HUMBOLDT COUNTY JUVENILE HALL

PROCEDURE MANUAL

CATEGORY: BEHAVIOR POLICIES AND STANDARDS - 1100

PROCEDURE TITLE: USE OF FORCE
Reviewed: December 17, 2015
Revised: April 13, 2018

AUTHORIZATION: Ray Watson

AUTHORITY CITED: CCR TITLE 15 SECTIONS 1357, 1358, 1358.5

GENERAL POLICY

The policy of this facility is to provide for the physical safety and well-being of youth, correctional staff, and visitors. It is often a difficult assignment and it involves handling the fears, anxieties, hostilities, and aggressions of agitated children. Training shall be provided to authorized correctional staff in the policy regarding use of force, mechanical and physical restraints and chemical restraints (oleoresin capsicum—OC). Annual training will be provided regarding the use of force options, case law concerning use of force, management techniques to be considered and/or in lieu of force.

Use of physical force consists of physical contact with a detainee in order to control dangerous behavior or to enforce order, including the use of mechanical restraints and chemical agents. Physical force is justified only when there is imminent danger of personal injury, when there is a risk of escape from confinement, or to maintain or regain control over a facility. Only department approved/issued handcuffs, vinyl restraints and shackles will be used as safety restraints. Youth in safety restraints will be isolated from other youth and monitored directly by one or more correctional staff members of the same sex.

When dealing with aggressive or violent youth, it is essential to use only the minimum amount of force necessary for self-defense or to ensure the safety of the youth or others. Correctional Staff should attempt to avoid the use of force whenever possible. All use of force will be based upon what is reasonable, appropriate and available given the circumstances. Any use of lethal force is disallowed. In situations where the use of physical force is necessary, staff will make attempts to re-establish a relationship with the youth through counseling methods. The intent is to help the youth identify the behavior that resulted in the need for use of force and assist the youth in exhibiting voluntary compliance.

The use of physical force for reasons of discipline, punishment, treatment, or in retaliation for a youth's resistive, aggressive, or violent acts is PROHIBITED. When applying physical intervention/restraint, Correctional staff must not allow anger or emotion to cause loss of control. Respect for all youth is essential even though the youth's present behavior may be unacceptable. No labels for youth are permitted, nor can peer pressure be allowed to degrade or ostracize them. Degradation of youth by officers is forbidden. Every youth is entitled to be addressed in a manner that promotes understanding and personal respect. Profane, obscene, or derogatory
language WILL NOT be used by officers. Officers are not allowed to use words that are derogatory in relationship to race, color, physical appearance, religion and/or cultural background. Correctional staff are to accommodate youth that are impaired, illiterate or do not speak English.

All incidents involving the use of force shall be documented and reviewed as to appropriateness of action taken. Further, correctional staff has an obligation to intervene and take affirmative action to stop and/or report the inappropriate use of force. Disciplinary action may be taken for the improper use of force.

SUBSECTION 1101-01

USE OF FORCE OPTIONS AVAILABLE TO CORRECTIONAL STAFF

“Physical force” is an immediate physical means of overcoming resistance and controlling the threat of imminent harm to self or others, and complies with the provisions of Title 15, CCR, Article 5 and Section 1357. Physical force includes the use of chemical restraints, weaponless control techniques and mechanical restraints.

Correctional Staff should attempt to avoid the use of physical force whenever possible. The use of defensive force should always be based on what is reasonable and appropriate given the individual circumstances. Force up to and including the use of approved physical control and/or restraint techniques is justified under the following circumstances:

1. There is imminent danger of personal injury to self or others.
2. There is imminent risk of serious damage to property.
3. There is imminent risk of escape.
4. To protect a youth from self-inflicted injuries or suicide.
5. When a youth's actions threaten correctional staff’s ability to maintain control, order, safety and/or security within the facility.
6. To ensure physical/medical safety of a youth with medically indicated/documented pre-existing physical/medical condition(s).
Use of force options to consider include:

* Correctional Staff presence, use of multiple correctional staff.
* Dialogue/counseling.
* Verbal commands.
* Weaponless control techniques and control holds such as twist lock, bent wrist lock, bar hammer lock, and hair take down.
* Mechanical hard restraints (handcuffs, belly-chain, shackles, vinyl).
* Chemical restraints (Oleoresin Capsicum)

**NOTE:** Only properly trained and authorized correctional staff may carry chemical restraints within the confines of juvenile hall, while supervising the JAWS work crew and/or while engaged in transport duties.

**Consideration of Use of Force Options:**

Staff members should use the force option correlating to the youths escalation of behavior and/or level of restraint (actively resisting or passively resisting). This listing is not be construed as meaning that the defensive force options are to be used in only the order listed. Circumstances may indicate that correctional staff begins at the first option of forces, or alternately at the last option. The force option deployed should only be the minimum necessary for self-defense, to overcome resistance and control aggressive or violent individuals, and to ensure the safety of the youth or others. When physical force/restraint is used, whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liability. This does not preclude self-defense if a correctional staff member is attacked by a youth(s), in the event of an emergency response by a correctional staff member to a life-threatening situation is deemed necessary.

Female detainees in the advanced stages of pregnancy should not be placed in shackles and/or belly belts. If necessary, these young women can be placed in handcuffs in the front. The pregnant youth should not be placed onto their bellies and/or placed in any kind of situation where harm could come to their unborn child or to themselves.

**DOCUMENTATION AND INVESTIGATION**

Whenever physical force is used, a detailed incident report must be completed and submitted to the manager by the end of the shift. The report should describe why physical force is necessary, and level/extent of force used. All incidents involving the use of force will be subject to administrative review and investigation within 24 hours following the incident. Any improper use of force may be subject to disciplinary action. Incidents involving use of force are subject to detainee grievances. (See Subsection 500-02)
USE OF MECHANICAL RESTRAINTS

Youth shall be placed in mechanical restraints only with the approval of the facility manager or the shift supervisor. Only hard and/or vinyl mechanical restraints (handcuffs and shackles) are authorized for use. Youth placed in mechanical restraints are to be placed in their cell and/or “holding” cell as soon as possible.

At no time are correctional staff at juvenile hall to utilize any restraint hold, devise or technique which is contraindicated by known medical conditions or would result in shutting off the air or blood supply to the brain of the person being restrained.

Mechanical restraints are never to be used for the purpose of punishment or discipline or as a substitute for treatment. Mechanical restraints should only be used when it appears that less restrictive alternatives would be ineffective in controlling the youth’s behavior. Mechanical restraints are only to be used for those youth 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 harm.

When mechanical restraints are necessary the following procedure/method of application are to be followed. Staff are to constantly observe the youth while in restraints and document on the “At Risk Behavior Checklist” at a minimum of every five minutes the youth’s current behavior and/or interventions being used.

Whenever any physical force occurs with the youth, whether mechanical restraints are applied or not, the youth will be set up within twenty-four (24) hours to be seen by licensed medical staff. Licensed medical staff will determine if any injuries have occurred.

A. APPLICATION OF MECHANICAL RESTRAINTS

1. When applying restraints use no greater force than is necessary. Whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liabilities.

2. Correctional staff are vulnerable to attack when applying or removing restraints. Once one cuff is secured on the detainee, the free cuff then becomes a dangerous weapon when swung. Therefore, when applying the restraints, hold the loose end firmly until both cuffs have been applied to the detainee.

3. If in a prone position apply handcuffs, double locked, behind back. Make sure keyhole faces outward for easy locking/unlocking.

4. Shackles - Double Locked. Shackles are utilized to restrict kicking and injury to Correctional Staff. Shackles ARE NOT to be joined to handcuffs. (Hog style method) Make sure keyhole faces outward.
5. When applying handcuffs/shackles, be sure they are only tight enough to prevent the detainee from removing them. Correctional staff applying restraints are to make sure they are not cutting off circulation.

6. Detainees in mechanical restraints are to be housed alone or in a specific area to keep youth from view of other detainees. A minimum of one correctional staff member of the same sex, when possible, is to remain in the presence of the youth to provide continuous visual supervision in order to ensure the safety and well-being of the youth. Such observation shall be documented every five minutes on the “At Risk Behavior Checklist”. Detainees are not allowed to stand; they may remain sitting, but preferably lying down in a prone position for staff and youths’ safety. Youth allowed to sit up in restraints can too easily stand up and create a safety hazard for themselves and staff.

7. The correctional staff member with the youth should attempt to solicit cooperation as quickly as possible, and to insure that an out-of-control youth does not inflict self injuries. In the event of apparent seizures or psychotic breaks, licensed medical help should be sought immediately. An immediate restraint check should be conducted to ensure circulation is not cut off and nerve damage did not occur. If circulation or nerve damage is apparent, seek licensed medical attention.

8. The shift supervisor is to continually monitor the use of restraints to ensure no circulation and/or nerve damage, airway obstruction, or psychological trauma occurs, that the youth’s hydration and sanitation needs are attended, that CPR equipment is readily available, and that the restraints are removed as soon as possible once cooperation/compliance is gained, and it is considered safe to do so.

9. Correctional staff are to be cautious when removing restraints; have youth remain lying down on stomach, hold loose cuff/shackles securely so that it cannot be used as a weapon.

B. REMOVAL OF RESTRAINTS; TIME LIMITS/REVIEW PROCESS

1. Administrative/Supervisory Review

If restraints are not removed within one hour, Facility Manager/Director and/or licensed medical approval for continued use of restraints shall be obtained. When management or licensed medical staff are contacted communicate the events leading up to the restraint, the actual restraint, and the behavior of the youth while in restraints so they will be discussed and evaluated. Either the Juvenile Corrections Officer in charge will be instructed to remove the restraints of a non-combative yet verbally threatening youth for observation or instructions will be to replace hard restraints with soft/vinyl restraints and to call licensed medical and licensed mental health staff for consultation immediately. If
management and/or licensed medical staff cannot be contacted, documentation of the fact is to be made and then the supervisor on the shift is to make the decision for continued use. Continued retention in restraints shall be reviewed a minimum of every hour thereafter. At a minimum, Juvenile Corrections Officers are to offer water to any youth in restraints for an hour; water may be offered sooner by staff or if the youth requests a drink of water.

The following considerations should be made if restraints need to be utilized for over one hour.

a. Use of vinyl restraints in lieu of hard restraints. (MANDATORY)

b. Is the individual in need of 5150 evaluation?

c. Consultation with licensed mental health personnel should be obtained.

d. Provision for youth hydration and sanitation needs and exercising of extremities.

e. On-going checks for circulation/nerve damage.

f. Correctional staff are to assess if the youth has been injured and needs medical attention as a result of physical force/application of restraints.

g. Correctional staff are to offer water to youth in restraints for one hour and every hour thereafter at a minimum.

2. Medical Review

As soon as possible, but no later than two (2) hours from the time the youth is placed in restraints, consultation with licensed medical staff on the placement and retention in restraints must be obtained. The youth must be medically cleared for continued retention at least every three (3) hours thereafter.

Anytime restraints have been applied or if force is used on a resistant youth, the youth is to be evaluated by juvenile hall licensed medical staff at the next scheduled sick call (no more than 24 hours from the use of force), unless the nature of the situation requires immediate medical attention. If unsure, contact licensed medical staff for consultation. If going into a weekend/long holiday staff are to have the youth evaluated by a licensed medication pass nurse to ensure youth is seen within twenty-four hours (24).

3. Mental Health Review

As soon as possible, but no later than four (4) hours from the time a youth is placed in restraints, consultation with licensed mental health personnel must be obtained to assess the need for mental health treatment (use of medications,
transfer to licensed mental health facility, crisis assessment, etc.) Youth who have been placed in restraints shall be set up for a mental health assessment. A licensed mental health staff shall be consulted soon after youth is placed in restraints if it appears to the shift leader or higher ranking probation employee that youth’s response and behavior to being placed in restraints is not what is normally observed in similar situations. Observing a youth mumbling incoherently, hallucinating, hearing voices, conversing with people who aren’t in the room, etc. may be signs of a break from reality that would require an immediate mental health assessment.

C. DOCUMENTATION

Any time physical force or restraints are utilized; a special incident report is to be prepared. It must be specific, yet comprehensive containing the following information.

1. Description of incident.
2. Name of detainees involved.
3. Time of incident.
4. Describe alternatives attempted prior to use of physical force/restraints.
5. Time and method of restraints applied.
6. Names of Correctional Staff involved.
7. Description of injuries to correctional staff/detainees, if any.
8. Document correctional staff member providing continuous direct visual supervision and time/methods used in soliciting youths cooperation for removing restraints.
9. Recording of every adjustment and/or position change of restraints.
10. Time restraints removed.
11. External sources utilized to help evaluate/resolve situation.
13. Recommended action to facility manager.
USE OF CHEMICAL RESTRAINT - OLEORESIN CAPSICUM (OC)

The use of chemical agents is permitted under the provisions of Penal Code Sections 830.5 and 12401 through 12404. Under provision of law, the Chief Probation Officer may authorize the use of chemical agents.

The chemical agent Oleoresin Capsicum (OC) - pepper spray shall be authorized for use only when the conditions outlined in this policy and procedure is met. OC shall not be used for punishment, retaliation, or disciplinary purposes.

I. CORRECTIONAL STAFF AUTHORIZED TO DEPLOY CHEMICAL AGENTS

1. The Chief Probation Officer and/or the Assistant Chief Probation Officer may designate those Correctional Staff authorized to use OC-pepper spray within the scope of their employment at the juvenile hall. In order to be authorized to use chemical agents (OC) Correctional Staff must:

a. Be a regular employee and have completed Penal Code 832 training (Peace Officer status).

b. Have completed an STC certified OC training course.

c. Be on duty and designated as Juvenile Corrections Officer to be in possession of OC.

d. Be trained in Management of Assaultive Behavior.

e. Have had training in departmental policies and procedures regarding use of Oleoresin Capsicum (OC).

2. Authorized correctional staff may use OC while ON-DUTY ONLY. Only OC products which have been approved and issued by the department may be used. Department issued OC is not authorized for use by the juvenile hall Correctional Staff off-duty. Under no circumstances should anyone attempt to take department issued OC out of juvenile hall when he/she is off duty.

3. Authorization to possess and use OC on-duty may be withdrawn at the discretion of the chief probation officer or assistant chief probation officer at any time. OC canisters, holders, and/or carry packs shall be supplied to correctional staff as authorized by the Chief Probation Officer.

4. The following juvenile hall correctional staff may be authorized to possess and use OC while on-duty at juvenile hall, engaged in the supervision of the JAWS work crew and/or on assigned transport duties only.

a. Supervising Juvenile Correction Officers (when training is completed)
b. Senior Juvenile Corrections Officers (when training is completed)
c. Juvenile Corrections Officers I/II (when training is completed)

5. Extra help Juvenile Corrections Officer I staff are not permitted to carry or use OC.

II. OLEORESIN CAPSICUM (OC) DESCRIPTION, USAGE AND EFFECT

OC is a highly concentrated form of pepper (or a similar synthetic substance) that affects the mucous membranes of humans. OC, when applied to the face, typically causes the following reactions: swelling of the mucous membranes; involuntary closing of the eyes; gagging; shortness of breath; and an intense burning sensation on exposed areas of skin.

Most persons encountering OC involuntarily bend over at the waist or drop to their knees, regardless of their emotional or intoxicated state. These symptoms are temporary and will dissipate within 45 minutes. With treatment, the effects dissipate within 15-20 minutes.

OC products must be used in hand-held canister form. Maximum effectiveness is achieved when the target is at least six but no more than ten feet away from the canister when sprayed. OC must contact the target’s face to be effective. Spraying the person below the face will not cause the desired effects.

Precautions should be taken as follows:

1. All five OC canisters shall be securely locked in the Control Room key drawer when not being carried by a correctional staff member and accounted for at the beginning/end of each shift and noted in the daily log.

2. OC canisters will be shaken once a month to ensure that the active ingredients are properly mixed. This will be done by the shift supervisor during completion of the monthly report.

3. Caution should be taken prior to applying OC on resisting persons engaged physically with other officers or not isolated from bystanders.

4. Caution should be taken prior to using OC in windy conditions. Target should always be downwind. Downwind means that the wind or breeze is to your back. Spraying into the wind could cause the spray to come back and hit the sprayer.

5. OC should not be deployed within a moving vehicle.

6. Due to close range of encounter, it is extremely important that the officer spray the OC and then immediately move laterally to sidestep attack.

7. Officers should recognize the limitations of nonlethal chemical agents. They
should remain alert and attentive to their surroundings at all times and continually assess all situations.

8. Whenever possible, correctional staff should avoid deploying OC against youth as recommended by the Juvenile Hall Nurse or who have the following medical histories or profiles:

   a. Those who have documented medical history of respiratory problems.
   b. Those who have documented medical history of heart disease or related problems.
   c. Those who are taking psychotropic, stimulant medication.
   d. Those admitted who are under the influence of stimulant narcotics (cocaine, methamphetamine, PCP).
   e. Those with documented medical history of seizures.
   f. Those who are medically obese.

All reasonable efforts should be made to avoid spraying these youth with OC. However, because the safety of correctional staff and youth is the primary responsibility, there may be occasions due to violent circumstances where OC may have to be used on these youth to prevent serious injury.

III. CRITERIA FOR USE OF OLEORESIN CAPSICUM (OC)

1. OC may be used as a neutralizing force to control and restrain youth displaying violent behavior when such behavior presents a clear and present danger to that youth, other youth, or staff.

   Before OC is used, consideration must be given to the gravity of the situation, the present danger of injury to persons and/or property damage and the possible consequences of use.

   Prior to the use of OC, Correctional Staff must give clear instructions to the resident regarding the expected behavior and a reasonable effort must be made to verbally persuade voluntary compliance. **The youth should be given a warning when feasible that OC will be used if voluntary compliance is not obtained.**

   OC may be deployed without warning during those occasions when the youth is actively resisting and/or the behavior exhibited is of such extreme nature that even momentary delay in deployment of OC would result in further personal injury.

2. OC shall not be used for punishment, retaliation, or disciplinary purposes.

3. OC should be used only as a use of force option to be employed by Correctional staff to maintain order, safety, and security. The force options, to consider, are as follows:

   a. Correctional Staff presence, use of multiple correctional staff.
b. Verbal diffusion, dialogue and counseling.
c. Verbal commands.
d. Weaponless control techniques and control holds.
e. Mechanical restraints/vinyl restraints.
f. Use of Chemical Restraints (OC)

*NOTE*: The utilization of physical force and/or mechanical restraint prior to use of OC may not always be appropriate given the circumstances. Force options alternatives must be considered prior to spraying OC but do not have to be attempted if the situation warrants otherwise.

4. Authorized correctional staff may use OC as a force option when one or more of the following conditions are met:
   a. There is an immediate danger to correctional staff or youth due to violent and uncontrollable behavior of one or more youth.
   b. A weapon is being used by a youth to assault another person or effect an escape.
   c. A riot is in progress.
   d. Efforts are made to overpower correctional staff.
   e. A youth is attempting to escape and other defensive measures are inappropriate or unavailable.
   f. The use of OC is necessary to successfully intervene in a suicide attempt and protect the well-being of a youth.

IV. WHERE OC MAY BE DEPLOYED

1. OC may be used by authorized correctional staff within the scope of their duties while assigned to the Juvenile Assigned Work Service (JAWS) Program.

2. OC may be used by on duty designated correctional staff duly authorized by the facility manager.

3. OC may be used by designated staff assigned to the transportation of youth outside the confines of Juvenile Hall while following this and all other policies affecting arrests of youth under our jurisdiction.

V. AFTERCARE PROCEDURES

The following should be followed after a youth has been sprayed with OC:

1. Once a youth has been controlled and restrained, the youth must immediately be given first aid.

2. Advise youth to calm down and try to breathe normally. Assure youth that the effects will diminish and dissipate within a short period.
3. As soon as practical, place youth in shower with clothes on and thoroughly flush youth’s face and contaminated areas with cool/cold water. Warm water will open skin pores and increase discomfort. Staff are to hold the youth, if in restraints, or are to provide a chair to sit on and lean into the water as needed.

4. Remove contaminated clothing and allow youth to take a shower without soap or any oil-based product. Soap or oil-based products will increase discomfort. A cold shower is recommended.

5. Re-issue clean clothing.

6. Symptoms should disappear within 15-45 minutes without after effects. Care should be taken when OC has been applied to youth with emphysema and/or asthmatic conditions as OC may cause severe temporary effects on these individuals.

7. All youth sprayed with OC must be referred to licensed medical personnel. If no licensed medical staff are available, the on-call licensed medical staff should be contacted for consultation and instructions. Remind on-call licensed medical provider if a med pass person is due to arrive who may be able to see the youth.

8. Correctional Staff must observe all youth sprayed with OC for one hour after deployment on a one-on-one basis i.e., direct supervision. A camera can not substitute for direct supervision.

9. Any correctional staff sprayed with OC should follow the same basic regimen outlined above.

10. The same procedures should be followed by any agency bringing in any youth who has been sprayed with OC. All correctional staff should be alerted to any youth who have been sprayed with OC.

11. All contaminated areas, (e.g. floors, counter tops, mattresses) shall be thoroughly cleaned with soap and water.

12. Depending on the circumstances and needs of the youth, a mental health referral may be appropriate.

VI. DOCUMENTATION

1. Anytime OC is deployed, correctional staff shall report the incident on:
   a. Special Incident Report (JH) and
   b. Use of OC Report (JH-10)
The correctional staff member applying OC shall complete these reports prior to going off duty. In addition, all correctional staff witnessing the application of OC will document their observations and involvement in the incident on a Special Incident Report. Samples of these forms are attached.

2. Reports shall contain:
   a. A clear and factual rationale for the use of OC.
   b. A description of how OC was used and the results obtained.

The reports shall be forwarded to the Manager of juvenile hall and Director of Institutions who, after review, will forward them to the Chief/Asst. Chief Probation Officer.

VII. EQUIPMENT

1. Oleoresin Capsicum (OC) is the only chemical agent approved for use in juvenile hall.

2. No brand of OC shall be used in juvenile hall unless it has been certified by the Department of Justice.

3. The manager of juvenile hall (or his/her designee) has developed guidelines for the secure storage and maintenance of OC canisters at juvenile hall.

4. The manager of juvenile hall has developed a system for checking canisters at the beginning of a shift and returning them at the end of a shift.

VIII. VIOLATION OF POLICY

1. Violation of the use of OC policy shall result in severe disciplinary action up to and including termination from employment.

2. An employee observing any violation of this policy shall report the occurrence to the manager on a Special Incident Report.
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PROCEDURE MANUAL

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When dealing with aggressive or violent minors, it is essential to use only the minimum amount of force necessary for self defense or to ensure the safety of minors or others. Correctional Staff should attempt to avoid the use of force whenever possible. All use of force will be based upon what is reasonable, appropriate and available given the circumstances. Any use of lethal force is disallowed. In situations where the use of physical force is necessary, staff will make attempts to re-establish a relationship with the minor through counseling methods. The intent is to help the minor identify the behavior that resulted in the need for use of force and assist the minor in exhibiting voluntary compliance.

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1. There is imminent danger of personal injury to self or others.
2. There is imminent risk of serious damage to property.
3. There is imminent risk of escape.
4. To protect a minor from self-inflicted injuries or suicide.
5. When a minor's actions threaten correctional staff's ability to maintain control, order, safety and/or security within the facility.
6. To ensure physical/medical safety of a minor with medically indicated/documented pre-existing physical/medical condition(s).
Use of force options to consider include:

* Correctional Staff presence, use of multiple correctional staff.
* Dialogue/counseling.
* Verbal commands.
* Weaponless control techniques and control holds such as twist lock, bent wrist lock, bar hammer lock, and hair take down.
* Mechanical hard restraints (handcuffs, belly-chain, shackles, vinyl).
* Chemical restraints (Oleoresin Capsicum)

**NOTE:** Only properly trained and authorized correctional staff may carry chemical restraints within the confines of juvenile hall, while supervising the JAWS work crew and/or while engaged in transport duties.

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Female detainees in the advanced stages of pregnancy should not be placed in shackles and/or belly belts. If necessary, these young women can be placed in handcuffs in the front. The pregnant minor should not be placed onto their bellies and/or placed in any kind of situation where harm could come to their unborn child or to themselves.

**DOCUMENTATION AND INVESTIGATION**

Whenever physical force is used, a detailed incident report must be completed and submitted to the manager by the end of the shift. The report should describe why physical force is necessary, and level/extent of force used. All incidents involving the use of force will be subject to administrative review and investigation within 24 hours following the incident. Any improper use of force may be subject to disciplinary action. Incidents involving use of force are subject to detainee grievances. (See Subsection 500-02)
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At no time are correctional staff at juvenile hall to utilize any restraint hold, devise or technique which is contraindicated by known medical conditions or would result in shutting off the air or blood supply to the brain of the person being restrained.

Mechanical restraints are never to be used for the purpose of punishment or discipline or as a substitute for treatment. Mechanical restraints should only be used when it appears that less restrictive alternatives would be ineffective in controlling the minor’s behavior. Mechanical restraints are only to be used for those minors 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 harm.

When mechanical restraints are necessary the following procedure/method of application are to be followed. Staff are to constantly observe the minor while in restraints and document on the “At Risk Behavior Checklist” at a minimum of every five minutes minor’s current behavior and/or interventions being used.

Whenever any physical force occurs with the minor, whether mechanical restraints are applied or not, the minor will be set up within twenty-four (24) hours to be seen by licensed medical staff. Licensed medical staff will determine if any injuries have occurred.

A. APPLICATION OF MECHANICAL RESTRAINTS

1. When applying restraints use no greater force than is necessary. Whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liabilities.

2. Correctional staff are vulnerable to attack when applying or removing restraints. Once one cuff is secured on the detainee, the free cuff then becomes a dangerous weapon when swung. Therefore, when applying the restraints, hold the loose end firmly until both cuffs have been applied to the detainee.

3. If in a prone position apply handcuffs, double locked, behind back. Make sure keyhole faces outward for easy locking/unlocking.

4. Shackles - Double Locked. Shackles are utilized to restrict kicking and injury to Correctional Staff. Shackles ARE NOT to be joined to handcuffs. (Hog style method) Make sure keyhole faces outward.
5. When applying handcuffs/shackles, be sure they are only tight enough to prevent the detainee from removing them. Correctional staff applying restraints are to make sure they are not cutting off circulation.

6. Minors in mechanical restraints are to be housed alone or in a specific area to keep minor from view of other detainees. A minimum of one correctional staff member of the same sex, when possible, is to remain in the presence of the minor to provide continuous visual supervision in order to ensure the safety and well-being of the minor. Such observation shall be documented every five minutes on the “At Risk Behavior Checklist”. Detainees are not allowed to stand; they may remain sitting, but preferably lying down in a prone position for staff and minors’ safety. Minors allowed to sit up in restraints can too easily stand up and create a safety hazard for themselves and staff.

7. The correctional staff member with the minor should attempt to solicit cooperation as quickly as possible, and to insure that an out-of-control minor does not inflict self injuries. In the event of apparent seizures or psychotic breaks, licensed medical help should be sought immediately. An immediate restraint check should be conducted to ensure circulation is not cut off and nerve damage did not occur. If circulation or nerve damage is apparent, seek licensed medical attention.

8. The shift supervisor is to continually monitor the use of restraints to ensure no circulation and/or nerve damage, airway obstruction, or psychological trauma occurs, that the minor’s hydration and sanitation needs are attended, that CPR equipment is readily available, and that the restraints are removed as soon as possible once cooperation/compliance is gained, and it is considered safe to do so.

9. Correctional staff are to be cautious when removing restraints; have minor remain lying down on stomach, hold loose cuff/shackles securely so that it cannot be used as a weapon.

B. REMOVAL OF RESTRAINTS; TIME LIMITS/REVIEW PROCESS

1. Administrative/Supervisory Review

If restraints are not removed within one hour, Facility Manager/Director and/or licensed medical approval for continued use of restraints shall be obtained. When management or licensed medical staff are contacted communicate the events leading up to the restraint, the actual restraint, and the behavior of the minor while in restraints so they will be discussed and evaluated. Either the Juvenile Corrections Officer in charge will be instructed to remove the restraints of a non-combative yet verbally threatening minor for observation or instructions will be to replace hard restraints with soft/vinyl restraints and to call licensed medical and licensed mental health staff for consultation immediately. If management and/or licensed medical staff cannot be contacted, documentation of the fact is to be made and then the supervisor on the shift is to make the decision for continued use. Continued retention in restraints shall be reviewed a minimum of every hour thereafter. At a minimum, Juvenile Corrections Officers are to offer water to any youth in restraints for an hour; water may be offered sooner by staff or if the youth requests a drink of water.
The following considerations should be made if restraints need to be utilized for over one hour.

a. **Use of vinyl restraints in lieu of hard restraints** (MANDATORY)

b. Is the individual in need of 5150 evaluation?

c. Consultation with licensed mental health personnel should be obtained.

d. Provision for minor's hydration and sanitation needs and exercising of extremities.

e. On-going checks for circulation/nerve damage.

f. Correctional staff are to assess if the minor has been injured and needs medical attention as a result of physical force/application of restraints.

g. **Correctional staff are to offer water to youth in restraints for one hour and every hour thereafter at a minimum.**

2. **Medical Review**

As soon as possible, but no later than two (2) hours from the time the minor is placed in restraints, consultation with licensed medical staff on the placement and retention in restraints must be obtained. The minor must be medically cleared for continued retention at least every three (3) hours thereafter.

**Anytime** restraints have been applied or if force is used on a resistent minor, the minor is to be evaluated by juvenile hall licensed medical staff at the next scheduled sick call (no more than 24 hours from the use of force), **unless the nature of the situation requires immediate medical attention.** If unsure, contact licensed medical staff for consultation. If going into a weekend/long holiday staff are to have minor evaluated by a licensed medication pass nurse to ensure minor is seen within twenty-four hours (24).

3. **Mental Health Review**

As soon as possible, but no later than four (4) hours from the time a minor is placed in restraints, consultation with licensed mental health personnel must be obtained to assess the need for mental health treatment (use of medications, transfer to licensed mental health facility, crisis assessment, etc.) **Minors who have been placed in restraints shall be set up for a mental health assessment.** A licensed mental health staff shall be consulted soon after minor is placed in restraints if it appears to the shift leader or higher ranking probation employee that minor’s response and behavior to being placed in restraints is not what is normally observed in similar situations. Observing a minor mumbling incoherently, hallucinating, hearing voices, conversing with people who aren’t in the room, etc. may be signs of a break from reality that would require an immediate mental health assessment.

C. **DOCUMENTATION**

Any time physical force or restraints are utilized; a special incident report is to be prepared. It must be specific, yet comprehensive containing the following information.
1. Description of incident.
2. Name of detainees involved.
3. Time of incident.
4. Describe alternatives attempted prior to use of physical force/restraints.
5. Time and method of restraints applied.
6. Names of Correctional Staff involved.
7. Description of injuries to correctional staff/detainees, if any.
8. Document correctional staff member providing continuous direct visual supervision and time/methods used in soliciting minors cooperation for removing restraints.
9. Recording of every adjustment and/or position change of restraints.
10. Time restraints removed.
11. External sources utilized to help evaluate/resolve situation.
13. Recommended action to facility manager.

**USE OF CHEMICAL RESTRAINT - OLEORESIN CAPSICUM (OC) SUBSECTION 1101-03**

The use of chemical agents is permitted under the provisions of Penal Code Sections 830.5 and 12401 through 12404. Under provision of law, the Chief Probation Officer may authorize the use of chemical agents.

The chemical agent Oleoresin Capsicum (OC) - pepper spray shall be authorized for use only when the conditions outlined in this policy and procedure is met. OC shall not be used for punishment, retaliation, or disciplinary purposes.

**I. CORRECTIONAL STAFF AUTHORIZED TO DEPLOY CHEMICAL AGENTS**

1. The chief probation officer and/or the assistant chief probation officer may designate those Correctional Staff authorized to use OC-pepper spray within the scope of their employment at the juvenile hall. In order to be authorized to use chemical agents (OC) Correctional Staff must:
   a. Be a regular employee and have completed Penal Code 832 training (Peace Officer status).
   b. Have completed an STC certified OC training course.
   c. Be on duty and designated as Juvenile Corrections Officer to be in possession of OC.
d. Be trained in Management of Assaultive Behavior.

e. Have had training in departmental policies and procedures regarding use of Oleoresin Capsicum (OC).

2. Authorized correctional staff may use OC while **ON-DUTY ONLY**. Only OC products which have been approved and issued by the department may be used. Department issued OC is **not** authorized for use by the juvenile hall Correctional Staff off-duty. **Under no circumstances should anyone attempt to take department issued OC out of juvenile hall when he/she is off duty.**

3. Authorization to possess and use OC on-duty may be withdrawn at the discretion of the chief probation officer or assistant chief probation officer at any time. OC canisters, holders, and/or carry packs shall be supplied to correctional staff as authorized by the Chief Probation Officer.

4. The following juvenile hall correctional staff may be authorized to possess and use OC while on-duty at juvenile hall, engaged in the supervision of the JAWS work crew and/or on assigned transport duties only.

   a. Supervising Juvenile Correction Officers (when training is completed)
   b. Senior Juvenile Corrections Officers (when training is completed)
   c. Juvenile Corrections Officers I/II (when training is completed)

5. Extra help Juvenile Corrections Officer I staff are not permitted to carry or use OC.

II. **OLEORESIN CAPSICUM (OC) DESCRIPTION, USAGE AND EFFECT**

OC is a highly concentrated form of pepper (or a similar synthetic substance) that affects the mucous membranes of humans. OC, when applied to the face, typically causes the following reactions: swelling of the mucous membranes; involuntary closing of the eyes; gagging; shortness of breath; and an intense burning sensation on exposed areas of skin.

Most persons encountering OC involuntarily bend over at the waist or drop to their knees, regardless of their emotional or intoxicated state. These symptoms are temporary and will dissipate within 45 minutes. With treatment, the effects dissipate within 15-20 minutes.

OC products must be used in hand-held canister form. Maximum effectiveness is achieved when the target is at least six but no more than ten feet away from the canister when sprayed. OC must contact the target’s face to be effective. Spraying the person below the face will not cause the desired effects.

Precautions should be taken as follows:

1. All five OC canisters shall be securely locked in the Control Room key drawer when not being carried by a correctional staff member and accounted for at the beginning/end
of each shift and noted in the daily log.

2. OC canisters will be shaken once a month to ensure that the active ingredients are properly mixed. This will be done by the shift supervisor during completion of the monthly report.

3. Caution should be taken prior to applying OC on resisting persons engaged physically with other officers or not isolated from bystanders.

4. Caution should be taken prior to using OC in windy conditions. Target should always be downwind. Downwind means that the wind or breeze is to your back. Spraying into the wind could cause the spray to come back and hit the sprayer.

5. OC should not be deployed within a moving vehicle.

6. Due to close range of encounter, it is extremely important that the officer spray the OC and then immediately move laterally to sidestep attack.

7. Officers should recognize the limitations of nonlethal chemical agents. They should remain alert and attentive to their surroundings at all times and continually assess all situations.

8. Whenever possible, correctional staff should avoid deploying OC against minors as recommended by the Juvenile Hall Nurse or who have the following medical histories or profiles:
   a. Those who have documented medical history of respiratory problems.
   b. Those who have documented medical history of heart disease or related problems.
   c. Those who are taking psychotropic, stimulant medication.
   d. Those admitted who are under the influence of stimulant narcotics (cocaine, methamphetamine, PCP).
   e. Those with documented medical history of seizures.
   f. Those who are medically obese.

All reasonable efforts should be made to avoid spraying these minors with OC. However, because the safety of correctional staff and minors is the primary responsibility, there may be occasions due to violent circumstances where OC may have to be used on these minors to prevent serious injury.

III. CRITERIA FOR USE OF OLEORESIN CAPSICUM (OC)

1. OC may be used as a neutralizing force to control and restrain minors displaying violent behavior when such behavior presents a clear and present danger to that minor, other minors, or staff.

Before OC is used, consideration must be given to the gravity of the situation, the present danger of injury to persons and/or property damage and the possible
consequences of use.

Prior to the use of OC, Correctional Staff must give clear instructions to the resident regarding the expected behavior and a reasonable effort must be made to verbally persuade voluntary compliance. **The minor should be given a warning when feasible that OC will be used if voluntary compliance is not obtained.**

OC may be deployed without warning during those occasions when the minor is actively resisting and/or the behavior exhibited is of such extreme nature that even momentary delay in deployment of OC would result in further personal injury.

2. OC shall not be used for punishment, retaliation, or disciplinary purposes.

3. OC should be used only as a use of force option to be employed by Correctional staff to maintain order, safety, and security. The force options, to consider, are as follows:

   a. Correctional Staff presence, use of multiple correctional staff.
   b. Verbal diffusion, dialogue and counseling.
   c. Verbal commands.
   d. Weaponless control techniques and control holds.
   e. Mechanical restraints/vinyl restraints.
   f. Use of Chemical Restraints (OC)

*NOTE:* The utilization of physical force and/or mechanical restraint prior to use of OC may not always be appropriate given the circumstances. Force options alternatives must be considered prior to spraying OC but do not have to be attempted if the situation warrants otherwise.

4. Authorized correctional staff may use OC as a force option when one or more of the following conditions are met:

   a. There is an immediate danger to correctional staff or minors due to violent and uncontrollable behavior of one or more minors.
   b. A weapon is being used by a minor to assault another person or effect an escape.
   c. A riot is in progress.
   d. Efforts are made by minor to overpower correctional staff.
   e. A minor is attempting to escape and other defensive measures are inappropriate or unavailable.
   f. The use of OC is necessary to successfully intervene in a suicide attempt and protect the well being of a minor.

**IV. WHERE OC MAY BE DEPLOYED**

1. OC may be used by authorized correctional staff within the scope of their duties while assigned to the Juvenile Assigned Work Service (JAWS) Program.

2. OC may be used by on duty designated correctional staff duly authorized by the facility
manager.

3. OC may be used by designated staff assigned to the transportation of minors outside the confines of Juvenile Hall while following this and all other policies affecting arrests of minors under our jurisdiction.

V. AFTERCARE PROCEDURES

The following should be followed after a minor has been sprayed with OC:

1. Once a minor has been controlled and restrained, the minor must immediately be given first aid.

2. Advise minor to calm down and try to breathe normally. Assure minor that the effects will diminish and dissipate within a short period.

3. As soon as practical, place minor in shower with clothes on and thoroughly flush minor’s face and contaminated areas with cool/cold water. Warm water will open skin pores and increase discomfort. Staff are to hold the minor, if in restraints, or are to provide a chair to sit on and lean into the water as needed.

4. Remove contaminated clothing and allow minor to take a shower without soap or any oil-based product. Soap or oil-based products will increase discomfort. A cold shower is recommended.

5. Re-issue clean clothing.

6. Symptoms should disappear within 15-45 minutes without after effects. Care should be taken when OC has been applied to minors with emphysema and/or asthmatic conditions as OC may cause severe temporary effects on these individuals.

7. All minors sprayed with OC must be referred to licensed medical personnel. If no licensed medical staff are available, the on-call licensed medical staff should be contacted for consultation and instructions. Remind on-call licensed medical provider if a med pass person is due to arrive who may be able to see the minor.

8. Correctional Staff must observe all minors sprayed with OC for one hour after deployment on a one-on-one basis i.e., direct supervision. A camera can not substitute for direct supervision.

9. Any correctional staff sprayed with OC should follow the same basic regimen outlined above.

10. The same procedures should be followed by any agency bringing in any minor who has been sprayed with OC. All correctional staff should be alerted to any minors who have been sprayed with OC.

11. All contaminated areas, (e.g. floors, counter tops, mattresses) shall be thoroughly cleaned with soap and water.
12. Depending on the circumstances and needs of the minor, a mental health referral may be appropriate.

VI. DOCUMENTATION

1. Anytime OC is deployed, correctional staff shall report the incident on:
   a. Special Incident Report (JH) and
   b. Use of OC Report (JH-10)

   The correctional staff member applying OC shall complete these reports prior to going off duty. In addition, all correctional staff witnessing the application of OC will document their observations and involvement in the incident on a Special Incident Report. Samples of these forms are attached.

2. Reports shall contain:
   a. A clear and factual rationale for the use of OC.
   b. A description of how OC was used and the results obtained.

   The reports shall be forwarded to the Manager of juvenile hall and Director of Institutions who, after review, will forward them to the Chief/Asst. Chief Probation Officer.

VII. EQUIPMENT

1. Oleoresin Capsicum (OC) is the only chemical agent approved for use in juvenile hall.

2. No brand of OC shall be used in juvenile hall unless it has been certified by the Department of Justice.

3. The manager of juvenile hall (or his/her designee) has developed guidelines for the secure storage and maintenance of OC canisters at juvenile hall.

4. The manager of juvenile hall has developed a system for checking canisters at the beginning of a shift and returning them at the end of a shift.

VIII. VIOLATION OF POLICY

1. Violation of the use of OC policy shall result in severe disciplinary action up to and including termination from employment.

2. An employee observing any violation of this policy shall report the occurrence to the manager on a Special Incident Report.
ADMINISTRATION OF DISCIPLINE

DISCIPLINE shall be administered by correctional staff only, and never be delegated to another detained minor.

In the administration of discipline, officers must be decisive, fair and impartial. All judgments are to be based on facts, not emotions, and must be supported by professional skills. Discipline is to be imposed at the least restrictive level which promotes the desired behavior. Discipline shall not include corporal punishment, group punishment, physical or psychological degradation or deprivation of basic rights. Most problems can be prevented by early intervention or resolved by appropriate counseling techniques. Removal of privileges is permissible; however, sound judgment must be used to insure that it is not misused. When these methods have been used and have proven to be unsuccessful, or the nature of behavior is so volatile as to possibly endanger the safety of others, officers may remove the child from the group and place the minor in his or her room.

A Special Incident Report is to be written describing the facts that led to the minor's removal from the group. The Supervising Juvenile Corrections Officer or Acting Supervising Juvenile Corrections Officer is to review all Special Incident Reports to determine if action taken was appropriate. Management staff will further review all Incident Reports to further monitor disciplinary action and related incidents at juvenile hall. Refer to Section 1101-06 Temporary Room Time.

DEPRIVATION OF BASIC RIGHTS

Under no circumstances shall a minor be deprived of his or her basic rights as a means of discipline. Basic rights are as follows:

A. Bed and bedding. (bed, pillow, blanket, sheets, etcetera) Some of these items may be restricted due to classification alert status.

B. Food/Full Nutrition

C. Clean clothes

D. Contact and visits with parent and or attorney, unless so restricted by the court or facility manager for cause.

E. Access to drinking fountain, toilet and items necessary for personal hygiene.

F. Minimum exercise

G. Education

H. Right to receive and send mail

I. Opportunity for a daily shower
J. Opportunity for religious services/counseling

K. Clean and sanitary living conditions

L. Medical services and counseling

TEMPORARY ROOM TIME

As stated in Section 1101-04, alternatives such as counseling and/or privilege restrictions, are to be used prior to placing a minor in his room for temporary room time.

However, should the alternatives not be effective, or the minor’s behavior so volatile, temporary room time may be used if one of the following four conditions exist:

A. The minor is an immediate threat to the physical safety of another person.

B. The minor is likely to escape.

C. The minor is in need of protection from physical injury.

D. The minor is involved in repetitious acts of misconduct requiring his/her removal for the protection of another person or himself.

Minors placed in room isolation or serving disciplinary room time for 24 hours or more, must be set up for daily sick call for medical evaluation by the nurse.

Further, those minors serving disciplinary room time who do not receive or will not receive a minimum of one-hour of daily exercise, either prior to or after disciplinary action, must be given an opportunity for one hour of large muscle activity (outside, weather permitting).

REPORTING OF INCIDENTS

A Special Incident Report must be completed by the officer detailing the circumstances and facts of the incident, as well as one or more of the conditions that necessitated temporary room time. Temporary room time must be approved by the supervisor or acting supervisor on shift. Management will review all Incident Reports to monitor the appropriateness and use of temporary room time. A written report of all incidents which result in physical harm, serious threat of physical harm, or death to an employee or detainee of juvenile hall, or other person(s) must be prepared and submitted to the manager by the end of the shift.

VIOLATION OF RULES

The following should be used as a guideline in determining the seriousness of a rule violation and in
determining the appropriate level of sanction commensurate with the severity of the misbehavior. Correctional Staff shall make provisions for those minors that are impaired, illiterate, or do not speak English. Detainees have the right to review and appeal of a minor rule violation to the supervisor of the shift. Major violations are also subject to a hearing process if the minor so chooses. Documentation needs to indicate that minor was offered a hearing and either refused the hearing and accepted the discipline; or requested and received a hearing by an impartial person. Minor is to sign the due process form indicating whether they accept the disciplinary action or request a hearing. Staff are to assist the minor, if requested, in preparing information for a hearing.

### MINOR VIOLATIONS

<table>
<thead>
<tr>
<th>OFFENSE</th>
<th>SANCTION</th>
</tr>
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<tbody>
<tr>
<td>1. Slow to follow Correctional Staff directions</td>
<td>#1-13 Lowered stepscore; program Restrictions, up to 4 hours room Confinement.</td>
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<tr>
<td>2. Horseplay</td>
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<td>3. Out of assigned area</td>
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<tr>
<td>4. Possessing ineligible item or unconcealed minor contraband</td>
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<td>5. Defacing of property (writing on walls, magazines, etc)</td>
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<td>6. Lying/manipulating others</td>
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<td>7. Verbal badgering or intimidation</td>
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<td>8. Disrupting programs (yelling, banging, kicking, etc.)</td>
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<td>9. Gang related &quot;turf talk&quot;, gesturing or graffiti</td>
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<td>10. Refusal to attend school</td>
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<td>11. Verbal altercation with others, arguing</td>
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<td>12. Abusive language, swearing</td>
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<td>13. Misbehavior at mealtimes, recreational activities, etc.</td>
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<tr>
<td>14. Repeated acts of minor misbehavior</td>
<td>#14 - Lowered step score; program restriction, up to 8 hours room confinement.</td>
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</table>
MAJOR VIOLATIONS

Detainees will have an opportunity to be heard, present evidence and testimony, and be assisted by correctional staff in the hearing process.

<table>
<thead>
<tr>
<th>VIOLATION</th>
<th>SANCTION</th>
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<tr>
<td>15. School suspension;</td>
<td>#15-24 -Program restriction;</td>
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<tr>
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<td>up to twenty-four hours room confinement</td>
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<td>16. Fighting; physical altercation between detainees (no injuries)</td>
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<td>17. Possession of minor contraband (concealed)</td>
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<td>18. Riotous behavior or instigation of riot (no damage or injuries)</td>
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<td>19. Consensual sexual conduct or touching</td>
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<td>20. Gang-related talk, gesturing, graffiti (three or more incidents)</td>
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<td>21. Refusal to return to room for time-out, DRT, etc</td>
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<td>22. Destruction of property, clothing, etc/vandalism</td>
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<td>23. Flagrant defiance of disrespect of Correctional Staff authority</td>
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<td>24. Verbally threatening Correctional Staff or others</td>
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<td>25. Possession of serious contraband (matches, potential weapons, lighters</td>
<td>#25-33 -Program restriction;</td>
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<td>drugs, alcohol, etc.)</td>
<td>more than twenty-four hours room confinement, possibility of charges for</td>
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<td></td>
<td>arrest</td>
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<td>26. Physically threatening Correctional Staff or physically struggling</td>
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<td>with Correctional Staff when requested to return to room</td>
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<td>27. Battery against Correctional Staff</td>
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<td>28. Sexual assault, i.e., non-consensual sexual contact</td>
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<td>29. Battery against another detainee causing significant injury/unprovoked</td>
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<tr>
<td>assault</td>
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<td>30. Fire-setting</td>
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<td>31. Gang-related disturbance</td>
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<td>32. Escape or attempted escape</td>
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<tr>
<td>33. Riotous behavior/institution of riot causing damage to property or</td>
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<tr>
<td>injury to others</td>
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Whenever the administration of discipline results in temporary room time, a Special Incident Report should be completed. All special incidents will be classified by the type, shift designation, and temporary room time code. This classification code should be placed in the upper right hand corner of the incident report (i.e. 8-A-A; 2-B-C). Note the length of room time on the Special Incident Report.

1. Refusing or arguing with Correctional Staff directives
2. Damaging hall materials, property, clothing or equipment
3. Physical or verbal altercation between detainees
4. Kissing and/or sexual touching
5. Abusive Language
6. Physical restraint
7. Threatening or assaulting Correctional Staff/spitting on Correctional Staff
8. School suspensions/room student detention
9. Problems during mealtime, showers, quiet period, or D.R.T.
10. Rioting or instigation of a riot
11. Attempted escape, A.W.O.L. from furlough, or escape from the building
12. Miscellaneous
13. Medical
14. Grievance
15. Suicidal threats, gestures
16. Contraband
17. 5150’s/suicide attempts requiring licensed medical attention/suicide
SHIFT DESIGNATION
A. 7-3 weekdays
B. 3-11 weekdays
C. 7-11 holidays
D. 11-7 weekends

TEMPORARY LOCK-UP
A. The minor is in immediate threat to the physical safety of others.
B. The minor is likely to escape.
C. The minor is in need of protection from physical injury.
D. Minor is involved in repetitious acts of misconduct requiring his removal for the protection of another person or himself.

DISCIPLINARY ROOM TIME

4 hr.
8 hr.
24 hr.
48 hr.
NORTHERN CALIFORNIA REGIONAL FACILITY
PROCEDURE MANUAL

CATEGORY: BEHAVIOR POLICIES AND STANDARDS - 1000

PROCEDURE TITLE: USE OF FORCE/USE OF RESTRAINTS

Reviewed: January 18, 2017
Revised: April 9, 2018
AUTHORIZATION: Dayna Wilcox

AUTHORITY CITED: CCR TITLE 15 SECTIONS 1357, 1358

GENERAL POLICY

The policy of this facility is to provide for the physical safety and well being of minors, correctional staff, and visitors. It is often a difficult assignment and it involves handling the fears, anxieties, hostilities, and aggressions of agitated children. Training shall be provided to authorize correctional staff in the policy regarding use of force, mechanical and physical restraints and chemical restraints (oleoresin capsicum—OC). Annual training will be provided regarding the use of force options, case law concerning use of force, management techniques to be considered and/or in lieu of force.

Use of physical force consists of physical contact with a detainee in order to control dangerous behavior or to enforce order, including the use of mechanical restraints and chemical agents. Physical force is justified only when there is imminent danger of personal injury, when there is a risk of escape from confinement, or to maintain or regain control over a facility. Only department approved/issued handcuffs, vinyl restraints and shackles will be used as safety restraints. Minors in safety restraints will be isolated from other minors and monitored directly by one or more correctional staff members of the same sex.

When dealing with aggressive or violent minors, it is essential to use only the minimum amount of force necessary for self defense or to ensure the safety of minors or others. Correctional Staff should attempt to avoid the use of force whenever possible. All use of force will be based upon what is reasonable, appropriate and available given the circumstances. Any use of lethal force is disallowed. In situations where the use of physical force is necessary, staff will make attempts to re-establish a relationship with the minor through counseling methods. The intent is to help the minor identify the behavior that resulted in the need for use of force and assist the minor in exhibiting voluntary compliance.

The use of physical force for reasons of discipline, punishment, treatment, or in retaliation for a minor's resistive, aggressive, or violent acts is PROHIBITED. When applying physical intervention/restraint, Correctional staff must not allow anger or emotion to cause loss of control. Respect for all minors is essential even though the minor's present behavior may be unacceptable. No labels for minors are permitted, nor can peer pressure be allowed to degrade or ostracize them. Degradation of minors by officers is forbidden. Every child is entitled to be addressed in a manner that promotes understanding and personal respect. Profane, obscene, or derogatory language WILL
NOT be used by officers. Officers are not allowed to use words that are derogatory in relationship to race, color, physical appearance, religion and/or cultural background. Correctional staff are to accommodate minors that are impaired, illiterate or do not speak English.

All incidents involving the use of force shall be documented and reviewed as to appropriateness of action taken. Further, correctional staff has an obligation to intervene and take affirmative action to stop and/or report the inappropriate use of force. Disciplinary action may be taken for the improper use of force.

USE OF FORCE OPTIONS AVAILABLE TO CORRECTIONAL STAFF
SUBSECTION 1001-01

“Physical force” is an immediate physical means of overcoming resistance and controlling the threat of imminent harm to self or others, and complies with the provisions of Title 15, CCR, Article 5 and Section 1357. Physical force includes the use of chemical restraints, weaponless control techniques and mechanical restraints.

Correctional Staff should attempt to avoid the use of physical force whenever possible. The use of defensive force should always be based on what is reasonable and appropriate given the individual circumstances. Force up to and including the use of approved physical control and/or restraint techniques is justified under the following circumstances:

1. There is imminent danger of personal injury to self or others.
2. There is imminent risk of serious damage to property.
3. There is imminent risk of escape.
4. To protect a minor from self-inflicted injuries or suicide.
5. When a minor's actions threaten correctional staff's ability to maintain control, order, safety and/or security within the facility.
6. To ensure physical/medical safety of a minor with medically indicated/documents pre-existing physical/medical condition(s).
Use of force options to consider include:

* Correctional Staff presence, use of multiple correctional staff.
* Dialogue/counseling.
* Verbal commands.
* Weaponless control techniques and control holds such as twist lock, bent wrist lock, bar hammer lock, and hair take down.
* Mechanical hard restraints (handcuffs, belly-chain, shackles, vinyl).
* Chemical restraints (Oleoresin Capsicum)

NOTE: Only properly trained and authorized correctional staff may carry chemical restraints within the confines of juvenile hall, while supervising the JAWS work crew and/or while engaged in transport duties.

Consideration of Use of Force Options:

Staff members should use the force option correlating to the minor’s escalation of behavior and/or level of restraint (actively resisting or passively resisting). This listing is not be construed as meaning that the defensive force options are to be used in only the order listed. Circumstances may indicate that correctional staff begins at the first option of forces, or alternately at the last option. The force option deployed should only be the minimum necessary for self-defense, to overcome resistance and control aggressive or violent individuals, and to ensure the safety of minor or others. When physical force/restraint is used, whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liability. This does not preclude self-defense if a correctional staff member is attacked by a minor(s), in the event of an emergency response by a correctional staff member to a life-threatening situation is deemed necessary.

Female detainees in the advanced stages of pregnancy should not be placed in shackles and/or belly belts. If necessary, these young women can be placed in handcuffs in the front. The pregnant minor should not be placed onto their bellies and/or placed in any kind of situation where harm could come to their unborn child or to themselves.

DOCUMENTATION AND INVESTIGATION

Whenever physical force is used, a detailed incident report must be completed and submitted to the manager by the end of the shift. The report should describe why physical force is necessary, and level/extent of force used. All incidents involving the use of force will be subject to administrative review and investigation within 24 hours following the incident. Any improper use of force may be subject to disciplinary action. Incidents involving use of force are subject to detainee grievances. (See Subsection 500-02)

USE OF MECHANICAL RESTRAINTS

Minors shall be placed in mechanical restraints only with the approval of the facility manager or the shift
supervisor. Only hard and/or vinyl mechanical restraints (handcuffs and shackles) are authorized for use. Minors placed in mechanical restraints are to be placed in their cell and/or “holding” cell as soon as possible.

At no time are correctional staffs at Regional Facility to utilize any restraint hold, devise or technique which is contraindicated by known medical conditions or would result in shutting off the air or blood supply to the brain of the person being restrained.

Mechanical restraints are never to be used for the purpose of punishment or discipline or as a substitute for treatment. Mechanical restraints should only be used when it appears that less restrictive alternatives would be ineffective in controlling the minor’s behavior. Mechanical restraints are only to be used for those minors 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 harm.

When mechanical restraints are necessary the following procedure/method of application are to be followed. Staff is to constantly observe the minor while in restraints and document on the “At Risk Behavior Checklist” at a minimum of every five minutes minor’s current behavior and/or interventions being used.

Whenever any physical force occurs with the minor, whether mechanical restraints are applied or not, the minor will be set up within twenty-four (24) hours to be seen by licensed medical staff. Licensed medical staff will determine if any injuries have occurred.

A. APPLICATION OF MECHANICAL RESTRAINTS

1. When applying restraints use no greater force than is necessary. Whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liabilities.

2. Correctional staff are vulnerable to attack when applying or removing restraints. Once one cuff is secured on the detainee, the free cuff then becomes a dangerous weapon when swung. Therefore, when applying the restraints, hold the loose end firmly until both cuffs have been applied to the detainee.

3. If in a prone position apply handcuffs, double locked, behind back. Make sure keyhole faces outward for easy locking/unlocking.

4. Shackles - Double Locked. Shackles are utilized to restrict kicking and injury to Correctional Staff. Shackles ARE NOT to be joined to handcuffs. (Hog style method) Make sure keyhole faces outward.

5. When applying handcuffs/shackles, be sure they are only tight enough to prevent the detainee from removing them. Correctional staff applying restraints are to make sure they are not cutting off circulation.

6. Minors in mechanical restraints are to be housed alone or in a specific area to keep minor from view of other detainees. A minimum of one correctional staff member of the same sex, when possible, is to remain in the presence of the minor to provide continuous visual supervision in order to ensure the safety and well-being of the minor. Such observation shall
be documented every five minutes on the “At Risk Behavior Checklist”. Detainees are not allowed to stand; they may remain sitting, but preferably lying down in a prone position for staff and minors’ safety. Minors allowed to sit up in restraints can too easily stand up and create a safety hazard for themselves and staff.

7. The correctional staff member with the minor should attempt to solicit cooperation as quickly as possible, and to insure that an out-of-control minor does not inflict self injuries. In the event of apparent seizures or psychotic breaks, licensed medical help should be sought immediately. An immediate restraint check should be conducted to ensure circulation is not cut off and nerve damage did not occur. If circulation or nerve damage is apparent, seek licensed medical attention.

8. The shift supervisor is to continually monitor the use of restraints to ensure no circulation and/or nerve damage, airway obstruction, or psychological trauma occurs, that the minor's hydration and sanitation needs are attended, that CPR equipment is readily available, and that the restraints are removed as soon as possible once cooperation/compliance is gained, and it is considered safe to do so.

9. Correctional staff are to be cautious when removing restraints; have minor remain lying down on stomach, hold loose cuff/shackles securely so that it cannot be used as a weapon.

B. REMOVAL OF RERAINTS; TIME LIMITS/REVIEW PROCESS

1. Administrative/Supervisory Review

If restraints are not removed within one hour, Facility Manger/Director and/or licensed medical approval for continued use of restraints shall be obtained. When management or licensed medical staff is contacted communicate the events leading up to the restraint, the actual restraint, and the behavior of the minor while in restraints so they will be discussed and evaluated. Either the Juvenile Corrections Officer in charge will be instructed to remove the restraints of a non-combative yet verbally threatening minor for observation or instructions will be to replace hard restraints with soft/vinyl restraints and to call licensed medical and licensed mental health staff for consultation immediately. If management and/or licensed medical staff cannot be contacted, documentation of the fact is to be made and then the supervisor on the shift is to make the decision for continued use. Continued retention in restraints shall be reviewed a minimum of every hour thereafter. At a minimum, Juvenile Corrections Officers are to offer water to any youth in restraints for an hour; water may be offered sooner by staff or if the youth requests a drink of water.

The following considerations should be made if restraints need to be utilized for over one hour.

a. Use of vinyl restraints in lieu of hard restraints. (MANDATORY)

b. Is the individual in need of 5150 evaluation?

c. Consultation with licensed mental health personnel should be obtained.
d. Provision for minor's hydration and sanitation needs and exercising of extremities.

e. On-going checks for circulation/nerve damage.

f. Correctional staff are to assess if the minor has been injured and needs medical attention as a result of physical force/application of restraints.

g. **Correctional staff are to offer water to youth in restraints for one hour and every hour thereafter at a minimum.**

2. **Medical Review**

As soon as possible, but no later than two (2) hours from the time the minor is placed in restraints, consultation with licensed medical staff on the placement and retention in restraints must be obtained. The minor must be medically cleared for continued retention at least every three (3) hours thereafter.

**Anytime** restraints have been applied or if force is used on a resistant minor, the minor is to be evaluated by Regional Facility licensed medical staff at the next scheduled sick call (no more than 24 hours from the use of force), **unless the nature of the situation requires immediate medical attention.** If unsure, contact licensed medical staff for consultation. If going into a weekend/long holiday staff are to have minor evaluated by a licensed medication pass nurse to ensure minor is seen within twenty-four hours (24).

3. **Mental Health Review**

As soon as possible, but no later than four (4) hours from the time a minor is placed in restraints, consultation with licensed mental health personnel must be obtained to assess the need for mental health treatment (use of medications, transfer to licensed mental health facility, crisis assessment, etc.) **Minors who have been placed in restraints shall be set up for a mental health assessment.** A licensed mental health staff shall be consulted soon after minor is placed in restraints if it appears to the shift leader or higher ranking probation employee that minor’s response and behavior to being placed in restraints is not what is normally observed in similar situations. Observing a minor mumbling incoherently, hallucinating, hearing voices, conversing with people who aren’t in the room, etc. may be signs of a break from reality that would require an immediate mental health assessment.

C. **DOCUMENTATION**

Any time physical force or restraints are utilized; a special incident report is to be prepared. It must be specific, yet comprehensive containing the following information.

1. Description of incident.

2. Name of detainees involved.

3. Time of incident.

4. Describe alternatives attempted prior to use of physical force/restraints.
5. Time and method of restraints applied.

6. Names of Correctional Staff involved.

7. Description of injuries to correctional staff/detainees, if any.

8. Document correctional staff member providing continuous direct visual supervision and time/methods used in soliciting minors cooperation for removing restraints.

9. Recording of every adjustment and/or position change of restraints.

10. Time restraints removed.

11. External sources utilized to help evaluate/resolve situation.


13. Recommended action to facility manager.

USE OF CHEMICAL RESTRAINT - OLEORESIN CAPSICUM (OC) SUBSECTION 1001-03

The use of chemical agents is permitted under the provisions of Penal Code Sections 830.5 and 12401 through 12404. Under provision of law, the Chief Probation Officer may authorize the use of chemical agents.

The chemical agent Oleoresin Capsicum (OC) - pepper spray shall be authorized for use only when the conditions outlined in this policy and procedure is met. OC shall not be used for punishment, retaliation, or disciplinary purposes.

I. CORRECTIONAL STAFF AUTHORIZED TO DEPLOY CHEMICAL AGENTS

1. The chief probation officer and/or the assistant chief probation officer may designate those Correctional Staff authorized to use OC-pepper spray within the scope of their employment at the juvenile hall. In order to be authorized to use chemical agents (OC) Correctional Staff must:

   a. Be a regular employee and have completed Penal Code 832 training (Peace Officer status.
   b. Have completed an STC certified OC training course.
   c. Be on duty and designated as Juvenile Corrections Officer to be in possession of OC.
   d. Be trained in Management of Assultive Behavior.
   e. Have had training in departmental policies and procedures regarding use of Oleoresin Capsicum (OC).

2. Authorized correctional staff may use OC while ON-DUTY ONLY. Only OC products which have been approved and issued by the department may be used. Department
issued OC is not authorized for use by the Regional Facility Correctional Staff off-duty. Under no circumstances should anyone attempt to take department issued OC out of Regional Facility when he/she is off duty.

3. Authorization to possess and use OC on-duty may be withdrawn at the discretion of the chief probation officer or assistant chief probation officer at any time. OC canisters, holders, and/or carry packs shall be supplied to correctional staff as authorized by the Chief Probation Officer.

4. The following juvenile hall correctional staff may be authorized to possess and use OC while on-duty at Regional Facility, engaged in the supervision of the JAWS work crew and/or on assigned transport duties only.

   a. Supervising Juvenile Correction Officers (when training is completed)
   b. Senior Juvenile Corrections Officers (when training is completed)
   c. Juvenile Corrections Officers I/II (when training is completed)

5. Extra help Juvenile Corrections Officer I staff are not permitted to carry or use OC.

II. OLEORESIN CAPSICUM (OC) DESCRIPTION, USAGE AND EFFECT

OC is a highly concentrated form of pepper (or a similar synthetic substance) that affects the mucous membranes of humans. OC, when applied to the face, typically causes the following reactions: swelling of the mucous membranes; involuntary closing of the eyes; gagging; shortness of breath; and an intense burning sensation on exposed areas of skin.

Most persons encountering OC involuntarily bend over at the waist or drop to their knees, regardless of their emotional or intoxicated state. These symptoms are temporary and will dissipate within 45 minutes. With treatment, the effects dissipate within 15-20 minutes.

OC products must be used in hand-held canister form. Maximum effectiveness is achieved when the target is at least six but no more than ten feet away from the canister when sprayed. OC must contact the target’s face to be effective. Spraying the person below the face will not cause the desired effects.

Precautions should be taken as follows:

1. All five OC canisters shall be securely locked in the Control Room key drawer when not being carried by a correctional staff member and accounted for at the beginning/end of each shift and noted in the daily log.

2. OC canisters will be shaken once a month to ensure that the active ingredients are properly mixed. This will be done by the shift supervisor during completion of the monthly report.

3. Caution should be taken prior to applying OC on resisting persons engaged physically with other officers or not isolated from bystanders.
4. Caution should be taken prior to using OC in windy conditions. Target should always be downwind. Downwind means that the wind or breeze is to your back. Spraying into the wind could cause the spray to come back and hit the sprayer.

5. OC should not be deployed within a moving vehicle.

6. Due to close range of encounter, it is extremely important that the officer spray the OC and then immediately move laterally to sidestep attack.

7. Officers should recognize the limitations of nonlethal chemical agents. They should remain alert and attentive to their surroundings at all times and continually assess all situations.

8. Whenever possible, correctional staff should avoid deploying OC against minors as recommended by the Regional Facility Nurse or who have the following medical histories or profiles:

   a. Those who have documented medical history of respiratory problems.
   b. Those who have documented medical history of heart disease or related problems.
   c. Those who are taking psychotropic, stimulant medication.
   d. Those admitted who are under the influence of stimulant narcotics (cocaine, methamphetamine, PCP).
   e. Those with documented medical history of seizures.
   f. Those that is medically obese.

All reasonable efforts should be made to avoid spraying these minors with OC. However, because the safety of correctional staff and minors is the primary responsibility, there may be occasions due to violent circumstances where OC may have to be used on these minors to prevent serious injury.

III. CRITERIA FOR USE OF OLEORESIN CAPSICUM (OC)

1. OC may be used as a neutralizing force to control and restrain minors displaying violent behavior when such behavior presents a clear and present danger to that minor, other minors, or staff.

Before OC is used, consideration must be given to the gravity of the situation, the present danger of injury to persons and/or property damage and the possible consequences of use.

Prior to the use of OC, Correctional Staff must give clear instructions to the resident regarding the expected behavior and a reasonable effort must be made to verbally persuade voluntary compliance. The minor should be given a warning when feasible that OC will be used if voluntary compliance is not obtained.

OC may be deployed without warning during those occasions when the minor is
actively resisting and/or the behavior exhibited is of such extreme nature that even momentary delay in deployment of OC would result in further personal injury.

2. OC shall not be used for punishment, retaliation, or disciplinary purposes.
3. OC should be used only as a use of force option to be employed by Correctional staff to maintain order, safety, and security. The force options, to consider, are as follows:
   a. Correctional Staff presence, use of multiple correctional staff.
   b. Verbal diffusion, dialogue and counseling.
   c. Verbal commands.
   d. Weaponless control techniques and control holds.
   e. Mechanical restraints/vinyl restraints.
   f. Use of Chemical Restraints (OC)

*NOTE*: The utilization of physical force and/or mechanical restraint prior to use of OC may not always be appropriate given the circumstances. Force options alternatives must be considered prior to spraying OC but do not have to be attempted if the situation warrants otherwise.

4. Authorized correctional staff may use OC as a force option when one or more of the following conditions are met:
   a. There is an immediate danger to correctional staff or minors due to violent and uncontrollable behavior of one or more minors.
   b. A weapon is being used by a minor to assault another person or effect an escape.
   c. A riot is in progress.
   d. Efforts are made by minor to overpower correctional staff.
   e. A minor is attempting to escape and other defensive measures are inappropriate or unavailable.
   f. The use of OC is necessary to successfully intervene in a suicide attempt and protect the well being of a minor.

IV. WHERE OC MAY BE DEPLOYED

1. OC may be used by authorized correctional staff within the scope of their duties while assigned to the Juvenile Assigned Work Service (JAWS) Program.

2. OC may be used by on duty designated correctional staff duly authorized by the facility manager.

3. OC may be used by designated staff assigned to the transportation of minors outside the confines of Regional Facility while following this and all other policies affecting arrests of minors under our jurisdiction.

V. AFTERCARE PROCEDURES

The following should be followed after a minor has been sprayed with OC:
1. Once a minor has been controlled and restrained, the minor must immediately be given first aid.

2. Advise minor to calm down and try to breathe normally. Assure minor that the effects will diminish and dissipate within a short period.

3. As soon as practical, place minor in shower with clothes on and thoroughly flush minor’s face and contaminated areas with cool/cold water. Warm water will open skin pores and increase discomfort. Staff are to hold the minor, if in restraints, or are to provide a chair to sit on and lean into the water as needed.

4. Remove contaminated clothing and allow minor to take a shower without soap or any oil-based product. Soap or oil-based products will increase discomfort. A cold shower is recommended.

5. Re-issue clean clothing.

6. Symptoms should disappear within 15-45 minutes without after effects. Care should be taken when OC has been applied to minors with emphysema and/or asthmatic conditions as OC may cause severe temporary effects on these individuals.

7. All minors sprayed with OC must be referred to licensed medical personnel. If no licensed medical staff are available, the on-call licensed medical staff should be contacted for consultation and instructions. Remind on-call licensed medical provider if a med pass person is due to arrive who may be able to see the minor.

8. Correctional Staff must observe all minors sprayed with OC for one hour after deployment on a one-on-one basis i.e., direct supervision. A camera can not substitute for direct supervision.

9. Any correctional staff sprayed with OC should follow the same basic regimen outlined above.

10. The same procedures should be followed by any agency bringing in any minor who has been sprayed with OC. All correctional staff should be alerted to any minors who have been sprayed with OC.

11. All contaminated areas, (e.g. floors, counter tops, mattresses) shall be thoroughly cleaned with soap and water.

12. Depending on the circumstances and needs of the minor, a mental health referral may be appropriate.

VI. DOCUMENTATION

1. Anytime OC is deployed, correctional staff shall report the incident on:
a.  Special Incident Report (JH) and
b.  Use of OC Report (JH-10)

The correctional staff member applying OC shall complete these reports prior to going off duty. In addition, all correctional staff witnessing the application of OC will document their observations and involvement in the incident on a Special Incident Report. Samples of these forms are attached.

2.  Reports shall contain:

a.  A clear and factual rationale for the use of OC.
b.  A description of how OC was used and the results obtained.

The reports shall be forwarded to the Manager of Regional Facility and Director of Detention Services who, after review, will forward them to the Chief /Asst. Chief Probation Officer.

VII. EQUIPMENT

1.  Oleoresin Capsicum (OC) is the only chemical agent approved for use in Regional Facility.

2.  No brand of OC shall be used in juvenile hall unless it has been certified by the Department of Justice.

3.  The manager of Regional Facility (or his/her designee) will develop guidelines for the secure storage and maintenance of OC canisters at Regional Facility.

4.  The manager of Regional Facility (or his/her designee) will develop a system for checking canisters at the beginning of a shift and returning them at the end of a shift.

VIII. VIOLATION OF POLICY

1.  Violation of the use of OC policy shall result in severe disciplinary action up to and including termination from employment.

2.  An employee observing any violation of this policy shall report the occurrence to the manager on a Special Incident Report.
PROCEDURE TITLE: USE OF FORCE
Reviewed: December 19, 2012
Revised: February 16, 2015

AUTHORIZATION: Mark Cory

AUTHORITY CITED: CCR TITLE 15 SECTIONS 1357, 1358, 1359

GENERAL POLICY

The policy of this facility is to provide for the physical safety and well being of minors, correctional staff, and visitors. It is often a difficult assignment and it involves handling the fears, anxieties, hostilities, and aggressions of agitated children. Training shall be provided to authorize correctional staff in the policy regarding use of force, mechanical and physical restraints and chemical restraints (oleoresin capsicum-OC). Annual training will be provided regarding the use of force options, case law concerning use of force, management techniques to be considered and/or in lieu of force.

Use of physical force consists of physical contact with a detainee in order to control dangerous behavior or to enforce order, including the use of mechanical restraints and chemical agents. Physical force is justified only when there is imminent danger of personal injury, when there is a risk of escape from confinement, or to maintain or regain control over a facility. Only department approved/issued handcuffs, vinyl restraints and shackles will be used as safety restraints. Minors in safety restraints will be isolated from other minors and monitored directly by one or more correctional staff members of the same sex.

When dealing with aggressive or violent minors, it is essential to use only the minimum amount of force necessary for self defense or to ensure the safety of minors or others. Correctional Staff should attempt to avoid the use of force whenever possible. All use of force will be based upon what is reasonable, appropriate and available given the circumstances. Any use of lethal force is disallowed. In situations where the use of physical force is necessary, staff will make attempts to re-establish a relationship with the minor through counseling methods. The intent is to help the minor identify the behavior that resulted in the need for use of force and assist the minor in exhibiting voluntary compliance.

The use of physical force for reasons of discipline, punishment, treatment, or in retaliation for a minor's resistive, aggressive, or violent acts is PROHIBITED. When applying physical intervention/restraint, Correctional staff must not allow anger or emotion to cause loss of control. Respect for all minors is essential even though the minor's present behavior may be unacceptable. No labels for minors are permitted, nor can peer pressure be allowed to degrade or ostracize them.
Degradation of minors by officers is forbidden. Every child is entitled to be addressed in a manner that promotes understanding and personal respect. Profane, obscene, or derogatory language WILL NOT be used by officers. Officers are not allowed to use words that are derogatory in relationship to race, color, physical appearance, religion and/or cultural background. Correctional staff are to accommodate minors that are impaired, illiterate or do not speak English.

All incidents involving the use of force shall be documented and reviewed as to appropriateness of action taken. Further, correctional staff has an obligation to intervene and take affirmative action to stop and/or report the inappropriate use of force. Disciplinary action may be taken for the improper use of force.

USE OF FORCE OPTIONS AVAILABLE TO CORRECTIONAL STAFF
SUBSECTION 1101-01

“Physical force” is an immediate physical means of overcoming resistance and controlling the threat of imminent harm to self or others, and complies with the provisions of Title 15, CCR, Article 5 and Section 1357. Physical force includes the use of chemical restraints, weaponless control techniques and mechanical restraints.

Correctional Staff should attempt to avoid the use of physical force whenever possible.

The use of defensive force should always be based on what is reasonable and appropriate given the individual circumstances. Force up to and including the use of approved physical control and/or restraint techniques is justified under the following circumstances:

1. There is imminent danger of personal injury to self or others.
2. There is imminent risk of serious damage to property.
3. There is imminent risk of escape.
4. To protect a minor from self-inflicted injuries or suicide.
5. When a minor's actions threaten correctional staff's ability to maintain control, order, safety and/or security within the facility.
6. To ensure physical/medical safety of a minor with medically indicated/documented pre-existing physical/medical condition(s).
Use of force options to consider include:

* Correctional Staff presence, use of multiple correctional staff.
* Dialogue/counseling.
* Verbal commands.
* Weaponless control techniques and control holds such as twist lock, bent wrist lock, bar hammer lock, and hair take down.
* Mechanical hard restraints (handcuffs, belly-chain, shackles, vinyl).
* Chemical restraints (Oleoresin Capsicum)

**NOTE:** Only properly trained and authorized correctional staff may carry chemical restraints within the confines of Regional Facility, while supervising the JAWS work crew and/or while engaged in transport duties.

**Consideration of Use of Force Options:**

Staff members should use the force option correlating to the minor’s escalation of behavior and/or level of restraint (actively resisting or passively resisting). This listing is not be construed as meaning that the defensive force options are to be used in only the order listed. Circumstances may indicate that correctional staff begins at the first option of forces, or alternately at the last option. The force option deployed should only be the minimum necessary for self-defense, to overcome resistance and control aggressive or violent individuals, and to ensure the safety of minor or others. When physical force/restraint is used, whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liability. This does not preclude self defense if a correctional staff member is attacked by a minor(s), in the event of an emergency response by a correctional staff member to a life-threatening situation is deemed necessary.

Female detainees in the advanced stages of pregnancy should not be placed in shackles and/or belly belts. If necessary, these young women can be placed in handcuffs in the front. The pregnant minor should not be placed onto their bellies and/or placed in any kind of situation where harm could come to their unborn child or to themselves.

**DOCUMENTATION AND INVESTIGATION**

Whenever physical force is used, a detailed incident report must be completed and submitted to the manager by the end of the shift. The report should describe why physical force is necessary, and level/extent of force used. All incidents involving the use of force will be subject to administrative review and investigation within 24 hours following the incident. Any improper use of force may be subject to disciplinary action. Incidents involving use of force are subject to detainee grievances. (See Subsection 500-02)
USE OF MECHANICAL RESTRAINTS

Minors shall be placed in mechanical restraints only with the approval of the facility manager or the shift supervisor. Only hard and/or vinyl mechanical restraints (handcuffs and shackles) are authorized for use. Minors placed in mechanical restraints are to be placed in their cell and/or “holding” cell as soon as possible.

At no time are correctional staff at Regional Facility to utilize any restraint hold, devise or technique which is contraindicated by known medical conditions or would result in shutting off the air or blood supply to the brain of the person being restrained.

Mechanical restraints are never to be used for the purpose of punishment or discipline or as a substitute for treatment. Mechanical restraints should only be used when it appears that less restrictive alternatives would be ineffective in controlling the minor’s behavior. Mechanical restraints are only to be used for those minors 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 harm.

When mechanical restraints are necessary the following procedure/method of application are to be followed. Staff is to constantly observe the minor while in restraints and document on the “At Risk Behavior Checklist” at a minimum of every five minutes minor’s current behavior and/or interventions being used.

Whenever any physical force occurs with the minor, whether mechanical restraints are applied or not, the minor will be set up within twenty-four (24) hours to be seen by licensed medical staff. Licensed medical staff will determine if any injuries have occurred.

A. APPLICATION OF MECHANICAL RESTRAINTS

1. When applying restraints use no greater force than is necessary. Whenever possible, a minimum of two correctional staff should be utilized to minimize potential injury and personal liabilities.

2. Correctional staff are vulnerable to attack when applying or removing restraints. Once one cuff is secured on the detainee, the free cuff then becomes a dangerous weapon when swung. Therefore, when applying the restraints, hold the loose end firmly until both cuffs have been applied to the detainee.

3. If in a prone position apply handcuffs, double locked, behind back. Make sure keyhole faces outward for easy locking/unlocking.

4. Shackles - Double Locked. Shackles are utilized to restrict kicking and injury to Correctional Staff. Shackles ARE NOT to be joined to handcuffs. (Hog style method) Make sure keyhole faces outward.
5. When applying handcuffs/shackles, be sure they are only tight enough to prevent the detainee from removing them. Correctional staff applying restraints are to make sure they are not cutting off circulation.

6. Minors in mechanical restraints are to be housed alone or in a specific area to keep minor from view of other detainees. A minimum of one correctional staff member of the same sex, when possible, is to remain in the presence of the minor to provide continuous visual supervision in order to ensure the safety and well-being of the minor. Such observation shall be documented every five minutes on the “At Risk Behavior Checklist”. Detainees are not allowed to stand; they may remain sitting, but preferably lying down in a prone position for staff and minors’ safety. Minors allowed to sit up in restraints can too easily stand up and create a safety hazard for themselves and staff.

7. The correctional staff member with the minor should attempt to solicit cooperation as quickly as possible, and to insure that an out-of-control minor does not inflict self injuries. In the event of apparent seizures or psychotic breaks, licensed medical help should be sought immediately. An immediate restraint check should be conducted to ensure circulation is not cut off and nerve damage did not occur. If circulation or nerve damage is apparent, seek licensed medical attention.

8. The shift supervisor is to continually monitor the use of restraints to ensure no circulation and/or nerve damage, airway obstruction, or psychological trauma occurs, that the minor's hydration and sanitation needs are attended, that CPR equipment is readily available, and that the restraints are removed as soon as possible once cooperation/compliance is gained, and it is considered safe to do so.

9. Correctional staff are to be cautious when removing restraints; have minor remain lying down on stomach, hold loose cuff/shackles securely so that it cannot be used as a weapon.

B. REMOVAL OF RESTRAINTS; TIME LIMITS/REVIEW PROCESS

1. Administrative/Supervisory Review

If restraints are not removed within one hour, Facility Manager/ Director and/or licensed medical approval for continued use of restraints shall be obtained. When management or licensed medical staff is contacted communicate the events leading up to the restraint, the actual restraint, and the behavior of the minor while in restraints so they will be discussed and evaluated. Either the Juvenile Corrections Officer in charge will be instructed to remove the restraints of a non-combative yet verbally threatening minor for observation or instructions will be to replace hard restraints with soft/vinyl restraints and to call licensed medical and licensed mental health staff for consultation immediately. If management and/or licensed medical staff cannot be contacted, documentation of the fact is to be made and then the supervisor on the shift is to make the decision for continued use. Continued retention in restraints shall be reviewed a minimum of every hour thereafter.
The following considerations should be made if restraints need to be utilized for over one hour.

a. Use of vinyl restraints in lieu of hard restraints. (MANDATORY)

b. Is the individual in need of 5150 evaluation?

c. Consultation with licensed mental health personnel should be obtained.

d. Provision for minor's hydration and sanitation needs and exercising of extremities.

e. On-going checks for circulation/nerve damage.

f. Correctional staff are to assess if the minor has been injured and needs medical attention as a result of physical force/application of restraints.

2. Medical Review

As soon as possible, but no later than two (2) hours from the time the minor is placed in restraints, consultation with licensed medical staff on the placement and retention in restraints must be obtained. The minor must be medically cleared for continued retention at least every three (3) hours thereafter.

Anytime restraints have been applied or if force is used on a resistant minor, the minor is to be evaluated by Regional Facility licensed medical staff at the next scheduled sick call (no more than 24 hours from the use of force), unless the nature of the situation requires immediate medical attention. If unsure, contact licensed medical staff for consultation. If going into a weekend/long holiday staff are to have minor evaluated by a licensed medication pass nurse to ensure minor is seen within twenty-four hours (24).

3. Mental Health Review

As soon as possible, but no later than four (4) hours from the time a minor is placed in restraints, consultation with licensed mental health personnel must be obtained to assess the need for mental health treatment (use of medications, transfer to licensed mental health facility, crisis assessment, etc.) Minors who have been placed in restraints shall be set up for a mental health assessment. A licensed mental health staff shall be consulted soon after minor is placed in restraints if it appears to the shift leader or higher ranking probation employee that minor’s response and behavior to being placed in restraints is not what is normally observed in similar situations. Observing a minor mumbling incoherently, hallucinating, hearing voices, conversing with people who aren’t in the room, etc. may be signs of a break from reality that would require an immediate mental health assessment.
C. DOCUMENTATION

Any time physical force or restraints are utilized; a special incident report is to be prepared. It must be specific, yet comprehensive containing the following information.

1. Description of incident.
2. Name of detainees involved.
3. Time of incident.
4. Describe alternatives attempted prior to use of physical force/restraints.
5. Time and method of restraints applied.
6. Names of Correctional Staff involved.
7. Description of injuries to correctional staff/detainees, if any.
8. Document correctional staff member providing continuous direct visual supervision and time/methods used in soliciting minors cooperation for removing restraints.
9. Recording of every adjustment and/or position change of restraints.
10. Time restraints removed.
11. External sources utilized to help evaluate/resolve situation.
13. Recommended action to facility manager.

USE OF CHEMICAL RESTRAINT - OLEORESIN CAPSICUM (OC) SUBSECTION 1101-03

The use of chemical agents is permitted under the provisions of Penal Code Sections 830.5 and 12401 through 12404. Under provision of law, the Chief Probation Officer may authorize the use of chemical agents.

The chemical agent Oleoresin Capsicum (OC) - pepper spray shall be authorized for use only when the conditions outlined in this policy and procedure is met. OC shall not be used for punishment, retaliation, or disciplinary purposes.

I. CORRECTIONAL STAFF AUTHORIZED TO DEPLOY CHEMICAL AGENTS

1. The chief probation officer and/or the assistant chief probation officer may designate those Correctional Staff authorized to use OC-pepper spray within the scope of their employment at the Regional Facility. In order to be authorized to use chemical agents (OC) Correctional Staff must:
a. Be a regular employee and have completed Penal Code 832 training (Peace Officer status.

b. Have completed an STC certified OC training course.

c. Be on duty and designated as Juvenile Corrections Officer to be in possession of OC.

d. Be trained in Management of Assaultive Behavior.

e. Have had training in departmental policies and procedures regarding use of Oleoresin Capsicum (OC).

2. Authorized correctional staff may use OC while **ON-DUTY ONLY**. Only OC products which have been approved and issued by the department may be used. Department issued OC is **not** authorized for use by the Regional Facility Correctional Staff off-duty. **Under no circumstances should anyone attempt to take department issued OC out of Regional Facility when he/she is off duty.**

3. Authorization to possess and use OC on-duty may be withdrawn at the discretion of the chief probation officer or assistant chief probation officer at any time. OC canisters, holders, and/or carry packs shall be supplied to correctional staff as authorized by the Chief Probation Officer.

4. The following Regional Facility correctional staff may be authorized to possess and use OC while on-duty at Regional Facility and/or on assigned transport duties only.

   a. Supervising Juvenile Correction Officers (when training is completed)
   b. Senior Juvenile Corrections Officers (when training is completed)
   c. Juvenile Corrections Officers I/II (when training is completed)

5. Extra help Juvenile Corrections Officer I staff are not permitted to carry or use OC.

II. **OLEORESIN CAPSICUM (OC) DESCRIPTION, USAGE AND EFFECT**

OC is a highly concentrated form of pepper (or a similar synthetic substance) that affects the mucous membranes of humans. OC, when applied to the face, typically causes the following reactions: swelling of the mucous membranes; involuntary closing of the eyes; gagging; shortness of breath; and an intense burning sensation on exposed areas of skin.

Most persons encountering OC involuntarily bend over at the waist or drop to their knees, regardless of their emotional or intoxicated state. These symptoms are temporary and will dissipate within 45 minutes. With treatment, the effects dissipate within 15-20 minutes.

OC products must be used in hand-held canister form. Maximum effectiveness is achieved when the target is at least six but no more than ten feet away from the canister when sprayed. OC must contact the target's face to be effective. Spraying the person below the face will not cause the desired effects.
Precautions should be taken as follows:

1. All five OC canisters shall be securely locked in the Control Room key drawer when not being carried by a correctional staff member and accounted for at the beginning/end of each shift and noted in the daily log.

2. OC canisters will be shaken once a month to ensure that the active ingredients are properly mixed. This will be done by the shift supervisor during completion of the monthly report.

3. Caution should be taken prior to applying OC on resisting persons engaged physically with other officers or not isolated from bystanders.

4. Caution should be taken prior to using OC in windy conditions. Target should always be downwind. Downwind means that the wind or breeze is to your back. Spraying into the wind could cause the spray to come back and hit the sprayer.

5. OC should not be deployed within a moving vehicle.

6. Due to close range of encounter, it is extremely important that the officer spray the OC and then immediately move laterally to sidestep attack.

7. Officers should recognize the limitations of nonlethal chemical agents. They should remain alert and attentive to their surroundings at all times and continually assess all situations.

8. Whenever possible, correctional staff should avoid deploying OC against minors as recommended by the Regional Facility Nurse or who have the following medical histories or profiles:
   a. Those who have documented medical history of respiratory problems.
   b. Those who have documented medical history of heart disease or related problems.
   c. Those who are taking psychotropic, stimulant medication.
   d. Those admitted who are under the influence of stimulant narcotics (cocaine, methamphetamine, PCP).
   e. Those with documented medical history of seizures.
   f. Those who are medically obese.

All reasonable efforts should be made to avoid spraying these minors with OC. However, because the safety of correctional staff and minors is the primary responsibility, there may be occasions due to violent circumstances where OC may have to be used on these minors to prevent serious injury.
III. CRITERIA FOR USE OF OLEORESIN CAPSICUM (OC)

1. OC may be used as a neutralizing force to control and restrain minors displaying violent behavior when such behavior presents a clear and present danger to that minor, other minors, or staff.

Before OC is used, consideration must be given to the gravity of the situation, the present danger of injury to persons and/or property damage and the possible consequences of use.

Prior to the use of OC, Correctional Staff must give clear instructions to the resident regarding the expected behavior and a reasonable effort must be made to verbally persuade voluntary compliance. **The minor should be given a warning when feasible that OC will be used if voluntary compliance is not obtained.**

OC may be deployed without warning during those occasions when the minor is actively resisting and/or the behavior exhibited is of such extreme nature that even momentary delay in deployment of OC would result in further personal injury.

2. OC shall not be used for punishment, retaliation, or disciplinary purposes.

3. OC should be used only as a use of force option to be employed by Correctional staff to maintain order, safety, and security. The force options, to consider, are as follows:

   a. Correctional Staff presence, use of multiple correctional staff.
   b. Verbal diffusion, dialogue and counseling.
   c. Verbal commands.
   d. Weaponless control techniques and control holds.
   e. Mechanical restraints/vinyl restraints.
   f. Use of Chemical Restraints (OC)

*NOTE: The utilization of physical force and/or mechanical restraint prior to use of OC may not always be appropriate given the circumstances. Force options alternatives must be considered prior to spraying OC but do not have to be attempted if the situation warrants otherwise.

4. Authorized correctional staff may use OC as a force option when one or more of the following conditions are met:

   a. There is an immediate danger to correctional staff or minors due to violent and uncontrollable behavior of one or more minors.
   b. A weapon is being used by a minor to assault another person or effect an escape.
   c. A riot is in progress.
   d. Efforts are made by minor to overpower correctional staff.
   e. A minor is attempting to escape and other defensive measures are inappropriate or unavailable.
f. The use of OC is necessary to successfully intervene in a suicide attempt and protect the well being of a minor.

IV. WHERE OC MAY BE DEPLOYED

1. OC may be used by authorized correctional staff within the scope of their duties while assigned to the Juvenile Assigned Work Service (JAWS) Program.

2. OC may be used by on duty designated correctional staff duly authorized by the facility manager.

3. OC may be used by designated staff assigned to the transportation of minors outside the confines of Regional Facility while following this and all other policies affecting arrests of minors under our jurisdiction.

V. AFTERCARE PROCEDURES

The following should be followed after a minor has been sprayed with OC:

1. Once a minor has been controlled and restrained, the minor must immediately be given first aid.

2. Advise minor to calm down and try to breathe normally. Assure minor that the effects will diminish and dissipate within a short period.

3. As soon as practical, place minor in shower with clothes on and thoroughly flush minor’s face and contaminated areas with cool/cold water. Warm water will open skin pores and increase discomfort. Staff are to hold the minor, if in restraints, or are to provide a chair to sit on and lean into the water as needed.

4. Remove contaminated clothing and allow minor to take a shower without soap or any oil-based product. Soap or oil-based products will increase discomfort. A cold shower is recommended.

5. Re-issue clean clothing.

6. Symptoms should disappear within 15-45 minutes without after effects. Care should be taken when OC has been applied to minors with emphysema and/or asthmatic conditions as OC may cause severe temporary effects on these individuals.

7. All minors sprayed with OC must be referred to licensed medical personnel. If no licensed medical staff are available, the on-call licensed medical staff should be contacted for consultation and instructions. Remind on-call licensed medical provider if a med pass person is due to arrive who may be able to see the minor.

8. Correctional Staff must observe all minors sprayed with OC for one hour after deployment on a one-on-one basis i.e., direct supervision. A camera can not substitute for direct supervision.
9. Any correctional staff sprayed with OC should follow the same basic regimen outlined above.

10. The same procedures should be followed by any agency bringing in any minor who has been sprayed with OC. All correctional staff should be alerted to any minors who have been sprayed with OC.

11. All contaminated areas, (e.g. floors, counter tops, mattresses) shall be thoroughly cleaned with soap and water.

12. Depending on the circumstances and needs of the minor, a mental health referral may be appropriate.

VI. DOCUMENTATION

1. Anytime OC is deployed, correctional staff shall report the incident on:
   a. Special Incident Report (JH) and
   b. Use of OC Report (JH-10)

   The correctional staff member applying OC shall complete these reports prior to going off duty. In addition, all correctional staff witnessing the application of OC will document their observations and involvement in the incident on a Special Incident Report. Samples of these forms are attached.

2. Reports shall contain:
   a. A clear and factual rationale for the use of OC.
   b. A description of how OC was used and the results obtained.

   The reports shall be forwarded to the Regional Facility Manager and the Detention Services Director who, after review, will forward them to the Chief/Asst. Chief Probation Officer.

VII. EQUIPMENT

1. Oleoresin Capsicum (OC) is the only chemical agent approved for use in Regional Facility.

2. No brand of OC shall be used in Regional Facility unless it has been certified by the Department of Justice.

3. The manager of Regional Facility (or his/her designee) has developed guidelines for the secure storage and maintenance of OC canisters at Regional Facility.
4. The manager of Regional Facility (or his/her designee) has developed a system for checking canisters at the beginning of a shift and returning them at the end of a shift.

VIII. VIOLATION OF POLICY

1. Violation of the use of OC policy shall result in severe disciplinary action up to and including termination from employment.

2. An employee observing any violation of this policy shall report the occurrence to the manager on a Special Incident Report.

ADMINISTRATION OF DISCIPLINE

Discipline shall be administered by correctional staff only, and never be delegated to another detained minor.

In the administration of discipline, officers must be decisive, fair and impartial. All judgments are to be based on facts, not emotions, and must be supported by professional skills. Discipline is to be imposed at the least restrictive level which promotes the desired behavior. Discipline shall not include corporal punishment, group punishment, physical or psychological degradation or deprivation of basic rights.

Most problems can be prevented by early intervention or resolved by appropriate counseling techniques. Removal of privileges is permissible; however, sound judgment must be used to insure that it is not misused. When these methods have been used and have proven to be unsuccessful, or the nature of behavior is so volatile as to possibly endanger the safety of others, officers may remove the child from the group and place the minor in his or her room.

A Special Incident Report is to be written describing the facts that led to the minor's removal from the group. The Supervising Juvenile Corrections Officer or Acting Supervising Juvenile Corrections Officer is to review all Special Incident Reports to determine if action taken was appropriate. Management staff will further review all Incident Reports to further monitor disciplinary action and related incidents at Regional Facility. Refer to Section 1101-06 Temporary Room Time.

DEPRIVATION OF BASIC RIGHTS

Under no circumstances shall a minor be deprived of his or her basic rights as a means of discipline. Basic rights are as follows:

A. Bed and bedding, (bed, pillow, blanket, sheets, etcetera) Some of these items may be restricted due to classification alert status.

B. Food/Full Nutrition

C. Clean clothes

D. Contact and visits with parent and or attorney, unless so restricted by the court or facility manager for cause.
E. Access to drinking fountain, toilet and items necessary for personal hygiene.

F. Minimum exercise

G. Education

H. Right to receive and send mail

I. Opportunity for a daily shower

J. Opportunity for religious services/counseling

K. Clean and sanitary living conditions

L. Medical services and counseling

TEMPORARY ROOM TIME

As stated in Section 1101-04, alternatives such as counseling and/or privilege restrictions, are to be used prior to placing a minor in his room for temporary room time.

However, should the alternatives not be effective, or the minor's behavior so volatile, temporary room time may be used if one of the following four conditions exist:

A. The minor is an immediate threat to the physical safety of another person.

B. The minor is likely to escape.

C. The minor is in need of protection from physical injury.

D. The minor is involved in repetitious acts of misconduct requiring his/her removal for the protection of another person or himself.

Minors placed in room isolation or serving disciplinary room time for 24 hours or more, must be set up for daily sick call for medical evaluation by the nurse.

Further, those minors serving disciplinary room time who do not receive or will not receive a minimum of one-hour of daily exercise, either prior to or after disciplinary action, must be given an opportunity for one hour of large muscle activity (outside, weather permitting).
REPORTING OF INCIDENTS

A Special Incident Report must be completed by the officer detailing the circumstances and facts of the incident, as well as one or more of the conditions that necessitated temporary room time. Temporary room time must be approved by the supervisor or acting supervisor on shift. Management will review all Incident Reports to monitor the appropriateness and use of temporary room time. A written report of all incidents which result in physical harm, serious threat of physical harm, or death to an employee or detainee of Regional Facility, or other person(s) must be prepared and submitted to the manager by the end of the shift.

VIOLATION OF RULES

The following should be used as a guideline in determining the seriousness of a rule violation and in determining the appropriate level of sanction commensurate with the severity of the misbehavior. Correctional Staff shall make provisions for those minors that are impaired, illiterate, or do not speak English. Detainees have the right to review and appeal of a minor rule violation to the supervisor of the shift. Major violations are also subject to a hearing process if the minor so chooses. Documentation needs to indicate that minor was offered a hearing and either refused the hearing and accepted the discipline; or requested and received a hearing by an impartial person. Minor is to sign the due process form indicating whether they accept the disciplinary action or request a hearing. Staff are to assist the minor, if requested, in preparing information for a hearing.

MINOR VIOLATIONS

<table>
<thead>
<tr>
<th>OFFENSE</th>
<th>SANCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Slow to follow Correctional Staff directions</td>
<td>#1-13 Lowered stepscore; program</td>
</tr>
<tr>
<td>2. Horseplay</td>
<td>Restrictions, up to 4 hours room</td>
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<tr>
<td>3. Out of assigned area</td>
<td>Confinement.</td>
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<tr>
<td>4. Possessing ineligible item or unconcealed minor contraband</td>
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<td>5. Defacing of property (writing on walls, magazines, etc)</td>
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<td>6. Lying/manipulating others.</td>
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<td>7. Verbal badgering or intimidation</td>
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<td>8. Disrupting programs (yelling, banging, kicking, etc.)</td>
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<tr>
<td>9. Gang related &quot;turf talk&quot;, gesturing or graffiti</td>
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<tr>
<td>10. Refusal to attend school.</td>
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</table>
MAJOR VIOLATIONS

Detainees will have an opportunity to be heard, present evidence and testimony, and be assisted by correctional staff in the hearing process.

<table>
<thead>
<tr>
<th>VIOLATION</th>
<th>SANCTION</th>
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<tbody>
<tr>
<td>15. School suspension;</td>
<td>#15-24 - Program restriction;</td>
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<tr>
<td></td>
<td>up to twenty-four hours room confinement</td>
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<td>16. Fighting; physical altercation between detainees (no injuries)</td>
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<td>17. Possession of minor contraband (concealed)</td>
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<td>18. Riotous behavior or instigation of riot (no damage or injuries)</td>
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<td>19. Consensual sexual conduct or touching</td>
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<td>20. Gang-related talk, gesturing, graffiti (three or more incidents)</td>
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<td>21. Refusal to return to room for time-out, DRT, etc</td>
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<td>22. Destruction of property, clothing, etc/vandalism</td>
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<td>23. Flagrant defiance of disrespect of Correctional Staff authority</td>
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<td>24. Verbally threatening Correctional Staff or others</td>
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<td>25. Possession of serious contraband (matches, potential weapons, lighters,</td>
<td>#25-33 - Program restriction;</td>
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<td>drugs, alcohol, etc.)</td>
<td>more than twenty-four hours room confinement,</td>
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<td>possibility of charges for arrest</td>
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<td>26. Physically threatening Correctional Staff or physically struggling</td>
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<td>with Correctional Staff when requested to return to room</td>
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<td>27. Battery against Correctional Staff</td>
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<td>28. Sexual assault, i.e., non-consensual sexual contact</td>
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<td>29. Battery against another detainee causing significant injury/unprovoked</td>
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<tr>
<td>assault</td>
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<tr>
<td>30. Fire-setting</td>
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<tr>
<td>31. Gang-related disturbance</td>
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<td>32. Escape or attempted escape</td>
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<td>33. Riotous behavior/institution of riot causing damage to property or</td>
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<tr>
<td>injury to others</td>
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CLASSIFICATION SYSTEM FOR SPECIAL INCIDENTS

Whenever the administration of discipline results in temporary room time, a Special Incident Report should be completed. All special incidents will be classified by the type, shift designation, and temporary room time code. This classification code should be placed in the upper right hand corner of the incident report (i.e. 8-A-A; 2-B-C). Note the length of room time on the Special Incident Report.

1. Refusing or arguing with Correctional Staff directives
2. Damaging hall materials, property, clothing or equipment
3. Physical or verbal altercation between detainees
4. Kissing and/or sexual touching
5. Abusive Language
6. Physical restraint
7. Threatening or assaulting Correctional Staff/spitting on Correctional Staff
8. School suspensions/room student detention
9. Problems during mealtime, showers, quiet period, or D.R.T.
10. Rioting or instigation of a riot
11. Attempted escape, A.W.O.L. from furlough, or escape from the building
12. Miscellaneous
13. Medical
14. Grievance
15. Suicidal threats, gestures
16. Contraband
17. 5150's/suicide attempts requiring licensed medical attention/suicide
SHIFT DESIGNATION
A. 7-3 weekdays
B. 3-11 weekdays
C. 7-11 holidays
D. 11-7 weekends

TEMPORARY LOCK-UP
A. The minor is in immediate threat to the physical safety of others.
B. The minor is likely to escape.
C. The minor is in need of protection from physical injury.
D. Minor is involved in repetitious acts of misconduct requiring his removal for the protection of another person or himself.

DISCIPLINARY ROOM TIME

24 hr.
48 hr.
72 hr
96 hr.
120 hr.