Classification / Room Confinement Status

I. Classification for Youth Housing and Programming

A. A classification system that governs youth housing and programming promotes a safe and secure environment, and minimizes opportunities for assaultive behavior and inappropriate conduct between youth. Classification assesses a youth’s propensity for violence, potential for victimization, and case dynamics that may impact facility operations or security. It seeks to insure the safety of all youth, officers, contractors and providers, and members of the public. It determines levels of security appropriate for each youth and programming needs. Classification occurs upon admission to the facility and periodically throughout a youth’s period of detention as needed.

B. Housing and programming decisions should be based on an objective initial assessment of intake information and available case information and documentation. Information may also be obtained verbally from arresting or transporting officers, medical, mental health, or school personnel, or family members and other persons with knowledge of a youth. A variety of factors can be used in determining appropriate housing and programming for a youth. Classification should allow for the most permissive conditions for a youth except where safety and security concerns dictate otherwise. In all cases, classification decisions should be documented with rationale clearly explained. A Classification Checklist is used to insure a standard and objective evaluation that minimizes the potential for bias. Facility population and physical layout are to be considered so as to maximize the benefits of classification.

C. Housing and programming considerations are done initially at the time of admission to the facility. A Classification Checklist that considers the following factors is utilized. Other factors may be considered.

1. Admission offense(s)
2. Status as a current or former probationer or ward
3. Status as a court dependent
4. Demeanor at time of admission (threatening, uncooperative behavior)
5. Being under the influence of drugs or alcohol at admission
6. Age
7. Maturity
8. Gender, gender identity and sexual orientation
9. History of trauma or mental health issues
10. Physical and emotional maturity
11. Sophistication
12. Emotional stability
13. Potential for self-injurious or suicidal behavior
14. Medical and health needs
15. Public safety considerations
16. Program needs
17. Known animosity toward other detained youth
18. Gang affiliation
19. Potential for escape or violent behavior
20. History of assaultive behavior

   a. Sexual orientation, gender and gender identity are not the sole factors considered when making decisions about classification. Rather, these factors are considered in the context of overall youth and facility safety and security.

   b. Where sexual orientation, gender and gender identity factors alone drive classification decisions, clear articulation of the rationale is to be provided with appropriate documentation. In all cases, these factors are to be considered on a case-by-case basis and not generally applied. Subject matter experts and evidence-based guides should be consulted to provide information regarding these factors for classification purposes.

   c. Staff shall not consider lesbian, gay, bisexual, transgender, questioning or intersex identification or status as an indicator of likelihood of being sexually abusive.

D. Youth are not to be kept separate from the general population or assigned to single occupancy rooms based solely on their actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, gender,
sexual orientation, gender identity or expression, mental or physical disability or Acquired Immunodeficiency Syndrome status.

E. When classification decisions are being made, staff are to take into consideration positive youth development and trauma-informed care. Medical and Behavioral Wellness staff are a resource when making classification decisions and are to be consulted when available.

F. Youth shall be housed in the unit or room that best meets their individual needs, and promotes their safety and well-being. Staff may not automatically house youth according to their external anatomy, and shall document the reasons for any decision to house youth in a unit that does not match their gender identity. In making a housing decision, staff shall consider the youth’s preferences, as well as any recommendations from medical or Behavior Wellness staff.

G. Facility staff shall respect every youth’s gender identity, and shall refer to the youth by the youth’s preferred name and gender pronoun, regardless of the youth’s legal name. However, the use of gang or slang names or names that otherwise compromise facility operations as determined by the facility manager or designee may be prohibited. The facility manager or designee shall document any decision made on this basis.

H. The following components of the classification system are to be used to facilitate specific housing and programming decisions following an assessment of relevant factors.

II. Housing Status

A. Security Status (S)

Youth assigned to this status make up the majority of the population of detained youth at the juvenile hall. Generally they are:

1. Not considered an escape risk
2. Not considered a threat to the safety and security of other persons or the facility
3. Pending eventual release to their home or a foster care placement
4. Compliant with facility rules and officer direction

B. Room Confinement Status (RCS)

1. Room Confinement is defined in Section 208.3(a)(3) WIC and pertains to our facility as the placement of a youth in their sleeping room with minimal or no contact with persons other than facility officers in instances where a youth’s behavior poses a risk to the safety of others, or the security of the facility.

2. Room confinement shall not be used before other, less restrictive, options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff.

3. Room confinement shall not be used for the purposes of punishment, coercion, convenience, or retaliation by staff and shall not be used to the extent that it compromises the mental and physical health of the youth.

   a. A Senior Juvenile Institutions Officer (Sr. JIO) or Senior Deputy Probation Officer (Sr. DPO) may approve a youth to be held up to four hours in room confinement, if determined a youth’s statements, behavior or conduct poses a threat to the safety or security of any youth or staff or the security of the facility.

      i. The behavior or conduct that necessitates the room confinement shall be documented in a Worker’s Special Report (WSR) and shall include the date and time room confinement commenced and interventions used.

      ii. A youth will only remain on RCS for the period of time the youth poses a threat to the safety or security of any youth or staff or the security of the facility, and may be less than four hours. A youth will be returned to general population as soon as
possible once the youth no longer poses a threat to the safety or security.

iii. Youth on RCS shall be evaluated at regular one hour intervals.

b. If a youth is confined on RCS for less than four (4) hours, staff shall do the following:

i. Upon placing a youth on RCS, immediately notify medical and Behavioral Wellness staff and complete a Separation of Youth/Room Confinement Notification.

ii. Document in a WSR the youth’s behavior and responsiveness to interventions used.

b. After a youth has been held in room confinement for four (4) hours, staff shall do the following:

i. Return the youth to the general population, unless the youth’s current behavior or conduct indicates that the youth continues to pose a risk to the safety and security of others. In these circumstances, the Sr. DPO or Supervising Probation Officer (SPO) shall:

ii. Consult with mental health or medical staff to insure that continued room confinement does not pose a risk to the youth.

c. If room confinement must be extended beyond four hours, staff shall do the following:

i. Obtain approval from the facility director, or his/her designee, for continued room confinement. This is required every four hours that room confinement is to be continued. The approval shall be documented
in a supplemental WSR.

ii. Document in the supplemental WSR the reason(s) that continued room confinement is necessary, interventions attempted and contacts made (e.g. Behavioral Wellness, Medical, and Probation Administration), the date and time the youth was first placed on room confinement, the date and time each extension is reviewed, and the date and time the youth is returned to the general population.

iii. Develop an individualized plan that includes the goals and objectives to be met in order to reintegrate the youth back into the general population. The individualized plan will be maintained in the youth’s IMPACT file.

C. Room Confinement Status – Maximum Security (MS)

1. Youth placed on MS status are considered to be an ongoing credible physical threat to staff or other youth, and/or to the security of the institution.

   a. Upon placing a youth on RCS, immediately notify medical and Behavioral Wellness staff and complete a Separation of Youth/Room Confinement Notification.

   b. Document in a WSR the youth’s behavior and responsiveness to interventions used.

2. Youth may be placed on MS for the following types of behavior:

   a. Causing or attempting to cause a riot
   b. Escape or attempted escape
   c. Intentional assault on a staff member
   d. Attempting to obtain staff keys by force
   e. Credible threats to do any of the actions listed above
   f. Use of a weapon during an assault
g. Initiating multiple fights within a 48-hour period.

3. Youth on MS Status shall have the following additional restrictions:

a. Two staff must be present when entering a room occupied by a youth on MS or when letting an MS youth out of his/her room, and for all out of room activities, including medical exams and mental health counseling.

b. During all movement youths hands must be secured in an interlocked finger hold.

c. Other youth are not to be present on the unit or in a recreation yard when a youth on MS is out of their room for recreation or dayroom time. Exceptions may be made for purposes of movement of a MS youth or another youth. Those exceptions are to be made by a Sr. DPO or SPO.

d. MS youth will be on “no plastic.” Exceptions must be approved by the Sr. DPO or SPO.

e. Youth on MS status will have all visits in “No Contact” rooms.

f. The MS status will be reviewed in the same manner as youth on RCS. Reviews will be completed by unit staff and evaluated by the Sr. DPO or SPO every four hours. Progress toward behavioral / treatment goals to allow the MS youth to return to the group will be documented by the Sr. DPO or SPO and included in the Individualized Plan pursuant to 203.4(d) WIC.

g. Teaching staff will be consulted and information regarding the youth’s school program will be included in the Individualized Plan.
D. **Situations NOT considered room confinement**

1. Room confinement does not include placing a youth in their room for brief periods of locked confinement necessary for required institutional operations.

2. A youth maintained in a court holding facility is not considered to be on room confinement.

3. Youths secured in their rooms during normal sleeping hours are not considered to be on room confinement.

4. Youths confined to their rooms due to medical orders (bed rest) are not considered to be on room confinement.
   
   a. This exception requires the written approval of a physician or nurse practitioner.

5. Room confinement does not apply when youths are secured in their rooms during an extraordinary, emergency circumstance that requires a significant departure from normal institutional operations, including facility lockdown, natural disasters, or other facility wide threats that pose imminent and substantial risk of harm to multiple officers or youths.
   
   a. This exception shall apply for the shortest amount of time needed to address the imminent and substantial risk of harm.
   
   b. Room confinement shall not be used before other less restrictive options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or officer.
   
   c. Room confinement shall not be used for the purposes of punishment, discipline, coercion, convenience or retaliation by officers.
d. Room confinement shall not be used to the extent that it compromises the mental and physical health of a youth.

III. Program Status

A. Program statuses are used to identify the specific program(s) a youth may be participating in, court case elements that may dictate how a youth is supervised, or temporary mental or physical health issues that may require special attention. Program Status designations include:

1. LPBC – Youth under commitment to Los Prietos Boys Camp

2. DJF – Youth under commitment to the State Division of Juvenile Facilities.

3. Special Logs

   a. “See Log” (SLI, SLI-5, SLI-10, SLA) (These pertain to suicide history and risk.)

   b. Escape (ESC)

   c. Sex Offender (SOF)

3. “WKND” - Youth ordered to serve weekend commitments in Juvenile Hall

4. “MED/ISO” - Youth placed on isolation by medical personnel because of health risks or illnesses that may be communicable or require close monitoring and assessment. Youth may be placed on MED/ISO by a Sr. JIO or above and remain on MED/ISO until evaluated by medical personnel.

5. “§707(b) WIC” – This status applies to youth who have been found unfit for Juvenile Court proceedings and are pending proceedings in the criminal courts.
6. “Prop 57” – Proposition 57 – This status applies to youth whose cases have been filed in adult criminal courts.

7. “HOLD” – Youth in this status are being held for other jurisdictions (e.g. other Probation Departments).

8. “ESC RSK”
   a. Attempted or actually escaped from a secure facility or from the custody of officer (does not include absconding from an open setting such as LPBC or leaving a foster care program).
   b. Legitimate threat or plan to escape, or specific officer knowledge that an escape attempt is probable or possible.

9. “YOBG” - Youthful Offender Block Grant program – Youth committed to the juvenile hall to participate in the YOBG program.

IV. General Procedures and Information

A. General Operations

1. Youth are to remain out of their rooms throughout normal awake hours. Officers are to seek less restrictive alternatives to room confinement whenever possible for behavioral management and to redirect youth.

2. Youth are only to serve room confinement in his or her assigned room.

3. The period of room confinement shall be structured so that youth can be placed in, or returned to, a group setting as soon as the objective of the imposed behavioral management goal has been accomplished.

4. Officers will perform standard welfare checks (15 minute) of youth confined to their room unless there is a need to monitor them more frequently.
B. Facility Specific Operations

1. Medical Reasons – Medical personnel or the Sr. DPO can place a youth in their room to mitigate the potential for a health problem worsening or to provide a period for recovery from a health issue. This includes, but is not limited to, a youth who is nauseous, has serious cramping during menstrual cycle, has a broken limb, or is experiencing severe headaches.

2. General Facility Operations - There are times when youth will be confined to their rooms to facilitate orderly operations. These are not to be considered involuntary separation or disciplinary measures and include the following:
   a. Shift change (30 minutes or less), meal setup (30 minutes or less) and clean-up (30 minutes or less). Time frames cited above shall ordinarily be considered as maximum periods of general room confinement. Shortening these periods is encouraged when not demonstrably inconsistent with the orderly operations of a unit. Officers may not place youth in general confinement for convenience purposes such as officer breaks, officer errands, etc.
   b. If the room confinement falls outside of the general facility operations (i.e., investigation, unit search, unit lock down, routine, emergency drills, etc.), it must be coordinated with the Sr. DPO or SPO and shall not exceed 4 hours of confinement. Reasons for room confinement will be documented in the End of Shift Report (ESR).
   c. The Sr. JIO and Sr. DPO will insure operations are returned to normal as soon as reasonably possible. In extraordinary circumstances, the Sr. DPO shall consult with a SPO when it appears room confinement will exceed four hours. The Sr. DPO will document in the ESR why room confinement was imposed and for how long.
3. **Time Out** - The temporary separation of a youth from the general population to a separate area of the unit or facility when the youth’s emotional state is disruptive or likely to escalate.

   a. The youth will remain separated only for the period of time necessary to deescalate, redirect and/or bring a youth’s escalating behavior under control.

   b. Measures used to address behavior should be positive and non-punitive.

   c. A time out shall be documented in a WSR noting the time and date of the behavior of the youth, the interventions used to address and/or redirect the behavior and any referrals made as part of the process.

4. **Procedure for Room Confinement**

   a. When unit Officers are aware of a situation likely to result in room confinement, and if the situation permits, the Sr. DPO will be immediately advised. When possible, the unit officers and the Sr. DPO will evaluate the immediate need to place a youth in his/her room.

   b. The unit Officer or the Sr. DPO will explain to the youth the reason(s) for the room confinement and its duration.

   c. Staff shall always counsel with youth about why room confinement is being issued so that the youth understands the reason for it.

   d. With the exception of a time out, officers will complete Due Process for any room confinement.

   d. The duration of the room confinement should only be the amount necessary to correct the underlying non-compliant behavior.
e. The age, cognitive ability, and maturity of the youth should be considered in determining appropriate room confinement.

f. Corporal punishment and cruel, degrading punishment, either physical or psychological, is prohibited.

g. Youth who are separated shall not be denied their basic rights while in room confinement, including their right to due process, exercise, education, food (including snacks), treatment interventions, etc.

5. Documentation

a. Unit Officers will document all room confinement which results in the separation of a youth from the general population in the Unit Log, including, but not limited to all exceeding fifteen minutes, medical isolation, and upgrade in security status. In addition, a WSR is to be written and shall include:

(1) The date and time the room confinement began and the anticipated/recommended time room confinement will terminate.

(2) A description of the behavior that resulted in the room confinement.

(3) A description of the interventions or alternatives employed prior to room confinement.

(4) Documentation of the officers involved and what referrals were made to other persons such as medical personnel, mental health, the assigned DPO, attorney, etc.
(5) A description of the actions taken by the Sr. DPO.

b. Officers will document in the Unit Log the date and times that youth serving room confinement enter and exit their rooms for general facility routine movements.

6. Notification:

a. Unit Officers will notify the Sr. DPO of all non-routine room confinement and if immediate notification is warranted, prior to distribution of WSR, the Sr. DPO will advise a SPO or designee.

b. Unit Officers will make any appropriate referrals, i.e. medical or mental health.

7. Room confinement may be grieved by a youth.

V. Room Confinement Welfare Room Check Procedures

A. All SLA or SLI-5 youth in Room Confinement will have five-minute room checks. Officers will document in the room check logbook:

1. Time of the check
2. Room number
3. Legible employee number of the unit officers performing the check

B. All other youth who are placed on room confinement status will be assessed by a Sr. JIO and/or Sr. DPO regarding the appropriateness of a five, ten or fifteen minute room check. The assessment should include the youth’s behavior, the youth’s history of self-harm, and the underlying behavior that resulted in separation.

1. If more frequent welfare checks are warranted, a “Safety Chrono” will be documented in IMPACT, a notation is made on the unit white board by the Sr. JIO or Lead Shift Person (LSP) and the Sr.
DPO on duty will be advised. Documentation in the room check logbook will be the same as indicated above for SLA, SLI-5, and SLI-10.

2. If it is determined that 15-minute room checks are appropriate, the youth will be designated as separation. Documentation will not change from the current practice.

C. Documentation in WSR

1. As with all room confinement, a WSR will be written and Due Process will be initiated.

2. The WSR will include a statement indicating the name of the Sr. JIO/Sr. DPO evaluating the youth regarding room checks.

D. Mental Health

1. Any youth placed on a five, or ten minute welfare check will be referred to mental health personnel for an assessment. Unit officers will submit a written referral to mental health in addition to writing a WSR. The youth should be seen by mental health as soon as possible. Mental health, in conjunction with the SPO, will make the determination of when to reduce the frequency of welfare checks for youth in separation who are also on SLA, SLI-5, or SLI-10 statuses.

E. Additional Information:

1. A youth in separation and who is subject to five-minute welfare checks may be on the five-minute checks for a specified period or for the duration of the entire separation period.

2. Conversely, a youth in separation may have their status increased from SLI to SLI-5 or SLI-10 for behavior that occurs subsequent to the initial evaluation. Officers are to immediately notify the Sr.
JIO/Sr. DPO if the youth’s behavior changes. In these cases the youth’s status will be re-evaluated.
Attachment A

Classification Checklist

Name: ___________________________  DOB: _________  Age: _______  Date: _________

Gender:  □ Male    □ Female    □ Transgender    □ §707(b) WIC Offense    □ Return of warrant
          □ If transgender, identifies as: ___________________________  Pronouns: __________

Offense: __________________________________________________________________________

Co-offenders:  □ No    □ Yes: Names ________________________________  __________________________

Legal Status:  □ §602 Ward    □ §601 Ward    □ §790    □ §300 Dependent    □ Tri-Counties
              □ If 300 Dependent, Case Worker Name: ___________________________

Prior History: □ Previous 777(a) WIC    □ Previous probation grants

Prior Assultive Behavior: □ Detention facility    □ At home    □ Prior referral/Adjudication

Demeanor at time of intake: □ Anxious    □ Violent    □ Crying    □ Threatening
          □ Under the influence of drugs/alcohol    □ Uncooperative behavior

Gang affiliation: ________________  □ Member    □ Associate    □ Admission

Escape History: □ Camp    □ Juvenile Hall    □ Placement

Medical Needs: ______________________________________________________________________

Suicide: □ Past attempts (date: __________)    □ Current Ideations    □ Currently Suicidal

Self-Injury: □ History of self mutilation/cutting
                   □ Current wounds from self mutilation/cutting

Mental Health History: __________________________________________________________________

Mental Health Referral: □ Non-urgent MH Referral    □ Urgent MH Referral
          □ No follow up necessary

Housing Status: □ Security Status (S)    □ See Log Inactive (SLI)    □ ICE Hold
          □ Medical ISO □ Sex Offender (SOF)    □ Separation (830.5 WIC)    □ Active Escape Risk

Classifications below require Manager/SPO notification and explanation:
          □ Room Confinement Status (203.4(d) WIC)
          □ Maximum Security (MS)
          □ See Log Inactive 5 minute (SLI-5)  Manager/SPO Notified  Notified by / Date / Time
          □ See Log Active (SLA)

Reason: __________________________________________________________________________

Intake Officer: _______________________________
Attachment B

Room Confinement Status (RCS & MS)
Individualized Plan pursuant to 203.4(d) WIC

Youth Name: ____________________ Unit: ______________ Officer: ______________

Initial Reason for Room Confinement (include date and time):

Basis for Extension (include date and time):

Initial Reason for Maximum Security (include date and time):

Basis for Extension of MS (include date and time):

You have been assigned □ RCS □ MS beyond 4 hours because you continue to be considered a physical threat to other youth, the staff, and to the security of the Santa Maria Juvenile Hall. Your behavior status will be reviewed every four waking hours by the Sr. DPO or SPO.

To return to regular programming I, __________________________________________________ will:

□ Commit to Reaching Excellent Conduct by completing a reflective assignment with Officer____________________
□ Commit to and demonstrate I am willing to follow SMJH rules without hesitation
□ Meet with Mental Health or Medical Staff
□ Meet with the on duty Sr. DPO or SPO
□ Meet with my Deputy Probation Officer if available (conference call or skype)

As part of my reinstatement to regular programming I, ________________________________ commit to Reaching Excellent Conduct by:

- Remaining violence free
- Remaining contraband free
- Attending school and participating in my education
- Showing verbal respect to other youth and staff
- Not engaging in gang activity
- Not engaging in aggressive behavior

General Instructions during RCS/MS

- You will be showered alone unless otherwise directed by a SR JIO.
- You will be housed in a single room and not bunked with another youth.
- Unless your behavior has progressively improved, school instruction may take place in the “No Contact” room during RCS/MS.
- You will be offered the opportunity to do one (1) hour of large muscle activity during RCS/MS. If you refuse, it will be documented and you will not be asked again until the next day.

Youth’s Signature: ________________________________ Date: ______________

A copy will be given to the youth

Officer’s Signature: ________________________________ Date: ______________

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