.(1)	Implement a Discipline Policy and Practice	NC	NC	NC	NC
6.(2)	Policy for Youth Violations	NC	NC	NC	NC
Provision	Use of Restraints				
7.(1)	Mechanical Restraints	NC	BC	BC	BC
7.(2)	Mechanical Restraints Transportation	NC	BC	BC	BC
7.(3)	Misuse of Mechanical Restraints	NC	BC	BC	BC
7.(4)	Mental Health—Use of Mechanical Restraints	NC	NC	NC	NC
7.(5)	No Restraint Chairs, Chemical Restraints and/or Tasers	NC	BC	BC	BC
7.(6)	No Hogtying in Facility	NC	BC	BC	BC
7.(7)	Mechanical Restraints—One-On-One Supervision	NC	NC	NC	BC
7.(8)	Mechanical Restraints—Notice to Medical Professional	NC	NC	NC	BC
7.(9)	No Electronic Restraints	NC	BC	BC	BC
7.(10)	No Firearms in Facility	NC	NC	BC	BC
Provision	Use of Force				
8.(1)	No Misuse of Use of Force	NC	NC	NC	NC
8.(2)	Notice to Medical Professional After Use of Force	NC	NC	NC	NC

Provision	Meals and Nutrition				
9.(1)	All Meals and Snacks Must Be Nutritional	NC	NC	NC	BC
9.(2)	Comply with Nutrition Guidelines	NC	BC	BC	BC
9.(3)	Provide Drinking Water Throughout the Day	NC	BC	BC	BC
Provision	Clothing				
10	Provide Basic Clothing Items	NC	NC	NC	BC
Provision	Hygiene And Sanitation				
11.(1)	Provide Appropriate Hygiene Products	NC	NC	NC	BC
11.(2)	Provide Sleeping Mats and Blankets	NC	NC	NC	BC
11.(3)	No Deprivation of Mats and Blankets	NC	NC	NC	BC
11.(4)	Sufficient Sanitary Mats and Blankets	NC	NC	NC	BC
11.(5)	Clean and Sanitary Environment	NC	BC	BC	BC
11.(6)	Fire Safety, Weather Emergencies, Sanitation Practices, Food Safety and Provide Safe Environment	NC	NC	NC	NC
11.(7)	Clean Drinking Glasses and Eating Utensils	NC	NC	NC	BC
Provision	Medical Care				
12.(1)	Provide Youth With Adequate Medical Care	NC	NC	NC	NC
12.(2)	Provide Medical Professional When Needed	NC	NC	NC	NC
12.(3)	Implement a Sick Call Policy to Ensure 24 Hr. Services	NC	NC	NC	NC
12.(4)	Prescription Medications Only Dispensed by Medical Staff	NC	NC	NC	NC
12.(5)	Provide Medical and Mental Health Services	NC	NC	NC	NC
12.(6)	Proper Monitoring Youth Who Require Individualized Attention	NC	NC	NC	NC

Provision	Mental Health Care				
13.(1)	Provide Adequate Mental Health Services	NC	NC	NC	NC
13.(2)	Youth and Psychotropic Medications	NC	NC	NC	NC
13.(3)	Within 72 Hours of Admittance Complete an Individual Mental Health Treatment Plans	NC	NC	NC	NC
13.(4)	Implement Policies and Procedures for Referrals	NC	NC	NC	NC
13.(5)	Sufficient Psychiatric Services	NC	NC	NC	NC
13.(6)	Psychiatrist and/or Counselors to Record Review to Ensure Proper Care	NC	NC	NC	NC
Provision	Suicide Prevention				
14.(1)	Multi-tiered Suicide Prevention Policy	NC	NC	NC	BC
14.(2)	Evaluate Highest Level of Suicide Watch Every 12 hours By Medical Professional	NC	NC	NC	BC
14.(3)	Closely Monitor Suicide Watch Youth During All Activities	NC	NC	NC	BC
14.(4)	Court Shall be Notified Within 24 hours of Any Youth on Suicide Watch	NC	NC	NC	BC
Provision	Family Support and Interaction				
15.(1)	Visitation Shall Not be Restricted or Withheld	NC	NC	BC	BC
15.(2)	Provide Accommodations for Contact Visits	NC	NC	BC	BC
15.(3)	Visitation Shall be Regularly Scheduled	NC	NC	BC	BC
15.(4)	Phone Calls Shall be Allowed Based on Policy	NC	NC	NC	BC
Provision	Miscellaneous Provisions				
16.(1)	Provide Equal Access To All Services	NC	NC	NC	BC
16.(2)	Provide the Opportunity To Participate In Large Muscle Exercise Every Day	NC	NC	NC	NC
16.(3)	Prohibit The Use Of Profanity In The Presence Of Youth	NC	NC	BC	BC
16.(4)	Provide Adequate Grievance Policy	NC	BC	BC	BC
16.(5)	Provide Youth Of All Ages With The Opportunity To See Their Attorney and/or Youth Court Counselor	NC	NC	NC	BC

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

1. Intake

Provision 1.1 Intake	<p>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).</p> <p>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.</p>
Status	Non-Compliance
Discussion	<p>Based on review, observations and interviews, the facility does not meet the requirements for this provision. The facility is still in the process of developing policies and procedures in addition to ensuring that areas A through J are part of the intake process. As it relates to policy, there has been none presented for review and approval. Also, according to this provision information acquired should be completed by an Intake Officer and educational screening forms developed and provided by the Jackson Public School District. Therefore there is no movement on this provision. Please see recommendations below. These are the same recommendations based on previous report. The provisions remain in non-compliance.</p>
Recommendations	<ol style="list-style-type: none"> 1. Fully develop admitting policies and procedures to reflect provision 2. The court should provide staffing for intake purposes 3. The facility should provide enough staff to fully cover the care and custody issues in the facility 4. Ensure all staff who admit youth are properly trained 5. Develop training records 6. Provide documentation in a organized way on youth being screened/admitted (files) 7. Ensure all youth records are available for my review with all areas of the provisions placed in the youth's file
Evidentiary Basis	Document review, observation, interviews

Provision 1.2 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	<p>The facility is using the MAYSI-2 information for screening. However my evaluation of the processes after the MAYSI-2 has been administered showed that youth that exhibit an immediate need for behavioral modification therapy were not receiving it. I interview a newly admitted youth to the facility. During my interview with B.R.M. I found that his MAYSI-2 screening indicated that he was in need of immediate psychological care. My interview with him showed that he was hearing voices, filled with anxiety and having panic attacks. He was clearly in need of the psychotropic medication he indicated he was taking or some form of medical care. This youth was placed on a unit with without being reviewed by a mental health professional for his suicidal ideations .This was not because the staff did not want to assist the youth; they had no resource (i.e. mental health support). There was no one-on-one supervision for this child who was obviously in a state of mental crisis. This is again an indication of the need for direct access to mental health care at anytime. The research has clearly stated that over 60% of youths entering a juvenile facility have some diagnosis of mental disorder. The facility needs first to answer the following questions below; then follow the recommendations.</p> <ol style="list-style-type: none"> A. What are the program objectives for mental health screening? B. What are the characteristics or common traits the program wants to identify for emergency or follow-up clinical consultation? C. What MAYSI-2 scores will the facility use as the signal for the program staff to obtain clinical consultation or services? D. What mental health follow-up services are available when the youth's MAYSI-2 score indicates that they are needed? E. In what way will the facility develop a database that creates a profile of mental health needs in the population and program decisions and adjustments needed to improve mental health services for the residents? 	
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policy and procedures for this provision 2. Develop youth files that are organized and arranged properly 3. Develop training and provide documentation of training 	

	<ol style="list-style-type: none"> 4. Identify person or person(s) whose responsibility is to score the instrument 5. Provide documentation on who reviews the instrument and note what services are provided for the youth in the facility and what services should continue when the youth leaves the facility 6. Develop process whereby facility staff and court employees develop system for the sharing of information and reviewing of youth files which are centrally located and accessible to detention staff.
Evidentiary Basis	Document review, observation, interviews

Provision 1.3 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	<p>Based on document review, interviews and observations, the facility remains non-complaint with this provision. Therefore, the facility should continue to follow the recommendations below which are the same as in the previous report. The initial intake/admission process is a critical part of youth transition when they are entering the facility. During my review I found that because of the lack of staffing, it was very difficult for staff to really get a firm understanding of youth when they entered the facility. On one occasion during my visit, staff members were pulled from the Master Control area to ensure that a youth was admitted.</p> <p>Since there is no medical staff on duty after 2 pm during the week or on the weekends, it is very difficult for the facility to meet this provision. In addition, I found no documentation of Henley-Young purchasing prescription medication for youth confined at the facility. While the facility is soliciting a medical provider to carry out medical services to the facility, and a medical provider has not been selected, it still has the responsibility to maintain medical/medication and all other medical needs to the residents. Based on my review of documents and observation, services are not in place and are still not being provided for this provision. Therefore I am reiterating that the suggested actions and recommendations from my previous report be reviewed and put into action.</p>	
Recommendations	<ol style="list-style-type: none"> 1. Develop written policy and procedures or protocol for this provision 2. Document staff training on distribution and side effects of medication 3. Provide documentation on efforts to obtain prescription drugs 	

Evidentiary Basis	Document review, observation, interviews
Provision 1.4 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	During this visit, my interviews with youth and my observations, all indicate that some youths were being offered snacks or meals upon their admittance to the facility and others indicated that they were not. Because there is no record keeping regarding this provision it is hard to keep track of what is or is not happening As policies and procedures are developed around this provision it should include a way of tracking when and what youth are offered and whether the youth receives or refuses the offering. This can be accomplished by either notations in the log book or a specific form or tablet can be used for this specific purpose.
Recommendations	<ol style="list-style-type: none"> 1. Continue in the development of policies and procedures for this provision. 2. Procedures should be part of intake/admission procedure. 3. Ensure there are snacks or sandwiches available for youth being admitted between 6 pm and 5 am.
Evidentiary Basis	Document review, observation, interviews

Provision 1.5 Intake	Upon admission to Henley-Young, all youth shall be permitted to telephone a parent or legal guardian free of charge and to take a shower before being placed on the pod.
Status	Beginning Compliance
Discussion	The facility has developed a policy regarding this provision Although the facility does permit youth to make telephone calls to parents and legal guardians without charge, several, youth that I interviewed stated that they were not allowed to take showers prior to being placed on their units. This should be addressed during the implementation of the policy and procedures and the training of staff.
Recommendations	<ol style="list-style-type: none"> 1. Develop a consistent way to document the intake process that shows that a phone call and shower were completed. 2. Develop policy and procedure for this provision.(executed)
Evidentiary Basis	Document review, observation, interviews

Provision 1.6 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	Beginning Compliance	
Discussion	Again, the facility does have policy and procedures for this provision and during my interview with youth I found no youth who acknowledged there was inappropriate intrusion during the search process upon their admission to the facility. I did review the process, however to become further compliant with this provision there must be documentation of the policy and documentation of staff training on this procedure. Continue to comply with 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 of training. This documentation should be kept and logged in facility records. I will review this process during my next visit.	
Evidentiary Basis	Document review, observation, interviews	

2 Staffing and Overcrowding

Provision 2.1 Staffing and 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 has developed and put in place an operational structure which includes an operations manager and two quality assurance coordinators. However, because of turnover the facility still fall short of the required ratio of youth to staff. During this past visit I still found areas where the staff to youth ratio was extremely off. Presently staff members are trying to do so many things at the same time, the facility operations appears frenzied. There were staff members doing intake and watching youth that had been suspended from school. Because of the lack of staff and the many functions going on simultaneously it was impossible to secure anything. For example, there were two girls in the visitation area without supervision. The master control staffer was trying to supervise them and run master control from the booth. There were two youth in the intake area and another youth being brought in by the police and an additional youth that was brought into admitting for the GED preparation classes which are from 8:00 am to 11:00 am. There was only one supervisor trying to control and balance these activities and processes. I expect that if the Henley-Young Justice Center continues to operate in this manner those accidents and mistakes will	

	<p>continue too happen and pertinent information will be missed. At this point the facility needs to formalize its shift change process so that pertinent information can be shared between officers who have completed their shift and those who are coming to work. Currently, some staff members stated that they arrived to work a few minutes early so they can read the unit log book or talk with the earlier shift's staff .However, some officers are prepared to leave the units without any information exchange. This process should be reviewed so that there is a brief overlap where important information about the residents and their activities can be routinely shared. Also, administrators and unit supervisors should routinely make unannounced visits to the facility on weekends and at night to assure that policies and practices are being followed. There should be no particular pattern to these visits. Officers should know through observation that the leadership of the facility may come in without notice. During my observation of the shift change, I found that the staff was preparing to exit the facility even before the new staff had arrived. This should be addressed to ensure that there is proper communications, as I stated above, prior to the changing of the shifts.</p>																																																																															
<p>Recommendations</p>	<table border="1"> <thead> <tr> <th data-bbox="462 940 721 978">Units</th> <th data-bbox="725 940 898 978">Day Shift</th> <th data-bbox="902 940 1136 978">Evening Shift</th> <th data-bbox="1141 940 1312 978">Night Shift</th> <th data-bbox="1317 940 1440 978">Total</th> </tr> </thead> <tbody> <tr> <td data-bbox="462 1016 721 1054">A officer</td> <td data-bbox="725 1016 898 1054">3</td> <td data-bbox="902 1016 1136 1054">3</td> <td data-bbox="1141 1016 1312 1054">2</td> <td data-bbox="1317 1016 1440 1054">8</td> </tr> <tr> <td data-bbox="462 1089 721 1127">B officer</td> <td data-bbox="725 1089 898 1127">3</td> <td data-bbox="902 1089 1136 1127">3</td> <td data-bbox="1141 1089 1312 1127">2</td> <td data-bbox="1317 1089 1440 1127">8</td> </tr> <tr> <td data-bbox="462 1163 721 1201">C officer</td> <td data-bbox="725 1163 898 1201">3</td> <td data-bbox="902 1163 1136 1201">3</td> <td data-bbox="1141 1163 1312 1201">2</td> <td data-bbox="1317 1163 1440 1201">8</td> </tr> <tr> <td data-bbox="462 1236 721 1274">D officer</td> <td data-bbox="725 1236 898 1274">3</td> <td data-bbox="902 1236 1136 1274">3</td> <td data-bbox="1141 1236 1312 1274">2</td> <td data-bbox="1317 1236 1440 1274">8</td> </tr> <tr> <td data-bbox="462 1310 721 1348">Intake</td> <td data-bbox="725 1310 898 1348">1</td> <td data-bbox="902 1310 1136 1348">1</td> <td data-bbox="1141 1310 1312 1348">1</td> <td data-bbox="1317 1310 1440 1348">3</td> </tr> <tr> <td data-bbox="462 1354 721 1392">Master Control</td> <td data-bbox="725 1354 898 1392">1</td> <td data-bbox="902 1354 1136 1392">1</td> <td data-bbox="1141 1354 1312 1392">1</td> <td data-bbox="1317 1354 1440 1392">3</td> </tr> <tr> <td data-bbox="462 1398 721 1465">Staff for Court Transportation</td> <td data-bbox="725 1398 898 1465">2</td> <td data-bbox="902 1398 1136 1465">2</td> <td data-bbox="1141 1398 1312 1465"></td> <td data-bbox="1317 1398 1440 1465">4</td> </tr> <tr> <td data-bbox="462 1472 721 1539">Internal Transportation</td> <td data-bbox="725 1472 898 1539">2</td> <td data-bbox="902 1472 1136 1539">2</td> <td data-bbox="1141 1472 1312 1539"></td> <td data-bbox="1317 1472 1440 1539">4</td> </tr> <tr> <td data-bbox="462 1545 721 1583">Laundry</td> <td data-bbox="725 1545 898 1583">2</td> <td data-bbox="902 1545 1136 1583">2</td> <td data-bbox="1141 1545 1312 1583"></td> <td data-bbox="1317 1545 1440 1583">4</td> </tr> <tr> <td data-bbox="462 1589 721 1627">*Director</td> <td data-bbox="725 1589 898 1627">1</td> <td data-bbox="902 1589 1136 1627"></td> <td data-bbox="1141 1589 1312 1627"></td> <td data-bbox="1317 1589 1440 1627"></td> </tr> <tr> <td data-bbox="462 1633 721 1671">*Deputy Director</td> <td data-bbox="725 1633 898 1671">1</td> <td data-bbox="902 1633 1136 1671"></td> <td data-bbox="1141 1633 1312 1671"></td> <td data-bbox="1317 1633 1440 1671"></td> </tr> <tr> <td data-bbox="462 1677 721 1745">*Operation Manager</td> <td data-bbox="725 1677 898 1745">1</td> <td data-bbox="902 1677 1136 1745"></td> <td data-bbox="1141 1677 1312 1745"></td> <td data-bbox="1317 1677 1440 1745"></td> </tr> <tr> <td data-bbox="462 1751 721 1789">Supervisors</td> <td data-bbox="725 1751 898 1789">3</td> <td data-bbox="902 1751 1136 1789">3</td> <td data-bbox="1141 1751 1312 1789">2</td> <td data-bbox="1317 1751 1440 1789">8</td> </tr> <tr> <td data-bbox="462 1795 721 1871"> <p style="text-align: right;">Duty Post Staffing/Adms</p> </td> <td data-bbox="725 1795 898 1871" style="text-align: center;">26</td> <td data-bbox="902 1795 1136 1871" style="text-align: center;">23</td> <td data-bbox="1141 1795 1312 1871" style="text-align: center;">12</td> <td data-bbox="1317 1795 1440 1871" style="text-align: center;">61</td> </tr> </tbody> </table>					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 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	<p style="text-align: right;">Duty Post Staffing/Adms</p>	26	23	12	61
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	<p>61 Direct care/supervisor/laundry staffing X 1.5 Relief Factor—Total staff needed to effectively operate the facility—91.5 1 to 8 Awake—2 to 10 Sleep</p> <p><u>Misc. post coverage</u> Medical/MH Hospital Runs One on One MH/Medical Visitation *Administration *Maintenance</p>
Evidentiary Basis	Document review, observation, interviews

Provision 2.2 Staffing and Overcrowding	<p>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.</p>	
Status	Beginning Compliance	
Discussion	<p>The policy for the release of nonviolent youth in the instance of overcrowding at the facility has been signed by the Court Administrator, the YC Judge and the Executive Director. Procedures have been written; now the facility needs to complete training and documentation of training for implementation.</p>	
Recommendations	<p>Provide training to ensure that everyone is aware of the new policy and prepared for implementation should the need arise.</p>	
Evidentiary Basis	Document review, observation, interviews	

Provision 2.3 Staffing and Overcrowding	<p>No more than one youth shall be placed in a one-person cell.</p>	
Status	Beginning Compliance	
Discussion	<p>As previously stated I found no indication that the facility had more than one youth in a room. The facility has developed policies and procedures for this provision.</p>	
Recommendations	<p>1. Develop and provide adequate training for this provision.</p>	

	2. All training shall be documented.
Evidentiary Basis	Document review, observation

3 Cell Confinement

Provision 3.1 Cell Confinement	Youth shall be engaged in structured, rehabilitative, and educational programming outside of their cells during the hours of 7:00 a.m. to 9:00 p.m. each day, including weekends and holidays.	
Status	Non-Compliance	
Discussion	The facility still does not have a policy or procedures for this provision. There is no structured programming at the facility. The youth I interviewed stated that “they were allowed out of their rooms based on the number of staff present and if the staff felt like letting them out of their rooms”. As to the school I direct you to read the introduction and I further recommend that the school be fully evaluated. My review of the files showed that there is no case management within the facility as a whole. According to the youth, their basic recreation consists of playing cards and dominoes. They are allowed to go outside but there are no scheduled activities. Other than sitting on the bleachers and playing basketball those who are engaged in that sport, there was nothing for youth to do. There are no positive behavioral management programs within the facility.	
Recommendations	<ol style="list-style-type: none"> 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). 5. Develop monthly recreation schedule. 6. See all of the recommendations for school in the introduction. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 3.2 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 counter-indicated.	
Status	Non-Compliance	

Discussion	<p>The facility still has not developed policy and procedures for this provision. During my review, I found that two girls were placed in cells in the booking area because they were suspended from school. If a youth acts out in school there should be a behavioral management process in place to allow the youth to return to school as soon as possible. The school needs to revise any policies they may have regarding suspension of students from a school within a controlled environment. A student cannot be suspended from school in a detention facility therefore the school needs to develop a better behavioral management system. If a youth is removed from school due to behavioral problems that youth should never be placed in the booking area.</p> <p>The facility still needs to develop data collection tools to use to determine and identify who is placed on units, time, length etc when they are placed out of school. There has been no movement on this provision therefore I am reiterating that the suggested actions and recommendations from my previous report be reviewed and put into action.</p>
Recommendations	<ol style="list-style-type: none"> 1. Follow recommendations as set forth in section 3.1. 2. Develop adequate policies and procedures for this provision. 3. Develop data collection for youth who are placed in protective custody or confinement. 4. Youth who are removed from school should be placed in a designated living area.
Evidentiary Basis	Document review, observation, interviews

Provision 3.3 Cell Confinement	<p>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.</p>	
Status	Non-Compliance	
Discussion	<p>During this visit, I did find that the facility has developed a system for procedural due process for facility violations. However, I did not find any indication of 15 minute checks performed while youth were confined to their cells. The facility needs to develop policy and procedures and train staff on the process. I did review the new forms developed and although they are in the beginning stages they are aligned with best practices. Though processes on a few provisions have begun, it is vitally important that policy and procedures are developed to ensure a consistent, comprehensive, and</p>	

	standardized way of running the facility.
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policies and procedures for this provision. 2. For youth placed in their rooms, develop forms that indicate the time youth will be in their rooms and post it on their doors. 3. Ensure that supervisors sign off on the form in 15 minute staggered visual checks when youth are placed in their rooms. 4. Develop a system of major and minor consequences for behavior. 5. Develop form for 15 minute checks and include in policy.
Evidentiary Basis	Document review, observation, interviews

Provision 3.4 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 my previous report, the facility is still coordinating this provision with provision 3.3 and policies and procedure are still in developmental stages. Once completed training and documentation will need to be addressed. However, during my visit on several occasions, I observed youth that were placed in their cells and locked down because there was a lack of staff, with no orientation and no freedom to move about the unit. This can only be addressed when there is enough staff. No youth should be gratuitously subject to lock down.	
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policies and procedures for this provision. 2. Ensure all staff is trained and document training. 3. See provision 3.3 	
Evidentiary Basis	Document review, observation	

Provision 3.5 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	Beginning Compliance	
Discussion	The facility has developed a policy and procedures regarding this provision. Again due to the lack of staff it is very difficult for the facility to address this provision. Again I found youth were left unsupervised as stated in my	

	<p>previous reports and this continues to happen. During this visit youth were left on the unit, visitation and booking area as I stated in my discussion above. On the male units youth were left in the cells without supervision and on a couple of occasions during my visit, youth were out on the units without supervision. This is extremely dangerous because youth who are angry, more impulsive and without supervision have the potential to harm themselves and other youth. This creates a major liability for the facility. On another occasion, youth were on the unit without supervision although one staff was in the tower. There were doors opened on the unit which also allows for serious things to happen between youths. This is a major area of concern and must be addressed. It continues to make me uneasy as it has during my previous visits. Review of documentation and direct observation reveals that staffing continues to be a major problem at Henley-Young. There has been no movement on this provision therefore I am reiterating that the suggested actions and recommendations from my previous report be reviewed and put into action. Since a policy has been developed this provision will move to beginning compliance.</p>
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policies and procedures for this provision. 2. Provide adequate staffing. 3. Provide adequate staff supervision.
Evidentiary Basis	Document review, observation, interviews

4 Structured Programming

Provision 4 Structured Programming	<p>Henley-Young shall administer a daily program, including weekends and holidays, to provide structured educational, rehabilitative, and/or recreational programs for youth during all hours that youth shall be permitted out of their cells, pursuant to section 3.1. Programming shall include:</p> <ol style="list-style-type: none"> a. activities which are varied and appropriate to the ages of the youth; b. structured and supervised activities which are intended to alleviate idleness and develop concepts of cooperation and sportsmanship; and c. Supervised small group leisure activities, such as a wide variety of card and table games, arts and crafts, or book club discussions.
Status	Non-Compliance
Discussion	<p>During this visit I observed none of the ascribed activities being provided to the youth. The facility has developed a daily schedule however because of inadequate staffing, the schedule is not followed. During my visit, I observed youth with very little to do except play cards and dominoes. There were no arts and crafts programs and no structure or supervised activities. The facility still needs to develop this provision. There has been no</p>

	movement on this provision therefore I am reiterating that the suggested actions and recommendations from my previous report be reviewed and put into action.
Recommendations	<ol style="list-style-type: none"> 1. Continue to develop adequate policies and procedures for this provision. 2. Provide adequate schedules for weekdays and weekend programming and act on it. 3. Purchase televisions for each unit and board games for each unit.(Executed) 4. Develop an adequate monthly recreation schedule with age appropriate games and programs.
Evidentiary Basis	Document review, observation, interviews

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 access to adequate rehabilitative services. Henley-Young shall ensure that children placed in the facility post-disposition will receive constitutionally compliant rehabilitative services.	
Status	Non-Compliance	
Discussion	<p>As stated in my previous report the facility continues to use the 89-day program without a standardized method of operations. The court has hired a new SIU counselor who has been on board for approximately six months. According to the youth I interviewed, she is well liked. I interviewed the new counselor and found that she specializes in addiction and trauma. This is a good fit for the program and the youth enjoy working with her. However there are still no policies and procedures for the program. The youth I interviewed stated that “in the 89-day program we don’t do anything more than the other kids”; another stated that “in the 89-day program we have people to talk to you on Mondays and Tuesdays. They talk to you about life issues.” According to a third youth I interviewed there were no treatment plans. Based on my interviews with youth and my observations the 89-day program continues to need a methodological way of being presented. Presently there is no therapeutic milieu, no group activities, no behavioral modification programs and no way of producing these services.</p> <p>Since there is no structured programming outside of individual counseling, the County may want to hire case managers to provide initial and ongoing treatment plans, assess family strengths and weaknesses in various areas i.e. education, psychology, and health; develop treatment plans and remedy problems for youth and family for resident within the facility. Also the case</p>	

	<p>manager will identify indicators of goal achievements, specify the person responsible for implementing the resident's and family's treatment goals; update treatment plans; and develop discharge plans with recommendations. In addition, the facility needs counselors who are responsible for a youth's safe adjustment to secure confinement.</p>
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policy and procedures to meet this provision. 2. Either fund properly or discontinue the 89 day program. 3. Review light weight youth in program (i.e. disturbing the family peace) and find alternative placement for them. 4. Fund appropriate staffing to develop individualized treatment plans for youth in 89 day program. 5. Develop and fund alternative community programming for youth in 89 day program that can be serviced in community. 6. Hire 3 case manager who are assigned and work for the facility director.
Evidentiary Basis	Document review, observation, interviews

Provision 5.2 Individualized Treatment Plans Treatment Program for Post-Disposition Youth	<p>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.</p>	
Status	Non-Compliance	
Discussion	<p>Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating the action and recommendation from my previous report below. Youth entering the facility pre or post disposition (89-day program) still have no treatment plan as it relates to mental health although some youth are being seen by Hinds Behavioral Health counselors. Once a youth enters the facility and the screening shows evidence and warning signs of suicidal ideations, traumatic experiences, depressed moods, and/or somatic complaints etc. that are indicated by the MAYSI-2, the youth should be evaluated and have a treatment plan developed.</p> <p>There is no documentation to show that treatment was provided to youth based on identified warning signs; there are no treatment plans available, and there is no mental health staff available to implement the treatment plans. Also, I found no treatment plans for youth that were currently at the facility or post treatment plans for youth leaving Henley -Young. Interviews with staff showed they were very frustrated with the lack of mental health services at the facility. The staff members that I interviewed were very apprehensive and frustrated with the lack of knowledge in handling youth</p>	

	with identified mental health problems. This was evident in the case of youth B.R.M. who arrived at Henley-Young on May 16, 2013. In addition, there is no functional system in place to address youth with mental health issues or exhibiting mental health behaviors. Also, youth having problems within the school should at least have an IEP to determine whether they are in need of placement within the special education program over and above any need for mental health services. At this point there is no indication that any mental health services, beyond the MAYSI-2 are being provided other than those services provided by Hinds Behavioral Health which is limited at best. However, I found no documentation of any services provided to youth at Henley-Young(i.e., treatment plans ,screenings or evaluations .etc)
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policies and procedures for this provision. 2. See recommendations under (5.1).
Evidentiary Basis	Document review, observation, interviews

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; <ol style="list-style-type: none"> 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	<p>The facility still has not developed policy and procedures for this provision. Please see previous report. As stated in provision 5.1, the facility still needs to develop the appropriate program structure with adequate staffing, etc. adequate therapeutic treatment, supervision, education etc. Henley-Young is still in Non-Compliance as it relates to this provision. Because there has been no movement on this provision therefore I am reiterating the actions and recommendations from my previous report below.</p>
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policies and procedures for this provision that includes the contents (A-K). 2. The County/Court shall define the criteria for the program <ol style="list-style-type: none"> a. It is important that post dispositional programs in other facilities be reviewed. b. Often seeing what is being done in other facilities provides insight into how to develop and operate these programs. 3. Provide dedicated staff to manage program. 4. Provide intensive training to these staff members. <ol style="list-style-type: none"> a. Train staff in various treatment modalities i.e. cognition, 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating the actions and recommendations from my previous report below. Please see the previous report and provisions 5.1 and 5.3.	
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policies and procedures for this provision. 	

	<ol style="list-style-type: none"> 2. Provide training to all staff. 3. 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.
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.	
Status	Non-Compliance	
Discussion	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating the actions and recommendations from my previous report below. The program of the facility is at a standstill as it relates to this provision. There are very few activities on weekends therefore there is no meaningful programmatic structured/activities except for card playing and dominoes.	
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policies and procedures to meet the needs for this provision. 2. Provide adequate staffing for this program. 3. Develop a monthly recreational program with activities. 4. Keep records of activities provided and note those that were not provided and why. 5. Purchase board games etc. 6. Hire recreational staff. 	
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's policies and procedures for an individualized treatment program for post disposition youth have not been presented or approved. Therefore, I am reiterating the actions and recommendations from my	

	<p>previous report below. The facility still is in need of an adequate Quality Assurance program. Although, the facility has hired two Quality Assurance Coordinators and the facility is developing policies and procedures which are critical for the success of this program none have been presented at this time. It should be noted that the courts must also be involved in the development of the quality assurance program. There must be a system in place to evaluate the 89-day program when youth are assigned to it. In addition, data should be collected and retained to determine if the program is achieving its expected outcomes. It is very difficult to develop an effective treatment program or individualize treatment plans without an adequate review of the processes in place.</p>
<p>Recommendations</p>	<ol style="list-style-type: none"> 1. Develop comprehensive policies and procedures to meet the needs for this provision for the facility, school program and SICU program. 2. 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. 3. 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. 4. 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. 5. Discipline and order: continuously monitor use of discipline and promptly address misuse or over use of discipline and other identified deficiencies. 6. The facility will develop monthly performance measures to indicate achievement in the desired area. 7. Review State of Florida Quality Assurance Model and for assistance in developing contact CJCA Performance Based Standard for Juvenile Detention Programs, also use ACA standards to establish policy guidelines. 8. Develop data collection system
<p>Evidentiary Basis</p>	<p>Document review, observation, interviews</p>

6 Due Process/Isolation/Disciplinary Practices and Procedures

<p>Provision 6.1 Disciplinary Practices and Procedures</p>	<p>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.</p>	
<p>Status</p>	<p>Non-Compliance</p>	

Discussion	<p>This provision is still being worked on. Also, this is a critical component of the disciplinary and behavioral management process to ensure youth are treated fair, humane and that there is no misuse of the isolation and disciplinary process. As stated in my previous report, the facility is implementing a due process behavior system which is partially complete. There is still no positive incentive program for good behavior and sanctions for rule violation. Based on my review of documents and observation, positive behavioral intervention and supports are not in place and are still not being provided for this provision. I reiterate, the suggested actions and recommendations from my previous report. The facility should continue to follow the recommendations from the previous report. The facility is making improvement on the due process isolation and practices procedure. Although processes on a few provisions have begun, it is vitally important that policy and procedures are developed to ensure a consistent, comprehensive, and standardized method of running the facility.</p>
Recommendations	<ol style="list-style-type: none"> 1. Develop adequate policies and procedures for this provision. 2. Develop new resident handbook. Youth are to receive these handbooks during orientation. <ol style="list-style-type: none"> a) They shall include youth rights, major and minor rule violations and the grievance policy. b) 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. c) These rules shall be posted on each unit. 3. Due process rules shall be posted on each unit. 4. Develop positive behavior intervention programs. 5. Assign and train an independent person(s) to handle due process isolation hearings. The person(s) must be independent of the unit staff. 6. Ensure youth who are in isolation are provided recreation and education services.
Evidentiary Basis	Document review, observation, interviews

Provision 6.2 Disciplinary Practices and 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	Based on my review of documents and observation, adequate disciplinary practices and procedures are not in place and are still not being provided for this provision. I am reiterating that the suggested actions and recommendations from my previous report be put into action.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. 2. Develop sheets to place on door of any youth in confinement that identifies the reason for confinement and is review and signed by supervisor. 3. Ensure youth in confinement receive education and recreation services. 4. See 6.1 recommendations. 5. Provide training for all staff on these policies and procedures. 	
Evidentiary Basis	Document review, observation, interviews	

7 Use of Restraints

Provision 7.1 Use of Restraints 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	As stated in my previous report. The facility continues to follow the policies and procedures of this provision. To move past beginning compliance, staff needs to be trained and all training documented etc. based on recommendations below.	
Recommendations	<ol style="list-style-type: none"> 1. Officers shall receive training on policy and procedures. 2. Officers shall be trained on when it is appropriate to use mechanical restraints. 	

	<ol style="list-style-type: none"> 3. All training shall be documented. 4. The policy will require the documentation of any use of mechanical restraint and use of force incidents.
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	Beginning Compliance	
Discussion	As stated in my previous report. The facility continues at beginning compliance. To move past beginning compliance, staff needs to be trained and all training documented etc. based on recommendations below.	
Recommendations	<ol style="list-style-type: none"> 3. Develop and provide adequate training for this provision. 4. All training shall be documented. 5. The policy will require the documentation of any use of mechanical restraint and use of force incidents. 6. Operationalize the edicts of this provision. 	
Evidentiary Basis	Document review, observation	

Provision 7.3 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	Beginning Compliance	
Discussion	As stated in my previous report. The facility continues to be in beginning compliance. I found no indication during my visit or interviews that youth were being secured to fixed objects in the facility. However, to move past beginning compliance the facility needs to follow the recommendations (2, 3 and 4) below.	
Recommendations	<ol style="list-style-type: none"> 1. Complete the comprehensive policies and procedures for this provision. 2. Provide training for staff within the facility as described above on this provision and provide documentation of training. 3. Develop and use a mechanical restraint log. 4. Provide training on de-escalation techniques to try to use mechanical restraints only as a regular part of facility transport. 	

Evidentiary Basis	Document review
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Provision 7.4 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	As stated in my previous report, a policy and procedures need to be developed, training etc. as it relates to this provision. There has been no movement on this provision therefore I am reiterating that the suggested actions and recommendations from my previous report be placed into action. The facility needs mental health professionals to help and enhance the development of these policies and procedures as they are the authorities in this area. This provision should be included in policy and procedure development once a mental health professional or agency is retained.	
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policy and procedures for this provision. 2. Provide training for staff on policy and procedures and document training. 3. Provide training on de-escalation techniques. 4. Develop Mental Health protocols for this provision. 5. Hire mental health professional or agency. 	
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	Based on my most recent visit and my review of documents, I found no indications that restraint chairs, chemical restraints or tasers have been used at the facility. See recommendations below.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training for staff on policies. 2. Document all training provided to all staff. 3. Retrain staff when deemed necessary. 	
Evidentiary Basis	Document review, video	

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	Beginning Compliance	
Discussion	Based on my most recent visit and my review of documents, I still find no indication that the facility is violating this provision. The facility does have a policy and procedures developed however there is still a need for training of staff and documentation of all training. See recommendations below.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training for staff on policies 2. Document all training provided to all staff. 	
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	Beginning Compliance	
Discussion	Based on my most recent visit and my review of documents, the facility has developed a policy and procedures for this provision. However, there is still a need for training of staff and documentation of all training. In addition, any youth placed in mechanical restraints should be seen by a medical professional as soon as possible to assess if there are any injuries.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training for staff on policies and procedures. 2. Document all training provided to all staff. 3. Ensure that youth who are placed in mechanical restraints are seen by a medical professional. 	
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	Beginning Compliance	
Discussion	The facility has developed policies and procedures for this provision. During my review of documents and my interviews with youths and staff, I found no indication that a medical examination is being completed after mechanical restraints are used. In my review of several incident reports in which restraints were used on youth J.J. on April 6, 2013 there was no	

	<p>indication that the youth was transported or seen by a medical professional. In addition, in my review of this incident another report showed that shackles were also used on this youth. Therefore I am reiterating that although policies and procedures are developed, there must be adequate training and instruction to ensure that staff complies with policy and procedure. In addition, incident reports must be reviewed by the supervisors to ensure that accurate information is being provided. There is a strong need for accurate and consistent reporting of incidents. When incidents are not reported correctly, the integrity of the reporting system falls into question. This is also a training issue.</p>
Recommendations	<ol style="list-style-type: none"> 1. Develop comprehensive policies and procedures for this provision.(Executed) 2. Provide training on policies and procedures. 3. Document all training provided to all staff. 4. Ensure that youth who are placed in mechanical restraints are seen by a medical professional. 5. Ensure that information being reported is accurate and consistent.
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	Beginning Compliance	
Discussion	During my recent visit and review of documents, I found no indication that any electronic restraints i.e. tasers had been used. However, there is still a need for training of staff and documentation of all training.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training for staff on policy. 2. Document all training provided to all staff. 	
Evidentiary Basis	Document review	

Provision 7.10 Use of Restraints	Henley-Young is required to ensure that no officer enters the secure detention area of the facility with a firearm.	
Status	Beginning Compliance	
Discussion	The facility has developed policy and procedures for this provision. However, there is still a need for training of staff and documentation of all training.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training for staff on these policies and procedures. 2. Document all training provided to all staff. 3. Have signs displayed at all entrances. 	

Evidentiary Basis	Observation
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8 Use of Force

Provision 8.1 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 de-escalation techniques. Staff shall be required to fully document in writing every instance of use of force.	
Status	Non-Compliance	
Discussion	<p>Based on my review of documents, the facility still needs to develop policies and procedures for this provision. In my review of incident reports, I found that there have been incidents of use of force. However I found no indication that any de-escalation techniques were used. Although staff are doing reports, they are not accurately recording information. When staff are captioning information, it should be truthful, accurate and detailed enough so they can testify on their observations 2 years from now if needed. It appears from reviewing the documents, that there is a major need for de-escalation and proper restraint training and accurate documentation of incidents. In addition, reports must be legible, in plain English, and specific behavioral terms should be used. Regardless of how accurate and useful an observation may be, it has no value to others unless it is recorded legibly. Police and other juvenile detention facilities have addressed the legibility problem by typing their reports. Most agencies are completely computerized, and some are experimenting with lap top computers. Computerized records may eliminate legibility problems for this facility. Some reports are still written in flowing scrip (cursive) and on various forms .There should be one facility wide form used to capture information. This has been stated in my previous reports. In addition, there is a major need for data collection as it relates to use of force. This was also stated in my previous reports. Good data will assist the facility in determining, answers to some of the following examples:</p> <ol style="list-style-type: none"> A. The location of use of force B. The number of use of force incidents C. The number of use of force requiring mechanical restraints D. The type of restraint used E. The number of incidents requiring chemical agents F. The number of incidents involving non lethal security devices (i.e. batons, tasers, etc.) G. The number of use of force incidents resulting in injury to youth or staff H. Plan of action to address each incident (i.e. 	

	disciplinary action, staff training or remedial training, youth isolation, youth behavior management, youth mental health screening or evaluation etc.) Please review my previous report.
Recommendations	<ol style="list-style-type: none"> 1. Develop policy and procedures for this provision. 2. Provide training for on policies and procedures 3. Document all training provided to all staff. 4. Adapt an appropriate curriculum for training staff on the use of verbal de-escalation skill and safe use of physical restraints or mechanical restraints. 5. Contact the National Partnership for Juvenile Justice for recommendations on training program in this area. 6. Document and file report when there is use of force. 7. Ensure any time use of force is used youth are seen by a medical professional
Evidentiary Basis	Document review, interviews

Provision 8.2 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 most recent visit this provision is still non-compliant derived from documentation review, observations, and interviews. Based on my review of documents and observation, 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 is not in place and is still not being provided for this provision. I am reiterating the actions and recommendations from my previous report are reviewed and followed. 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 for 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 style="list-style-type: none"> 1. Complete procurement of services as quickly as possible. 2. Develop comprehensive policies and procedures for this provision. 3. Provide training to staff on policies and procedures. 	

	<ol style="list-style-type: none"> 4. Document all training provided to all staff. 5. Review nursing schedule and provide more hours at facility. 6. Provide written documentation of examination of youth by medical professional in every instance. 7. Provide additional medical services after hours and on weekends. 8. Document and file in youth records when there is use of force.
Evidentiary Basis	Document review, observation

9 Meals and Nutrition

Provision 9.1 Meals and 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	Beginning Compliance	
Discussion	This provision has moved to beginning compliance. The county has hired ABL Management Incorporated as the new food service vendor for the facility. I have reviewed their manuals and upon my next visit will review reports and inspection checklist. Also during my next visit, I would like to review training and policy and procedures records. I did interview youth and found no major complaints regarding food, with the exception they wanted more.	
Recommendations	<ol style="list-style-type: none"> 1. Review portions to ensure youth receive enough food during meals. 2. Develop policy and procedures for this provision.(executed) 3. Provide training for kitchen staff and all other staff members involved with handling food and preparing meals. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 9.2 Meals and 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	Beginning Compliance	
Discussion	The county has hired ABL Management Incorporated as the new food service vendor for the facility. I have reviewed their manuals and upon my next visit will review reports and inspection checklist. Also during my next visit, I will review training and policy and procedures records. I did interviewed youth and found no major complaints.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policy and procedures for this provision(executed) 2. Provide training for kitchen staff and all other staff members involved with handling food and preparing meals. 	

Evidentiary Basis	Document review, observation, interviews	
Provision 9.3 Meals and Nutrition	Youth shall be provided access to drinking water throughout the day.	
Status	Beginning Compliance	
Discussion	The facility has not replaced the non-functioning water fountains, therefore, I am reiterating the actions and recommendations from my previous report that shall be reviewed and followed. I have reviewed documents which show the County has conducted an environmental test on the water system and concluded it is safe. The water is still available to the residents through the Igloo coolers that have been purchased and this provision remains at beginning compliance based on my last report. It should be noted that youth continue to complain of not being allowed to have water after outdoor recreation and during school.	
Recommendations	<ol style="list-style-type: none"> 1. Contact County or State Environmental office to conduct test on water system. (executed) 2. Ensure youth receive water during school and recreational periods and at night. 3. Develop a policy for incidents regarding water quality and procedures to address them. 4. Repair inoperable drinking fountains. 	
Evidentiary Basis	Document review, observation, interviews	

10 Clothing

Provision 10 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	Beginning Compliance	
Discussion	Although, the facility has developed a policy and procedures for this provision, my discussion with the youth and my observations present a concern. The youth continued to complain that their clothes still have stains on them and the socks have holes. As I stated in my previous report, the facility must develop a system for discarding (torn or wear worn) clothing. I	

	also recommended in my last report that clothing be prewashed which would loosen the soil in the clothing in particular white clothing (i.e. undergarments). Again, there has to be a system for replacing clothing on a regular and consistent basis. The developed policy and procedures that I mentioned above should address some of these issues. I am also recommending as in my previous report, that the facility dedicate laundry staff which will assist in the policy being implemented properly.
Recommendation	<ol style="list-style-type: none"> 1. Check washer and dryer to ensure they are working properly. 2. Ensure that girls and boys are equally involved in cleaning and folding clothes. 3. Hire 2 laundry staff to ensure clothing is handled properly. 4. Ensure that all staff and youth wear protective material (smocks and gloves) when handling chemicals and clothing. 5. Discard clothing that is torn, dingy and in poor condition. 6. Develop a system for replacing clothing on a regular and consistent basis. 7. Develop schedule for distribution. 8. Develop a system for prewashing clothing (i.e. undergarments etc.)
Evidentiary Basis	Document review, observation, interviews, photographs

11 Hygiene and Sanitation

Provision 11.1 Hygiene and 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	Beginning Compliance	
Discussion	Since my last visit, the facility has moved to beginning compliance with this provision. The facility now needs to provide training and ensure that the process outlined in the policy and procedures is followed. During this visit, youth still complained that they were using each other's deodorant and soap. Also, youth complained that other residents were using items from their hygiene kits. These areas should be addressed as soon as possible and the recommendations below are based on my previous report.	
Recommendations	<ol style="list-style-type: none"> 1. Ensure that hygiene kits are properly labeled and youth are not sharing each other's hygiene products or items. 	

	<ol style="list-style-type: none"> 2. Ensure items such as hair brushes, if shared, are sterilized and in good condition. 3. Provide training for staff on these policies and procedures. 4. Ensure that clean face towels are available for youth. 5. Develop a schedule for distribution of hygiene kits.
Evidentiary Basis	Document review, observation, interviews

Provision 11.2 Hygiene and 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	Beginning Compliance	
Discussion	Policies and procedures have been developed. The facility now needs to provide training to ensure that the process outlined in the policies and procedures is followed. During this visit, I did find blankets that needed discarding and others that needed to be cleaned. The facility needs now to follow the recommendation below.	
Recommendations	<ol style="list-style-type: none"> 1. Discard all blankets and mattresses that are tattered and have holes in them. 2. Clean and maintain laundry area in orderly fashion. 3. Develop forms or system of documentation for distribution and inventory 4. Label and designate an area for towels, sheets, clothing etc. 	
Evidentiary Basis	Document review, observation	

Provision 11.3 Hygiene and Sanitation	Under no circumstances shall youth be deprived of mats and blankets.	
Status	Beginning Compliance	
Discussion	The facility has moved to beginning compliance for this provision. Now there needs be training to ensure that the process outlined in the policy and procedures is followed. During my interviews with youth, I found no indication that youth were being deprived of mats and blankets.	
Recommendations	<ol style="list-style-type: none"> 1. Provide training to staff on policy and procedures. 2. Develop system for inventory and distribution 	
Evidence	Observation, interviews and document review	

Provision 11.4 Hygiene and Sanitation	Henley-Young shall maintain a sufficient number of clean, sanitary mats and blankets that correspond with the facility's maximum capacity.	
Status	Beginning Compliance	
Discussion	The facility has moved to beginning compliance for this provision. The facility now needs to provide training to ensure that the process outlined in the policy and procedures is followed. During my interviews with youth, I found no indication that youth were being deprived of mats and blankets.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. (executed) 2. Provide training to staff on policy and procedure. 3. Provide an inventory of mats and blankets. 	
Evidentiary Basis	Observation, interviews and document review	

Provision 11.5 Hygiene and Sanitation	Youth shall be provided with a clean, sanitary environment.	
Status	Beginning Compliance	
Discussion	As stated in my previous report, the facility continues to make environmental improvement in the physical plant. The facility is much cleaner and does not have the stark look of an institutional place; Moreover, it has become more aesthetically pleasing. However the facility still needs to follow the recommendation below. There has been some movement on this provision however I am still reiterating the recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. (executed) 2. See areas in discussion that should be addressed. 3. Develop housekeeping and cleaning schedule. 4. Develop checklist or inspection report for each unit and area of building. 5. Develop work order system to ensure that when problem arise they are addressed. 6. Develop corrective action plans as needed. 7. Provide training for staff on policy and procedures. 8. Ensure delivered food items are dated and rotated from old to new. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 11.6 Hygiene and 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	Based on my review of documents and observation, policies and procedures are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures 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. 9. Ensure that all areas in this provision are addressed by a certified professional. 	
Evidentiary Basis	Document review, observation	

Provision 11.7 Hygiene and Sanitation	Youth shall be provided with clean drinking glasses and eating utensils.	
Status	Beginning Compliance	
Discussion	The facility has moved to beginning compliance for this provision. During my visit to the facility, I did not find and did not receive any reports of unclean drinking glasses or eating utensils. Please see provision 9.3.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. (executed) 2. See provision 9.3. 	
Evidentiary Basis	Document review, observation and interviews	

12 Medical Care

Provision 12.1 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	<p>During this visit, I reviewed medical files. The documents reviewed are in poor condition at best. Multiple dates are scratched out on a single page. It is not known if the health assessment data listed is current because of the re-dating of the document. There is no indication next to the questions as to whether to the answers were asked on the document is of a current admission or from previous ones. A new history and physical examination should be completed with each admission and maintained in one file in chronological order by date of admission (most current information first). The current documentation, poses a great liability to the County and risk of medical error for the youth. As it relates to documentation, there were multiply entries that had dates but no times, lack of signatures of medical personnel. Some of the documents reviewed had no indication of the youth's name, date of birth or admission date including the year. Other documents reviewed did not include the year in which the youth were seen. Each youth should have a separate medical file. However during my review of documents I found files that had multiple names with some scratched through and others with different youth names on both sides of tab. These are serious issues that must be addressed immediately. As stated in my introduction, the County should develop a connection with the University of Mississippi Medical Center and schools of nursing in the community. This is a viable option that other communities around the country are utilizing to assist the medical department with its lack of staff. These schools provide an excellent training ground for medical professionals. The County is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The County has the responsibility to maintain medical care and provide medication and all other needs for residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed .The County must look at the medical filling system in place at this point and change it to meet contemporary medical standards.</p>	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. 2. Develop policies and procedures and protocols based on standards for Health Services in Juvenile Detention and Confinement facilities. 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. 	

	<ol style="list-style-type: none"> 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. 10. Order folders with 2 dividers, end tab, classification folders in letter size with 2 prongs for medical charts.
Evidentiary Basis	Document review, observation, interviews

Provision 12.2 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	Based on my review of documents and observation, the provision states, "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", is not in place and is still not being provided for this provision. The County is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The facility still has the responsibility of maintaining medical care and medication for all of the health needs of the residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Hire qualified medical professional for nights and weekend care. 2. Develop policies and procedures for this provision. 3. Provide training for staff on this provision. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 12.3 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. The county is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The facility still has the responsibility of maintaining medical care and medication for all of the health needs of the residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for this provision. 2. Place a kite box on each unit. 3. Provide training for staff on this provision. 4. Nurse or designated person, making daily rounds to retrieve kites (Request for Medical Service Forms).
Evidentiary Basis	Document review, observation, interviews

Provision 12.4 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	Based on my review of documents and observation, the provision states that “prescription medications shall only be distributed by licensed medical staff or Henley-Young staff who has been trained by licensed medical personnel”, is not in place and is still not being provided for this provision. The County is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The facility still has the responsibility of maintaining medical care and medication for all of the health needs of the residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. These policies and procedures must include the appointment of a medication administration protocol. 3. There must be a medication record of all medicines administered. <ol style="list-style-type: none"> a. One record to reflect all medicines leaving the pharmacy; b. An additional record kept in each youth’s case file. 4. Ensure that the training is comprehensive make certain that all medical contingencies are considered. 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 provision. 7. All training should be documented and conducted annually. 	

Evidentiary Basis	Document review, observation, interviews
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Provision 12.5 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. The County is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The facility still has the responsibility of maintaining medical care and medication for all of the health needs of the residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Get HIPAA requirements and institute them the facility. 3. Designate the persons who have access to the youth's medical records within the facility and outside of the facility, but within the juvenile justice system. 4. Provide training to staff on policies and procedures. 5. Provide training to staff on HIPAA requirements, and document training. 6. Designate a HIPPA Privacy Officer.
Evidentiary Basis	Document review, observation, interviews

Provision 12.6 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. The County is soliciting proposals for medical providers to provide medical care for the youth. However, no contract has been signed. The facility still has the responsibility of maintaining medical care and medication for all of the health needs of the residents. On this provision, I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Develop processes of continuous monitoring youth with stable medical issues, i.e. the care for a diabetic youth who are on an insulin regiment.

	<ol style="list-style-type: none"> a. What are the medical requirements of the youth who need monitoring? b. Who is responsible for the monitoring? c. How are the records kept of the monitoring? <ol style="list-style-type: none"> 3. Provide training to staff on the policies and procedures for this provision. 4. Annual competency training.
Evidentiary Basis	Document review, observation

13 Mental Health Care

Provision 13.1 Mental Health 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed. It is without question that there are youth entering this facility that need access to structured mental health services (i.e. youth B.R.M. and youth R.S.). There are still inadequate mental health services at this facility. Generally accepted professional standards require that mental health counseling be provided frequently and consistently enough to provide meaningful intervention for youth. At Henley-Young mental health counseling is inadequate to the needs of mentally ill youth in both frequency and content. My review of records reveals no evidence of any counseling or use of any treatment plans or strategies. It should be noted that treatment planning, including identifying symptoms and behaviors is a critical part of effective treatment for youth with mental health illness or problems. An effective program should communicate treatment plans for mentally ill youth to all staff involved in the management of the youth in this detention facility and services should be coordinated prior to their implementation. Although some youth who are in need of mental health services are in the 89-day program and are assigned case managers, these individuals have no mental health training and they serve primarily as liaisons between the facility and the courts rather than focusing on coordinating care at the facility for mentally ill youth.	
Recommendations	<ol style="list-style-type: none"> 1. Ensure that the facility has a Standardized Assessment Tool i.e. the MAYSI-2 to use during the intake process. 	

	<ol style="list-style-type: none"> 2. Develop policies and procedures to address this provision. 3. Provide training to staff on policies and procedures and provide documentation of training. 4. Develop documentation that will track youth's progress during their stay at facility. 5. Ensure there is communication between Hines Behavioral Health Services, Juvenile Court Case Managers and Facility Staff on youth receiving mental health services.
Evidentiary Basis	Document review, observation, interviews

Provision 13.2 Mental Health 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Provide training to staff on policies and procedures. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 13.3 Mental Health 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Provide training to staff on policies and procedures. 3. Policies and procedures shall be reviewed and signed by a licensed mental health professional (psychiatrist, etc.). 	

Evidentiary Basis	Document review, observation, interviews
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Provision 13.4 Mental Health 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Provide and document training to staff on policies and procedures. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 13.5 Mental Health Care	Hinds County shall employ or contract for sufficient psychiatric services to permit a psychiatrist to fulfill the following functions: <ol style="list-style-type: none"> 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. 2. Provide training to staff on policy and procedures and document training. 	
Evidentiary Basis	Document review, observation	

Provision 13.6 Mental Health 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	Based on my review of documents and observation, services are not in place and are still not being provided for this provision. I am reiterating that the actions and recommendations from my previous report should be reviewed and followed.	
Recommendations	<ol style="list-style-type: none"> 1. The mental health of the youth in the custody of the facility needs to be closely monitored at all times. 2. The facility needs to develop policies and procedures to address this provision. 3. Provide and document training to staff on policies and procedures and document training. 4. Facility needs documentation from a mental health organization on plan of action for youth receiving a mental health services. 	
Evidentiary Basis	Document review, observation	

14 Suicide Prevention

Provision 14.1 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	Beginning Compliance	
Discussion	The facility has moved to beginning compliance for this provision. The facility has developed policy and procedures for this provision. Now the facility must develop training programs to ensure that staff learn and adhere to the policy and procedures. Further, staff must become familiar with the process. Once the facility hires a new mental health provider, they must ensure that the suicide prevention policy is included in the overall mental health program.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. (executed) 2. Provide and document training for staff on policy and procedure. 3. Facility needs to ensure that the suicide prevention policy is included in the overall mental health program. 	
Evidentiary Basis	Document review, observation	

Provision 14.2 Suicide Prevention	Any youth placed on the highest level of suicide watch shall be evaluated by a mental health professional, ideally within 12 hours, but in no case longer than 24 hours of his or her placement on suicide watch. If a youth on the highest level of suicide watch is not evaluated by a mental health professional within 24 hours, the youth shall immediately be transported to a local mental health facility or emergency room for evaluation and/or treatment.	
Status	Beginning Compliance	
Discussion	The facility has moved to beginning compliance for this provision. The facility has developed policy and procedures for this provision. Now there must training programs developed to ensure that staff members adhere to the policy and procedures and that they are familiar with the process. Once the facility hires a new mental health provider, they must ensure that the suicide prevention policy is included in the overall mental health program.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. (Executed) 2. The facility needs mental health professionals to help and enhance the development of these policies and procedures as they are the authorities in this area. 3. Provide training for staff on policies and procedures and document training. 4. Identify a mental health agency to help develop policies, procedures and protocols. 5. Facility needs to ensure that the suicide prevention policy is included in the overall mental health program. 	
Evidentiary Basis	Document review, observation	

Provision 14.3 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	Beginning Compliance	
Discussion	The facility has developed policy and procedures for this provision which has moved it to beginning compliance. Now a training program must be developed to ensure that staff members adhere to the policy and procedures and that they are familiar with process. Once the facility hires a new mental health provider, they must ensure that the suicide prevention policy is included in the overall mental health program.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision with the assistance of a mental professional. (Executed) 	

	<ol style="list-style-type: none"> 2. Provide and document training for staff on policies and procedures. 3. Facility needs to ensure that the suicide prevention policy is included in the overall mental health program. 4. The facility needs mental health professionals to help and enhance the development of these policies and procedures as they are the authorities in this area.
Evidentiary Basis	Document review, observation

Provision 14.4 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	Beginning Compliance	
Discussion	The facility has developed policy and procedures for this provision which has moved it to beginning compliance. Now a training program must be developed to ensure that staff members adhere to the policy and procedures and that they are familiar with process. Once the facility hires a new mental health provider, they must ensure that the suicide prevention policy is included in the overall mental health program.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures for making and distributing the reports in this provision. (Executed) 2. Provide training for staff on policies and procedures and document training. 3. Facility needs to ensure that the suicide prevention policy is included in the overall mental health program 4. The facility needs mental health professionals to help and enhance the development of these policies and procedures as they are the authorities in this area. 	
Evidentiary Basis	Document review, observation	

15 Family Support and Interaction

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	Beginning Compliance	
Discussion	Although the facility still maintains beginning compliance with this provision, it should be noted that because of varying staffing issues, the facility has had to divert from the new policy at times and returned to the	

	previous visitation program which did not allow for contact visits. As stated in my previous report the facility must ensure that there is proper staffing available to provide for the visitation process to maintain reliability in it.
Recommendations	<ol style="list-style-type: none"> 1. Provide and document training for staff on policies and procedures. (Executed) 2. Provide and document training for staff on policies and procedures. 3. Ensure that there is proper staffing availability to maintain reliability.
Evidentiary Basis	Document review, observation and interviews

Provision 15.2 Family Support and Interaction	Within 90 days of the effective date of this Settlement Agreement, Henley-Young shall provide accommodations that allow youth to have contact visits with their families.	
Status	Beginning Compliance	
Discussion	<p>During this visit, I did review the visitation process and found that parents and youth were pleased with the new program. However, as stated in the previous provision 15.1, the facility must ensure that there is consistency in the visitation program. The current visitation schedule is Tuesdays, Thursdays and Saturdays according to the Director. The new visitation program will be more accommodating for parents and will be on Thursdays, Saturdays and Sundays. As in my previous report the facility must ensure that there is enough staff to accommodate the program. In addition, staff must be trained to ensure that policies and procedures are being followed. With the addition of visitation on the weekends, this should reduce youth being “locked down” in their rooms for lack of supervision. The visitation program should be incorporated into the overall facility program that will help with providing a better structure.</p>	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures to address this provision. (Executed) 2. Identify area where contact visitation will take place. 3. Provide and document training for staff on policies and procedures. 4. Ensure that there is proper staffing availability to maintain reliability. 5. Ensure that visitation program is included in the overall facility program. 	
Evidentiary Basis	Document review, observation and interviews	

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	Beginning Compliance	
Discussion	See provision 15.1 and 15.2	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and practices to address this provision. (Executed) 2. Provide and document training for staff on policies and procedures. 3. Ensure that there is proper staffing availability to maintain reliability. 4. Ensure that visitation program is included in the overall facility program. 	
Evidentiary Basis	Document review, observation and interviews	

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	Beginning Compliance	
Discussion	The facility has developed a policy and procedures for this provision. Based on my review of the policy, additional phone privileges will be a part of the new behavioral management system once it is implemented. However, there is no indication that youth are allowed to mail letters as part of access to supportive relationships that youth have with families and others in the community. This (mail) is a major part of the rehabilitative process Staff now needs to be trained on policies and procedures and the facility should ensure that policy and procedures are being supported.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and practices to address this provision. (Executed) 2. Provide and document training for staff on policies and procedures. 3. Ensure that there is proper staffing availability to maintain reliability. 4. Ensure that youth are allowed to mail letters.(County will pay for postage) 	

Evidentiary Basis	Document review, observation and interviews
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16 Miscellaneous Provisions

Provision 16.1 Miscellaneous Provisions	Male and female youth shall be provided with equal access to educational and rehabilitative services, medical care, and indoor and outdoor recreation.	
Status	Beginning Compliance	
Discussion	The facility has developed a policy and procedures for this provision. However during my visit, I found that female residents were still assigned to laundry detail. In addition, according to the female residents I interviewed they rarely participated in outside activities and when they did it consisted mostly of sitting on the bleachers because the male residents were using the court and they are not allowed on the court while the males were outside using it. If they were allowed to use the court, there is only one basketball goal usable.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and practices for this provision. (Executed) 2. Cease in the designation of female residents as being solely responsible for laundry; this is a duty male residents can perform as well as females. 3. Develop monthly recreational schedules. 4. Develop comprehensive facility schedules. 5. Provide training for staff on policies and procedures and document training. 6. Ensure that there is proper staffing availability to maintain reliability. 7. Repair court and goal area. 	
Evidentiary Basis	Document review, observation, interviews	

Provision 16.2 Miscellaneous 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	Based on my interviews with youths and my review of documents, and observation the residents are beginning to spend more time out of their cells during the weekdays. It should be noted that the County has purchased televisions for each unit and according to the youths, there are less fights and arguments on the units when they are out watching television. However during the weekends there are no planned programs for them to participate in and they are locked in their cells excessively. The majority of the youth I	

	interviewed advised me that being out of their cells is determined by “what staff is working and if there is enough staff on duty and how staff are feeling”. There must be an organized recreational program in place with schedule to address this.
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and implement practices to address the needs of this provision. 2. Develop and implement programming and recreational schedules. 3. Provide and document training for staff on policies and procedures. 4. Ensure that there is proper staffing availability so that youth are not unnecessarily “locked” in their cells.
Evidentiary Basis	Document review, observation, interviews

Provision 16.3 Miscellaneous 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	Beginning Compliance	
Discussion	The facility has developed a policy and procedures for this provision. During my interviews with youths they still complained about the staff’s use of profanity. Although some youth said that “it’s not as bad as it used to be” another youth explained that “staff respects us as long as we respect them”. Since the policy has been developed for this provision, the facility administration must train staff and ensure staff adheres to the policy. In addition, the facility administration should ensure that there is a constant vigilance that promotes positive language by youth and staff.	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and practices to address the needs of this provision. (Executed) 2. Provide training to staff in the proper de-escalation techniques of youth. 3. Administration must provide enough supervision to reduce or eliminate insulting behavior by staff. 4. Discipline and retrain staff as needed. 5. Provide training for staff on policies and procedures and document training. 6. Hire an independent person to investigate allegations of abuse or complaints regarding staff by youth. (Executed) 	
Evidentiary Basis	Document review, observation and interviews	

Provision 16.4 Miscellaneous 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	<p>Based on my interviews with youth and my review of documents, youth do not have confidence in the grievance process. Most residents said they were not aware of the grievance process and some residents advised me that they never filed a grievance. As stated in my previous reports, the mark of a good grievance system is that youth do file grievances. Most juvenile facilities have a youth grievance system in place to allow residents to seek a resolution to problems that they may be having while at the facility. Typically, juveniles use the grievance system to attempt to resolve issues they may have with the application of facility rules, concerns about living conditions or food, problems with missing property, conflicts with other residents or staff, or seeking some sort of other assistance. All grievances should be tracked by the grievance coordinator to assure that a response is given. The nature, topic or presenting problem should be categorized and tabulated. The grievance coordinator should provide his/her supervisor, the facility director and other key staff, a summary grievance report each month. The report should include, at a minimum, the number of grievance filed, the living units from which the grievances were filed, the nature and final outcome of the grievances. A system should also be established to assure that grievance resolutions are actually implemented. The grievance system should be viewed as an important tool for staff to communicate with the residents. The system should enhance the regular programming activities and not be viewed as an impediment. The administration should use cumulative data gathered from grievances as a tool to assist in monitoring what is going on within the institution. Such data can indicate where the program is functioning well and where there may be potential problems. In addition, in my review of some grievances, one youth filed a grievance then later retracted the grievance. There must be as part of the grievance process a component that the youth has the ability to retract the grievance and not the staff advising that the youth retract his/her grievance. The facility must now make certain that staff is trained properly and that youth are made fully aware of the grievance process.</p>	
Recommendations	<ol style="list-style-type: none"> 1. Place grievance boxes on each unit and school, residents should not be required to request a grievance form. 2. Provide training for staff on policies and procedures and document training. 3. Provide training for youth on policies and procedures and document training. 4. Ensure that youth are adequately familiarized with the grievance process during their orientation into the facility 5. Add a place on the Resident's Grievance Resolution Report for a 	

	<p>resident to request an appeal and place for the Director's resolution.</p> <ol style="list-style-type: none"> 6. Ensure Resident's Grievance Resolution Reports are provided to the resident for their signature and their response to the outcome. If the resident disagrees with the resolution the resident has the right to appeal the decision to the director. 7. Any retractions of grievances should be done by youth and not by staff.
Evidentiary Basis	Document review, observation, interviews

Provision 16.5 Miscellaneous Provisions	<p>Hinds County denies that Henley-Young does not currently have an adequate policy whereby youth can request to see their attorney and/or Youth Court counselor. The parties agree, however, that henceforth: Henley-Young shall develop and implement an adequate policy that allows youth of all ages and literacy levels with the opportunity to request to see their attorney and/or Youth Court counselor. Youth shall obtain the form requesting a visit from his/her counselor from the school liaison. Henley-Young agrees to collaborate with the Plaintiffs to design and implement a comprehensive juvenile justice pre-service and in-service training program for detention center staff. Training shall include, but is not limited to, the mandatory reporting requirements for direct care workers, the requirements of the Prison Rape Elimination Act, verbal de-escalation techniques, adolescent brain development and developmental issues, effective communication with adolescents, effective documentation, appropriate use of force and restraint, and best practices for detention center administration.</p>	
Status	Beginning Compliance	
Discussion	<p>The facility has developed a policy and procedures for this provision. During my next visit, I will review the system.</p>	
Recommendations	<ol style="list-style-type: none"> 1. Develop policies and procedures and practices for this provision. (Executed) 2. Provide and document training for staff on policies and procedures. 3. Develop single form and system for incident reporting. 4. Develop system for receiving and mailing privileged and non privileged mail for youth. 	
Evidentiary Basis	Observation, interviews	

Conclusion

This is my fourth official visit to the Henley-Young Detention Facility. The facility continues to make incremental (small positive) improvements. During this review **19 provisions have been moved to beginning compliance**. Although some will have to be tweaked as they are being implemented this is a very good start on the road to adding structure to the facility programs. As

stated in my previous reports, although the process on provisions have begun, it is vitally important that policies and procedures are developed to ensure a consistent, comprehensive, and standardized way of operating the facility. This is very important because based on my most recent review, due to the lack of proper staffing at times, the location of the visitations process had to be altered. This change forced the facility to move away from its designed visitation practice. To ensure consistency in the program, the County must ensure that policies and procedures are adhered to. As in my previous reports I maintained that the County Administrator is on the right path but all stakeholders (i.e. juvenile court, county supervisors, Jackson Public School and the State of Mississippi) must work together in this process. There is clearly a need for all parties to sit down and develop strategies to ensure all parties are moving in the same direction as it relates to services provided for youth and systems being put in place for their success and benefit. As I have stated in meetings with each entity, youth at Henley-Young are impacted by all stakeholders. Again, the provisions related to medical, mental health, staffing, treatment, suicide prevention, and cell confinement are still major liability areas. During this visit, I reviewed medical, court and facility files. Based on that review I am recommending each body review their system to determine who is responsible for assuring proper documents are in place and the policy and system to make sure it is taking place. As it relates in particular to medical charts see provisions 12.1.

As for the school, I am recommending again that an evaluation of the school is completed and that a compliance officer be hired to ensure the school's educational standards are being met.

LEONARD B. DIXON



Attachments

A – Response from Henley-Young/Jackson Public School dated May 1, 2013

B - Recommended files for medical, case management and mental health

Attachment A

May 1, 2013

Carmen Davis
Hinds County Administrator

Re: Henley-Young School Response

Dear Carmen:

On April 19, 2013, I received the response submitted by Dr. Ginger Smith, Director Youth Court School dated April 11, 2013, from Director Knight. I appreciate the response to my compliance reports regarding the school program. However, in my review of the response, I found that no procedures have been developed which are in concert with the facility's operations or school operations and no timeline for completion. In addition, I found no school procedures on youth removal from school, isolation, behavior management, individualized educational plan, school calendar, suspensions, home bound classes, classroom support, special education, 504 requirements, assessments, library services, teacher assigned to physical education program, behavior intervention plans, etc. The above are only a few of the areas that need to be addressed by policy and procedure.

I am also very concerned for youth on restriction, unit holdouts, disciplinary or security confinement in facility, who are not receiving an educational program comparable to youth in other units within the facility. For example, dropped off packets of work without adequate instructions, follow-up or grading are not sufficient, which the school is not providing. Also, the school must have procedures to determine which youth have previously been identified as having educational disabilities and promptly obtain special education records for those students. The school should also develop procedures related to services required by the IEP, such as services for speech pathology, audiology, physical therapy, occupational therapy, in-school counseling and psychology services, and school health.

The school must also have policies and procedures for the following but not limited to:

1. At the time of admission or soon after, youth receive a brief educational history screening with respect to their school status, special education status, grade level, grades, in a systematized manner. Staff uses this information to inform initial placement in the institutional educational program. There should be a systematic procedure for screening, assessment, and evaluation after admission that includes standardized testing so that each juvenile can be placed in appropriate educational programs. Educational staff should be qualified to interpret tests and decide when additional testing is needed.
2. Staff enrolls youth in the facility school at the earliest possible time and, at the latest, within three days of admission to the facility.

3. Within five days of admission to the facility, education staff conduct a more thorough assessment of educational functioning to facilitate placement in the appropriate classes, assigned appropriate class work, and request of records (including IEP's and 504 plans) from the youth's previous school(s).
4. The facility school complies with state and local education laws for the minimum number of minutes in a school day.
5. The facility school operates twelve months a year.
6. When a student is returned from court they should be returned to school unless that child is exhibiting stress or unusual behavior.
7. The facility school has **adequate staff** (including special education staff, physical education staff and general education staff) to meet state student-to-teacher ratios based on security. **Note:** the list of teachers for general education is established by the facility; however the resident to teacher ratio—special education and the special education staffing is based on state requirement, as well as the ratios in the facility.
8. There should be adequate substitute teaching staff to cover teaching duties of staff members who are on vacation, sick, or otherwise not available. **Note:** the list of substitute teaching staff available to the facility has to have completed all of the regular training schedule and up to date on all security matters within the facility.
9. The facility school is annually reviewed and evaluated by the MS Department of Education Office of Accreditation.
10. The facility school awards credit (including partial credit) for work completed, and forwards the youth's education records from the facility to other schools when requested from the facility school.
11. The facility school complies with the federal special education law (IDEA) and comparable state requirements for students with educational disabilities.

During my unannounced visit in April 2013, I found a familiar situation as stated in my report. On April 18, 2013, two (2) teachers were not present that day and no replacements were available which meant half the youth were not in school that day. Accordingly, Dr. Smith quoted to the Clarion Ledger that she "disputes claims the juvenile needs are not being met at the center".

As stated in my report, there must be an independent review of the school program and a compliance officer hired to ensure educational standards are being met. The school administration must become a partner with the facility in developing policy and procedures. I also recommended that the school visit other education detention programs. The school is a major component of the overall programming and should be seen as such.

Please advise if you need any additional information.



Leonard B. Dixon

cc: Dale Knight, Director
Corrie Cockrell, SPLC
Moore, Attorney Hinds County
Dr. Calvin Locket, JPS
Lisa Ross, Attorney
Tony Gaylor, Attorney Hinds County

Attachments with comments

Below are specific notes in red regarding Dr. Smith's response that directly respond to the proposed policies and training. Overall, these are good goals however they must be implemented correctly and staff must be appropriately trained with documentation of the training.

RESPONSE TO MONITORING COMPLIANCE REPORT
MARCH 22, 2013

Dr. Ginger Smith, Director
Youth Court School
April .11, 2013

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:

MAINTAIN AN ADEQUATE PHYSICAL FACILITY FOR EDUCATION.

Policy: The educational complex of the Henley-Young Juvenile Justice Center will maintain the physical facilities to serve the academic needs and learning environment of the students attending school.

Safety Procedures

- (1) Keep classroom and storage facilities clean, neat and orderly.
- (2) Supplies and other moveable containers are not to be placed on top of shelves.
- (3) Materials and supplies that are no longer needed should not be accumulated.
- (4) Spills are to be cleaned up immediately.
- (5) Sharp or pointed objects are to be kept in locked cabinets.
- (6) Employees are not to eat in classrooms.
- (7) Maintain fire inspections and other prevention measures.

PROVIDE ADEQUATE SECURITY AND SUPPORT IN THE CLASSROOM.

Policy: The Henley-Young Juvenile Justice Center detention officers will supervise and **control juveniles' behavior** (no child can be controlled the option is only to modify behavior) during the operation of the Youth Court School.

ESTABLISH AN IN-SCHOOL POINTS SYSTEM BASED ON REWARDS AND CONSEQUENCES FOR BEHAVIOR.

Policy: The Henley- Young Youth Court School will use the Positive Behavior Intervention for behavior management. The Henley-Young Youth Court utilize the Positive Behavior Intervention and Support (PBIS) System. PBIS is an evidence-based behavioral intervention that enhances academics and social behavior outcomes for all students. PBIS

emphasizes that classroom management and preventive school discipline must be integrated and working together with effective academic instruction in a positive and safe school climate to maximize success for all students. (If this program is implemented within the facility it would be a step in the right direction, however it is not presently in place).

ESTABLISH AND IMPLEMENT A SCHEDULE FOR TRANSPORTING RESIDENT TO AND FROM SCHOOL THAT ASSURES THAT RESIDENTS WILL HAVE THE OPPORTUNITY TO RECEIVE THE REQUIRED HOURS OF EDUCATIONAL SERVICES MANDATED BY THE LAW.

Policy: Detention officers will escort juveniles from the dayroom to the classroom. After class, officers will search juveniles for ensure that contraband and other items are secured. (With proper policies and procedures in place the need to search students at the end of class should be the exception to the rule rather than the rule).

- 1 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. (It is important to first understand the nuances of education within a detention facility as it pertains to safety and security first, and then make sure the training of educational staff is developed for the needs of the youth so that safety and security will allow for education to occur.).

Policy: The detention and school staff will be trained using the training curriculum below.

Training Curriculum

Orientation Courses (The list of training below has no specificity (i.e. core curriculum, syllabus etc.) as to who will receive it and to what degree. The educational staff should know that there is a certain level of security on the units and classrooms that should exist however they would not be directly responsible for this responsibility the facility would, so levels of training must be established). It should be noted that most of the areas below pertain to direct care and facility operation staff. However, it is a great idea to train school staff along with others in the process.

- Facility Overview
- Security Procedures
 1. Unit Security
 2. Control Center Operations
 3. Perimeter Security
 4. Shift logs
 5. Juvenile Counts
 6. Juvenile Movement
 7. Control of Contraband

8. Key Control
 9. Tools, Culinary Equipment and Sharps
- Juvenile Rules and Regulations
 - Juvenile Rights and Responsibilities
 - Admission and Release Procedures
 - Employee Code of Ethics and Conduct
 - Workplace Harassment and Violence
 - Fire and Emergency Procedures and Control of Caustic
 - Toxic, and Flammable Materials
 - Suicide Awareness and Self-Harm
 - Confidentiality and HIPAA
 - Behavior Management (Verbal De-escalation and Physical Intervention)
 - First Aid
 - CPR
 - Report Writing
 - Interpersonal Relations and Communication
 - Child and Adolescent Development
 - Airborne Pathogens
 - Blood Borne Pathogens
 - Child Abuse, Neglect and Sexual Victimization
 - Prison Rape Elimination Act
 - Supervision of Alleged Sex Offenders
 - Conflict Resolution
 - Customer Service
 - Medical/Mental Health Intake & Screening
 - Drug and Alcohol Identification
 - Gang Interdiction
 - Mentoring Techniques
 - Facility Programs for Juveniles
 - Managing Special Populations
 - Understand Psychotropic Drugs
 - Distribution of Medications
 - Facility Review
 - Updates

Attachment B

Description



Smead® End-Tab 2-Divider Classification Folders, 8 1/2" x 11", 2 Divider, 2 Partition, 50% Recycled, Green, Pack Of 10
Item # 760403



Smead® Fastener Folders With Dividers, Letter Size, Manila, Pack Of 10
Item # 782140



SJ Paper Top-Tab Economy Classification Folders, Letter Size, 2 Dividers, 35% Recycled, Red, Box Of 25
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