

CENTRAL OHIO YOUTH CENTER

SECTION 2: Personnel

SUBJECT: Employee Criminal Records Checks

PROCEDURE NUMBER: 2-3PR

EFFECTIVE DATE: 12/1/06; 6/1/14; 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S):

RELATED PREA STANDARD(S): 317 5139-37-05

SUPERINTENDENT:

M. Jardon

DATE: 11/17/22

POLICY

The Center will conduct criminal background checks on all employees so that appropriate consideration can be given to any criminal convictions that may affect an employee's job performance and/or ability to work with juveniles.

PROCEDURE

- 1) The Superintendent or designee will request and evaluate a criminal records check from the Ohio Bureau of Criminal Identification (BCI) and the Federal Bureau of Investigation (FBI) for all potential employees at the Center's expense.
- 2) The criminal records check will be completed during the employee's probationary period, and continued employment is contingent upon information contained in the report.
- 3) All employees will be required to complete a criminal background records check at least every five years to maintain employment.

CENTRAL OHIO YOUTH CENTER

SECTION 2: Personnel

SUBJECT: Confidentiality Agreement

PROCEDURE NUMBER: 2-9PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): None

RELATED PREA STANDARD(S): 361

SUPERINTENDENT: *M. Jindow*

DATE: *11/17/22*

POLICY

The Center will protect the confidentiality of juveniles detained in the facility.

PROCEDURE

- 1) All employees of the Center will sign a *Confidentiality Agreement* to protect the identity of the juveniles in the facility.
- 2) All volunteers will sign a *Confidentiality Agreement* to protect the identity of the juveniles in the facility.
- 3) All visitors will sign the *Visitors Log* containing a statement of confidentiality before being permitted inside the facility.

CENTRAL OHIO YOUTH CENTER

SECTION 2: Personnel

SUBJECT: Employee-Resident Contact

PROCEDURE NUMBER: 2-10PR

EFFECTIVE DATE: 6/1/08; 6/1/14; 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S):

RELATED PREA STANDARD(S): 311, 315

SUPERINTENDENT: *M. J. Jordon*

DATE: 11/17/22

POLICY

Employees of the Center will maintain a professional relationship with residents during and after their commitment to the Center.

PROCEDURE

- 1) Employees will maintain a professional, impartial persona with residents.
- 2) Employees will not share personal information about themselves or other employees with residents.
- 3) Employees will have no physical contact with residents except to shake hands as a congratulatory gesture, or during the course of pat downs and restraints unless otherwise approved by an Administrator.
- 4) Employees of the opposite gender shall announce their presence when entering an area of the facility where residents are likely to be showering, performing bodily functions, or changing clothing.
- 5) Employees will have no contact including via the internet and/or social media accounts/websites with residents after they have been released from the Center without written permission from the committing court / placing agency.

CENTRAL OHIO YOUTH CENTER

SECTION 2: Personnel

SUBJECT: Employee Sexual Misconduct

PROCEDURE NUMBER: 2-18PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 5/21/20; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/1/14; 11/1/14; 11/1/15; 5/25/17; 5/13/20

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S):

RELATED PREA STANDARD(S): 311, 317, 331, 367, 376, 377

SUPERINTENDENT:

DATE:

POLICY

Sexual violence and misconduct in correctional facilities is a major problem that harms all aspects of institutional operations. Recognition of this factor is the central focus of the Prison Rape Elimination Act (PREA) of 2003.

The Center observes zero tolerance toward all forms of sexual abuse/assault/harassment and will educate both employees, volunteers, contractors (staff) and residents about sexual misconduct (See Addendum: Abuse-Related Definitions) and provide a process for staff and residents to report sexual misconduct.

PROCEDURE

- 1) Staff will receive pre-service and in-service training relevant to staff sexual misconduct with residents and/or other staff.
- 2) Any staff who suspects another staff is engaging in sexual misconduct will **immediately** report it to the Superintendent. This report may be verbal, written, and/or anonymous and will be kept strictly confidential.
- 3) The facility shall protect all residents and staff who report sexual abuse/assault/harassment or cooperate with sexual abuse/assault/harassment investigations from retaliation by other residents or staff.
- 4) The Superintendent will be the primary agent in monitoring retaliation. Using the Retaliation Monitoring Checklist, the Superintendent/designee will monitor multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
- 5) For at least 90 days following a report of sexual abuse/assault/harassment, the Superintendent/designee shall monitor using the Retaliation Monitoring Checklist the conduct or treatment of residents or staff who reported the sexual abuse and of residents who were

reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation.

- 6) Items the Superintendent/designee shall monitor include any resident disciplinary reports, or housing, program changes, or negative performance reviews or reassignments of staff. The Superintendent/designee shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the case of residents, such monitoring shall also include periodic status checks.
- 7) If any other individual who cooperates with an investigation expresses a fear of retaliation, the Superintendent/designee shall take appropriate measures to protect that individual against retaliation.
- 8) The facility's obligation to monitor shall terminate if the investigating agency determines that the allegation is unfounded.
- 9) Staff engaging in sexual misconduct will be subject to disciplinary action up to and including termination.
- 10) The Superintendent/designee may report suspected/alleged staff sexual misconduct to the Union County Sheriff's Office for criminal investigation and possible criminal prosecution.
- 11) Staff who engage in sexual abuse shall also be reported to relevant licensing bodies.
- 12) The Superintendent/designee shall provide information on substantiated allegations of sexual abuse or harassment involving former staff upon receiving a request from an institutional employer for whom such staff has applied to work.

CENTRAL OHIO YOUTH CENTER

SECTION 2: Personnel

SUBJECT: Sexual Harassment & Discrimination

PROCEDURE NUMBER: 2-23

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S):

RELATED PREA STANDARD(S): 311, 317, 322, 331, 332

SUPERINTENDENT:

DATE:

M. Jundon 11/17/22

POLICY

In keeping with the spirit and intent of federal and state law, the Center strives to provide a comfortable work environment. The Center is committed to a workplace that is free of harassment and discrimination based on race, color, sexual orientation, religion, age, gender, national origin, disability, military status, and/or any other protected status. This policy extends to vendors, customers, visitors, and others who enter the Center.

DEFINITIONS

Refer to Procedure Number 8-5 for definitions of PREA terms.

PROCEDURE

- 1) All Center employees are required to adhere to the provisions of this policy.
- 2) Offensive or harassing behaviors against any employee will not be tolerated.
- 3) Offensive conduct or harassment that is of a sexual nature, or based on race, color, sexual orientation, religion, age, gender, national origin, disability, and/or any protected status is strictly prohibited. This includes but is not limited to the following:
 - a) physical actions, written or spoken language, and/or graphic communications;
 - b) any type of physical contact when the action is unwelcome/unwanted by the recipient;
 - c) expectations, requests, demands, and/or pressure for sexual favors; and/or
 - d) offensive slurs, jokes, posters, cartoons, gestures, etc.
- 4) Any such offensive conduct will be considered a prohibited form of harassment when any or all of the following are true:
 - a) there is a promise or implied promise of preferential treatment or negative consequence regarding employment decisions or status;
 - b) such conduct has the effect of creating an intimidating and/or hostile/offensive work environment, or unreasonably interferes with a person's work performance; and/or
 - c) a third party is offended by the sexual conduct or communications of others.

- 5) Harassment is considered a form of employee misconduct. Disciplinary action up to and including termination will be taken against any employee engaging in this type of behavior.
- 6) Any supervisor or manager, who has knowledge of such behavior and fails to take action to end it, is subject to disciplinary action up to and including termination.
- 7) Any employee who believes he/she is being discriminated against due to harassing behavior by another employee (e.g. other employees being given special treatment in exchange for sexual favors) should report it.
- 8) Any employee who believes he/she is being sexually harassed and/or discriminated against should **immediately** report it.
- 9) Complaints of sexual harassment/discrimination should be made to a supervisor with whom the reporting employee feels comfortable (i.e., Shift Supervisor, Business Administrator, Clinical Administrator, Education Administer, Deputy Operations Administrator, Superintendent).
- 10) All complaints will remain as confidential as possible.
- 11) Complaints made in good faith will not be held against an employee.
- 12) Under no circumstances will an employee be penalized / punished for reporting sexual harassment/discrimination.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: New Employee Orientation

PROCEDURE NUMBER: 3-1PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 2/24/08; 12/1/10; 1/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARD(S): 331, 335

SUPERINTENDENT: *M. Jandron*

DATE: 11/17/22

POLICY

The Center will provide adequate and appropriate orientation, pre-service and in-service training for all employees during their first year of service.

PROCEDURE

- 1) New employees will receive forty (40) hours of orientation and pre-service training during their first week of employment. New employee orientation and pre-service topics will include the following:
 - a) Reading the Standard Operating Procedures (SOP), Health Care Services and Union County Personnel Policy Manuals;
 - b) First aid/CPR/AED certification;
 - c) Verbal de-escalation;
 - d) Basic and advanced* unarmed self-defense (USD);
 - e) Mandatory reporting of child abuse;
 - f) Prison Rape Elimination Act (PREA);
 - g) Working conditions and related regulations;
 - h) Rights and responsibilities of juveniles; and
 - i) Overview of the juvenile justice and correctional systems.

* Direct-care staff only

- 2) New employees will receive forty (40) hours of in-service training prior to assuming independent responsibility for their work assignment to include but not be limited to the following:
 - a) Fire, safety and emergency procedures;
 - b) Emergency response training (ERT);
 - c) Cognitive-behavioral training;
 - d) Staff-resident boundaries/sexual misconduct;
 - e) Trauma-informed care; adolescent development
 - f) Preparatory instruction related to the employee's specific position; and
 - g) Job shadowing.

- 3) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center. Failure to attend required training sessions may result in disciplinary action as outlined in the *Union County Personnel Policy Manual Section 8.4A*.
- 4) Overtime for training purposes must be **pre-approved** by the Department Administrator.
- 5) Pre-service training is considered work time and is compensable at the employee's normal hourly rate of pay.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: In-Service-Administrators

PROCEDURE NUMBER: 3-2PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 1/1/14; 11/1/14; 11/1/15; 5/25/17

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARDS(S): 331, 334, 335

SUPERINTENDENT: *M. Jordon*

DATE: 11/17/22

POLICY

The Center will provide adequate and appropriate annual in-service training for all administrative staff.

PROCEDURE

In addition to orientation training (see Procedure 3-1 **New Employee Orientation**), administrative staff will receive sixteen (16) hours of training each subsequent year thereafter. This training will be relevant to the specific roles and responsibilities of their respective positions.

Administrative staff includes the following job classifications: Superintendent, Deputy Operations Administrator, Business Administrator, Clinical Administrator, and Education Administrator.

- 1) The following annual in-service training is **mandatory**:
 - a) Unarmed self defense (USD) review;
 - b) Fire, safety and emergency procedures review;
 - c) Prison Rape Elimination Act (PREA)-Investigations (one time only);
 - d) PREA-Behavioral Health Care: Clinical Administrator (one time only)
 - e) Policy & Procedure Manual review; and
 - f) First aid/CPR/AED recertification (every two years);
- 2) In addition, annual in-service training will be job-related and may include but not be limited to the following:
 - a) Staff disciplinary process;
 - b) Budgeting;
 - c) Strategic planning;
 - d) Managing a diverse workforce;
 - e) Facility operations; and
 - f) General management-related subjects.
- 3) In addition to in-house training, training may occur during staff meetings or may be accomplished through the use of field trips, video presentations, special presentations, and other activities approved by the Superintendent.

- 4) Outside training opportunities will be made available to Administrators contingent upon budget constraints.
- 5) Employees must submit a *Request for Off-Site Training* form at least two weeks in advance for training outside the Center.
- 6) Overtime for training purposes must be pre-approved by the Superintendent.
- 7) Employees must submit a completed *Training Credit Hours Form* to the Business Administrator for all on-site and off-site training.
- 8) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center.
- 9) Failure to attend required training sessions may result in disciplinary action as outlined in the *Union County Personnel Policy Manual Section 8.4A*.
- 10) In-service training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 11) Meals at off-site training sessions will not be reimbursed unless the training requires the employee to stay overnight.
- 12) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.
- 13) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is shorter.
- 14) Employees must submit a *Mileage Form and Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: In-Service-Professional Staff

PROCEDURE NUMBER: 3-3PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 1/1/14; 11/1/14; 11/1/15; 5/25/17

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARD(S): 331, 334, 335

SUPERINTENDENT: *M. Jardon*

DATE: 11/17/22

POLICY

The Center will provide adequate and appropriate annual in-service training for all professional staff. Professional staff must meet the statutory requirements specific to their licensure or certification.

DEFINITION

Professional Staff – for purposes of this procedure, professional staff refers to those positions that require licensure or certification (i.e. social worker, nurse, teacher, teacher's aide).

PROCEDURE

In addition to orientation training (see Procedure 3-1 **New Employee Orientation**), professional staff will receive an additional sixteen (16) hours of training each subsequent year thereafter. This training will be relevant to the specific roles and responsibilities of their respective positions.

Professional staff includes the following job classifications: Clinical Services Manager, Psychotherapist, Chief Safety and Security Manager, Health Care Coordinator, Juvenile Treatment Specialist, Group Leader and Teacher.

- 1) The following annual in-service training is **mandatory**:
 - a) Unarmed self defense (USD) review;
 - b) Emergency response training (ERT) review;
 - c) Fire, safety and emergency procedures review;
 - d) Policy & Procedure Manual review;
 - e) Prison Rape Elimination Act (PREA); and
 - f) PREA-Behavioral Health Care: Clinical Services Manager & Psychotherapist (one time only)
 - g) PREA-Investigations: Chief Safety & Security Manager (one time only)
 - h) PREA-Medical Health Care: Health Care Coordinator (one time only)
 - i) First Aid/CPR/AED recertification (every two years).

- 2) In addition, annual in-service training will be job related and may include but not be limited to the following:
 - a) Cognitive-behavioral therapy.
 - b) Group facilitators' training;
 - c) Trauma-informed care; adolescent development and
 - d) Treatment of juveniles with mental health disorders.
- 3) In addition to in-house training sessions, training may occur during staff meetings or may be accomplished through the use of field trips, video presentations, special presentations, and other activities approved by the Superintendent.
- 4) Outside training opportunities will be made available to all clinical staff contingent upon staffing levels and budget constraints.
- 5) Employees must submit a *Request for Off-Site Training* form at least two weeks in advance for training outside the Center.
- 6) Overtime for training purposes must be pre-approved by the Department Administrator.
- 7) Employees must submit a *Training Credit Hours Form* to the Business Administrator for all on-site and off-site training.
- 8) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center.
- 9) Failure to attend required training sessions may result in disciplinary action as outlined in *the Union County Personnel Policy Manual Section 8.4A*.
- 10) In-service training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 11) Meals at off-site training will not be reimbursed unless the training requires the employee to stay overnight.
- 12) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.
- 13) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is shorter.
- 14) Employees must submit a *Mileage Form and Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: In-Service-Support Staff

PROCEDURE NUMBER: 3-4PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 1/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARD(S): 331, 335

SUPERINTENDENT: *M. Jundlow*

DATE: *11/17/22*

POLICY

The Center will provide adequate and appropriate annual in-service training for all support staff.

PROCEDURE

In addition to pre-service training (see Procedure 3-1 **New Employee Orientation**), support staff will receive sixteen (16) hours of training each subsequent year thereafter. This training will be relevant to the specific roles and responsibilities of their respective positions.

Operational support staff includes the following job classifications: Food Service Assistant, Cook, Maintenance Supervisor, and Intake Officer.

- 1) The following annual in-service training is **mandatory**:
 - a) Unarmed self defense (USD) review;
 - b) Emergency response training (ERT) review;
 - c) Fire, safety and emergency procedures review;
 - d) Prison Rape Elimination Act (PREA);
 - e) Policy & Procedure Manual review; and
 - f) First/CPR/AED recertification (every two years).
- 2) In addition, annual in-service training will be job-related and may include but not be limited to the following:
 - a) Security procedures;
 - b) Technical training specific to the position;
 - c) Juvenile rules and regulations;
 - d) Rights and responsibilities of juveniles; and
 - e) Communication skills.
- 3) In addition to in-house training sessions, training may occur during staff meetings or may be accomplished through the use of field trips, video presentations, special presentations, and other activities approved by the Superintendent.
- 4) Outside training opportunities will be made available to all staff contingent upon staffing levels and budget constraints.

- 5) Employees must submit a *Request for Off-Site Training* form at least two weeks in advance for training outside the Center.
- 6) Overtime for training purposes must be **pre-approved** by the Department Administrator.
- 7) Employees must submit a *Training Credit Hours Form* to the Business Administrator for all on-site and off-site training.
- 8) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center.
- 9) Failure to attend required training sessions may result in disciplinary action as outlined in *the Union County Personnel Policy Manual Section 8.4A*.
- 10) In-service training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 11) Meals at off-site training will **not** be reimbursed unless the training requires the employee to stay overnight.
- 12) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.
- 13) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is **shorter**.
- 14) Employees must submit a *Mileage Form and Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: In-Service-Supervisory Staff

PROCEDURE NUMBER: 3-5PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 1/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARD(S): 331, 335

SUPERINTENDENT: *M. Jandron*

DATE: 11/17/22

POLICY

The Center will provide adequate and appropriate annual in-service training for all managerial and supervisory staff.

PROCEDURE

Managerial/Supervisory staff includes the following job classifications: Chief Safety and Security Manager, Food Service Manager, Intake Manager, Shift Supervisor and Assistant Shift Supervisor. The training will be relevant to the specific roles and responsibilities of their respective positions.

- 1) In addition to pre-service training (see Procedure 3-1 **New Employee Orientation**), managerial and supervisory staff will receive an additional **forty (40)** hours of training each subsequent year thereafter including but not be limited to:
 - a) Roles and responsibilities;
 - b) Fundamental skills for supervisors;
 - c) Relevant Ohio Administrative Rules;
 - d) Following policies and procedures;
 - e) Disciplinary process and actions;
 - f) Scheduling;
 - g) Dealing with difficult employees;
 - h) Report writing
 - i) Effective communication skills; and
 - j) Leadership development.

- 2) Managerial and supervisor staff will receive **forty (40)** hours of in-service training each year. The following annual in-service training is **mandatory** for managerial and supervisory staff:
 - a) Basic and advanced unarmed self defense (USD) review;
 - b) Emergency response training (ERT) review;
 - c) Fire, safety and emergency procedures review;
 - d) Policy & Procedure Manual review;
 - e) Trauma-informed care*; adolescent development
 - f) Prison Rape Elimination Act (PREA);

- g) First aid/CPR/AED (every two years);
- h) Administering prescription and non-prescription medications*;
- i) Using the Epi-Pen*; and
- j) Security procedures and restraints*.

* Shift Supervisors and Assistant Shift Supervisors ONLY.

- 3) Additional annual in-service training opportunities will be job-related and may include but not be limited to the following:
 - a) Juvenile rules and regulations;
 - b) Rights and responsibilities of juveniles;
 - c) Interpersonal relations/boundaries with subordinates;
 - d) Social/cultural lifestyles of the juvenile population;
 - e) Effective supervisory practices; and
 - f) Effective communication skills.
- 4) In addition to in-house training sessions, training may occur during staff meetings or may be accomplished through the use of field trips, video presentations, special presentations, and other activities approved by the Superintendent.
- 5) Outside training opportunities will be made available to all staff contingent upon staffing levels and budget constraints.
- 6) Employees must submit a *Request for Off-Site Training* form at least two weeks in advance for training outside the Center.
- 7) Overtime for training purposes must be **pre-approved** by the Department Administrator.
- 8) Employees must submit a *Training Credit Hours Form* to the Business Administrator for all on-site and off-site training.
- 9) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center.
- 10) Failure to attend required training sessions may result in disciplinary action as outlined in *the Union County Personnel Policy Manual Section 8.4A*.
- 11) In-service training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 12) Employees will **not** be reimbursed for meals unless the training requires the employee to stay overnight.
- 13) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.
- 14) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is **shorter**.
- 15) Employees must submit a *Mileage Form* and *Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: In-Service –Juvenile Corrections Officers

PROCEDURE NUMBER: 3-6PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 1/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARDS(S): 331, 335

SUPERINTENDENT: *M. Jandow*

DATE: 11/17/22

POLICY

The Center will provide adequate and appropriate annual in-service training for all Juvenile Corrections Officers.

PROCEDURE

In addition to orientation and pre-service training (see Procedure 3-1 **New Employees – Orientation, Pre-Service & In-Service**), Juvenile Corrections Officers will receive forty (40) hours of training each subsequent year thereafter.

Juvenile Corrections Officers includes the following job classifications: Juvenile Corrections Officer I and Juvenile Corrections Officer II and Juvenile Treatment Specialist.

- 1) The following annual in-service training is **mandatory** for detention officers and will include but not be limited to:
 - a) First aid/CPR/AED recertification (every two years);
 - b) Basic and advanced unarmed self defense (USD) review;
 - c) Emergency response training (ERT) review;
 - d) Fire, safety and emergency procedures review;
 - e) Policy & Procedure Manual review;
 - f) Security procedures and restraints;
 - g) Prison Rape Elimination Act (PREA); and
 - h) Trauma-informed care; adolescent development
- 2) Annual in-service training will be job-related and may include the following: supervision of juveniles, juvenile rules and regulations, rights and responsibilities of juveniles, interpersonal relations, social/cultural lifestyles of the juvenile population, communication skills.
- 3) In addition to in-house training sessions, training may occur during staff meetings or may be accomplished through the use of field trips, video presentations, special presentations, and other activities approved by the Superintendent.

- 4) Outside training opportunities will be made available to all staff contingent upon staffing levels and budget constraints.
- 5) Employees must submit a *Request for Off-Site Training* form **at least two weeks in advance** for training outside the Center.
- 6) Overtime for training purposes must be **pre-approved** by the Department Administrator.
- 7) Employees must submit a *Training Credit Hours Form* to the Business Manager for all on-site and off-site training.
- 8) Attendance at scheduled staff meetings and training sessions is a requirement of continued employment with the Center.
- 9) Failure to attend required training sessions may result in disciplinary action as outlined in *the Union County Personnel Policy Manual Section 8.4A*.
- 10) In-service training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 11) Employees will **not** be reimbursed for meals at training unless the training requires the employee to stay overnight.
- 12) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.
- 13) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is **shorter**.
- 14) Employees must submit a *Mileage Form and Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 3: Staff Training and Development

SUBJECT: Off-Site Training

PROCEDURE NUMBER: 3-7PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 2/24/08; 1/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-06

RELATED PREA STANDARD(S): 331, 335

SUPERINTENDENT:

M. Jordon

DATE: 11/17/22

POLICY

Off-site training opportunities will be job specific and made available to all staff contingent upon staffing levels, licensure requirements, and budget constraints.

PROCEDURE

- 1) Preference for off-site training will be given to licensed/certified staff that needs CEUs or CLEs in order to maintain licensure/certification.
- 2) Staff will submit a ***Request for Off-Site Training Approval*** form at least two weeks in advance to the appropriate Department Head prior to registering for off-site training sessions.
- 3) If approved by the Department Head, the ***Request for Off-Site Training Approval*** form will be submitted to the Superintendent for approval.
- 4) If approved by the Superintendent, the Request for ***Off-Site Training Approval*** form will be submitted to the Union County Commissioners for approval.
- 5) Overtime for off-site training sessions must be **pre-approved** by the Department Administrator.
- 5) Employees must submit a ***Training Credit Hours Form*** to the Business Administrator for all off-site training.
- 6) Failure to attend off-site training sessions that have been paid for by the Center may result in disciplinary action as outlined in ***the Union County Personnel Policy Manual Section 8.4A.***
- 7) Off-site training time is considered work time and is compensable at the employee's normal hourly rate of pay.
- 8) Employees are expected to demonstrate professionalism when attending off-site training sessions.
- 9) Employees are expected to dress either in uniform or business casual attire at off-site training sessions.
- 10) Meals for off-site training will **not** be reimbursed unless the training requires the employee to stay overnight.
- 11) The Center will reimburse employees for mileage for off-site training at the standard Union County rate.

- 12) Mileage will be reimbursed from the Center to the training site or from the employee's home to the training site, whichever is **shorter**.
- 13) Employees must submit a *Mileage Form* and *Request for Reimbursement* in order to be reimbursed.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Staffing Levels

PROCEDURE NUMBER: 5-1PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 8/8/13; 3/1/14; 11/1/14; 11/1/15; 5/30/17

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-05

RELATED PREA STANDARD: 313.318

SUPERINTENDENT: *M. Jardon*

DATE: 11/17/22

POLICY

The Center will ensure a safe and secure environment for both residents and staff by maintaining appropriate staffing levels at all times. In order to accomplish this, staff must report for duty physically and mentally capable to perform the essential functions of their respective positions.

DEFINITIONS

Essential personnel – ALL COYC employees are considered “essential personnel.” Minimum staffing levels must be maintained at all times.

Weather emergency – When the sheriff of a county declares road conditions are hazardous based on a scale of Level 1 (drive with caution), Level 2 (only drive if absolutely necessary, or Level 3 (only emergency vehicles and essential personnel permitted on roads).

PROCEDURE

- 1) The Center has three living units that are segregated by gender.
- 2) Minimum staffing levels are:

1 st shift	5 = ratio of 1 staff to 8 youth
2 nd shift	5 = ratio of 1 staff to 8 youth
3 rd shift	4 = ratio of 1 staff to 10 youth
- 3) The Shift Supervisor has the discretion to increase staffing levels, including mandating additional staff, based on the day-to-day operational needs and safety and security of the facility (i.e. population count, suicide watch/precaution, significant mental health issues, emergency situations, etc.).
- 4) Non-direct care staff (i.e. Clinical, Educational, Food Service, and Intake) may be included to meet minimum staffing levels in emergency situations in accordance with the bargaining unit contract.

- 5) During weather emergencies, all employees are expected to report for duty as scheduled and may be mandated to report for duty unless grave circumstances prohibit their ability to travel. Employees are strongly encouraged to have their COYC identification badges with them while traveling to and from the facility during Level 3 snow emergencies.
- 6) At least one female and one male direct care staff will be on duty at all times.
- 7) Staff schedules will be posted no later than Thursday for the next workweek.
- 8) Each year, in consultation with the PREA Coordinator, COYC Administration shall review staffing levels as they relate to the protection of residents from sexual abuse within the facility. This review shall take into consideration:
 - a) The facility's current staffing plan and prevailing staffing patterns
 - b) The facility's deployment of video monitoring systems and other monitoring technologies
 - c) The resources the facility has available to commit to ensure adherence to the staffing plan
 - d) Generally accepted juvenile detention and correctional practices
 - e) Any judicial findings of inadequacy
 - f) Any findings of inadequacy from federal investigative agencies
 - g) Any findings of inadequacy from internal or external oversight bodies
 - h) All components of the facility's physical plant (including blind spots or areas where staff or residents may be isolated)
 - i) The composition of the resident population
 - j) The number and placement of supervisory staff
 - k) Institution programs occurring on a particular shift
 - l) Any applicable state or local laws, regulations, or standards
 - m) The prevalence of substantiated and unsubstantiated incidents of sexual abuse
 - n) Any other relevant factors

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Significant Incidents

PROCEDURE NUMBER: 5-3PR

**EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 5/21/20;
11/12/20; 11/18/21; 11/17/22**

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 3/1/14; 11/1/14; 11/1/15; 5/13/20

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD: 386

SUPERINTENDENT:

M. Jardon

DATE: 11/17/22

POLICY

All significant and/or unusual incidents will be recorded and reported to the appropriate parties using the *Significant Incident Report* form.

PROCEDURE

1. A *Significant Incident Report* must be completed for all significant and/or unusual incidents at the Center. Examples of significant incidents include, but are not limited to, the following: use of physical intervention, use of restraints, suicide threat/gesture/attempt, escape/attempted escape, alleged abuse, lockdown, accident/injury-resident, accident/injury-staff, emergency medical trip, and PREA related incidents.
2. It is the responsibility of the staff member involved in the incident to complete the *Significant Incident Report* as soon as possible following the incident but no later than the end of the shift.
3. Any supporting documentation (suicide risk assessment, emergency room admission form, discharge summary, action-response report, etc.) will be attached to the *Significant Incident Report*.
4. The Shift Supervisor will review the *Report* for completeness and accuracy, take any necessary follow up action(s), sign the *Report*, and forward it to the Deputy Operations Administrator for review and signature.
5. After review and signature, the Deputy Operations Administrator will forward the *Significant Incident Report* to the Superintendent for review, signature, and follow-up action(s).
6. The Superintendent/designee will determine which incidents to investigate. Once an incident is under investigation, staff will not discuss the incident with residents or other staff.

7. All **Significant Incident Reports** involving residents of the Center will be faxed to the committing court/placing agency no later than noon the following business day.
8. The original **Significant Incident Report** and any supporting documentation will be placed in the resident's case file.
9. A copy of the **Significant Incident Report** will be filed in the binder in the Control Center.
10. The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Such review shall occur within 30 days of the conclusion of the investigation. The review team shall be facilitated by the PREA Coordinator and include at least one upper-level management officials, one line supervisor, one investigator, one JCO, one medical or mental health practitioner and any other relevant staff. The review team shall:
 - a) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
 - b) Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility;
 - c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
 - d) Assess the adequacy of staffing levels in that area during different shifts;
 - e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
 - f) The PREA Coordinator shall prepare a report of the review team's findings, including but not necessarily limited to determinations made pursuant to the above and any recommendations for improvement and submit such report to the Superintendent and PREA compliance manager.

The Superintendent shall implement the recommendations for improvement, or shall document its reasons for not doing so.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Radio Communications

PROCEDURE NUMBER: 5-4

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 2/24/08; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-11

SUPERINTENDENT:

M. Zandon

DATE:

11/17/22

POLICY

The Center will provide all staff with two-way radios to communicate during emergency and non-emergency situations, and establish a system of communication that maintains security while protecting confidential information.

PROCEDURE

- 1) The Center will provide sufficient two-way radios for each staff member on duty.
- 2) Shift Supervisors are responsible for issuing radios to the direct-care staff on their respective shifts and recording radio numbers on the *Equipment Sign-Out Log*.
- 3) A "signal" system will be used for routine and emergency communications over radios (see list of signals on following page). These signals will be posted in the Control Center.
- 4) The Shift Supervisor will conduct radio checks at least once during each shift. He/She will call for a Signal 1 (radio check code), and staff will reply in the order of the issued radio number. After all radios have been checked, the Shift Supervisor will clear the Signal 1.
- 5) Radios will be carried on staff's person. Radios will **never** be left unattended or placed where residents can access them.
- 6) First and last names will **not** be communicated over the radio. Staff will be referred to as Officer Jones, Mr. Smith, or Ms. Brown.
- 7) Residents will be referred to as Youth Doe or Youth J. Doe.
- 8) Only those communications essential to the operation of the Center will be relayed over the radio. All communications will be professional in both content and language.

Radio Communication Signals

Signal	Situation
1	Radio check
2	What is your location?
3	Intake
4	Release
5	Escort
6	Transport out of building
7	Cannot answer over the radio
8	In building (on duty)
9	Out of building (on duty)
10	Assistance needed - non-emergency
11	Assistance needed - emergency
12	Unlock door
13	Secure door
14	Fire alarm
15	Stop radio communications
16	Bomb threat
17	Fight
18	Hostage/group disturbance
19	Evacuation
20	Officer in Trouble
21	Outside Gates Unsecured
22	Tornado/Tornado drill

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Facility Searches & Inspections-Inside
PROCEDURE NUMBER: 5-5PR
EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 5/28/03; 10/1/06; 2/24/08; 11/1/15
NUMBER OF PAGES: 3
RELATED ODYS STANDARD(S): 5139-37-11
RELATED PREA STANDARD: 313
SUPERINTENDENT: *M. Jordon* DATE: *11/17/22*

POLICY

The Center will maintain the safety and security of the facility, residents and staff by conducting thorough and systematic inspections of every area in the building accessible to residents. Staff will receive pre-service and in-service training relevant to area search procedures.

DEFINITIONS

Dangerous contraband – Any item that may cause harm to property and/or persons. Examples of dangerous contraband include, but are not limited to sharpened eating utensils and toothbrushes; pencils and pens; razors; matches and cigarette lighters; nails and screws; pieces of metal, concrete, and tile; stones; etc.

Non-dangerous contraband – Any non-harmful item not permitted in residents' sleeping rooms. Examples of non-dangerous contraband include, but are not limited to, the following: broom straws; papers; puzzle pieces; etc.

PROCEDURE

- 1) Shift Supervisors will initiate routine, random area searches to locate and seize any contraband. These searches will be recorded in the Control Center log. Any contraband found will also be noted in the log.
- 2) Protective gloves will be worn during all searches.
- 3) Sleeping room searches will be conducted when residents are off the units.
- 4) All residents are permitted to have a copy of the *Resident Handbook* in their sleeping rooms.
- 5) Other items permitted in sleeping rooms depend on the resident's Level (refer to the *Resident Handbook*.)
- 6) Sleeping room searches will include the following:

- a) Remove all blankets and linens and examine them closely for contraband hidden in folds and/or hems.
 - b) Examine mattresses for contraband hidden in rips, tears, and/or holes.
 - c) Inspect the inside and underside of storage trays, commodes and sinks.
 - d) Beds will be inspected for contraband hidden in holes or cracks, and on the underside of storage cubicles.
 - e) Examine floor drains and ventilation grills for evidence of tampering as well as hidden contraband.
 - f) Inspect ledges and around inside doorframes. Also, check door lock plates for missing screws.
 - g) Residents will be given an opportunity to remake their beds after the search is completed and prior to their bedtimes.
- 7) **Living unit** searches will include the following:
- a) Inspect around outside doorframes for contraband hidden in cracks or holes.
 - b) Inspect shower stalls and around soap dispensers.
 - c) Examine the underside of sinks.
 - d) Examine mirrors for missing screws, damage, or contraband hidden behind them.
 - e) Examine the camera mount, underside of camera, and camera lens.
- 8) **Dayroom, classroom, RTLC, Snow room and dining room searches** will include the following:
- a) Inspect the undersides of tables, stools, desks, counters, and chairs.
 - b) Inspect around and under drinking fountains and commodes.
 - c) Examine carpet for holes, tears, and unraveled areas where contraband might be hidden.
 - d) Inspect around TV mounts.
 - e) Inspect in and around Grievance Boxes.
 - f) Remove books from bookshelves and randomly flip through books and check game boxes.
 - g) Dining rooms will be **thoroughly** searched after visitation.
- 9) **Interview rooms/holding cells** will be inspected after each use.
- 10) The **Intake lobby** will be periodically searched, including under chairs and countertop.
- 11) The **gym** will be periodically searched including around the volleyball hookup areas.
- 12) Any dangerous contraband found anywhere in the facility will **immediately** be reported to the Shift Supervisor. The Shift Supervisor will determine if the Union County Sheriff's Office will be notified.
- 13) A **Significant Incident Report** will be completed if necessary.
- 14) Residents will receive a **Youth Behavioral Incident Report (YBIR)** for dangerous contraband, **and** an Internal Disciplinary Committee (IDC) Hearing will be requested. If the contraband item has not been submitted to the Sheriff's Office, it will be attached to the **YBIR**.

- 15) Residents will receive a **YBIR** for non-dangerous contraband with an appropriate disciplinary consequence. Non-dangerous contraband items will be attached to the **YBIR** if practical, or disposed of appropriately.
- 15) This procedure will be reviewed by the Center's legal counsel to ensure its compliance with state and federal rules regarding searches.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Facility Searches & Inspections-Outside

PROCEDURE NUMBER: 5-6PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 3/2/08; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD: 313

SUPERINTENDENT: *M. Jandow*

DATE: *11/17/22*

POLICY

The Center will ensure the safety and security of the facility, its residents, and/or its staff by conducting thorough and systematic inspections of the outside recreation area. Staff will receive pre-service and in-service training relevant to outside recreation area inspection procedures.

DEFINITIONS

Dangerous contraband – Any item that may cause harm to property and/or persons. Examples of dangerous contraband include, but are not limited to: sharpened eating utensils and toothbrushes; razors; matches and cigarette lighters; nails and screws; pieces of metal, concrete, and tile; stones; etc.

Non-dangerous contraband – Any non-harmful item not permitted in residents' sleeping rooms. Examples of non-dangerous contraband include, but are not limited to, the following: broom straws; papers; puzzle pieces; etc.

PROCEDURE

- 1) Shift Supervisors will initiate inspections of the recreation area prior to outside recreation activities in order to locate and seize any contraband. These searches will be recorded in the Control Center log. Any contraband found will also be noted in the log.
- 2) **Fences** will be examined for evidence of tampering, and holes in the fence itself or in the ground under the fence.
- 3) Areas directly **inside fences** will be inspected for contraband that may be stored there, and **outside fences** for contraband that may have been thrown or left there.
- 4) All **gates** will be inspected to ensure locks are operational and secure.
- 5) The **blacktop** area will be inspected for loose rocks/gravel and other contraband. The basketball pole and backboard will also be inspected.

- 6) Any dangerous contraband found anywhere in the facility will **immediately** be reported to the Shift Supervisor. The Shift Supervisor will determine if the Union County Sheriff's Office will be notified.
- 7) Residents will receive a **Youth Behavioral Incident Report (YBIR)** for dangerous contraband, **and** an Internal Disciplinary Committee (IDC) Hearing will be requested. If the contraband item has not been submitted to the Sheriff's Office, it will be attached to the **YBIR**.
- 8) Residents will receive a **YBIR** for non-dangerous contraband with an appropriate disciplinary consequence. Non-dangerous contraband items will be attached to the **YBIR** if practical, or disposed of appropriately.
- 9) The Shift Supervisor will complete a **Significant Incident Report** if needed.
- 10) This procedure will be reviewed by the Center's legal counsel to ensure its compliance with state and federal rules regarding searches.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Resident Searches-Wand and Pat Down

PROCEDURE NUMBER: 5-7PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD: 315

SUPERINTENDENT: *M. Jardon*

DATE: 11/17/22

POLICY

The Center will ensure the safety and security of the facility, its residents, and its staff by conducting wand and pat down searches of residents. Staff will receive pre-service and in-service training relevant to resident wand and pat down search procedures including cross-gender searches.

PROCEDURE

- 1) **Wand** searches will be conducted as follows:
 - a) Staff will wear protective gloves when conducting wand searches.
 - b) The resident will be instructed to turn over any articles on their person and turn their pockets and cuffs inside out.
 - c) The resident will face the wall, with feet shoulder width apart and toes pointed outward. The resident will have his/her arms behind back, palms together, interlock fingers, push palms out to staff.
 - d) Hold the wand and pass it as close as possible (no more than 1 inch) over the resident's entire body.
 - e) The wand can come into contact with the resident's body if necessary.
 - f) Start wanding at the resident's head, and continue along his/her body to the soles of his/her feet.
 - g) When the wand detects a metal object, it will vibrate.
 - h) The metal object will be carefully removed, and placed out of the resident's reach.
 - i) The wand can be used to lift objects out of the resident's pockets if necessary.

- 2) **Pat down** searches will be conducted by female staff on female residents and by male staff on male residents, except in exigent circumstances, as follows:
 - a) Staff will wear protective gloves when conducting pat down searches.
 - b) The resident will be instructed to turn over any articles on their person and turn their pockets and cuffs inside out.
 - c) The resident will face the wall, with feet shoulder width apart and toes pointed outward. The resident will have his/her arms behind back, palms together, interlock fingers, push palms out to staff.

- d) Gain control of resident by grasping the interlocked hands at "pinkie finger" location and slightly rolling hands back. Place left foot between resident's legs and pat down resident's right side. Place right foot between resident's legs and pat down resident's left side.
 - e) Begin pat down on one side of the resident, checking shirt collar, sleeves, shoulders, and underarms. For females, check bra and under breast area.
 - f) Tuck thumb in waistband and starting from zipper, slide it all the way around waist. Use a circular motion around calf and bicep areas.
 - g) Check outside legs to ankles and inside up to groin area.
 - h) Untie shoes, step on back of shoes and have resident step out of shoes. Kick shoes out of the way.
 - i) The resident will be instructed to face the staff. Check hair, ears, nose, and mouth, including under tongue. Have the resident open his/her mouth wide and run tongue around the roof and gums.
 - j) Inspect the inside and outside of the shoes, including under the foot cushion.
 - k) Have resident take off socks and turn inside out. Inspect socks.
- 3) Should exigent circumstances warrant such, staff will conduct cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner and in the least intrusive manner possible, consistent with safety and security needs.
 - 4) As part of the intake process, residents will be wanded and patted down **prior** to being escorted to the living unit for a strip search.
 - 5) Residents will be wanded and patted down **immediately** upon return from **any** outside trip prior to being escorted to the living unit for a strip search.
 - 6) Residents will be wanded and patted down **immediately** following any visits, meetings, and/or interviews conducted in the Center's interview rooms prior to being escorted to the living units/program areas.
 - 7) The facility shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.
 - 8) Any dangerous contraband found on residents will **immediately** be reported to the Shift Supervisor. The Shift Supervisor will determine if the Union County Sheriff's Office will be notified.
 - 9) Residents will receive a *Youth Behavioral Incident Report (YBIR)* for dangerous contraband, **and** an Internal Disciplinary Committee (IDC) Hearing will be requested. If the contraband item has not been submitted to the Sheriff's Office, it will be attached to the *YBR*.
 - 10) Residents will receive a *YBIR* for non-dangerous contraband with an appropriate disciplinary consequence. Non-dangerous contraband items will be attached to the *YBIR* if practical, or disposed of appropriately.

This procedure will be reviewed by the Center's legal counsel to ensure its compliance with state and federal rules regarding searches.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Resident Searches-Strip

PROCEDURE NUMBER: 5-8PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 4/1/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 3

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD: 313

SUPERINTENDENT:

M. Jardon

DATE:

11/17/22

POLICY

The Center will ensure the safety and security of the facility, its residents, and its staff by conducting strip searches of residents as appropriate. The Center will use efficient strip search techniques to: deter residents from fabricating, introducing, conveying, or concealing contraband; discover breaches in security; and identify potentially dangerous health conditions. Staff will receive pre-service and in-service training relevant to resident strip search procedures including cross-gender searches.

DEFINITIONS

Strip Search – An inspection of the genitalia, buttocks, breasts, or undergarments of a person that is preceded by the removal or rearrangement of some or all of the person's clothing that directly covers the person's genitalia, buttocks, breasts, or undergarments.

Dangerous contraband – Any item that may cause harm to property and/or persons. Examples of dangerous contraband include, but are not limited to: razors; alcohol; drugs; money; jewelry; matches and cigarette lighters; nails and screws; pieces of metal, concrete, and tile; stones; etc.

Non-dangerous contraband – Any non-harmful item not permitted in the Center. Examples of non-dangerous contraband include, but are not limited to, the following: broom straws; papers; puzzle pieces; etc.

PROCEDURE

- 1) Strip searches will be conducted with the approval of the Superintendent/designee if there is reasonable suspicion that the youth intends to convey or has conveyed an illegal object/substance into the Center.
- 2) This reasonable suspicion must be based upon: specific, objective facts; reasonable inferences drawn from those facts; and specific factors in the youth's background that support the necessity of such search in light of reasonable cause.

- 3) Prior to conducting the strip search, staff will complete an ***Authorization and Report of Strip Search***.
- 4) Staff conducting the strip search will search for dangerous and non-dangerous contraband and examine the physical condition of the resident.
- 5) The Shift Supervisor will complete a ***Significant Incident Report*** if needed.
- 6) Strip searches will be conducted in the shower room of the living unit or the intake shower room.
- 7) Male staff will conduct strip searches of male residents, and female staff will conduct strip searches of female residents except in exigent circumstances.
- 8) The facility shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.
- 9) Strip searches will be conducted as follows:
 - a) The resident will be escorted to the intake shower room or on the living unit and instructed to remove all of his/her clothing.
 - b) The staff member conducting the search will wear protective gloves.
 - c) The resident will be instructed to open his/her hands. Staff will carefully examine the backs of palms and between fingers.
 - d) The resident will be instructed to run his/her fingers through his/her hair, or run a wide-toothed comb through his/her hair.
 - e) Staff will examine inside and behind the residents' ears, inside his/her mouth, under his/her tongue, and up into the nose.
 - f) The resident will be instructed to raise his/her arms and each armpit will be carefully examined.
 - g) The resident's pubic area will be examined, including under the groin area.
 - h) The resident will be instructed to squat and spread buttocks and cough.
 - i) The resident will be instructed to lift his/her feet. The soles of the feet and between the toes will be examined.
- 10) Upon completion of the strip search, the staff member conducting the search will report any bruises, abrasions, or other injuries to the Intake Officer or Shift Supervisor.
- 11) The Intake Officer or Shift Supervisor will record this information on the ***Entrance Health Screening Report***.
- 12) The Intake Officer or Shift Supervisor will photograph the youth's injuries, if appropriate.
- 13) The resident will shower immediately following the strip search.
- 14) The resident will be issued clothing, linens, and shoes.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Resident Searches-Body Cavity

PROCEDURE NUMBER: 5-9PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 4/1/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD(S): 315

SUPERINTENDENT:

M. Jardon

DATE: *11/17/22*

POLICY

Only qualified medical personnel will conduct body cavity searches of residents at the Center.

DEFINITIONS

Body Cavity Search – An inspection of the anal or vaginal cavity of a person that is conducted visually, manually, by means of any instrument, apparatus, or object, or in any other manner.

PROCEDURE

1. If the Superintendent/Administrator On-Call determines that a body cavity search of a resident is warranted due to a reasonable suspicion the resident may be smuggling contraband, especially drugs, into the facility, a medical professional will be authorized to conduct such a search.
2. The facility shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.
3. Any dangerous contraband found on residents will **immediately** be reported to the Shift Supervisor. The Shift Supervisor will determine if the Union County Sheriff's Office will be notified.
4. A **Significant Incident Report** will be completed and submitted to the Chief Safety and Security Manager for review and signature.
5. Residents will receive a **Youth Behavioral Incident Report (YBIR)** for dangerous contraband, and an Internal Disciplinary Committee (IDC) Hearing will be requested. If the contraband item has not been submitted to the Sheriff's Office, it will be attached to the **YBIR**.

6. Residents will receive a **YBIR** for non-dangerous contraband with an appropriate disciplinary consequence. Non-dangerous contraband items will be attached to the **YBIR** if practical, or disposed of appropriately.
7. This procedure will be reviewed by the Center's legal counsel to ensure its compliance with state and federal rules regarding searches.

CENTRAL OHIO YOUTH CENTER

SECTION 5: Security

SUBJECT: Building and Perimeter Security

PROCEDURE NUMBER: 5-10PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/1/14; 7/21/14; 9/29/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-11

RELATED PREA STANDARD(S): 313

SUPERINTENDENT: M. Jardon **DATE: 11/17/22**

POLICY

The Center will ensure the safety and security of its building, residents and staff by maintaining a secure building, recreation yard, outbuilding, parking lot, and grounds.

PROCEDURE

- 1) It is the responsibility of the Shift Supervisor to ensure interior and exterior doors are secure by conducting routine checks at least once per shift. These security checks will be unannounced and completed at various times then recorded in the Control Center log and *Supervisor's Checklist*.
- 2) Managers (Intake, Food Service, Clinical Program) and Administrators (Superintendent, Deputy Operations, Clinical, Education, Business) will periodically make unannounced program visits on all shifts and record such on the *Unannounced Program Visit Report*.
- 3) Staff are prohibited from alerting others that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational function of the facility.
- 4) Only the main entrance door to the Center will be unlocked at all times. All other exterior doors and perimeter entrances will be locked at all times.
- 5) Employee vehicles will be locked when parked in the Center's lot.
- 6) Employee vehicles may not be left unattended while the motor is running.
- 7) Interior doors will be locked at all times except for ingress and egress of employees, visitors, residents, and/or as designated by the Superintendent/designee in emergency situations.
- 8) Interior doors that can remain unlocked are staff restroom doors, and doors without locking mechanisms.
- 9) The kitchen lockbox will be checked at least twice by kitchen staff during their shift. The Shift Supervisor will check the kitchen lockbox at least once during his/her shift and record this check on the *Supervisor's Checklist*.

- 10) The Center's outbuilding will be kept locked except for ingress and egress of the Maintenance Supervisor and/or equipment.

CENTRAL OHIO YOUTH CENTER

SECTION 6: Juvenile Records

SUBJECT: Records Security

PROCEDURE NUMBER: 6-2

**EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20;
11/18/21; 11/17/22**

REVIEW DATE: 11/2023

REVISION DATE: 6/1/03, 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-07

SUPERINTENDENT: *M. Jardon*

DATE: *11/17/22*

POLICY

All records pertaining to juveniles will be confidential and kept in a secure location.

PROCEDURE

- 1) Juvenile case files will be kept in the Intake Office.
- 2) Juvenile medical files will be kept in the Clinic.
- 3) Storage cabinets containing juvenile records will be clearly marked "CONFIDENTIAL."

CENTRAL OHIO YOUTH CENTER

SECTION 6: Juvenile Records

SUBJECT: Case Files

PROCEDURE NUMBER: 6-1

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 3/2/08; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-07

SUPERINTENDENT: *M. Jardon*

DATE: *11/17/22*

POLICY

The Center will maintain a case file on each resident admitted to the facility containing pertinent information regarding the resident.

PROCEDURE

- 1) A case file will be prepared for each new admission containing the following sections and information:
 - a) Admission and release dates;
 - b) Medical card/insurance information;
 - c) Court paperwork (i.e. court orders, release orders, special instructions, etc.);
 - d) Intake paperwork (i.e. *Admission Report, Youth Property form, Health Screening Report*, etc.);
 - e) School, program and group work;
 - f) Reports (i.e. suicide risk assessments, *Youth Behavioral Incident Reports, Significant Incident Reports, Internal Disciplinary Committee Hearing Reports*, etc.); and
 - g) *Observation Logs and Room Inspection Forms.*

- 2) Information in the case file will be updated each time a resident is re-admitted to the Center.

CENTRAL OHIO YOUTH CENTER

SECTION 7: Admission and Orientation

SUBJECT: Admission Process

PROCEDURE NUMBER: 7-2PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 2/1/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 4

RELATED ODYS STANDARD(S): 5139-37-03; 5139-37-14; 5139-37-17; 5139-37-18

RELATED PREA STANDARD(S): 333, 341, 342, 368, 381

SUPERINTENDENT:

M. Jardon

DATE: 11/17/22

POLICY

The Center will conduct an intake interview including a COYC *Vulnerability Assessment Instrument* and prepare the necessary files and documents in order to maintain necessary and relevant information on each resident.

DEFINITIONS

Case File – confidential resident file that is created at admission and updated for subsequent readmissions and contains information including court documents, Observation Logs, YBIRs, SIRs, admission and release log, etc. Case files are kept in the Intake Office.

Orientation File – resident file that is created at admission and contains information including Orientation Quiz, level tests, Weekly Conduct Sheets, etc. Orientation files are kept in the Control Center until a resident is released. Upon release, the Orientation File will be transferred to the Intake Office.

Medical File – resident file that contains **highly** confidential information (e.g. HIPPA) including medical records and mental health assessments. Medical files are kept in the Clinic.

PROCEDURE

- 1) The *Admission Report* (blue form) is to be completed for each resident admitted to the Center.
- 2) The transporting officer may fingerprint the youth at the Center if necessary.
- 3) The staff member conducting the intake interview will obtain the necessary information for Center records and complete the following:
 - a) Enter “REC”, the resident’s name, and committing county/placing agency in the Docket Book, date and time admitted, and have the transporting officer sign the Docket.
 - b) Sign any documents of commitment or transportation.
 - c) The transporting officer will complete the top section of the *Admission Report*.
 - d) Enter the resident’s name and committing county/placing agency on the *Daily Population Sheet*.

- e) Record the time of admission to the left of the resident's name, and the committing county/placing agency and assigned room number to the right of the resident's name.
 - f) Enter the resident's name and committing court/placing agency on the numerical entry sheet or repeater sheet, as appropriate. (Note: Residents released for a court appearance or offsite appointment will not be considered "repeaters"). Be sure to write down the specific charge, not just "unruly" or "delinquent."
 - g) Prepare a case file for new admissions. The resident's name and First Time Number will be at the top of the label.
 - h) The committing court/placing agency and date of birth will be on the bottom of the label. The date and time received will be recorded on the sheet inside the front cover of the file.
 - i) Repeat number will also be recorded on this sheet.
- 4) The intake person will conduct an initial health screen. If a resident reports injuries at intake, the intake person in consultation with the Shift Supervisor will determine if the resident should be treated in-house or transported for outside medical treatment.
 - 5) Based on information provided by the resident at intake, the intake person will make the initial determination if a resident should be restricted from participating in active recreation due to illness or injuries.
 - 6) Based on information provided by the resident at intake, the intake person will notify the kitchen if the resident has special dietary needs.
 - 7) The intake person shall explain COYC's zero tolerance policy regarding sexual abuse or harassment and shall present a copy of the agency's PREA information sheet to be read, signed and returned by the resident. This sheet will be filed in the resident's case file and must be updated annually.
 - 8) Within seventy-two (72) hours of admission, the Intake Manager or Intake Officer shall administer the **COYC Vulnerability Assessment Instrument** to each resident.
 - a) Residents who score in the medium or high risk levels should have their instruments forwarded to a staff therapist for review and evaluation.
 - b) If the assessment instrument indicates that the resident has experienced any sort of prior sexual victimization or perpetration, a COYC therapist will meet with the resident within fourteen (14) days of the completion of the **Assessment Instrument**.
 - c) The completed **Vulnerability Assessment Instrument** will be utilized to determine housing, bed, program, education, and work assignments for the resident.
 - d) The completed **Vulnerability Assessment Instrument** shall then be filed in the resident's Medical File in the COYC Clinic.
 - 9) Lesbian, gay, bisexual, transgender, or intersex (LGBTI) residents shall **not** be placed in special housing, bed, or other assignments solely on the basis of such identification or status.
 - a) COYC shall not consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive.
 - b) In deciding whether to assign a transgender or intersex resident to a living unit for male or female residents, and in making other housing and programming assignments, the facility shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems.

- c) Placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety experienced by the resident.
 - d) A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration.
 - e) Transgender and intersex residents shall be given the opportunity to shower separately from other residents.
 - f) If a resident is isolated for safety purposes, the facility shall clearly document:
 - (1) The basis for the facility's concern for the resident's safety; and
 - (2) The reason why no alternative means of separation can be arranged.
 - g) Every thirty (30) days, the facility shall afford each resident described in this section a review to determine whether there is a continuing need for separation from the general population and take appropriate action if necessary.
- 10) The intake person will record the name of the staff conducting the strip search on the ***Lockup Report***.
 - 11) The resident will be advised of his/her right to telephone his/her custodial parent OR legal guardian at admission, and be permitted to make the telephone call as soon as practical after admission.
 - 12) Intake phone calls will be recorded on the ***Juvenile Phone Log***.
 - 13) **ALL RESIDENTS AT ADMISSION WILL BE TREATED FOR LICE.** De-licing treatments will be administered according to the instructions on the lice treatment container and recorded on the ***Record for Lice Treatments***.
 - 14) Residents will be patted down; strip-searched and showered prior to joining general population.
 - 15) Residents will join a living unit and participate in programming as soon as practical after admission.
 - 16) Residents will be fed an intake meal or snack if they are hungry at admission, and if it is **more** than one hour until the next meal.
 - 17) Each resident will have an Orientation File on file at the Center as follows:
 - a) For re-admissions, the intake person will move the resident's Orientation File from his/her case file in the Intake Office to the Control Center.
 - b) For new admissions, 3rd shift will prepare an Orientation File for the resident and place it in the Control Center.
 - c) The ***Resident Handbook*** will be given to the resident, and the file will be filed in the Control Center.
 - d) New admissions will have a ***Resident Handbook*** prepared with their name and committing court/placing agency on it.
 - e) Orientation Files will contain the following: ***Weekly Conduct Sheets, Orientation Quiz and Checklist***.
 - f) Within 10 days of intake, staff will conduct a comprehensive personal orientation with residents covering the entire ***Resident Handbook*** including their rights to be free from sexual abuse and harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.
 - g) Both the resident and staff member conducting the handbook orientation shall sign and date the ***COYC Resident Handbook Orientation Verification*** at the end of the handbook verifying this orientation.
 - h) The ***Resident Handbook Orientation Verification*** form shall be filed in the resident's orientation file.

- i) During their stay at the Center, residents are encouraged to keep their *Resident Handbooks* in their sleeping rooms.
 - j) Upon release, 3rd shift will move the resident's Orientation File from the Control Center to the Intake Office for placement in the resident's case file.
 - k) The *Orientation Checklist, Resident Handbook Orientation Verification* and *Resident Handbook* will remain in the File. Other papers will be discarded.
- 18) The Health Care Coordinator will perform an initial health assessment to determine the health and medical needs of the resident.
- 19) The Health Care Coordinator will verify residents' health insurance coverage prior to scheduling offsite health care appointments.
- 20) The Health Care Coordinator will confirm and notify Center staff of any special needs (i.e. restricted diet, restricted physical activity, etc.).
- 21) The Health Care Coordinator will make referrals to the Center's offsite health care provider if necessary.

CENTRAL OHIO YOUTH CENTER

SECTION 8: Juvenile Rights

SUBJECT: Youth Grievances

PROCEDURE NUMBER: 8-2PR

EFFECTIVE DATE: 6/1/08; 6/1/14; 9/1/14; 11/20/14; 11/1/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 4/3/08; 3/1/14; 11/1/14; 11/1/15; 5/25/17; 6/14/17

NUMBER OF PAGES: 3

RELATED ODYS STANDARD(S): 5139-37-16

RELATED PREA STANDARD(S): 351, 352, 362

SUPERINTENDENT: M. Jandow

DATE: 11/17/22

POLICY

The Center will provide residents with a means to resolve complaints if they believe they have been mistreated or their rights have been violated.

PROCEDURE

- 1) Residents may write *Youth Grievances* if they feel they have been mistreated or their rights have been violated.
- 2) Grievance boxes will be located in dining and day rooms so residents have reasonable access to them.
- 3) Residents may write general *Youth Grievances* during earned free time and letter writing time. A *Grievance* regarding an allegation of sexual abuse/assault/harassment may be written at any time and should be given to any staff member immediately thereafter, or placed in a *Grievance* box.
- 4) Staff will assist residents with writing *Youth Grievances* if necessary.
 - A. In matters of alleged sexual abuse/assault/harassment, third parties, including fellow residents, family members, attorneys, and outside advocates, shall be permitted to assist residents in completing and filing a *Grievance*.
 - B. The above-referenced individuals shall also be permitted to file such on behalf of residents.
 - C. If a third party, other than a parent or legal guardian, files such a *Grievance* on behalf of a resident, the facility may require as a condition of processing the *Grievance* that the alleged victim agree to have the *Grievance* filed on his or her behalf.
 - D. A third party may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.
 - E. If the resident declines to have the *Grievance* processed on his or her behalf, the facility shall document the resident's decision.

- F. A parent or legal guardian of a juvenile shall be permitted to file a *Grievance* regarding allegations of sexual abuse/assault/harassment, including appeals, on behalf of such juvenile.
 - G. Such a *Grievance* shall not be contingent upon the juvenile agreeing to have the *Grievance* filed on his or her behalf.
 - H. A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint.
 - I. Facility staff shall ensure that such grievance is not referred to a staff member who is the subject of the complaint.
- 5) The Superintendent/designee will check *Grievance* boxes daily.
 - 6) The Superintendent/designee will review all *Youth Grievances* and assign them to the appropriate Department Head, Children's Services Agency and/or law enforcement for investigation.
 - 7) Department heads, caseworkers and/or law enforcement will discuss the *Grievance* with the resident and return it to the Superintendent with noted recommendations.
 - 8) For grievances regarding an allegation of sexual abuse/assault/harassment:
 - A. The Superintendent shall issue a final facility decision on the merits of any portion within 90 days of the initial filing of the grievance.
 - B. Computation of the 90-day time period shall not include time consumed by residents in preparing any administrative appeal.
 - C. The facility may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision.
 - D. The facility shall notify the resident in writing of any such extension and provide a date by which a decision will be made.
 - E. At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.
 - 9) For all other *Grievances*, the Superintendent/designee will determine if the *Grievance* is granted, denied, or if some other action is warranted no later than 90 days from the date the *Grievance* was submitted.
 - 10) The Superintendent/designee will ensure that corrective action is taken when necessary.
 - 11) Any *Grievance* may be submitted directly to a staff member.
 - A. If, upon review of the *Grievance* by that staff member, it suggests the resident is subject to a substantial risk of imminent abuse it will be immediately submitted to the Superintendent/designee.
 - B. The Superintendent/designee will take immediate corrective action (within 48 hours) to insure the resident's safety. Such actions may include housing changes or transfers, removal of alleged abusers from contact with victims, and emotional support services.
 - C. A final facility decision on such a *Grievance* will be made within 5 calendar days.

D. The final facility decision shall document the determination whether the resident is in substantial risk of imminent abuse and the action taken in response to the emergency *Grievance*.

- 12) Copies of all *Youth Grievances* will be kept in the Superintendent's office and in the resident's case file.
- 13) Residents may be disciplined for filing a *Grievance* related to alleged abuse only where it is demonstrated that the resident filed the *Grievance* in bad faith.

CENTRAL OHIO YOUTH CENTER

SECTION 8: Juvenile Rights

SUBJECT: Youth Meals

PROCEDURE NUMBER: 8-3

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 2/24/08; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-12

SUPERINTENDENT: M. Jardon

DATE: 11/17/22

POLICY

The Center will provide balanced, nutritional meals for residents. Staff will supervise residents during meals.

PROCEDURE

- 1) Residents will be provided three meals and two snacks each day. At least two of the meals will be hot meals.
- 2) Meals will be provided at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast.
- 3) Staff will supervise residents during meal times. Staff are not permitted to eat meals with residents.
- 4) Residents and staff will be issued "sporks" for eating meals.
- 5) Sporks will be counted before and after each meal, and returned to the kitchen.
- 6) Residents will be permitted to talk quietly during meals with other residents **at their table**.
- 7) Intakes will be provided a meal if they are admitted **more than** one (1) hour before a scheduled meal.
- 8) A container will be provided during meals for the disposal of leftover liquids.
- 9) Kitchen staff will dump leftover liquids into the kitchen sink. If kitchen staff are unavailable, staff are to place the container in the sink to be disposed of at a later time.
- 10) Kitchen utensils (knives, metal serving spoons, etc.) are counted three (3) times per day. If kitchen utensils are not in the proper place, procedures **must** be followed to locate them (see Procedure **5-5 Facility Searches & Inspections-Inside**).
- 11) If staff remove any utensils from the kitchen, they are to notify kitchen staff what they are removing and when it will be returned to the kitchen.

CENTRAL OHIO YOUTH CENTER

SECTION 8: Juvenile Rights

SUBJECT: Reporting Sexual Harassment & Abuse
PROCEDURE NUMBER: 8-5PR
EFFECTIVE DATE: 6/1/14; 9/1/14; 10/1/14; 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 4/24/14; 9/29/14; 11/1/14; 11/1/15; 2/16/17; 5/25/17
NUMBER OF PAGES: 6
RELATED ODYS STANDARD(S): None
RELATED PREA STANDARD(S): 311, 321, 322, 334, 335, 351, 354, 361, 363, 364, 365, 367, 368, 371, 372, 373, 378, 381, 382, 387, 388, 389, 393
SUPERINTENDENT: *M. Jardon* DATE: 11/17/22

POLICY

The Center observes zero tolerance toward all forms of sexual abuse/assault/harassment and will review all allegations of physical and/or sexual abuse/assault/harassment, and report such allegations to the proper authorities for investigation. (Refer to *Abuse-Related Definitions* and *Institutional Plan for Coordinated Response to Sexual Abuse/Assault/Harassment Flowchart* following this procedure).

PROCEDURE

- 1) All detention center staff are mandated to report allegations of abuse and/or assault and/or harassment. Any information related to sexual victimization or abusiveness shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments or as otherwise required by federal, state or local law.
- 2) As part of the orientation process, each resident will be given basic directions for reporting abuse and/or assault and/or harassment, and assurance that he/she will be protected against retaliation for reporting allegations of abuse.
- 3) All staff are required to report allegations of abuse/assault/harassment to the Superintendent/designee as soon as they are made aware of the allegation(s).
- 4) It is the responsibility of the Superintendent/designee to ensure that any alleged physical and sexual abuse and/or assault and/or harassment is reported to and investigated by the proper authorities. This includes residents' allegations of abuse/assault/harassment by their parents/legal guardians or other custodians.
- 5) If a resident states that he/she has been abused and/or assaulted and/or harassed **prior** to admission to the Center, the Intake Officer will notify the committing court/placing agency. The Children's Services agency of the county of residence will also be notified.
- 6) If alleged abuse/assault/harassment occurred while confined at another facility, within 72 hours after receiving the allegation the Superintendent/designee shall notify the head of that facility or the appropriate governing office/agency where the alleged abuse/assault/harassment occurred and keep documentation of such notification on file.

- 11) Residents will be issued clean clothing each morning (outer garments, undergarments, and socks).
- 12) Residents will be issued clean towels and washcloths each morning.
- 13) Residents will receive clean bed linens at least once per week in accordance with the established schedule.
- 14) Staff will inspect residents each morning to ensure they are neat, clean, and well groomed.
- 15) Staff will ensure uniforms are being properly worn (shirts tucked in, pants pulled up to waist and evenly cuffed, sweatshirt sleeves at wrists, etc.).
- 16) Residents will be permitted to shave at reasonable times as determined by the Shift Supervisor. The Center will maintain a *Male Shaving Record* and a *Female Shaving Record* for this purpose.
- 17) Residents will be permitted and/or required to clip their nails at the discretion of the Shift Supervisor.
- 18) All hygiene items, linens, clothing, and shoes will be furnished by the Center.
- 19) Special hygiene items (i.e. shampoo, face care products, deodorant, etc.) will only be issued in accordance with a physician's order.

- 7) If COYC receives a report from another facility alleging abuse/assault/harassment occurred at COYC, the Superintendent will ensure that the allegation is investigated in accordance with all the same protocol outlined in this policy.
- 8) The staff receiving the report of alleged abuse/assault/harassment will complete an *Actual or Suspected Abuse/Neglect Report* and a *Significant Incident Report*, noting "PREA" as the reason for the report along with the details of the incident. Both reports are to be faxed to the appropriate agencies/authorities.
- 9) If a resident states that he/she has been physically and/or sexually abused/assaulted/harassed by Center staff or another resident while at the Center, the Shift Supervisor will **IMMEDIATELY** (within the hour) notify the Superintendent/designee for specific instructions.
- 10) Staff first responders to the scene of a sexual abuse situation will:
 - A. Notify other security staff on duty.
 - B. Separate the alleged victim and abuser.
 - C. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
 - D. Request that both the alleged victim and abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- 11) For allegations of sexual assault:
 - A. The resident will **IMMEDIATELY** (within the hour) be transported to Memorial Hospital of Union County for examination and crisis intervention services.
 - B. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
- 12) The Shift Supervisor will report the alleged sexual abuse/assault to the Union County Sheriff's Office and the committing court/placing agency.
- 13) For allegations of sexual harassment, the Shift Supervisor will **IMMEDIATELY** (within the hour) separate the alleged victim and harasser and notify the Superintendent/designee for specific instructions.
- 14) Upon receiving any allegation of sexual abuse involving a resident:
 - A. The Superintendent/designee shall promptly report the allegation to the committing court/agency and to the alleged victim's parents or legal guardians; unless there is official documentation showing the parents or legal guardians should not be notified.
 - B. If the alleged victim is under the guardianship of the child welfare system, the report shall be made to the alleged victim's caseworker instead of the parents or legal guardians.
 - C. The Superintendent/designee shall also report the allegation to the alleged victim's attorney or other legal representative of record within 14 days of receiving the allegation.
- 15) For allegations of physical abuse:
 - A. If on duty, the Health Care Coordinator will be contacted to conduct a visual physical exam of the resident. Photographs will be taken for reporting purposes only.
 - B. If the Health Care Coordinator is not on duty, the Shift Supervisor will check the resident for indications of physical abuse and ensure that photographs are taken.

- C. Female staff will photograph female youths, and male staff will photograph male youths if the alleged injuries require disrobing in order to conduct the visual exam.
 - D. If available, the Superintendent, Deputy Operations Administrator or Program Manager will be contacted to conduct an informational interview (who, when, where, what) with the resident.
 - E. If none of the above are available, the Shift Supervisor will conduct the interview (unless the allegation is against the Shift Supervisor).
 - F. If the allegation is against the Shift Supervisor, the Deputy Operations Administrator will be contacted and conduct the interview.
 - G. A *Location & Type of Injury Diagram* will be completed documenting visible injuries.
 - H. The *Location & Type of Injury Diagram* will be placed in the Clinic mailbox, and the resident's name will be placed on the *Sick Call List* for the following day.
 - I. If the resident is seriously injured, he/she will be transported to the Emergency Room of Memorial Hospital of Union County for treatment.
 - J. If the resident is willing and able to do so, he/she will be asked to write a statement regarding the incident.
 - K. If the resident is unable to write his/her own statement, a facility administrator or supervisor will record the resident's statement for him/her.
 - L. The Shift Supervisor will collect written *Witness Statements* from potential witnesses to the incident.
- 16) The original *Significant Incident Report*, along with all supplemental information (i.e. statements, photographs, physical evidence), will be submitted to the Superintendent/designee by the end of the shift.
 - 17) The Superintendent, Deputy Operations Administrator, or Clinical Administrator will maintain contact with the resident and his/her Probation/Parole Officer and/or Case Worker throughout any investigation.
 - 18) The Superintendent/designee will maintain frequent, regular contact with the committing court/placing agency, law enforcement and/or Children's Services staff throughout the investigation.
 - 19) Any allegations of physical and/or sexual abuse/assault/harassment will be given serious consideration regardless of the resident's past history, offenses, etc.
 - 20) COYC Staff shall accept any third party reports of abuse/assault/harassment verbally, in writing, or anonymously (either over the phone or via the facility website) and follow the reporting protocol detailed above.
 - 21) If a youth wishes to privately report sexual abuse/assault/harassment to an outside agency, staff shall allow the youth to move to a private room, and using COYC's cordless phone, staff shall dial the crisis hotline 1-800-656-4673 then hand the phone to the youth and leave the room until the youth has finished the conversation.

- 22) All COYC staff are expected to cooperate fully with Center committing courts/placing agencies, administrative staff, law enforcement officers and/or Children's Services staff during reviews/investigations of abuse/assault/harassment.
- 23) The facility shall protect all residents and staff who report sexual abuse/assault/harassment or cooperate with sexual abuse/assault/harassment investigations from retaliation by other residents or staff.
- A. The Superintendent/designee will be the primary agent monitoring retaliation
 - B. It is the responsibility of the Superintendent/designee to take immediate steps to ensure that residents alleging abuse/assault/harassment are not subjected to any form of retaliation.
 - C. The Superintendent/designee will monitor multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
 - D. Any use of segregated housing to protect a resident who is alleged to have suffered sexual abuse shall be subject to the requirements/procedures in COYC Policies 7-2PR & 9-5PR.
- 24) For at least 90 days following a report of sexual abuse/assault/harassment:
- A. The Superintendent/designee shall monitor the conduct or treatment of residents or staff who reported the sexual abuse.
 - B. The Superintendent/designee will also monitor the conduct or treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation.
 - C. Items the superintendent shall monitor include any resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff.
 - D. The superintendent shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
 - E. In the case of residents, such monitoring shall also include periodic status checks.
 - F. If any other individual who cooperates with an investigation expresses a fear of retaliation, the superintendent shall take appropriate measures to protect that individual against retaliation.
 - G. The facility's obligation to monitor shall terminate if the investigating agency determines that the allegation is unfounded.
- 25) COYC shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse/assault/harassment are substantiated.
- 26) Following an investigation of alleged sexual abuse/assault/harassment, the facility shall notify the alleged victim in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded based upon the facility's &/or the Union County Sheriff's Office investigative results. Such notification shall be documented.
- 27) COYC shall retain all written reports involving sexual abuse/assault/harassment for as long as the alleged abuser is a resident at the facility or employed by the facility, plus five years, unless the abuse was committed by a juvenile and applicable law requires a shorter period of retention.
- 28) In addition to any criminal charges filed against a resident by the Sheriff's Office:
- A. The Center will conduct an administrative review to determine if disciplinary action, therapy, counseling, or other interventions to address and correct underlying reasons or motivations for abuse/assault/harassment are warranted.

- B. The facility may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition to access to general programming or education.
 - C. The Superintendent/designee may request the resident be transferred to another facility if deemed necessary.
 - D. The Center may discipline a resident for sexual contact with staff only upon finding that the staff member did not consent to such contact.
- 29) In addition to any criminal charges filed against staff by the Sheriff's Office, the Center will conduct an administrative review to determine if disciplinary action, up to and including termination, is warranted.
- 30) Every administrative review shall include:
- A. An effort to determine whether staff actions or failures to act contributed to the abuse/assault/harassment and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.
 - B. For the purpose of disciplinary action, a report of sexual abuse/ assault/harassment made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- 31) Following a resident's allegation that a staff member has committed sexual abuse/assault/harassment against the resident:
- A. Administration shall inform the alleged victim whenever the staff member is no longer posted within the resident's unit, is no longer employed at the facility, and/or has been indicted or convicted on a charge related to sexual abuse/assault/harassment within the facility.
 - B. All such notifications shall be documented.
- 32) Following a resident's allegation that he/she has been sexually abused/assaulted/harassed by another resident:
- A. Administration shall inform the alleged victim when it is learned that the alleged perpetrator has been indicted or convicted on a charge related to sexual abuse/assault/harassment within the facility.
 - B. All such notifications shall be documented.
 - C. The administrative obligation to report to the alleged victim shall terminate if the resident is released from COYC's custody.
- 33) The Center will collect accurate, uniform data for every allegation of sexual abuse/assault/harassment and will aggregate the data at least annually.
- A. Data collected shall include, at a minimum, the data necessary to answer all questions from the Survey of Sexual Violence conducted by the Department of Justice.
 - B. Data shall be collected, reviewed and maintained (for at least 10 years) from all available incident-based documents, including reports, investigation files, and incident reviews.
 - C. Upon request, the facility shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.
 - D. The Center shall review data collected in order to assess and improve the effectiveness of its sexual abuse/assault/harassment prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action on an ongoing basis, and preparing an annual report of findings and corrective actions.
 - E. Such report will include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Center's progress in addressing sexual abuse/assault/harassment.

- F. Such reports will be approved by the superintendent and posted on the Center website.
- G. Report materials which might be personally identifiable or would present a clear and specific threat to the safety and security of the facility may be redacted with the nature of the redaction indicated.
- H. All such reports and data shall be maintained and archived for at least 10 years unless federal, state or local law requires otherwise.

34) The Center will comply with all auditing requirements outlined in §115.401-405 of the Prison Rape Elimination Act of 2012.

CENTRAL OHIO YOUTH CENTER

SECTION 8: Juvenile Rights

SUBJECT: Reasonable Accommodations

PROCEDURE NUMBER: 8-6PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-08

RELATED PREA STANDARD(S): 316, 333

SUPERINTENDENT: *M. Jardon*

DATE: *11/17/22*

POLICY

The Center will make reasonable accommodations for residents with disabilities (including physical handicaps, limited English proficiency, intellectual delays, psychiatric conditions, allergies, etc.) and religious practices with proper documentation.

PROCEDURE

- 1) The Center will make reasonable accommodations (including providing effective communication, interpreters/special educators) for residents with physical disabilities including those who are deaf or hard of hearing, blind or have low vision, and those who are limited English proficient. The Center shall not use other residents to meet these accommodations.
- 2) The Center will make reasonable accommodations for residents with confirmed allergies to specific foods and/or drinks by providing alternate foods and/or drinks.
- 3) The Health Care Coordinator will contact the resident's parents/legal guardian or family physician to confirm such allergies.
- 4) The Center will make reasonable accommodations for residents with diabetes and provide alternate foods.
- 5) The Health Care Coordinator will contact the resident's parents/legal guardian or family physician to confirm the condition.
- 6) The Center will make reasonable accommodations for residents with allergies to hygiene and laundry products.
- 7) The resident's parent/legal guardian will be required to provide a written statement from the resident's family physician confirming such allergies.
- 8) The Center will provide special products for residents with confirmed allergies.
- 9) The Center will make reasonable accommodations for residents whose religious practices prohibit them from eating certain foods (e.g. pork).

- 10) The resident's parent/legal guardian will be required to provide a written statement from the resident's clergy person indicating that the resident is an active member of the church or religious organization.

CENTRAL OHIO YOUTH CENTER

SECTION 8: Juvenile Rights

SUBJECT: Non-Emergency Medical Services

PROCEDURE NUMBER: 8-7

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S):

RELATED ACA STANDARD(S):

SUPERINTENDENT:

M. Jordon

DATE: 11/17/22

POLICY

The Center will provide an adequate and appropriate level of medical care and treatment to its residents.

PROCEDURE

- 1) If a resident requires non-emergency medical care for treatment of minor injuries/illnesses, the Shift Supervisor/Assistant Supervisor may provide over-the-counter products as per the instructions on the package and/or Physician's Standing Orders.
- 2) Residents complaining of minor injuries/illnesses will be placed on the *Sick Call List* to be seen by the Center's Health Care Coordinator.
- 3) The Center will provide off-site medical treatment as necessary.
- 4) If the Health Care Coordinator or on-call physician determines the resident should be seen by an off-site physician/specialist, the committing court/placing agency will be contacted for approval to transport.
- 5) The Health Care Coordinator is responsible for notifying staff of residents' special medical needs.
- 6) If the resident is transported for non-emergency outside medical treatment, the Health Care Coordinator will complete a *Transportation Form* and submit it to the Shift Supervisor. Refer to Procedure 5-11 **Transportation of Juveniles**.
- 7) The Shift Supervisor will arrange the transport, complete the Supervisor's section of the *Transportation Form*, and forward it to Intake staff.
- 8) Intake staff will fax the *Transportation Form* to the committing court/placing agency.
- 9) The Center maintains an Agreement with Memorial Hospital of Union County for medical treatment of residents.

CENTRAL OHIO YOUTH CENTER

SECTION 9: Behavior Management

SUBJECT: Resident Handbook-SDU

PROCEDURE NUMBER: 9-1PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 2/24/08; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-14; 5139-37-16; 5139-37-17

RELATED PREA STANDARD(S): 378

SUPERINTENDENT: *N. Jardon*

DATE: 11/17/22

POLICY

The Center will utilize a behavior management system, based on rewards for positive behavior and sanctions for negative behavior that is understood and followed by residents and staff.

PROCEDURE

- 1) The behavior management system, including the disciplinary process for residents, is explained in the *Resident Handbook*.
- 2) Any disciplinary sanctions shall be commensurate with the nature and circumstances of the rule violation, the resident's disciplinary history, mental disabilities and/or mental illnesses, and the sanctions imposed on other residents with similar histories for comparable offenses.
- 3) The *Resident Handbook* is attached and incorporated as part of this procedure.
- 4) Each resident will receive a copy of the *Handbook* upon admission to the Center.
- 5) Staff will read the *Resident Handbook* to those residents who have difficulty reading and/or comprehending the *Handbook*.
- 6) A condensed version of the **Resident Handbook** is available in Spanish.
- 7) Staff will receive a copy of the *Resident Handbook* during Pre-Service training. Staff are expected to be familiar with the contents of the *Handbook*, and follow the level system and disciplinary consequences.

CENTRAL OHIO YOUTH CENTER

SECTION 9: Behavior Management

SUBJECT: Use of Physical Intervention

PROCEDURE NUMBER: 9-2

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 6/1/03; 2/1/08; 11/1/15

NUMBER OF PAGES: 4

RELATED ODYS STANDARD(S): 5139-37-11

SUPERINTENDENT: *M. Jardon*

DATE: 11/17/22

POLICY

The Center will maintain the safety and security of its residents and staff, and protect its property by utilizing reasonable methods of control. Physical intervention will be utilized in accordance with the action-response continuum. Staff will receive pre-service and annual in-service training on verbal de-escalation, action-response continuum, and unarmed self-defense.

DEFINITIONS

Physical Intervention – When staff make any physical contact with a resident in order to control dangerous and/or destructive behavior (i.e. self-harm, destruction of COYC property, physical aggression, etc.).

Weapon – Any instrument or object capable of inflicting injury, however slight.

PROCEDURE

- 1) Staff have the right to defend themselves against violent and aggressive residents.
- 2) Staff can use reasonable methods in response to aggressive, resistant and defiant behavior when it disrupts operational procedures and/or creates unsafe conditions for staff and/or other residents.
- 3) Physical intervention techniques may be utilized if a resident is attempting to harm himself/herself, others, destroying/damaging Center property, and/or escapes.
- 4) Staff will make reasonable attempts to utilize verbal de-escalation skills when a resident becomes violent or aggressive towards himself/herself, other residents, or staff. "Reasonable attempts" are specific to the resident and the situation.
- 5) Staff will call for assistance **immediately** if a resident appears to be losing control of his/her behavior.
- 6) The Shift Supervisor will respond to calls for assistance.
- 7) Attempts will be made to isolate the out-of-control resident from other residents.

CENTRAL OHIO YOUTH CENTER

SECTION 9: Behavior Management

SUBJECT: Room Restriction

PROCEDURE NUMBER: 9-5PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 2/24/08; 3/1/14; 11/1/14; 11/1/15; 11/8/16

NUMBER OF PAGES: 3

RELATED ODYS STANDARD(S): 5139-37-14; 5139-37-16; 5139-37-17

RELATED PREA STANDARD(S): 342, 368, 378

SUPERINTENDENT:

M. Jordan

DATE: 11/17/22

POLICY

The Center will maintain safety and security and protect residents and staff by restricting a resident to his/her room for a specific period of time. The Center will utilize room restriction for necessary medical, safety/security, and protective custody purposes **only**.

DEFINITIONS

Medical isolation – when a resident is restricted to his/her sleeping room for medical reasons (i.e. contagious diseases/illnesses, serious injury/illness, etc.).

Security-threat room restriction – when a resident is restricted to his/her room for safety/security reasons (i.e. planning an escape or riot, gang-related activities, assaultive behavior, sexual acting out, destruction of property, etc.).

Protective room restriction – when a resident is restricted to his/her room as a protective measure for his/her own for safety.

PROCEDURE

Medical Isolation

- 1) The Health Care Coordinator will determine if a resident will be placed on medical isolation.
- 2) If the Health Care Coordinator is unavailable, the Shift Supervisor will make the determination.
- 3) In addition to random intervals not to exceed fifteen (15) minute recorded room checks, a resident on medical isolation will be monitored as per the instructions of the Health Care Coordinator.
- 4) The Health Care Coordinator and/or Shift Supervisor will check the resident at least once each shift, and log these checks on the **Observation Log**.
- 5) A **Significant Incident Report** will be completed and submitted to the Deputy Operations Administrator detailing the reason for the medical isolation.

CENTRAL OHIO YOUTH CENTER

SECTION 9: Behavior Management

SUBJECT: Use of Chemical Agents

PROCEDURE NUMBER: 9-4

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/13/22; 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-11; 5139-37-14

SUPERINTENDENT: *M. Jardon* DATE: 11/17/22

POLICY

The Center will refrain from using chemical and/or medical restraints to control behavior.

DEFINITIONS

Chemical agent – mace, pepper spray, tear gas, and other similar products

Medical restraint – administering narcotics (i.e. psychotropics, tranquilizers) or other drugs to control behavior

PROCEDURE

- 1) Center staff are prohibited from using and/or carrying chemical agents (i.e. mace, pepper spray, tear gas, etc.).
- 2) The Center will not administer stimulants, tranquilizers, or psychotropic drugs solely for behavior management.
- 3) The Shift Supervisor will determine if a situation warrants use of chemical agents and contact the Union County Sheriff's Office if necessary.
- 4) The Shift Supervisor will complete and submit a *Significant Incident Report* if the Sheriff's Office is contacted and chemical agents are used to subdue a resident(s).
- 5) Procedures relating to the use of chemical agents will be reviewed by the Center's legal counsel prior to adoption and implementation.

- 6) The Health Care Coordinator will determine when a resident will be released from medical isolation.
- 7) The resident's committing court/placing agency and parent/legal guardian will be notified when a resident is placed on medical isolation.

Security-Threat Room Restriction

- 1) The Shift Supervisor will determine if a resident should be placed on room restriction for safety and security reasons.
- 2) The Shift Supervisor will determine if the Union County Sheriff's Office should be contacted depending on the seriousness of the security threat.
- 3) The resident will be issued a **Youth Behavioral Incident Report (YBIR)** requesting and Internal Disciplinary Committee (IDC) Hearing.
- 4) Residents on security-threat room restriction will be checked at random intervals not to exceed fifteen (15) minutes. These checks will be logged on the **Room Restriction Log**.
- 5) Administration and/or Shift Supervisor will conduct a **Safe-to Release Structured Interview** to be completed within **2-4 hours** of a youth being placed on room restriction. If a youth is determined not safe-to-release and continues to be a safety and security threat/risk a follow-up interview will be completed within 2-4 hours. The **Safe-to-Release Structured Interview** will **not** impede the youth's regular sleeping hours.
- 6) Residents on security-threat room restriction will not be given eating utensils. Meals will be prepared that can be eaten without using utensils ("finger food").
- 7) If the resident is released from his/her room for any reason (including to shower), at least two staff will be present.
- 8) The Superintendent, Deputy Operations Administrator and/or Clinical Administrator will determine when a resident will be released from security-threat room restriction.
- 9) A **Significant Incident Report** will be completed and submitted to the Deputy Operations Administrator detailing the reason for the room restriction.
- 10) The **Significant Incident Report** and IDC Hearing paperwork if applicable will be faxed to the committing court/placing agency.

Protective Room Restriction

- 1) A resident may be isolated from other residents and placed in protective room restriction only as a last resort when less restrictive measures are inadequate to keep him/her safe (e.g. victim of an assault).
- 2) Protective room restriction will be utilized only until an alternative means of keeping the protected resident safe can be arranged.
- 3) An **SIR** must be completed for residents placed on protective room restriction.

- 4) Residents on protective room restriction will be checked at random intervals not to exceed fifteen (15) minutes, and these checks will be logged on the *Observation Log*.
- 5) If the resident on protective room restriction is on suicide status (i.e. watch or precaution), the terms and condition of the Special Management Plan will be followed.
- 6) The Superintendent, Deputy Operations Administrator, Clinical Administrator, Health Care Coordinator, and/or Shift Supervisor will check residents on protective room restriction at least once each shift and these checks will be recorded on the *Observation Log*.
- 7) Residents placed on protective room restriction for more than 23 continuous hours will have access to one hour of large muscle activity per day as well as legally required educational services.

CENTRAL OHIO YOUTH CENTER

SECTION 10: Program Services-SDU

SUBJECT: Volunteer Services

PROCEDURE NUMBER: 10-5PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): None

RELATED PREA STANDARD(S): 332, 377

SUPERINTENDENT: *M. Jardon*

DATE: 11/17/22

POLICY

The Center will recruit community volunteers to enhance and expand services and programs offered to residents.

PROCEDURE

- 1) The Center will recruit community volunteers to enhance therapeutic programming including arts and crafts, horticultural and animal-assisted therapies, community service projects, etc.
- 2) Volunteers will provide professional services only when certified or licensed to do so.
- 3) Volunteers will be at least twenty-one years of age. The Superintendent may waive the age requirement based on the specific circumstances of the volunteer activity/program.
- 4) Volunteers must complete and submit a volunteer packet, and submit to a background check.
- 5) Volunteers will attend an orientation class conducted by the Program Manager and/or Superintendent.
- 6) A list of approved volunteers will be kept in the Intake Office for identification purposes.
- 7) Volunteers must present a picture identification card upon entering the Center, and must sign the *Visitors' Log*.
- 8) Volunteers are prohibited from any financial transactions with residents.
- 9) Direct care staff and/or program staff are responsible for supervising residents during volunteer-sponsored activities.
- 10) Direct care staff are responsible for reporting issues and/or concerns regarding volunteers to the Program Manager.
- 11) The Program Manager will coordinate and supervise the Center's Volunteer Program.
- 12) The Program Manager will periodically evaluate the Volunteer Program and report any issues/concerns to the Superintendent.

CENTRAL OHIO YOUTH CENTER

SECTION 10: Program Services-SDU

SUBJECT: Library Services

PROCEDURE NUMBER: 10-4

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-18

SUPERINTENDENT:

M. Jardon

DATE:

11/17/22

POLICY

Residents at the Center will have access to books for both educational and leisure reading.

PROCEDURE

- 1) The Center will maintain "libraries" in the north and south day rooms for both educational and leisure reading. All residents will have access to these library books.
- 2) SDU residents may keep books in their sleeping rooms as per the SDU Resident Handbook.
- 3) Any resident who abuses book privileges may not be permitted to access books. Residents may be required to pay restitution for damaged/destroyed books and will receive an appropriate disciplinary consequence.

13) The Center will maintain personnel files on all volunteers to include: *Application for Volunteer Services, Volunteer Agreement, Volunteer Guidelines, Confidentiality Agreement, PREA Acknowledgement Statement*, Criminal Background Checks, and references.

CENTRAL OHIO YOUTH CENTER

SECTION 11: Visitation and Communication

SUBJECT: Visitation
PROCEDURE NUMBER: 11-1
EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 10/1/06; 3/2/08; 11/1/14; 11/1/15
NUMBER OF PAGES: 2
RELATED ODYS STANDARD(S): 5139-37-19
PREA RELATED STANDARD: 353
SUPERINTENDENT: *M. Jardon* DATE: 11/17/22

POLICY

The Center will provide opportunities for residents to visit with their parents/legal guardians, attorneys, probation officers, case managers, counselors, and clergy.

PROCEDURE

- 1) Parents/legal guardians may visit residents detained at the Center.
- 2) Visitation days and hours are:

Tuesday	6:00pm-7:00pm
Saturday	9:00am-10:00am
Sunday	9:00am-10:00am
- 3) Parents/legal guardians must call and make an appointment for visitation. Visitation is limited to 20 minutes. Visits will be recorded on the appropriate *Visitation Schedule*.
- 4) Visitation hours may be extended for parents/legal guardians with the approval of the Superintendent or Clinical Administrator.
- 5) Probation/Parole Officers and Court personnel may visit any day without an appointment.
- 6) Law enforcement officers, case managers, attorneys, and clergy may visit with the committing court/placing agency's approval. Clergy must call and make an appointment for visitation.
- 7) All visitors must present a driver's license or other photo identification card when they come to visit. Visitors will not be permitted to bring anything else (purses, bags, food, etc.) into the Center.
- 8) The Center does not permit physical contact during visits.
- 9) All visitors are subject to search for contraband or weapons.

- 10) Visitors who have direct contact with residents will be wanded prior to being permitted entry into the visitation area (including holding cells).
- 11) If a visitor refuses to submit to a search, he/she will be asked to leave the premises immediately.
- 12) If he/she refuses to leave, the Union County Sheriff's Office will be contacted for assistance.
- 13) A **Significant Incident Report** will be completed by the Shift Supervisor and submitted to the Deputy Operations Administrator the following business day.
- 14) Visitation may be denied if the resident does not wish to see the visitor or if there is reasonable grounds to believe the visitor may jeopardize the safety and security of the Center, its staff, and/or its residents.
- 15) A **Significant Incident Report** will be completed by the Shift Supervisor and submitted to the Deputy Operations Administrator the end of the shift if either of the above situations occurs.
- 16) Law enforcement personnel will not be permitted to interrogate residents without prior approval from the committing county/placing agency.
- 17) The Center will provide a staff representative for any resident questioned by law enforcement personnel at the committing county/placing agency's request.
- 18) When holding cells are utilized for visitation and/or interviews, the door to the holding cell will be propped open unless the visitor/interviewer requests otherwise.
- 19) Visitors/interviewers using holding cells will be informed that there is an intercom and instructed on how to use it.
- 20) The door to the Intake Office will be closed AT ALL TIMES and locked when unoccupied.
- 21) If a resident is alone in a holding cell, the door to the holding cell should be closed and locked.

CENTRAL OHIO YOUTH CENTER

SECTION 11: Visitation and Communication

SUBJECT: Telephone Calls
PROCEDURE NUMBER: 11-2
EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 5/28/03, 10/1/06; 11/1/14; 11/1/15
NUMBER OF PAGES: 1
RELATED ODYS STANDARD(S): 5139-37-19
PREA RELATED STANDARD: 353
SUPERINTENDENT: M. Jardon **DATE: 11/17/22**

POLICY

The Center will provide reasonable access for residents to telephone communications with parents or legal guardians, counselors, caseworkers, and probation/parole officers.

PROCEDURE

- 1) Within a reasonable amount of time after admission to the Center, residents may make a five-minute collect phone call to their parents or legal guardian.
- 2) Resident phone calls will be recorded on the *Resident Call Log*.
- 3) After the initial intake call, residents will be permitted to make phone calls according to their level as described in the *Resident Handbook*.
- 4) Outgoing telephone calls will be placed person-to-person by staff.
- 5) Incoming and outgoing telephone calls may be terminated by the Shift Supervisor if the conversation becomes inappropriate, argumentative, or if the resident becomes distressed.
- 6) Residents may receive phone calls from probation/parole officers and attorneys. Residents may receive phone calls from counselors and caseworkers with the committing court/placing agency's approval.

CENTRAL OHIO YOUTH CENTER

SECTION 11: Visitation and Communication

SUBJECT: Correspondence

PROCEDURE NUMBER: 11-3

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 5/28/03, 10/1/06; 11/1/14; 11/1/15

NUMBER OF PAGES: 2

RELATED ODYS STANDARD(S): 5139-37-19

PREA RELATED STANDARD: 353

SUPERINTENDENT:

M. Jardon

DATE:

11/17/22

POLICY

The Center will provide ample opportunities for residents to correspond with their parents/legal guardian, attorneys, caseworkers, and probation/parole officers.

PROCEDURE

- 1) Letters sent to residents will be opened by staff and checked for contraband. Contraband includes any object or substance, the possession of which would constitute a crime under the laws of the State of Ohio, or any object or substance which would pose a danger to facility order and security.
- 2) Staff will not read residents' mail unless the Superintendent has approved such action due to security concerns. Residents will be notified if such action is necessary.
- 3) Residents may only receive mail from their parents/legal guardian, attorneys, committing court/placing agency, probation/parole officer, and caseworker unless otherwise approved by the Superintendent. Letters from others will be placed in the resident's personal property file and given to them upon release from the Center.
- 4) After residents have an opportunity to read their mail, it will be placed in their personal property file and returned when they are released from the Center.
- 5) The Center will provide postage stamps for residents according to their level as described in the *Resident Handbook*. Outgoing letters will be tracked utilizing the *Juvenile Envelope Sign-Out Sheet*.
- 6) The Center will provide postage stamps for letters to Judges, caseworkers, probation/parole officers, and attorneys. These stamps are in addition to their weekly allotment.
- 7) Letters may be written during earned free time and letter writing time.
- 8) All letters sent from the Center must have the facility's address listed as the return address.

- 9) Incoming and outgoing mail will be forwarded within twenty-four (24) hours excluding weekends and holidays.
- 10) Residents are not permitted to write, pass notes, or send mail to other residents at the Center.
- 11) Residents are not permitted to send or receive mail from former residents of the Center.

CENTRAL OHIO YOUTH CENTER

SECTION 16: Community Residential Center (CRC)

SUBJECT: Admission Process

PROCEDURE NUMBER: 16-3PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/22/12; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 4

RELATED ODYS STANDARD(S): 5139-37-03; 5139-37-14; 5139-37-17; 5139-37-18

RELATED PREA STANDARD(S): 333

SUPERINTENDENT:

M. Jardon

DATE: 11/17/22

POLICY

Admission to the (CRC) will be in accordance with Ohio Revised Code Section 2152.19(A) (3). The operational capacity of the CRC is 20 beds.

PROCEDURE

- 1) The following documents are needed at admission:
 - A. Copy of court order
 - B. Copy of insurance/Medicaid card
 - C. Prescription(s) for medication refills if possible
 - D. Release of Information form signed by the custodial parent/legal guardian
 - E. Agreement signed by the committing court/placing agency.
- 2) Upon admission, the Intake Manager will prepare two files: a **medical** file and a **case** file.
- 3) The **medical** file will contain the following documents:
 - A. Picture profile sheet
 - B. Results of major intellectual, academic, and personality assessments completed within the last year
 - C. Current diagnosis and psychotropic medications (if any)
 - D. Brief medical history
 - E. Copies of psychological/psychiatric evaluations, if applicable
- 4) The **case** file will contain all other documents.
- 5) The **medical** file will be forwarded to the Health Care Coordinator.
- 6) Juveniles must be court ordered into the CRC for a period of time determined by the committing court/placing agency.
- 7) The Superintendent/designee has the authority to refuse admission of a juvenile if ORC 2152.19(A) (3) and Juvenile Rule 7 have not been followed.
- 8) An **Admission Report** (blue form) is to be completed for each juvenile admitted to the CRC.

- 9) The transporting officer may fingerprint the youth at COYC if necessary.
- 10) No youth will be admitted to the CRC if he/she is seriously ill, needs emergency medical/mental health services, and/or is under the influence of drugs/alcohol to the point of not being able to be appropriately processed (i.e. provide information during intake interview, stand up for searches, showering, de-licing treatment, etc.).
- 11) If any of the above conditions exist, the staff member conducting the intake will notify the Shift Supervisor **immediately**.
- 12) The Shift Supervisor will request that the transporting officer take the juvenile to the emergency room of Memorial Hospital of Union County for a medical/mental health assessment.
- 13) If the transporting officer is unable to provide transportation, the CRC will accept the youth, and make arrangements to transport the youth to the Hospital for the medical/mental health assessment.
- 14) **No youth will be admitted to the CRC without a Discharge Summary if being transferred to the CRC directly from a medical or mental health facility.**
- 15) The Discharge Summary **must** include specific instructions as to the level of care and treatment needed to accommodate the youth's medical/mental health condition in a secure correctional facility.
- 16) If the youth has made a suicide threat, gesture, or attempt either in the Courtroom or during transport to COYC, the transporting officer will notify the intake staff upon arrival at the facility.
- 17) COYC will make arrangements for suicide risk assessments if appropriate. See Procedure Number 4-9 **Suicide Threats/Gestures**.
- 18) The CRC can refuse admission of a juvenile due to the risk presented by the juvenile's physical and/or psychological condition.
- 19) The staff member conducting the intake interview will obtain the necessary information for Center records and complete the following:
 - A. Enter "REC", the resident's name, and committing county/placing agency in the Docket Book, date and time admitted, and have the transporting officer sign the Docket.
 - B. Sign any documents of commitment or transportation. The transporting officer will complete the top section of the **Admission Report**.
 - C. Enter the resident's name and committing county/placing agency on the **Daily Population Sheet** and **CRC Population Sheet**. Record the time of admission to the left of the resident's name, and the committing county/placing agency and assigned room number to the right of the resident's name. "CRC" will also be noted on the case file.

- D. Enter the resident's name and committing county/placing agency on the numerical entry sheet or repeater sheet, as appropriate. (Note: Do not consider residents released for a court appearance as repeaters). Be sure to write down the specific charge, not just "unruly" or "delinquent."
- E. Prepare a case folder for new admissions. The resident's name and First Time Number will be at the top of the label. The committing county/placing agency and date of birth will be on the bottom of the label. The date and time received will be recorded on the sheet inside the front cover of the folder. Repeat number will also be recorded on this sheet.
- 20) The intake person will conduct an initial health screen.
 - 21) If a resident reports injuries at intake, the intake person in consultation with the Shift Supervisor will determine if the resident should be transported for outside medical treatment.
 - 22) The intake person will make the initial determination if a resident should be restricted from participating in active recreation due to injuries or illness and refer the resident to the Health Care Coordinator for further evaluation and assessment.
 - 23) The intake person will notify the Control Center if there are activity restrictions.
 - 24) The intake person will make the initial determination if the resident has special dietary needs and verify the reported condition with the resident's parents/legal guardian or primary health care provider.
 - 25) The intake person will notify the kitchen of special dietary needs.
 - 26) The intake person shall explain COYC's zero tolerance policy regarding sexual abuse or harassment and shall present a copy of the agency's PREA information sheet for youth to be read, signed and returned by the resident. This sheet is filed in the resident's case file and must be updated annually.
 - 27) The intake person will record the name of the staff conducting the strip search on the ***Intake Report***.
 - 28) The resident will be advised of his/her right to telephone his/her custodial parent OR legal guardian at admission, and be permitted to make the telephone call as soon as practical after admission. Intake phone calls will be recorded on the ***Juvenile Phone Log***.
 - 29) Residents will be showered and de-liced if appropriate prior to joining general population. The de-licing treatment will be recorded on the ***Record for Lice Treatments***.
 - 30) Residents will join a living unit and participate in programs as soon as practical after admission.
 - 31) Residents will be fed an intake meal or snack if they are hungry at admission, and if it is more than one hour until the next meal.
 - 32) Each CRC resident will receive a copy of the ***Resident Handbook*** upon admission. Within 10 days of intake, staff and a Level 3 CRC resident will conduct a comprehensive personal orientation with residents covering the entire ***Resident Handbook***.

- 33) Orientation will include informing residents of their right to be free from sexual abuse/assault/harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.
- 34) Both the resident and staff member conducting the handbook orientation shall sign and date the document at the end of the handbook verifying this orientation.
- 35) This handbook orientation document shall be filed in the resident's orientation file.
- 36) The Resident Handbook may be kept in residents' sleeping rooms or in their CRC Therapy Binders.
- 37) Within two (2) business days from admission, the Health Care Coordinator will perform an initial health assessment to determine the health and medical needs of the resident.
- 38) The Health Care Coordinator will confirm and notify Center staff of any special needs (i.e. restricted diet, restricted physical activity, etc.).
- 39) The Health Care Coordinator will make referrals to appropriate medical and/or mental health professionals either on-site or off-site.
- 40) The Health Care Coordinator will notify the committing court/placing agency if off-site follow-up medical/mental health care is necessary.

CENTRAL OHIO YOUTH CENTER

SECTION 16: Community Residential Center (CRC)

SUBJECT: Program Services

PROCEDURE NUMBER: 16-6PR

EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20; 11/18/21; 11/17/22

REVIEW DATE: 11/2023

REVISION DATE: 3/2/08; 3/1/14; 11/1/14; 11/1/15

NUMBER OF PAGES: 1

RELATED ODYS STANDARD(S): 5139-37-18

RELATED PREA STANDARD(S): 332, 377

SUPERINTENDENT: M. Jandow

DATE: 11/17/22

POLICY

The Center will provide programs and activities for CRC residents utilizing a cognitive-behavioral therapy curriculum.

PROCEDURE

- 1) CRC residents will participate in approximately 360 hours of programming (exclusive of school) during a 90-day placement in the CRC.
- 2) CRC residents will participate in psycho-educational groups and cognitive-behavioral groups facilitated by the clinical staff.
- 3) CRC residents will also be eligible to participate in horticultural therapy and pet therapy if appropriate and approved by the treatment team.
- 4) Residents may complete community service hours during their stay in the CRC. A *Community Service Time Sheet* will be provided for those residents participating in community service. A copy of the *Time Sheet* will be forwarded to the resident's Probation/Parole Officer upon release.
- 5) CRC residents will be provided daily active and leisure recreation time.
- 6) CRC residents may participate in non-sectarian religious services if they choose to participate.
- 7) CRC residents will have access to books for both educational and leisure reading.
- 8) CRC residents may keep library books in their sleeping rooms as per the *Resident Handbook-CRC*.
- 9) The Center will recruit community volunteers to provide mentoring, arts and crafts classes, AIDS awareness groups, horticulture therapy, pet therapy, youth groups, etc. for CRC residents.

- 12) Teachers are responsible for completing the *GED Test Referral Form* for students who are **eligible and appropriate** to take the GED Test.
- 13) CRC residents must have the proper written permission on file from their parent/guardian/court official and made their fee payment before taking the GED test.

CENTRAL OHIO YOUTH CENTER

SECTION 16: Community Residential Center (CRC)

SUBJECT: Resident Handbook
PROCEDURE NUMBER: 16-8PR
EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20;
11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 11/1/14; 11/1/15
NUMBER OF PAGES: 1
RELATED ODYS STANDARD(S): 5139-37-14; 5139-37-16; 5139-37-17
RELATED PREA STANDARD(S): 378
SUPERINTENDENT: *M. Jardon* **DATE:** *11/17/22*

POLICY

The CRC will utilize a behavior management system, based on rewards for positive behavior and sanctions for negative behavior that is understood by both residents and staff.

PROCEDURE

- 1) The behavior management system, including the disciplinary process for residents, is explained in the *CRC Resident Handbook*.
- 2) The *CRC Resident Handbook* is attached and incorporated as part of this procedure.
- 3) Each resident will receive a copy of the *CRC Resident Handbook* upon admission to the Center.
- 4) New admissions will participate in Orientation facilitated by a clinical staff member and Level 3 resident.
- 5) The *CRC Resident Handbook* will be read aloud, and residents will be given an opportunity to ask questions during the orientation process.
- 6) Staff will receive a copy of the *CRC Resident Handbook* during Pre-Service training.
- 7) Staff are expected to be familiar with the contents of the *CRC Resident Handbook*, especially the Level system and disciplinary consequences.

10) The Re-entry Report will include progress reports on behavior and treatment goals, educational progress, discharge diagnosis, and recommendations for aftercare.

CENTRAL OHIO YOUTH CENTER

SECTION 16: Community Residential Center (CRC)

SUBJECT: Volunteer Services
PROCEDURE NUMBER: 16-11
EFFECTIVE DATE: 11/20/14; 11/19/15; 11/17/16; 11/9/17; 11/8/18; 11/14/19; 11/12/20;
11/18/21; 11/17/22
REVIEW DATE: 11/2023
REVISION DATE: 3/2/08; 1/10/11; 11/1/14; 11/1/15
NUMBER OF PAGES: 2
RELATED ODYS STANDARD(S): 2-CO-1G-01
RELATED PREA STANDARD(S): 332, 377
SUPERINTENDENT: *M. Jandow* **DATE:** 11/17/22

POLICY

The Center will recruit and utilize community resources to enhance and expand services and programs offered to residents.

DEFINITIONS

Community Resources – individuals and/or community organizations that provide voluntary services.

Mentor – a volunteer who provides mentoring services in an individual or small group setting in the community.

Proselytize – To convert a person from one belief, doctrine or faith to another.

Volunteer - a person who chooses freely to provide services with no promise of compensation.

PROCEDURE

- 1) The Center will recruit and utilize community resources to provide animal-assisted and horticultural therapy programs, religious service, art therapy, community service projects, mentoring, etc.
- 2) Volunteers will provide professional services only when certified or licensed to do so. Volunteers shall not provide professional program services requiring licensure or certification in the areas of Mental Health, Social Work and Health Care. Congregate religious services are professional program services that require a certified/licensed clergy person.
- 3) The Center will assure that all volunteers or organizations providing volunteers understand that it is forbidden to exert one belief or faith over another belief, faith or non-faith. Proselytizing or attempting to convert someone from one belief or faith to another

- 8) If there is damage to the sleeping room, a **Youth Behavioral Incident Report (YBIR)** will be completed and submitted to the Shift Supervisor.
- 9) The Deputy Operations Administrator and/or Superintendent will determine whether to contact the committing court/placing agency and request restitution.
- 10) The resident will be instructed to change into his/her personal clothing.
- 11) Uniforms must be laundered before being re-issued.
- 12) The resident's personal clothing will be returned to him/her.
- 13) Personal property stored in the Intake Office along with medications will be given to the person accepting the resident.
- 14) The **Youth Property** form must be completed and signed by the resident and staff.
- 15) The person receiving the resident will sign the Docket Book indicating the date and time the resident was released.
- 16) The date and time of the resident's release will be recorded in red ink in his/her case file **and** on the **Daily Population Sheet**.
- 17) The residents name will be removed from the **CRC Population List**.
- 18) The resident's **Youth Profile Sheet** will be removed from the binder in the Control Center and placed in his/her case file.

is strictly forbidden. Moreover, it is prohibited to condition a youth's participation in a non-religious event on the youth's religious belief or non-belief.

- 4) Youth have the option of participating in volunteer-led programs/activities. Staff shall screen and select appropriate youth.
- 5) The Center will assure that chaplains notify youths when a non-religious event is being sponsored by a religious organization.
- 6) Volunteers will be at least twenty-one years of age. The Superintendent may waive the age requirement based on the specific circumstances of the volunteer activity/program (e.g. church youth groups).
- 7) Volunteers must complete and submit a volunteer packet, and submit to a background check.
- 8) Volunteers will attend an orientation class conducted by COYC staff.
- 9) A list of approved volunteers will be kept in the Intake Office for identification purposes.
- 10) Volunteers must present a picture identification card upon entering the Center, and must sign the *Visitors' Log*.
- 11) COYC staff are responsible for supervising residents during volunteer-sponsored activities. Volunteers shall be escorted by staff when moving to their assigned program area.
- 12) Staff are responsible for reporting issues and or concerns regarding volunteers to an Administrator and/or the Superintendent.
- 13) Volunteer programming and activities shall compliment existing programming.
- 14) The Program Manager will coordinate and supervise the Center's Volunteer Programs.
- 15) The Program Manager will periodically evaluate the Volunteer Program and report any issues/concerns to the Superintendent.
- 16) The Center will maintain personnel files on all volunteers to include: *Application for Volunteer Services, Volunteer Agreement, Volunteer Guidelines, Confidentiality Agreement*, Criminal Background Check, and references.
- 17) The Superintendent has the authority to terminate a volunteer's participation in CRC programs if deemed appropriate.

