

OC Spray to be Issued to Staff

8 76 7 9/21/17
12 14 15

1.8oz. Vexor (for PO use)

4oz. Fox (for JDO use)

If a can is removed from this box please indicate the date it was removed, change the number above and write your name.

Date: Description Name:

7/5/17	Vexor (small can)	Jesse Thompson
Added 8/17/17	Fox Spray (2)	Added by BPO Fry (used cans)
Issued 9/8/17	Vexor small can	Dr. Speltz
Added 9/21/17	Vexor	Return 7/5

5 can 574 3 can Vexor

Shasta County Probation OC Master Inventory

Sheet No.	1	Date	7/4/17
Performed By	Natalie Jacobs	Department	JRF

[illegible]

Signature

Natalie Ford

Ed Miller

From: service@paypal.com
Sent: Friday, December 26, 2014 2:49 PM
To: Ed Miller
Subject: Your payment to Samuel Breaux



You sent a payment of \$371.20 USD to Samuel Breaux.

Dec 26, 2014 14:48:22 PST
Receipt No:0530-3894-5651-1084

Hello Edward Miller,

This charge will appear on your credit card statement as payment to PAYPAL *SAMBREAUX.

Save time with a PayPal account

Create a PayPal account and save your payment information. You won't need to enter your payment information every time you shop online.

Shop with confidence

We keep your financial information secure.

Transactions monitored 24/7

Our fraud specialists help protect your account.

You're protected

Zero fraud liability for eligible unauthorized purchases. [See eligibility](#)

Merchant information:
Samuel Breaux
sambreaux@bellsouth.net

Instructions to merchant:
None provided

Shipping information
Edward Miller
2684 Radio Lane
Redding, CA 96001
United States

Shipping method
Not specified

Description	Unit price	Qty	Amount
FOX LABS - SUDECON DECONTAMINATION WIPES	\$1.22 USD	10	\$12.20 USD
FOX LABS PEPPER SPRAY - MARK 5 FLIP TOP CAP Select Spray Pattern: Stream Pattern (FX-42FTS)	\$17.95 USD	20	\$359.00 USD
Subtotal:			\$371.20 USD
Discount:			-\$0.00 USD
Total:			\$371.20 USD

Receipt No: 0530-3894-5651-1084

Please keep this receipt number for future reference. You'll need it if you contact customer service at Samuel Breaux or PayPal.



1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com

Regular



ORDER NO: 9848680-1

3008398794

VICKI FRY
2684 RADIO LANE
REDDING CA 96001

Pkt Ctrl Nbr
3008398794

VICKI FRY
2684 RADIO LANE
REDDING CA 96001

Received

EXPORT RESTRICTIONS:

This transaction may contain commodities restricted by the United States International Trade Regulations. If, at a later date, you, your business or agency decide these commodities will be exported from the United States, then please reference the United States Department of Commerce Bureau of Industry and Security Export Administration Regulations (15CFR 730 - 774), the United States Department of State International Traffic in Arms Regulations (22 CFR 120-130), as well as any other applicable laws. These laws apply to private, commercial and government agency export transactions. As an exporter, you, your business or agency, will be responsible for compliance with all U.S. laws relating to the export of these items.

WFL	QTY	ITEM NO.	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
01SC27BB04	25.00	SD147	SABRE RED CROSSFIRE SPRAY MK3	14.99	374.75
01SC24CC04	15.00	SD250	SABRE CROSSFIRE PEPPER GEL MK 4	16.99	254.85

268400 - 035700

SEE REVERSE SIDE FOR PRE-AUTHORIZED RETURN FORM

01F01213ASD

Galls
1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com
galls.com/pages/returns

1 OF 1 PAGES

Net Product \$	629.60
Tax	45.65
P & H	31.48
Total Shipment \$	706.73
	706.73

Cust. Phone#:

VICKI FRY

01/25/2018

01/25/2018 15:11:38 1801259806 LEX

REDDING CA 96001

Order: 9848680-1

PO #: VICKI FRY

SHASTA000534-1

Pepper Spray/JRF staff

Laurie Sutherland

From: Jennifer Morgan
Sent: Friday, July 17, 2015 12:56 PM
To: Laurie Sutherland
Subject: FW: Your CopsPlus Receipt

26200-035700 573.00

26200-035700 42.98

00961-007400 <42.98>

- Use tax payable

From: customerservice@copsplus.com [customerservice@copsplus.com]
Sent: Tuesday, June 30, 2015 8:18 AM
To: Jennifer Morgan
Subject: Your CopsPlus Receipt

[<http://www.copsplus.com/receipttop.gif>]

Order Date: June 30, 2015

Order Number: 641545

Ship To:

Jennifer Morgan

2684 Radio Lane

SCJRF

Redding, CA 96001 Bill To:

Jennifer Morgan

2684 Radio lane

SCJRF

Redding, CA 96001

Qty Item

30 Fox Labs FX-42FTS
Mark 5 Flip Top 4oz. Pepper Spray
2% Stream Spray Pattern
\$573.00
\$19.10 x 30

30 Items: \$573.00

Shipping: \$0.00

Order Total: \$573.00 ✓

SHASTA000535-1



1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com

Regular

PACKING LIST - DO NOT PAY FROM THIS COPY



ORDER NO: 5273833-2

3004209756

JENNIFER MORGAN
SHASTA COUNTY PROBATION
2684 RADIO LANE
REDDING CA 96001

Pkt Ctrl Nbr
3004209756

SHASTA COUNTY PROBATION
JENNIFER MORGAN
2684 RADIO LANE
REDDING CA 96001

EXPORT RESTRICTIONS:

This transaction may contain commodities restricted by the United States International Trade Regulations. If, at a later date, you, your business or agency decide these commodities will be exported from the United States, then please reference the United States Department of Commerce Bureau of Industry and Security Export Administration Regulations (15CFR 730-774), the United States Department of State International Traffic in Arms Regulations (22CFR 120-130), as well as any other applicable laws. These laws apply to private, commercial and government agency export transactions. As an exporter, you, your business or agency, will be responsible for compliance with all U.S. laws relating to the export of these items.

WFL	QTY	ITEM NO.	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
01SC27AA03	15.00	SD114	4 OZ MK5 FLIP TOP STREAM DEFENSE SPRAY	21.49	322.35
<i>20200-035700</i> <i>Pepper spray for JRF/</i> <i>Peace officer equipment</i>					

SEE REVERSE SIDE FOR PRE-AUTHORIZED RETURN FORM

01FO1213ASD

1 OF 1 PAGES

Galls
1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com
galls.com/pages/returns

Net Product \$	322.35
Tax	24.18
P & H	3.64
Total Shipment \$	350.17
VC	350.17

Cust. Phone#: 5302456602

12/29/2015

01/11/2016 18:04:25 1601119928 LEX

SHASTA COUNTY PROBATION

REDDING CA 96001

Order: 5273833-2

PO #: SHASTA COUNTY PROBATIO

SHASTA000536-1

JRF MONTHLY REPORT

April 2015

I. POPULATION:

- A. Totals for month: 586
 - Male: 505
 - Female: 81
 - Custody Total Days: 287
 - Average Length of Stay: 10
- B. FURLOUGH
 - Male: 177
 - Female: 20
 - Average Furlough Days: 7
- C. JDAP
 - Male: 72
 - Female: 14
 - Average JDAP Days: 3
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 20
- F. Highest Daily Pop: 25
- G. Lowest Daily Pop: 17
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 31

II. DONATIONS: VHS Movies & National Geographic Magazines

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 51 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	2
3. Contraband/Smuggled/In-House	5
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	14
7. Injury/Illness*	12
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	5
11. Physical Restraint	8
12. Profanity	1
13. Property/Facility Damage	1
14. Racial/Gang Related	2
15. School	9
16. Suicide/Attempted/Ideation/Statements	1
17. Other	5

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Two residents got into a fight, one of them broke a tooth, he was seen by the nurse and given Ibuprofen for pain.
2. Resident went on furlough with his family, they had a minor accident while gone, when resident returned staff had him checked by the nurse. Resident had a minor bump on his head and was given Tylenol.
3. Resident fell off his bed and hit his head, he was seen by the nurse and cleared.
4. Resident twisted his ankle while playing basketball, he was given an ice bag and Ibuprofen then cleared by nurse.
5. Resident became aggressive toward staff and had to be restrained. He was seen by nurse and had some inflammation around right wrist and no other injuries. Resident was cleared by nurse.
6. Resident punched his door and received a small contusion to his right hand, he was seen by nurse and cleared.
7. Resident rolled her right ankle during large muscle exercise; she was seen by nurse and cleared.
8. Resident punched his wall; he refused to see the nurse.
9. Resident cut his finger while cleaning the showers on the shower door. He was seen by the nurse and deemed no treatment needed.
10. Resident was hitting herself in the head, she was seen by the nurse and referred to the Mental Health Counselor.
11. Resident was cutting herself, the wounds were superficial. She was seen by the nurse and no medical attention was needed. Resident was referred to the Mental Health Counselor.
12. Resident had a rash that was painful, she was given cold compresses.
13. Suicide Statement: Resident said he would like to kill himself, then said he was just making stupid statements.

JRF MONTHLY REPORT

April 2016

I. POPULATION:

- A. Totals for month:
 - Male: 308
 - Female: 62
 - Custody Total Days: 440
 - (Of those released in April, 36)
 - Average Length of Stay: 12 days
- B. FURLOUGH
 - Male: 107
 - Female: 55
 - Average Furlough Days: 5
- C. JDAP
 - Male: 80
 - Female: 11
 - Average JDAP Days: 3
- D. HEC
 - Male: 0
 - Female: 18
 - Average HEC Days: 1 days
- E. Average Daily Pop: 12
- F. Highest Daily Pop: 16
- G. Lowest Daily Pop: 10
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 33

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 27 (Some had multiple categories)
- B. Total # of minors 8
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	8
7. Injury/Illness*	5
8. Insubordination/Disrespect	2
9. Non-Compliance	8
10. Physical Altercation	1
11. Physical Restraint	9
12. Profanity	5
13. Property/Facility Damage	0
14. Racial/Gang Related	1
15. School	0
16. Suicide/Attempted/Ideation/Statements	3
17. Other	2

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident hit her face on the ground and received a bloody nose.
2. Resident smashed his finger between the couches, the nurse taped it up.
3. Resident injured his wrist; he was given ice & ibuprofen.
4. Resident was given Benadryl for his allergies.
5. Resident punched his wall and hurt his hand. He was seen by the nurse & the hand was x-rayed. There was no fracture.
6. Suicide Statements: 1.Minor made statements to the officer that she was going to kill herself, per doctors orders she was placed in a safety gown and place in a safety cell. She was seen by the Mental Health Therapist the next day. 2. Resident stated he was going to kill himself, the doctor requested that he be put in a suicide gown with room checks every 15 minutes. 3. Resident said he wanted to kill himself. Per doctor he was placed on suicide watch and referred to the Mental Health Therapist.
7.
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JRF MONTHLY REPORT

April 2017

I. POPULATION:

- A. Totals for month:
 - Male: 569
 - Female: 104
 - Custody Total Days:
(Of those released in April)
 - Average Length of Stay: 6 days
- B. FURLOUGH
 - Male: 207
 - Female: 54
 - Average Furlough Days: 9
- C. JDAP
 - Male: 117
 - Female: 7
 - Average JDAP Days: 4
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 23
- F. Highest Daily Pop: 26
- G. Lowest Daily Pop: 19
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 39

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 38 (Some had multiple categories)
- B. Total # of minors 15
- C. # by category:
 - 1. Assault 1
 - 2. Chemical Agent Employed (O.C.) 0
 - 3. Contraband/Smuggled/In-House 1
 - 4. Escape/Attempted Escape 0
 - 5. Furlough Violation 0
 - 6. Information/Documentation 16
 - 7. Injury/Illness* 12
 - 8. Insubordination/Disrespect 2
 - 9. Non-Compliance 7
 - 10. Physical Altercation 2
 - 11. Physical Restraint 7
 - 12. Profanity 2
 - 13. Property/Facility Damage 0
 - 14. Racial/Gang Related 1
 - 15. School 0
 - 16. Suicide/Attempted/Ideation/Statements 1
 - 17. Other 1
 - 18. Soft Hands 0
 - 19. Threats 3

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident felt dizzy and sick at time of booking. She stated she had hit herself in the head with a bottle. Staff called physician's assistant, explained the situation and received medical clearance to book her.
2. Resident had blood on his sock due to his toenails being overgrown. Resident cut his toenails that night and refused medical.
3. Resident had a bug in his right eye. The physician's assistant used tweezers to get the bug out and prescribed antibiotics.
4. Resident asked for Tums because he was having heartburn.
5. Resident had prior injuries on his hand and they were checked out by nurse and cleared just to be safe.
6. Resident stated he had blood in his stool. Dr. advised to keep observing and follow up with the nurse in the am.
7. Resident felt a pop on his ankle while playing basketball but felt no pain. He was given ice and non aspirin.
8. Resident has slight swelling on his middle finger but full mobility. He refused any medical.
9. Resident had bug bites on his arm. Nurse advised to give Benadryl every 6 hours until condition improved.
10. Resident stated he didn't know what was going on but he seriously felt like harming himself. Dr. was called and directed officers to place resident in a suicide gown and move him to a transition cell with 15 minute room checks. No further incident.
11. Resident received a scrape on his back while playing basketball and refused any medical.
12. Resident requested ice stating his arm was sore from playing dodge ball.

JRF MONTHLY REPORT

August 2015

I. POPULATION:

- A. Totals for month:
 - Male: 417
 - Female: 50
 - Custody Total Days: 828
 - (Of those released in August)
 - Average Length of Stay: 19 days
- B. FURLOUGH
 - Male: 158
 - Female: 25
 - Average Furlough Days: 6
- C. JDAP
 - Male: 31
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 15
- F. Highest Daily Pop: 20
- G. Lowest Daily Pop: 12
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 36

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 26 (Some had multiple categories)
- B. Total # of minors 18
- C. # by category:
 - 1. Assault 1
 - 2. Chemical Agent Employed (O.C.) 0
 - 3. Contraband/Smuggled/In-House 0
 - 4. Escape/Attempted Escape 1
 - 5. Furlough Violation 0
 - 6. Information/Documentation 10
 - 7. Injury/Illness* 5
 - 8. Insubordination/Disrespect 0
 - 9. Non-Compliance 6
 - 10. Physical Altercation 1
 - 11. Physical Restraint 4
 - 12. Profanity 1
 - 13. Property/Facility Damage 0
 - 14. Racial/Gang Related 0
 - 15. School 2
 - 16. Suicide/Attempted/Ideation/Statements 2
 - 17. Other 1

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident punched the wall, was seen by nurse and cleared.
2. Resident twisted his ankle playing basketball.
3. Resident rolled his ankle doing large muscle exercise.
4. Resident rolled his right ankle while playing basketball.
5. Resident scraped his knuckles by hitting the wall.
6. Suicide Ideation: 1. Resident stated he wanted to "End it all". He was counseled by staff.
2. Resident stated, "He would kill himself if he was sentenced to prison." He was counseled by staff
and calmed down.
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JRF MONTHLY REPORT

August 2017

I. POPULATION:

- A. Totals for month:
 - Male: 553
 - Female: 96
 - Custody Total Days: 31
 - (Of those released in August)
 - Average Length of Stay: 16 days
- B. FURLOUGH
 - Male: 190
 - Female: 19
 - Average Furlough Days: 7
- C. JDAP
 - Male: 52
 - Female: 12
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 23
- G. Lowest Daily Pop: 18
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 19

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 27 (Some had multiple categories)
- B. Total # of minors 15
- C. # by category:

1. Assault	2
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	8
7. Injury/Illness*	8
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	1
11. Physical Restraint	3
12. Profanity	5
13. Property/Facility Damage	1
14. Racial/Gang Related	1
15. School	4
16. Suicide/Attempted/Ideation/Statements	2
17. Other	3

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident complained of his chest hurting. A finger pulse meter was used to read the heart rate. Doctor was called and directed staff to monitor the resident and if necessary give him 600mg of Ibuprofen.

2. Resident rolled his ankle while playing basketball. The Resident said he was fine and refused all other medical treatment.

3. Resident was bumped in the knee while playing basketball. He asked for ice and also was given non- aspirin at bedtime.

4. Resident tried to "tattoo" himself. He was checked out by the nurse and cleared.

5. Resident stated he had hurt his ankle while exercising in his room. After further evaluation by the nurse, the resident admitted he lied to try and prank an officer.

6. It was noticed by officers that a resident's neck seemed stiff. She stated she thought she turned it wrong while brushing her hair. She was evaluated by the nurse and was given Ibuprofen and a warm compress. After 40 minutes using the compress she felt much better.

7. Resident made statements after an argument that he was going to kill himself and wanted to go to booking. The on-call doctor was called and advised to call the mental health counselor. She asked him if he was going to harm himself and he stated, "No" so she advised officers to return him to his room and she would follow- up with him in the morning.

8. Resident stated he was going to kill himself and he didn't care anymore. He stated he was going to bang his head against the wall. He was placed in a safety gown, taken to a transitional cell and had 15 minute cell checks with cuffs on. Once calmed down he stated he was just mad he lost his programming that morning, and he was taken back to his room.

9. Resident stated he did not want to live. While being counseled he stated he just felt alone because he doesn't have a good relationship with his father, nor friends he can hang out with on the outside. After being counseled he made believable statements that he would not harm himself.

10.

11.

JRF MONTHLY REPORT

December 2015

I. POPULATION:

- A. Totals for month: 460
 - Male: 370
 - Female: 90
 - Custody Total Days: 307
 - (Of those released in December)
 - Average Length of Stay: 11 days
- B. FURLOUGH
 - Male: 282
 - Female: 30
 - Average Furlough Days: 10
- C. JDAP
 - Male: 0
 - Female: 0
 - Average JDAP Days: 0
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 15
- F. Highest Daily Pop: 18
- G. Lowest Daily Pop: 13
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 27

II. DONATIONS: 2 Basketballs from Cross Fit.

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 36 (Some had multiple categories)
- B. Total # of minors 18
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	2
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	15
7. Injury/Illness*	10
8. Insubordination/Disrespect	1
9. Non-Compliance	11
10. Physical Altercation	2
11. Physical Restraint	4
12. Profanity	3
13. Property/Facility Damage	2
14. Racial/Gang Related	0
15. School	6
16. Suicide/Attempted/Ideation/Statements	0
17. Other	12

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident hurt shoulder while playing dodge ball. Doctor prescribed Ibuprophen.
2. Resident was refusing his medication, he agreed to start taking it the next day after talking to the nurse.
3. Resident received a goose egg on his forehead after banging his head on his door. He was seen by the nurse and cleared.
4. Resident punched a desk and sustained redness on his right hand. He was seen by the nurse & cleared.
5. Resident punched a wall, he was seen by the nurse and no treatment was needed.
6. Resident punched her wall. She was seen by the nurse and cleared.
7. Resident had a panic attack, per doctor she was placed in a booking cell and immediately laid down and fell asleep.
8. Resident was making herself throw up after her meals, the nurse counseled her with healthy weight loss methods and the harmful side effects of bulimia.
9. Resident pounded his fists on the wall of his room. He was seen by the nurse and medically cleared.
10. Resident hit his cell wall, was seen by nurse and cleared.
11.

JRF MONTHLY REPORT

December 2016

I. POPULATION:

- A. Totals for month: 610
 - Male: 553
 - Female: 57
 - Custody Total Days: 819
 - (Of those released in December)
 - Average Length of Stay: 32 days
- B. FURLOUGH
 - Male: 115
 - Female: 0
 - Average Furlough Days: 4
- C. JDAP
 - Male: 42
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 20
- F. Highest Daily Pop: 23
- G. Lowest Daily Pop: 16
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 21

II. DONATIONS: \$90.00 Donation for residents to make cookies

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: One resident graduated from high school.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 48 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:
 - 1. Assault 0
 - 2. Chemical Agent Employed (O.C.) 0
 - 3. Contraband/Smuggled/In-House 2
 - 4. Escape/Attempted Escape 0
 - 5. Furlough Violation 0
 - 6. Information/Documentation 15
 - 7. Injury/Illness* 7
 - 8. Insubordination/Disrespect 0
 - 9. Non-Compliance 10
 - 10. Physical Altercation 0
 - 11. Physical Restraint 4
 - 12. Profanity 3
 - 13. Property/Facility Damage 1
 - 14. Racial/Gang Related 4
 - 15. School 4
 - 16. Suicide/Attempted/Ideation/Statements 4
 - 17. Other 9
 - 18. Soft Hands 1
 - 19. Threats 3

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had a rash, the doctor was called and he prescribed Benadryl.
2. Resident complained of pain in his shoulder after exercise. He was examined by the nurse and it was determined it was a strained muscle.
3. Resident hit his back on the door frame when he ran into his room. He was given Ibuprofen, per the PA's instructions.
4. Resident hurt his ankle while playing basketball. The PA instructed that resident should receive ice and Ibuprofen.
5. Resident jammed his toe while closing the door and received a small cut. He was seen by the nurse and cleared.
6. Resident accidentally hit a chair and hurt his finger. He was seen by the nurse and cleared.
7. Resident was hit in the face when a basketball bounced up. He was given ice and Ibuprofen per the PA's orders.
8. Suicide statements: 1. Resident stated he wanted to kill himself. He was counseled by staff.
2. Resident stated she would hurt herself if she was put in a locked room. She was evaluated by the nurse.
3. Resident was stating she wanted to kill herself. She was evaluated by the nurse.
4. Resident stated he wanted to kill himself. He was seen by the Mental Health Therapist and the nurse and cleared.

JRF MONTHLY REPORT

December 2017

I. POPULATION:

- A. Totals for month:
 - Male: 531
 - Female: 86
 - Custody Total Days: 31
 - (Of those released in December)
 - Average Length of Stay: 27 days
- B. FURLOUGH
 - Male: 129
 - Female: 0
 - Average Furlough Pop: 4
- C. JDAP
 - Male: 18
 - Female: 0
 - Average JDAP Pop: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 20
- F. Highest Daily Pop: 25
- G. Lowest Daily Pop: 18
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 35

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted: 26 (Some had multiple categories)
- B. Total # of minors 10
- C. # by category:

1. Assault	2
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	11
7. Injury/Illness*	6
8. Insubordination/Disrespect	0
9. Non-Compliance	4
10. Physical Altercation	0
11. Physical Restraint	2
12. Profanity	1
13. Property/Facility Damage	0
14. Racial/Gang Related	0
15. School	1
16. Suicide/Attempted/Ideation/Statements	1
17. Other	2
18. Threats	3

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had a wound on his right elbow, upon inspection the on-call doctor advised to clean and bandage it.
2. Resident fell playing basketball. The on-call doctor advised to offer her ice and Tylenol.
3. Resident was upset and punched the wall. She did not want ice but was given Tylenol.
4. Resident had an ovarian cyst rupture. The on-call doctor advised to give her 600 mg of Ibuprofen.
5. Resident hit the wall in her room. She declined any ice or Tylenol.
6. Resident stated to the nurse that if she didn't get out of here she was going to harm herself. She then made another statement they better get her out or they would find her dead. The nurse placed her on suicide watch in booking where she then stated that she said all of that just to go off the POD and if she really wanted to harm herself she would have already.
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JRF MONTHLY REPORT

February 2015

I. POPULATION:

- A. Totals for month: 616
 - Male: 455
 - Female: 161
 - Custody Total Days: 1088
 - Average Length of Stay: 26 days
- B. FURLOUGH
 - Male: 218
 - Female: 9
 - Average Furlough Days: 8
- C. JDAP
 - Male: 16
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 22
- F. Highest Daily Pop: 24
- G. Lowest Daily Pop: 19
- H. # of days over capacity: 0
- I. # of days at/under capacity: 28
- J. Bookings: 39

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: High School Graduation

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 39 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	3
7. Injury/Illness*	3
8. Insubordination/Disrespect	0
9. Non-Compliance	11
10. Physical Altercation	2
11. Physical Restraint	6
12. Profanity	2
13. Property/Facility Damage	2
14. Racial/Gang Related	1
15. School	14
16. Suicide/Attempted/Ideation/Statements	4
17. Other	6

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident was booked from hospital with facial injuries; he was referred to JRF doctor for evaluation.
2. Resident received a cut on his mouth during a fight. Was seen by nurse and treated.
3. Resident hurt his back when he attempted a backflip and landed wrong.
4. 1 Suicide Attempt - Resident tried to commit suicide by tying her sweatshirt around her neck. She was referred to Mental Health Therapist for evaluation.
5. 1 Suicide Ideation – Resident told staff she was thinking about suicide. She was seen by Mental Health Therapist.
6. 2 Suicidal Statements – (1) Resident banged his head against the wall and said he wanted to kill himself. (2) Resident said he felt suicidal earlier in the day but was feeling better. Both residents were referred to the Mental Health Therapist.
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JRF MONTHLY REPORT

February 2016

I. POPULATION:

- A. Totals for month: 460
 - Male: 326
 - Female: 134
 - Custody Total Days: 546
 - (Of those released in February)
 - Average Length of Stay: 21 days
- B. FURLOUGH
 - Male: 200
 - Female: 27
 - Average Furlough Days: 8
- C. JDAP
 - Male: 4
 - Female: 0
 - Average JDAP Days: 0
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 16
- F. Highest Daily Pop: 21
- G. Lowest Daily Pop: 13
- H. # of days over capacity: 0
- I. # of days at/under capacity: 29
- J. Bookings: 29

II. DONATIONS: Ed Niederberger and wife donated toiletries for the minors.

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Graduation of 1 resident.
Residents have successfully hatched baby chicks and have started a garden.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 31 (Some had multiple categories)
- B. Total # of minors 15
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	2
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	8
7. Injury/Illness*	6
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	0
11. Physical Restraint	11
12. Profanity	5
13. Property/Facility Damage	1
14. Racial/Gang Related	1
15. School	0
16. Suicide/Attempted/Ideation/Statements	2
17. Other	9

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had an anxiety attack; she was seen by the nurse and educated on breathing techniques.
2. Resident kicked his door and hurt his ankle; he was given an ice pack & Ibuprofen per doctor.
3. Resident hit his head on the wall when he sat down on his bunk, he was given an ice pack and seen by the nurse the next day and cleared.
4. Resident fainted, she was examined by the nurse and he could not find a reason for her to have a decreased level of consciousness, he will monitor her.
5. Resident had poison oak, he was given Hydrocortisone Cream.
6. Resident complained of nausea and throwing up; he was seen by nurse and cleared.
7. Suicide Ideation: Resident said he tried to kill himself by hitting his head against the wall. Nurse examined him and could not find any head injury. Resident was put on suicide watch.
8. Suicide Statements: Resident said he wanted to kill himself several times; he was placed on suicide watch.

JRF MONTHLY REPORT

February 2017

I. POPULATION:

- A. Totals for month: 807
 - Male: 706
 - Female: 101
 - Custody Total Days: 375
 - (Of those released in Feb)
 - Average Length of Stay: days 14
- B. FURLOUGH
 - Male: 144
 - Female: 5
 - Average Furlough Days: 5
- C. JDAP
 - Male: 2
 - Female: 0
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 1
 - Average HEC Days: 14 days
- E. Average Daily Pop: 29
- F. Highest Daily Pop: 28
- G. Lowest Daily Pop: 23
- H. # of days over capacity: 0
- I. # of days at/under capacity: 28
- J. Bookings: 38

II. DONATIONS: 0

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 35 (Some had multiple categories)
- B. Total # of minors 24
- C. # by category:

1. Assault	4
2. Chemical Agent Employed (O.C.)	2
3. Contraband/Smuggled/In-House	3
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	12
7. Injury/Illness*	8
8. Insubordination/Disrespect	1
9. Non-Compliance	2
10. Physical Altercation	4
11. Physical Restraint	1
12. Profanity	1
13. Property/Facility Damage	2
14. Racial/Gang Related	1
15. School	1
16. Suicide/Attempted/Ideation/Statements	1
17. Other	2
18. Soft Hands	0
19. Threats	2

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident was observed spitting up blood approximately 7 times. Supervisor checked on resident and he refused medical treatment.
2. Resident noticed small bugs falling from hair and contacted supervisor.
3. Resident had a ¼ inch cut next to left eyebrow and swelling to the left side of face. Dr. was concerned about the cut and instant swelling, he directed officers to take resident to the E.R. The E.R. glued the cut above eye and resident returned.
4. Resident had a cut on nose, referred to Ophthalmologist to rule out injury to eye.
5. Resident sounded raspy and had difficulty breathing, Dr. advised to give resident 2 puffs on the Albuterol inhaler and if condition worsened take the resident to the E.R.
6. Resident had a cut across the right index and middle finger. They were given ice and ibuprofen for swollen and painful hand. Followed up by nurse the next day and cleared.
7. Resident had swollen and painful hand from a collision during basketball. Physician's Assistant Chris advised to use Ace Bandage.
8. Resident stated he could move his rib around and thought it was broken. Officer used the digit monitor To check pulse and oxygen levels. Resident later stated his stomach was hurting and he felt like he was, "between a mushroom and acid high." Via the phone Dr. advised to follow up with nurse in the morning.
9. Suicidal ideation: Resident stated he felt extremely depressed and that he "didn't want to live anymore" He went on to state that he wanted to kill himself. Resident was transported to booking per nurse. Nurse instructed that resident be placed in a safety gown.

JRF MONTHLY REPORT

February 2018

I. POPULATION:

- A. Totals for month: 663
 - Male: 624
 - Female: 39
 - Custody Total Days: 28
 - (Of those released in February)
 - Average Length of Stay: 43 days
- FURLOUGH
 - Male: 31
 - Female: 0
 - Average Number of Youth on Furlough: 1 day
- C. JDAP
 - Male: 104
 - Female: 0
 - Average Number of Youth on JDAP: 4 days
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 24
- F. Highest Daily Pop: 26
- G. Lowest Daily Pop: 21
- H. # of days over capacity: 0
- I. # of days at/under capacity: 28
- J. Bookings: 22

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

III. DONATIONS

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 22 (Some had multiple categories)
- B. Total # of minors 13
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	3
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	9
7. Injury/Illness*	4
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	1
11. Physical Restraint	1
12. Profanity	4
13. Property/Facility Damage	0
14. Racial/Gang Related	1
15. School	1
16. Suicide/Attempted/Ideation/Statements	0
17. Other	0
18. Threats	5

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident jammed left pinkie finger while playing basketball during program time; due to visible swelling, bag of ice was provided to prevent further swelling.

2. Resident kicked and punched his door resulting in swelling of right hand, on call Dr. recommended 600 mg of ibuprofen and soapy ice which was given.

3. Resident tripped and fell, stated that right ankle was twisted, ice was provided to reduce swelling.

4. Resident stated he had been throwing up and had streaks of blood in his vomit and that this had been occurring for weeks; on call Dr. informed and advised to monitor the vomit and call back if large amounts of blood were present.

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JRF MONTHLY REPORT

January 2015

I. POPULATION:

- A. Totals for month: 745
 - Male: 581
 - Female: 164
 - Custody Total Days: 992
 - Average Length of Stay: 29 days
- B. FURLOUGH
 - Male: 302
 - Female: 8
 - Average Furlough Days: 10
- C. JDAP
 - Male: 55
 - Female: 0
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 24
- F. Highest Daily Pop: 28
- G. Lowest Daily Pop: 20
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 33

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 77 (Some had multiple categories)
- B. Total # of minors 33
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	3
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	19
7. Injury/Illness*	7
8. Insubordination/Disrespect	0
9. Non-Compliance	15
10. Physical Altercation	4
11. Physical Restraint	4
12. Profanity	7
13. Property/Facility Damage	2
14. Racial/Gang Related	2
15. School	20
16. Suicide/Attempted/Ideation/Statements	4
17. Other	15

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident's arm felt numb, Medical was called. Medical said the resident had a shot that day and the numbness was a reaction to the shot.
2. Resident jumped onto his bed and hit the cement bunk with his foot, he was seen by the nurse and cleared.
3. Resident hurt his left ankle while horse playing, he was seen by the nurse and cleared.
4. Two residents collided while playing football, one hurt his foot and he was placed on restricted activity for a few days.
5. Resident ran into the pole of the basketball hoop and injured his knee, he was seen by the nurse and put on restricted activity & ibuprofen.
6. Resident hurt his thumb while trying to catch a football. Resident refused medical attention and returned to play football.
7. Resident tripped on the stairs and hurt his knee, he was seen by the nurse and given ibuprofen, no further treatment was needed.
8. 1 Suicide Statement: Resident said he felt like he wanted to kill himself, he was seen by the nurse and cleared.
9. 3 Suicide Ideations: 1) Two residents were making suicide statements and when they were questioned they said they were joking and trying to get attention. 2) Resident was making suicidal statements, he was seen by the Mental Health Therapist and cleared. 3) Resident threatened to cut himself, the Doctor was called and resident was cleared to return to his room
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JRF MONTHLY REPORT

January 2016

I. POPULATION:

- A. Totals for month: 448
 - Male: 351
 - Female: 97
 - Custody Total Days: 404
 - (Of those released in January)
 - Average Length of Stay: 18 days
- B. FURLOUGH
 - Male: 271
 - Female: 44
 - Average Furlough Days: 10
- C. JDAP
 - Male: 0
 - Female: 0
 - Average JDAP Days: 0
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 14
- F. Highest Daily Pop: 17
- G. Lowest Daily Pop: 12
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 23

II. DONATIONS:

- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Received two incubators and eggs to start raising chickens for the Grow program.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 31 (Some had multiple categories)
- B. Total # of minors 13
- C. # by category:
 - 1. Assault 0
 - 2. Chemical Agent Employed (O.C.) 0
 - 3. Contraband/Smuggled/In-House 1
 - 4. Escape/Attempted Escape 0
 - 5. Furlough Violation 0
 - 6. Information/Documentation 10
 - 7. Injury/Illness* 5
 - 8. Insubordination/Disrespect 0
 - 9. Non-Compliance 10
 - 10. Physical Altercation 0
 - 11. Physical Restraint 2
 - 12. Profanity 3
 - 13. Property/Facility Damage 2
 - 14. Racial/Gang Related 0
 - 15. School 3
 - 16. Suicide/Attempted/Ideation/Statements 0
 - 17. Other 6

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had a bad headache; she was given Ibuprofen per the on call doctor. She was seen by nurse the next day and cleared.

2. Resident was struck in the face with a basketball and complained of a headache. He was seen by the nurse and cleared.

3. Residents hand got shut in the door and he received a minor cut.

4. Resident hurt his ankle while playing basketball. He was seen by the nurse and cleared.

5. Resident had a rash on his neck, chest and abdomen. The on call doctor prescribed Benadryl and when the nurse saw him the next day it was determined it was an allergic reaction.

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JRF MONTHLY REPORT

January 2017

- I. POPULATION:
- A. Totals for month: 620
 - Male: 557
 - Female: 63
 - Custody Total Days: 561
 - (Of those released in Jan)
 - Average Length of Stay: 21 days
 - B. FURLOUGH
 - Male: 144
 - Female: 5
 - Average Furlough Days: 5
 - C. JDAP
 - Male: 61
 - Female: 0
 - Average JDAP Days: 2
 - D. HEC
 - Male: 0
 - Female: 1
 - Average HEC Days: 1 days
 - E. Average Daily Pop: 20
 - F. Highest Daily Pop: 28
 - G. Lowest Daily Pop: 13
 - H. # of days over capacity: 0
 - I. # of days at/under capacity: 31
 - J. Bookings: 37
- II. DONATIONS: Samantha Klein- 1 Book
Wyntour Gardens- Farmer's Almanac
- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:
- IV. SPECIAL INCIDENT REPORTS:
- A. Total submitted 42 (Some had multiple categories)
 - B. Total # of minors 19
 - C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	12
7. Injury/Illness*	13
8. Insubordination/Disrespect	0
9. Non-Compliance	11
10. Physical Altercation	1
11. Physical Restraint	4
12. Profanity	3
13. Property/Facility Damage	0
14. Racial/Gang Related	4
15. School	4
16. Suicide/Attempted/Ideation/Statements	1
17. Other	8
18. Soft Hands	1
19. Threats	2

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. When being booked Resident stated she had a cut on her leg. Resident was examined by nurse and cleared.
2. Resident had blood in his feces and was sent to the E.R. where he was given meds, He was seen by nurse next day.
3. Resident booked in and had red scratches on neck and a swollen finger due to altercation with mother. On-call Dr. was called and he prescribed ice and bunny wrap for finger.
4. Resident is pregnant and complained of back cramps; was given Tylenol and bed rest.
5. Resident hyper extended knee while playing basketball and was seen by nurse next day and cleared.
6. Resident rolled ankle while playing basketball, was given ice and ibuprofen.
7. Resident was hearing non-threatening voices; Dr. said Resident could see nurse in the am.
8. Resident stated he was having hard time breathing, Given EKG/Chest x-ray and cleared.
9. Resident had abscessed tooth, Dr. prescribed ibuprofen until he could follow up with nurse.
10. Resident was acting bizarre and strange in his behavior, Physician's Assistant said to put in safety gown and in the Transition Room until he could be evaluated by MH following day.
11. Resident itching all over body, was prescribed Benadryl by Physician's Assistant
12. Resident felt light headed and nauseous. After vomiting he felt much better.
13. Resident cleared from SRMC to be booked after being brought in for using meth.
14. Suicide Ideation: 1. Resident made a comment at school that he wanted to slit his throat and poop blood. Seen by nurse and cleared.

JRF MONTHLY REPORT

January 2018

I. POPULATION:

- A. Totals for month: 571
 - Male: 511
 - Female: 60
 - Custody Total Days: 31
 - (Of those released in Jan.)
 - Average Length of Stay: 17 days
- B. FURLOUGH
 - Male: 7
 - Female: 5
 - Average Number of Youth on Furlough: 1 day
- C. JDAP
 - Male: 54
 - Female: 0
 - Average Number of Youth on JDAP: 2 days
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 18
- F. Highest Daily Pop: 21
- G. Lowest Daily Pop: 17
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 18

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

III. DONATIONS: Matrix donated \$100 in board games to the facility

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 21 (Some had multiple categories)
- B. Total # of minors 7
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	6
7. Injury/Illness*	2
8. Insubordination/Disrespect	0
9. Non-Compliance	6
10. Physical Altercation	0
11. Physical Restraint	3
12. Profanity	3
13. Property/Facility Damage	1
14. Racial/Gang Related	1
15. School	0
16. Suicide/Attempted/Ideation/Statements	4
17. Other/Soft Hands	5

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident punched the wall and her hand was swollen and red. The on-call doctor advised to give ice and 325mg of Ibuprofen and to see the nurse in the am.

2. Resident said he thought people were going to kill him when he gets released for his actions. He said he spoke to his therapist and also spoke to nurse Robert about those thoughts.

3. Resident made the statement that he was going to kill himself. He was counseled by officers and the nurse, before being cleared.

4. Resident was making suicidal statements, when counseled he stated that he was just down on himself and he knows he can't actually do that in the JRF but would if he could. The on-call doctor advised to place the resident on suicide watch in booking. He was placed in a safety gown and given safety bedding. He was re-evaluated in the morning and cleared to return to his POD.

5. While resident was in the booking process he stated he felt suicidal but had no intentions of harming himself.

6. While resident was being restrained he made a statement, "I am going to kill myself!" The nurse was called and hand-cuffs were removed. The nurse evaluated the resident, who gave a believable verbal commitment he would not hurt himself or others.

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JRF MONTHLY REPORT

JULY 2015

I. POPULATION:

- A. Totals for month: 583
 - Male: 496
 - Female: 87
 - Custody Total Days: 420
 - (Of those released in July)
 - Average Length of Stay: 22 days
- B. FURLOUGH
 - Male: 165
 - Female: 0
 - Average Furlough Days: 5
- C. JDAP
 - Male: 31
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 19
- F. Highest Daily Pop: 20
- G. Lowest Daily Pop: 16
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 24

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Graduation ceremony for one resident.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 53 (Some had multiple categories)
- B. Total # of minors 16
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	3
3. Contraband/Smuggled/In-House	3
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	19
7. Injury/Illness*	8
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	2
11. Physical Restraint	3
12. Profanity	4
13. Property/Facility Damage	2
14. Racial/Gang Related	2
15. School	9
16. Suicide/Attempted/Ideation/Statements	1
17. Other	6

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident complained of wrist pain. Medical was called and advised staff to give Tylenol and ice it.
2. Resident complained of back pain. Was seen by nurse and cleared.
3. Resident was diagnosed with pinworms and treated.
4. Resident punched a wall with her fist. She was seen by nurse and given Tylenol.
5. Resident had a headache and was given Tylenol.
6. Resident punched herself in the face several times. She was seen by nurse and given ice to apply to her injury.
7. Resident injured his thumb while he was moving a couch. Was seen by nurse and given Tylenol.
8. Resident had a seizure. Doctor was called and he Ok'd staff to give the resident his seizure medicine.
9. Suicide Ideation: Resident was depressed and had thoughts of suicide. He was counseled by the Supervisor on duty.
10.
11.

JRF MONTHLY REPORT

July 2016

I. POPULATION:

- A. Totals for month: 662
 - Male: 493
 - Female: 169
 - Custody Total Days: 411
 - (Of those released in July)
 - Average Length of Stay: 22 days
- B. FURLOUGH
 - Male: 156
 - Female: 26
 - Average Furlough Days: 6
- C. JDAP
 - Male: 47
 - Female: 31
 - Average JDAP Days: 3
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 26
- G. Lowest Daily Pop: 19
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 26

II. DONATIONS: Janeen Seim's donated flower and vegetable seeds, Providence donated strawberry plants.

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: One resident graduated from high school.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 63 (Some had multiple categories)
- B. Total # of minors 23
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	14
7. Injury/Illness*	6
8. Insubordination/Disrespect	1
9. Non-Compliance	20
10. Physical Altercation	1
11. Physical Restraint	4
12. Profanity	20
13. Property/Facility Damage	1
14. Racial/Gang Related	4
15. School	2
16. Suicide/Attempted/Ideation/Statements	3
17. Other	23

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident punched his wall and hurt his arm and hand. He was given ice and Ibuprofen.
2. Resident complained of pain in his hand after punching wall. The on call doctor was called & she requested he be provided with ice and Ibuprofen.
3. Resident hurt his hand by punching his pillow and mattress; he was seen by nurse and cleared.
4. Resident rolled his ankle while exercising and received a fracture.
5. Resident injured his finger when he tripped over his blanket and fell.
6. Resident had a panic attack; she was taken outside for some fresh air.
7. Suicide Statements: 1. Resident said she would like to kill herself; she was placed on suicide watch until she could be seen by the nurse and mental health. 2. Resident stated he felt suicidal; he was counseled by staff & moved to Transition Cell until the Nurse & Mental Health could evaluate him.
8. Suicide Ideation: 1. During the booking process minor said she would like to harm herself. She was kept in the Transition Cell until she could be evaluated by Mental Health.
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JRF MONTHLY REPORT

July 2017

I. POPULATION:

- A. Totals for month:
 - Male: 602
 - Female: 94
 - Custody Total Days: 31
 - (Of those released in July)
 - Average Length of Stay: 19 days
- B. FURLOUGH
 - Male: 234
 - Female: 51
 - Average Furlough Days: 9
- C. JDAP
 - Male: 100
 - Female: 31
 - Average JDAP Days: 4
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 23
- F. Highest Daily Pop: 27
- G. Lowest Daily Pop: 19
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 35

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 34 (Some had multiple categories)
- B. Total # of minors 24
- C. # by category:

1. Assault	3
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	1
6. Information/Documentation	15
7. Injury/Illness*	14
8. Insubordination/Disrespect	0
9. Non-Compliance	7
10. Physical Altercation	3
11. Physical Restraint	4
12. Profanity	3
13. Property/Facility Damage	0
14. Racial/Gang Related	1
15. School	1
16. Suicide/Attempted/Ideation/Statements	0
17. Other	0

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident stated he rolled onto his hand while sleeping and dislocated it. He said he popped it back into place but it still hurts. When asked if he would like to see the nurse he said yes. The nurse then examined his hand and determined it was not dislocated but sore from a previous injury sustained when the resident was not in custody.
2. While the nurse was conducting a medical screening on resident he found multiple long scratches along the inside of his arm. The scratches were red but did not appear to be fresh.
3. While resident was being booked into the facility she made a face as if she tasted something funny. When asked what was wrong she stated she felt like she was going to vomit and that she had taken four cough and cold medicine pills at noon. She was given a cup of water and the doctor was called. He advised to get her heart rate and to keep an eye on her.
4. Resident stated she had red blood chunks coming out in her urine but it did not hurt. SPO on duty suggested she clean herself carefully and monitor the issue to see if the blood did in fact come from her urine.
SPO also contacted medical and was told by the doctor that nothing was needed and to follow up with medical in the am. The nurse followed up with the resident. She had started menstruating; there was nothing wrong with her.
5. Resident asked if she could go to her room and throw up. The nurse was called to come assess the problem and he then gave her Pepto-Bismol tablets and advised to give two more after dinner.
6. Resident stated he hit his right leg on the bowl while stepping over the toilet in his room and he thought it would hurt to walk. Resident declined any further medical treatment.
7. Resident stated he felt like his body was on fire. Upon talking his temperature it was 103.2F. Per the Medication Administration Record directions the resident was given 600mg. of Ibuprofen and 700mg. of Acetaminophen. The doctor was contacted and instructed resident to bed rest and to follow-up with medical in the am.
8. Resident complained of a sore throat and that he felt feverish. Residents temperature was taken and was 103.1F and he was put on bed rest. doctor was contacted and was instructed to give the resident 400mg. of Ibuprofen and 500mg. of Acetaminophen and follow-up with the nurse in the am.
9. Resident had light abrasions and possible bruising on his right hand as he was being booked into the the facility. Doctor was called and he recommended offering the resident ice and to see the nurse in the am.
10. Resident had slight swelling on his left forearm and wrist. Doctor instructed to give him 50mg. of Benadryl and follow-up with the nurse in the am.
11. Resident scraped his wrist on the outside wall. Nurse evaluated the resident and dressed the injury.

-
12. Resident stated he had gotten another resident's spit on his lips and mouth during an argument. Resident's mouth was rinsed out and Dr. advised to follow-up in the am with the nurse.
-
13. Resident hit his left foot on the wall and asked for ice. Doctor instructed to give him ice as needed and to follow- up on Monday with the nurse.
-
14. Resident punched his wall in anger. He was asked if he wanted ice and he said yes. No further medical was needed.
-

JRF MONTHLY REPORT

June 2015

I. POPULATION:

- A. Totals for month: 496
 - Male: 401
 - Female: 95
 - Custody Total Days: 731
 - Average Length of Stay: 22
- B. FURLOUGH
 - Male: 203
 - Female: 4
 - Average Furlough Days: 7
- C. JDAP
 - Male: 26
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 17
- F. Highest Daily Pop: 22
- G. Lowest Daily Pop: 13
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 31

II. DONATIONS:

- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Two separate graduation ceremonies for 5 Residents. Four graduated from High School and one from Eight Grade.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 49 (Some had multiple categories)
- B. Total # of minors 22
- C. # By category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape Attempted	1
5. Furlough Violation	1
6. Information/Documentation	9
7. Injury/Illness*	5
8. Insubordination/Disrespect	0
9. Non-Compliance	6
10. Physical Altercation	0
11. Physical Restraint	6
12. Profanity	1
13. Property/Facility Damage	3
14. Racial/Gang Related	4
15. School	13
16. Suicide/Attempted/Ideation/Statements	2
17. Other	10

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had stomach pains. Seen by nurse & cleared.
2. Resident punched the wall and received a mild contusion. Treated by nurse & cleared.
3. Resident is a diabetic & his blood sugar level was low, resident was given food and beverages to bring his level up.
4. Resident punched her door and bruised her right hand.
5. Resident hurt his hand while playing basketball, he was given ibuprofen and ice.
6. Suicide Ideation: 1. Resident said he might be better off dead. He was counseled by staff.
2. Residents mother was concerned that minor was thinking of suicide. The Mental Health Therapist
was consulted and she requested that staff keep a close eye on him.
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JRF MONTHLY REPORT

June 2016

I. POPULATION:

- A. Totals for month: 501
 - Male: 411
 - Female: 90
 - Custody Total Days: 460
 - (Of those released in June)
 - Average Length of Stay: 15 days
- B. FURLOUGH
 - Male: 148
 - Female: 24
 - Average Furlough Days: 6
- C. JDAP
 - Male: 48
 - Female: 15
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 17
- F. Highest Daily Pop: 22
- G. Lowest Daily Pop: 14
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 35

II. DONATIONS:

- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: One resident graduated from high school.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 58 (Some had multiple categories)
- B. Total # of minors 16
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	23
7. Injury/Illness*	9
8. Insubordination/Disrespect	1
9. Non-Compliance	13
10. Physical Altercation	3
11. Physical Restraint	4
12. Profanity	10
13. Property/Facility Damage	2
14. Racial/Gang Related	3
15. School	2
16. Suicide/Attempted/Ideation/Statements	4
17. Other	7

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident got dehydrated, was seen by the nurse and given a pitcher of water to encourage her to drink water.
2. Resident kicked a football and hurt his toe. He was given bag of ice and cleared by nurse.
3. Resident jammed his finger while playing football. Staff iced his finger and gave him Tylenol, nurse said no other treatment was needed.
4. Resident had a rash over most of her body. She was given Benadryl per doctor's orders.
5. Resident hurt his ankle during exercise. He was given ice and Tylenol. Was seen by the nurse the next day and cleared.
6. Resident had an anxiety attack that did not get better, per doctor's orders he was transported by ambulance to the hospital where he was given a shot of medication to calm him down. He was then transported back to JRF.
7. Resident punched a metal bench; he was given ice and Tylenol per doctor's order.
8. Resident accidentally hit his hand against a table he was given ice for it and seen by the nurse the next day.
9. Resident twisted his ankle while playing basketball.
10. Suicide Ideation: 1. Resident missed her boyfriend and was having thoughts of suicide.
2. Resident was upset and said he had nothing to live for. He was put on suicide
watch until seen by the Mental Health Therapist.
11. Suicide Statements: 1. Resident said she was going to kill herself and then said she was just kidding.
2. Resident was thinking about using a sheet to hang himself, he was placed in a safety gown and a
Safety cell until he could see the Mental Health Therapist.

JRF MONTHLY REPORT

June 2017

I. POPULATION:

- A. Totals for month:
 - Male: 618
 - Female: 130
 - Custody Total Days: 30
 - (Of those released in June)
 - Average Length of Stay: 28 days
- B. FURLOUGH
 - Male: 262
 - Female: 19
 - Average Furlough Days: 9
- C. JDAP
 - Male: 107
 - Female: 30
 - Average JDAP Days: 5
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 25
- F. Highest Daily Pop: 27
- G. Lowest Daily Pop: 22
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 29

- I. DONATIONS: two couches, a bowflex machine, and a banner were donated by Hope City to the Leaders of Tomorrow (The LOT) Program.

- II. JUVENILE HALL PROJECTS & SPECIAL EVENTS: GROW Program site monitoring visit from the Board of State and Community Corrections; Juvenile Justice Coordinating Council tour of the GROW Program; and tour of the JRF and GROW Program with Judge Kennedy, Judge McKee, and Deputy DA Brandon Storment; Court videoconferencing equipment, policy, and procedures were set up.

III. SPECIAL INCIDENT REPORTS:

- A. Total submitted 21 (Some had multiple categories)
- B. Total # of minors 9
- C. # by category:
 - 1. Assault 1
 - 2. Chemical Agent Employed (O.C.) 1
 - 3. Contraband/Smuggled/In-House 0
 - 4. Escape/Attempted Escape 0
 - 5. Furlough Violation 0
 - 6. Information/Documentation 5
 - 7. Injury/Illness* 5
 - 8. Insubordination/Disrespect 0
 - 9. Non-Compliance 9

10. Physical Altercation	3
11. Physical Restraint	5
12. Profanity	6
13. Property/Facility Damage	0
14. Racial/Gang Related	1
15. School	0
16. Suicide/Attempted/Ideation/Statements	1
17. Other	3
18. Threats	6

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident stated he was having chest pains and had thrown up. Dr. advised to transport the resident to the hospital and be evaluated there. Resident stated once he threw up he was feeling much better and did not need to go to the hospital. Dr. agreed and told staff to keep a close eye on him.
2. Resident stated he had been feeling dizzy all day and that his right side of his abdomen was in pain. Dr. advised to give him one tablet of 600mg Ibuprofen and to follow up with the nurse in the am.
3. Resident stated he was coming down off drugs and would not be going to school that morning. The nurse was called to evaluate him and he stated the resident was well enough to attend school.
4. Resident collided while playing basketball and stubbed his finger on the ground. He requested ice for his hand and no further medical attention.
5. Resident punched his wall and his pinky was slightly swollen. Resident requested ice and no further Medical attention was needed.
6. Resident made the statement; "I feel like giving up," but said it would just hurt his family too much. Upon the evaluation by the nurse, it was concluded the resident was trying to manipulate staff. However, resident was referred to the mental health counselor for CFMG.

JRF MONTHLY REPORT

March 2015

I. POPULATION:

- A. Totals for month: 636
 - Male: 518
 - Female: 118
 - Custody Total Days: 595
 - Average Length of Stay: 14 days
- B. FURLOUGH
 - Male: 161
 - Female: 49
 - Average Furlough Days: 7
- C. JDAP
 - Male: 43
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 25
- G. Lowest Daily Pop: 16
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 42

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: High School Graduation

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 54 (Some had multiple categories)
- B. Total # of minors 31
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	5
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	9
7. Injury/Illness*	6
8. Insubordination/Disrespect	0
9. Non-Compliance	5
10. Physical Altercation	4
11. Physical Restraint	1
12. Profanity	3
13. Property/Facility Damage	2
14. Racial/Gang Related	2
15. School	22
16. Suicide/Attempted/Ideation/Statements	1
17. Other	10

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident jammed his finger while playing basketball.
2. Resident carved the number 22 in his shoulder with his finger nail, was seen by nurse and cleared.
3. Resident hurt his knee while during exercising, was seen by nurse and cleared.
4. Resident had stomach pain, was seen by nurse and cleared.
5. Resident punched her wall and hurt her hand, was given an ice bag & ibuprofen.
6. Resident was taken to the Emergency Room for a cyst on her ovary. She was seen by Emergency Room Staff and released back to Juvenile Hall.
7. 1 Suicide Ideation – Resident said he had suicide thoughts but had zero intentions of following through. He was seen by the Mental Health Counselor.
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JRF MONTHLY REPORT

March 2016

I. POPULATION:

- A. Totals for month: 448
 - Male: 311
 - Female: 137
 - Custody Total Days: 410
 - (Of those released in March)
 - Average Length of Stay: 11 days
- B. FURLOUGH
 - Male: 171
 - Female: 2
 - Average Furlough Days: 6
- C. JDAP
 - Male: 61
 - Female: 27
 - Average JDAP Days: 3
- D. HEC
 - Male: 0
 - Female: 10
 - Average HEC Days: 0 days
- E. Average Daily Pop: 14
- F. Highest Daily Pop: 19
- G. Lowest Daily Pop: 11
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 37

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 25 (Some had multiple categories)
- B. Total # of minors 12
- C. # by category:

1. Assault	4
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	7
7. Injury/Illness*	2
8. Insubordination/Disrespect	0
9. Non-Compliance	13
10. Physical Altercation	2
11. Physical Restraint	3
12. Profanity	2
13. Property/Facility Damage	1
14. Racial/Gang Related	3
15. School	3
16. Suicide/Attempted/Ideation/Statements	3
17. Other	7

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident hurt his ankle while playing basketball; he was seen by nurse and put on light activities.
2. Resident punched her wall and hurt her knuckles, she was given ice. The next day she was seen by the nurse and cleared.
3. Suicide Statements: 1. Resident said he was suicidal; he was seen by the nurse and cleared.
2. Resident said he was going to kill himself; he was evaluated by nurse and cleared. 3. Resident said
he wanted to kill himself, the nurse put him on suicide watch the next two hours in booking and then
cleared him to go back to his room.
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JRF MONTHLY REPORT

March 2017

I. POPULATION:

- A. Totals for month:
 - Male: 629
 - Female: 78
 - Custody Total Days:
(Of those released in March)
 - Average Length of Stay: 17 days
- B. FURLOUGH
 - Male: 188
 - Female: 52
 - Average Furlough Days: 8
- C. JDAP
 - Male: 97
 - Female: 21
 - Average JDAP Days: 4
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 23
- F. Highest Daily Pop: 28
- G. Lowest Daily Pop: 19
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 26

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 38 (Some had multiple categories)
- B. Total # of minors 13
- C. # by category:
 - 1. Assault 2
 - 2. Chemical Agent Employed (O.C.) 1
 - 3. Contraband/Smuggled/In-House 0
 - 4. Escape/Attempted Escape 0
 - 5. Furlough Violation 0
 - 6. Information/Documentation 18
 - 7. Injury/Illness* 13
 - 8. Insubordination/Disrespect 0
 - 9. Non-Compliance 5
 - 10. Physical Altercation 1
 - 11. Physical Restraint 3
 - 12. Profanity 3
 - 13. Property/Facility Damage 0
 - 14. Racial/Gang Related 1
 - 15. School 0
 - 16. Suicide/Attempted/Ideation/Statements 2
 - 17. Other 1
 - 18. Soft Hands 0
 - 19. Threats 1

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident had swelling around 3rd knuckle on his middle finger. Nurse directed staff to provide ice and utilize it for a full 20 minutes.
2. Resident cut his ring finger while pushing the laundry cart. He declined offer to see nurse but was given an alcohol wipe and Band-Aid.
3. Resident was seen crouching over toilet during a room check, upon the next room check he was laying on the floor next to his toilet, officer asked if he was okay. He stated, "Yes, I was just coughing too hard."
4. Resident was issued a Band-Aid for a finger nail that was loose due to pre-existing, documented injury.
5. Resident sprained right thumb while playing basketball. Officer issued him a bag of soapy ice and non-aspirin
6. Resident complained that his left eye was hurting. When asked if he knew what might have happened he said was sprayed in it he said, he got deodorant spray in it. He washed out his eye per staff direction. The next day, his eye was still bothering him and he said he had been sprayed in the eye with "All Purpose Cleaner." Nurse was immediately called and performed a purified water eye wash.
7. Resident was on outside chasing a ball when he the left side of his head on the wall. He has minor bleeding for approximately 3 minutes. Nurse checked him out, gave him ice and Tylenol.
8. Resident hurt right hand while punching his door. He stated his middle finger hurt so he was given ice to prevent further swelling and 325mg acetaminophen.
9. Resident hurt his ankle while playing basketball. He declined any medical attention
10. Resident smashed finger in door. Nurse gave him an ice pack to prevent swelling.
11. Resident hit foot on stool, had minor swelling on the pinky toe. He was provided ice.
12. Resident stated she was having chest pains. She was not pale but the nurse was called to come evaluate. Vitals were good and the nurse placed her on restricted activity until the morning.
13. Resident stated her ankle hurt and she needed ice. She declined to see the nurse.
14. Resident made a statement in a note that she wanted to cut herself again. Then said she didn't mean it. It was just a statement.
15. Resident was angry after being outside and made a comment that he "hated his life and wanted to kill himself." He was evaluated and seen by the nurse and his clinician in the transition room. He was later cleared to return to his pod.

JRF MONTHLY REPORT

March 2018

I. POPULATION:

- A. Totals for month: 522
 - Male: 478
 - Female: 44
 - Custody Total Days: 31
 - (Of those released in March
 - Average Length of Stay: 59 days
- B. FURLOUGH
 - Male: 167
 - Female: 0
 - Average Number of Youth on Furlough: 5
- C. JDAP
 - Male: 109
 - Female: 0
 - Average Number of Youth on JDAP: 4
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 17
- He F. Highest Daily Pop: 23
- G. Lowest Daily Pop: 14
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 9

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

III. DONATIONS

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 9 (Some had multiple categories)
- B. Total # of minors 9
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	4
7. Injury/Illness*	4
8. Insubordination/Disrespect	0
9. Non-Compliance	3
10. Physical Altercation	0
11. Physical Restraint	3
12. Profanity	2
13. Property/Facility Damage	0
14. Racial/Gang Related	0
15. School	0
16. Suicide/Attempted/Ideation/Statements	2
17. Other/ Soft Hands	1

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident stated "I think I broke my finger." He had been punching his mattress and missed, punching the wall instead. Staff confirmed knuckles on right hand were a little swollen and red. On call Dr. was called; directions were given to provide bag of ice, 600 mg of Ibuprofen and have nurse check it next day.

2. Resident stated he thinks he broke his pinky finger after punching wall. Staff confirmed apparent swelling in area around pinky finger knuckle. On call Dr. instructed staff to provide ice and packet of Tylenol until nurse could check it next morning.

3. Resident punched wall and thinks he broke his hand. Staff observed swelling and/or bruising around knuckle on middle finger. Ice was requested and was provided, referred to nurse for follow up the next morning.

4. Resident punched wall after receiving citation. Staff observed apparent swelling and/or bruising around knuckles. On call Dr. instructed to administer 600 mg ibuprofen twice daily and ice if needed, and x-ray to be taken in the morning.

5. Suicide Ideation- Staff observed resident had tied pillowcase around neck and was tightening it. However, he immediately removed the pillowcase and threw it onto the other bunk in his room. Staff notified OIC re: same while maintaining direct visual supervision of youth. Youth had no visible injuries on his neck, nor did he complain of pain. On call Dr. was notified, he instructed staff to place resident in transition cell with safety gown and safety bedding, put on 15-- minute watch tours until he was able to speak with the mental health clinician who would arrive in the morning. *Please note: the transition room has floor to ceiling windows and per JRF policy staff maintain direct visual supervision of youth when they are on suicide watch.

6. Resident's mental health clinician reported to facility director that resident made suicidal statements during their counseling session and told her he tried to strangle himself the previous night with his blanket in his room. He said he wanted to kill himself because he would go to a "better place" On call Dr. instructed resident be placed in safety gown in the transition room and placed on 15- minute room checks. *Please note the transition room has floor to ceiling windows and per JRF policy, staff maintain direct visual supervision of youth when they are on suicide watch.

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JRF MONTHLY REPORT

May 2015

I. POPULATION:

- A. Totals for month: 638
 - Male: 577
 - Female: 61
 - Custody Total Days: 743
 - Average Length of Stay: 18 days
- B. FURLOUGH
 - Male: 191
 - Female: 54
 - Average Furlough Days: 8
- C. JDAP
 - Male: 41
 - Female: 20
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 23
- G. Lowest Daily Pop: 17
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 40

II. DONATIONS: Four sport balls donated by Claudia Waite from Cross Fit.

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 47 (Some had multiple categories)
- B. Total # of minors 22
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	3
3. Contraband/Smuggled/In-House	5
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	9
7. Injury/Illness*	5
8. Insubordination/Disrespect	1
9. Non-Compliance	17
10. Physical Altercation	2
11. Physical Restraint	7
12. Profanity	6
13. Property/Facility Damage	3
14. Racial/Gang Related	1
15. School	5
16. Suicide/Attempted/Ideation/Statements	0
17. Other	3

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Minor punched wall and bruised her fist.

 2. Resident stuck her finger under her door and stood up without removing her finger. She was seen by Nurse and cleared.

 3. Resident hurt his hand when he punched a wall.

 4. Resident was diabetic & his blood sugar level was low.

 5. Resident tripped and fell while catching a football and hurt his chest. He was seen by nurse and cleared.

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JRF MONTHLY REPORT

May 2016

I. POPULATION:

- A. Totals for month: 396
 - Male: 309
 - Female: 87
 - Custody Total Days: 153
 - (Of those released in May)
 - Average Length of Stay: 7 days
- B. FURLOUGH
 - Male: 137
 - Female: 48
 - Average Furlough Days: 6
- C. JDAP
 - Male: 45
 - Female: 0
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 3
 - Average HEC Days: 0 days
- E. Average Daily Pop: 13
- F. Highest Daily Pop: 18
- G. Lowest Daily Pop: 8
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 23

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 45 (Some had multiple categories)
- B. Total # of minors 14
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	15
7. Injury/Illness*	8
8. Insubordination/Disrespect	1
9. Non-Compliance	15
10. Physical Altercation	1
11. Physical Restraint	8
12. Profanity	11
13. Property/Facility Damage	4
14. Racial/Gang Related	3
15. School	2
16. Suicide/Attempted/Ideation/Statements	3
17. Other	7

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident punched wall and was referred to the nurse and cleared.
2. Resident punched wall, doctor was called and resident was given ice pack.
3. Resident hit wall with his fist, he was seen and cleared by nurse.
4. Resident slipped and fell on his back while playing basketball. He was seen by the nurse and returned to school.
5. Resident kicked and punched his wall and hurt his hand. The nurse examined his hand and found no fracture.
6. Resident punched his wall; nurse examined it and cleared him.
7. Resident hurt his ankle while playing basketball. He was seen by nurse who wrapped it with an ace bandage.
8. Resident punched and hit his head against his door several times. He was assessed by the nurse and cleared to go to school.
9. Suicide Ideation: 1. Resident drew pictures and wrote a poem depicting suicide.
10. Suicide Statements: 1. Resident made a suicide statement and was counseled by staff.
2. Resident was stating he was going to kill himself. He was evaluated by the nurse, placed in a safety gown and placed on suicide watch.
11.

JRF MONTHLY REPORT

May 2017

- I. POPULATION:
- A. Totals for month:
 - Male: 678
 - Female: 194
 - Custody Total Days: 31
 - (Of those released in May)
 - Average Length of Stay: 20 days
 - B. FURLOUGH
 - Male: 244
 - Female: 20
 - Average Furlough Days: 9
 - C. JDAP
 - Male: 102
 - Female: 21
 - Average JDAP Days: 4
 - D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
 - E. Average Daily Pop: 28
 - F. Highest Daily Pop: 30
 - G. Lowest Daily Pop: 23
 - H. # of days over capacity: 0
 - I. # of days at/under capacity: 31
 - J. Bookings: 38
- II. DONATIONS: Complete Harry Potter hardback series donated by Cody Lunsford
- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:
- IV. SPECIAL INCIDENT REPORTS:
- A. Total submitted 41 (Some had multiple categories)
 - B. Total # of minors 15
 - C. # by category:

1. Assault	2
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	4
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	17
7. Injury/Illness*	13
8. Insubordination/Disrespect	0
9. Non-Compliance	8
10. Physical Altercation	2
11. Physical Restraint	1
12. Profanity	3
13. Property/Facility Damage	1
14. Racial/Gang Related	0
15. School	1
16. Suicide/Attempted/Ideation/Statements	2
17. Other	5
18. Soft Hands	0
19. Threats	6
- *Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident's hand was swollen after playing basketball and they were issued ice.
2. Resident was given stitches the day prior to being booked. His upper lip was swollen and he was given ice and Dr. advised to give Cephalexin twice daily.
3. Residents chest hurt while playing outside, when he came back to his room he was convulsing and vomited. Dr. advised to have our in-house medical provider evaluate him, he was advised we do not have one so he advised to call 911 and have the resident evaluated at the hospital. Resident was taken to the E.R. Resident returned from E.R with no further incident. It appears the problem was related to anxiety. JRF nurse educated resident on breathing techniques.
4. Resident landed wrong on his ankle while playing basketball, he was given soapy ice and rested it.
5. Resident landed wrong on his ankle while playing basketball, he was given soapy ice and rested it.
(Different incident then above)
6. Residents leg felt stiff while playing basketball. He was advised to stay hydrated and given non-aspirin and refused and other medical treatment.
7. Resident hurt his right quadriceps while playing flag football. He was given stretches to help out.
8. Resident cut their hand while playing basketball. The cut was washed out with soap and water and a Band-Aid was placed over it.
9. Residents left pinky was swollen. He was given 400 Milligrams of Ibuprofen.
10. Resident was treated for head lice.
11. Resident hurt his ankle while playing basketball and was given ice and Tylenol.
12. Resident passed out while being examined by the nurse. She fell forward and hit her head. Nurse Robert propped her back up with help and he then gave her ice for her head and water while continuing to monitor her.
13. Resident punched a wall and asked for ice but declined any further medical attention.

JRF MONTHLY REPORT

November 2015

I. POPULATION:

- A. Totals for month:
 - Male: 417
 - Female: 78
 - Custody Total Days: 625
 - (Of those released in November)
 - Average Length of Stay: 21 days
- B. FURLOUGH
 - Male: 295
 - Female: 51
 - Average Furlough Days: 12
- C. JDAP
 - Male: 0
 - Female: 18
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 17
- F. Highest Daily Pop: 22
- G. Lowest Daily Pop: 9
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 32

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 49 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:

1. Assault	5
2. Chemical Agent Employed (O.C.)	1
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	11
7. Injury/Illness*	6
8. Insubordination/Disrespect	0
9. Non-Compliance	15
10. Physical Altercation	3
11. Physical Restraint	9
12. Profanity	5
13. Property/Facility Damage	1
14. Racial/Gang Related	2
15. School	5
16. Suicide/Attempted/Ideation/Statements	2
17. Other	8

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident tripped and fell, he hit his head. He was accessed by the nurse and cleared.
2. Resident hurt his knee while doing large muscle exercise, doctor recommended ibuprofen and follow up with nurse the next day.
3. Resident had an eye that was red and swollen, doctor prescribed an antibiotic.
4. Resident had an infection was given antibiotics by nurse.
5. While playing basketball two residents collided, one hurt his foot and the other scraped his elbow. The elbow was treated by the nurse. The resident with the injured foot was transported to the ER where they x-rayed the foot. It was not broken but he was given a boot to wear until the pain resolved.
6. Resident ran into the fence while playing basketball and cut his finger. He was given a band aide and seen by the nurse the next day.
7.
8. Suicide Ideation: 1. Resident was booked from another county where he had been on suicide watch. He told staff he was glad to be back in Shasta County and no longer had suicide thoughts.
2. Resident became upset after talking to his PO, He said, "I'm just going to off myself". He was counseled by staff and gave a commitment that he was not going to do anything.
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JRF MONTHLY REPORT

November 2016

I. POPULATION:

- A. Totals for month: 598
 - Male: 479
 - Female: 119
 - Custody Total Days: 688
 - (Of those released in November 20)
 - Average Length of Stay: 3 days
- B. FURLOUGH
 - Male: 245
 - Female: 13
 - Average Furlough Days: 9
- C. JDAP
 - Male: 55
 - Female: 0
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 20
- F. Highest Daily Pop: 23
- G. Lowest Daily Pop: 18
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 20

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 52 (Some had multiple categories)
- B. Total # of minors 23
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	19
7. Injury/Illness*	21
8. Insubordination/Disrespect	3
9. Non-Compliance	5
10. Physical Altercation	0
11. Physical Restraint	1
12. Profanity	9
13. Property/Facility Damage	2
14. Racial/Gang Related	0
15. School	1
16. Suicide/Attempted/Ideation/Statements	3
17. Other	6
18. Soft Hands	0
19. Threats	4

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident twisted his ankle playing basketball.
2. Resident said he was having chest pains; he was checked by the nurse and cleared.
3. Resident hurt his wrist while on furlough.
4. Resident hurt his ankle while playing basketball. He was seen by the nurse and given Tylenol and ice.
5. Resident hurt his elbow playing basketball. He was given ice and Ibuprofen.
6. Resident was hearing voices. He was seen by Mental Health.
7. Resident hurt his left ankle while trying to Michael Jordan. Nurse prescribed Ibuprofen.
8. Resident was having chest pains. Doctor prescribed Ibuprofen and Benadryl.
9. Resident would chock himself to make himself pass out. He was counseled by the nurse.
10. Resident hurt his finger while playing catch. He was seen by the nurse and cleared.
11. Resident twisted his right ankle while playing basketball. He was given ice, Ibuprofen and the ankle was wrapped.
12. Resident had red bumps around her mouth. She was seen by the nurse and cleared.
13. Resident punched the wall. He was seen by the nurse the next day and cleared.
14. Resident hurt his ankle while playing basketball. Nurse gave him Ibuprofen and restricted activity.
15. Resident had a rash on her thigh. The nurse prescribed Benadryl.
16. Resident reinjured his ankle on the rec yard. He was given ice and Tylenol
17. Resident hurt his ankle jumping up for a basketball. The Nurse gave him Ibuprofen.
18. Resident hurt his hand when he punched the wall. He received a few abrasions on his hand.
19. Resident passed out after vomiting and fell on his shoulder. Resident was given a sling per doctors orders and resident refused to wear it.
20. Resident complained of an ear ache. She was put on antibiotics.
21. Resident had abdominal pain; she was checked by the nurse and given Tylenol.
22. Suicide Statements: 1. Resident stated he wanted to die. He was counseled by the nurse.
2. Resident told his mother that he wanted to kill himself after receiving bad news. He was counseled
By staff and seen by Mental Health Therapist. 3. Resident was saying she was going to harm herself.
She was counseled by the staff and nurse.

JRF MONTHLY REPORT

November 2017

I. POPULATION:

- A. Totals for month:
 - Male: 564
 - Female: 53
 - Custody Total Days: 30
 - (Of those released in November)
 - Average Length of Stay: 36 days
- B. FURLOUGH
 - Male: 180
 - Female: 1
 - Average Furlough Pop: 6
- C. JDAP
 - Male: 24
 - Female: 0
 - Average JDAP Pop: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 27
- G. Lowest Daily Pop: 17
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 19

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 19 (Some had multiple categories)
- B. Total # of minors 6
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	5
7. Injury/Illness*	6
8. Insubordination/Disrespect	0
9. Non-Compliance	3
10. Physical Altercation	0
11. Physical Restraint	1
12. Profanity	2
13. Property/Facility Damage	2
14. Racial/Gang Related	0
15. School	0
16. Suicide/Attempted/Ideation/Statements	0
17. Other	2

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident hurt his finger while outside and requested ice and no other medical attention.
2. Resident hurt his finger while playing basketball. He was given ice and said it felt much better.
3. Resident fell and scraped his elbow and wrist. Officers cleaned up the areas and gave him Band-Aids.
Resident stated he wanted no more medical attention.
4. Resident fell on his knee while playing basketball. He was given ice and followed up with the nurse in
the morning.
5. Resident was angry and punched her wall with both fists. Both hands were red and swollen. The on-call
doctor instructed officers to provide ice as needed, 400mg. Ibuprofen, and to follow up with the
nurse in the am.
6. Resident fell playing basketball and cut his head. The on-call doctor advised officers to take the
resident to the emergency room. The resident was evaluated at the hospital and was found to not
have a concussion. He had a small bump and scab on the back of his head but no other symptoms.
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JRF MONTHLY REPORT

October 2015

I. POPULATION:

- A. Totals for month:
 - Male: 346
 - Female: 75
 - Custody Total Days: 507
 - (Of those released in October)
 - Average Length of Stay: 22 days
- B. FURLOUGH
 - Male: 176
 - Female: 32
 - Average Furlough Days: 7
- C. JDAP
 - Male: 0
 - Female: 15
 - Average JDAP Days: 1
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 14
- F. Highest Daily Pop: 16
- G. Lowest Daily Pop: 11
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 25

II. DONATIONS:

- III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Graduation ceremony for one resident.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 60 (Some had multiple categories)
- B. Total # of minors 12
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	2
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	16
7. Injury/Illness*	11
8. Insubordination/Disrespect	0
9. Non-Compliance	14
10. Physical Altercation	0
11. Physical Restraint	7
12. Profanity	5
13. Property/Facility Damage	4
14. Racial/Gang Related	1
15. School	10
16. Suicide/Attempted/Ideation/Statements	2
17. Other	10

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident fell out of her chair during school and hit her head. She was assessed by the nurse and cleared.
2. Resident was standing on her sink, fell and hit her head. She was evaluated by the nurse and cleared.
3. While playing basketball a resident fell and scraped skin off of his elbow.
4. While doing large muscle exercise a resident fell and scraped his knee.
5. Resident hurt her knee while doing squats, ice was applied.
6. Resident punched his mirror, was seen by nurse and cleared.
7. Resident injured her hand while playing basketball, she was seen by nurse and cleared.
8. Resident was booked into JRF after being released from the hospital. He had been in an accident and was put on restricted activity due to his injuries.
9. Resident twisted his ankle and was taken to the emergency room. The ankle was x-rayed and he was given crutches and a boot to protect his ankle.
10. Resident hurt his finger during Cross Fit.
11. Resident scraped his knee during Cross Fit.
12. Suicide Ideation: 1. Resident said he was going to slit his wrist with a pencil. He was seen by the Mental Health Therapist. 2. Resident said if he had enough money he would buy enough drugs to kill himself. He was counseled by the nurse and staff.

JRF MONTHLY REPORT

October 2016

I. POPULATION:

- A. Totals for month: 638
 - Male: 532
 - Female: 106
 - Custody Total Days: 560
 - (Of those released in October 24)
 - Average Length of Stay: 23 days
- B. FURLOUGH
 - Male: 248
 - Female: 4
 - Average Furlough Days: 8
- C. JDAP
 - Male: 103
 - Female: 25
 - Average JDAP Days: 4
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 21
- F. Highest Daily Pop: 24
- G. Lowest Daily Pop: 17
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 25

II. DONATIONS: Eight DVD's & one football donated by Jack Thomas, Sr.

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: One resident graduated High School

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 54 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:

1. Assault	2
2. Chemical Agent Employed (O.C.)	2
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	16
7. Injury/Illness*	12
8. Insubordination/Disrespect	0
9. Non-Compliance	14
10. Physical Altercation	1
11. Physical Restraint	8
12. Profanity	5
13. Property/Facility Damage	0
14. Racial/Gang Related	2
15. School	2
16. Suicide/Attempted/Ideation/Statements	4
17. Other	11
18. Threats	2

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident twisted his ankle playing basketball. The doctor prescribed ibuprofen and ice.
2. Resident slipped and fell in his room. He denied needing medical attention.
3. Resident jammed her finger playing basketball. The doctor was called and he asked that the finger be buddy wrapped to the next finger and resident given ibuprofen.
4. A pregnant resident found blood when she used the restroom. The nurse called Mercy Maternity and made an appointment for her.
5. Resident intentionally hit his head on the counter and received redness and a slight swelling on his forehead.
6. Resident who is pregnant fell and hurt her knee. The doctor was called and he prescribed ice and Tylenol and asked staff to keep a close eye on her.
7. Resident punched a wall, the nurse provided ice and Ibuprofen.
8. Resident punched his mirror and cut his hand. It was cleansed and bandaged, the medical provider was called and he was seen by the nurse the next day.
9. Resident complained of a knot on his finger hurting. He was seen by the nurse who said it was a small cyst.
10. Residents hand got infected and he had to go to the hospital to have it drained and intravenous antibiotics.
11. Resident fainted, she was seen by the nurse and he thought it could have been an anxiety attack.
12. Suicide Statements: 1. Resident was making suicide statements he was counseled by staff.
2. Resident said he wanted to hurt himself; he was counseled by staff and seen by Mental Health.
3. Resident said if he didn't get to move to another pod he would start cutting on his arm or jump off of his sink onto his head. He was seen by Mental Health and cleared 4. Resident stated he wanted to kill himself. He was counseled by staff and see by Mental Health and cleared.

JRF MONTHLY REPORT

October 2017

I. POPULATION:

- A. Totals for month:
 - Male: 618
 - Female: 129
 - Custody Total Days: 31
 - (Of those released in Oct.)
 - Average Length of Stay: 14 days
- B. FURLOUGH
 - Male: 194
 - Female: 7
 - Average Furlough Pop: 6
- C. JDAP
 - Male: 29
 - Female: 0
 - Average JDAP Pop: 29
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 24
- F. Highest Daily Pop: 27
- G. Lowest Daily Pop: 22
- H. # of days over capacity: 0
- I. # of days at/under capacity: 31
- J. Bookings: 28

II. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 31 (Some had multiple categories)
- B. Total # of minors 9
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	9
7. Injury/Illness*	6
8. Insubordination/Disrespect	1
9. Non-Compliance	9
10. Physical Altercation	3
11. Physical Restraint	2
12. Profanity	1
13. Property/Facility Damage	1
14. Racial/Gang Related	0
15. School	0
16. Suicide/Attempted/Ideation/Statements	0
17. Other	3

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident asked for ice because her hand was sore from punching her wall.
2. Resident hurt her foot while playing basketball. When asked if she wanted to see the nurse she stated she would wait until Monday to see him. She was given an icepack and Tylenol.
3. Resident hurt his ankle while playing basketball. He refused and medical treatment and continued playing the game.
4. Resident had an ingrown toenail that was bothering him. The on- call doctor was called and he placed the resident on bed rest and 600 mg of Ibuprofen twice a day.
5. Resident had minor blood in his stool. The on-call doctor was called and advised to the resident to see the nurse in the morning.
6. Resident was angry and punched his door. He was given 325 mg of acetaminophen along with a bag of ice and was told to see the nurse in the morning.
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JRF MONTHLY REPORT

September 2015

I. POPULATION:

- A. Totals for month: 438
 - Male: 344
 - Female: 94
 - Custody Total Days: 306
 - (Of those released in September)
 - Average Length of Stay: 9 days
- B. FURLOUGH
 - Male: 192
 - Female: 11
 - Average Furlough Days: 7
- C. JDAP
 - Male: 9
 - Female: 0
 - Average JDAP Days: 0
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 15
- F. Highest Daily Pop: 20
- G. Lowest Daily Pop: 11
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 39

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 40 (Some had multiple categories)
- B. Total # of minors 16
- C. # by category:

1. Assault	1
2. Chemical Agent Employed (O.C.)	5
3. Contraband/Smuggled/In-House	0
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	13
7. Injury/Illness*	9
8. Insubordination/Disrespect	0
9. Non-Compliance	11
10. Physical Altercation	2
11. Physical Restraint	6
12. Profanity	9
13. Property/Facility Damage	1
14. Racial/Gang Related	1
15. School	3
16. Suicide/Attempted/Ideation/Statements	2
17. Other	4

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident pulled the smoke detector down and cut his hand. Wound was cleaned and bandaged by staff.

2. Resident stabbed himself in the hand with a pencil. Seen by nurse and cleared.

3. Resident had a small cut to his hand after a fight.

4. Resident hit her head on the wall when she sat down on her bed. She was taken to the emergency room for evaluation and released.

5. Resident hit teacher's desk and hurt his hand. His hand was x-rayed & was not broken.

6. Resident punched his wall and hurt his hand. He was seen by the nurse and cleared.

7. Resident lost a filling while eating dinner.

8. Resident hurt his finger while playing basketball, was given ice and ibuprofen.

9. Resident punched her wall and received bruising on her right hand. She was seen by nurse and cleared.

10. Suicide Ideation: 1. Resident was making comments wishing he was dead. He was counseled by staff. 2. Resident wrote a letter about thinking of suicide. He was seen by the Mental Health Therapist.

11.

JRF MONTHLY REPORT

Sept 2017

I. POPULATION:

- A. Totals for month:
 - Male: 540
 - Female: 114
 - Custody Total Days: 30
 - (Of those released in Sept)
 - Average Length of Stay: 11 days
- B. FURLOUGH
 - Male: 127
 - Female: 0
 - Average Furlough Pop: 4
- C. JDAP
 - Male: 0
 - Female: 0
 - Average JDAP Pop: 0
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop:
- F. Highest Daily Pop: 25
- G. Lowest Daily Pop: 18
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 32

II. DONATIONS:

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS:

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 22 (Some had multiple categories)
- B. Total # of minors 8
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	1
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	8
7. Injury/Illness*	3
8. Insubordination/Disrespect	0
9. Non-Compliance	6
10. Physical Altercation	2
11. Physical Restraint	2
12. Profanity	2
13. Property/Facility Damage	1
14. Racial/Gang Related	3
15. School	0
16. Suicide/Attempted/Ideation/Statements	1
17. Other	1

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident rolled his ankle playing basketball. The on-call doctor was notified and advised staff to give the resident 400mg of Ibuprofen.
2. Resident fell on his wrist while playing basketball. The nurse came to assess him and he was given ice.
3. Resident made a statement that he wanted to hurt himself. The nurse was called to assess him and the resident gave believable commitment that he was not going to hurt himself.
4. Resident left a visit with his mother angry and punched the wall with both fists, when asked was he was ok the resident stated he was fine but some Tylenol would be good. The doctor was called and advised it was ok to give the resident Tylenol.
5. Resident fell during Physical Education and scraped his knee. He refused any medical attention, however staff helped clean the scrape and resident was given a Band-Aid.
6.
7.
8.
9.
10.
11.

JRF MONTHLY REPORT

September 2016

I. POPULATION:

- A. Totals for month: 663
 - Male: 580
 - Female: 83
 - Custody Total Days: 535
 - (Of those released in September)
 - Average Length of Stay: 19 days
- B. FURLOUGH
 - Male: 297
 - Female: 48
 - Average Furlough Days: 12
- C. JDAP
 - Male: 41
 - Female: 30
 - Average JDAP Days: 2
- D. HEC
 - Male: 0
 - Female: 0
 - Average HEC Days: 0 days
- E. Average Daily Pop: 22
- F. Highest Daily Pop: 25
- G. Lowest Daily Pop: 20
- H. # of days over capacity: 0
- I. # of days at/under capacity: 30
- J. Bookings: 23

II. DONATIONS: Stationary donated by Rebecca Baron

III. JUVENILE HALL PROJECTS & SPECIAL EVENTS: Two High School graduations with a total of 4 residents graduating.

IV. SPECIAL INCIDENT REPORTS:

- A. Total submitted 45 (Some had multiple categories)
- B. Total # of minors 21
- C. # by category:

1. Assault	0
2. Chemical Agent Employed (O.C.)	0
3. Contraband/Smuggled/In-House	4
4. Escape/Attempted Escape	0
5. Furlough Violation	0
6. Information/Documentation	18
7. Injury/Illness*	9
8. Insubordination/Disrespect	0
9. Non-Compliance	5
10. Physical Altercation	1
11. Physical Restraint	5
12. Profanity	4
13. Property/Facility Damage	1
14. Racial/Gang Related	4
15. School	0
16. Suicide/Attempted/Ideation/Statements	0
17. Other	5
18. Soft Hands	2

*Explanation of injuries continued on next page

Explanation of Injuries/Illness & Suicide/Attempted/Ideation/Statements

1. Resident bumped into another resident while playing basketball and bit his tongue.
2. Resident hurt his toe while playing basketball. He was given ice to place on it.
3. Resident had a sore on his chest. He was seen by nurse.
4. Resident punched one of the padded pillars on the rec yard. He was seen by the nurse and cleared.
5. Resident bit his own thumb and made it bleed.
6. Resident ran into another resident while playing basketball and hit his mouth on the other residents shoulder. He required two stitches.
7. Resident hit her leg on the couch. She refused medical treatment.
8. Resident hurt his foot while playing basketball. He was seen by the nurse and cleared.
9. Resident hit his head while playing basketball and complained of dizziness. He was cleared by the nurse.
10.
11.

OC Spray to be Issued to Staff

8 76 7 9/21/17
12 14 15

1.8oz. Vexor (for PO use)

4oz. Fox (for JDO use)

If a can is removed from this box please indicate the date it was removed, change the number above and write your name.

Date: Description Name:

7/5/17	Vexor (small can)	Jesse Thompson
Added 8/17/17	Fox Spray (2)	Added by BPO Fry (used cans)
Issued 9/8/17	Vexor small can	Dr. Speltz
Added 9/21/17	Vexor	Return 7/5

5 can 574 3 can Vexor

Shasta County Probation OC Master Inventory

Sheet No.	1	Date	7/4/17
Performed By	Natalie Jacobs	Department	JRF

[illegible]

Signature

Natalia

Ed Miller

From: service@paypal.com
Sent: Friday, December 26, 2014 2:49 PM
To: Ed Miller
Subject: Your payment to Samuel Breaux



You sent a payment of \$371.20 USD to Samuel Breaux.

Dec 26, 2014 14:48:22 PST
Receipt No:0530-3894-5651-1084

Hello Edward Miller,

This charge will appear on your credit card statement as payment to PAYPAL *SAMBREAUX.

Save time with a PayPal account

Create a PayPal account and save your payment information. You won't need to enter your payment information every time you shop online.

Shop with confidence

We keep your financial information secure.

Transactions monitored 24/7

Our fraud specialists help protect your account.

You're protected

Zero fraud liability for eligible unauthorized purchases. [See eligibility](#)

Merchant information:
Samuel Breaux
sambreaux@bellsouth.net

Instructions to merchant:
None provided

Shipping information
Edward Miller
2684 Radio Lane
Redding, CA 96001
United States

Shipping method
Not specified

Description	Unit price	Qty	Amount
FOX LABS - SUDECON DECONTAMINATION WIPES	\$1.22 USD	10	\$12.20 USD
FOX LABS PEPPER SPRAY - MARK 5 FLIP TOP CAP Select Spray Pattern: Stream Pattern (FX-42FTS)	\$17.95 USD	20	\$359.00 USD
Subtotal:			\$371.20 USD
Discount:			-\$0.00 USD
Total:			\$371.20 USD

Receipt No: 0530-3894-5651-1084

Please keep this receipt number for future reference. You'll need it if you contact customer service at Samuel Breaux or PayPal.



1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com

Regular



ORDER NO: 9848680-1

3008398794

VICKI FRY
2684 RADIO LANE
REDDING CA 96001

Pkt Ctrl Nbr
3008398794

VICKI FRY
2684 RADIO LANE
REDDING CA 96001

Received

EXPORT RESTRICTIONS:

This transaction may contain commodities restricted by the United States International Trade Regulations. If, at a later date, you, your business or agency decide these commodities will be exported from the United States, then please reference the United States Department of Commerce Bureau of Industry and Security Export Administration Regulations (15CFR 730 - 774), the United States Department of State International Traffic in Arms Regulations (22 CFR 120-130), as well as any other applicable laws. These laws apply to private, commercial and government agency export transactions. As an exporter, you, your business or agency, will be responsible for compliance with all U.S. laws relating to the export of these items.

WFL	QTY	ITEM NO.	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
01SC27BB04	25.00	SD147	SABRE RED CROSSFIRE SPRAY MK3	14.99	374.75
01SC24CC04	15.00	SD250	SABRE CROSSFIRE PEPPER GEL MK 4	16.99	254.85

268400 - 035700

SEE REVERSE SIDE FOR PRE-AUTHORIZED RETURN FORM

01F01213ASD

Galls
1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com
galls.com/pages/returns

1 OF 1 PAGES

Net Product \$	629.60
Tax	45.65
P & H	31.48
Total Shipment \$	706.73
	706.73

Cust. Phone#:

01/25/2018

01/25/2018 15:11:38 1801259806 LEX

VICKI FRY

REDDING CA 96001

Order: 9848680-1

PO #: VICKI FRY

SHASTA000624-1

Pepper Spray/JRF staff

Laurie Sutherland

From: Jennifer Morgan
Sent: Friday, July 17, 2015 12:56 PM
To: Laurie Sutherland
Subject: FW: Your CopsPlus Receipt

26200-035700 573.00

26200-035700 42.98

00961-007400 <42.98>

- Use tax payable

From: customerservice@copsplus.com [customerservice@copsplus.com]
Sent: Tuesday, June 30, 2015 8:18 AM
To: Jennifer Morgan
Subject: Your CopsPlus Receipt

[<http://www.copsplus.com/receipttop.gif>]

Order Date: June 30, 2015

Order Number: 641545

Ship To:

Jennifer Morgan

2684 Radio Lane

SCJRF

Redding, CA 96001 Bill To:

Jennifer Morgan

2684 Radio lane

SCJRF

Redding, CA 96001

Qty Item

30 Fox Labs FX-42FTS
Mark 5 Flip Top 4oz. Pepper Spray
2% Stream Spray Pattern
\$573.00
\$19.10 x 30

30 Items: \$573.00

Shipping: \$0.00

Order Total: \$573.00 ✓

SHASTA000625-1



1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com

Regular

PACKING LIST - DO NOT PAY FROM THIS COPY



ORDER NO: 5273833-2

3004209756

JENNIFER MORGAN
SHASTA COUNTY PROBATION
2684 RADIO LANE
REDDING CA 96001

Pkt Ctrl Nbr
3004209756

SHASTA COUNTY PROBATION
JENNIFER MORGAN
2684 RADIO LANE
REDDING CA 96001

EXPORT RESTRICTIONS:

This transaction may contain commodities restricted by the United States International Trade Regulations. If, at a later date, you, your business or agency decide these commodities will be exported from the United States, then please reference the United States Department of Commerce Bureau of Industry and Security Export Administration Regulations (15CFR 730-774), the United States Department of State International Traffic in Arms Regulations (22CFR 120-130), as well as any other applicable laws. These laws apply to private, commercial and government agency export transactions. As an exporter, you, your business or agency, will be responsible for compliance with all U.S. laws relating to the export of these items.

WFL	QTY	ITEM NO.	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
01SC27AA03	15.00	SD114	4 OZ MK5 FLIP TOP STREAM DEFENSE SPRAY	21.49	322.35
<i>20200-035700</i> <i>Pepper spray for JRF/</i> <i>Peace officer equipment</i>					

SEE REVERSE SIDE FOR PRE-AUTHORIZED RETURN FORM

01FO1213ASD

1 OF 1 PAGES

Galls
1340 Russell Cave Road
Lexington, KY 40505
1-800-477-7766
www.galls.com
galls.com/pages/returns

Net Product \$	322.35
Tax	24.18
P & H	3.64
Total Shipment \$	350.17
VC	350.17

Cust. Phone#: 5302456602

12/29/2015

01/11/2016 18:04:25 1601119928 LEX

SHASTA COUNTY PROBATION

REDDING CA 96001

Order: 5273833-2

PO #: SHASTA COUNTY PROBATIO

SHASTA000626-1



SHASTA COUNTY PROBATION DEPARTMENT JUVENILE REHABILITATION FACILITY

SUPERVISOR RESPONSIBILITY ASSIGNMENTS

POLICY/STATE INSPECTION SUPERVISOR

SPO Eric Faxon

Policy/post order Review/revisions
Annual Facility Inspections
Employee Evaluations
Investigative Offense Reports
Annual Security Inspection
Monthly Fire Extinguisher Inspections
Fire/Evacuation Drills
Contract County Resident Case Management
Special Program Multidisciplinary Team
Juvenile Services Workgroups as assigned

SCHEDULING SUPERVISOR

SPO Jennifer Morgan

Daily Schedule
Time off Requests
Time Cards
Training Coordination with Dept. Training Analyst
Transportation Arrangements
Employee Equipment Officer/TMS equipment tracking
Proximity Card Oversight
DRAI Oversight/Validity
Employee Evaluations
PREA Compliance Manager/Trainer/Investigator
VAI Trainer

SECURITY SUPERVISOR

SJDO Mike Boydston

Filebound
Document Retention
Court memo/roster oversight
JALAN Oversight/training of staff
Security Electronics
Monthly Fire Alarm
KMS/SAM
Employee Evaluations
Post Order Review/Revisions
Case Note Review/Quality Assurance

NEW EMPLOYEE ORIENTATION/PROGRAMMING SUPERVISOR

SJDO Evelyn Hooks

Program Oversight/scheduling
Program Annual Review
Program Supplies
Behavior Modification System Oversight
Volunteer Clearances
Application Interviews/review
Employee Evaluations
New Employee Training Coordination
New Employee Critiques
Inmate Phone Services Programming

PROGRAMMING/FACILITY SUPPLY SUPERVISOR

SJDO Carrie Graves

Post Order Creation as needed
Special Program Multidisciplinary Team
Special Program creation/oversight
Parent Project Facilitator
Leaders of Tomorrow (The LOT) Club {Program
Design/oversight}
Facility Supply Inventory/Ordering
Employee Evaluations
Vehicle Maintenance

CULINARY/FACILITY CHEMICAL SUPPLY SUPERVISOR

SJDO Mike Heffner

Kitchen Oversight
Annual Kitchen Inspection
Menu Planning
Culinary Arts Program
Catering
State Regulation Compliance
Facility Cleaning/Chemical Supply Inventory/ordering
Employee Equipment Backup Officer
Employee Evaluations



SHASTA COUNTY JUVENILE REHABILITATION FACILITY POLICY & PROCEDURES MANUAL			
Policy No.	SECTION:	CORRESPONDING TITLE 15	PAGE:
5.8.4	Reports and Documentation	SECTIONS: 1362	1 of 13

POLICY STATEMENT

It is the policy of the Shasta County Juvenile Rehabilitation Facility that officers properly document injuries, incidents, or other specified events in department approved reporting formats, and that such reports are maintained in accordance with applicable laws and regulations.

PROCEDURES

I. GENERAL INFORMATION

- A. All log book entries are considered official documents that are subject to discovery and subpoena.
 1. Staff shall accurately and neatly document daily events in Log Books, and preserve them.
 2. Staff shall record the time for each entry.
 3. Staff shall legibly sign their initials after each entry.
 4. If corrections need to be made, staff shall not use white out or other correction tape that covers up the initial entry. Staff shall line out the incorrect entry and write the corrected information neatly on a new line.
- B. A written report of all incidents which result in physical harm, serious threat of physical harm, or death of an employee, youth or other person(s) shall be maintained. Such written record shall be prepared by the staff and submitted to the facility manager by the end of the shift.
- C. Approved Report Formats
 1. The Serious Incident Report (SIR) is the approved, internal reporting format that is the standard method for documenting injuries, incidents and other special events within the JRF.
 2. The Investigation Report is the approved format used to document cases that are forwarded to the Probation Officer recommending new criminal charges be filed.
 3. The JRF Citation is used by staff to document minor rule violations.
- D. Reports are due prior to the end of an officer's shift, unless an extension is approved by the Supervisor on Duty/OIC and the documented incident is not included in Section I. A. above.
 1. An officer may be held over on their shift to complete the report.
 2. The Supervisor on Duty/OIC may also be held over in order to review and approve the report.

II. REPORTING REQUIREMENTS

- A. The following situations require a SIR:
 - 1. Any incident that results in physical harm, threat of physical harm, or death of an employee, youth or other person(s).
 - 2. Anytime a resident is placed in restraints, other than for the purpose of transportation.
 - 3. To document a Major Rule Violation as described in Section 5.8.2, Facility Rules.
 - 4. Injuries or illness that requires medical staff to be summoned, or called if off-duty.
 - 5. Property damage that poses a safety or security risk that is not associated with or connected to a resident.
 - a. I.e: Damage discovered to a MSR Cage in the covered rec yard that cannot be linked to a resident; a metal shank located in the unit trash can, etc.
 - 6. Any abnormal, irregular event or circumstance, or any questionable occurrence deemed appropriate for an SIR by the Supervisor on Duty/OIC.

III. INFORMATION TO BE CONTAINED IN SIR

- A. The Incident Date, Time and Number in the appropriate boxes.
- B. Incident Code in the appropriate boxes.
- C. The name(s) of the residents involved.
 - 1. Main parties and witnesses.
- D. The staff involved.
- E. Complete Narrative.
 - 1. Location of the incident.
 - 2. Detailed description of the incident, event or circumstances necessitating the SIR.
 - a. Who, what, where, when, how.
 - b. Elements of the violation.
 - 3. Any mitigating or aggravating factors.
 - 4. Statements taken from involved parties.
 - 5. Policy statements documenting that specific directives and policy guidelines were followed.
 - a. Factors and circumstances guiding use of force.
 - b. Thoughts and considerations going through the officers mind when making decisions affecting their response to the incident.
 - c. Medical notifications
 - d. Decontamination procedures
 - e. Restraint timelines
 - f. Required notifications
 - g. Efforts to protect or provide for the safety of the resident(s)
 - i. Cuffs checked for fit and double locked.
 - ii. Positioning to prevent positional asphyxia.
 - h. Counseling efforts

- i. Resident(s) demeanor and response to counseling.
- 6. Reporting Staff Signature Boxes.
- 7. Initial Action(s)/Staff Recommendations.

IV. APPROVAL AND REVIEW OF SIR

- A. Under normal circumstances, the SIR should be submitted to the Supervisor on Duty/OIC who is on the shift when the incident occurs.
 - 1. Exceptions would be if the Supervisor on Duty/OIC played a direct role in a situation involving use of force or restraint. In such cases, the report should be reviewed by the oncoming Supervisor or OIC.
- B. The Supervisor/OIC reviewing the report shall:
 - 1. Correct for grammar, spelling and punctuation.
 - 2. Evaluate to determine if the necessary content is there describing all of the elements of the violation.
 - 3. Evaluate if the contents justify the initial actions and recommended consequence.
 - a. If the reviewing Supervisor/OIC believes that a violation of policy or abuse of force has occurred, they shall immediately report it to the Facility Director.
 - 4. Evaluate to determine if all of the necessary notifications have been made.
 - 5. Evaluate to determine if all of the necessary timelines have been followed.
 - 6. Determine if policy and guidelines have been followed and properly documented.
- C. Medical Review of SIR
 - 1. A copy of the SIR shall be placed in the Medical Mailbox located in the Staff Break Room, for medical to review.
 - a. The Supervisor/OIC review does not have to be completed for the SIR to be reviewed by medical.
 - 2. Once medical completes their review, they will place the completed copy in the SIR binder located on the relevant pod.
- D. The reviewing Supervisor/OIC shall scan and email a copy of all SIR's documenting use of force, including restraints and chemical agents, to the designated department weaponless defense instructor.
 - 1. The weaponless defense instructor shall review the SIR and provide feedback to the staff involved.
 - 2. Any abuse of force or violation of policy will be reported by the weaponless defense instructor to the Facility Director.
- E. When the SIR has been approved by the Supervisor/OIC, it is placed back into the SIR binder on the Pod.
- F. On a daily basis, the Facility Director shall review all of the SIR's and add comments and/or instructions.

- G. The graveyard shift supervisor shall inventory the monthly SIR binder to insure that all SIR's are accounted for, and stored pursuant to state regulations for inspection purposes.

V. INFORMATION TO BE CONTAINED IN INVESTIGATION REPORTS

- A. Case Number, which can be obtained from a supervisor.
- B. Incident date and time.
- C. Report author.
- D. Name, address and description of the Subject(s) involved, and the charges that are sought.
- E. Name of Victim(s)
- F. Name of Witnesses
- G. Detailed description of the incident, event or circumstances necessitating the SIR.
 - 1. Who, what, where, when, how.
 - 2. Elements of the offense.
- H. Any mitigating or aggravating factors.
- I. Statements taken from involved parties.
- J. Policy statements documenting that specific directives and policy guidelines were followed.
 - 1. Factors and circumstances guiding use of force.
 - 2. Decontamination procedures
 - 3. Efforts to protect or provide for the safety of the resident(s)
 - a. Cuffs checked for fit and double locked.
 - b. Positioning to prevent positional asphyxia.
- K. List and description of photographs taken.
- L. List and description of evidence seized.
- M. Details on the chain of custody of the seized evidence.

VI. APPROVAL AND REVIEW OF INVESTIGATION REPORTS

- A. Completed Investigation Reports shall be forwarded to the Supervisor on Duty/OIC for review and approval.
- B. The Supervisor/OIC reviewing the report shall:
 - 1. Correct for grammar, spelling and punctuation.
 - 2. Evaluate to determine if the necessary content is there describing all of the elements of the crime(s).
 - 3. Evaluate to determine if additional witness statements, photographs, or evidence needs to be preserved and/or documented.
 - 4. Determine if policy and guidelines have been followed and properly documented.
 - a. If the reviewing Supervisor/OIC believes that a violation of policy or abuse of force has occurred, they shall immediately report it to the Facility Director.

VII. REPORT EXAMPLES

A. Serious Incident Reports (SIR)

1. The SIR is generated as follows:
 - i. Select the oldest, active case file in Jalan. You can do that by selecting #17 Proceedings by Tickler from the Master Menu. Then type "HL" as the Tickler Type and press enter. That should provide a list of juveniles on probation. Select the desired juveniles case.
 - ii. Select #4, Event Information. Press F10 to place the cursor on Event Type. Enter "IPT" as the event type, which generates the Investigative Offense Report document. Press enter 3 times.
 - iii. Press F12 to go back to the File Master Update Screen. Select #9, and page down until you get to the bottom of the list. There you should see the document titled "INV OFFENSE REPORT."
 - iv. Open this document, complete the offense report, print a copy for supervisor review, and save it.

SERIOUS INCIDENT REPORT

Incident	Incident Time:	Incident Number:		
11/1/2014	2015	811-00-00		
Incident	S06 PHYSICAL RESTRAINT	S03 ASSAULT		
Minor(s) Other Person(s) Involved		Staff Involved		
Last Name	First Name	Last Name	First Name	
Smith	Sean	Epperson	Donnie	
		Kent	Athena	
		KeKipi	Cody	
		Bourgeois	Kris	
		Till	Sarah	
NARRATIVE				
<p>On Friday, November 28, 2014, I was assigned as a uniformed Juvenile Detention Officer on the 800 detention pod at the Shasta County Juvenile Rehabilitation Facility.</p> <p>At approximately 1940 hours, I had sent Resident Smith to his cell due to his behavior towards staff. (See citation# 811-14-27).</p> <p>At approximately 2020 hours, Resident Smith shouted, "Yeah! Ignore me mother fuckers." and "All of you are fucking bitches!" and proceeded to pound the door of cell #803 which Resident Smith and Resident Jones currently occupy. Upon observing this, I informed all residents they would need to lock down in their cells. Officer Bourgeois and Director Till assisted me and began securing residents in their cells.</p> <p>At this time, I proceeded to cell #803 in order to counsel with Resident Smith and calm him down. Upon arrival Resident Smith shouted, "Fuck you Epperson! You pretend you are a cool-ass staff. But really you are a fucking faggot!" I attempted to counsel with Resident Smith one more time, to which Resident Smith stated, "Fuck you! I am tired of this shit."</p> <p>At approximately 2021 hours, Officers Kent and Kekipi arrived to cell #803 to assist me in speaking with Resident Smith. I informed Resident Smith to sit down on his bunk so I could enter the cell and speak with him. Upon opening cell #803, I informed Resident Smith to sit down on his bunk. Resident Smith shouted, "Fuck you. You are going to open my door and not do anything!?" Resident Smith was not showing any sign of aggression at this time and was standing with his hands at his sides. I again informed Resident Smith to sit down on his bunk and attempted to apply "soft hands" on to Resident Smith's right shoulder. Resident Smith immediately pulled away from me and raised both of his hands in clenched fists. Due to Resident Smith's previous behavior, the nature of his charges, and raising his fists up, I feared for the safety of myself and of Officer Kent.</p> <p>Upon observing Resident Smith raise his fists, I immediately attempted to take control of Resident Smith's right arm, and place him into a department approved rear wrist lock. Resident Smith immediately began to struggle and attempted to grab a hold of me and push me away. At this time, Officer Kent attempted to gain control of Resident Smith's left arm. While attempting to gain control of Resident Smith, Officer Kent and I continuously ordered him to stop resisting. Resident Smith continued to fight against Officer Kent and I by attempting to push against us with his hands, as well as attempt to grab our arms. Also at this time, Officer Kekipi verbally instructed Resident Jones to get out of cell #803. Officer Bourgeois then arrived to the cell and removed Resident Jones to cell #808.</p>				
Reporting Staff	Typed Name	Title	Date	Time
	Epperson, Donnie	JDO II	11/28/201	2015
INITIAL ACTION(S) / STAFF RECOMMENDATION(S)				

I recommend Smith serve 48 hour room confinement till 11/30/2014 @ 2100 hrs. I further recommend Smith be placed on AD-SEP 2.

MEDICAL REVIEW / PROTOCOL

Medical Staff Signature

Typed Name

Date

REVIEWER CONCLUSION(S) / CORRECTIVE ACTION(S)

I concur with the above recommendations. Resident Smith behavior is not acceptable, nor will it be tolerated within this facility. Resident Smith has the ability to influence his peers in negative ways through his behavior. I counseled with resident Smith after the incident and he understands that his behavior can and does influence behavior on the Pod. He further explained that he has been trying to do good on the Pod and that this has been building inside of him for a little while and it finally just exploded. Resident Smith was notified by this officer about his consequences and AD-SEP2 status.

Reviewing Staff Signature

Typed Name

Title

Date

Mike Boydstun

SJDO

11/28/20

DIRECTOR REVIEW

Director's Signature

Typed Name

Date

A. Investigative Offense Reports

1. Report numbers can be provided via Central Control. There is a logbook that

the Control Officer will record the offense date, subject's name, the offense or reason for the report, and the officer authoring the report. Once that information is recorded in the logbook, the Control Officer will assign a report number.

2. The report can be generated in one of two ways:
 - a. For subjects not on probation, there is no JALAN case to access. In these instances, officers can do the following:
 - i. Locate the "Investigative Offense Report Blank.doc" on the H Drive at: H:\Investigative-Offense Reports, and open it.
 - ii. Once the document opens, select "Save As" from the File drop down menu. Save the document in "H:\Investigative-Offense Reports\20** Reports" as the assigned report number (i.e. SCPD 15-050) *Note, folders will be available for different years, so make sure you are saving in the correct year folder.*
 - iii. Enter the report number in the relevant box on the report, along with all of the other identifying information. Type the report, save it, and print a copy for your supervisor to approve.
 - b. For subjects who are on probation:
 - i. Select the oldest, active case file in Jalan. You can do that by selecting #17 Proceedings by Tickler from the Master Menu. Then type "HL" as the Tickler Type and press enter. That should provide a list of juveniles on probation. Select the desired juveniles case.
 - ii. Select #4, Event Information. Press F10 to place the cursor on Event Type. Enter "IPT" as the event type, which generates the Investigative Offense Report document. Press enter 3 times.
 - iii. Press F12 to go back to the File Master Update Screen. Select #9, and page down until you get to the bottom of the list. There you should see the document titled "INV OFFENSE REPORT."
 - iv. Open this document, complete the offense report, print a copy for supervisor review, and save it.



SHASTA COUNTY PROBATION ADMINISTRATION

2684 Radio Ln
 Redding, CA 96001
 (530) 245-6200 FAX: (530) 245-6001

Tracie Neal
 Chief Probation Officer

Investigative Offense Report

							<u>Case Number</u>
I N V O L V E D P A R T I E S	<u>Date Incident</u>	<u>Time Incident</u>	<u>Type of Incident</u> <input type="checkbox"/> New Offense <input type="checkbox"/> VOP <input type="checkbox"/> Information Only Offense(s):				
	<u>Location of Incident</u>						
	<u>Name</u> X123, X123 X123		SS#: 99-0000 CII: AR46087816 FBI: 44570454524	<u>Age</u> 15 Height	<u>DOB</u> 05/05/2000 Weight	<u>Sex</u> F Hair	<u>Race</u> W Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u> 123 SMITH ST REDDING CA 96001 123 MURPHY LN ANDERSON CA 96007				<u>Phone</u> 222-1234
	<u>Name</u>		SS#: CII: FBI:	<u>Age</u> Height	<u>DOB</u> Weight	<u>Sex</u> Hair	<u>Race</u> Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>
	<u>Name</u>		SS#: CII: FBI:	<u>Age</u> Height	<u>DOB</u> Weight	<u>Sex</u> Hair	<u>Race</u> Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>
	<u>Name</u>		SS#: CII: FBI:	<u>Age</u> Height	<u>DOB</u> Weight	<u>Sex</u> Hair	<u>Race</u> Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>

☐ Please see attached page for additional Involved Parties

NARRATIVE:

Evidence Collected		
ITEM#	QUANTITY	DESCRIPTION

Date

Supervisor

Date

ADDITIONAL INVOLVED PARTIES

A D D I T I O N A L I N V O L V E D P A R T I E S								
	<u>Name</u>		SS#: CII: FBI:		<u>Age</u>	<u>DOB</u>	<u>Sex</u>	<u>Race</u>
					Height	Weight	Hair	Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>	
	<u>Name</u>		SS#: CII: FBI:		<u>Age</u>	<u>DOB</u>	<u>Sex</u>	<u>Race</u>
					Height	Weight	Hair	Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>	
	<u>Name</u>		SS#: CII: FBI:		<u>Age</u>	<u>DOB</u>	<u>Sex</u>	<u>Race</u>
					Height	Weight	Hair	Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>	
	<u>Name</u>		SS#: CII: FBI:		<u>Age</u>	<u>DOB</u>	<u>Sex</u>	<u>Race</u>
					Height	Weight	Hair	Eyes
	<u>Involvement</u> <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> VICTIM		<u>Physical and Mailing Address</u>				<u>Phone</u>	

STEPHEN C. CARLTON – SHASTA COUNTY DISTRICT ATTORNEY
CRIMINAL COMPLAINT WORKSHEET

****Please use a separate page for each defendant****

NO. 1 OF _ AGENCY: SHASTA COUNTY DA#: _____ LOGGED BY: _____
PROBATION _____

DEF.
NAME: X123 X123 X123 CASE #: _____
CITE#: _____
ADDRESS: 123 SMITH ST DOB: 05/05/2000
REDDING CA 96001 SS#: 99-0000
PHONE: 222-1234 FBI#: 44570454524
SEX: _ RACE: _ HT: _ WT: _ HAIR: _ EYES: _ CII#: AR46087816
POB: _____
DFPOBI _____
DL# _____ ST: _____ OFFICE JUV SPO INTAKE CASE

.....

DA UNIT: ☐ DEJ Eligible ☐ Prop 36 Eligible
☐ ADULT SEX ASSAULT ☐ ASSET FORFEITURE ☐ CAREER CRIMINAL ☐ CHILD ABDUCTION ☐ CHILD SEX ASSAULT
☐ DOMESTIC VIOLENCE ☐ ELDER ABUSE ☐ IDENTITY THEFT ☐ INSURANCE FRAUD ☐ MAJOR NARCOTIC
☐ SINTF ☐ WELFARE FRAUD ☐ 3-STRIKES

<u>DATE(S)</u>	<u>1. Fel/ Misd/Inf/ Enh</u>	<u>CODE SECTION</u>	<u>MISC. CHARGE INFORMATION</u>	<u>VICTIM NAME(S)</u>

IN CUSTODY: _____ ☐ WARRANT ☐ CITE LETTER
BAIL/OR Date: _____ ☐ BOOK NOTIFY ☐ STAY AWAY ORDER
☐ PROB. VIOL.

-----DISTRICT ATTORNEY USE ONLY-----

☐ ORDER DMV PACKET
CDC #

☐ ORDER PRIORS

☐ ORDER 969B PRISON PACKET –

☐ PROPERTY/EVIDENCE

☐ FIREARM DISPO REQ'D

COMMENTS: ☐ ON PAROLE _____ PAS _____ E-PAS
_____ TOX

☐ DECLINED (SEE ATTACHED FORM)

ISSUING ATTORNEY: _____ DATE: _____ (Rev 03/30/09)

REPLACEMENT HISTORY:

Created: 1/21/2015

Revised: 4/16/2016

REFERENCES

SHASTA COUNTY JUVENILE REHABILITATION FACILITY POLICY & PROCEDURES MANUAL			
Policy No.	SECTION:	CORRESPONDING TITLE 15	PAGE:
6.1	Use of Force	SECTIONS: 1357	1 of 6

POLICY STATEMENT

It is recognized that the use of force by Shasta County Juvenile Rehabilitation Facility Staff is a serious responsibility that requires continuous evaluation and monitoring. The purpose of this policy is to ensure the reasonable use and escalation of force is applied in all cases to maintain institutional control, protect county property, and protect staff and minors from harm.

The following guidelines are intended to guide staff as they use their training, experience and discretion in utilizing reasonable force to overcome resistance and maintain control over the institution. Such force should only be used when necessary, and only to the degree necessary to subdue a resident or restore order to a disruptive group. While there is no way to dictate the amount of force which should be applied in every conceivable scenario, staff are expected to use these guidelines and their training to make such decisions in a professional, impartial and safe manner. Force shall never be applied as punishment, discipline or treatment.

GENERAL INFORMATION

I. DEFINITION OF TERMS

- A. Reasonable Force: The exertion of strength, weight, or power to overcome resistance and/or prevent a minor, who comes within the provisions of the California Code of Regulations, Title 15, Section 1357, from hurting themselves or others. It is not a use of force when a person allows him/herself to be searched, escorted or handcuffed for the purpose of transportation.
- B. Excessive Force: Force used in excess of reasonable force.

II. FORCE OPTIONS

- A. Command Presence and Dialog: This technique refers to a range of behavior on the part of the officer or officers. In part, the mere presence of one or more staff can create an atmosphere of control or show of force sufficient to negate the threat and result in compliance. Officers should also communicate with the residents during this phase, attempting to gain their compliance and de-escalate the situation using reasoning, rapport and insight.

The officers reputation, or ability to gain respect and compliance from residents based on that officers demonstrated professionalism, integrity,

honesty and reputation for fairness is essential to this force option. Officers can minimize the need for greater force by consistently striving to build and maintain rapport with residents.

- B. Verbal Commands: An officer may give clear, concise and lawful directions in an authoritative manner sufficient to gain compliance.
- C. Soft Hands: Guiding techniques where by hands are placed on arms, shoulders, or back, in a position of advantage, in order to promote directed movement. Staff should tell the residents that they intend to use soft hands as a means of guiding them prior to doing so.
- D. Chemical Agents: Oleoresin Capsicum (O.C.) Spray may be used to defend against a subject who has become threatening or aggressive toward an officer or others within the facility. O.C. Spray must be used in compliance with established facility policy. Refer to Chapter 6.3 of this policy and procedures manual.
- E. Defensive Tactics: The use of empty hands control methods as learned through required Weaponless Defense Instruction, including but not limited to: Joint manipulation, pressure point application, and take-down techniques.
- F. Mechanical Restraints: Handcuffs, shackles and other devices that are approved and provided for use by officers in the facility. Refer to Chapter 6.2 of this policy and procedures manual.
- G. Deadly Force: The force likely to cause serious bodily injury or death. Deadly force may be used in the defense of the officer's own life or the life of another when all other reasonable means have failed or are impractical.

III. TRAINING

Juvenile Detention Officers shall participate in department provided weaponless defense training. Officers shall utilize only those methods for managing assaultive behavior that are approved by the department. Training consists of 16 hours of initial training with monthly two-hour refresher courses for all staff. This training includes:

- A. Use of force education.
- B. Appropriate use of force techniques/methods.
- C. Use of physical restraints.
- D. Known medical conditions that would contraindicate certain types of force.
- E. Signs or symptoms that should result in immediate referral to medical or mental health.

IV. DUTY TO INTERVENE

Any employee who observes another employee violate this policy shall immediately take affirmative action to stop the inappropriate use of force, and

report the incident to the Supervisor on Duty, Division Director or the Assistant Chief Probation Officer.

V. GRIEVANCES

Use of force incidents are subject to Resident Grievance Procedures as outlined in Chapter 5.9 of this policies and procedures manual.

PROCEDURES

I. CONSIDERATIONS BEFORE AND DURING THE USE OF FORCE

- A. Use of physical force is prohibited, except to effectively control a minor who is displaying behavior that may result in destruction to property or reveals intent to cause physical harm to themselves or others. Physical force will only be used when lesser means of intervention are inappropriate.
- B. Officers are required to evaluate each incident to determine what level of force is appropriate to effectively control and de-escalate any given situation. Officers are not required to begin at the lowest degree of force available before moving to a higher degree. The degree, or degrees of force employed should be directly related to the circumstances at the time the force is used.
- C. Only that force that is deemed necessary shall be used to control resident behavior. The degree of force must de-escalate proportionally to the level of resistance that an officer encounters.
- D. Pain compliance techniques may be effective in controlling a passive or actively resisting individual.
 - 1. Officers may only apply those pain compliance techniques for which the officer has received departmental approved training and only when the officer reasonably believes the use of such a technique appears necessary to further a legitimate law enforcement purpose.
 - 2. The application of any pain compliance technique shall be discontinued once the officer determines that compliance has been achieved.
 - 3. Officers utilizing any pain compliance technique should consider:
 - a. Whether the resident can comply with the direction or orders of the officer.
 - b. Whether the resident has been given sufficient opportunity to comply.
 - c. The potential for injury to the resident(s), officer(s) or others if the technique is not used.
 - d. The potential of serious injury to the resident being controlled.
 - e. The degree to which the application of the technique may be controlled given the level of resistance.

- f. The nature and circumstances present that necessitate the pain compliance technique.
 - g. The level of resistance of the individual(s) involved.
 - h. The need for prompt resolution of the situation.
- E. Officers shall use their best efforts to prevent injury when using force on a resident.
- F. Any move or technique that can restrict the flow of oxygen to the brain, such as chokeholds or carotid restraints, is strictly prohibited.

II. MEDICAL FOLLOW UP

Medical staff will be requested to evaluate all minors that are subject to the use of physical force. If medical staff is not on duty, the supervisor on duty or OIC will determine if the on-call medical staff should be called or if the minor can wait to see the nurse when they are next on duty.

Additionally, if staff believes that the minor may benefit from a mental health evaluation then the on-site mental health worker will be contacted. If no on-site provider is available, the medical staff will be notified and arrange for an evaluation at the next possible opportunity.

III. REQUIRED REPORTING AND REVIEW

- A. Any time physical force is used, including hands on, mechanical restraint, or chemical agent, the supervisor on duty or the OIC shall be notified as soon as practical.
- B. A Special Incident Report (SIR) shall be completed by the primary officer employing the force or overseeing the incident prior to the end of their shift.
 - 1. The SIR must contain the following information:
 - a. The nature of the incident.
 - b. Factors present that determined how the officer responded to the incident.
 - i. Exigent circumstances that necessitated force or made less restrictive measures inappropriate.
 - ii. Mitigating factors that allowed for less restrictive measures to be employed.
 - iii. Known resident history.
 - iv. Officers state of mind.
 - 1) Belief that the resident intended to use force or violence if not for selected intervention.
 - 2) Belief that surroundings (proximity to other residents, furniture or location within the facility) contributed to the presenting threat and required the selected intervention.
 - v. Alternatives to force employed and their effectiveness.
 - vi. Verbal commands given to the resident and their effectiveness.

- vii. Description of the type of force employed.
- viii. Reasoning for the selection of that force.
- ix. Description of the de-escalation of force.
- x. A statement of whether or not injuries were sustained by all parties involved.
 - 1) Include pictures of minor, if deemed appropriate.
 - 2) State what on-site treatment, if any, was administered.
 - 3) State if medical staff responded or was contacted if after hours.
 - 4) State what orders, if any, were given by medical staff.
- xi. Description of the after care for the resident.
 - 1) Counseling employed by staff and resident's receptiveness to it.
 - 2) Resident's state of mind following the incident.
 - 3) Statements made by resident indicating the cause of the incident, admissions, and resolution of the factors that caused the incident if any.
- xii. Document compliance with policy and procedures.
 - 1) Required notifications to management or medical staff.
 - 2) Policies governing restraints or OC use.
- xiii. Recommendations for discipline or other actions.

C. The supervisor on duty or OIC shall review any incident in which an officer deploys a form of force upon a minor on their watch. The reasonableness of force must be judged from the perspective of a reasonable officer on the scene at the time of the incident. Any interpretation of reasonableness must allow for the fact that officers are often forced to make split-second decisions during circumstances that are tense, uncertain and evolving about the amount of force that reasonably appears necessary in a particular situation. The review will include:

- 1. An evaluation of whether or not the use of force was justified given the circumstances.
- 2. An evaluation of whether or not procedures were followed in accordance with department policy.
- 3. An evaluation of the health and wellbeing of the resident and responding officers.
 - a. Was there any injury as a result of the incident?
 - b. Was medical protocol followed regarding proper notifications and carrying out the physicians orders?
 - c. Is there a need for officers to receive treatment or is other documentation (risk management paperwork for on the job injury) required?
- 4. Review the recommended discipline or consequences to ensure they are in line with current procedures and in the best interests of rehabilitation.

D. The supervisor or involved staff may initiate an incident debriefing to

review what occurred and promote training and coaching.

- E. A copy of all SIR's involving use of force shall be forwarded by the facility director to the department weaponless defense instructors for initial review.
- F. A Use of Force Administrative Review meeting will be scheduled on a monthly basis for the purpose of reviewing each use of force by any personnel to ensure compliance with this policy and to address any training issues.

IV. INVESTIGATION OF EXCESSIVE FORCE OR VIOLATIONS OF THE USE OF FORCE POLICY

- A. In every instance where excessive force or a violation of the use of force policy is expected, the supervisor or OIC will immediately notify the Juvenile Hall Director.
- B. The Juvenile Hall Director and division supervisors have a duty to assess each incident where excessive force or a violation of the use of force policy is suspected, and take action where appropriate. Refer to Chapter 3.3 of this policy and procedures manual.
- C. Should it be deemed that an officer has used excessive force, or violated the use of force policy, disciplinary measures may be pursued up to and including termination, pursuant to existing county personnel rules and department policy.

REPLACEMENT HISTORY:

Created: 11/21/2014

Revised: 12/30/2016

REFERENCES

SHASTA COUNTY JUVENILE REHABILITATION FACILITY POLICY & PROCEDURES MANUAL			
Policy No.	SECTION:	CORRESPONDING TITLE 15	PAGE:
6.2	Physical Restraints	SECTIONS: 1358	1 of 7

POLICY STATEMENT

It is recognized that the use of restraints on residents is considered a use of force, and is a serious responsibility that requires continuous evaluation and monitoring. The purpose of this policy is to provide officers with requirements and guidelines on the reasonable use of physical restraints.

Physical restraints should only be used when necessary and only to the degree necessary to regain control of an individual offender or restore order to a disruptive group.

This policy is not intended to apply to the use of restraints for movement or transportation purposes. Those uses are covered in Sections 4.3.3 Resident Movement and Chapter 7 of this policy and procedures manual.

GENERAL INFORMATION

I. DEFINITIONS

- A. Physical Restraints: Devices which immobilize a resident's extremities and/or prevent the resident from being ambulatory.
 - 1. Approved Restraints
 - a. Handcuffs
 - b. Shackles
 - c. Belly Chains
 - d. The WRAP

II. TRAINING

- A. The Shasta County Probation Department shall provide Juvenile Detention Officers and sworn probation staff with training in the use of restraints.
- B. Staff shall only use those restraints that they have been trained and deemed proficient in by department approved instructors.
- C. Staff shall apply, supervise, and remove restraints using approved methods and techniques provided during department approved training.
- D. Staff who fail to demonstrate proficiency in the use of restraints approved for the JRF shall not be allowed to provide direct supervision to residents.
 - 1. Staff who fail to demonstrate proficiency will participate in additional training and may need to be temporarily reassigned to areas or of the

department that do not involve direct supervision of residents or to other shifts.

III. USE OF RESTRAINTS

- A. Physical Restraints shall be used only for those residents who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm.
 - 1. Physical Restraints should only be utilized when it appears less restrictive alternatives would be ineffective in controlling disorderly behavior.
- B. Residents shall be placed in restraints only with the approval of the Supervisor on duty/OIC or Division Director.
 - 1. If it is necessary to place a resident in handcuffs temporarily, for the safety of the resident and others without first receiving approval, the officer shall notify the Supervisor on duty/OIC or Division Director as soon as possible.
 - 2. When this occurs, the officer shall document in a detailed incident report the following:
 - a. The circumstances that necessitated the immediate application of restraints without first obtaining required approval.
 - b. The time the restraints were applied.
 - c. The time the required approval was received.
 - d. Any circumstances that extended the time between when the restraints were applied and the required approval was received.
- C. Officers shall document the circumstances leading to the application of restraints in a detailed incident report.
- D. Staff shall provide continuous, direct visual supervision over residents who are restrained to ensure that the restraints are properly employed, and to ensure the safety and well-being of the resident. This requires staff to physically remain in the room with the restrained resident. At no time shall a restrained resident be left alone.
- E. In the case of a prolonged restraint, staff shall utilize the WRAP system as described below, and supervise the restraint in the Safety Room located in Booking if directed to do so by the Supervisor on duty/OIC.
- F. Staff shall constantly evaluate the need for continued retention in restraints.
- G. Staff shall follow all timelines and make record of their interactions in accordance with the use of the Restraint/Safety Room Check form as described in the procedures below. Staff shall constantly assess the level of resistance exhibited by a restrained resident, and remove them:

1. As soon as the resident's behavior demonstrates that they are under control and no longer a threat to themselves or others.
 2. Immediately if deemed medically necessary based on the observations of staff or directions from medical or mental health providers.
- H. Officers and employees observing the improper use of Physical Restraints, or violations of this policy are required to immediately attempt to correct the situation and report the occurrence to the Supervisor on duty, OIC, or Division Director.

IV. IMPROPER USE OF PHYSICAL RESTRAINTS

- A. Physical Restraints shall never be used as a form of discipline or punishment, and shall not be used as a substitute for treatment.
- B. Physical Restraints shall never be placed about the neck of a resident, nor will restraint equipment be applied in any way so as to inflict physical pain or restrict blood circulation or breathing.
- C. Physical Restraints shall never be used to secure a resident to any part of a transporting vehicle (with the exception of safety seat belts).
- D. The practice of affixing hands and feet together behind the back (hog-tying) is prohibited.
- E. A resident who is known to be pregnant or in recovery from delivery shall not be restrained except as provided by Section 3407 of the California Penal Code.
1. Section 3407 of the California Penal Code states:
 - i. An inmate known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body.
 - ii. A pregnant inmate in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the inmate, the staff, or the public.
 - iii. Restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.
 - iv. This section shall not be interpreted to require restraints in a case where restraints are not required pursuant to a statute, regulation, or correctional facility policy.
 - v. Upon confirmation of an inmate's pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant inmates, including, but not limited to, the provisions of this chapter, the relevant regulations, and the correctional facility policies.
 - vi. For purposes of this section, "inmate" means an adult or juvenile

who is incarcerated in a state or local correctional facility.

PROCEDURES

V. CONSIDERATIONS REGARDING THE USE OF RESTRAINTS

- A. Staff shall evaluate each incident to determine what restraint is appropriate to effectively control and de-escalate the resident's disorderly behavior.
 - 1. When making this determination, staff should consider all circumstances surrounding the incident, including but not limited to:
 - a. The conduct of the resident.
 - b. The resident's age, size, strength, skill level, mental capacity, and the influence of any controlled substances or alcohol.
 - c. The resident's known medical health or mental health.
 - d. The availability of other resources to assist the staff in controlling or de-escalating the behavior.
 - e. The training and experience of the staff member.
 - f. The potential for injury to residents or staff.
 - 2. Medical Conditions that weigh against the use of certain restraints may include:
 - a. The resident's physical size.
 - i. Large persons are at risk for positional asphyxiation when handcuffed behind the back and lying on the floor or physically restrained to the ground by officers.
 - b. Asthma or difficulty breathing.
 - c. Fractures or broken bones.
 - d. Pregnancy.

VI. WRAP RESTRAINT SYSTEM

- A. General Information
 - 1. The WRAP Restraint System is used for controlling and immobilizing residents who require prolonged restraint.
- B. Training
 - 1. Only qualified officers who have successfully completed the department approved WRAP Restraint System training can use the device.
 - 2. Officers who have not completed the training or demonstrated proficiency in the use of the WRAP Restraint System shall not participate in applying the WRAP or be charged with providing direct supervision to a WRAP restrained resident.
- C. Application of WRAP Restraint System
 - 1. The use of the WRAP Restraint System must be authorized by the Supervisor on duty/OIC or Director prior to being placed on a resident.
 - 2. Staff shall inspect the WRAP Restraint System prior to its use for

- signs of wear, damage and to ensure that it is clean.
 - 3. Staff shall clear the area of other residents, if possible, prior to the application of the WRAP Restraint System.
 - 4. When applying the WRAP Restraint System, there must be enough officers present to control the resident being restrained.
 - a. At no time will less than two staff apply the WRAP Restraint System.
- D. Transportation of resident restrained in the WRAP
- 1. Residents will be carried or allowed to “shuffle” to their destination in a manner consistent with the training.
 - 2. If staff are carrying the restrained resident, enough officers must be used to avoid injury to both the resident and the officers.
 - 3. If transporting a resident restrained in the WRAP by vehicle, the following precautions shall be followed:
 - a. A minimum of 2 officers shall conduct the transport.
 - b. One officer shall sit in the back of the caged vehicle to ensure that the straps remain tight and the resident experiences no medical issues.
 - c. Officers shall ensure that the restrained resident is placed in the vehicle seat belt during the transport.
- E. Special Precautions
- 1. The WRAP is only to be used by trained officers.
 - 2. The shoulder harness should never be tightened to the point that it interferes with the resident’s ability to breathe.
 - 3. The leg bands and shoulder harness must be checked frequently for tightness and re-tightened or loosened as necessary until the WRAP is removed.
 - 4. If the restrained resident complains of or shows signs of breathing distress (shortness of breath, sudden calmness, a change in facial color, etc.), medical attention should be provided immediately.
 - 5. A resident restrained in the WRAP shall never be left alone.
 - 6. Residents should be placed in an upright sitting position or on their side as soon as possible after the WRAP restraint has been applied.
 - a. The upright sitting position is preferred when a resident is exhibiting self harming behavior such as striking their head against the floor.
- F. Restrained resident’s shall be removed from the WRAP:
- 1. As soon as the resident’s behavior demonstrates that they are under control and no longer a threat to themselves or others.
 - 2. Immediately if deemed medically necessary based on the observations of staff or directions from medical or mental health providers.

- G. Care and Maintenance of the WRAP Restraint System
 - 1. The officer assigned to return the WRAP Restraint System to the armory shall do the following:
 - a. Inspect the WRAP and its components for signs of wear or damage.
 - i. If wear or damage is discovered, the officer shall take the WRAP Restraint System out of service and immediately notify the Supervisor on duty/OIC.
 - ii. The Supervisor on duty/OIC shall notify the facility director, who will advise what steps to take to repair or replace the WRAP and/or its components.
 - b. Ensure that the WRAP and its components are clean.
 - i. If the WRAP or a component is soiled and cannot be cleaned, the officer shall follow the same protocol for signs of wear or damage.
 - c. Ensure that the WRAP and its components are placed back into the storage bag in a manner consistent with training.
 - d. Store the cleaned and inspected WRAP Restraint System in its designated spot in the Armory.

VII. SUPERVISION OF RESTRAINT

- A. At no time shall a restrained resident be secured in a holding cell or left alone. Staff shall provide continuous, direct supervision of restrained residents.
- B. Timelines
 - 1. Medical Timelines
 - a. Health Service (CFMG) staff shall be notified within one (1) hour of the resident being placed in restraints. If Health Service staff are not on duty, the on-call medical provider shall be contacted via telephone.
 - i. If the on-call provider cannot be reached within five (5) minutes, staff shall contact the back-up on-call provider.
 - b. Health Service staff shall come to the facility and provide a medical assessment within two (2) hours of the resident being placed in restraints.
 - i. If Health Service staff cannot respond within two hours, the resident shall be transported to the Emergency Room.
 - c. Following the medical assessment, Health Service staff shall determine the appropriateness of continued restraint every three (3) hours.
 - d. As soon as possible, but within four (4) hours of placement in restraints, the resident shall be evaluated on site by a licensed mental health professional to assess whether the resident needs immediate and/or long-term mental health treatment. This assessment will be arranged by Health Services staff and will occur unless staff are directed to transport the resident to

- the hospital emergency room for further evaluation.
2. Staff Observations and Required Actions
 - a. Staff shall document resident's behavior and staff interventions every 15 minutes.
 - b. Staff shall check mechanical restraints for fit and adjust, as needed, every 15 minutes.
 - c. Staff shall offer the resident hydration every 30 minutes.
 - d. Staff shall offer the resident the use of a lavatory every hour.
 - e. Staff shall exercise the residents extremities for 10 minutes every two (2) hours.
 3. Supervisor/OIC Review
 - a. The Supervisor on duty/OIC shall review for continued retention in restraints a minimum of once every hour.

VIII. REPORTING

- A. All restraints shall be reported in a manner consistent with Section 5.8.4, Reports and Documentation.

REPLACEMENT HISTORY:

Created: 5/6/14

Revised: 8/11/14

REFERENCES

- Section 1358, Use of Physical Restraints, Juvenile Title 15 Regulations
- Section 6030 of the California Penal Code
- Section 222 of the California Welfare and Institutions Code
- Section 3407 of the California Penal Code
- Juvenile Rehabilitation Facility Policy and Procedures, Section 5.8.4, Reports and Documentation; Section 4.3.3 Resident Movement; and Chapter 7 Transportation.
- Restraint/Safety Room Check Sheet

SHASTA COUNTY JUVENILE REHABILITATION FACILITY POLICY & PROCEDURES MANUAL			
Policy No.	SECTION:	CORRESPONDING TITLE 15	PAGE:
6.3	Chemical Agents	SECTIONS:	1 of 7

POLICY STATEMENT

It is the policy of the Shasta County Juvenile Rehabilitation Facility that detention officers may use Oleoresin Capsicum Spray (OC Spray) to subdue, obtain control of, or restore order over residents of the institution under appropriate circumstances, as permitted by this policy.

GENERAL INFORMATION

I. TRAINING

- A. Only those staff who are authorized to carry OC Spray may do so.
- B. The Shasta County Probation Department shall provide officers assigned to the Juvenile Rehabilitation Facility with proper training and guidance regarding the permissible use of OC Spray on residents in the facility.
- C. Staff shall satisfactorily complete the department eight hour, STC approved Chemical Agents course prior to being authorized to carry and use OC Spray.
 - 1. This course follows the regulations set forth by the California Department of Justice and California Penal Code. It includes instruction in known medical conditions that would contraindicate the use of OC Spray, types of OC Spray approved for use in the facility, methods of application, signs and symptoms that should result in immediate referral to medical or mental health staff, and requirements for the decontamination of OC Spray.
- D. Should a staff member believe that he/she requires additional training in the use of OC Spray, they shall immediately notify their Supervisor.
- E. Issued OC Spray shall only be carried in a department approved holster.

II. CONDITIONS FOR USE

- A. The use of OC Spray is considered an intermediate use of force, in that OC Spray is capable of inflicting significant pain and presents a significant intrusion upon an individual's liberty. As such, OC Spray shall be used to apprehend, control, restrain or subdue individuals only when there is imminent or actual violent, aggressive or combative behavior, and where such behavior presents an immediate threat to staff, other residents or persons in the facility.

- B. OC Spray shall never be used as a form of punishment, discipline or treatment.
- C. OC Spray shall never be used on resident's who are passively resisting in a non-violent manner or who are showing no signs of physical threat towards officers or others.

III. CONSIDERATIONS BEFORE AND DURING USE OF OC SPRAY

- A. Staff shall evaluate each incident to determine what force is appropriate to effectively control and de-escalate the presenting situation.
- B. When determining if OC Spray should be used, staff should consider all circumstances surrounding the incident, including but not limited to:
 - 1. The conduct of the resident.
 - 2. The resident's age, size, strength, skill level, mental capacity, or the effect of drugs/alcohol that may be present in their system.
 - 3. The resident's medical health or mental health status. I.e., Asthma, clinically obese, documented allergies, pregnancy, diagnosed mental illness.
 - a. Asthma: Though pepper spray may cause irritation in the nose and upper airway, there is little to no evidence that it causes or exacerbates an asthma attack. However, staff should avoid, if possible, deploying OC Spray on someone who is audibly wheezing.
 - b. Pregnancy: The safety of using pepper spray on a pregnant woman has not been determined clinically. Due to the possibility that such use may cause problems, it should be avoided if possible.
 - 4. The availability of backup staff, or staff/persons who have an existing rapport and may be able to de-escalate the resident.
 - 5. The training and experience of the staff member.
 - 6. Potential injury to residents or staff.
 - 7. Other exigent circumstances.
- C. Staff shall continuously measure a resident's resistance and behavior to determine which level of force should be modified to appropriately gain control throughout an incident, and act accordingly.
- D. Staff shall use their best efforts to prevent injury when using OC Spray on a resident. If possible, staff should not use OC Spray in a manner that would result injury to residents or other staff members.

PROCEDURES

IV. STORAGE, ISSUE and DISPOSAL of OC SPRAY CANISTERS

- A. Types of OC Spray Canisters in use in the facility.
 - 1. MK 4 size cans are available for issue to staff.
 - 2. OC Stream Units are issued to line staff.
 - 3. OC Foam Units are issued to supervisors.
 - 4. MK9 Fogger Units are available to trained staff to respond to specific incidents as authorized by the Supervisor on Duty/OIC.
 - a. Examples of incidents that may necessitate the use of the MK9 Fogger may include: Numerous residents engaged in riotous behavior or a planned cell extraction.
- B. Storage and Maintenance
 - 1. OC Spray Canisters shall not be left unattended.
 - 2. Officers are encouraged to store their OC Spray in their lockers when not on duty.
 - 3. In the event an officer takes their OC Spray out of the facility at the end of their shift, they shall take care not to store it in such a manner that the canister is exposed to excessive heat or cold, which could cause damage or failure of the canister. They shall also take measures to prevent unauthorized access to the canister by others.
 - 4. Staff should inspect their OC Spray Canister on a regular basis to insure it is clean and that there is no obvious damage.
- C. Procedures for issue of OC Spray Canisters.
 - 1. Staff shall only use OC Spray and related equipment that has been supplied to them by the Shasta County Probation Department.
 - 2. All staff who are authorized to carry OC Spray shall be issued their own canister for use while on duty.
 - 3. All staff who are authorized to carry OC Spray shall carry it while on duty.
 - 4. Staff shall be issued their OC Spray canister upon satisfactory completion of the department Chemical Agents course.
 - a. Staff will either be issued their OC Spray at the end of the course, or be authorized to obtain their OC Spray from the Supervisor in charge of equipment.
- D. Procedures for disposal of OC Spray Canisters
 - 1. Staff shall request replacement OC Spray Canisters when the expiration date on their issued canister approaches, or when their OC Canister is depleted. Arrangements will then be made to issue a replacement.
 - 2. OC Spray Canisters shall be disposed of in accordance with approved department practice, the manufacturer and as specified by law.

- E. Lost OC Spray Canisters
 - 1. Staff shall report lost OC Spray Canisters to their supervisor as soon as practical.
 - 2. Officers are required to submit a report detailing the facts and circumstances involved. They are to include the brand and serial number of their issued canister (this can be found in the equipment log for each officer).

V. USE OF OC SPRAY

- A. A verbal warning shall be made to the resident that OC Spray will be deployed if their negative behavior continues, unless circumstances are such that it is either unsafe or not prudent to do so. Staff shall document that the warning was given, or the reasons why it was believed unsafe or not prudent in the SIR documenting the incident.
- B. If possible, staff shall issue a radio call for back-up, stating their location, prior to deploying OC Spray.
- C. Staff should order any residents in the vicinity of an incident to "take cover," prior to deploying OC Spray, if possible.
 - 1. If the resident who is uncooperative is in their room and a roommate is present, staff should remove the roommate, if possible, prior to deploying OC Spray.
- D. When staff deploy OC Spray, they should use a short one to two second burst, aiming directly at the facial area of the uncooperative resident. If the resident's face is covered, staff should aim for any exposed area of the skin.
- E. If deploying OC Spray in a resident's room, staff should close the door and allow the OC Spray to take effect. This minimizes cross-contamination of staff as well as prevents injuries to the resident and staff.
 - 1. If there is time, and circumstances warrant, staff may request the Mk9 Fogger from the Supervisor on Duty, to utilize if it is safe to do so.
- F. Staff shall remove the resident from their room, or other confined space where OC Spray is deployed, as soon as it is safe to do so. This will prevent unnecessary cross contamination to staff and help de-escalate the resident towards the decontamination process.

VI. DECONTAMINATION PROCESS

- A. Staff shall not begin the decontamination process until the contaminated resident, based on their behavior and actions, no longer presents a threat and is compliant with staff.
 - 1. The resident may behave in a manner consistent with the discomfort caused by the effects of the OC Spray, however staff should see the

resident complying with staff directives, the absence of threats towards staff or others, the resident's focus is on decontamination and not retaliation or aggression towards others, and the resident asking to be decontaminated.

2. This should not prevent staff from moving a resident who is contaminated with OC Spray and continuing to be combative out of the immediate area where spray was deployed, in order to supervise and counsel the resident without exposing officers to unnecessary contamination, if it is safe to do so.
- B. Decontamination should take place in an area of the facility segregated from other residents, preferably in booking.
- C. Decontamination shall consist of:
1. Allowing the resident access to copious amounts of cool, running water.
 - a. This is best accomplished by supervising them at the hose bib in the janitor's closet in booking, which has a floor drain.
 2. Instructing the resident not to wipe their face or rub their skin as this can increase irritation.
 3. Allowing the resident to shower and providing them with fresh, clean clothing and undergarments.
 4. Monitoring the resident while they allow cool air to blow on their affected areas utilizing a fan, or allowing them fresh, cool air in the outdoor recreation yard.
- D. No one should permit a resident to apply creams or salves to areas of their skin affected by OC Spray, as doing so can trap OC particulates on the skin and prolong discomfort.
- E. Staff shall allow a resident decontaminating from the effects of OC Spray to remove their contact lenses, if applicable. Contaminated contact lenses will be provided to medical to be cleaned and rendered safe. If medical staff is on duty, they should assist the resident with this process.
- F. While decontaminating (not in the shower), residents shall be observed for one hour from the time of exposure, by staff to insure that they are not suffering from any adverse, ill physical effects from the OC Spray.
1. Staff shall look for signs of respiratory distress, swelling of the eyes, rash or other allergic reactions.
- G. Any bedding or clothing that is exposed to OC Spray shall be exchanged and laundered pursuant to policy Section 5.4.7 Clothing and Bedding Exchange, and 5.4.8 Laundry Operations.
- H. Any rooms contaminated with OC Spray shall be thoroughly cleaned prior to allowing residents to occupy them.

1. Staff may provide proper protective items (gloves, mask, safety glasses, etc.) to residents, and supervise them while they clean the rooms.
2. If staff utilize residents to clean, they will provide them with a shower and fresh clothing and undergarments as soon as possible upon completion of the cleaning.

VII. MEDICAL RESPONSE

- A. Residents who are sprayed with OC Spray shall be referred to medical personnel as soon as possible.
 1. If medical staff are not on duty or available, the on-call medical provider shall be contacted within one hour of the application of OC Spray by the Supervisor on Duty/OIC, pursuant to policy Section 5.11.1, Medical Services.
 2. If the resident displays respiratory distress and/or unusual symptoms, medical staff shall be contacted immediately.
 3. Staff shall follow directives provided by medical providers, and advise them as soon as possible of any change in circumstances or if staff are unable to follow their directives.

VIII. REPORTING, TIMELINES and REVIEW

- A. All incidents involving use of force shall be documented by staff in a SIR, pursuant to policy Section 5.8.4, Reports and Documentation.
- B. All timelines, including but not limited to the following, shall be included in the SIR:
 1. When the incident began.
 2. The time backup was summoned.
 3. The time OC Spray was deployed.
 4. The time the resident became cooperative.
 5. The time restraints were applied/removed (if applicable).
 6. The time decontamination began.
 7. The time decontamination was completed.
 8. The time the Supervisor on Duty/OIC was notified.
 9. The time the Facility Director was notified.
 10. The time medical was notified.
 11. The time one hour observation began.
 12. The time observation ended.
 13. The time the resident was returned to their room on their assigned pod.
- C. All incidents involving OC Spray shall be reviewed by the facility director and the department weaponless defense instructors.
 1. A determination shall be made whether a violation of policy has occurred.
 2. Efforts to identify training needs or issues shall be made.
 3. An evaluation will determine if injuries to staff or residents have

- been appropriately referred for care.
4. If a substantial violation of policy or other significant event has occurred, the Facility Director shall communicate this to the Assistant Chief Probation Officer.

REPLACEMENT HISTORY:

Created: 11/21/2014

Revised: 10/29/2015; 3/13/2017

REFERENCES

- Section 1358, Use of Physical Restraints, Juvenile Title 15 Regulations
- Juvenile Rehabilitation Facility Policy and Procedures, Section 5.8.4, Reports and Documentation; Section 5.4.7 Clothing and Bedding Exchange, Section 5.4.8 Laundry Operations, and Section 5.11.1 Medical Services.

ACCESS TO LEGAL SERVICES

You may request legal services and/or to speak with your attorney at any time. Please complete a request form and staff will follow up as appropriate.

EMERGENCY EVACUATION PLAN

In the event of an emergency, you will likely be taken out of the building. You are to walk calmly with your hands behind your back. Roll call will be taken once the group has assembled again. Fire & other emergency drills are conducted on a regular basis so you will know what is expected in the event of an emergency.

ACCESS TO RELIGIOUS SERVICES

All minors have the right to request religious instruction. Church services are offered on Sundays at 8:30am. There are several other religious service opportunities throughout the week. You have the absolute right not to attend religious instruction or activities & to have a reasonable alternative activity.

ACCESS TO HEALTH CARE SERVICES

Juvenile Hall has a nurse on duty 5 days per week, a doctor/PA twice per week, & a therapist 3 times per week. There is access to emergency medical care at all times. Within 96 hours of booking, you will receive a routine physical. If you have a medical problem while in custody, request that staff place you on the nurse's sick call list or submit a written request to see the nurse. If you choose, you may submit a confidential written request by asking staff for an envelope in which to seal your request.

COURT INFORMATION

Your first court appearance (*arraignment*) will include an explanation of the charges against you & a decision by the Judge about whether you will remain in custody (*detention*).

Your Probation Officer will continue to meet with you while you go through the court process. Prior to the completion of your case (*disposition*), your Probation Officer will likely complete a report & recommendation that will be available for you to read before your hearing. You are encouraged to ask staff or your Probation Officer if you have any questions about the court process.

HOUSING ASSIGNMENT

There are 2 housing units in this facility. Unless you present a security risk or have serious charges pending, you will likely be housed on the general population pod. No Contact orders will be enforced. Be sure to notify staff of any No Contact orders or if there are residents in the facility with whom you do not get along as these issues may affect your housing.

PERSONAL HYGIENE & CARE

Upon booking, you will shower & have the opportunity to do so daily thereafter. You will also receive clothing, bedding & hygiene kit (toothbrush, toothpaste & comb). Female hygiene products are available on each housing unit & available upon request. Hair ties are also available. You will be allowed to brush your teeth after each meal & to shave daily. Hair care services are available upon request.

ACCESS TO COUNSELING SERVICES

You have the right to mental health services, including counseling & medication support, to be set up through staff or your Probation Officer. This facility also offers group counseling, 12 step

meetings & substance abuse programs. Your Probation Officer may assign you to participate in some of these programs. If you are interested in participating, you may also ask staff.

CORRESPONDENCE

The JRF will provide postage for 1 letter a day to your parents/guardians & 1 letter a week to a friend. Depending on your level, you may be able to earn extra postage. You may also send additional letters if your parents provide metered envelopes (available at the Post Office).

You may not write letters to those with whom you have been ordered to have no contact.

Letters may not be sent from one institution to another. You will not receive mail coming from another institution. You will receive all mail unless it contains contraband or exhibits gang or racist ideation.

*Mail will be scanned for security purposes but will not be read by staff unless there is cause to do so.

VISITING

Visiting is allowed 2 times per week for parents/guardians only. Visitors must schedule appointments to visit. Visitors who are late will not be allowed to visit but encouraged to sign up for the next available visiting time.

Visiting Days/Times: Saturdays and Sundays

12:15-2:15 and 2:45-4:45

Visitors may donate appropriate paperback books to the facility but not directly to you. You are not allowed to accept any items from visitors. Visitors are to give all items, including metered envelopes, to staff.

EDUCATION, READING MATERIALS, PROGRAMS & ACTIVITIES

All minors will attend school until they have graduated high school. **School hours: 8:00am – 1:30pm**

There will be time for homework after school. Rehabilitative & recreational programming will occur daily.

Reading materials are provided on the housing units & available during program time. During this time you will be able to write letters, participate in groups, watch limited television, play games, & participate in outdoor activities. Bed times are determined by the level system & your behavior.

TELEPHONE

Upon booking, you will be provided the opportunity to make 3 telephone calls – 1) parents/guardians/responsible relative; 2) attorney; 3) your employer. You will only be allowed to use the intake phone for calls to your parents/guardians & to/from your attorney or employer. After you have met with a Probation Officer you will have a list of people and phone numbers that are your approved contacts. These approved contacts will be entered into our phone system and you will be assigned a pin number. Using that pin number you will be allowed to make collect phone calls to those on your approved list who have set up a calling account. Phone calls are allowed during program time with permission from a Staff member.

DISCIPLINE

Time Outs

You may be sent to your room during or outside of school hours for a time out. Time outs will be a maximum of 15 minutes but you will have to be cooperative & willing to abide by the rules of the facility before rejoining the group. Time outs should be privately discussed & a learning experience.

Minor Rule Violations : a rule violation that does not impact the safety and security of the facility or disrupt the normal operation of the pod. A minor rule violation may result in such consequences as , loss of, or modification of program time, or writing an essay.

Examples of minor rule violations are: Talking while in line, horseplay & passing notes

Major Rule Violations: a violation that directly affects the safety and security of the facility, or disrupts the normal operation of the pod. A major rule violation could result in such consequences as loss of program, a special program, status changes or additional criminal charges. These will be documented by staff in Special Incident Reports (SIR's) with recommendations for consequences. A supervisor reviews each SIR & authorizes the consequences. The Director also reviews all SIR's.

Examples of such violations include fighting, assaulting staff, intimidating others, destroying county property or talking about/ planning escape.

Due Process

For any major rule violations you will be provided the opportunity for a due process hearing. You will be given written notice of the specific rule violated, disciplinary action being taken & the reason it's being taken. A staff member not involved in the incident and another staff who can assist you, will allow you an opportunity to present your side of the incident & will decide if the disciplinary action is appropriate. If you are not satisfied with that decision, you may appeal to the Director.

Point Level System

Here at the JRF we have a point level system, you will earn points through out the day based on your behavior. Each shift will score your behavior out of 8 points, grave yard will score you out of 3 points. You get 2 points for keeping your room clean and your bed made on each shift. There is a maximum of 23 points total each day. The points will be totaled at the end of the week to determine your level. Level 3 being the highest level you can earn.

Level 3 144-161

Level 2 112-143

Level 1 0-111

Ask any staff for more information on the level system and what it means for you while you are here.

GRIEVANCE PROCESS & RIGHT TO ASK FOR APPROPRIATE TREATMENT

You have the right to appeal and have resolved and condition of confinement, including, but not limited to: health care services, classification, programming, telephone, mail, visiting procedures, food, clothing and bedding. This process is called filing a grievance. This will not be held against you, and your case will be taken up as soon as possible. However, in the meantime, you still must do as you have been told; even if this is the issue you are grieving.

You may notify any staff member that you have a complaint. It is hoped that most issues can be resolved by informal discussions between you & staff. But if that does not happen, you may file a written grievance and the following process will take place:

Grievance forms are located in the day room on each pod. During resident program time you will have the opportunity to fill out a grievance form. When the grievance form is complete place the form in the locked Confidential Communication box located in the dayroom or deliver the form to any JRF staff member.

Grievances containing profanity or disrespectful language or grievances containing threats against staff or others will be returned to you to be re-written. Grievances will not be denied simply because they contain profanity or other language objectionable to staff.

The staff member who was unable to resolve the grievance at the informal (discussion) level will document their findings within 24 hours on the Grievance Form and submit it immediately to the Supervisor or Officer in Charge (OIC) if it is not resolved,

A Supervisor or Officer in Charge will next attempt within 3 days to resolve the grievance through discussion with you and involved staff. The Supervisor or OIC who hears the grievance will not be involved in the incident leading to the grievance.

If the matter cannot satisfactorily be resolved, the Supervisor will give the Grievance Form to the Division Director. The Division Director will review the Supervisor's findings within 3 days and investigate the grievance if warranted. The Division Director may conduct a hearing with you, involved staff, and Supervisor within 5 days. The Division Director will report findings in writing to you within 3 days. The Division Director's findings are final in the Grievance Procedure process.

In all cases involving short-term discipline, you should be aware that the grievance process may not be finalized before the completion of the discipline.

At no time will any retaliatory citation be taken by staff against any minor filing a grievance and you should report any such action to the Division Director immediately.

Warning

O.C. (Pepper Spray) is an inflammatory agent and the following effects may last up to 45 minutes:

Swelling of the mucous membranes
Involuntary eye closure
Gagging and coughing
Shortness of breath
An intense feeling of burning on all exposed areas.

O.C. will not be used for punishment, retaliation, or disciplinary purposes.



Pod and Facility Rules

1. It is your responsibility to know and clearly understand JRF rules, they are posted on the pod as well as below.
2. You are to address staff as "Officer, Mr., Mrs., or Miss before the last name of staff. You may also address staff as "Sir" or "Ma'am".
3. You are to speak respectfully and without profanity to staff and other residents at all time
4. You are to say "please" and "thank you"
5. Gang Moniker or other nicknames and inappropriate language are not allowed
6. You will receive and identification bracelet. This bracelet is to be worn at all times. If torn or ripped, advise staff and it will be replaced
7. Shirts are to be tucked in at all times, except on the recreation yard
8. Sagging is not permitted, underwear is never to be visible
9. Hair must be worn above the collar
10. During all line up and movement, keep your hands behind your back and face forward
11. When in line talking is not allowed
12. Do not move from your assigned seat without permission from staff. You must raise your hand to get permission
13. Horseplay in your room and in the pod dayroom is not allowed
14. Hitting/kicking doors and walls, and yelling from your room is not allowed
15. Graffiti, spit, food, etc., are not allowed on the walls, ceiling, floor, furnishings, etc.
16. Any intentional damage to JRF or defacing of county property; you, your parents or guardians may be billed and additional criminal charges may be filed against you
17. Follow the instruction of staff immediately, without argument or question
18. Under NO circumstances are you to be on the 2nd tier unless you live there
19. Absolutely no horseplay on the stairs
20. No more than 2 residents on the stairs at a time
21. You are to make requests from staff, not demands. Demands will not be met
22. Do not pass notes or other material, including food, to other residents
23. Sexual activity and any other physical contact with staff or other residents is prohibited and will result in consequences, including the possibility of additional criminal charges
24. Do not discuss negative subject matter with other minors, including drugs, breaking the law, your court case, etc. All court cases are confidential. Any information overheard may be reported to law enforcement & used against you in court.

SHASTA COUNTY

Juvenile Rehabilitation Facility Orientation Manual



Welcome to the JRF, here are some things you need to know while you are here:

Staff are Peace Officers. If a staff is battered or assaulted by you or with your assistance, you may be subject to further criminal charges for Battery Against a Peace Officer (830.5(b) PC, 241(b)PC, 241(c)(1) PC

Non Discrimination Policy

It is the policy of the Shasta County Juvenile Rehabilitation Facility that all residents shall be provided with fair and equal access to all available services, placement, care, treatment and benefits offered in the facility. No person shall be subject to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability or HIV status.

USE OF FORCE, RESTRAINTS & CHEMICAL AGENTS

Be advised that JRF Staff are authorized to use force, to include the use of O. C. Pepper Spray and physical restraints (handcuffs, shackles) under the following circumstances:

1. During transportation of a minor from one location to another location.
2. To protect a minor from self-inflicted injuries or suicide.
3. Self-defense or defense of other staff or minor(s).
4. To prevent destruction of county property.
5. To prevent escape.
6. To control, restrain, or subdue imminent violent behavior.

Restraints will not be used for punishment, retaliation, or as a substitute for treatment. If you are unable to control your behavior and your behavior indicates that you are at risk of harming yourself and/or others, you may be placed in handcuffs and/or shackles, and held in place on the floor in a room alone until you give a believable commitment that you can maintain self-control.

ADMITTANCE AND ORIENTATION PROCEDURES	Date: 09/30/2010
Authority Reference: Title 15 Article 5 Section 1350 Title 15 Article 5 Section 1353 Title 15 Article 8 Section 1430	
Attachments: Probable Cause Declaration Form and Supplemental Form Juvenile Hall Court Ordered Booking Form Medical Pre-Screening Form Routine Medical and Emergency Treatment Consent Juvenile Hall Face Sheet Probation Detain/Release Criteria Form Personal Property Record Form Juvenile Hall Weekend Commit Booking Form Juvenile Warrants Served on Minors 18 Years of Older Letter Juvenile Hall Facility Orientation Test Juvenile Hall Orientation Manual/Level System Juvenile Hall Orientation Brochure Juvenile Hall Orientation Brochure – Spanish version	

PURPOSE:

To outline a uniform method for receiving and admitting minors, and to provide confined minors with information that will allow a positive outcome during their confinement. The Orientation and Admissions procedure is to be guided by the component parts of the Juvenile Hall's Mission Statement.

PROCEDURE:

- I. Every minor admitted to Juvenile Hall will receive an orientation from staff.
 - A. Minors who are to be released within six (6) hours need only receive orientation consistent with their depth of involvement in the program.
 - B. All levels of orientation will be conducted in an atmosphere of mutual respect and consideration.
 - C. Staff are to approach minors in a non-judgmental manner regardless of the minor's behavior or the nature of the offense(s).
- II. Orientation begins immediately upon receiving a minor.
 - A. A high degree of interaction is maintained throughout the Orientation and Admissions process. Therefore, orientation to the facility and its rules will be conducted orally by staff to each minor booked.
 1. Written material will also be used to enhance the process. It is never to be used in place of the interactive process.
 - a. Staff is to provide a copy of the Orientation Brochure, which provides information about facility rules, expectations, and procedures.

2. To the minor understands the rules and expectations, staff will facilitate an Orientation Quiz.
3. The Orientation Brochure is available in Spanish, if needed.
4. In addition, Shasta County contracts with various individual to use for translator purposes. If this is a need, see the Supervisor on Duty/Duty Officer who will access this service via county policy/procedure.
5. The Orientation Manual is available on each living unit and available upon request. It provides the same information as the Brochure in additional detail.
- B. Staff is to provide complete and concise information regarding the facility's purposes, programs, resources and goals, and assure the minor that he/she is an integral part of the Juvenile Court process.
- C. Throughout the Orientation/Admissions process, staff are to assess the minor's behavior, emotional state, supervision and protection needs, communication capabilities, and any evidence of problems that will require intervention.

III. Duties of the A-Unit and Control Desk staff:

- A. When a new admission arrives, the A-Unit staff will notify appropriate staff on other Units. This notification may include a request for standby, backup, and/or assistance depending on the number and condition of minors being admitted and on what other needs may exist in the Unit A area (minors needing room checks, school, or other activities in the program area, etc.).
- B. The A-Unit and Control Desk staff will make an immediate assessment of the risk level of the minor based on the following:
 1. Level of cooperation with the arresting officer
 2. Need for restraints, O. C. deployed, etc.
 3. Intoxication level
 4. Mental state, medical needs
- C. Immediately upon entry to Juvenile Hall, an intake medical screening will be completed on every minor. With this screening, staff can assess if a minor is at risk (high or low) for suicidal ideation. If deemed low risk, the minor will be referred to the nurse at sick call. If minor is deemed to be a high risk, medical staff will be notified. Refer to Suicide Prevent Policy/Procedure.
- D. The Booking staff will proceed with regular processing once the high-risk situation is contained. Staff are strongly encouraged to do the following:
 1. Welcome the minor to the Juvenile Hall, and introduce yourself. Attempt to calm the minor's fears, anxieties, hostility, and concerns (both stated and displayed). Assess for crisis and situational counseling needs, and provide for these needs to be met as appropriate.
 2. Advise the minor about what he/she to expect during the admissions process, including paperwork, screening, personal property, search, shower, and assignment to a Unit. Begin the admissions process, while continuing to complete the orientation. If a decision has been made to release the minor, complete only the Orientation/Admission process the situation requires.
- E. If the decision is to admit the minor and he/she has obvious or serious medical problems, refer to "Intake Health Screening Policy." Meet all medical needs.
- F. For all minors booked into the Hall, staff will comply with the following:
 1. If the minor is received during regular business hours, call an intake officer or appropriate supervision officer to accept the juvenile referral.

2. If the minor is received after regular business hours, the Supervisor on Duty/Duty Officer will receive the juvenile referral and review it for completeness.
3. If the arresting officer requests an immediate consultation with the assigned Probation Officer after regular business hours, staff may contact the Probation Officer if their number is included on the approved after hours Probation Officer call list.
 - a. If their number is not included on this list, staff shall refer the officer to the Supervisor on Duty/Duty Officer.
 - b. If this is not an option, staff shall refer the officer to the Juvenile Probation Division Director.
 - c. If the Juvenile Probation Division Director is unavailable, contact the Juvenile Hall Division Director.
 - d. If the Juvenile Hall Division Director is unavailable, the Supervisor on Duty/Duty Officer will advise the arresting officer that a message will be left on the assigned Probation Officer's voice mail because after hours contact is not desired or approved for this officer. Further explain the other efforts also attempted.
4. If the arresting officer is booking the minor on a probation violation after business hours, staff shall confirm that the minor is a ward of the Court prior to accepting the booking.
 - a. If the minor is not a ward of the Court, advise the officer that in the absence of a new, "bookable" offense, the officer must return the minor to his/her home.
 - b. If clarification is needed, contact the Supervisor on Duty/Duty Officer, the Juvenile Hall Director, or the Juvenile Probation Division Director.

IV. Booking Criteria

- A. The Supervisor on Duty/Duty Officer will be guided by the following in determining whether or not the minor is to be accepted for booking:
 1. Minor was less than 18 years of age at the time the offense was committed.
 2. Minor comes within the provisions of Section 602 of the Welfare and Institutions Code.
 3. The referring party provides a completed referral form, which includes a specific Probable Cause Statement.
 4. If the minor refuses to give pertinent information, staff will need to base a reasonable decision on all other information obtained.
 5. Minor has an active Bench Warrant.
- B. Prior to the Arresting Officer leaving Juvenile Hall, the following steps will be completed:
 1. Search of minor's person and belongings to ensure that no contraband or weapons that could result in new charges are located.
 2. Complete the medical screening process.
- C. Complete the minor's initial medical screening, including both emotional and physical assessments.
 1. Follow through with medical screening procedures per the Intake Health Screening Policy/Procedure.
 2. Indicate the date of admittance.

- D. Booking staff will then fingerprint and photograph the minor and make note that this task was completed on the Face Sheet.
- E. Initiate a file for the minor including a face sheet, property and clothing inventories, and other pertinent forms per policy.
 - 1. Thoroughly list the minor's property and clothing on the Personal Property Record.
 - 2. Ensure that everything is thoroughly checked.
 - 3. Suitcases, shoeboxes, boxes, etc., are excellent places to hide weapons and/or contraband.
- F. Have the minor complete the authorized phone calls and indicate that they have been completed on the Face Sheet.
 - 1. Minors are allowed three phone calls (parent, attorney, and if applicable, employer) within the first hour after booking and at no cost to the minor.
 - 2. Should the minor decline phone calls, a signed refusal is necessary.
- G. During the phone call to parents or guardian of the minor, staff will:
 - 1. Inquire about any special problems that the minor may have (e.g., medical, emotional, etc.) Note these on the Face Sheet.
 - 2. Complete the parent/guardian section of the Medical Screening form.
 - 3. Request that parent appear at Juvenile Hall to sign a Medical Consent form as soon as possible and request a verbal medical consent until the form is signed.
 - 4. Ask parents to bring in medication.
 - 5. Advise the parents of visiting hours and rules.
- H. At this point in the booking process, the Booking staff will assign a same-gender staff to complete the booking tasks.
- I. Assigned staff will escort the minor to the intake bathroom maintaining constant supervision of the minor.
 - 1. Once inside, the officer will exchange clothing with the minor, providing the minor with Juvenile Hall issued clothing and taking the minor's personal clothing for cleaning and storage.
 - a. During the clothing exchange, staff should make every effort to visually observe the minor for hidden contraband or weapons, injection sites and track marks, etc.
 - 1) Staff should pay particular attention to common needle injection site areas, (e.g., veins in hand, arm, thigh, neck, and tattoo areas.)
 - 2) If injection sites are noted, staff should provide appropriate information to medical staff and the Probation Officer.
 - b. Juvenile Hall staff are not to perform body cavity searches. Strip searches are only authorized pursuant to Juvenile Hall policy and must have prior authorization from the Supervisor on Duty.
 - c.
 - 1) If a body cavity search is suspected as being necessary, it must be performed by a licensed physician.
 - 2. Place the minor's personal clothing in a property bag in the property room to be laundered.
 - 3. While the minor is showering and changing into appropriate clothing, log the minor in the Unit A Logbook and assign the minor to a Living Unit. A door tag with an assigned detention officer will also be completed.

4. Living Unit staff will place the minor's name and other information on the locator board.
5. A copy of the minor's photograph will be retained in the file.
6. Ask when the minor last ate. If the minor is hungry, staff will ensure that the minor is given enough of a meal to hold them over until the next regular scheduled meal.
7. Address the minor's need for sleep and provide as necessary.

V. Personal Property:

- A. All personal property of each minor is to be listed and described completely on the Personal Property Sheet.
 1. The staff must enter the minor's full name, time and date, his/her signature, and that of the minor affirming that the items listed are all of the personal property that he/she entered with.
 2. If the minor is unable to sign (e.g., intoxicated, hostile, etc.) another staff should witness the inventory at the time the property is obtained and sign the form.
 3. Staff are encouraged to initial or mark blank lines on the property form, indicating that no property for that section was taken.
- B. Only staff on duty will have access to personal property.
- C. Minors are not permitted to enter the property room except with one-on-one supervision from staff and only then for the time necessary to clean the room.
- D. Staff supervising a minor cleaning the room will maintain direct visual supervision of the minor while in the property room.
- E. Only staff are allowed to handle clothing and personal items of the minors.
- F. Staff are to place personal property in the property bag. At no time are minors to inspect or have access to the property bag.
- G. Personal property will be stored in the personal property room as follows:
 1. All articles that will fit, except money, birth control and valuables, will be placed in a property bag and stored alphabetically with the other property bags.
 2. Minors will be given Juvenile Hall clothing upon booking.
 3. The minor's clothing will be washed, with the exception of items that cannot be safely laundered. Refer to Standard Facility Clothing Issue Policy/Procedure.
- H. Suitcases, boxes, and other large articles will be thoroughly searched then tagged with the minor's name and stored on a shelf in the property room. The location of such items will be designated on the form.
- I. Contents of pockets, purses, wallets, etc., must also be thoroughly checked. All possessions must be checked completely for additional items.
- J. All money is to be counted upon receipt and initialed by both the booking staff and a staff witness. Money and other small valuables (credit cards included) are to be placed in a coin envelope with the following information recorded on the envelope:
 1. Front of envelope:
 - a. Minor's name
 - b. Date received
 - c. Amount of money and description of all other property contained in the envelope

- d. Signature of staff recording the property
- 2. Back of envelope:
 - a. Minor's signature should be written over the sealed flap
 - b. If the minor is unable to sign (intoxicated, hostile, etc.) a staff witness should verify the contents and sign over the flap
- K. All personal belongings kept by the minor such as eyeglasses, retainers, braces, crutches, etc. will be listed and described on the Personal Property form as "IN POSSESSION".
- L. Perishable objects such as food shall be discarded.
- M. The following items will be considered contraband and will be confiscated:
 - 1. Illegal weapons/ammunition - switchblade knives with a blade over two inches long and any knife or knife-like devices that is sharpened on both sides (e.g., dirks and daggers) are the only illegal knives. The Director will forward illegal weapons to law enforcement, as appropriate.
 - 2. Liquor or any other intoxicant.
 - 3. Narcotics/material thought to be narcotics, or paraphernalia used to administer narcotics should be given to the Supervisor on Duty/Duty Officer, who will contact the Shasta County Office of the Sheriff for instructions on disposal.

***** SEARCHES SHOULD BE COMPLETED PRIOR TO LAW ENFORCEMENT LEAVING AND IN THE OFFICER'S PRESENCE IN THE EVENT ANY CONTRABAND IS LOCATED. THE CONTRABAND CAN BE TURNED OVER TO THE OFFICER TO BE INCLUDED IN THE REPORT. *****

- 4. Tobacco products/lighters.
- N. A Special Incident Report must be submitted whenever items are confiscated.
- O. When notified of a minor's change of name, staff will change the name on the Personal Property form, coin envelope, and all other personal clothing (boxes, bags, etc.) belonging to the minor.
- P. Personal property transactions other than during admittance or release will be guided by the following:
 - 1. All transactions must be recorded on the Personal Property form by the staff at the time they occur.
 - 2. They must be signed by the staff requesting the property, the staff taking or bringing the property, and the minor.
- Q. Personal property is not to be removed until the minor's release, except:
 - 1. When a minor is allowed to retain possession of the property, such as eyeglasses.
 - a. Staff removing property for the minor to wear should note on the property sheet "IN POSSESSION" next to that item, initial and date.
 - 2. When requested by law enforcement agencies.
 - 3. When parents request to exchange clothing for repair, laundering, unsuitability, etc. Before clothing can be released under these circumstances, the parents must leave a set of clothing to replace it.
 - 4. When requested by parents, rightful owners, etc., and the minor is willing to sign for its release and not the minor's only set of clothing.

- a. If the minor refuses, authorization may be given by the Probation Officer or Parole Officer.
- 5. In such cases, include the officer's name, time, date, and your signature on the property form when personal property is released.
- R. Items received after initial property inventory will be listed and described on the property form. Include the time and date, from whom received, and the signature of the staff making the transaction.

If the items are for the minor to use while detained, list them and note "IN POSSESSION" before giving them to the minor.

- S. Graveyard staff is responsible for conducting a bi-monthly verification of property. This should be done the first and third Sunday of each month.
 - 1. Items listed as "IN POSSESSION" on the personal property form do not have to be inventoried.
 - 2. If items are missing and not noted as "IN POSSESSION", graveyard staff is to send a memo to the minor's Unit noting what is missing.
 - 3. Day shift staff is to attempt to locate the missing articles. If the articles are with the minor, the staff should then note "IN POSSESSION" on the form.
 - 4. If the item cannot be located, the memo should be passed on to the Division Director indicating that the items appear to be missing.
- T. Periodically, the Division Director will review the above personal property system to verify compliance.

- VI. When minors received by Court order, staff will:
 - A. Ask the minor and observe if he/she has any injury, illness, or unusual condition. If the minor requires emergency treatment, Juvenile Hall staff will transport per Intake Health Screening Policy/Procedure.
 - B. Have the minor turn over personal property to you while informing the minor that any contraband discovered during the search process may result in disciplinary consequences.
 - C. Weekend only commitments: Staff will:
 - 1. File all paperwork as it is received in the Weekend Commitment file.
 - 2. Pull the necessary paperwork when the minor appears for admittance on the weekend.
 - 3. Admit the minor following all admittance directives.
 - 4. Contact the Unit to which the minor is assigned, and ask one of the staff to walk the minor to the Unit.

- VII. Duties of Unit Staff:
 - A. Greet the minor and introduce yourself. Address any fears or concerns, and assess the minor for immediate, continuing, and other follow-up counseling needs.
 - B. Let the minor know what to expect of the Unit and the Juvenile Hall Program.
 - 1. Provide the minor with a copy of the Orientation Manual, a more detailed explanation of facility rules, expectations, programs, and procedures.
 - 2. Additional copies of the Orientation Manual are stored on the housing units.

- C. Complete and inform the minor of the following:
1. Room assignment.
 2. Who their Probation Officer will be and when they will be on duty.
 3. Reiterate who their Probation Officer will be and what they can expect in terms of contact.
 4. Explain staff responsibilities to the minor (being guided by the sections above.)
 5. Assign minor to level system. A new booking is on "int" (intake) status, as is a Court-Ordered booking is a Black Level 3.
-
6. Explain the minor's responsibilities to:
 - a. Themselves
 - b. Their peers
 - c. Staff
 - d. Others
 - e. Their room, the Unit, and the Hall
 - f. Explain level system
 7. Review the purpose of the program and the Juvenile Hall mission. Explain the role of the case plan process in meeting these purposes.
 8. Review their rights while in custody, due process procedures, and the grievance procedure.
 9. Review program rules and routines, including:
 - a. Basic rules
 - b. Discipline
 - c. Outside contacts (visiting, telephone calls, mail, etc.)
 - d. Services available (including counseling, school, medical, recreation, church, etc.)
 - e. Daily schedule
 10. Allow them to ask questions. When complete, this is the time to present visual aids or information to the minor.

VIII. Caseload Orientation

- A. Staff must review caseload assignments, as soon as practical, upon arrival for each shift. It is very important to make immediate contact with minors new to a caseload.
1. Introduce yourself, identify your responsibilities as their assigned detention officer, explain the importance of developing a positive relationship, and the case plan process.
 2. Answer the minor's questions as honestly as possible. Refer questions to the assigned Probation Officer as appropriate.

IX. Probable Cause Determination and Review

- A. The Supreme Court has issued a ruling in the Alfredo A. case (26 Cal. Rptr.2d 623) effective January 24, 1994. The case is available in the office for review but the relevant summary is:
1. Juvenile arrestees must be afforded judicial determination of "probable cause" for any post arrest detention extending beyond a 72-hour period immediately following warrantless arrest. A statutory formal detention hearing may serve to fulfill constitutional determination of probable cause

where it is held within 72 hours. However, if the 72-hour period immediately following a juvenile's warrantless arrest includes one or more "non-judicial days", such that the Juvenile Court is unable or unwilling to provide full statutory detention hearing within that period, then the Fourth Amendment independently requires that the juvenile be afforded separate, timely judicial determination of probable cause for any extended period of detention beyond 72 hours following arrest.

2. Therefore the following policy is to be followed:
 - a. All minors detained in the Juvenile Hall on other than a warrant to include both arrests for new offenses and 777 W & I arrests will have a probable cause statement completed by the arresting officer.
 - b. "Booked 777a W & I per Officer X" is not adequate; the actual violation must be described.
 - c. The arresting officer should not leave the facility until the probable cause statement is completed.
 - d. For non-holiday weeks any minor being taken into custody between Tuesday at 1700 and Friday at 0900 who will not have an early detention hearing during that time must have a judicial review of probable cause.
 - e. For weeks when Friday is a holiday, the minors requiring judicial review will include those booked from Monday at 1700 through Friday at 0900.
 - f. For those weeks when the following Monday is a holiday, the period will extend through Saturday at 0900.
 - g. For minors booked before the Judge leaves on Friday morning, it will be the responsibility of the Probation Officer to have the Judge sign the probable cause reviews (those may be provided to the Court Officer before Court).
 - h. For those minors booked on non judicial days, who will not have a detention hearing by 72 hours (this should only occur on holiday weekends) the Supervisor on duty/Duty Officer will call the Sheriff's Department Dispatch and retrieve the phone number for the on-call Judge. That officer will then contact the on-call Judge for a telephonic review as outlined below.
 - i. A short form must be filled out and attached to the booking slip.
3. If you are having the Judge review the probable cause statement on the booking sheet and having him sign the review form, simply attach the form to the booking sheet and place in the file.
4. If probable cause review is required on a holiday weekend, the Judge will be calling to review the probable cause statement.
 - a. Read the statement to him and document time and Judge doing the review.
 - b. Attach to the yellow copy of the booking statement and send it to Probation.
 - c. On Monday morning (or Tuesday if Monday is a holiday) the Court Officer will take all probable cause reviews into the Court for the Judge's signature.

5. If the Judge denies the probable cause review, advise that the minor will be released.
 - a. The Judge may request that you contact the officer for additional information.
 - b. Notify the arresting officer, or assigned agency if the officer is not available, and inform of the release.
 - c. The minor must be released at that time unless the arresting officer wishes to provide the Judge with additional information as to probable cause and the Judge approves the probable cause.
6. Probable Cause Statements submitted at booking should, by law, contain all pertinent elements of the crime for which the minor is being booked.
 - a. If the Probable Cause Statement does not satisfy the elements of the crimes alleged, the minor must be released or the statement rewritten within the proper timelines.
 - b. Remember that certain terms like “was in a fight”, “was verbally abusive”, etc., are conclusive and must be supported by facts.
 - c. Noting, “see attached report” does not qualify as a valid Probable Cause, and in these cases, the minor will be released immediately.
 - d. Please review the following examples prior to accepting a minor for booking to ensure the Probable Cause statement is correct.

INCORRECT	CORRECT
Minor in physical altercation.	On 3-1-99, Johnny Jones hit Mary Smith in the right eye causing swelling and redness.
Minor threatened the teacher at school.	On 7-1-99, Johnny Jones told his teacher, Mary Smith, that he was going to shoot her in the parking lot.
Minor in violation of curfew.	On 1-1-97, Johnny Jones was in the Safeway parking lot at 1 a.m. with no adult supervision.
Minor under the influence of alcohol/pot (647(f) PC).	On 2-1-99, Johnny Jones was in the Safeway parking lot with red, glassy eyes, slurred speech, and a strong smell of alcohol/pot on his person and was unable to care for himself in that he kept falling to the ground.
Minor was truant from school.	On 2-1-99 through 3-1-99, Johnny Jones was absent from school without a proper excuse.
Minor was with other gang members.	On 7-1-99, Johnny Jones was with documented Crip member, Amy Blue, at MLK Park and in possession of a blue bandanna that is used for gang identification.
Minor was present at a racial fight which resulted in great bodily injury to the victim.	On 9-1-99, Johnny Jones held the victim while Mike Kay hit the victim in the head with a tire iron. During the assault, Johnny told the victim “All you gooks are gonna die tonight.”
Minor arrested for his involvement in an assault on a subject that resulted in his getting stabbed and sustaining great bodily injury.	On 3-1-99, Johnny Jones stabbed Ralph Lauren in the chest with a folding knife resulting in the hospitalization of the victim for a collapsed lung.

Subject was believed to be responsible for having stabbed a subject causing great bodily injury.	On 3-1-99, Johnny Jones stabbed Ralph Lauren in the chest with a knife found in the minor's possession. Victim sustained a collapsed lung.
Juvenile entered store with the intent to steal and, in fact, completed crime. Exited without paying.	On 2-14-99, Julie Brown entered Pay Less, concealed a bottle of Tequila Gold in her coat, and left the store without attempting to pay. Minor had no money in her possession and said she intended to steal the alcohol before she entered Pay Less.
Minor failed Camp placement.	On 3-1-99, Johnny Jones refused to mop the kitchen floor after dinner and told the cook to "fuck off" in violation of the camp rules to follow all orders promptly.
Minor failed group home.	On 9-1-99, Johnny Jones left his group home without permission and was gone overnight. On 9-3-99, the minor refused to make his bed and threw a telephone at group home staff member, Jeff Fahey.

X. Crime Elements

State the source of your information to show each element and identify (Examples: "I saw..." "The arrestee said..." "Mrs. Brown told me...")

A. Penal Code

148 PC

Resisting

1. Victim was a public officer
2. Victim was performing official duty
3. Arrestee knew/should have known 1 and 2
4. Arrestee did/said something that delayed, resisted, or obstructed

211 PC

Robbery

1. Victim had possession of personal property of some value
2. Arrestee took the property from the person, possession, or immediate presence of victim
3. Taking was against victim's will
4. Taking was done by force, fear, or intimidation
5. Arrestee intended to deprive victim permanently

240/242 PC

Assault and Battery

1. Arrestee tried to injure victim
2. Arrestee used force or violence on the victim

241/243 PC

Assault and Battery on Officer

1. Arrestee tried to injure an officer
2. Arrestee used force or violence on an officer
3. Officer was performing official duty
4. Arrestee knew/should have known victim was an officer performing official duty

245(a) PC

ADW

1. Arrestee committed assault (attempt to injure)

2. Arrestee used either a deadly weapon or force likely to cause great bodily injury

245(b) PC

ADW on Officer

1. Arrestee attempted to injure officer
2. Arrestee used either a deadly weapon or force likely to cause great bodily injury
3. Officer was performing official duty
4. Arrestee knew/should have known victim was an officer performing official duty

261(2) PC

Forcible Rape

1. Arrestee had sexual intercourse with victim
2. Victim is not arrestee's spouse
3. Intercourse was against victim's will
4. Arrestee used force or fear of immediate and unlawful bodily injury to victim or someone else

j

288(a) PC

Child Molest

1. Arrestee committed lewd or lascivious act
2. Act involved any part of a child's body
3. Child was under 14 years of age
4. Act was to arouse/appeal/gratify lust or passions or sexual desires of either arrestee or child

314.1 PC

Indecent Exposure

1. Arrestee exposed his private parts
2. With the intent to attract public attention for arousal or to affront
3. In public or where other persons were present to be offended or annoyed

415 PC

Disturbing the Peace

1. Arrestee fought or challenged another to fight
2. In a public place
- or
1. Arrestee maliciously disturbed another
2. By loud and unreasonable noise
- or
1. Arrestee used offensive words
2. In a public place
3. Words were likely to provoke an immediate, violent reaction

417(a)(1) PC

Threatening with weapon

1. Arrestee drew or exhibited a deadly weapon, other than a firearm
2. In the presence of another
3. In a rude, angry, or threatening manner
4. Arrestee was not acting in self-defense
- or

1. Arrestee used a deadly weapon, other than a firearm
 2. In a fight or quarrel
 3. Arrestee was not acting in self-defense
- 459 PC First Degree Burglary
1. Arrestee entered a structure
 2. Structure was an inhabited dwelling or portion of a building
 3. At time of entry, arrestee intended to steal or commit a felony inside
- 459 PC Second Degree Burglary
1. Arrestee entered structure or locked vehicle
 2. At time of entry, arrestee intended to steal or commit felony inside
- 496 PC Receiving Stolen Property
1. Arrestee bought/received/concealed/sold/withheld property
 2. Property was stolen
 3. Arrestee knew the property was stolen
- 647(a) PC Lewd in Public
1. Arrestee engaged in or solicited a public lewd act
 2. In a public place or exposed to public view
 3. Arrestee should have known someone present might be offended
- 647(b) PC Prostitution
1. Arrestee engaged in, or solicited, or agreed to perform a lewd act or sexual intercourse
 2. In exchange for money
 3. With intent to engage in prostitution
 4. (Agreement only: Committed some act in furtherance)
- 647(f) PC Drunk in Public
1. Arrestee was in a public place
 2. Under the influence of alcohol/drugs
 3. Unable to care for his or public safety

**SHASTA COUNTY PROBATION DEPARTMENT
PROBABLE CAUSE DECLARATION
JUVENILE HALL PRE-BOOKING FORM**

DATE/TIME OF ARREST		LAST NAME		FIRST NAME	MIDDLE NAME	AGENCY CASE #	
SEX <input type="checkbox"/> M <input type="checkbox"/> F		RACE <input type="checkbox"/> W <input type="checkbox"/> I <input type="checkbox"/> H <input type="checkbox"/> B <input type="checkbox"/> A OTHER: _____		DOB	AGE	HEIGHT	WEIGHT
HAIR COLOR <input type="checkbox"/> BRO <input type="checkbox"/> BLN <input type="checkbox"/> RED <input type="checkbox"/> BLK <input type="checkbox"/> GRY <input type="checkbox"/> WHT		EYE COLOR <input type="checkbox"/> BRO <input type="checkbox"/> HAZ <input type="checkbox"/> GRY <input type="checkbox"/> BLU <input type="checkbox"/> GRN <input type="checkbox"/> BLK		SCARS/MARKS/TATTOOS			
ADDRESS				ARRESTING AGENCY <input type="checkbox"/> APD <input type="checkbox"/> CHP <input type="checkbox"/> SCPD <input type="checkbox"/> RPD <input type="checkbox"/> SO <input type="checkbox"/> OTHER: _____		ARRESTING OFFICER (last, first)	
SOCIAL SECURITY NUMBER		LOCATION OF ARREST			PLACE OF BIRTH (city & state)		
DRIVERS LICENSE NUMBER		VEHICLE LOCATION/TOWING AGENCY			CLOTHING DESCRIPTION		
VICTIM:							
CHARGES: (please write exact code)							
CHARGE 1. _____		<input type="checkbox"/> MISD <input type="checkbox"/> FEL		CHARGE 3. _____		<input type="checkbox"/> MISD <input type="checkbox"/> FEL	
CHARGE 2. _____		<input type="checkbox"/> MISD <input type="checkbox"/> FEL		CHARGE 4. _____		<input type="checkbox"/> MISD <input type="checkbox"/> FEL	
FACTS ESTABLISHING ELEMENTS AND IDENTIFICATION OF MINOR:							
OFFICER				BADGE NO.		<input type="checkbox"/> SUPPLEMENTAL PC	

Reason for Detention:

☐ Likely to flee the jurisdiction of the Court
☐ No Parent, guardian, or relative exercising control

☐ Violated Court Order
☐ Other: _____

☐ Protection of minor/person/property of others

Parent/Guardian Notified: Date: _____ Time: _____ By Whom: _____
Father: _____ Address: _____ Phone: _____ Bus. Phone: _____
Mother: _____ Address: _____ Phone: _____ Bus. Phone: _____

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY INFORMATION AND BELIEF.

EXECUTED ON _____ AT SHASTA COUNTY, CALIFORNIA, BY

(DATE)

(SIGNATURE)

JH Detention Officer: _____ Booked Date/Time: _____ Assigned PO# _____

Telephonic Approval of Probable Cause Statement ☐ Approved ☐ Denied

Reviewed with Judge _____ on _____ (Date and Time) by JH Det. Officer _____

ON THE BASIS OF ☐ THE OFFICER'S DECLARATION ☐ REPORTS REVIEWED, I HEREBY DETERMINE THAT THERE
☐ IS ☐ IS NOT PROBABLE CAUSE TO BELIEVE THIS MINOR HAS COMMITTED A CRIME.

(DATE)

(TIME)

(SIGNATURE OF JUDICIAL OFFICER)

☐ Closed after investigation: _____ (explain) ☐ Referred to JAC
☐ Closed, referred to other county agency: _____
☐ Closed, referred to out-of-county agency: _____

Distribution : White – Minors file, Yellow & Pink – Probation, Goldenrod – Arresting Agency

**Shasta County Probation Department
Juvenile Hall**

**PROBABLE CAUSE DECLARATION
SUPPLEMENTAL**

Minor's name: _____

Agency Case # _____

Blank lined area for notes or additional information.

**Shasta County Juvenile Hall
Court Ordered Booking**

_____ Future Hearing
_____ Placement
_____ Commitment – No. of Days _____ / _____ Day Commitment – No. of Days _____

Name _____ Aka _____ Offense _____

DOB _____ Age _____ Sex _____ Race _____ Height _____ Weight _____ Hair _____

Eyes _____ SOC _____ — — Scars/Marks/Tattoos _____

Attending School: Yes _____ No _____ School: _____ Grade: _____

Place of birth: _____ Whom does the minor live with: _____

Father _____ Address _____ Phone _____

Mother _____ Address _____ Phone _____

Name of person to contact during custody hours: _____

Address _____ Phone _____ Phone _____

Booking Date _____ Time _____ Staff _____

Day Commitment – First day – Released to: _____

END OF COMMITMENT:

Released to: _____ Date _____ Time _____ By _____

Signature of person receiving minor _____

**SHASTA COUNTY JUVENILE FACILITIES
MEDICAL PRE-SCREENING**

Minors Name: _____ DOB: _____ Age: _____

Date: _____ Time: _____

DETENTION OFFICERS OBSERVATIONS:

Yes No Are there visible signs of trauma, wounds, or illness?

If Yes, describe:

Yes No Does the minor appear to be under the influence of drugs or alcohol?

Yes No Are there visible signs of jaundice, needle marks, lice or crabs?

Yes No Does behavior suggest danger to self or others?

Yes No Does minor appear to have any developmental disabilities like: Hearing, sight, or mental retardation?

Yes No Was the minor medically cleared at a hospital by the arresting officer prior to arrival for booking?

Level of orientation:

☐ Alert (Orientated to time, place, person) ☐ Confused

☐ Minor appears to be under the influence: **Medically Cleared** ☐ Yes ☐ No

QUESTIONS:

Yes No Were you injured in any way during the arrest process?

Yes No Is there any other serious illness or injury within the last 24 hours?

Yes No Have you been seen by a private physician or in an emergency room in the last 24 hours?

Yes No Have you refused medical treatment from any one in the last 24 hours?

Yes No Are you now under a doctor's care for medical or psychiatric reasons?

Yes No Do you wear contact lenses? (If yes have minor remove put in case with name on it and place on nurses desk)

Yes No Do you have a therapist? Name of therapist or agency? _____*

Yes No Are you taking any medications?

Yes No Parents contacted for medication information? **LIST MEDICATION INFORMATION ON THE BACK**

Yes No Do you have any of the following?

☐
☐
☐

Diabetes
HIV or AIDS
Hepatitis

☐
☐
☐

High Blood Pressure
Emphysema
Venereal Disease

☐
☐
☐

Tuberculosis
Seizures
Asthma

☐
☐
☐

Heart Disease
Psychiatric Problems
Cancer

Do you use any? ☐ Drugs ☐ Alcohol

Type/amount used daily? _____

Time of last dose or drink? _____

Yes No Have you ever thought of/attempted suicide? _____

Yes No Do you feel suicidal now? _____

Yes No Are you allergic to any foods/medications? _____

Yes No Are you on a special diet? _____

HAVE YOU HAD ANY OF THE FOLLOWING:

Comments: _____

Yes No A cough lasting more than 3 weeks? _____

Yes No Night Sweats or unexplained fatigue? _____

Yes No Exposure to TB within the last year? _____

Yes No Weight loss of more than 10 pounds without dieting? _____

Yes No Sick call procedure explained? _____

Initials

FEMALES ONLY:

Yes No Are you pregnant? Due Date: _____

Yes No Have you had an abortion or delivered a baby within the last 6 months?

Yes No Are you currently using birth control?

Juvenile Detention Officers Signature: _____

Minor's Signature: _____

Yes No Medical Staff Called? If yes, Medical Staff Signature: _____

Medically Cleared for Booking by: _____

Prescription and Dosage	Prescription #	Pharmacy

Original: Medical Copy: Minor's file

ROUTINE MEDICAL AND EMERGENCY TREATMENT CONSENT

I certify that I am the parent/guardian of _____,
a minor.

I "hereby" consent that the authorities of Shasta County Probation Department and/or their contracted medical provider, and their designate may provide emergency services and medical treatment for the above named minor while in their custody. I also give my consent to the contracted medical provider to complete the above named minors immunization/vaccine record as recommended by the Shasta County Public Health Department.

And I further authorize any physician or surgeon, of good standing, selected by the above said authorities, to perform surgery or administer medical treatment, when in the opinion of such physician or surgeon such safety of said minor and when in the judgement of said physician or surgeon, the delay required to make contact with the undersigned would endanger the health and safety of said minor. This form will be valid for one year from the date signed unless rescinded in writing by the undersigned.

Dated this _____ Day of _____ 20_____

(Parent or Guardian) (Witness)

(Date) (Date)

Father's Name _____ Phone: () _____

Address _____ Business Phone: () _____

Mother's Name _____ Phone: () _____

Address _____ Business Phone: () _____

Name of person financially responsible for minor: _____

Is the minor covered by insurance? _____ Medi-Cal? _____

Insurance Co.: _____

(Name and address)

Policy Holder: _____ Policy/ID# _____

Medi-Cal Identification #: _____

(Please attach current card)

Please list any other places/phone numbers where a parent/guardian can be contacted in case of an emergency.

Verbal Medical Release at Time of Booking

Verbal Consent for Medical TX: **Y** **N** Date: _____

Verbal medical consent for psychotropic medications: **Y** **N** Date: _____

Consent obtained from: _____ Relation to Minor: _____

SCJH FACE SHEET															
Minor's Name		Last						First							
Intake Date				Intake Time						(Hours)					
Intake Staff		Last						First							
CLASSIFICATION ISSUE(S) (Check Applicable Box(es))															
Assault / Battery Charge				Predator						Stature		Large		Small	
Criminally Sophisticated (History)				Sex Charge						Suicide (Attempts / Ideation / Statements)					
Escape / Attempted Escape				Sexual Deviation						Victim					
Gang-Related / Racial Charge				Sexual Orientation						Other:					
Intake Demeanor				Calm / Cooperative				Anxious / Agitated				Assaultive / Combative			
PO Info / Updates															
MSR (MAXIMUM Security Risk)				SR (Security Risk)				SPECIAL PROGRAM							
ON	OFF	DATE	STAFF	ON	OFF	DATE	STAFF	ON	OFF	DATE	STAFF				
XXXR (Sex Charges)		XXXB (Behavior)		SUICIDE RISK (...) (Once On – Always On)				GA (Gang Affiliation)							
ON	OFF	DATE	STAFF	ON	DATE	STAFF	ON	OFF	DATE	STAFF					
GANG INDICATOR(S)				MEDICAL ISSUE(S)											
Moniker(s) / Affiliation(s) /Tattoo(s) (Note Clothing / Colors, etc)				Special Medical Issues / Special Dietary Needs / Allergies											
Court N/C															
PO N/C															
Booking N/C															
INTAKE SEARCH		Medical Bracelet		Chlamydia Screen		Door Tag									
DRAI		Search Form		Assigned PO Name:		PO#:									
New Fingerprints		Detain/Release Criteria		Unit / Officer		B	C								
Intake Photo		Medical Questionnaire		Property Sheet		Orientation Booklet / Test									
PARENT(S) NOTIFIED? DATE: TIME:				VERBAL MEDICAL CONFIRMATION? Yes No											
MINOR REFUSED PARENT / GUARDIAN CALL				PARENT / GUARDIAN REFUSED INTAKE CALL											
Parent/Guardian Call				Attorney Call: Yes Refused				Employer Call: Yes Refused							
Phone #				Phone #				Phone #							
Name				Name				Name							
Relation															
Attempt #1 Date/Time				Attempt #1 Date/Time				Attempt #1 Date/Time							
Attempt #2 Date/Time				Attempt #2 Date/Time				Attempt #2 Date/Time							
Attempt #3 Date/Time				Attempt #3 Date/Time				Attempt #3 Date/Time							
I Have Completed Phone Calls As Indicated Above				Intake		X									
Intake Completed Phone Calls As Indicated Above				Staff		X									
I Have Refused Phone Calls As Indicated Above				Intake		X									
RELEASE INFORMATION															
Released To				Date				Time							
Relationship				Phone											
Address															
MEDS RELEASED? Y / N (If Yes, Releasing Staff Signature Required): X															
Receiving Party Signature						Supervisor / OIC / Staff Signature									
X						X									

Signature Date		Signature Date	
----------------	--	----------------	--

SHASTA COUNTY PROBATION DETAIN/RELEASE CRITERIA

*****THIS FORM DOES NOT PERTAIN TO DRUG COURT PARTICIPANTS WHO ARE TO BE
DETAINED UNTIL DRUG COURT COORDINATOR IS NOTIFIED*****

Minor: _____ DOB _____ Date: _____
Probation Officer / Detention Officer: _____
Offenses: _____

DETENTION DECISION: Pursuant to Section 628 WIC and Local Guidelines the minor SHALL be released unless one or more of the following conditions exist.

YES NO

- ☐ ☐ Minor is in need of proper and effective parental care and control.
☐ ☐ It is a matter of immediate and urgent necessity for the protection of the minor, or a reasonable necessity for the protection of the person(s) or property of another.
☐ ☐ Minor is likely to flee the jurisdiction of the Juvenile Court.
☐ ☐ Minor has violated an order of the court.
☐ ☐ The Minor is physically dangerous to the public or himself.
(Example is history of mental illness).
☐ ☐ Warrant for arrest-No. _____ Court: _____
☐ ☐ The Minor is booked on an offense listed in 707(b)WIC.
(These offenses are listed on the back)
☐ ☐ Present booking for out of Home Placement Failure.

RECOMMENDATION/DECISION:

- ☐ Minor be detained. Approved by Supervisor: _____
☐ Minor to be released to parent or guardian: _____

(Signature of releasing employee)
Probation Officer who authorized release: _____

Reasons for Exception (Exception can be made that are not pursuant to the above criteria but must be approved by a supervisor; and the reason needs to be articulated here: An example of reasons to vary are included below)

EXCEPTION APPROVED BY: _____

MITIGATING FACTORS

Stable and supportive family or caretaker
Stability in school and or employment
No arrests in the last year
First offense and unsophisticated

AGGRAVATING FACTORS

Runaway from home
Poor or no attendance at school
Very sophisticated crime
More than three current offenses

707(b) WIC OFFENSES

- (1) Murder.
- (2) Arson, as provided in subdivision (a) or (b) of Section 451 of the Penal Code.
- (3) Robbery.
- (4) Rape with force or violence or threat of great bodily harm.
- (5) Sodomy by force, violence, duress, menace, or threat of great bodily harm.
- (6) Lewd or lascivious act as provided in subdivision (b) of Section 288 of the Penal Code.
- (7) Oral copulation by force, violence, duress, menace, or threat of great bodily harm.
- (8) Any offense specified in subdivision (a) of Section 289 of the Penal Code. (Forced Sexual Penetration)
- (9) Kidnapping for ransom.
- (10) Kidnapping for purpose of robbery.
- (11) Kidnapping with bodily harm.
- (12) Attempted murder.
- (13) Assault with a firearm or destructive device.
- (14) Assault by any means of force likely to produce great bodily injury.
- (15) Discharge of a firearm into an inhabited or occupied building.
- (16) Any offense described in Section 1203.09 of the Penal Code. (listed Crimes against persons 60 years or older or the handicapped when great bodily injury is inflicted.)
- (17) Any offense described in Section 12022.5 or 12022.53 of the Penal Code. (Use of a Firearm)
- (18) Any felony offense in which the minor personally used a weapon listed in subdivision (a) of Section 12020 of the Penal Code.
- (19) Any felony offense described in Section 136.1 or 137 of the Penal Code. (Intimidating a witness or victim influencing testimony or information)
- (20) Manufacturing, compounding, or selling one-half ounce or more of any salt solution of a controlled substance specified in subdivision (e) of Section 11055 of the Health & Safety Code.
- (21) Any violent felony, as defined in subdivision (c) of Section 667.5 of the Penal Code, which would also constitute a felony violation of subdivision (b) of Section 186.22 of the Penal Code. (gang activity)
- (22) Escape, by the use of force or violence, from any county juvenile hall, home, ranch, camp, or forestry camp in violation of subdivision (b) of Section 871 where great bodily injury is intentionally inflicted upon an employee of the juvenile facility during the commission of the escape.
- (23) Torture as described in Sections 206 and 206.1 of the Penal Code.
- (24) Aggravated mayhem, as described in section 205 of the Penal Code.
- (25) Carjacking, as described in Section 215 of the Penal Code, while armed with a dangerous or deadly weapon.
- (26) Kidnapping, as punishable in subdivision (d) of Section 208 of the Penal Code.
- (27) Kidnapping, as punishable in Section 209.5 of the Penal Code.
- (28) The offense described is subdivision (c) of Section 12034 of the Penal Code. (Discharge of a firearm from a vehicle at another person)
- (29) The offense describe in Section 12308 of the Penal Code. (Intent to murder with destructive device)
- (30) Voluntary manslaughter, as described in subdivision (a) of Section 192 of the Penal Code.

SCJH PERSONAL PROPERTY SHEET												
Minor's Last Name							Minor's First Name					
Intake Date					Inventoried By							
ITEM	TYPE (Circle)				QUAN.	COLOR(S)		Description / Brand (Circle)				
Belt	Leather / Weave / Web							Buckle: White Metal / Yellow Metal				
Hat	Baseball / Beanie							Logo / Design:				
Jacket	Hooded / Crew Neck / Zip Up / Button Down							Logo / Design:				
Jacket	Hooded / Crew Neck / Zip Up / Button Down							Logo / Design:				
Pants	Denim / Khaki / Dress					Pair						
Pants	Denim / Khaki / Dress					Pair						
Shirt	S/Sleeve / L/Sleeve / Polo							Solid / Stripe / Plaid / Print				
Shirt	S/Sleeve / L/Sleeve / Polo							Solid / Stripe / Plaid / Print				
Shoes	Tennis Boots Dress L/Top M/Top H/Top					Pair						
Shoes	Tennis Boots Dress L/Top M/Top H/Top					Pair						
Shorts	Swim Trunks / Walking Shorts					Pair		Logo / Design:				
Shorts	Swim Trunks / Walking Shorts					Pair		Logo / Design:				
Socks	Ankle / Mid-Top / Hi-Top					Pair						
Socks	Ankle / Mid-Top / Hi-Top					Pair						
Sweater	Crew / V-Neck											
Sweater	Crew / V-Neck											
Sweatpants	Cotton / Polyester / Nylon					Pair		Logo / Design:				
Sweatpants	Cotton / Polyester / Nylon					Pair		Logo / Design:				
Sweatshirt	Cotton / Polyester / Nylon / Hooded / Crew							Logo / Design:				
Sweatshirt	Cotton / Polyester / Nylon / Hooded / Crew							Logo / Design:				
Undershirt	S/Sleeve / L/Sleeve / Tank-Top											
Undershirt	S/Sleeve / L/Sleeve / Tank-Top											
Underwear	Boxer / Brief / Boxer-Brief / Bikini / Thong					Pair		Solid / Stripe / Plaid / Print				
Bra	Regular / Sports											
VALUABLES												
Cell Phone												
MP3 / iPod												
Earring	White Metal / Yellow Metal / Stone							Stud / Hoop				
Earring	White Metal / Yellow Metal / Stone							Stud / Hoop				
Bracelet	White Metal / Yellow Metal / Stone											
Bracelet	White Metal / Yellow Metal / Stone											
Necklace	White Metal / Yellow Metal / Medal											
Necklace	White Metal / Yellow Metal / Medal											
Ring	White Metal / Yellow Metal / Stone											
Watch	White Metal / Yellow Metal / Diver							Analog / LED				
Wallet	Leather / Nylon											
Purse	Leather / Nylon / Cloth / Solid / Print											
Keys	1 2 3 4 5 6 7 8 9 10 11 12							Loose / On Key Ring				
Credit Card	Visa / MC / Disc / Other:							#				
MISCELLANEOUS ITEMS / ADDITIONAL VALUABLES												
CURRENCY / COIN												
\$100. X		=		.50 X		=		Total Currency =				
\$50. X		=		.25 X		=		Total Coin =				
\$20. X		=		.10 X		=		GRAND TOTAL				
\$10. X		=		.05 X		=		\$.				
\$5. X		=		.01 X		=						
\$1. X		=						Secured In Safe? Yes / No				
Highlighted Item(s) Released To Parent >				Parent Signature >				Date >				
INTAKE SIGNATURES							RELEASE SIGNATURES					
I acknowledge that all of my personal property has been accurately inventoried as noted above.							I have received, in good repair, all inventoried items. I was issued a claim form for any missing items.					
X							X					
Minor's Signature				Date / Time			Minor's Signature				Date / Time	
X							X					

SHASTA COUNTY JUVENILE HALL
Weekend Commit Booking Sheet

No. of Days /

Name:

Aka:

Offense(s)

DOB

Age

Sex

Race

Height

Weight

Hair

Eyes

Complexion

Scars/Marks

Attending School:

Yes

No

School

Grade

Father

Address

Phone

Mother

Address

Phone

Name of person to contact during custody hours:

Address

Phone

Weekend #1

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #2

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #3

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #4

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #5

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #6

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #7

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #8

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #9

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Weekend #10

LOS

Booking Date

Time In

Staff

Released To

Date

Time Out

Staff

Final Weekend Booking Date

Time In

Staff

Released to _____ Date _____ Time In _____ Staff _____
Total Length of Stay _____



SHASTA COUNTY PROBATION DEPARTMENT
JUVENILE HALL
2680 Radio Lane
Redding, CA 96001
(530) 225-5838 FAX: (530) 225-5841

Wesley M. Forman
Chief Probation Officer
Edward Miller
Division Director

Redding Police Department
1313 California Street
Redding, CA 96001

Attn: Watch Commanders/Training Officers

To Whom It May Concern:

For some time there has been confusion as to when juvenile warrants served on minors 18 years old or older can be booked into jail instead of juvenile hall. I have confirmed that, pursuant to Section 208.5 of the California Welfare and Institutions Code, and despite the language on the hard copy of our warrants, the only time juvenile warrant arrestees who are of the age of majority can be booked in jail is if they are 19 years or older. Juvenile Hall staff has been advised of this clarification so that the arresting officer will no longer be placed in the position of "bouncing" an arrestee back and forth between our facility and the jail. I apologize for any inconvenience this has caused in the past. Thank you.

Sincerely,

Edward Miller
Division Director
Shasta County Juvenile Hall

Cc: Shasta County Jail Watch Commander
Juvenile Hall Staff

SCJH FACILITY ORIENTATION TEST

YOUR NAME:			DATE:			
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The following test information contained in the orientation booklet issued to you during the intake process. You may use the booklet for the test. The test is designed to insure that you are adequately familiar with facility rules. You must pass this test to be eligible to program with the group. If you are unable to pass this test, you may re-test as many times as necessary until you are successful. Juvenile hall staff will assist you should you have questions about the orientation booklet. Each question is worth 4 points. You must have a minimum of 18 correct answers to pass the test.

	QUESTIONS 1-17	T	F
1	It is your responsibility to know and clearly understand juvenile hall rules		
2	You may use your intercom to ask staff the time or to turn on the radio		
3	You must properly make your bed and clean your room when you first get-up		
4	“Horseplay” in your room is okay as long as no one get hurt		
5	For privacy, you may cover the window on your door		
6	You may pass notes and talk through the walls to other minors on the unit		
7	Any disrespect toward staff could result in room confinement		
8	“Sagging” your pants in not allowed, nor is any other gang-related activity		
9	In the day room, you must have permission to move to another location		
10	Trading food, or giving food to another minor is permitted		
11	Flashing gang signs and other gang- related activity will not be tolerated		
12	Banging on, or kicking your door is okay, especially if you’re angry		
13	Your hands must be behind your back while walking in line		
14	Contraband is anything that was not issued to you by staff		
15	If you strike a staff member, charges will be pressed against you		
16	You must wear an I.D. bracelet at all times		

17	Your parents must pay for any intentional damage you do to your room		
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SCJH FACILITY ORIENTATION TEST

	QUESTIONS 18-25	T	F
18	Juvenile Detention Officers are peace officers		
19	You may request legal services at any time		
20	You will receive a routine physical exam within 96 hours of your intake		
21	You will begin the level system as a level 2		
22	The full orientation manual that you can read can be found on the units		
23	Staff may use pepper spray for defense and control whenever necessary		
24	A racial slur is only a minor rule violation		
25	Only your parent(s) or your legal guardian(s) may visit you		

Be sure you have read the questions correctly
TAKE SOME TIME TO REVIEW YOUR ANSWERS
THERE ARE NO “TRICK” QUESTIONS!

You should discuss with staff any incorrect answers. Be sure that you clearly understand
ALL information contained in your orientation booklet. If you have any questions, **ASK!!!**

SUCCESS GUARANTEE

Do exactly what you are told, when you are asked to it, without question or comment and with
MAXIMUM motivation

SHASTA COUNTY JUVENILE HALL ORIENTATION MANUAL

ROOM EXPECTATIONS & CONDUCT

1. When staff wakes you in the morning, make your bed neatly & keep it that way.
2. Keep your room neat & clean. Throw away all garbage.
3. Keep no unauthorized items in your room. Any item not provided by staff is contraband.
4. Use only 1 pillow & 1 mattress even if there's an empty bed in your room.
5. Request cleaning supplies as needed.
6. Hitting/kicking doors & walls, & yelling from your room are not allowed.
7. Damage to your room or clothing may result in loss of level, program time, other privileges, or move to the security unit.
8. Do not cover the light, window, or intercom in your room.
9. Graffiti, spit, food, etc, are not allowed on the walls, ceiling, floor, furnishings, etc, & may result in loss of level, program time, or other privileges. You will likely be responsible for the clean up and/or minor repair. Damage and/or clean-up/repair may also be billed to your parents/guardians, & additional criminal charges may be filed against you.
10. Do not tear magazine or book pages or covers. This is destruction of property & may result in consequences.
11. Do not use the intercom unless you need to use the restroom or in an emergency.
12. Personal letters & paperwork are to be kept in your accordion file at the unit desk. Legal paperwork (Court or attorney) will be kept with your facility file. Communicate with staff to access legal paperwork.
13. Horseplay in your room & in the dayroom is not allowed.
14. Do not pass notes or other material, including food, to other minors.
15. All unit expectations are posted on each housing unit.

APPEARANCE

1. Shirts are to be tucked in at all times, except on the recreation yard.
2. Staff will determine appropriate sized clothing.
3. Sagging is not permitted. Underwear is never to be visible.
4. Hair must be worn above the collar.

HABITS

1. You are to speak respectfully & without profanity to staff & other minors at all times.
2. You are to say "Please" & "Thank you".
3. You are to make requests from staff, not demands. Demands will not be met.
4. When addressing staff, you are to use "Officer", "Mr.", "Mrs.", or "Miss" before the last name of staff. You are not to address staff by first name. You may also address staff as "Sir" or "Ma'am".
5. Follow the instructions of staff immediately, without argument or question.
6. Wait for permission from staff before doing anything.
7. Tantrums, threats & intimidation will not be tolerated.
8. Treat others respectfully.
9. Gang monikers or other nicknames & inappropriate language are not allowed.
10. Gang signs, symbols & gestures are not allowed.
11. Sexual activity & any other physical contact with staff or other minors is prohibited & will result in consequences, including the possibility of additional criminal charges.
12. Do not engage in any conversation about attempting to escape.
13. Do not discuss negative subject matter with other minors, including drugs, breaking the law, your court case, etc. All court cases are confidential. Any information overheard may be reported to law enforcement & used

against you in court.

14. Staff are Peace Officers. If staff is battered or assaulted by you or with your assistance, you may be subject to further criminal charges for Battery Against a Peace Officer (830.5(b), 241(b), 241(c)(1) PC).

MOVEMENT

1. During all line up & movement, keep your hands behind your back & face forward.
2. Walk in the center of the hallway when going to or coming from your room.
3. Do not move from your assigned seat without permission from staff.
4. When in line, talking is not allowed.
5. Limping, strutting, or otherwise modifying a “normal” walk is not allowed unless you have a medical reason.

DISCIPLINE

Major Rule Violations

Some rule violations could result in such consequences as room confinement, a special program, or additional criminal charges. These will be documented by staff in Special Incident Reports (SIR's) with recommendations for consequences.

A supervisor reviews each SIR & authorizes the consequences. The Director also reviews all SIR's.

Examples of such violations include fighting, assaulting staff, intimidating others, or talking about/planning escape.

Minor Rule Violations

Other rule violations may result in such consequences as level loss, loss of program time, or writing an essay.

Talking while in line, horseplay & passing notes are examples of minor rule violations.

Time Outs

You may be sent to your room during or outside of school hours for a time out. Time outs will be a minimum of 15 minutes & you will have to be cooperative & willing to abide by the rules of the facility before rejoining the group. Time outs should be privately discussed & a learning experience.

Room Confinement

Several behaviors may result in room confinement of more than 24 hours. Examples include fighting, making racial slurs & contraband. During this period of room confinement, you will be expected to obey all rules. If you do not, there may be additional consequences, including a loss in level. While on room confinement you will be suspended from the level system with your level frozen until the confinement period is completed. If you accept responsibility and consequences, you may rejoin the group at the same level you were at the time you began room confinement.

Due Process

If you should receive room confinement of 24 hours or more, due process procedures automatically provide safeguards. You will be given written notice of the specific rule violated, disciplinary action being taken & the reason it's being taken. A supervisor will allow you an opportunity to present your side of the incident & will decide if the disciplinary action is appropriate. If you are not satisfied with that decision, you may appeal to the Director.

GRIEVANCE PROCESS & RIGHT TO ASK FOR APPROPRIATE TREATMENT

You have the right to appeal issues of confinement, including, but not limited to: health care services, classification, programming, telephone, mail, visiting procedures, food, clothing and bedding. This process is called filing a grievance. This will not be held against you, and your case will be taken up as soon as possible. However, in the meantime, you still must do as you have been told; even if this is the issue you are grieving.

You cannot grieve:

1. How others look, dress, or act.
2. Any court orders, such as:
 - a. Not being released through the court process
 - b. Court ordered No Contacts
 - c. Tests or evaluations
3. Trouble getting along with others.
4. School work the law demands or the classroom in which you are placed.
5. State Education Code (school rules).

You may notify any staff member that you have a complaint. It is hoped that most issues can be resolved by informal discussions between you & staff. But if that does not happen, you may file a written grievance and the following process will take place:

1. You will be given a Grievance Form and a pencil, and will be given instructions and assistance to complete the form, if needed.
2. Grievances containing profanity or disrespectful language or grievances containing threats against staff or others will be returned to you to be re-written. Grievances will not be denied simply because they contain profanity or other language objectionable to staff.
3. The staff member who was unable to resolve the grievance at the informal (discussion) level will document their findings within 24 hours on the Grievance Form and submit it immediately to the Supervisor if it is not resolved, and directly to the Division Director if it is resolved.
4. A Supervisor will next attempt within 3 days to resolve the grievance through discussion with you and involved staff. The Supervisor who hears the grievance will not be involved in the incident leading to the grievance.
5. If the matter cannot satisfactorily be resolved, the Supervisor will give the Grievance Form to the Division Director. The Division Director will review the Supervisor's findings within 3 days and investigate the grievance if warranted. The Division Director may conduct a hearing with you, involved staff, and Supervisor within 5 days. The Division Director will report findings in writing to you within 3 days. The Division Director's findings are final in the Grievance Procedure process.

In all cases involving short-term discipline, you should be aware that the grievance process may not be finalized before the completion of the discipline.

At no time will any retaliatory action be taken by staff against any minor filing a grievance and you should report any such action to the Division Director immediately.

ACCESS TO LEGAL SERVICES

You may request legal services and/or to speak with your attorney at any time. Please complete a request form and staff will follow up as appropriate.

CLASSIFICATION STATUS

When booked in, you may be assigned a certain status based on a variety of reasons. As circumstances change, your status may also change during your detention.

MSR – Maximum Security Risk – may be based on your charges, history of violence or escape

SR – Security Risk – may be based on charges or security issues

Room Alone – may be due to inability to get along with a roommate, past behavior or charges

Suicide Risk – considered at risk for suicide

ACCESS TO EDUCATION, READING MATERIALS, PROGRAMS & ACTIVITIES

All minors will attend school until they have graduated high school.

School hours: 8:05am – 1:50pm

There will be time for homework after school.

Rehabilitative & recreational programming will occur daily.

Reading materials are provided on the housing units & available during program time.

During this time you will be able to write letters, participate in groups, watch limited television, play games, & participate in outdoor activities.

Bed times are determined by the level system & your behavior.

ACCESS TO HEALTH CARE SERVICES

Juvenile Hall has a nurse on duty 5 days per week, a doctor twice per week, & a therapist 2 times per week. There is access to emergency medical care at all times. Within 96 hours of booking, you will receive a routine physical. If you have a medical problem while in custody, request that staff place you on the nurse's sick call list or submit a written request to see the nurse. If you choose, you may submit a confidential written request by asking staff for an envelope in which to seal your request.

COURT INFORMATION

You will be given an advisement of rights form to sign when booked. If you have questions about your rights, ask your Probation Officer or Juvenile Hall staff.

Your first court appearance (*arraignment*) will include an explanation of the charges against you & a decision by the Judge about whether you will remain in custody (*detention*).

Your Probation Officer will continue to meet with you while you go through the court process. Prior to the completion of your case (*disposition*), your Probation Officer will likely complete a report & recommendation that will be available for you to read before your hearing.

You are encouraged to ask staff or your Probation Officer if you have any questions about the court process.

HOUSING ASSIGNMENT

There are 2 housing units in this facility. Unless you present a security risk or have serious charges pending, you will likely be housed on the general population unit, B-unit.

No Contact orders will be enforced. Be sure to notify staff of any No Contact orders or if there are minors in the facility with whom you do not get along as these issues may affect your housing.

If you do present a safety or security risk, you will be housed on the surety housing unit, A-unit.

ACCESS TO RELIGIOUS SERVICES

All minors have the right to request religious instruction.

Church services are offered on Sundays at 8:15am. You have the absolute right not to attend religious instruction or activities & to have a reasonable alternative activity.

PERSONAL HYGIENE & CARE

Upon booking, you will shower & have the opportunity to do so daily thereafter. You will also receive clothing, bedding & hygiene kit (toothbrush, toothpaste & comb). Female hygiene products are available on each housing unit & available upon request. Hair ties are also available. You will be allowed to brush your teeth after each meal & to shave daily. Hair care services are available upon request.

ACCESS TO COUNSELING SERVICES

You have the right to mental health services, including counseling & medication support, to be set up through staff or your Probation Officer.

This facility also offers anger management, Alcoholics Anonymous & substance abuse programs. Your Probation Officer may assign you to participate in some of these programs. If you are interested in participating, you may also ask staff.

CORRESPONDENCE

Juvenile Hall will provide postage for 1 letter a day to your parents/guardians & 1 letter a week to a friend.

Depending on your level, you may be able to earn extra postage. You may also send additional letters if your parents provide metered envelopes (available at the Post Office).

You may not write letters to those with whom you have been ordered to have no contact.

Letters may not be sent from one institution to another. You will not receive mail coming from another institution.

You will receive all mail unless it contains contraband or exhibits gang or racial ideation.

Mail will be scanned for security purposes but will not be read by staff unless there is cause to do so.

VISITING

Visiting is allowed 2 times per week for parents/guardians only. Visitors must schedule appointments to visit. Visitors who are late will not be allowed to visit but encouraged to sign up for the next available visiting time.

Visiting Days/Times:

Sundays	10:00 – 11:00am 11:30am – 12:30pm
Thursdays	5:15 – 6:16pm 6:45 – 7:45pm

Visitors may donate appropriate paperback books to the facility but not directly to you. You are not allowed to accept any items from visitors. Visitors are to give all items, including metered envelopes, to staff.

TELEPHONE

Upon booking, you will be provided the opportunity to make 3 telephone calls – 1) parents; 2) attorney; 3) your employer. You will only be allowed to use the intake phone for calls to your parents & to/from your attorney. Ask your assigned detention staff or supervisor for permission.

EMERGENCY EVACUATION PLAN

In the event of an emergency, you will likely be taken out of the building. You are to walk calmly with you hands behind your back. Roll call will be taken once the group has assembled again. Fire & other emergency drills are conducted on a regular basis so you will know what is expected in the event of an emergency.

IDENTIFICATION BRACELET

Upon booking, you will receive an identification bracelet. This bracelet is to be worn at all times. If torn or ripped, advise staff & it will be replaced. If you purposely tamper with or remove your bracelet, you will receive consequences. The only exceptions to this rule must be approved by medical staff.

USE OF FORCE, RESTRAINTS & CHEMICAL AGENTS

Be advised that Juvenile Hall staff is authorized to use force, to include the use of O. C. Pepper Spray and physical restraints (handcuffs, shackles) under the following circumstances:

1. During transportation of a minor from one location to another location.
2. To protect a minor from self-inflicted injuries or suicide.

3. Self-defense or defense of other staff or minor(s).
4. To prevent destruction of county property.
5. To prevent escape.
6. To control, restrain, or subdue imminent violent behavior.

Staff will use the lowest level of force to gain compliance unless a delay would result in immediate harm. The force options are listed below beginning with the lowest level of force available:

1. Staff presence/dialogue
2. Verbal commands
3. O. C. Pepper Spray
4. Physical restraint
5. Mechanical restraint

O.C. PEPPER SPRAY

O.C. will not be used for punishment, retaliation, or disciplinary purposes. O.C. is an inflammatory agent and the following effects may last up to 45 minutes:

1. Swelling of the mucous membranes.
2. Involuntary eye closure.
3. Gagging and coughing.
4. Shortness of breath.
5. An intense feeling of burning on all exposed areas.

RESTRAINTS

Restraints will not be used for punishment, retaliation, or as a substitute for treatment. If you are unable to control your behavior and your behavior indicates that you are at risk of harming yourself and/or others, you may be placed in handcuffs and/or shackles, and held in place on the floor in a room alone until you give a believable commitment that you can maintain self-control.

SCJH Point Level System

- In order to maintain the integrity of the SCJH Level System, **personal bias must have no bearing whatsoever on scoring. IMPARTIALITY IS IMPERATIVE!** Each category must be honestly assessed and scored. No single, negative, incident should be the yardstick by which any minor is measured. Staff must make assessments in terms of overall performance for the entire week.
- All JDO's for dayshift and swing shift will score each minor on the last day of their workweek. For example, if your "Friday" is on a Wednesday, you will score the minor on Wednesday. **Final scoring for each minor must be completed by Saturday.**
- There are ten performance categories (see score sheet). In each category, staff will award **1, 2, or 3**, points. See **LEVELS SP, 1, INT, 2, 3, EXPECTATIONS** (Page 3) for requirements. A score of 2 indicates the minor is **meeting minimum expectations (Doing exactly what is required – no more, no less)**. When staff is finished scoring each category, add points from each performance category and mark the results in the "**Total Score**" box, to the right of the score sheet. Minors will earn the level to which their "**Average Weekly Score**" corresponds, as indicated below:

10-15 Points	16-19 Points	Intake	20-26 Points	27-30 Points
Level SP	Level 1	Level INT	Level 2	Level 3

- **Scoring:** To determine the level earned, **FIRST**, **discard the highest score and the lowest score**. Add the **remaining** scores together. Divide that sum by the total number of **remaining** scoring staff. (Remember to discard the highest and the lowest score). **"Rounding off" is prohibited** (i.e.: 19.9 points = Level 1, **NOT** Level 2). Prior to Saturday, at least one dayshift assigned counselor and one swing shift assigned counselor will confer to confirm the minor's final score. Assigned counselors that work on Saturday will insure the scoring has been completed.
- If a minor scores a 1 in any category, staff awarding the score must note the specific reason / justification for each score of 1 on the reverse side of the score sheet.
- When a minor earns **Level SP**, one or more of the assigned counselors **must initiate a Special Program**. Assigned counselors will review the Special Program every 3 days. The assigned counselor that works on the Saturday will write the Special Program. The Special Program must be tailored to the specific behavior(s) that caused the negative behavioral issues. Level SP minors will

be scored, but are bound by the terms of their Special Program (The terms of the Special Program supersedes the Level System).

- For **Level SP** minors, the assigned counselors must consult, directly, with the Special Program minors on their assigned caseload. **Using M.I. techniques**, assigned counselors, together with the minor, will formulate a **realistic** performance improvement plan for the subsequent week. **The performance improvement plan will be noted in weekly case notes.**
- If there are any questionable scoring “issues” involving any staff, the assigned counselors must bring such issues to a supervisor’s attention. (i.e.: It is highly unlikely a minor will score the same in all categories). Only supervisors may alter final scores.
- **Intakes** are automatically assigned to Intake Level (**Level INT**) status, as it is assumed intakes will strive to achieve, at the very least, minimum behavioral (Level 2) standards. Intake level minors are to be treated as Level 2 minors; however, their incentives are limited in some respects (See Intake Level incentives, Page 5). Intake minors eat ALL meals in rooms.
- **JDAP failures** and **furlough failures** will be assigned, automatically, to **Level 1** status.
- Intakes booked **Sunday through Wednesday** will be scored and will be eligible to advance from the Intake Level (**Level INT**) to whatever level is earned during the intake period.
- Intakes booked **Thursday through Saturday**, after 5 days at Intake Level (**Level INT**) with no negative log notes, SIR’s, incidents, etc., will automatically advance to Level 2.
- Staff may **recommend** a level reduction only if supported by an SIR or a CITATION that outlines sufficient behavioral issues and / or specific rule violation(s). **Only a supervisor may implement a level reduction resulting from an SIR or a Citation.**
- Graveyard staff will place minors’ new levels on the board each Saturday night. Intake Level minors will be designated as “**INT.**”
- Graveyard staff will make up hygiene kits for each level. Minors will receive their incentive items each Saturday night. Incentive items must last for the entire week. If, during the week, an item is depleted, or forfeited at any time due to a level drop, the item will be replaced with basic Bob Barker items until the next item distribution on Saturday night. **Level SP, Level 1, Level INT, & Level 2 minors are limited to basic Bob Barker items only.**
- **MSR** status minors will be placed on the Level System and scored just as any other minor, but will not be eligible to advance to Level 3.
- Friday **OR** Saturday night (not both) will be the designated movie night for Level 3’s. **There will be no movies allowed any other day of the week for program, except those found on regular (satellite) TV stations.**
- **Note: All movies are to be approved, prior to showing, by a supervisor or the Division Director.**

- **SAFETY & SECURITY CONSIDERATIONS, AS DETERMINED BY STAFF, WILL ALWAYS SUPERCEDE THE LEVEL SYSTEM.**

EXPECTATIONS:

LEVEL SP (10-15 POINTS)

LEVEL 1 (16-19 POINTS)

LEVEL INT (INTAKE)

LEVEL 2 (20-26 POINTS)

LEVEL 3 (27-30 POINTS)

LEVEL SP (BELOW) EXPECTATIONS (Requires Special Program):

1. STRICTLY ABIDE BY TERMS OF ASSIGNED **SPECIAL PROGRAM**.
2. STRIVE TO ACHIEVE MINIMUM (LEVEL 2) BEHAVIORAL EXPECTATIONS.

LEVEL 1 (BELOW) EXPECTATIONS:

1. STRIVE TO ACHIEVE MINIMUM (LEVEL 2) BEHAVIORAL EXPECTATIONS.

LEVEL INT (INTAKE LEVEL) EXPECTATIONS:

1. SAME AS LEVEL 2 EXPECTATIONS.

LEVEL 2 (MINIMUM) EXPECTATIONS:

1. FOLLOW STAFF DIRECTIONS / INSTRUCTIONS / ORDERS IMMEDIATELY, WITHOUT QUESTION, COMMENT, OR GESTURE, TO THE BEST OF YOUR ABILITY, WITH MAXIMUM MOTIVATION.
2. EMPLOY PROPER FORMS OF ADDRESS:
(MR, MRS, MS, OR MISS PLUS LAST NAMES; SIR or MA'AM).
3. REFRAIN FROM USING ANY FORM OF PROFANITY.
4. REFRAIN FROM DISPLAYING GANG SIGNS, SYMBOLS, OR GESTURES OF ANY KIND, OR ANY ACTION THAT COULD BE CONSTRUED AS GANG-RELATED.

5. WEAR PROPERLY FITTED CLOTHING (NO SAGGING / SHIRTS TUCKED / DO NOT TUCK PANTS IN SOCKS). DURING ACTIVITIES ON THE REC. YARD, SHIRTS MAY BE UNTUCKED.
6. BE RESPECTFUL AND COURTEOUS TOWARDS STAFF, PEERS, & OTHERS.
7. USE THE INTERCOM FOR EMERGENCY USE ONLY (MEDICAL ATTENTION AND BATHROOM CALL).
8. TURN-IN ALL CONTRABAND IMMEDIATELY.
9. REFRAIN FROM ATTEMPTS TO MANIPULATE STAFF
(IF ONE STAFF SAYS, “NO,” DO NOT ASK ANOTHER STAFF).
10. ALWAYS RAISE YOUR HAND TO BE RECOGNIZED, TO OBTAIN INFORMATION, OR TO REQUEST PERMISSION TO MOVE.
11. REFRAIN FROM TALKING FROM COUCH-TO-COUCH OR COUCH-TO-TABLES (TALKING TO THE PERSON IN FRONT OF OR BEHIND YOU).
12. DEMONSTRATE APPROPRIATE TABLE MANNERS & DECORUM DURING MEALS.
13. EXHIBIT POSITIVE ROOM BEHAVIOR (NO YELLING / BANGING / ROOM-TO-ROOM COMMUNICATION / STANDING AT DOOR WINDOW).
14. EXHIBIT PROPER LINE-UP AND LINE MOVEMENT PROCEDURES (HANDS BEHIND BACK; NO TALKING; STAND DIRECTLY BEHIND THE MINOR IN FRONT OF YOU).
15. EXHIBIT PROPER HALLWAY CONDUCT (CLOTHES WORN PROPERLY; HANDS BEHIND BACK; NO TALKING; EYES STRAIGHT AHEAD; STAND AT THE FOOT OF YOUR BED, AT PARADE REST, UNTIL STAFF OPENS YOUR DOOR).
16. PROPERLY POSITION SHOES NEXT TO THE DOOR (SHOES ARE TO BE PARALLEL TO THE WALL, NEXT TO YOUR ROOMMATE’S SHOES, WITH TOES POINTING AWAY FROM DOOR OPENING).
17. MAINTAIN A NEAT AND ORDERLY ROOM (PROPERLY MADE BED; ROOM FREE OF TRASH OR UNAUTHORIZED ITEMS).
18. HAIR UP AND OFF THE SHOULDERS (MALE AND FEMALE MINORS).
19. PARTICIPATE FULLY AND APPROPRIATELY IN SCHOOL (NO “TIME-OUTS”).

LEVEL 3 (EXCEEDS) MINIMUM EXPECTATIONS:

1. CONSISTENTLY EXCEED ALL LEVEL 2 (MINIMUM) BEHAVIORAL EXPECTATIONS.
2. CONSISTENTLY DO THE “RIGHT THING,” WITH NO CONCERN FOR REWARD OR

RECOGNITION.

3. **CONSISTENTLY (WITH MINIMAL STAFF DIRECTION / GUIDANCE) FOLLOW ALL BEHAVIORAL EXPECTATIONS FOR LEVEL 2 MINORS**

Level System Incentives:

The purpose of a level system is to offer tangible, graduated, rewards as an incentive to promote appropriate behavior. The bulk of rewards and privileges is reserved for Level 3 minors. The listed rewards and privileges should not preclude “doing what is right simply because it is the right thing to do.”

Level SP (Below minimum expectations; (10-15) - Requires Special Program):

- Bob Barker hygiene products only
- Bedtime, programming, & school attendance determined by Special Program (not to exceed Level 1 bedtime & programming)
- In absence of Special Program (until written & approved), Level SP minors will program out-of-room from 1600-1700; in-room behavioral essays, or studying JH rules brochure from 1800-1900.
- 1600-1700 out-of-room program, **if** no time-outs (sent to room by/from school or JDO staff); schoolwork complete; no negative log notes; no disciplinary issues; behavior is that of, at minimum, a Level 2 minor. Otherwise, forfeit 1600-1700 out-of-room programming.
- Juvenile hall rules pamphlet + 1 book.
- Housed in Unit-A exclusively (when available)
- No assigned jobs
- ALL meals in room (Mandatory).
- Removed from Level System
- Must abide by terms of Special Program

Level 1 (16-19) - Below Minimum Expectations:

- Bob Barker hygiene products only
- 1900 bedtime
- Juvenile hall rules pamphlet + 1 book in room
- Housed in Unit-A or Unit-B at staff discretion
- No assigned jobs
- ALL meals in room (Mandatory)
- Must attend school
- 1600-1700 and 1800-1900 out-of-room program, **if** no time-outs (sent to room by/from school or JDO staff); schoolwork complete; no negative log notes; no disciplinary issues; behavior is that of, at minimum, a Level 2 minor. Otherwise, forfeit ALL out-of-room programming
- Two (2) concurrent weeks at Level 1 **REQUIRES** an automatic drop to Level SP

Level INT (INT-ake):

SAME AS LEVEL 2 (see below), **EXCEPT:**

- 1 five-minute phone call per week to parent or guardian (minimum 72-hours following completed intake call)
- No assigned jobs
- No Kitchen ROP
- ALL meals in room (Mandatory)

Level 2 (20-26) - Meets Minimum Expectations:

- Bob Barker hygiene products only
- 1930 bedtime
- 1 book in room (excluding religious material)
- 1 five-minute phone call per week to parent or guardian
- May be assigned to Kitchen ROP (excluding MSR's & SR's)
- MAY eat meals out. (Staff discretion / based on Unit overall behavior)
- Standard stationary issue.

Level 3 (27-30) Exceeds Minimum Expectations:

- "Custom" hygiene products, when available (toothpaste; deodorant; bar soap; lotion; shampoo; conditioner; hair brush; hair gel)
- 2030 bedtime (later, if actively completing chores)
- 2 books in room (excluding religious material)
- 2 ten-minute phone calls per week to parent or guardian
- Must do or volunteer to do chores (excluding MSR's & SR's)
- May be assigned to Kitchen ROP (excluding MSR's & SR's)
- **FIRST CONSIDERATION** for meals out (Staff discretion; based on overall Unit behavior)
- Friday or Saturday night movie (Level 3 only) **Note: Movies are not allowed during the week.**
- A maximum of 2 family photos for display in room.
- Puzzles in room. Puzzles in room from Sunday to Friday (not Saturday, due to clean up).
- Access to game cube (1-hour per week).
- 3 extra envelopes and stationary per week
- If staff is available, extra time on the recreation-yard

SCJH MINOR WEEKLY RATINGS

MINOR'S NAME >

Last >

First >

Week Ending Saturday >

JDO REPORTING STAFF	Staff Respect Forms of Address	Peer / Respect Forms of Address	Follows Directions	Accepts Correction	Attitude Motivation Participation	Room Conduct	Line Conduct / Movement	Room Condition / Appearance	Dress Code	Working To Potential	Average Score
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FULL-TIME STAFF RATINGS

3 = EXCEEDS Basic Expectations 2 = MEETS Basic Expectations 1 = BELOW Basic Expectations

JDO-EH REPORTING STAFF (EH Staff must work 3 or > days to provide a numerical score)

CULINARY REPORTING STAFF (EH Staff must work 3 or > days to provide a numerical score)

Discard 2 highest & lowest; Add remaining Scores;
Divide by number of remaining reporting staff = AVERAGE WEEKLY SCORE

10-14 points	15-19 points	20-26 points	27-30 points
Level 1SP	Level 1	Level 2	Level 3

AVERAGE WEEKLY POINTS >

LEVEL >

SP 1 INTAKE 2 3

Housing Assignment

There are two housing units in this facility. Unless you present a security risk or have serious charges pending, you will likely be housed on the general population unit, B-unit. No Contact orders will be enforced. Be sure to notify staff of any No Contact orders or if there are minors in the facility with whom you do not get along as these issues may affect your housing. If you do present a safety or security risk, you will be housed on the surety housing unit, A-unit.

Access to Religious Services

All minors have the right to request religious instruction. Church services are offered on Sundays at 8:15am. You have the absolute right not to attend religious instruction or activities & to have a reasonable alternative activity.

Personal Hygiene & Care

Upon booking, you will shower & have the opportunity to do so daily thereafter. You will also receive clothing, bedding & hygiene kit (toothbrush, toothpaste & comb). Female hygiene products are available on each housing unit & available upon request. Hair ties are also available. You will be allowed to brush your teeth after each meal & to shave daily. Hair care services are available.

Access to Counseling Services

You have the right to mental health services, including counseling & medication support, to be set up through staff or your Probation Officer. This facility also offers anger management, Alcoholics Anonymous & substance abuse programs. Your Probation Officer may assign you to participate in some of these programs. If you are interested in participating, you may also ask staff.

Correspondence

Juvenile Hall will provide postage for one (1) letter a day to your parents/guardians & one (1) letter a week to a friend. Depending on your level, you may be able to earn extra postage. You may also send additional letters if your parents provide metered envelopes (available at the Post Office). You may not write letters to those with whom you have been ordered to have no contact. Letters will not be sent or received from one institution to another. You will receive all mail unless it contains contraband or exhibits gang or racial ideation. Mail will be scanned for security purposes but will not be read by staff unless there is cause to do so.

Visiting

Visiting is allowed two (2) times per week for parents & guardians only. Visitors must schedule appointments to visit. Visitors who are late will not be allowed to visit but encouraged to sign up for the next available visiting time.

Visiting Days/Times

Sundays 10:00am – 11:00am & 11:30am – 12:30pm
Thursday's 5:15pm – 6:15pm & 6:45pm – 7:45pm

Visitors may donate appropriate paperback books to the facility but not directly to you. You are not allowed to accept any items from visitors. Visitors are to give all items, including metered envelopes, to staff.

Telephone Use

Upon booking, you will be provided the opportunity to make three (3) telephone calls – 1) parents; 2) attorney; 3) your employer. Afterward, you will only be allowed to use the telephone for calls to your parents/guardian and to/from your attorney. Ask staff for permission.

Use of Force, Restraints & OC Pepper Spray

Staff are authorized to use force, including OC Pepper Spray, physical restraints & mechanical restraints (handcuffs/leg restraints/leg shackles). Staff will use the lowest level of force to gain compliance unless a delay would result in immediate harm. Pursuant to 12403.7 PC, OC Spray may be used by the staff of the Shasta County Juvenile Hall to overcome resistance & accomplish restraint.

Emergency Evacuation Plan

In the event of an emergency, you will likely be taken out of the building. You are to walk calmly with your hands behind your back. Roll call will be taken once the group has assembled again. Fire & other emergency drills are conducted on a regular basis so you will know what is expected in the event of an emergency.

Level System

The level system provides opportunities for minors to receive privileges for good behavior. You enter the facility at an Intake Level & can achieve up to Level Three (3). Points, based on your behavior, are earned that either increase or decrease your level. The higher your level, the more privileges you have, including later bedtimes & better hygiene products. However, negative behaviors may result in the loss of levels & privileges.

Identification Bracelet

Upon booking, you will receive an identification bracelet. This bracelet is to be worn at all times. If torn or ripped, advise staff & it will be replaced. If you purposely tamper with or remove your bracelet, you will receive consequences. The only exceptions to this rule must be approved by medical staff.

Shasta County Probation Juvenile Hall

ORIENTATION BROCHURE

The purpose of this brochure is to ensure that minors clearly understand their rights & responsibilities as well as the rules of the Shasta County Juvenile Hall.

Room Expectations & Conduct

- When staff wakes you in the morning, make your bed neatly & keep it that way.
- Keep your room neat & clean. Throw away all garbage.
- Keep no unauthorized items in your room. Any item not provided by staff is contraband.
- Use only one (1) pillow & one (1) mattress even if there's an empty bed in your room.
- Request cleaning supplies as needed.
- Hitting/kicking doors & walls, & yelling from your room are not allowed.
- Damage to your room, clothing, books or magazines may result in loss of level, program time, other privileges, or move to the security unit.
- Do not cover the light, window, or intercom in your room.
- Graffiti, spit, food, etc, are not allowed on the walls, ceiling, floor, furnishings, etc, & may result in loss of level, program time, or other privileges. You will likely be responsible for the clean-up and/or minor repair. Damage and/or clean- up/repair may also be billed to your parents or guardians & additional criminal charges may be filed against you.
- Do not use the intercom unless you need to use the restroom or in an emergency.
- Personal letters & paperwork are to be kept in your accordion file at the unit desk. Legal paperwork (Court or attorney) will be kept with your facility file. Communicate with staff to access your legal paperwork.
- Horseplay in your room & in the dayroom is not allowed. Do not pass notes or other material, including food, to other minors.
- All unit expectations are posted on each housing unit.

Appearance

- Shirts are to be tucked in at all times, except on the recreation yard.
- Staff will determine appropriate sized clothing

Habits

- You are to speak respectfully & without profanity to staff & other minors at all times.
- You are to say "Please" & "Thank you".
- You are to make requests from staff, not demands. Demands will not be met.
- When addressing staff, you are to use "Officer", "Mr.", "Mrs.", or "Miss" before the last name of staff. You are not to address staff by first name. You may also address staff as "Sir" or "Ma'am."
- Follow the instructions of staff immediately, without argument or question.
- Wait for permission from staff before doing anything.
- Tantrums, threats & intimidation will not be tolerated.
- Treat others respectfully.
- Gang monikers or other nicknames & inappropriate language are not allowed.
- Gang signs, symbols & gestures are not allowed.
- Sexual activity & any other physical contact with staff or other minors is prohibited & will result in consequences, including the possibility of additional criminal charges.
- Do not engage in any conversation about attempting to escape.
- Do not discuss negative subject matter with other minors, including drugs, breaking the law, your court case, etc. All court cases are confidential. Any information overheard may be reported to law enforcement & used against you in court.
- Staff are Peace Officers if staff is battered or assaulted by you or with your assistance, you may be subject to further criminal charges for Battery Against a Peace Officer (830.5(b), 241(b), 241(c)(1) PC).

Movement

- During all line up & movement, keep your hands behind your back & face forward.
- Walk in the center of the hallway when going to or coming from your room.
- Do not move from your assigned seat without permission from staff.
- When in line, talking is not allowed.
- Limping, strutting, or otherwise modifying a "normal" walk is not allowed unless you have a medical reason.

Discipline

Major Rule Violations

Some rule violations could result in such consequences as room confinement, a special program, or additional criminal charges. These will be documented by staff in Special Incident Reports (SIRS) with recommendations for consequences. A Supervisor reviews

A supervisor reviews each SIR & authorizes the consequences. The Director also reviews all SIR's. Examples of such violations include fighting, assaulting staff, intimidating others, or talking about/planning escape.

Minor Rule Violations

Other rule violations may result in such consequences as level loss, loss of program time, or writing an essay. Talking while in line, horseplay & passing notes are examples of minor rule violations.

Time Outs

You may be sent to your room during or outside of school hours for a time out. Time outs will be a minimum of 15 minutes & you will have to be cooperative & willing to abide by the rules of the facility before rejoining the group. Time outs should be privately discussed & a learning experience.

Room Confinement

Several behaviors may result in 24 hours or more of room confinement. Examples include fighting, racial slurs & contraband. During this period of room confinement, you will be expected to obey all rules. If you do not, there may be additional consequences. While on room confinement, you will be suspended from the level system with your level frozen until the confinement period is completed. If you accept responsibility and consequences, you may rejoin the group at the same level you were at the time you began room confinement.

Due Process

If you should receive room confinement of 24 hours or more, due process procedures automatically provide safeguards. You will be given written notice of the specific rule violated, disciplinary action being taken & the reason it's being taken. A supervisor will allow you an opportunity to present your side of the incident & will decide if the disciplinary action is appropriate. If you are not satisfied with that decision, you may appeal to the Director. You will be provided with a written statement of the findings and evidence relied upon to make the decision.

Further information

You can find further explanation on these rules, expectations and level system in the Orientation Manual located on the units.

Grievance Process

This process is available to all minors detained in this facility. A grievance is a complaint by you because you believe that you have been mistreated, staff has been unfair, or a problem was resolved inappropriately. Staff will attempt to resolve issues at the lowest level possible. However, you may file a formal Grievance Form if informal resolution is not successful. Your grievance will then be heard by a Supervisor not involved in the situation. If this does not resolve the matter to your satisfaction, it may be appealed to the Division Director who may choose to meet with you, staff & Supervisor within five (5) days to reach a final decision in the matter. You will receive the decision in writing within three (3) days.

Classification Status

When booked in, you may be assigned a certain status based on a variety of reasons. As circumstances change, your status may also change during your detention.

MSR – Maximum Security Risk – may be based on your charges, history of violence or escape

SR – Security Risk – may be based on charges or security issues
Room Alone – may be due to inability to get along with a roommate, past behavior or charges

Suicide Risk – considered at risk for suicide

Access to Legal Services

You may request legal services and/or to speak to your attorney at any time. Complete a request form, located on the housing units, & staff will forward it appropriately.

Education, Reading Material, Programs & Activities

All minors will attend school until they have graduated high school.

School hours: 8:05am – 1:50pm

There will be time for homework after school. Rehabilitative & recreational programming will occur daily. Reading materials are provided on the housing units & available during program time. During this time you will be able to write letters, participate in groups, watch limited television, play games, & participate in outdoor activities. Bed times are determined by the level system & your behavior.

Access to Health Care Services

Juvenile Hall has a nurse on duty five (5) days per week, a doctor twice per week, & a therapist two (2) times per week. There is access to emergency medical care at all times. Within 96 hours of booking, you will receive a routine physical. If you have a medical problem while in custody, request that staff place you on the nurse's sick call list or submit a written request to see the nurse.

Court Information

You will be given an advisement of rights form to sign when booked. If you have questions about your rights, ask your Probation Officer or Juvenile Hall staff. Your first court appearance (*arraignment*) will include an explanation of the charges against you & a decision by the Judge about whether you will remain in custody (*detention*). Your Probation Officer will continue to meet with you while you go through the court process. Prior to the completion of your case (*disposition*), your Probation Officer will likely complete a report & recommendation that will be available for you to read before your hearing. You are encouraged to ask staff or your Probation Officer if you have any questions about the court process.



Shasta Departamento de Libertad Condicional del Condado Correccional de Menores *ORIENTACIÓN DE GUIA*

El propósito de este folleto es para garantizar que los menores entiendan claramente sus derechos y responsabilidades, así como las normas de la Sala de Menores del Condado de Shasta.

Sala de Expectativas y Conducta

1. Cuando el personal que se despierta por la mañana, hacer su cama perfectamente y que siga siendo así.
2. Mantenga su habitación ordenada y limpia. Tire a la basura toda la basura.
3. Mantenga hay elementos no autorizados en su habitación. Cualquier punto no previsto por el personal es de contrabando.
4. Utilice sólo una almohada y el colchón, incluso si hay una cama vacía en la habitación.
5. Solicitud de artículos de limpieza cuando sea necesario.
6. Golpes / patadas las puertas y paredes, y gritando de la habitación no están permitidos.
7. El daño a su habitación, ropa, libros o revistas pueden resultar en la pérdida de nivel, el tiempo del programa, otros privilegios, o sean trasladados a la unidad de seguridad.
8. No tape la luz, ventana, o de intercomunicación en la habitación.
9. Graffiti, escupir, comida, etc, no se permiten en las paredes, techo, piso, muebles, etc Esto

puede resultar en la pérdida de nivel, el tiempo del programa, u otros privilegios. Probablemente, usted será responsable de la limpieza y / o reparaciones menores. Daños y / o limpieza y reparación También se puede cobrar a sus padres o tutores, y otros cargos criminales pueden ser presentadas en su contra.

10. No utilice el intercomunicador a menos que necesite usar el baño o hay una emergencia.
11. Carta personal y papeles se mantendrán en el archivo de acordeón en el mostrador de la unidad. documentación legal (Corte o del abogado) se mantendrá con el archivo de instalación. Comunicarse con el personal para acceder a sus documentos legales.
12. Payasadas en su habitación y en la sala de estar no está permitido.
13. No le dé notas, otros materiales, o la comida a otros menores de edad.
14. Todas las expectativas de la unidad se encuentran en cada unidad de vivienda

Apariencia

1. Camisas deben ser metidas en todo momento, excepto en el patio de recreo.
2. Personal determinará la ropa del tamaño adecuado.
3. Pandeo no está permitido. Debajo de la ropa no debe ser visible.
4. El pelo debe ser llevado por encima del cuello.

Hábitos

1. Usted debe hablar con respeto y sin malas palabras para el personal y otros menores de edad en todo momento.
2. Usted debe decir "por favor" y "Gracias".
3. Usted debe hacer las peticiones del personal, no exige. Las demandas no se cumplirán.
4. Al hablar con el personal, va a utilizar "oficial", "señor", "señora" o "señorita" antes de su apellido. Usted no debe usar el primer nombre del personal.
5. Siga las instrucciones del personal de inmediato, sin argumento o pregunta.
6. Pida permiso del personal por cualquier y todas las tareas o actividades.
7. Los berrinches, amenazas y la intimidación no serán toleradas.
8. Tratar a los demás con respeto.
9. Los nombres de pandillas y lenguaje inapropiado no están permitidos.
10. Signos y símbolos de y / o gestos pandillas no están permitidos.
11. La actividad sexual y cualquier otro contacto físico con el personal o otros menores está prohibido y dará lugar a consecuencias, incluyendo la posibilidad de cargos criminales adicionales.

12. No participe en conversaciones sobre el intento de escapar.
13. No hable sobre la materia negativa con otros menores, incluidas las drogas ilegales, violando la ley, o en su caso en la corte, etc Todos los casos judiciales son confidenciales. Cualquier información puede ser escuchado informó a la policía y usado en su contra en la corte.
14. El personal de Oficiales de Paz. Si el personal es maltratadas o asaltado por usted o con su ayuda, usted puede estar sujeto a cargos criminales adicionales; Battery Against A Peace Officer (830.5(b), 241(b), 241(c)(1) PC).

Movimiento

1. Durante toda la línea y el movimiento hacia arriba, mantenga su las manos detrás de la espalda y cara al frente.
2. Caminar en el centro del pasillo al pasar o viene de su habitación.
3. No se mueva de su asiento asignado, sin el permiso del personal.
4. Cuando esté en línea, usted no debe hablar.
5. Usted tiene que caminar en posición vertical y en un ritmo normal. Caminar anormal no está permitido a menos que existe una razón médica.

Disciplina

Mayor Violaciones Artículo

Algunos violaciones regla puede resultar en consecuencias como el confinamiento habitación, programas restringidos y / o cargos criminales adicionales. Estos serán documentados por el personal en un Informe Especial de Incidentes (SIR) con recomendaciones para las consecuencias. Un supervisor de personal revisará cada SIR y autorizar a las consecuencias. Ejemplos de tales violaciones incluyen peleas, agrediendo al personal, intimidar a otros, o discutir un escape.

Menor Violaciones Artículo

Violaciones Otros regla puede resultar en consecuencias tales como ser degradado a un nivel inferior, la pérdida de tiempo del programa, o escribir un ensayo. Payasadas, hablando en línea y notas de paso, son ejemplos de violaciones regla de menor importancia.

Tiempo / Saldos

Usted puede ser enviado a su habitación durante el programa y / o durante las horas de clase para un "tiempo fuera". "El tiempo fuera" será de un mínimo de 15 minutos. Usted debe ser de cooperación y respetar las reglas de la facilidad antes de ser autorizado a reunirse con el grupo. El personal les hablará del "tiempo fuera" con el menor y se utiliza como una

experiencia de aprendizaje.

Sala de confinamiento

Varios comportamientos pueden resultar en 24 horas o más de reclusión habitación. Ejemplos incluyen la lucha, insultos raciales y de contrabando. Durante este periodo de reclusión en la habitación, que se espera que obedecer todas las reglas. Si no, puede haber consecuencias adicionales. Si bien en régimen de habitación, se le suspendió del sistema de nivel con su nivel de congelados hasta que el período de reclusión se ha completado. Si usted acepta la responsabilidad y consecuencias, puede unirse al grupo en el mismo nivel que estaban en el momento en que comenzó el confinamiento habitación.

Debido Proceso

Si la consecuencia es una sala de parto de 24 horas, o más, el debido proceso se implementa automáticamente. Por ejemplo, se le dará aviso por escrito de la norma específica violado, e impuso la razón de la acción disciplinaria. A continuación se le brindó la oportunidad de presentar su versión del incidente a un supervisor de personal. El supervisor de personal determinará entonces si la acción disciplinaria impuesta es la adecuada. Si usted no está satisfecho, usted tendrá la oportunidad de apelar la decisión ante el Director de la instalación. Se le presentará una declaración por escrito de los resultados y las pruebas utilizadas para hacer la determinación.

Mas Información

Usted puede encontrar una explicación más detallada sobre estas normas, expectativas y nivel de sistema en el Manual de Orientación ubicados en las unidades.

Procedimiento de Queja

Este proceso está disponible para todos los menores detenidos en estas instalaciones. Una queja es una queja presentada por usted, porque usted cree que han sido maltratados, el personal ha sido injusto, o un problema se resolvió inadecuadamente. El personal tratará de resolver los problemas en el nivel más bajo posible. Sin embargo, usted puede presentar un formulario de queja formal si la resolución informal no es correcta. Su queja será escuchada por un supervisor que no participan en la situación. Si esto

no resuelve el asunto a su satisfacción, puede ser apelada ante el Director de la División que puede optar reunirse con usted, el personal supervisor y un plazo de cinci (5) días para tomar una decisión definitiva sobre el asunto. Usted recibirá la decisión por escrito dentro de los tres (3) días.

Clasificación de Estado

Cuando usted está registrado en la instalación, es posible que se le asigne un cierto estatus basado en una serie de razones. Durante su detención, su estado puede cambiar. Los ejemplos incluyen:

MSR: Máximo de riesgos de seguridad - Esto se basa en sus cargos, la historia de la violencia

o el escape.

SR: Riesgos de seguridad - Esto se basa en sus cargos o problemas de seguridad.

Habitación Sola: Esto se debe a su incapacidad para llevarse bien con los demás, su comportamiento pasado y / o sus cargos.

Riesgo de Suicidio: Se le considera en riesgo de suicidio.

Acceso a los Servicios Jurídicos

Usted puede solicitar los servicios jurídicos, y / o para hablar con su abogado en cualquier momento. Enviar una solicitud de servicios legales de, que se transmitirá por el personal. Todos los formularios se encuentran en las unidades de vivienda.

Educación, Material de Lectura,

Programas y Actividades

Todos los menores se van a la escuela hasta que se han graduado de la escuela secundaria. HORARIO: 8:05 am - 1:50 p.m. Usted tendrá tiempo para hacer la tarea después de la escuela. programación de Rehabilitación y recreativas se producen a diario. Los materiales de lectura se proporcionan en las unidades de vivienda y están disponibles durante el tiempo del programa. Durante este tiempo usted tendrá la oportunidad de escribir cartas, participar en grupos, ver televisión, jugar juegos, y participar en actividades al aire libre. Casa veces están determinados por el nivel de sistema y su comportamiento.

Educación, Libros, Programas y Actividades

Todos los menores se van a la escuela hasta que se han graduado de la escuela secundaria. HORARIO: 8:05 am - 1:50 p.m. Usted tendrá tiempo para hacer la tarea después de la escuela. programación de Rehabilitación y recreativas se producen a diario. Los libros se ofrecen en las unidades de vivienda y están disponibles durante el tiempo del programa. Durante este tiempo usted tendrá la oportunidad de escribir cartas, participar en grupos, ver televisión, jugar juegos, y participar en actividades al aire libre. Casa veces están determinados por el nivel de sistema y su comportamiento.

Acceso a los Servicios de Cuidado de Salud

Una enfermera está disponible 5 días a la semana, un médico dos días a la semana, y un proveedor de salud

mental de 2 días a la semana. Acceso a la atención médica de emergencia está disponible en todo momento. Dentro de las 96 horas de registro en la instalación, recibirá un examen físico de rutina. Si usted tiene un problema médico durante su detención, solicitud de ver a la enfermera.

Información de la Corte

Se le dará una Consejería de la forma de Derechos de firmar cuando estén registrados. Si usted tiene preguntas acerca de sus derechos, pregunte a su agente de libertad condicional o un miembro del personal Juvenile Hall. Su primera comparecencia ante el tribunal (emplazamiento) incluirá una explicación de los cargos presentados en su contra y una decisión por el juez de si se mantendrá en custodia (prisión). Su agente de libertad condicional seguirá reuniéndose con usted mientras usted pasa por el proceso judicial. Antes de la finalización de su caso (disposición), su agente de libertad condicional es probable que completa un informe y una recomendación de que se le permitió leer antes de su audiencia. Hable con su agente de libertad condicional si tiene alguna pregunta sobre el proceso judicial.

Asignación de Vivienda

Hay dos unidades de vivienda en esta instalación. A menos que presente un riesgo de seguridad o tener graves acusaciones pendientes, que serán detenidos en la unidad de la población general, (B-Unit). Las órdenes de "no contacto" se hará cumplir. Tendrá que informar a los miembros del personal si tienen órdenes de "no contacto", y / o si hay menores de edad en las instalaciones con las que no se llevan bien, ya que estas cuestiones afectan a la asignación de la vivienda. Si usted presenta un riesgo de seguridad, que se encuentra en la unidad de vivienda de garantía, (A-Unit).

Acceso a los Servicios Religiosos

Todos los menores tienen derecho a solicitar la instrucción religiosa. Servicios de la Iglesia se ofrecen los domingos a las 8:15 am Usted tiene el derecho de rechazar la enseñanza de la religión o las actividades, y tener una actividad alternativa razonable.

Higiene Personal y Atención

Después de su registro, se bañan y recibir ropa, sábanas y mantas y un kit de higiene personal (cepillo de dientes, pasta de dientes y peine). productos de higiene femenina están disponibles en cada unidad de vivienda y están disponibles por requerimiento. Usted tendrá la oportunidad de bañarse y afeitarse todos los días, y se les permitirá a cepillarse los dientes después de cada comida. Bandas de goma de pelo y servicios de cuidado del cabello están disponibles.

Acceso a los Servicios de Consejería

Usted tiene el derecho a los servicios de salud mental, incluido el asesoramiento y apoyo a la medicación. Hable con su agente de libertad condicional para programar estos servicios. Programas de gestión de la ira, el abuso de sustancias y Alcohólicos Anónimos se ofrecen en este establecimiento. Su agente de libertad condicional podrá

ceder a participar en algunos de estos programas. Si usted está interesado en participar, también puede preguntar al personal.

Correspondencia

Se le proporcionará con gastos de envío por una carta de un día a sus padres o tutores y una carta a la semana a un amigo. Dependiendo de su nivel, puede ser capaz de ganar gastos de envío adicionales. También puede enviar cartas adicionales si sus padres proporcionan medido sobres (disponible en la Oficina de Correos). No está permitido escribir cartas a aquellos con los que han recibido la orden de que "no contacto". Las cartas no se envió o recibió de una institución a otra. Usted recibirá todos los correos, a menos que contenga el contrabando, o pandilla exposiciones o ideas raciales. El correo será escaneada por motivos de seguridad, pero no será leído por el personal a menos motivos para hacerlo ha sido determinada.

Visitar

Visitar es permitido dos veces por semana para los padres / tutores solamente. Los visitantes deben hacer citas para visitar. Si llegan tarde, no se le permitirá visitar pero se invita a inscribirse en el próximo tiempo disponible visitando. Los visitantes pueden donar libros de bolsillo adecuadas a las instalaciones pero no directamente a usted. No se le permite aceptar cualquier artículo de los visitantes. Los visitantes han de dar todos los artículos, incluidos los sobres medida, para el personal.

VISITA Días / horarios:

Domingos 10:00 - 11:00 am & 11:30 - 12:30 pm

Jueves 5:15 - 6:15 pm & 6:45 - 7:45 pm

Teléfono

Después del registro, se le proporcionará la oportunidad de hacer tres llamadas telefónicas (1 - Los padres, 2 - El Procurador; 3 - Su empleador). Después, sólo se le permitirá usar el teléfono para las llamadas a sus padres o tutores y / de su abogado. Pregunte por la autorización.

El Uso de la Fuerza, las Restricciones y Spray de Pimienta OC

El personal está autorizado a usar la fuerza, incluida la delincuencia organizada spray de pimienta, las restricciones físicas y mecánicas de inmovilización (esposas / grilletes / grilletes en las piernas). El personal utilizará el nivel más bajo de la fuerza para lograr el cumplimiento a menos que una demora podría resultar en un daño inmediato. De conformidad con 12.403,7 PC, OC spray de pimienta puede ser utilizado por el personal de la Sala de Menores del Condado de Shasta para superar la resistencia y lograr la moderación.

Plan de Evacuación de Emergencia

En el caso de una emergencia, usted será llevado fuera del edificio. Tienes que caminar tranquilamente con las manos detrás de su espalda. Los menores de edad se

contará cuando el grupo ha vuelto a montar. Fuego y otros simulacros de emergencia se llevan a cabo de forma regular a la práctica lo que se espera en el caso de una emergencia.

Nivel del Sistema

El nivel de sistema ofrece oportunidades para los menores de edad para recibir privilegios por buen comportamiento. Su estado será de nivel consumo al entrar en la instalación. Puede alcanzar hasta el nivel 3. Su comportamiento será determinar si aumenta o disminuye el nivel. Cuanto mayor sea su nivel, los privilegios que usted tiene, incluyendo ir a la cama tarde y mejores productos de higiene.

Comportamientos negativos pueden resultar en la pérdida de los niveles y privilegios.

Pulsera de Identificación

Después del registro, usted recibirá un brazalete de identificación. Se debe usar esta pulsera en todo momento. Si está rota o rasgada, asesorar al personal y que serán reemplazados. Si deliberadamente manipular o quitar el brazalete, recibirá consecuencias. Las únicas excepciones a esta regla debe ser aprobado por un miembro del personal médico.

USE OF FORCE INCLUDING USE OF OLEORESIN CAPSICUM SPRAY	Date: 09/28/2010
Authority Reference: Title 15 Section 1357	

PURPOSE:

To ensure the reasonable use and escalation of force is applied in all cases to maintain institutional control, protect county property, and protect staff and minors from harm.

PHILOSOPHY:

The use of force shall never be applied as punishment, discipline or treatment. Staff may utilize only those control and restraining techniques and devices which are approved and provided by the Probation Department, and in which an employee has received approved training. Minors may be physically restrained in situations where control cannot be gained through the use of staff presence or dialogue/counseling.

POLICY:

“REASONABLE FORCE” IS THE EXERTION OF STRENGTH, WEIGHT, OR POWER TO OVERCOME RESISTANCE AND/OR PREVENT A MINOR, WHO COMES WITHIN THE PROVISIONS OF THE CALIFORNIA CODE OF REGULATIONS, TITLE 15, SECTION 1357, FROM HURTING THEMSELVES OR OTHERS.

USE OF FORCE IS AN IMMEDIATE MEANS OF OVERCOMING RESISTANCE TO CONTROL THE THREAT OF IMMINENT HARM TO SELF OR OTHERS. THE USE OF FORCE MAY OCCASIONALLY BE NECESSARY FOR THE SAFETY OF STAFF AND MINORS IN CUSTODY, AND INCLUDES THE USE OF OLEORESIN CAPSICUM (O.C. SPRAY).

I. Force Options:

- A. Staff will use the lowest level of force to gain compliance. However, circumstances may dictate that an employee begins at the first level of force or even the last option. The following continuum of escalation should be followed as closely as possible.
 1. Staff Presence:
 - a. Staff presence is the first option to the maintenance of a positive institutional facility and the prevention of situations requiring physical intervention.
 - b. Staff presence is a powerful control technique and should be utilized whenever possible to de-escalate a subject’s level of aggression.
 - c. Multiple staff presence often increases the effectiveness of this technique. Multiple staff presence also offers additional opportunities for counseling of the minor and increases the level of staff safety.

2. Dialogue/Counseling:
 - a. Staff will attempt, whenever possible to gain control of the situation through communication and counseling techniques.
3. Verbal Commands:
 - a. During volatile situations, dialogue/counseling may not be sufficient to control a situation. Staff will use verbal commands by giving clear and direct orders while employing command presence.
 - b. Examples of verbal commands are, "Go to your room!" and "Take cover!"
4. "Soft Hands" - This includes light touching or directing the movements of another.
5. Oleoresin Capsicum (O.C.) Pepper Spray.
6. Control Techniques - The use of control and come-along holds, and the use of upper body control holds shall be done in compliance with department provided training in defensive tactics.
7. Mechanical Restraints – Refer to Use of Physical Restraints Policy/Procedure.

II. Use of Force

- A. Use of physical force is prohibited, except to effectively control a minor who is displaying behavior that may result in destruction to property or reveals intent to cause physical harm to themselves or others. Physical force will only be used when lesser means of intervention are inappropriate.
- B. A minor shall not be shackled by the wrists, ankles, or both during labor, including during transport to a hospital, during delivery, and while in recovery after giving birth, subject to security needs.
 1. If a pregnant minor attempts to escape, has previously made such attempts or has been successful in escaping from a custodial environment, or has otherwise been deemed an escape risk, restraints may be necessary.
 2. If a pregnant minor is assaultive or combative toward other minors or staff, restraints may be necessary.
- C. Pregnant minors temporarily taken to a hospital outside the facility for the purposes for childbirth shall be transported in the least restrictive way possible, consistent with the legitimate security needs of each ward. Upon arrival at the hospital, once the minor has been declared by the attending physician to be in active labor, the minor shall not be shackled by the wrists, ankles, or both, unless deemed necessary for the safety and security of the minor, staff, and the public, per Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.
- D. If such safety and security needs exists as described above, prior authorization must be obtained by contacting the Juvenile Hall Division Director or Assistant Chief Probation Officer.
 1. An SIR shall be written giving specific details justifying the need for restraints and documenting the entire incident prior to the end of shift of involved staff.
 2. Restraints shall be in use only as long as necessary.
- E. No physical force is to be used except as stated in paragraph "A" above. Any employee who observes another employee violate the above policy shall immediately take affirmative action to stop the inappropriate use of force, and report the incident to the Supervisor on Duty, Division Director, or the Assistant Chief Probation Officer.

- F. Health Services staff will be requested to evaluate all minors that are subject to the use of physical force. Generally, no mental health evaluation is necessary. If, however, staff believes that the minor may benefit from a mental health evaluation then the on-site mental health worker will be contacted. If no on-site provider is available, the health services staff will be consulted for direction.
- G. Any time physical force is used, immediately refer to the nurse if on site, or refer to the next sick call. If force included the use of O. C. spray, refer to O. C. use guidelines for referral to medical staff. If staff believes prompt medical attention is required, the on-call medical provider will be called. Medical staff will either appear on-site or refer to the hospital.
- H. Any time physical force is used, including hands on, mechanical restraint, or chemical agent, the supervisor on duty or the Officer In Charge (OIC) shall be notified as soon as practical. A Special Incident Report shall be completed with a copy forwarded to medical staff. Special Incident Reports will be completed by the end of the shift, and reviewed by the Supervisor on Duty/Duty Officer and Division Director. The report should include the following:
 - 1. Nature of the incident.
 - 2. Attempts to counsel the minor, when appropriate.
 - 3. Verbal commands given to the minor.
 - 4. Consequences explained to minor, when appropriate.
 - 5. Soft compliance techniques used.
 - 6. Reason force was needed.
 - 7. Tactics used.
 - 8. Injuries incurred or medical treatment provided as a result of the incident.
 - 9. Recommendations for discipline or other action.
- I. Staff shall participate in defensive tactics training approved of and provided by the department. Staff shall utilize only those methods for managing assaultive behavior that are approved by the department. Training consists of 16 hours of initial training with monthly two-hour refresher courses for all staff and includes use of force education, appropriate force techniques/methods, and use of physical restraints. An overview of use of force techniques will also occur during new staff orientation prior to staff taking responsibility for the supervision of minors.
- J. A separate training course in the use of O. C. spray following the regulations set forth by California Department of Justice and California Penal Code is also required of all staff. The initial training consists of 8 hours and includes known medical conditions that would contraindicate certain types of force (such as a broken arm); acceptable chemical agents (OC); methods of application; signs or symptoms that should result in immediate referral to medical or mental health staff (such as an asthma attack); and, requirements of the decontamination of chemical agents, if such agents are utilized.
- K. The use of chokeholds is strictly prohibited.
- L. Review, Investigation, and Discipline for Excessive Force or Failure to Adhere to Use of Force Policy.
 - 1. Review of incidents involving force.
 - a. The supervisor on duty, or Officer In Charge (OIC) if a supervisor is absent, shall review any incident in which an officer employs a form of force upon a minor during their watch. In addition to a review of the written report as outlined in paragraph H of this Section, the supervisor or OIC should discuss the incident with staff upon notification during the shift and review the details of the incident to ascertain the following:
 - 1. That the use of force was justified given the circumstances.

2. That proper procedure was followed in accordance with department policy.
3. The health and wellbeing of the minor.
 - i. Was there any injury as a result of the incident?
 - ii. That medical protocol was followed regarding proper notifications and carrying out the physicians orders.
 - iii. Incident debriefing with staff if applicable.
2. Investigation of Excessive Force or Violations of Use of Force Policy
 - a. Duty to Investigate
 - a. In every instance where excessive force, or a violation of the use of force policy, is suspected, the Juvenile Hall Director and division supervisors have a duty to assess the incident and take action where appropriate.
 - b. Investigation
 - a. The type and scope of an investigation pursuant to this Section will be determined by the Chief Probation Officer, Assistant Chief Probation Officer, or Director pursuant to department and county policy and procedures.
3. Discipline
 - a. Should it be deemed that an officer has used excessive force, or violated the use of force policy, disciplinary measures may be pursued up to an including termination, pursuant to existing county and department policy and personnel rules.
- M. Grievances – Use of Force incidents are subject to ward grievance procedures. Refer to Grievance Policy/Procedure (Title 15, Section 1361).

III. Use and maintenance of Oleoresin Capsicum:

- A. The following are guidelines for the use of Oleoresin Capsicum:
 1. O. C. will not be used for punishment, retaliation, or disciplinary purposes.

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Staff is to ensure that no greater amount of O.C. is used than is necessary to gain control of the situation and subdue the minor.

2. O. C. will not be used on minors who are resistive but not physically aggressive.
3. O.C. will be used in conjunction with the use of force continuum and only after all other reasonable means of intervention have been exhausted to gain voluntary compliance from the minor. If possible, a clear warning should be given that O.C. will be deployed if compliance is not gained. O.C. can be deployed without warning during those occasions where the safety and security of staff, minors and the institution are immediately threatened.
4. Special consideration should be given when dealing with those minors who might have or are exhibiting or have any of the following conditions:
 - a. Minors who are clinically obese.
 - b. Minors who are under the influence of drugs or alcohol.
 - c. Minors exhibiting bizarre or violent behavior.
 - d. Minors with documented allergies.

- e. Minors with a history of mental illness.
- B. All staff authorized to carry O. C. will carry it while on duty. In order to be considered authorized, the staff must:
 - 1. Have completed the approved chemical agents course.
 - 2. Be on duty and have authorization to have possession of O. C.
- C. Full time staff:
 - 1. All authorized full time staff will be issued their own canister of O. C.
 - 2. All authorized full time staff is to have a canister of O. C. in their possession during working hours.
 - 3. If an O.C. canister is lost, an SIR is to be completed with information regarding the last known and possible location.
 - 4. Upon resignation/termination, the O. C. will be turned in prior to receiving their last paycheck.
 - 5. Staff is to check their canisters of O. C. and report any problems to the Supervisor (e.g., replacement, age.)
- D. Extra help staff:
 - 1. Extra help staff may use O. C. if they have completed an approved chemical agents course.
 - 2. Under no circumstances will extra help staff maintain possession of a county issued O. C. canister when they are off duty.
 - 3. O. C. will be checked in and out by extra help staff.
- E. Any use of O. C. in violation of this policy will result in disciplinary action.
- F. All canisters will be stored in a locked cabinet when not being carried by staff.
- G. Personal O. C. will be locked in vehicles or assigned lockers when on duty and is not to be utilized within the institution.
- H. O. C. will be carried by staff with an appropriate department issued holster/carrier.
- I. Staff shall participate in defensive tactics training approved of and provided by the department. Staff shall utilize only those methods for managing assaultive behavior that are approved by the department. Training consists of 16 hours of initial training with monthly two-hour refresher courses for all staff and includes use of force education, appropriate force techniques/methods, and use of physical restraints. An overview of use of force techniques will also occur during new staff orientation prior to staff taking responsibility for the supervision of minors.

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- J. A separate training course in the use of O. C. spray following the regulations set forth by California Department of Justice and California Penal Code is also required of all staff. The initial training consists of 8 hours and includes known medical conditions that would contraindicate certain types of force (such as a broken arm); acceptable chemical agents (OC); methods of application; signs or symptoms that should result in immediate referral to medical or mental health staff (such as an asthma attack); and, requirements of the decontamination of chemical agents, if such agents are utilized.

IV. Use of O. C.:

- A. Staff will assess the situation and use their best judgment before deploying O. C. spray.
- B. A radio call for back up and location should be transmitted.
- C. If circumstances permit, a verbal warning will be made to the minor that O. C. will be deployed if behavior continues.

- D. A warning to all other minors will be issued using the command “take cover”. All minors should respond by distancing themselves from the potential spray area and laying face down on the ground, with their hands behind their backs for control purposes.
- E. A short one to two-second burst of O. C. spray should be used, aiming directly to the facial area of the uncooperative minor. Should the minor’s face be covered, staff should aim for exposed areas of skin.

V. Aftercare Procedures:

- A. In all cases where O. C. is deployed, and the situation is under control, the minor will be removed to a safe area where first aid can be provided and decontamination can begin.
 - 1. First aid for O. C. is fresh air and cool water.
 - 2. Water should be sprayed or splashed in the minor’s face.
 - 3. The minor should be instructed not to wipe their face, but to blot it.
 - 4. Advise minor not to wash with soap and warm water, as it will increase discomfort.
 - 5. Advise minor to decontaminate using cool water alone first. Warm water and soap may be used the following day or later in the evening.
- B. All minors sprayed with O. C. must be referred to medical personnel as soon as possible. If no medical personnel are available, the medical on-call provider will be called to inform them of the O. C. spraying and the status of the minor within one hour. If the minor displays respiratory distress and/or unusual symptoms, the medical staff will be contacted immediately.
- C. Five (5) minute room safety checks shall be completed by staff for a minimum of one (1) hour or longer, if deemed appropriate by medical and/or supervisory staff, following a minor’s decontamination from an O. C. spray incident. It is recommended that the minor remain in staff presence during this one-hour time frame.
- D. A staff member sprayed with O. C. should follow the same decontamination procedure.
- E. All contaminated items (clothing, bedding, etc.) should be removed and laundered.

35d

F. Documentation:

- 1. The use of O. C. will be reported in writing in a Special Incident Report routed to the nurse for follow-up, and reviewed by the Supervisor on Duty, Duty Officer, and the Division Director.
- 2. The staff member deploying the spray will be responsible for completing the Special Incident Report before leaving the institution.
- 3. The Special Incident Report will include:
 - a. A clear and factual summary of the use of O. C. spray and its effectiveness.
 - b. A complete description of aftercare procedures and medical treatment/referral or refusal of treatment.
 - c. Juvenile Hall Director will review all reported incidents of O. C. use to ensure compliance with policy.

See following page for Timeline.

35e

TIMELINE

OLEORESIN CAPSICUM SPRAY

Medical Staff:

Within one (1) hour of being O. C. sprayed health service staff will be notified. If not on-site, the on-call provider will be called.

If minor displays respiratory distress and/or unusual symptoms, medical staff will be notified immediately.

Juvenile Hall Staff:

Notification to medical staff, if not on-site. Call on-call provider within one (1) hour of spraying.

Notification to medical staff of any unusual symptoms or respiratory problems immediately.

Minor in staff presence and/or five (5) minute room safety checks for a minimum of one (1) hour after decontamination.

Decontamination of minor; cool water and fresh air.

Special Incident Report written and routed to medical staff, to include all aspects of spraying and minor. (SIR to include: clear and factual use of O. C. spray and its effectiveness. A complete description of aftercare procedures and medical treatment/referral, as well as refusal of treatment.)

Mental Health Staff:	None
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USE OF PHYSICAL RESTRAINTS	Date: { TIME \@ "MM/dd/yyyy" }
Authority Reference: Title 15 Article 5 Section 1358	
Attachment: Observation Sheet	

PURPOSE:

To establish policies and procedures regarding the utilization of restraints. To describe the purpose for, location, inventory, and safe use, of handcuffs and leg restraints.

POLICY:

Physical restraints are utilized only when it appears less restrictive alternative means would be ineffective in controlling inappropriate behavior.

- I. Physical or mechanical restraints shall only be used as a last resort, shall not be used as a form of discipline or punishment, and shall not be used as a substitute for treatment.
- II. Physically restraining a minor by use of mechanical restraints shall be done only when necessary and under the following circumstances:
 - A. In a custody transportation situation on or off grounds.
 - B. As a temporary emergency measure.
 - C. Mechanical restraints shall not:
 1. Be placed about the neck of a minor, nor will restraint equipment be applied in any way so as to inflict physical pain or restrict blood circulation or breathing.
 2. Be used to secure a minor to any part of a transporting vehicle (with the exception of safety seat belts).
 3. Affix hands and feet together behind the back (hog-tying).
 4. used on minors experiencing neurological or muscular injury; circulatory impairment; dehydration; exhaustion, respiratory and cardiac collapse; fractures; kidney damage; strangulation; aspiration, especially if a minor is restrained on his or her back ; any serious underlying medical condition; and the possibility of exacerbating an existing mental condition.
 5. An immediate medical/mental health referral will be made if the minor exhibits deterioration in physical or mental status such as shortness of breath, acute pain, changes in level of consciousness, alteration in skin color and or circulation, signs of trauma, and or escalation in combative, inappropriate and or bizarre behavior.
- III. Prior approval for the utilization of mechanical restraints must be obtained from the Supervisor on Duty, Duty Officer, or Division Director. There shall be at least two staff present when restraints are applied. The application of restraints, whether in a transportation or in a physical restraint situation, is to be checked by the Supervisor on

Duty and/or Duty Officer.

- IV. Continuous direct visual supervision shall be conducted and documented to ensure that the restraints are properly employed, and to ensure the safety and well being of the minor. Observation of the minor's behavior and staff intervention shall be documented at least every 15 minutes. While in restraint devices, all minors shall be housed alone or in a specified housing area for restrained minors that make provision to protect the minor from abuse. In no case shall restraints be used as punishment or discipline, or as a substitute for treatment.
- V. Staff shall attempt to have other staff present to witness the application, the evaluation and removal of restraints. All restraints shall be removed immediately upon the minor regaining self-control. There will be continuous direct visual supervision of minors being restrained.
- VI. Staff will only use such force as necessary to control the minor. The use of "bar arm choke hold" restraint is specifically prohibited. Locked wrist holds should generally not be used on minors aged 12 or under (due to immature bone growth - this hold can lead to a broken arm or wrist).
- VII. The burden of justifying the use of physical restraint is on the employee(s) involved and is subject to administrative review. Physical restraints should only be used as a last resort when less restrictive alternatives would be ineffective. If physical control fails to fall within the parameters outlined and a physical assault has been committed by a staff member on a minor, criminal charges could be filed against the employee(s) involved pursuant to the following Penal Code Sections:
 - A. Section 273d of the California Penal Code states, "Any person who lawfully inflicts upon any child any cruel or unusual punishment or injury resulting in a traumatic condition is guilty of a felony and upon conviction thereof shall be punished by imprisonment in the State Prison for two (2), four (4), or six (6) years or in the County Jail for not more than one (1) year.
 - B. B-18.0 Section 240 of the California Penal Code states, "An assault is an unlawful attempt coupled with the ability to commit a violent injury on the person of another."
 - C. Section 241(a) of the California Penal Code states, "An assault is punishable by fine not exceeding \$1,000.00 or by imprisonment in County Jail not exceeding six months or both such fine and imprisonment.
 - D. Section 242 of the California Penal Code states, "A battery is any willful and unlawful use of force or violence upon the person of another."
 - E. Section 243 (a) of the California Penal Code states, "A battery is punishable by a fine not exceeding \$2,000.00 or by imprisonment in County Jail not exceeding six months or by both such fine and imprisonment."

Section 673 of the California Penal Code states, "It shall be unlawful to use in the reformatories, institutions, jails, state hospitals, or any other state, county, or city institution, any cruel, corporal, or unusual punishment or to inflict any treatment or allow lack of care whatever which would injure or impair the health of a prisoner, inmate, or person confined; and punishment by the use of straight jacket, gag, screws, shower bath, or the trussing up of a prisoner, inmate, or person confined is hereby prohibited. Any person who violates the provisions of this section or aides, abets, or in any way contributes to the violation of this section shall be guilty of a misdemeanor."

- VIII. The above-mentioned guidelines and laws should not be misinterpreted by staff to mean that physical restraint is not used in this facility. There are times when it is clearly necessary, pursuant to the guidelines outlined herein.
- IX. Employees observing improper restraint shall immediately attempt to correct the situation and report the occurrence to the Division Director and/or a Supervisor.
- X. Special Incident Reports (SIR) shall be prepared and maintained on all physical contacts and incidents involving physical restraints as to persons present, time, date, reason, means, duration, and condition of the minor while in restraints. Staff will complete the Special Incident Report (SIR) by end of shift. SIR must be reviewed by Supervisor or Duty Officer and by the end of shift. Supervisor will addenda SIR and Division Director will review the next working day.
- XI. Timelines:
- A. Physical Restraints
- i. Every minor in restraints must be under continuous direct visual supervision.
 - ii. Health Service (CFMG) staff will be notified within one (1) hour of placement in restraints by Juvenile Hall staff. If Health Service staff is not on duty, staff will notify the medical on-call provider by telephone. If the medical on-call provider does not respond to the initial call within five (5) minutes, the back-up on-call provider will be contacted. The on-call provider must come to the facility and provide a medical assessment within two (2) hours of the minor being placed in restraints. It is imperative that licensed medically trained staff examines the minor as soon as possible, but not more than two hours after being placed in restraints.
 - iii. The minor must be medically cleared through an on-site face-to-face assessment by Health Service staff and approved for remaining in physical restraints. This on site clearance must take place every three (3) hours thereafter, to determine the appropriateness of continued use of restraints.
 - iv. As soon as possible, but within four (4) hours of placement in restraints, the minor must be evaluated on site by a licensed mental health professional to assess whether the minor needs immediate and/or long-term mental health treatment. This assessment will be arranged by the on-call medical provider and will occur unless staff is directed by on-call provider to transport to the hospital emergency room for further evaluation.
 - v. Cardiopulmonary resuscitation equipment is available for use outside the Nurse's station.
 - vi. Review for continued retention in restraints a minimum of once every hour by the Supervisor on Duty, or Duty Officer.
7. Range of motion exercises of alternating extremities a minimum of ten (10) minutes every two hours.
 8. The minor must be provided with provisions for hydration every half hour and sanitation needs once every hour. If meals are served, provisions for eating will be made, unless the minor's behavior poses a threat to themselves or staff. This will be thoroughly documented in the Special

Incident Report.

- i. The minor must be in the constant presence of staff while in restraints (direct visual observation.) The actual times of the medical and mental health reviews and evaluations will be documented together with pertinent decisions and observations of the minor's behavior. At a minimum the minor's behavior and any staff interventions shall be documented at least every 15 minutes. Actions taken should be noted in the Unit Log and in a Special Incident Report, both of which should be monitored by the Division Director, Supervising Juvenile Detention Officer, or Duty Officer to ensure entries are consistently and accurately recorded.
- ii. The Special Incident Report will be forwarded to the nurse for medical follow-up by the next day's shift.

XII. Juvenile Hall Supervisors are responsible for training and reviewing their staffs' knowledge and performance of restraint techniques. This is to be accomplished in initial training with review to be done at minimum quarterly.

XIII. Review of policy: Staff may use physical force to restrain a minor who becomes violent, displays signs of imminent violence, to prevent injury, escape, or suicide.

- A. In restraint and control situations, staff may utilize only those control and restraining techniques and devices that are approved and provided by the department.
- B. When restraint is used, staff shall utilize only the minimum force necessary to control the minor.
- C. The use of restraints is recognized as a necessary measure to effect control in select situations. The application and use of restraints must be done in a safe and proper method.
- D. Restraint equipment may include hard restraints, which must be used in accordance with the guidelines provided.
- E. Staff must be physically in the presence of any minor while the minor is in restraint equipment.
- F. There will be a supervisory and/or administrative review for the use of all physical restraints.

XIV. PROCEDURES FOR USE OF HANDCUFFS AND LEG RESTRAINTS:

- A. Handcuffs and Hard Leg Restraints:
 1. An inventory list of each set of handcuffs and leg restraints assigned to the Juvenile Hall will be kept at the Control Desk. They will be listed by number.
 - a. They will be inventoried each shift by an assigned staff member.
 - b. The results of the inventory will be submitted in writing on the appropriate form.
 2. Should handcuffs or leg restraints be checked out to non-Juvenile Hall staff, this fact will be noted in the Unit A Log Book indicating the number of the set of handcuffs, who checked them out, and the estimated time of return of the handcuffs.
 3. On-duty staff must note when the handcuffs/leg restraints are returned.
 4. Each Unit must have one set of handcuffs on their person and ready use at

- all times.
6. When handcuffs are returned to storage, they are to be left in such a position as to be available for use immediately. This includes making certain that they are unlocked.
- B. Leg Shackles:
1. When applying leg shackles, have the minor kneel on a chair or bench facing away from you.
 2. Apply the restraints while the minor is kneeling and then assist the minor off the bench/chair.
- C. Transportation Belts/Belly Chains:
1. For transporting a juvenile, staff is to utilize a transportation belt (or where very high security is necessary, a transportation chain). These items are to be used only as a security measure when transporting a minor and never for restraint purposes.
 - a. The belt is to be placed around the minor's waist, through the minor's pant loops, if possible.
 - b. The handcuff ring or loop is to be in front of the juvenile.
 - c. The belt/chain should be fastened securely enough so that the juvenile cannot slide it from side to side.
 - d. Once the belt or chain is on the minor, the handcuffs are slipped through the ring on the belt.
 - e. The minor's palm should be turned inward for application. Again, the double safety lock is important to utilize.
- D. Restraint Removal:
1. The process of restraint removal can be particularly dangerous since handcuffs and leg restraints must be taken off one at a time, and it is possible for the minor to use the loose cuff as a weapon.
 - a. The removed cuff should always be firmly grasped by staff until both cuffs are completely off. The belt or chain should also be removed by staff only, as it could be used as a weapon by the minor.
 2. Leg restraints are to be removed in the same manner as they were applied, by having the minor kneel on a chair or bench.
- E. Precautions: Staff should be aware that some medical conditions might be affected by the use of restraints (e.g., broken bones, casted extremities, spinal injuries, anxiety disorders.)
1. Use of physical force will not be used on pregnant minors in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222. If there is legitimate safety and security need, prior authorization must be obtained by contacting the Division Director or Chief Probation Officer.
 2. Proper use of handcuffs and leg restraints is important to staff. Hard restraints can become dangerous weapons even when on the wrists of a juvenile.
 3. Restraints do not prevent escape. A staff member is most vulnerable to attack when in the process of putting on or taking off the handcuffs.
 4. Restraint application:
 - a. To reduce the danger, the minor should be required to hold his or her arms extended behind his or her back, palms turned out, when the handcuffs are placed in position.

- b. Handcuff keyholes should face toward the juvenile (limiting access to the minor).
 - c. To prevent slipping, the double lock safety must be utilized. This is accomplished by inserting the key prong into the safety opening on the cuffs.
 - d. The key must be securely attached to the staff set of keys.
- 5. Staff is never to allow minors access to restraint equipment.
- 6. When minors are transported more than singly, staff must take particular care to plan this out and review the situation prior to leaving, with the Supervisor on Duty or Duty Officer.
 - a. Numbers of minors, classification levels, transportation vehicles available, and destination must all be taken into account.
 - b. When in doubt, ask.
- F. Considerations:
 - 1. As many staff members as possible must be on hand to lessen the chance of harm to the minor or staff. At least one staff member of the same sex should be present if at all possible and assist fully in the procedures.
 - 2. All other minors should be in their assigned sleeping area prior to undertaking a restraint if at all possible. It should be noted that, often times, moving other minors to their rooms will have a dampening effect on the minor that is acting out which may assist in defusing the situation without restraint.
 - 3. Minors being physically restrained must be housed alone during the restraint in A Unit.
 - 4. Explain to the minor what you are doing and why, even though you think he or she will not understand.
 - 5. Always be sure that circulation is not restricted (e.g., exercise extremities.)
 - 6. If the minor's skin becomes irritated, remove restraints one at a time
 - 7. Remember that a restrained minor is totally dependent for all of his or her needs. You are responsible for fluids, toileting, etc. Fluids are to be offered every half hour and toilet facilities every hour.
 - 8. Never give a restrained minor a pillow. It could be dangerous. Remove all objects from the room.

XV. USE OF RESTRAINTS (Summary):

- A. Definition: Restraints are devices that immobilize a minor's extremities and/or prevent the minor from being ambulatory.
- B. Approved Types of Restraints: Only those restraint devices approved of and/or provided by the department will be used in Juvenile Hall. Approved restraints include mechanical handcuffs, mechanical leg restraints and belly chain transportation belt. The use of other restraint devices is strictly prohibited.
- C. Alternatives: Restraint devices should be utilized only when it appears that less restrictive alternatives would be ineffective in controlling the minor's behavior or providing sufficient security.
- D. Conditions For Use: Restraints may be used when transporting a minor from one location to another, When the minor's behavior presents an immediate threat to him/herself or others, or when a minor exhibits behavior which could result in the destruction of property or reveals the intent to cause self-inflicted physical harm.
- E. Minors shall be placed in mechanical restraints only with the approval of the Director

- or the Supervisor on Duty.
- F. No minor shall be left in restraints for longer than is absolutely necessary. During the time the minor is in restraints, he/she shall be housed alone to protect the minor from abuse. Constant one-on-one supervision will be required while the minor is in restraints.
 - G. Restraint Adjustments: Minors restrained in handcuffs and shackles will be monitored for proper circulation and adjustment, if needed, a minimum of every 15 minutes. At that time, the minor's behavior and any staff intervention shall be documented.
 - H. Medical/Mental Health Review: A medical opinion on placement and retention of restraints shall be secured as soon as possible to assess the need for medical care, but no later than two hours from the time of placement. The on-call medical provider will be called no later than one hour after placement in restraints. If the minor is uncooperative and it appears he/she will still be in restraints for a total of two hours or longer, medical staff will be required to come to Juvenile Hall and assess the minor prior to two (2) hours of being in restraints. The minor shall be medically cleared for continued retention at least every three (3) hours thereafter. A mental health consultation shall be secured as soon as possible, but in no case longer than four hours from the time of placement, to assess the need for mental health treatment.
 - I. Prohibited Use of Restraints: Restraints will not be used as a form of discipline or punishment, and minors will not be restrained to any fixed object.
 - J. Exercising The Extremities of Minors in Restraints: "Range of Motion" exercises shall be used alternating extremities a minimum of ten (10) minutes every two hours. Exercise policies may vary for sedate versus "struggling" minors.
 - K. Food, Fluids and Toilet Needs: Minors in restraints will be provided water a minimum of once every half hour. Minors in restraints will be allowed to use the restroom once every hour. If a minor is in restraints during a scheduled mealtime, they will be allowed to have access to their meal.
 - L. A Supervisor on Duty or Duty Officer will review and document reason for minors in restraints for continued restraint retention once every hour.
 - M. Prevent injury to the minor: When applying restraints, staff shall adhere to the following:
 - 1. Use no greater force than necessary, and when possible, two staff should be present when restraints are applied.
 - 2. Restraints shall not inflict pain or restrict blood circulation or breathing.
 - 3. Minors shall not have restraints placed around their neck and hog tying and gagging are prohibited.
 - 4. A minor who is in restraints will be placed in a single occupancy room with one-on-one supervision to ensure his/her safety and documentation shall be maintained indicating the time and person supervising.
 - 5. Every measure shall be provided to prevent dehydration, unsanitary conditions, circulation or nerve damage or any other medical problems.
 - 6. On-going medical and mental health evaluation, consultation and clearance shall be secured on any minor who is in restraints pursuant to Section 1358 of Title 15 of the California Code of Regulations.
 - N. Incident Report: When restraints are used, except during routine transportation of a minor, a Special Incident Report and Restraint Check form will be completed before the end of the reporting employee's shift, with appropriate copies forwarded, to include medical staff. The Juvenile Hall Division Director will review all incidents involving physical restraints to ensure compliance with policy and procedure and California Code of Regulations, Title 15. Any discrepancies will be investigated pursuant to department policy.

See following page for Timeline.

TIMELINE

Medical Staff:

RESTRAINTS

Within one (1) hour of being placed in restraints medical staff will be notified. If medical staff is not on-site, the on-call provider will be called.

Juvenile Hall staff will notify the on-call provider by telephone. The on-call provider must come to the facility and provide a medical assessment within two (2) hours of the minor being placed in restraints.

Minors must be medically cleared and approved for retention in restraints every three (3) hours.

Juvenile Hall Staff:

Notification to medical staff, if not on-site. Call the on-call provider within one (1) hour of placing minor in restraints.

Special Incident Report written prior to the end of shift and routed to Medical Staff, to include all aspects of restraint.

Constant direct visual supervision of minor in restraints.

Review and document reason for continued restraint retention a minimum of once every hour, by Supervisor on Duty or Duty Officer.

Fluids offered every half hour.

Toilet facilities offered every hour.

Cardiopulmonary resuscitation equipment is available for use outside the Nurse's station.

Restraints will be monitored at least every 15 minutes and adjusted, if needed, At that time, the minor's behavior and any staff intervention shall be documented.

Mental Health Staff:

Evaluated by Mental Health within four hours of placement, if on site, if not on-site. The medical on-call provider will be contacted for instructions.

**Shasta County Juvenile Hall
Restraint Checks**

Title 15 1358 Restraints

Minor presents an immediate danger to themselves or others. Minor exhibits behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm.

Minor will be under continuous, direct visual supervision.

Restraints shall be checked for fit and adjusted, if needed, every 15 minutes

Provisions for hydration every 30 minutes, and sanitation needs every hour.

Exercising of extrememities for 10 minutes every 2 hours.

Review and document reason for continued restraint once each hour by Supervisor/OIC.

Medical notification within 1 hour (via telephone if not on-site).

Medical must provide a direct medical assessment within 2 hours of restraints applied.

Mental health review within 4 hours of placement. If not on-site, medical will advise.

Minor Name: _____

Date: _____

Restraints authorized by: _____ **Time:** _____

Medical staff member first notified: _____ **Time:** _____

Person authorizing removal from restraint: _____ **Time:** _____

Review by Supervisor/OIC:

Time	Name	Observations:
____/____/____	____/____/____	____/____/____
____/____/____	____/____/____	____/____/____
____/____/____	____/____/____	____/____/____

Time:	Name	Observations:
____/____/____	____/____/____	____/____/____
____/____/____	____/____/____	____/____/____
____/____/____	____/____/____	____/____/____
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From: Ian Kysel
Sent: Monday, June 11, 2018 8:41 PM
To: 'Erin Ceccarelli'
Cc: Michelle Ochoa Castañeda
Subject: RE: PRA - 5-9-18

Dear Ms. Ceccarelli:

Thank you for your note. I am sorry we were unable to connect by phone. I will review your production and be in touch if I have further questions or concerns.

Best,
ian

Ian Kysel, Staff Attorney
ACLU Foundation of Southern California

This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited.

From: Erin Ceccarelli [mailto:elceccarelli@co.shasta.ca.us]
Sent: Monday, June 4, 2018 5:35 PM
To: Ian Kysel
Subject: PRA - 5-9-18

Dear Mr. Kysel:

This is to respond to your Public Records Act (PRA) request, dated May 9, 2018, addressed to Tracie Neal, Chief Probation Officer for the Shasta County Probation Department. Your request was forwarded to me for response.

Given the overly broad nature and length of the request, and to facilitate being able to provide you with all public, non-exempt records responsive to your request held by the County, I called you on May 17, 2018, May 31, 2018, and June 1 but to date have not been able to have a discussion with you about this request. The following serves to respond based on my understanding of your request. If you would like to discuss your request with me or have any questions about this response, please contact me.

Your May 9, 2018 request appears to request records previously provided to you by Shasta County in response to your April 2, 2018, PRA request. With respect to the current request (May 9, 2018), the following sections request records that our County previously sent you in response to your April 2, 2018 request: Section 1.a., subsections i- v, and vii – xiv. If you would like me to provide you a copy with records responsive to these subsections again, please let me know. Sections 1.a.vi and 1.a.xv of your May 9, 2018 request do not appear duplicative of your prior request. The public records in our possession that we understand to be responsive to 1.a.vi and 1.a.xv are attached.

Public records we understand to be responsive to item 2 of your request ("Training Materials") will be provided separately due to email capacity constraints.

The "data" information you are requesting in item 3.a., subsections iii, iv, v, vi, and vii constitute juvenile case file information, which are specifically exempt under Welfare and Institutions Code section 827 (see also Government Code section 6254(k)). As such, despite your definition that the request does not fall within the juvenile case file, and despite

your request that we redact records as needed, your request for data clearly does fall within juvenile case files information and is only available through an 827 Petition directly to the court (see *Wescott v. Yuba County* (1980) 104 Cal.App.3d 103, 106; *T.N.G. v. Superior Court* (1971) 4 Cal.3d 767). We will comply with any valid court order requiring disclosure of juvenile records pursuant to section 827. For the above reasons, including the restrictions in 827, Shasta County is not authorized to provide you the "data" or records sought by item 3, subsections iii, iv, v, vi, and vii.

Public records we understand to be responsive to the remaining portions of item 3 ("Data"), are attached, which include monthly reports, copies of invoices for the purchase of chemical agents, and records related to stock and destruction of chemical agents. Your request asks for creation of records and compilation of data, which is not required under the California Public Records Act and to that extent, the County declines to create new records or compile data. Further, section 3 seeks personnel records, which do not exist, but even if they existed, would be subject to the exemptions found in Government Code section 6254(c) and would be protected by individual third parties' rights of privacy pursuant to the California Constitution.

I trust this response fully satisfies your request. But, if you have any questions or would like to discuss this matter, or have any additional requests, please feel free to contact me by email or by phone at (530) 245-6213.

Erin Ceccarelli

Chief Fiscal Officer
Shasta County Probation
2684 Radio Lane
Redding, CA 96001
(530) 245-6213
elceccarelli@co.shasta.ca.us

From: Ian Kysel
Sent: Wednesday, May 23, 2018 3:04 PM
To: 'Erin Ceccarelli'
Cc: Michelle Ochoa Castañeda
Subject: RE: Public Records Act Request - Shasta County

Dear Ms. Ceccarelli,

I am sorry to have missed you. I just left you a voicemail and/but am happy to confer at your convenience to see if there is clarification we might provide to assist your production of disclosable records in response to our request about the use of chemical agents in Shasta County probation department facilities.

Best,
ian

Ian Kysel, Staff Attorney
ACLU Foundation of Southern California

This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited.

From: Erin Ceccarelli [mailto:elceccarelli@co.shasta.ca.us]
Sent: Friday, May 18, 2018 4:18 PM
To: Ian Kysel
Subject: Public Records Act Request - Shasta County

Good afternoon,

This is to follow up on PRA on dated May 9, 2018 related to Chemical Agents used in our Juvenile Rehabilitation Facility. I left a voice mail for you and sent an email on May 17, 2018 requesting a conversation to clarify portions of your request. Please contact me at your earliest convenience to discuss these items to allow me to appropriately respond to your request.

At this time it appears we will need until at least June 4, 2018 in order to further respond to your request. Please consider this email notification of the extension of time.

Thank you,

Erin

Erin Ceccarelli

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