

# Tulsa County Juvenile Detention Home



## Policy and Procedure Manual

Tulsa County Detention Annual Policy and Procedure Review

\_\_\_\_\_ initials \_\_\_\_\_ date

\_\_\_\_\_ initials \_\_\_\_\_ date

\_\_\_\_\_ initials \_\_\_\_\_ date

Tulsa County Juvenile Detention Home  
Acknowledgment and Agreement Form

I, \_\_\_\_\_ by the signature below,  
Print Name Position

acknowledge that I have access to the Tulsa County Juvenile Detention Policy & Procedure

Manual from \_\_\_\_\_ and understand that I am

responsible to read, be current, to adhere and follow its policies and procedures. I further understand that in circumstances if I fail to adhere to the policies and procedures, that I will be subject to disciplinary action, up to and including discharge from employment. This document does not constitute an employee contract.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Administrative Staff Signature

\_\_\_\_\_  
Date

## Tulsa County Juvenile Detention Policy and Procedures Training

Trainee    Trainer    Date

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# **Administration and Management**

**01-01**

**Legal Establishment**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration and Management</b>	<i>Policy</i>	<i>01-01</i>
<b>Legal Establishment</b>	<i>Current Revision</i>	<i>03/29/00</i>
<i>Approved by:</i> <b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>07/01/11</i>

**The Detention Home is a legal entity established by Oklahoma State law to operate as a public agency that is a part of the Juvenile Bureau of the District Court of Tulsa County.**

**I. Purpose:** The purpose of this policy is to state that the Detention Home is authorized to be a part of the Juvenile Bureau of the District Court of Tulsa County by state law. The law also establishes the Juvenile Bureau to act as the parent agency and governing authority of the Detention Home.

**II. Applicable To:** State law is applicable to everyone.

**III. Definitions:**

**Parent Agency/Governing Authority:** The Juvenile Bureau is the controlling body of the Detention Home.

**IV. Procedures:** None

**V. Authority/References:**

10 O.S. Section 7305-1.8 (Detention Home)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-01)

**VI. Enclosures:**

10 O.S. Section 7305-1.8 (Detention Home)

**VII. Action:**

Facility Administrator and the Director will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced Facility Policy and Procedure I: 01-01

Distribution: Detention Home Policy and Procedure Manual



# OSCN

Oklahoma Statutes

Cite As: 10 O.S. § 7305-1.8 (OSCN 1999)

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## Title 10. Children.

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Chapter 73  
Article V. Juvenile Bureaus  
§ 7305-1.8. Detention Home.

A detention home may be established as a part of the juvenile bureau of the court. Judge of the Juvenile Division, subject to the general administrative authority of the Presiding Judge of the Judicial Administrative District, may appoint necessary technicians and other employees for such home in the same manner as is provided herein for the appointment of other employees of the bureau, their salaries to be fixed and paid in the same manner as the salaries of other employees.

### *Historical Data*

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Added by Laws 1968, c. 282, § 208, eff. Jan. 13, 1969. Amended by Laws 1995, c. 352, § 160, eff. July 1, 1995. Renumbered from § 1208 [10-1208] of this title by Laws 1995, c. 352, § 199, eff. July 1, 1995.

The Oklahoma Supreme Court Network

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# **Administration and Management**

**01-02**

**Licensing Requirements**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-02</i>
Licensing Requirements		<i>Current Revision</i>	<i>2/29/2011</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure, and practice of the Detention Home to comply with state law that requires its program to meet the Oklahoma Office of Juvenile Affairs (OJA) licensing requirements.**

**I. Purpose:** The Detention Home must comply with 10 O.S. Section 7304-1.3(C) of the Oklahoma Juvenile Code that states all detention facilities shall be certified by the Office of Juvenile Affairs (OJA). To be certified, a juvenile detention facility shall be required to meet standards for certification promulgated by the Board of Juvenile Affairs. OJA provides these certification standards in their *Requirements for Secure Juvenile Detention Facilities*.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Office of Juvenile Affairs (OJA)** – The State of Oklahoma’s Department of Juvenile Justice is tasked by law to establish operational standards for the facility and to monitor the Detention Home’s mandatory compliance of such directives.

**Requirements for Secure Juvenile Detention Facilities** – OJA’s standards of certification and licensing. These are mandatory OJA Board approved requirements imposed upon all juvenile detention facilities operating in the state of Oklahoma.

### **IV. Procedures:**

**A. General Guidelines** – Title 10 O.S. Section 7304-1.3 gives OJA the authority to require the facility to submit to annual inspections, unannounced visits and contract reviews by OJA.

**1. Annual Inspections** – OJA notifies the facility in writing and request that relevant staff and documentation be available on a specific date for their review. Facility administrative staff shall coordinate with OJA representatives to ensure they have access to any required areas or documentation. A report is generated and submitted to the director and the Facility Administrator.

**2. Unannounced Visits** – OJA staff may perform unannounced visits to evaluate the program on an impromptu basis. Facility administrative staff shall coordinate with OJA representatives to ensure they have access to any required areas or documentation. A report is generated and submitted to the director and the Facility Administrator.



3. **Contract Review** – Once every two years the facility submits to a contract review to ensure that facility remains in compliance with updated OJA rules and policies. The facility will be issued a new license after the contract review verifies compliance with OJA requirements.

B. **Staff Responsibility** – Staff shall maintain an attitude and demeanor appropriate to fostering a positive atmosphere of cooperation.

1. **Administrative Staff** – The facility Program Manager, Accreditation Manager or the shall coordinate with facility representatives to ensure that they have an appropriate work area, access to required documentation, staff and residents.

2. **Unit-Shift Supervisors** – In the absence of the facility Program Manager, Accreditation Manager, or the Facility Administrator, a Unit-shift Supervisor shall coordinate the facility response to OJA representatives' needs.

C. **Official Report** – Any time OJA visits the facility for the purpose of license monitoring, an official report shall be produced by the OJA representatives performing the visit.

1. **Deficiencies and Recommendations** – If the facility is deemed deficient in regard to any specific standard, OJA shall detail the required section, list specific violations of said section and require a plan of action to bring the facility into compliance. Additionally, OJA staff may make recommendations on general facility operations.

## V. **Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-02)

VI. **Enclosures:** None.

## VII. **Action:**

Facility and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-02

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-03**

## **Agency Philosophy and Mission**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-03</i>
Agency Philosophy and Mission		<i>Current Revision</i>	<i>07/01/11</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure, and practice of the Detention Home to establish a written document delineating the facility’s mission within the context of the Oklahoma Juvenile Justice System. This written mission statement shall be reviewed annually and updated as needed.**

**I. Purpose:** The Oklahoma Juvenile Code allows for the creation of the Detention Home to be a part of the Tulsa County Juvenile Bureau of the District Court, which has been in operation since 1969 and expanded to its current size in 1995. The facility and its programs are operated at public expense with the legally tasked mission to operate as a “secure detention” facility for the temporary care of residents who require secure custody while under the jurisdiction of the Oklahoma Juvenile Justice System pending disposition or placement. Additionally, the Detention Home is committed to providing a high quality of life program while ensuring the best possible *Care, Welfare, Safety and Security* of both staff and residents. The Detention Home mission statement defined in this policy will address and include all programs and services available in the facility.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

**A. General Guidelines** – The Detention Home’s Mission and Philosophy shall be congruent with the mission and philosophy of its parent agency, Tulsa County Juvenile Bureau.

1. **Review** – To ensure that the facility operations and goals remain congruent with agency mission and philosophy, administrative staff shall review the Detention Home Mission and Philosophy statement annually.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-03)

**VI. Enclosures:**

1. Detention Home Philosophy Statement
2. Detention Home Belief Statement
3. Detention Home Core Values

**VII. Action:**

Facility Administrator and the Director will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-03.

Distribution: Detention Home Policy and Procedure Manual

# **Tulsa County Juvenile Detention Home Philosophy**

## **CARE, WELFARE, SAFETY, SECURITY**

As employees of the Tulsa County Juvenile Detention Home, our philosophy is that we provide the "best" possible *Care, Welfare, Safety and Security* for the Staff we work with and the detained youth entrusted to our care.

# We Believe!

We, the Detention Counselors of the  
Tulsa County Juvenile Detention Home, believe:

The Children we work with are our reason for  
being here and that it is our purpose to provide  
them with a safe and secure environment.

We have the ability to influence children's behavior  
through consistently leading by example and  
providing a positive role model for the children.

As professionals, working in the community service  
field, it is through our interactions with children  
every day that we help them seek the  
opportunity for a better life.

We believe that each of us and what we do is a vital and  
important part in meeting the needs of children in our care.

**This is why we are here!**  
**This is what WE BELIEVE!**

# Tulsa County Juvenile Detention Home

## Core Values

<p><b>Justice (1)</b></p> <p>We shall provide fair and equal treatment for everyone in our environment. The value of operating with justice must be evident in every facet of what we do.</p>	<p><b>Excellence (2)</b></p> <p>We strive to provide the best care, welfare, safety, and security. The staff and administration of the facility are committed to a continual process of striving for the highest standards in service to the community we serve. As individuals and as a team we understand that seeking to excel in every aspect of what we do is vital to our success as an agency.</p>	<p><b>Dignity (3)</b></p> <p>As professionals working in the community service field, we are committed to shaping our environment with the recognition that every human being is entitled to a proper sense of pride and self-respect. As an organization we are dedicated to providing an atmosphere in which each individual is respected and their dignity valued.</p>	<p><b>Integrity (4)</b></p> <p>As individuals and as an organization we recognize the necessity of consistent and dependable action that is faithful to the highest ethical principles and standards of conduct that govern what we do. Each of us accepts personal responsibility to exemplify behaviors that are legal, moral, ethical and in the best interest of children, their families, staff, the facility and the Juvenile Bureau.</p>	<p><b>Stewardship (5)</b></p> <p>As stewards of public funds allocated to the protection of the community we serve, we commit to maximize the use of time, resources, and property efficiently with due process and with careful consideration. We shall regard the public's trust in our staff as our greatest asset.</p>
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# **Administration and Management**

**01-04**

**Setting Agency Goals**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration and Management</b>		<i>Policy</i>	<i>01-04</i>
<b>Setting Agency Goals</b>		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy procedure and practice that the Facility Administrator of Detention will be responsible for working with detention staff to formulate departmental goals, establish policies and priorities relating to detention goals, and translating goals into measurable objectives for accomplishment by detention staff. Each goal will include an implementation plan.**

**I. Purpose:** Goals facilitate decision making, especially in an atmosphere of change. Measurable objectives facilitate the process of program review, monitoring, and evaluation.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

### **IV. Procedures:**

**A. General Guidelines** - Annually, between November 1 and December 31, the Facility Administrator or Designee will advise detention staff, through the Program Manager and Unit Shift Supervisors during staff meetings and memos, to provide written input for detention goals.

**B. Staff Responsibility** - Staff members will return their written suggestions for goals to Supervisors by December 31. Staff is required to document at least one suggestion or recommendation on the standard form provided.

**C. Administrative Responsibility** - The Facility Administrator, Administrative staff, and Unit-Shift Supervisors will develop and finalize these goals during the following week.

**1. Submission of Goals** - The Facility Administrator will submit the goals to the Director by January 31 of each year.

**2. Staff Notification** - The finalized goals will be posted in the control room for staff to acknowledge and review. These will also be discussed during the subsequent January staff meeting.

**D. Facility Goals Review** - The Facility Administrator or Designee, will monitor at least annually, progress toward achieving goals. A written evaluation will be submitted to the Director each year.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-10, 1A-13)

**VI. Enclosures:** None.**VII. Action:**

Facility the Program Manager will be responsible for compliance monitoring of this policy.  
Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-04.

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**01-05**

**Staff and Resident Communication**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-05</i>
Staff and Resident Communication		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**The role of the detention counselor is to provide the maximum amount of supervision and interaction with the residents that time and the situation provides. A Counselor's involvement and interaction with the residents is vital in maintaining a positive communication between staff and residents.**

**I. Purpose:** The Detention Home recognizes the value of a system of two-way communication between all levels of staff and juveniles. Regular channels of communication are necessary for role modeling, establishing a positive relationship, assigning responsibility, supervising work, and managing corrective efforts.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** I None.

**IV. Procedures:** Since residents are never left alone in any area of the program or building except when they are locked in their sleeping rooms, staff members are always available for communication with any resident.

**A. General Guidelines for residents in their rooms** - When residents are in their sleeping rooms, contact is maintained in the following manner:

1. **Interval** - Designated counselors visually check on each resident at least once every 15 minutes. This procedure applies whenever a resident is confined to his/her sleeping room.
2. **Documentation** – Resident Room checks are documented on a Room Supervision Log (Form 3428) which is attached to the residents sleeping room door. Staff is required to place their initials in the appropriate time slot after checking a resident’s condition while in his or her room.
3. **Auditory Monitoring** - Whenever a resident occupies a sleeping room, a designated staff member regularly monitors the room with the control room intercom. This allows the staff member to respond to the legitimate needs of the resident.

**B. Special Behavior Management** - Residents with serious issues such as those on suicide precautions may require a higher level of supervision and contact.

1. **Interval** - When a resident is confined to his/her sleeping room for an exceptionally serious reason, a designated counselor may visually check on him/her at least once every 5 minutes.

2. **Documentation** – Resident Room checks are documented on a Room Supervision Log (Form 3428) which is attached to the residents sleeping room door. Staff are required to place their initials in the appropriate time slot after checking a resident’s condition while in his or her room.
- c. **Contact while in the Program** – The facility will maintain an adequate amount of staff to allow continual contact with residents.
1. **Responsibilities of Direct Care staff** - Detention Counselors act as the resident’s first contact on the unit and are responsible for relaying important information, documenting significant resident behavior and tending to the general needs of residents.
  2. **Responsibilities of Unit-Shift Supervisor** – Should a resident have an issue which can not properly be addressed by a detention counselor it is the duty of the unit-shift supervisor to address the situation. This may include emergency phone calls, contacting a resident’s probation or OJA worker, or forwarding the situation for resolution by a facility administrator.
    - a. **Group Sessions** – The unit-shift supervisor insures that each day residents are required to attend group with all other residents on the unit. At that time residents are encouraged to bring problems or issues with other residents or staff to the table for discussion. This provides a structured setting where residents learn to reach a resolution verbally, and appropriate methods of problem solving are modeled by staff.
  3. **Role of Administrative Staff** – The Facility Administrator is ultimately responsible for the care and welfare of all residents placed in the detention home and has directed that all administrative staff regularly visit all units and resident sleeping areas to assess resident and staff morale and to insure all residents are receiving full benefit of the program.
- D. **Resident Grievances** – Grievances are available to any resident seeking resolution of a situation from administration. All grievance forms are confidential and are handled by the facility grievance coordinator, although the unit-shift supervisor shall attempt to informally resolve the resident’s grievance. The Formal Grievance procedure is delineated in Grievance policy and is reviewed with each resident at admission.

## V. **Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-24)

## VI. **Enclosures:**

1. Room Supervision Log (Form 3428)
2. Resident Grievance Form

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-05

Distribution: Detention Home Policy and Procedure Manual

# ROOM SUPERVISION LOG

RESIDENT'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ ROOM NO: \_\_\_\_\_

PURPOSE FOR RESTRICTION: One Hour Room Time Out  Resident's Request   
 Room Confinement  Medical   
 Extended Room Confinement  Suicide Watch

7:30 a.m. _____	11:00 a.m. _____	2:30 p.m. _____	6:00 p.m. _____
7:45 a.m. _____	11:15 a.m. _____	2:45 p.m. _____	6:15 p.m. _____
8:00 a.m. _____	11:30 a.m. _____	3:00 p.m. _____	6:30 p.m. _____
8:15 a.m. _____	11:45 a.m. _____	3:15 p.m. _____	6:45 p.m. _____
8:30 a.m. _____	12:00 noon _____	3:30 p.m. _____	7:00 p.m. _____
8:45 a.m. _____	12:15 p.m. _____	3:45 p.m. _____	7:15 p.m. _____
9:00 a.m. _____	12:30 p.m. _____	4:00 p.m. _____	7:30 p.m. _____
9:15 a.m. _____	12:45 p.m. _____	4:15 p.m. _____	7:45 p.m. _____
9:30 a.m. _____	1:00 p.m. _____	4:30 p.m. _____	8:00 p.m. _____
9:45 a.m. _____	1:15 p.m. _____	4:45 p.m. _____	8:15 p.m. _____
10:00 a.m. _____	1:30 p.m. _____	5:00 p.m. _____	8:30 p.m. _____
10:15 a.m. _____	1:45 p.m. _____	5:15 p.m. _____	8:45 p.m. _____
10:30 a.m. _____	2:00 p.m. _____	5:30 p.m. _____	9:00 p.m. _____
10:45 a.m. _____	2:15 p.m. _____	5:45 p.m. _____	

## ADMINISTRATIVE REVIEW

TWENTY FOUR HOUR ADMINISTRATIVE REVIEW OF ROOM CONFINEMENT

CONDUCTED BY \_\_\_\_\_ UNIT-SHIFT SUPERVISOR \_\_\_\_\_ DATE \_\_\_\_\_





# **Administration and Management**

**01-06**

**Supervision of Non-Facility Staff**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration and Management</b>	<i>Policy</i>	<i>01-06</i>
<b>Supervision of Non-Facility Staff</b>	<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i> <b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, practice and procedure of the Detention Home that staff must directly and continuously supervise non-facility service personnel working in Detention, including ex-offenders and trustees on a work release program.**

**I. Purpose:** Direct and continuous supervision is required in order to eliminate the possibility of contraband being passed between authorized visitors, including service personnel, and a resident as well as to ensure that residents are not being negatively influenced by authorized visitors or service personnel. Maintaining control and knowledge of personnel in the facility is vital to the security and safety of Detention.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any authorized visitor who enters the facility.

### **III. Definitions:**

**Authorized Visitors** – Any individual or group that has contacted and has received permission by the Facility Administrator, Director or Chief Judge to enter Detention. This will include inspectors, exterminators, building maintenance staff, required technicians, tour groups, special speakers and other individuals authorized access by the Facility Administrator and administrative staff.

### **IV. Procedures:**

**A. Staff Responsibility** - All visitors will be met in the main detention lobby and are required to sign in. All visitors will be briefed on facility rules on contraband and reminded that no weapons of any kind will be allowed into the program.

**1. Contraband Notice** - Any person entering the facility may be searched for contraband and may be required to present picture identification before entering the facility. Signs are posted at the facility entrance citing

**2. Authorized Visitor Log** – Visitors will sign in on the Authorized visitors Log, or another sign in sheet as may be appropriate to their duties within the facilities. Any individual seeking access to the facility must also document the nature of their visit.

**3. Authorized Visitor Badge** - After signing in and being cleared for entry, the visitor will be issued an “Authorized Visitor Badge” which must be worn while in the facility and returned at the conclusion of the visit.

4. **Confidentiality Notice** – Any visitor entering the facility must agree to maintain the facility confidentiality policy regarding Office of Juvenile Affairs requirements for confidentiality.

**B. Supervision**

1. **Staff Responsibility** - Before entering any area where residents are present, a staff member will be assigned to escort the authorized visitor only to areas required for the completion of relevant duties.
  - a. Staff supervision of authorized visitors will be continuous while in the presence of any residents or while working in an area that residents have access to.
2. **Facility Keys** - No Authorized visitor will be issued any facility keys without approval of the Facility Administrator or his designee.

**C. Visitors Responsibilities**

1. **Facility Expectations** -All visitors are expected to maintain themselves in a professional and appropriate manner while in the facility.
  - a. All visitors are notified of the rules regarding contraband and any visitor found to be in violation of these rules will be asked to leave the facility pending a review of the Facility Administrator.

- D. **Facility Administrator's Authority** - Any visitor found to be interacting with a resident in an unprofessional or inappropriate way will be asked to leave the facility pending a review of the Facility Administrator.

1. **Denial of Access** -The Facility Administrator reserves the right to deny any individual access if their presence presents a threat to the safety, security and order of the facility.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-34)

**VI. Enclosures:** None.**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-06

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-07**

**Superintendent's Report to Court**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-07</i>
Superintendent's Report to Court		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy procedure and practice that the Detention Facility Administrator will direct designated facility staff to collect required statistical data and other necessary information used in a written report to be submitted to the Court at least annually; concerning the extent and availability of services and programs for residents in the Juvenile Detention Home.**

**I. Purpose:** The Facility Administrator is responsible at the end of each calendar year to provide to the Juvenile Bureau Director a written report detailing the extent and availability of the services and programs provided by the facility for detained juveniles during that past year. This annual report assists the Juvenile Bureau and Court in making appropriate administrative, program and budget decisions for the future. It is essential to have a comprehensive report about the operation of the Detention Home in order to maintain best practices and to utilize a continuous quality improvement process to examine the facility's delivery of services with a goal of improving efficiency and quality.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. Annual Report:**

1. **Content:** The Facility Administrator will formulate his written report based on information gathered from the following resources:
  - Detention computer statistical reports; generating monthly, quarterly, semi-annual, and annual population data.
  - Monthly Health Care Services Reports
  - Monthly Food Services Reports
  - School Attendance Reports
  - Incident Reports

- Equipment, Physical Plant, and Space Needs Assessments
- Annual Review of Programs and Services
- Policy and Procedure Manual Review

**B. Monthly Report:** Facility staff shall use the detention information system to produce monthly reports for program monitoring.

**1. Content:** Regular reports to the Bureau enable the agency to be informed about programs activities and problems in Detention. These reports shall include:

- Major Developments
- Major Incidents
- Population Data and Statistics
- Assessments of Staff and Resident Morale
- Major Problems and Plans of Correction

**C. Data Collection:** The Facility Administrator will receive reports, data and statistical information from the following individuals:

- 1. The Facility Administrator or Designee** - will provide monthly, quarterly and annual statistical data on resident population demographics, staffing patterns, regional billing, Federal Meal Reimbursement Programs and other pertinent information.
- 2. The Program Manager** - will provide regular reports on the status of the physical plant, equipment needs and space assessments as well as assisting the review of all programs and facility services.
- 3. The Accreditation Manager** - will monitor all aspects of facility operations and programming to ensure compliance with state and ACA requirements and assist in gathering any information necessary for the Superintendents report.
- 4. The Kitchen Manager** - will provide monthly, quarterly and annual meal reports for the Superintendent's review.
- 5. The Facility Nurse** - will assist in providing monthly medical reports for the Superintendent's review.

**D. Distribution:** The following Bureau Staff and Detention Home personnel will receive a copy of the completed report.



- Copies of the Annual Report will be forwarded to Director of the Juvenile Bureau representing the parent agency for dissemination to the Chief Judge and the Citizens Review Board.
- Each Administrator of the Detention Home will be issued a copy.
- Each Staff member in the facility will be allowed to review the Annual Report.
- Copies will be distributed to the Superintendents files and to the Standards Accreditation Files.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-25, 1A-28)

**VI. Enclosures: None.****VII. Action:**

Facility Administrator or the Designee will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-08**

**Annual Review**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-08</i>
Annual Review		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

It shall be the policy, procedure and practice of the Juvenile Detention Home to maintain written operational procedures in a specified manual that is accessible to all staff. The manual will be reviewed annually and any changes will be disseminated to designated staff, volunteer and if applicable, facility residents. Additionally staff will have access to the parent agency's policy and procedure manual. The Manuals will address, at a minimum, the following areas:

- **Organizational Chart**
- **Recruitment and Promotion**
- **Equal Employment Opportunity Policy**
- **Job Descriptions and Qualifications**
- **Employee Benefits**
- **Employee Evaluations and Records**
- **Staff Development**
- **Deferred Compensation Program (Retirement)**
- **Employee Discipline**
- **Employee Grievance Policy**
- **Employee Political Activity**

**I. Purpose:** Written personnel regulations help ensure equitable and consistent treatment of all employees. Every employee has the opportunity to review the detention home policy and procedure manual as well as the Juvenile Bureau personnel policies.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. Review of Detention Home Policy and Procedure Manual** - In order to maintain an accurate and updated Detention Home Manual, an annual review of Detention policies, procedures, programs, services and overall operations will be conducted during January of each calendar year by the Facility Administrator or Designee.

1. **Administrative Responsibility** - The Facility Administrator, Accreditation Manager, Program Manager and Unit-Shift Supervisors annually review the following policies and procedures of the manual and update or revise as necessary:
  - Detention's philosophies and goals.
  - Detention's description and mission.
  - Public information programs.
  - Management information policy and procedure.
  - Policy and Procedure Manuals
  - Policy regarding contract employees.
  - Personnel regulations and requirements.
  - Training (in service and community settings).
  - Shift assignments and operating duties.
  - Program policies and procedures.
  - School
  - Gym
  - Arts and Crafts
  - Group discussions
  - Visitation (including telephone and mail).
  - Dayroom activities and games.
  - Religious services
  - Food services.
  - Security and control policies and procedures.
  - Security and safety systems.
  - Emergency plans.
  - Rules and disciplinary policies and procedures.
  - Medical policies and procedures.
  - Escape and runaway procedures.
  - Physical plant, equipment and space assessments.
  - Space arrangement and procedures in event of group arrest.
  
2. **Staff Review** – The Facility Administrator will discuss the proposed revision with all staff members annually. Input from the staff will take place at this time.
  
3. **Training** - The Facility Administrator will discuss with the staff all revisions to the manual. This will also be done annually. Training sessions covering the revisions will be conducted.
  
4. **Availability** - Revisions to the policy & procedure manual will be made available to the staff during the first quarter—yearly. Staff meeting notes will document all reviews.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-05, 1A-21, 1A-22, 1C-01)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Administrative staff will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-08

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-09**

**Staff Participation in Goals**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-09</i>
Staff Participation in Goals		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Juvenile Detention Home to provide that the Facility Administrator, with participation from facility staff, formulate and review facility goals annually.**

**I. Purpose:** Goals facilitate decision making, especially in an atmosphere of change. Measurable objectives facilitate the process of program review, monitoring and evaluation. Additionally, employee participation can be achieved through staff meetings, bureau proposals, or the standard employee goals participation form. Employee observations are considered vital to the administrative decision process.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

**A. Staff Participation** - Each individual member of the staff from every level and function within the Detention Home will be requested to present recommendations during the development and review of organizational goals, manuals, policies, procedures, rules and regulations. Staff recommendations may be made through one of the following:

1. **Annual Goals Request Form** – Staff are issued this form each year with a notification memo requesting that they submit at least one goal for the following year. The Facility Administrator has made participation mandatory.
2. **Staff Meetings** - In response to discussions and review of minutes during a staff meeting, suggestions and recommendations to Supervisors may be forwarded for review by the Facility Administrator.
3. **Annual Reviews** - In response to early or final drafts of organizational goals, policies, procedures, rules and regulations circulated among the staff for the purpose of reading.

**B. Administrative Responsibility** – The Facility Administrator or Designee shall facilitate staff participation in the goal formulation process.

1. **Notification** – The Facility Administrator or Designee shall notify each staff member in writing of their responsibility to participate and expected levels of response. The Facility Administrator or Designee shall also designate a specific time for completion of staff responses.

2. **Formulation of Goals** – After reviewing staff responses, current facility status and other relevant variables the administrative team shall submit facility goals for approval by the Facility Administrator no later than the last day of January. The Facility Administrator shall approve or amend goals before forwarding to the Director. Each goal shall have specific measurable implementations.
3. **Goals Review** – The Program Manager or Designee shall facilitate an annual goals review and submit a report to the Facility Administrator. The goal review shall include evaluation of goals set the prior year and the results obtained.

#### **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-10, 1A-13)

#### **VI. Enclosures:**

1. Staff Goals Participation Form

#### **VII. Action:**

Facility Supervisors will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-09.

Distribution: Detention Home Policy and Procedure Manual



Tulsa County Juvenile Detention Home  
Employee Recommendation/Suggestions  
2005 Annual Detention Goals

EMPLOYEE: \_\_\_\_\_  
(Print Name)

POSITION: \_\_\_\_\_

*Please take the time to review and evaluate our facility policies and procedures, existing programs, activities, training or other areas of concern you may have regarding the operation of the Detention Home. Listed are (6) six general operation MI areas for consideration. Under each area, you may write as many goals/suggestions that you would like to see our facility accomplish in the upcoming year. You are only required to submit (1) one goal/suggestion from any area to the Superintendent. Once you have completed this form, sign and date it, and then return it to the facility Program Manager. Attach additional comments if necessary.*

**Equipment Needs** *(Any Equipment Needed)*

**Administrative & Management** *(General Administration, Fiscal Management, Personnel, Training & Staff Development, Juvenile Records, Information Systems, Volunteers)*

**Physical Plant** *(Building & Safety Codes, Size/Organization/Location, Juvenile Housing, Environmental Conditions, Program & Service Areas, Administrative & Staff Areas, Security)*

**Institutional Operations** (*Security & Control, Safety & Emergency Procedures, Rules & Discipline, Juvenile Rights, Special Management*)

**Facility Services** (*Food Services, Sanitation & Hygiene, Health Care*)

**Juvenile Services** (*Admission & Orientation, Social Services, Academic, Literacy & Library, Recreation & Activities, Religious Programs, Mail, Telephone, Visiting, Release*)

Employee Signature

Date

# **Administration and Management**

**01-10**

**Staff Meetings**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-10</i>
Staff Meetings		<i>Current Revision</i>	<i>10/03/6/03</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home to provide for monthly meetings between the Facility Administrator, administrators and supervisors. Additionally, every facility supervisor is required by the Facility Administrator to conduct and document at minimum, monthly meeting with their assigned staff.**

**I. Purpose:** The Detention Home will have regular staff meetings at least monthly to identify problems and create solutions, exchange ideas, communicate policy and procedures, communicate program and resident information, share advice concerning general Juvenile Bureau affairs, and share information concerning the Juvenile Justice system on a local, state, and national level.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:** The Facility Administrator of Detention will insure that regular staff meetings occur and for leading them and/or seeing that they are conducted by a qualified representative.

**A. Regular Staff Meetings**

1. **Staff Responsibility** - All detention employees are responsible for attending staff meetings unless receiving prior approval, from the Facility Administrator, is given to be excused.
2. **Documentation** - Meeting minutes will be taken by a designated staff member and copies will be posted on the control room bulletin board for staff review and for staff who were absent.
3. **Attendance** - Additional meetings may be required at Superintendent's discretion and attendance will be required as in regular meetings. Unexcused absence will result in disciplinary action and/or loss of time.
4. **Staff Submissions** - Meeting agendas will be developed by the Unit-Shift Supervisors and input from all staff may be submitted for consideration.

5. **Juvenile Bureau Proposal Plan** – All staff have the ability to present a formal proposal to the Facility Administrator and the Director utilizing the Juvenile Bureau Proposal Plan (form 4718). When staff have an idea that may help improve the environment they are encouraged to complete a proposal and turn it in for consideration. In a system of two way communication the input of staff is vital.

**B. Unit-Shift Supervisor's Meeting** - Meeting agendas will be developed by the Detention administrative managers and input from Unit-Shift Supervisors and/or all staff may be submitted. Unit-Shift Supervisor meetings will be held once each month. The management group will meet each Monday prior to staff meeting to prepare for the meeting and evaluate program matters.

1. **Documentation** - Meeting minutes will be taken by a designated staff member and copies will be placed in the Detention Shift Log and posted on the control room bulletin board for staff review.
2. **Attendance** - Additional meetings may be required at Superintendent's discretion and attendance will be required as in regular meetings. Unexcused absence will result in disciplinary action and/or loss of time.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-23, 1A-24, 1A-25, 1A-27)

## **VI. Enclosures:**

## **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-10

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**01-11**

**Conflict of Interest**

## Tulsa County Juvenile Detention Home Policy and Procedures

General Administration		<i>Policy</i>	<i>01-11</i>
Conflict of Interest		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure, and practice of the detention home to provide clear standards for employee conduct regarding the use of their position for personal gain and engaging in activities which may result in a conflict of interest.**

**I. Purpose:** Nothing in this policy is intended to conflict with JBDC 005: Code of Conduct. The Juvenile Bureau Code of Conduct is applicable to all detention home staff and this policy is meant to supplement and specify its role in the detention home.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

#### **A. General Guidelines**

1. **Code of Conduct** - All staff of the detention home are bound by the Tulsa County Employee Handbook Code of Conduct. This code delineates specific details of employee responsibilities regarding ethical and legal considerations in relation to personal behavior.
2. **Time Value** - During office hours, each County employee must devote all of his/her time, attention and effort to the business of the Juvenile Bureau.
3. **Use of County Resources** - County employees are not allowed to use shift or office hours, County vehicles or County equipment for private gain.

#### **B. Conflict of Interest**

1. **Abuse of Position** - No employee of the Tulsa County Juvenile Detention Home is allowed to use his/her official position to solicit or secure special privileges or exemptions for himself/herself or others, except as may be provided by law.
2. **Impairment of Judgement** - No employee of the Tulsa County Juvenile Detention Home is allowed to accept or solicit other employment, which would impair his/her efficiency or independence of judgment in the performance of his/her public duties.
3. **Financial Interest** - No employee of the Tulsa County Juvenile Detention Home is allowed to own, operate, or have any financial interest, directly or indirectly, in any facility, group home,

institution, etc., where children are placed by the Tulsa County Juvenile Court, either directly or indirectly.

4. **Outside Employment** - An employee may accept other employment outside the employee's regular work hours so long as it does not interfere with normal work responsibilities at the detention home. If an employee engages in other employment, he/she is responsible for reporting it to both his/her supervisor and the Facility Administrator.

### **C. Compensation**

1. **Gifts, Loans and Favors** - No employee of the Tulsa County Juvenile Detention Home is allowed to directly or indirectly solicit or accept any compensation, gift, loan, entertainment, favor or service that would create an influence in the discharge of his/her official duties.
2. **Outside Compensation** - No employee of the Tulsa County Juvenile Detention Home is allowed to receive or solicit any compensation from any source other than the State of Oklahoma via Tulsa County, unless otherwise provided by law, in response to services connected with his/her position as an officer or employee of any County agency, especially if this compensation could result in an impairment of his/her judgement.

### **D. Confidentiality**

1. **Inappropriate Release of Information** – Employees of the detention home shall not disclose or offer to disclose confidential information acquired by reason of his/her official position to any person, group or others not entitled to receive such confidential information, or use information for his/her personal gain or benefit.

### **V. Authority/References:**

JBDC P&P 005: Code of Conduct  
Administrative Order JV-9  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-21)

### **VI. Enclosures:**

1. Administrative Order JV-9
2. JBDC P&P 005: Code of Conduct

### **VII. Action:**

The Facility Administrator and Unit-Shift Supervisors and will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.



Replaced: Facility Policy and Procedure I:01-11

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

PEG 141988

IN THE DISTRICT COURT OF TULSA COUNTY

STATE OF OKLAHOMA  
JUVENILE DIVISION

DON E. AUSTIN, COURT CLERK  
STATE OF OKLA. TULSA COUNTY

(  
(AD-88-9

ADMINISTRATIVE ORDER

CONFLICT OF INTEREST POLICY

This Conflict of Interest Policy is issued in addition to an existing policy referred to as TCP 1305. It is intended that there be no conflict between these policies. In any event, there should be, this Administrative Order would govern.


This policy shall apply to the Juvenile Judge and all employees of the Tulsa County Juvenile Bureau. No employee shall own, operate, or have any financial interest, directly or indirectly, in any facility, group home, institution, etc., where children are placed by the Tulsa County Juvenile Court, either directly, or indirectly.

Dated this 13th day of December, 1988.



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Thomas S Crewson  
CHIEF JUDGE  
JUVENILE DIVISION

 <b>Tulsa County</b>	<b>POLICY Code of Conduct</b>		Policy File Number <b>JBDC 005</b>	
	Juvenile Bureau of the District Court/Administration & Management/Personnel Policies			
Approved By: <b>C. CLEY TUNNELL, DIRECTOR</b>		Approval Date <b>12/12/2002</b>		Superceded: <b>NEW</b> Previous Date: <b>NIA</b>

**A. SUMMARY:**

It is the policy, procedure and practice of the Juvenile Bureau to provide all employees with a clear guide to basic professional and ethical conduct, based upon mutual respect, honesty and integrity.

**B. PURPOSE:**

Through implementation of a written Code of Conduct, the Juvenile Bureau seeks to ensure that all employees are informed of, and agree to abide by, the basic guidelines which form the ethical and professional foundation for successful performance of their duties at the Bureau.

**C. APPLICABLE TO:**

All employees, departments and facilities of the Juvenile Bureau.

**D. ENCLOSURES:**

1. Juvenile Bureau Employee Code of Conduct Contract
2. Juvenile Bureau Secondary Employment Reporting Form
3. Juvenile Bureau Incident Report, Form 4667
4. Juvenile Bureau Ethics Quick Test
5. Juvenile Bureau Employee Annual Criminal Record Questionnaire

**E. REFERENCES:**

1. 10 O.S. 7305-1.1 *et seq.* (Juvenile Bureaus)
2. 74 O.S. 840-2.5 ("Whistle Blower")
3. 10 O.S. 7104 (Abuse Reporting)
4. P.L. 101-336; 104 Stat 327 (Americans with Disabilities Act)
5. Tulsa County Procedure for ADA Grievance and Appeal (TCP 007)
6. Tulsa County Policy for Management and Security of Information Resources (TCP 2004)
7. Tulsa County Policy for Sexual and Other Unlawful Harassment (TCP 2006)
8. Juvenile Bureau Organizational Charts Policy (JBDC 011)
9. Juvenile Bureau Hiring or Supervising of Relatives (Nepotism) (JBDC 013)
10. Juvenile Bureau Smoke-Free Workplace Policy (JBDC 014)
11. Juvenile Bureau Drug-Free Workplace Policy (JBDC 015)
12. Juvenile Bureau Fireman's and Weapons Restrictions Policy (JBDC 016)
13. Juvenile Bureau Workplace Violence Policy (JBDC 017)
14. Juvenile Bureau Disciplinary Actions Policy (JBDC 019)
15. Juvenile Bureau Leave Policy (JBDC 036)
16. Juvenile Bureau Use of Force Policy (JBDC 037)

<b>POLICY</b>	Pelley File Number
CODE OF CONDUCT	<b>JBDC 005</b>

## F. POLICIES:

### GENERAL CONDUCT POLICIES

1. It is the policy of the Juvenile Bureau to:
  - a. Establish a uniform Code of Conduct for all employees.
  - b. Provide each employee with a copy of the Code of Conduct
  - c. Require each employee to sign an Employee Code of Conduct Contract (Enclosure 1) in which the employee shall:
    - 1) Acknowledge receiving and reading the Code of Conduct
    - 2) Agree to abide by provisions of the Code of Conduct.
    - 3) Affirm understanding that Code of Conduct violations may result in disciplinary actions.
2. All employees of the Juvenile Bureau will adhere to the highest ethical standards and perform their jobs in a consistently professional manner.
3. Employees will devote full time, attention and effort to their assigned duties during working hours and will, to the best of their ability, fulfill the duties of their position.

### DISCIPLINARY ACTION

4. Any employee found to be in violation of the Code of Conduct may be subject to disciplinary action consistent with the Juvenile Bureau Disciplinary Actions Policy, JBDC 019, as well as any applicable penalties which may be imposed by legal authorities.

### ORDERS

5. While on duty and/or while in the workplace, employees will carry out, to the best of their ability, legitimate orders from a superior in their direct chain of command.  
 NOTE: For clarification of departmental structure, refer to the Juvenile Bureau Organizational Charts Policy, JBDC 011.
6. In fulfilling the responsibilities of their positions, employees will follow all applicable rules, regulations, policies and procedures of the Juvenile Bureau and Tulsa County, regardless of whether those directives are communicated through formal or informal policy statements; administrative, operational or field memoranda; verbal or written supervisory instructions; electronic or audio-visual means; or in any other form which the employee may reasonably be expected to understand as authoritative.
7. Employees will at all times abide by all applicable federal, state and municipal laws and regulations, including but not limited to those governing the specific conduct of Juvenile Bureau employees. However, nothing in this Code of Conduct shall be misconstrued to abridge any legal rights to which an employee is entitled under applicable federal, state or local laws.

### F. POLICIES: (CONTINUED)

#### REPORTING FOR DUTY

8. Employees will refrain from excessive tardiness, absenteeism or leave from work. If unable to report for duty as assigned, the absent employee must promptly notify the supervisor and provide a valid reason for the absence. Employees will request and use leave in accordance with provisions of the Juvenile Bureau Leave Policy (JBDC 036) and will additionally comply with any procedures or requirements adopted by the individual department or facility with regard to notification of absence.

#### USE OF FORCE

9. The use of force in the workplace is prohibited other than in the exceptional circumstances provided in the Juvenile Bureau Use of Force Policy (JBDC 037).

#### INVESTIGATIONS

10. Employees will cooperate with any duly authorized investigation into allegations of illegal activity or other violations of Bureau policies, procedures or directives.

#### CONTRABAND AND SECURITY

11. Employees will not provide any juvenile/client with any item(s) of contraband, i.e., any item(s) prohibited for all juveniles/clients by Juvenile Bureau or department/facility policy or prohibited for a specific juvenile/client or group of juveniles/clients by administrative or supervisory directive.
12. Employees will not bring or cooperate with others in bringing illegal drugs, unauthorized weapons or ammunition, beverages containing alcohol, or other dangerous items into or upon any Juvenile Bureau or other Tulsa County facility, building or vehicle, or onto any surrounding grounds, parking area or property.
13. Employees will secure, and take proper precautions to prevent clients and visitors from having access to, any and all medicines, drugs, intoxicating substances, weapons authorized for law enforcement officers, and other potentially hazardous items, whether individually owned, property of the Bureau, or otherwise present.

#### PERSONAL PROPERTY

14. Employees are discouraged from storing personal papers and effects at work. The Bureau assumes no responsibility for the security or privacy of employees' personal property.

#### CLIENT RELATIONSHIP

15. Employees will provide notification to the supervisor immediately upon becoming aware that a relative or close acquaintance has become a client under care and supervision of the Juvenile Bureau. Unless there is no practical alternative, employees will not directly supervise or provide care for clients with whom they are closely related or acquainted.

NOTE: Also see F-47 and F-48, Page 10, for additional and more specific policies regarding employee relationships with clients and former clients.

# POLICY

## CODE OF CONDUCT

Policy File Number

**JBDC 005**

### F. POLICIES: (CONTINUED)

#### PARTISAN POLITICAL ACTIVITY

16. Employees shall:

- a. NOT use official authority or influence for purposes of interfering with an election to or nomination for office.
- b. NOT wear campaign paraphernalia (buttons, hats, badges, etc.) during on-duty hours or activities, nor otherwise display such paraphernalia in work areas.
- c. NOT become a candidate for an elective state office in a partisan election.
- d. NOT directly or indirectly solicit, accept, collect, handle, disburse or account for assessments, contributions, or other funds for a partisan political purpose during on-duty hours or activities.

#### PROHIBITED RELATIONSHIPS BETWEEN EMPLOYEES

17. It is prohibited to engage in any activity with another Bureau employee which compromises the integrity of professional relationships, including but not limited to the following:
- a. Sexual relationships between a supervisor and a subordinate at any level within the chain of command are prohibited.
  - b. No employee shall participate in a hiring, promotional or disciplinary decision which involves another employee or applicant with whom there exists an intimate personal relationship, or which violates the Juvenile Bureau Policy for Hiring or Supervising of Relatives (Nepotism), JBDC 013.
  - c. Supervisors will not mandate contributions to non-profit organizations.
  - d. Business transactions between a supervisor and a subordinate are prohibited.
  - e. Business transactions between employees are discouraged and may be prohibited if the transaction is found to compromise the integrity of professional relationships.

#### CONFIDENTIALITY

18. Employees shall neither purposely nor negligently make any unauthorized disclosure of any record or information acquired due to their position which:
- a. Is confidential under the law.
  - b. Violates the privacy of a client.
  - c. Violates the privacy of another employee.
  - d. Endangers the safety of any person.
  - e. Jeopardizes the security or property rights of any department, facility or property of the Juvenile Bureau, Tulsa County, or any other public office or agency. -
19. Problems/issues of a client are not to be disclosed to or discussed with another client by an employee.
20. Employees will not disclose clients' names and/or other information (e.g., a Social Security Number) identifying individual clients to any person outside the Bureau who does not have a legally valid right and reason to receive such client information.

# POLICY

## CODE OF CONDUCT

Policy File Number

**JBDC 005**

### F. POLICIES: (CONTINUED)

#### MISUSE OF POSITION FOR PERSONAL GAIN

21. Employees shall:

- a. NOT receive, accept or solicit, directly or indirectly, any money or other valuable thing for the performance or non-performance of their duties, other than the compensation provided by law.
- b. NOT use or attempt to use Bureau position, badge, or other I.D. to secure any special privilege, exemption or compensation for themselves or others.
- c. NOT use or attempt to use any confidential information acquired due to their position for personal gain.
- d. NOT sell or attempt to sell products or services to the Bureau, whether as an individual or as a participant in any company in which the employee has a substantial financial interest, unless such sale is after public notice and competitive bidding or is valued at less than \$500.
- e. NOT engage in or attempt to engage in the performance of work pursuant to a service contract unless specifically approved by the Director after disclosure that the person is an employee of the Bureau.
- f. NOT receive, accept or solicit any gift or compensation (other than the compensation lawfully provided by the Bureau) from any source that would impair the employee's independence of judgment in the performance of duties as a Bureau employee.
- g. NOT accept or solicit other employment that would impair the employee's independence of judgment in the performance of duties as a Bureau employee.

NOTE: See provisions for "Secondary Employment," Page 8, for additional information on this topic.

#### BUREAU PROPERTY, SUPPLIES, EQUIPMENT & FUNDS

22. Employees will appropriately use and conserve Bureau resources, taking reasonable care to prevent or minimize losses due to waste, wear, misuse, damage and/or theft.
23. Employees will not misuse the Bureau's property, supplies, equipment or funds for personal benefit or gain or other malfeasance, and will not aid or abet misuse by any other person(s).
24. Upon discharge or resignation from employment with the Juvenile Bureau, departing employees will return all Bureau-owned supplies and equipment, including but not limited to pagers, cell phones, badges, other I.D., keys, key cards, etc.
25. Employees are advised that any and all Bureau-owned properties (including-but not limited to offices and other work spaces and furnishings) are subject to being searched, lawfully and appropriately, at any time without additional notice.

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# POLICY

## CODE OF CONDUCT

Pelley File Number

JBDC 005

### F. POLICIES: (CONTINUED)

#### I.D. BADGES

26. Bureau staff must wear approved I.D. badges when in the main area of the Juvenile Bureau building, in the Judicial area, in a Courtroom, or in the Detention Home. Supervisors may also appropriately direct employees to wear 1.0. badges in other locations and/or for specified functions and/or occasions.

#### COMMUNICATION, INFORMATION & INTERNET RESOURCES

27. Employees using Bureau equipment or facilities to communicate at any time, or otherwise communicating during on-duty hours or activities, shall have no expectation that such communications are private. While it is not the intent of the Juvenile Bureau to routinely monitor employees' workplace communications, the Bureau reserves the right to do so within the law.
28. Access to and use of workplace information resources {including, but not limited to, internet access) shall comply with Tulsa County's Policy for Management and Security of information Resources, TCP 2004.

NOTE: Among other provisions, TCP 2004 requires all employees to be provided with Rules for Acceptable Use of Information Resources (Form 4412), which includes a detailed overview of acceptable and unacceptable uses of information resources, as well as a provision that "At any time and without notice, data of any kind processed by any means using Tulsa County information processing equipment, materials or implements is subject to being intercepted, monitored, examined, investigated, and otherwise *lawfully and appropriately* used by authorized representatives of Tulsa County..."

#### WORKPLACE VIOLENCE

29. Juvenile Bureau employees are prohibited from committing acts of violence, including but not limited to the making of threats, at any time while on duty or while otherwise in the workplace. Violence is the use, attempted use, or threatened use of force against the person or property of another individual, and includes forcefully aggressive or threatening behavior, whether verbal or physical, which causes – or is intended to cause, or shows reckless disregard for the potential to cause- physical injury or psychological trauma to another person or persons.
30. Employees shall immediately report to the immediate supervisor any workplace violence, including threats, as well as any instance of illegal or unauthorized possession, use or sale of weapons, explosives, firearms or any other dangerous item in violation of Bureau policies.

NOTE: For additional details, refer to the Juvenile Bureau Workplace Violence Policy, JBDC 017; the Bureau Firearms and Weapons Restrictions Policy, JBDC 016; and the Bureau Use-of Force-Policy, JBDC 037.



### F. POLICIES: (CONTINUED)

#### AUDIO/VIDEO TAPING OF EMPLOYEES

31. Employees will comply with the following policies with regard to audiotaping, videotaping or making other electronic recordings while on duty and/or while in the workplace:
- a. Prohibited unannounced recording  
Employees are prohibited from secretly taping other employees unless authorized for investigative purposes by the Juvenile Bureau Director, Chief Judge or Presiding Judge.
  - b. Permissible recording with consent  
Employees may make a recording of meetings, discussions or other activities, provided all employees present consent to the taping.
  - c. Permissible recording without consent  
Employees may make *non-secret* recordings without the consent of all employees present if the recording is:
    - 1) Required by law, legal regulation, or Bureau policy or procedure; OR
    - 2) For valid historical preservation of events by the Bureau; OR
    - 3) For valid educational/training purposes of the Bureau.

#### PROFESSIONAL COURTESY/CONDUCT

32. Juvenile Bureau employees will refrain from publicly making slanderous remarks regarding another agency, its services, staff or clients. Any employee wishing to address an issue with another agency will contact the Juvenile Bureau Director's office and submit an Incident Report (Form 4867, Enclosure 3) to the Director if appropriate.
33. Juvenile Bureau employees will refrain from using or attempting to use their positions to influence a judge's decision or docketing schedule for personal advantage, benefit or gain.

#### "WHISTLE BLOWER" DISCUSSION OF OFFICE OPERATIONS

34. Supervisors shall neither prohibit nor take disciplinary action against any employee for:
- a. Discussing public information.
  - b. Reporting any violation of state or federal law, rule or policy; mismanagement; gross waste of public funds; abuse of authority; or a substantial and specific danger to public health or safety.
  - c. Reporting such information without giving prior notice to the employee's supervisor or anyone else in the employee's chain of command.
  - d. Discussing the operations and functions of the agency, either specifically or generally, with the Governor, members of the Legislature, other elected officials, or the elected officials' authorized appointees or representatives.

<b>POLICY</b>	Policy File Number
CODE OF CONDUCT	<b>JBDC 005</b>

F. POLICIES: (CONTINUED)

DISCRIMINATION

35. Applicants and employees will not be favored or discriminated against, in any way, because of race; color; gender; age; national origin; ancestry; marital status; disability (so long as the disability does not render the employee unable to perform the work for which employed); creed; or political or religious opinions or affiliations (except when such person advocates or belongs to an organization which advocates the overthrow of our constituted government by force or violence).
36. The Juvenile Bureau does not discriminate on the basis of disability (as defined in the Americans with Disabilities Act) in admission or access to, or treatment or employment in, its programs or activities. Employees shall not be discriminated against in any aspect of employment due to disability or association with a person with a disability.

NOTE: See Tulsa County's Procedure for ADA Grievance and Appeal, TCP 007, for procedures for filing and responding to any alleged ADA violation.

SEXUAL HARASSMENT & HOSTILE WORK ENVIRONMENT

37. Engaging in any conduct which constitutes sexual harassment or contributes to a hostile work environment is prohibited.

NOTE: Refer to Tulsa County's Policy for Sexual and Other Unlawful Harassment, TCP 2007. Among other provisions, TCP 2007 provides for a no-tolerance prohibition of sexual and other unlawful harassment in the workplace; written notice and acknowledgment of related rights and responsibilities; and procedures for documenting and responding to complaints of such harassment.

SECONDARY EMPLOYMENT

38. Employees of the Juvenile Bureau who accept employment with a secondary employer must promptly report this fact to the department supervisor or facility director by submitting a completed Juvenile Bureau Secondary Employment Reporting Form (Enclosure 2). Prior approval is recommended, but is not required unless the secondary employment would affect the employee's work at the Bureau, in which case the employee must obtain pre-approval of the department supervisor or facility director and the Bureau Director. The Secondary Employment Reporting Form is to be updated at least annually by the employee if secondary employment continues beyond one year, and the employee is to advise the supervisor of any interim change in secondary employment status as such changes occur.
39. Employees' Secondary Employment Reporting Forms will be reviewed by the department supervisor or facility director, who will then forward the report to the Bureau Director with an appropriate recommendation. The Director will review the report and certify approval or, if the secondary employment is found to be in conflict with Juvenile Bureau policies, denial.

*Secondary employment provisions continue on the following page*

# POLICY

## CODE OF CONDUCT

Pelley File Number

**JBOC 005**

### F. POLICIES: (CONTINUED)

#### SECONDARY EMPLOYMENT (CONTINUED)

40. Employees are prohibited from engaging in secondary employment which:
- Results in absenteeism, tardiness or non-availability for work; or
  - Impairs independence of judgment in the performance of Bureau duties; or
  - Otherwise adversely affects Juvenile Bureau job performance; or
  - Adversely affects the professional image of the employee or the Bureau; or
  - Presents an unacceptable risk of injury to the employee, clients or others.

NOTE: Employees uncertain whether prohibitions apply to a secondary employment position they are considering are encouraged to consult with the department supervisor or facility director before accepting secondary employment.

41. Employees engaged in secondary employment shall comply with the following provisions:
- Employees will not wear Bureau apparel, badges, or other Bureau I.D. in secondary employment. (The Bureau Director may grant an exception in cases where increased awareness of an employee's association with the Bureau would serve the best interest of the Bureau.)
  - Secondary employment uniforms and related paraphernalia are not to be worn while an employee is on duty in any capacity at the Juvenile Bureau.

#### ALCOHOL AND DRUGS

42. It is the policy, procedure and practice of the Juvenile Bureau to ensure the establishment of an alcohol- and drug-free workplace. Employees shall comply with all applicable provisions of the Juvenile Bureau Drug-Free Workplace Policy, JBDC 015.

#### SMOKE•FREE WORKPLACE

43. It is the policy, procedure and practice of the Juvenile Bureau to prohibit smoking by any person in any enclosed space (including all building areas and vehicles) owned or operated by the Juvenile Bureau, except for certain designated "smoking permitted" areas which meet specific criteria. Employees shall comply with all applicable provisions of the Juvenile Bureau Smoke-Free Workplace Policy, JBDC 014.

#### ALLEGATION OF ILLEGAL ACTIVITY

44. Any employee arrested for or charged with an illegal act by law enforcement authorities, whether on or off the job, shall notify the department supervisor or facility director of the arrest and/or charge before the end of the employee's next working day.

*Illegal activity provisions continue on the following page*

# POLICY

## CODE OF CONDUCT

Policy File Number

**JBDC 005**

### F. POLICIES: (CONTINUED)

#### ALLEGATION OF ILLEGAL ACTIVITY (CONTINUED)

45. Upon learning that an employee has been arrested for and/or charged with any illegal act, whether on or off the job, the department supervisor or facility director may proceed with an appropriate independent investigation while charges (if any) are pending adjudication and may take appropriate disciplinary action if the investigation produces a preponderance of evidence that the employee engaged in any illegal activity which jeopardizes employee or client safety or which is otherwise contrary to the best interest of the Bureau.

NOTE: If disciplinary action is taken while legal charges are pending, the employee will be provided administrative due process in accordance with the Juvenile Bureau Disciplinary Actions Policy, JBDC 019.

46. Each employee of the Juvenile Bureau will complete the Employee Annual Criminal Record Questionnaire (see Enclosure 5) on an annual basis at the time of the employee's job performance evaluation. Refusal to sign and return the required form or giving misinformation thereon will constitute insubordination and willful neglect of duty and may be the basis for disciplinary action, up to and including termination of employment.

#### ACTIVITIES & RELATIONSHIPS WITH CLIENTS & FORMER CLIENTS

47. Employees shall comply with the following policies with respect to activities and relationships with clients and former clients:

- a. Employees will avoid contact with current and former clients outside the context of professional interaction.

NOTE: Contact with current and former clients is unacceptable if such contact is non-professional, social, and/or otherwise inappropriate, unless approval of the interaction has been obtained in advance from the department supervisor or facility director. (Department supervisors and facility directors may have differing levels of tolerance in this regard. Employees are thus encouraged not to violate the contact prohibition without first obtaining guidance concerning the department/facility's specific contact policies.)

- b. Employees will maintain a professional demeanor in the event of incidental or accidental contact with a client or former client in the community.
- c. Employees will notify the supervisor immediately of any established relationship (e.g., social, familial, sexual, or other) with a new client, so that an appropriate plan of action can be established.
- d. Supervisory staff will inform and consult with the department supervisor or facility director regarding all matters of this type, and all resulting plans of action.
- e. The department supervisor or facility director will report to the Bureau Director regarding all matters of this type, and any subsequent developments of interest.

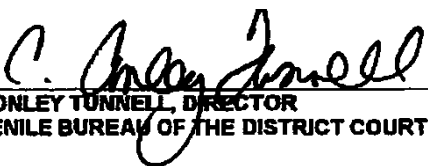
<b>POLICY</b>	Policy File Number
CODE OF CONDUCT	<b>JBDC 005</b>

F. POLICIES: (CONTINUED)

48. With respect to appropriate professional interaction with current and former clients, employees shall abide by the following guidelines:
  - a. Employees will transport only clients of their own sex, unless the department supervisor or facility director has given prior approval.
  - b. Employees will at all times render care and otherwise perform their duties in a manner that respects the dignity and rights of the individual.
  - c. Client abuse and/or neglect in any form will not be tolerated. As required by Oklahoma Statutes (10 O.S. 7104), employees shall promptly report any incident of abuse/neglect to the appropriate supervisor using the Bureau's Incident Report (Form 4667, Enclosure 3).
  - d. Employees are not to discuss with current or former clients the personal life, personal problems, personal concerns or personal information (including, but not limited to, phone numbers and addresses) of any employee or other client.
  - e. Employees in professions having an established code of ethics and/or professional code of conduct pertaining to their profession shall abide by all such standards (in addition to the Juvenile Bureau Code of Conduct).

RESPONSIBILITY FOR IMPLEMENTATION

49. All employees will share responsibility for adhering to and enforcing this policy. Violations of the Code of Conduct will be brought to the attention of the appropriate supervisor for resolution through appropriate channels.
50. The Juvenile Bureau Citizens' Advisory Committee will be responsible for monitoring compliance with this policy.
51. The Juvenile Bureau CQI Committee will be responsible for reviewing this policy annually and facilitating approved revisions as the need arises.
52. Any exception(s) to this policy will require written approval of the Chief Judge of the Juvenile Division or the Director of the Juvenile Bureau.

  
**C. CONLEY TUNNELL, DIRECTOR**  
**JUVENILE BUREAU OF THE DISTRICT COURT**

  
**ROBERT J. N. DICK, CHAIRMAN**  
**BOARD OF COUNTY COMMISSIONERS**

## JUVENILE BUREAU

### Employee Code of Conduct Contract

I agree to abide by the Tulsa County Juvenile Bureau's Policy entitled, "Code of Conduct". I understand that any bMacl1 of this Code Conduct may be grounds for disciplinary action up to and including termination of employment. I have read the Code of Conduct and acknowledge receiving a copy of it.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisory Witness

\_\_\_\_\_  
Date

cc: Personnel File

# JUVENILE BUREAU

## Secondary Employment Reporting Form

I understand my position with Juvenile Bureau is my primary employment, and my secondary employment will not interfere with my position, duties, and schedule with the Bureau. I further state the secondary employment does not represent a conflict of interest in any way with job duties, work schedule, or mission of the Juvenile Bureau, and, is not in any violation of any prohibitions against such employment specified by law or Bureau policy.

I further agree to update this report annually and advise my supervisor of any changes in my secondary employment status as those changes may occur.

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Work Location - - - - -

**Position/Duties** - - - - -

Work **Schedule** - - - - -

Signature of **Employee**: - - - - - Date: \_\_\_\_\_

Recommendation of Facility/Department Head: - - - - -

\_\_\_\_\_

Signature of facility/Department **Head**: - - - - - Date : - - - - -

Recommendation of Bureau Director: - - - - -

\_\_\_\_\_

Signature of Bureau **Director**: - - - - - Date: \_\_\_\_\_

**TULSA COUNTY JUVENILE BUREAU  
INCIDENT REPORT**

IRN: \_\_\_\_\_

Type of Incident Complaint: \_\_\_\_\_

Department: \_\_\_\_\_

Occurrence: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

(1) Subject/Victim: \_\_\_\_\_ Position: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ JOLTS ID: \_\_\_\_\_

(2) Subject/Victim: \_\_\_\_\_ Position: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ JOLTS ID: \_\_\_\_\_

Others Related to this Report:	A. Complainant	B. Victim	C. Suspect/Subject	D. Witness	E. Staff	F. Other
Code	Name	Position		Telephone		

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Details of Incident/Complaint: (Who, What, When, Where, How, and Why? Attach all related statements and documentation)**

\_\_\_\_\_

\_\_\_\_\_

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(Continued on reverse side.)

Signature of Reporting Person	Date	Signature of Supervisor	Date
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Form 4667 (7-01) Front



Details of Incident/Complaint (continued):

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Resolution:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Evidence/Property (List and Describe, Chain of Evidence Attached, Repair Request Completed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was Property Damaged/Destroyed: Yes \_\_\_\_\_ No \_\_\_\_\_ (If YES, is a Request for Restitution Needed/Attached?)  
Location of Evidence/Property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notification (List the Time and All Notifications of this Incident/Complaint including SUPERVISOR/DEPARTMENT HEAD/DIRECTOR):

\_\_\_\_\_  
\_\_\_\_\_

Enclosures (list all attached Statements, Receipts and Related Documents):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was Use of Force Required: Yes \_\_\_\_\_ No \_\_\_\_\_  
Was Medical Attention Required: Yes \_\_\_\_\_ No \_\_\_\_\_  
Disciplinary Action Taken: Yes \_\_\_\_\_ No \_\_\_\_\_

DISTRIBUTION (Administrative Use Only):

Administrative File \_\_\_\_\_ Department File \_\_\_\_\_ Assigned Counselor \_\_\_\_\_ OJA \_\_\_\_\_ District Attorney's Office \_\_\_\_\_  
Judicial \_\_\_\_\_ TPD \_\_\_\_\_ TCS \_\_\_\_\_ Recorded on Database \_\_\_\_\_ Other (Specify) \_\_\_\_\_  
Supervisor \_\_\_\_\_ Superintendent's Review \_\_\_\_\_ Director Review \_\_\_\_\_  
date date date

## **JUVENILE BUREAU**

### ***Ethics Quick Test***

Juvenile Bureau values integrity, and wants to maintain its reputation for doing the right thing. If you're ever in a situation where the right thing is unclear or doing the right thing is difficult, examine your options with this Ethics Test:

- 1.) Could it harm Juvenile Bureau's reputation?
- 2.) Is it ethical and legal?
- 3.) What would my family and friends say?
- 4.) How will it look in the newspaper?
- 5.) Would I bet my job on it?
- 6.) Should I check?
- 7.) How would my actions appear to others?

Juvenile Bureau's reputation, and your conscience and good name, are far too important and valuable to do anything that wouldn't pass the Ethics Test. In a nutshell, this means that all of us must tell the truth and fulfill our promises. And we must treat all stakeholders: fellow employees, clients, supporting agencies, and communities with respect, honesty, and decency.

If there is ever any doubt please do not hesitate to ask your immediate supervisor/department head, or contact the Bureau Director's office at (918) 596-5900. Someone will be happy to advise you, or direct you to the appropriate person for answers.

**Tulsa County Juvenile Bureau  
EMPLOYEE ANNUAL CRIMINAL RECORD QUESTIONNAIRE**

**Employee Name:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Safety is of paramount concern to the Tulsa County Juvenile Bureau. Employees who have committed criminal offenses could be a threat to the safety of clients and staff. The Tulsa County Juvenile Bureau commits itself to make the best possible effort to maintain a workplace safe for all clients and employees. Please answer the following questions truthfully and honestly. Refusal to sign and return the required form or giving misinformation on the required questionnaire form will constitute insubordination and willful neglect of duty and may be the basis for disciplinary action, including termination of employment.**

<b>HAVE YOU WITHIN THE PAST 365 DAYS;</b>	<u><b>YES</b></u>	<u><b>NO</b></u>
1. Entered a plea of guilty or nolo contendere to a state (any state) or federal felony charge/misdemeanor?	_____	_____
2. Been convicted of a state (any state) or federal felony offense/misdemeanor?	_____	_____
3. Been charged with a state (any state) or federal felony offense that was reduced to a misdemeanor offense to which you entered a plea of guilty or nolo contendere?	_____	_____
4. Entered a plea of guilty or nolo contendere to, or been convicted of, a state (any state) or federal misdemeanor charge involving illegal chemical substances or illegal sexual activity?	_____	_____
5. Entered into a deferred prosecution agreement with a state (any state) or federal prosecutor?	_____	_____
6. Been arrested or cited for any traffic offense?	_____	_____

**FURTHER, It is the duty of every Tulsa County Juvenile Bureau employee to immediately notify his/her supervisor and the Juvenile Bureau Executive Team following the occurrence of any incident listed below; and to follow up with a written Incident Report within 48 hours of the incident. A supplemental report must be submitted no later than 24 hours after the final disposition of the action:**

1. If the employee is charged with a state or federal felony charge/misdemeanor.
2. If the employee enters a plea of guilty or nolo contendere to a state (any state) or federal felony charge/misdemeanor.
3. If the employee is convicted of a state (any state) or federal felony offense/misdemeanor.
4. If the employee enters a plea of guilty or nolo contendere to a misdemeanor offense that originally was a state (any state) or federal felony charge/misdemeanor.
5. If the employee enters a please of guilty or nolo contendere or has been convicted of a state (any state) or federal misdemeanor charge involving illegal chemical substances or illegal sexual activity.
6. If the employee enters into a deferred prosecution agreement with a state (any state) or federal prosecutor.

**Failure to provide the referenced information, in writing, to the Executive Team and/or Director of the Juvenile Bureau within the prescribed time period may result in termination for insubordination and willful neglect of duty.**

\_\_\_\_\_  
**Employee Signature**

Date \_\_\_\_\_

# **Administration and Management**

**01-12**

**Political Activities**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-12</i>
Political Activities		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home to prohibit all facility staff from campaigning, lobbying, and/or conducting any other politically related activity while on-duty.**

**I. Purpose:** Facility staff must not participate in any political activity that is prohibited by state law or creates a conflict of interest while on-duty. Inappropriate use of facility vehicles, money, equipment/property or time for political activities is prohibited and subject to disciplinary action, up to and including discharge. The political activities of an employee, while not on-duty, are strictly optional and voluntary, and never shall be required as a condition of employment with the Detention Home. The facility ensures that all employees are made aware of this prohibited work activity during their orientation training. Additionally, every employee is provided a Tulsa County Juvenile Bureau Manual and allowed access to this facility policy and procedure that addresses prohibited political activities.

**II. Applicable To:** This policy shall apply to all personnel of the Detention.

### **III. Definitions:**

**Political Activity** – The use of county vehicle, county money, county property or county time for political purposes is prohibited.

### **IV. Procedures:**

#### **A. General Guidelines**

- 1. Code of Conduct** - All staff of the detention home are bound by the JBDC P&P 005: Code of Conduct. This code delineates specific details of employee responsibilities regarding ethical and legal considerations in relation to personal behavior in the workplace.
- 2. Time Value** - During shift or office hours, each Detention Home employee must devote all of his/her time, attention and effort to the business of the Juvenile Detention Home.
- 3. Use of County Resources** - County employees are not allowed to use shift or office hours, County vehicles or County equipment for private gain, which includes political purposes.

**B. Administrative Responsibility** – The Facility Administrator is responsible for ensuring that no staff member is required to participate in political activity as a condition of continued employment.

1. **Voluntary Political Activity** - Interest and participation in political activities by the employees of the Juvenile Detention Home is optional and voluntary and never a condition of employment. No employee within the Juvenile Bureau is put under pressure to campaign or vote for any individual or political party.
2. **Outside Political Activity** - There are no restrictions on the political activities of Juvenile Detention Home employees as long as their activities do not involve the use of county vehicles, money or working time.

**V. Authority/References:**

Tulsa County Employee Handbook (Revised July 2011)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-33)

**VI. Enclosures:**

1. Employee Handbook Section 2.1, Sub-paragraph 31

**VII. Action:**

The Facility Administrator and Unit-Shift Supervisors will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-12.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-13**

**Contract Service Personnel**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-13</i>
Contract Service Personnel		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

**It shall be the policy, practice and procedure of the Detention Home that staff must directly and continuously supervise non-facility service personnel working in Detention, including ex-offenders and trustees on a work release program.**

**I. Purpose:** Direct and continuous supervision is required in order to eliminate the possibility of contraband being passed between authorized visitors, including service personnel, and a resident as well as to ensure that residents are not being negatively influenced by authorized visitors or service personnel. Maintaining control and knowledge personnel in the facility is vital to the security and safety of Detention.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any authorized visitor who enters the facility.

### **III. Definitions:**

**Authorized Visitors** – Any individual or group that has contacted and received permission by the Facility Administrator, Director or Chief Judge to enter Detention. This will include inspectors, exterminators, building maintenance staff, required technicians, tour groups, special speakers and other individuals authorized access by the Facility Administrator and administrative staff.

### **IV. Procedures:**

**A. Staff Responsibility** - All visitors will be met in the main detention lobby and are required to sign in. All visitors will be briefed on facility rules on contraband and reminded that no weapons of any kind will be allowed into the program.

- 1. Contraband Notice** - Any person entering the facility may be searched for contraband and may be required to present picture identification before entering the facility. Signs are posted at the facility entrance citing
- 2. Authorized Visitor Log** – Visitors will sign in on the Authorized visitors Log, or another sign in sheet as may be appropriate to their duties within the facilities. Any individual seeking access to the facility must also document the nature of their visit.



3. **Authorized Visitor Badge** - After signing in and being cleared for entry, the visitor will be issued an “Authorized Visitor Badge” which must be worn while in the facility and returned at the conclusion of the visit.
4. **Confidentiality Notice** – Any visitor entering the facility must agree to maintain the facility confidentiality policy regarding Office of Juvenile Affairs requirements for confidentiality.

**B. Supervision**

1. **Staff Responsibility** - Before entering any area where residents are present a staff member will be assigned to escort the authorized visitor only to areas required for the completion of relevant duties.
  - a. Staff supervision of authorized visitors will be continuous while in the presence of any residents or while working in an area that residents have access to.
2. **Facility Keys** - No Authorized visitor will be issued any facility keys without approval of the Facility Administrator.

**C. Visitors Responsibilities**

1. **Facility Expectations** -All visitors are expected to maintain themselves in a professional and appropriate manner while in the facility.
  - a. All visitors are notified of the rules regarding contraband and any visitor found to be in violation of these rules will be asked to leave the facility pending a review by the Facility Administrator.

**D. Facility Administrator's Authority** - Any visitor found to be interacting with a resident in an unprofessional or inappropriate way will be asked to leave the facility pending a review by the Facility Administrator.

1. **Denial of Access** -The Facility Administrator reserves the right to deny any individual access if their presence presents a threat to the safety, security and order of the facility.

Employees of public or private agencies providing a service to Detention are accountable to the Facility Administrator of Detention.

Educational personnel are provided to Detention by the Tulsa Public School System, Department of Alternative Education. The educational staff is accountable to the Facility Administrator of Detention, as documented by the Memorandum of Agreement with the Tulsa Public Schools. An additional teacher is provided to Detention when the resident population exceeds 29.

Supervision of the Educational Staff is shared between the Facility Administrator of Detention and the designated Supervisor for the Tulsa Public School System.

If there are problem areas with Detention's school activities or staff communication regarding these problems is directed to the Director of Alternative Education, Tulsa Public Schools from the Facility Administrator of Detention.

This policy/procedure will be reviewed annually and modified as required.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-34)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-13

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**01-13-2**

## **Accountability of Outside Personnel**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-13-2</i>
Accountability of Outside Personnel		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, practice and procedure of the Detention Home that employees of public or private agencies providing a service to Detention are accountable to the Facility Administrator of Detention or his designee.**

**I. Purpose:** Maintaining control and knowledge personnel in the facility is vital to the security and safety of Detention. The Facility Administrator or his designee shall have supervision and authority over all public or private agency staff members while they are in detention. All such staff persons shall be notified of contraband prohibitions and confidentiality requirements.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any contracted personnel who enters the facility.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** - All contract personnel will enter through the main detention lobby and are required to sign in. All new contract personnel will be oriented on facility rules on contraband and reminded that no weapons of any kind will be allowed into the program.

**1. Contraband Notice** - Any person entering the facility may be searched for contraband and may be required to present picture identification before entering the facility. Signs are posted at the facility entrance.

**2. Confidentiality Notice** - All outside personnel entering the facility must agree to maintain the facility confidentiality policy, as required by the Office of Juvenile Affairs.

**B. Educational Staff** - Educational personnel are provided to Detention by the Tulsa Public School System, Department of Alternative Education. The educational staff is accountable to the Facility Administrator of Detention, as documented by the Tulsa Public School Services Contract with the Tulsa Public Schools.

**1. On-site Supervision** - Supervision of the Educational Staff is shared between the Facility Administrator of Detention and the designated Supervisor for the Tulsa Public School System. However, the Facility Administrator of the Detention Home retains authority to remove or limit the access of any individual in the facility.

**2. General Supervision** - If there are problem areas with Detention's school activities or

staff communication regarding these problems is directed to the Director of Alternative Education, Tulsa Public Schools from the Facility Administrator of Detention.

3. **Facility Expectations** -All contract employees are expected to maintain themselves in a professional and appropriate manner while in the facility.
  - a. All contract employees are notified of the rules regarding contraband and any visitor found to be in violation of these rules will be asked to leave the facility pending a review of the Facility Administrator.
4. **Facility Keys** – Full time educational staff may be issued facility keys with approval of the Facility Administrator. Substitute educational staff that will be on site for less than five (5) consecutive days shall not receive keys.

### **C. Maintenance Staff**

1. **On site Supervision** - Supervision of the contracted maintenance staff such as fire alarm system technicians, electricians, and security experts is the responsibility of facility unit-shift supervisors and staff under the direction of the Facility Administrator or his designee. Detention personnel will escort all contracted maintenance staff when in areas juveniles are present.
  2. **Off site Supervision** - If there are problem areas with Detention's contracted maintenance staff, communication regarding these problems is directed to the Facility Administrator and the management of the contracting organization for resolution.
  3. **Facility Expectations** -All contract employees are expected to maintain themselves in a professional and appropriate manner while in the facility.
    - a. All contract employees are notified of the rules regarding contraband and any visitor found to be in violation of these rules will be asked to leave the facility pending a review of the Facility Administrator.
  4. **Facility Keys** – Contract employee's staff may be issued facility keys with approval of the Facility Administrator.
- D. Superintendent's Authority** - Any contract employee found to be interacting with a resident in an unprofessional or inappropriate way will be asked to leave the facility pending a review by the Facility Administrator.
1. **Denial of Access** -The Facility Administrator reserves the right to deny any individual access if their presence presents a threat to the safety, security or good order of the facility.

### **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-34, 1A-19)

### **VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-13-2.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**1-14**

**Facility Tours**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Previous Revision</i>	<i>1-14</i>
Facility Tours		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home to encourage interaction with the public and media through establishing public information guidelines. Public interaction shall include facility tours when properly requested.**

**I. Purpose:** It is beneficial for the facility to establish a cooperative atmosphere with the public and media regarding requests for information about the detention home because it helps to communicate goals, philosophy, and objectives. Additionally, cooperation with the public and media can foster community involvement and support.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** - Facility Tours will be scheduled by the Facility Administrator or Designee. Tours will be conducted by the Facility Administrator, Unit-Shift Supervisor or other designated staff member.

**1. Authorized Tours** - Tours will be conducted for Social and Civic Organizations, Bible Schools, College and University classes, related Law Enforcement, Court and Social Services Agencies, or other approved visitors.

**2. Limitations** - Discretion will be used in scheduling tours. Tours will not be given as a deterrent measure or scare tactic. Tours should be scheduled at the most advantageous time; considering shift coverage, number of residents and program activities.

**3. Minors and/or Children** - No minors or children will be allowed in secure areas of the facility for the purposes of a tour. No one under the age of adulthood shall be allowed to tour the facility.

**B. Confidentiality** – The Detention Home complies with the office of juvenile affairs requirements for confidentiality and all authorized visitors are bound by the facility standards regarding any and all resident information, whether heard or seen.

**1. Letter of Agreement** – Authorized visitors and/or media representatives touring the facility may be required to complete a letter of agreement form notifying them of confidentiality rules and penalties set forth by the court.



C. **Staff Responsibility** - All tours are first met in the Bureau Conference Room or Detention visitation area. At that point court/agency, probation, intake, admit and visitation policies are explained. Also explained and discussed is facility confidentiality as well as Detention Philosophy and use. This will include statistics, trends, offenses, and restrictions. The facility Program Manager, or the Superintendent's designee, shall be responsible for monitoring and setting tour schedules. The Program Manager or designee shall:

- Verify that prior approval is given by the Facility Administrator
- Ensure that only qualified personnel conduct approved tours.
- Ensure that request for tours are submitted in writing, including a specific date, time, list the first and last names of all participants and the stated purpose of the tour.
- Devise a schedule that provides the least amount of interference with normal facility operations and security.
- Verify that no minors or children are allowed to accompany any tour group.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-30, 1A-31)

**VI. Enclosures:**

1. Letter of Agreement Form

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-14.

Distribution: Detention Home Policy and Procedure Manual

**Tulsa County Juvenile Detention Home**  
**Volunteer/Intern**  
**Letter of Agreement**

█ \_\_\_\_\_ do hereby agree to abide by all rules, regulations,  
(Print Name)

policy and procedures as they relate to facility volunteer/interns and as explained to me concerning the Tulsa County Juvenile Detention Home, particularly those relating to security and confidentiality.

I understand and agree that if I divulge any confidential information; violate any rules of conduct; threaten the order or security of the facility; hinder the ability of staff to conduct their job duties; or if I behave in a manner that adversely affects a resident, or any facility program, my volunteer/intern services can be curtailed, postponed, or discontinued.

I understand that this letter of agreement does not create or imply a contractual right of a volunteer/intern and does not deprive the Detention Home of its legally reserved discretion to control, regulate, and determine the terms, conditions, and rules of this volunteer/intern service agreement.

I acknowledge that this letter of agreement does not change the at-will status of the working relationship existing with any volunteer or intern.

\_\_\_\_\_  
Signature (*Volunteer/Intern*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (*Accreditation Manager/Trainer*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (*Facility Administrator or Designee*)

\_\_\_\_\_  
Date

XC: Superintendent

# **Administration and Management**

**1-15**

**Media Access**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>1-15</i>
Media Access		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home to grant representatives of the media access to the facility upon the approval of the Director or Facility Administrator. Access will be contingent on preserving confidentiality, maintaining a juvenile's right to privacy, and maintaining order and security.**

**I. Purpose:** The Juvenile Bureau has established agency guidelines on the dissemination of information to the public and media regarding detained juveniles, their cases and records. The Detention Home is committed to complying with applicable federal and state Freedom of Information (FOI) laws and confidentiality requirements. It is beneficial for the facility to establish a cooperative atmosphere with the media because it helps to communicate the facility's goals, philosophy, and objectives. Additionally, cooperation with the media can foster community involvement and support.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines -** Any interaction with the news media in reference to any Juvenile Bureau matter must be referred to the Chief Judge or Bureau Director. This pertains to news commentary or inquiry. All representatives of the media interested in access to the Juvenile Detention Home must first obtain authorization from the Chief Judge, or the Director of the Juvenile Bureau, or the Detention Home Facility Administrator.

- 1. Authorization –** Only the Chief Judge, Bureau Director or the Facility Administrator are authorized to issue statements or news releases on behalf of the detention home. Any and all inquiries from news or media outlets should be directed to an authorized individual for comment.
- 2. Confidentiality –** No resident in the custody of the detention home shall be identified by name, photo or any other means to any individual who is not a member of law enforcement, or authorized agency, or legal guardian. Consistent with the preservation of confidentiality and the order and security of the facility, representatives of the media will be granted access to the facility for reporting items of public interest.

3. **Letter of Agreement** – Prior to being granted access, or interviews with detention residents or staff, or to photograph any area of the facility the media representative must sign a letter of agreement form, which is available at the Detention Home. This letter of agreement form documents the news media representative's commitment not to reveal the identity of any resident.
  
4. **Availability** - The Juvenile Bureau of the District Court will continue to take the initiative in maintaining a good relationship with the news media community. The Chief Judge, the Director, and Detention Home Facility Administrator are available to the public and to representatives of the media as authorized by the Chief Judge.

**B. Staff Responsibility**

1. **Authorization** - All inquiries by the news media must be referred to the Facility Administrator, the Juvenile Bureau Director and the Chief Judge, who have authority to release information.
  
2. **Documentation** - Document any contact with news media in the Daily Shift Log, and notify the Shift Supervisor and Facility Administrator.
  
3. **Confidentiality** - No information about juveniles may be given out on the telephone, except to law enforcement, or authorized agency, or legal guardian as directed by established policy, procedure and state law.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-30, 1A-31)

**VI. Enclosures:**

1. Letter of Agreement Form

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-15.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

ACCESS FOR THE PURPOSE OF RESEARCH, EVALUATION, STATISTICAL ANALYSIS, INTERVIEWS, PRESENTATIONS, OR PHOTOGRAPHS

Letter of Agreement

Prior to being granted authorization to interview, photograph, or speak to any resident(s) in the temporary custody of the Tulsa County Juvenile Detention Home

! \_\_\_\_\_

NAME

Representing-----  
INSTITUTION/AGENCY/NEWS MEDIA

acknowledge making a full commitment to comply with all related State laws and regulations, facility safety and security policies, and to insure the confidentiality of all juvenile records. I agree not to reveal the identity of any residents(s) held in detention without the written consent of the Chief Judge of the Tulsa County Juvenile Bureau of the District Court.

\_\_\_\_\_  
Signature of Speaker/Agency/News Media Representative

\_\_\_\_\_  
Date

# **Administration and Management**

**1-16**

**Requesting Office Supplies**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>1-16</i>
Requesting Office Supplies		<i>Current Revision</i>	<i>02/06/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It is the policy, procedure and practice to provide for a system of monitoring and reordering office supplies that conforms to facility, Juvenile Bureau and Tulsa County guidelines.**

- I. **Purpose:** The facility shall maintain an adequate amount of materials and supplies as may be needed by the unit control rooms and administrative offices.
  
- II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.
  
- III. **Definitions:** None.
  
- IV. **Procedures:**
  - A. **General Guidelines** – The facility Administrative Assistant to the Facility Administrator shall monitor and re-order supplies when necessary.
    1. **Request for Office Supplies** - Request for supplies should be submitted by the Unit-Shift Supervisor or Unit Secretary to the Administrative Assistant. As soon as the request for supplies is filled, the Unit-Shift Supervisor will be notified. Administrative staff may submit request directly to the Administrative Assistant.
  
    2. **Request for Items not in Stock** - Requests for office supplies that are not kept in stock must be submitted to the Administrative Assistant. The request is then submitted to the Facility Administrator for consideration for purchase.
  
  - B. **Re-ordering Forms** - The facility Administrative Assistant to the shall monitor and re-order forms when necessary.
    1. **Request for Forms** - All requests for new forms or revision to existing Juvenile Bureau forms must be made through the Administrative Assistant in writing.
  
    2. **Re-stocking Forms** - Personnel must notify the Unit-shift Supervisor upon removing the last of the supply of a form that is stocked to give ample time to order and receive a new supply. Supply is also monitored by Support Staff who will report a low supply to the Administrative Assistant.

A. **Identification Cards** - All changes affecting ID information Card must be immediately reported to the administrative assistant. The ID Card, and any office keys, will be returned to the Supervisor or Administrative Assistant upon separation from employment.

1. **New ID Cards** – The administrative assistant will coordinate employees obtaining ID cards from county administrative services.

**I. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**II. Enclosures: None**

**III. Action:**

Facility and the Superintendents Administrative Assistant will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-

16

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**1-18**

**Chief Administrative Officer**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Previous Revision</i>	<i>1-18</i>
Chief Administrative Officer		<i>Current Revision</i>	<i>02/18/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure, and practice of the Detention Home to establish that the facility and its programs are managed by the Facility Administrator, a chief administrative officer to whom all facility employees and/or units of management are responsible.**

**I. Purpose:** To establish a clear line of authority and reporting, the Facility Administrator as the chief administrative officer bears the administrative and management responsibility for the operation of Detention Home and its related programs and staff; as well as the custodial care for those juveniles entrusted to his/her care.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. Superintendent's Role** - It shall be the policy, procedure, and practice of the Detention Home to maintain written agency job descriptions that specify the qualifications, authority, and responsibilities for the Facility Administrator and other appointed positions within the facility and agency.

**1. Job Description** - Detailed job descriptions that include required qualifications, responsibilities, and specific duties help establish clear lines of authority; and allow facility and agency personnel to understand organizational expectations. The superintendent's job description is reviewed annually and revised as needed.

**2. Authority** - The Facility Administrator is the chief administrative officer of the facility and bears the administrative and management responsibility for the operation of the Detention Home and its related programs and staff. All facility employees and/or units of management are accountable to the Facility Administrator and he/she may alter, suspend, remove, or reorganize any facet of the facility program or staff as allowed by law and the approval of the director or chief judge.

**3. Table of Organization** – There is a written table of organization delineating the position and accountability of all staff and demonstrating the role and position of the Facility Administrator as the chief administrative officer. The Table of Organization is reviewed annually and revised as needed.

- B. Facility Administrator's Qualifications** - Establishing high qualifications ensures that only qualified individuals are selected for the position of Facility Administrator. It is the agency's responsibility to recruit and hire qualified individuals of good character and experience with the problems associated with delinquent juveniles.
- 1. Minimum Qualifications** - The following qualifications are minimum qualifications for the position of Facility Administrator; a bachelor's degree in an appropriate discipline; two years of experience working with juveniles; and three years' experience in staff supervision and administration. Additionally, OJA licensing requirements mandate that the facility Facility Administrator to maintain his/her primary office within the Detention Home.
- C. Employment Status** - The position of Facility Administrator is of an "at will" employment relationship with Tulsa County. Any facility employee may be discharged at any time with or without cause. All facility staff serve at the pleasure of the Chief Judge of the Juvenile Court.
- 1. State Requirements** - The Oklahoma Juvenile Code (10 O.S. 7305-1.2) allows the Juvenile Bureau and Detention Home to operate as an "at will" employer. Every agency employee, including the position of Director and Facility Administrator serve at the pleasure of the Chief Judge of the Juvenile Division, subject to the general administrative authority of the Presiding Judge of the Judicial District XIV. This means that employees may resign at any time and that the facility or agency may discharge its employees any time with or without cause. Every employee before accepting a position within the Detention Home acknowledges this "at will" employment relationship and that it may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Tulsa County.

## **V. Authority/References:**

10 O.S. 7305-1.2 (Employment Status)  
10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-11, 1A-15, 1A-16, 1A-17, 1A-18)

## **VI. Enclosures:**

1. Job Description - Facility Administrator
2. Detention Home Table of Organization

## **VII. Action:**

Facility Administrator and the Director will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from or Juvenile Bureau

Director or Facility Administrator.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-18

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**TULSA COUNTY**  
**Job Description Cover Sheet**

Job Title: Superintendent of Juvenile Detention  
Department: Juvenile- Detention  
Report To: Assistant Director/Director  
FLSA Status: Exempt  
Job Title Code 178  
Last Review: 11-1-98  
Grade: 90  
Job Group Code: B030

Approval of the attached job description

  
Approved By

7-1 -91  
Date Approved

TULSA COUNTY  
Job Description

Job Title: Superintendent of Juvenile Detention  
Department: Juvenile - Detention  
Reports To: Assistant Director/Director  
FLSA Status: Exempt  
Job Title Code: 178  
Last Review: 11-1-78  
Grade: 90  
Job Group Code: B030

DEFINITION

Under direction, plans, organizes, directs and participates in Juvenile Detention Home programs in accordance with statutory and judicial requirements.

EXAMPLES OF WORK PERFORMED

Responsible for preparing, administering and operating the budget and policies for the Juvenile Detention Home. Plans, organizes, directs and participates in a variety of services and programs, including, but not limited to, academic, recreational, religious, social, and professional services. Responsible for preparing, maintaining and updating all files, records, and reports in accordance with statutory and departmental requirements. Integrates all segments of the Detention Home operation into a unified system that provides maximum assistance to children in the detention program. Responsible for representing and interpreting the Juvenile Detention Home and its programs to the community and interagency, as instructed by the Director. Inspects and evaluates the physical conditions of the buildings and submits to the Director recommendations for painting, repairs, furnishings, relocation of equipment, and reallocation of space. Coordinates all building security activities. Interprets security rules and directs subordinates and private security agency in enforcing compliance. Shall inspect or direct inspection of premises to test alarm system, detect safety hazards, and to insure that safety rules are posted and enforced. Examines fire extinguishers and other safety equipment for serviceability. Reports irregularities and hazards to appropriate personnel. Confers and makes judgments on all grievances and disciplinary action when required and conducts administrative meetings with personnel of the Education Service Center and the Juvenile Bureau. Evaluates performance of staff members and recommends indicated action. Directs training of the Juvenile Detention Home's personnel. Performs other duties as assigned.

REQUIRED SKILLS, KNOWLEDGE AND ABILITIES

Skill in supervising the work of others; in human resource management; in administering budgetary affairs; in overall operation of a public facility; and in using personal computer. Knowledge of the principles and practices of sociology and public administration; of departmental policies and procedures; of supervisory principles and practices; of computer systems; of ACA Accreditations process and standards of application; of State license standards for detention; of state laws of Title 10; and of Juvenile on line Tracking System (JOLTS). Ability to plan, organize, and control the work of others; to organize and present facts and opinions clearly and concisely; and to develop social skills in others in the authoritative setting.

SUPERVISORY RESPONSIBILITIES



Manages four subordinate supervisors who supervise a total of 64 employees in the Program Management, Personnel Assignments and Training, Food Services, Kitchen Manager, Administrative Services Unit Secretary, Accreditation Program Accreditation Manager. Is responsible for the overall direction, coordination, and evaluation of this unit. Also directly supervises five non-supervisory employees. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

#### QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

#### EDUCATION and/or EXPERIENCE

Bachelors Degree from an accredited four year college or university. Preferably, the degree is in sociology, or criminal justice field. This shall be supplemented by seven (7) years of experience, three (3) of which shall have been at the administrative or supervisory level. Up to two (2) years of full time graduate training in either social work, corrections, sociology, psychology or law may be substituted for experience on an equal basis. There shall be no substitutions for the original three (3) years of administrative or supervisory experience. Related experience is defined as supervisory or administrative experience related to corrections, detention or juvenile court services.

#### LANGUAGE SKILLS

Ability to read, analyze, and interpret common scientific and technical journals, financial reports, and legal documents. Ability to respond to common inquiries or complaints from customers, regulatory agencies, or members of the business community. Ability to write speeches and articles for publication that conform to prescribed style and format. Ability to effectively present information to top management, public groups, and/or boards of directors.

#### MATHEMATICAL SKILLS

Ability to work with mathematical concepts such as probability and statistical inference, and fundamentals of plane and solid geometry and trigonometry. Ability to apply concepts such as fractions, percentages, ratios, and proportions to practical situations.

#### REASONING ABILITY

Ability to define problems, collect data, establish facts, and draw valid conclusions. Ability to interpret an extensive variety of technical instructions in mathematical or diagram form and deal with several abstract and concrete variables.

#### CERTIFICATES, LICENSES, REGISTRATIONS

Valid Oklahoma Drivers License  
Membership in American Correctional Association (ACA)  
Membership in Correctional Accreditation Managers Association (CAMA)  
Membership in National Juvenile Detention Association (NJDA)

#### PHYSICAL DEMANDS

) The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to use hands to finger, handle, or feel; reach with hands and arms; and talk or hear. The employee frequently is required to stand, walk, and sit. The employee is occasionally required to climb or balance; stoop, kneel, crouch, or crawl; and taste or smell. The employee must frequently lift and/or move up to 10 pounds and occasionally lift and/or move up to 25 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus.

#### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The noise level in the work environment is usually moderate.

PHYSICAL DEMANDS	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
On-the-job time spent in the following physical activities. Show time by checking the appropriate boxes:				
Stand			X	
Walk			X	
Sit			X	
Use hands to finger, handle, or feel				X
Reach with hands and arms				X
Climb or balance		X		
Stoop, kneel, crouch or crawl		X		
Talk or hear				X
Taste or smell		X		
Force exerted. Check appropriate boxes.				
Up to 10 lbs.			X	
Up to 25 lbs.		X		
Up to 50 lbs.	X			
Up to 100 lbs.	X			
More than 100 lbs.	X			

Special vision requirements. Check all that apply.

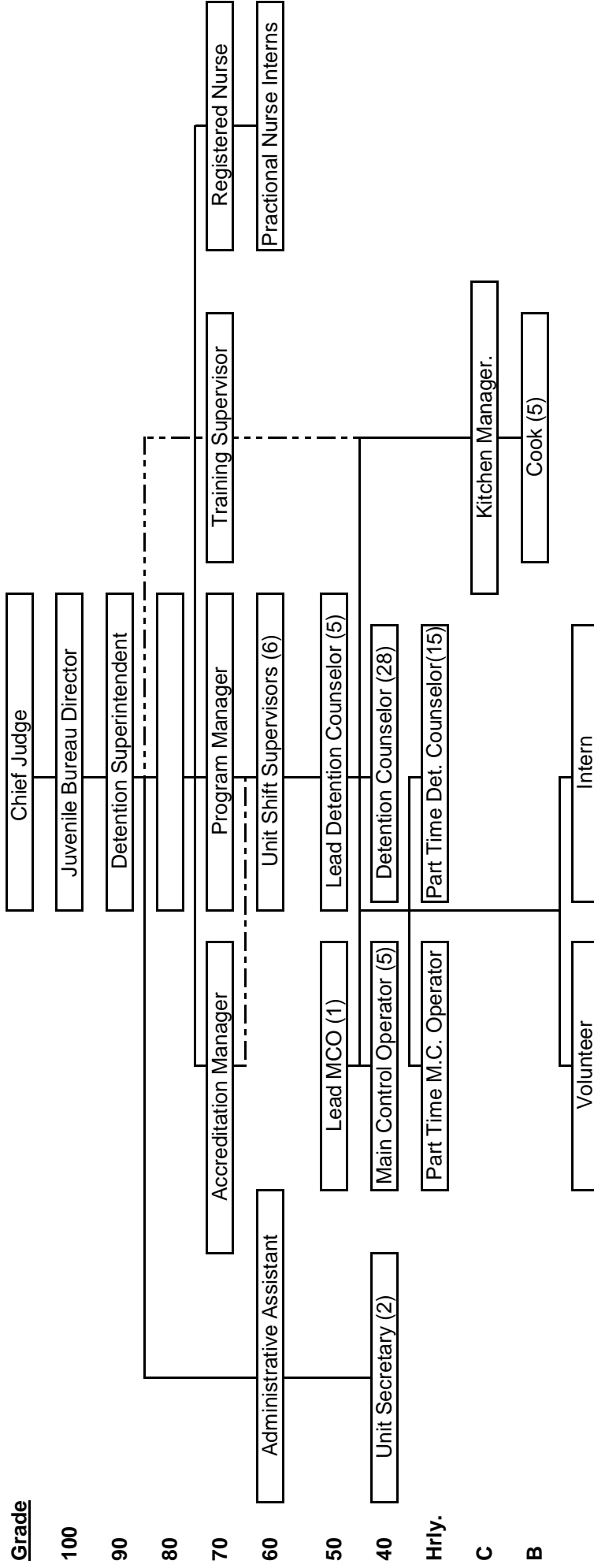
<input checked="" type="checkbox"/> Close vision (clear vision at 20 inches or less)	<input checked="" type="checkbox"/> Distance vision (clear vision at 20 inches or more)
<input checked="" type="checkbox"/> Color vision (ability to identify and distinguish colors)	<input checked="" type="checkbox"/> Peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)
<input checked="" type="checkbox"/> Depth perception (three-dimensional vision, ability to judge distances and spatial relationships)	<input type="checkbox"/> No special vision requirements
<input checked="" type="checkbox"/> Ability to adjust focus (ability to adjust the eye to bring an object into sharp focus)	

WORK ENVIRONMENT	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
Exposure to the following environmental conditions. Show time by checking boxes:				
Wet or humid conditions (non-weather)	X			
Work near moving mechanical parts	X			
Work in high, precarious places	X			
Fumes or airborne particles	X			
Toxic or caustic chemicals	X			
Outdoor weather conditions	X			
Extreme cold (non-weather)	X			
Extreme heat (non-weather)	X			
Risk of electrical shock	X			
Work with explosives	X			
Risk of radiation	X			
Vibration	X			

How much noise is typical for the work environment of this job? Check the appropriate level below.

<input type="checkbox"/> Very quiet (examples: forest trail, isolation booth for hearing test)	<input type="checkbox"/> Quiet (examples: library, private office)
<input checked="" type="checkbox"/> Moderate noise (examples: business office with computers and printers, light traffic)	<input type="checkbox"/> Loud (examples: metal can manufacturing department, large earth-moving equipment)

# Tulsa County Juvenile Detention Home Detention Home Organizational Chart



# **Administration and Management**

**1-20**

**Bureau/Detention Relations**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>1-20</i>
Bureau /Detention Relations		<i>Current Revision</i>	<i>10/03/6/03</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Juvenile Detention Facility to operate under the Tulsa County Juvenile Bureau of the 14<sup>th</sup> District Court and with the Juvenile Court as its governing authority as provided for by state Law. Therefore, through administrative action the detention home will participate in all levels of communication to include regular meetings with the Bureau Director, and Chief Judge.**

**I. Purpose:** In order to facilitate communication, establish sound policy, explore problems, and ensure conformity to legal and fiscal requirements and to implement programs, it is necessary for the parent agency and the governing authority to regularly meet with recognized agents of the detention home.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Administrative Committee** – This committee operates under the supervision of an agency executive appointed by the Chief Judge or Director. This committee consists of representatives from all areas of the agency including Juvenile Detention, Probation Services, Intake Services, and Lakeside Youth Home. The purpose of this committee is to develop and maintain sound interagency policies and procedures as well as facilitate communication between all levels of the agency.

**Citizens Advisory Board** - The Board operates in cooperation with the Chief Judge. Its membership includes individuals from law enforcement, education, legal experts and concerned citizens who have been appointed by the Chief Judge. The purpose of the Board is to advise the agency on matters of community involvement, and provide an avenue for agency communication with the local community.

**IV. Procedures:** The Facility Administrator of Detention will insure that specific staff is appointed to attend prescribed meetings concerning the interest of the detention home.

**A. Administrative Committee** – This committee is made up of representatives from the most senior levels of the agency.

**1. Administrative Responsibility** – The Facility Administrator shall be responsible for attending Administrative meetings and/or designating a subordinate.

2. **Documentation** - Meeting minutes will be taken by a designated staff member and copies will be posted on the Main Control room bulletin board and in the unit Logs for staff review.
3. **Attendance** – Meetings are normally held once per week and no less than once per month. Additional meetings may be required at Superintendent's or Director's discretion and attendance may be mandatory.
4. **Staff Submissions** – Meeting agendas will be developed by the Juvenile Bureau director and input from all staff may be submitted for consideration.
5. **Juvenile Bureau Proposal Plan** – All staff have the ability to present a formal proposal to the Facility Administrator and the director utilizing the Juvenile Bureau Proposal Plan (form 4718). When staff have idea that may help improve the environment they are encouraged to complete a proposal and turn it in for consideration. In a system of two-way communication, the input of staff is vital.

**B. Executive Committee** - Meeting agendas will be developed by the Juvenile Bureau Director. This committee will be responsible for executive decisions regarding policy, funding, interaction with legislative bodies and elected officials.

1. **Documentation** - Meeting minutes will be taken by a designated staff member and copies will be on file with the bureau administrative assistant.
3. **Attendance** – The Executive Committee shall consist of the Bureau Director, Facility Administrator of Detention, and the Chief Operations officer of the Juvenile Bureau. The Committee shall meet as required. Additional meetings may be required at the Directors discretion and attendance may be required as in regular meetings.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-20, 1A-26, 1A-27)

**VI. Enclosures:** None.

## **VII. Action:**

The Facility Administrator and Unit-Shift Supervisors will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-20

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



# **Administration and Management**

**01-21**

**Facility Policy & Procedure Manuals**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-21</i>
Facility Policy & Procedure Manuals		<i>Current Revision</i>	<i>11/01/03</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

The Detention Home will establish, maintain and make available to all employees and the public (except for those which are “RESTRICTED DISTRIBUTION”); a system of coordinated manuals for established rules, regulations, standards, policies, procedures, practices, plans and orders that govern the operation of the facility and its programs. These manuals shall be reviewed annually and updated as needed.

**I. Purpose:** The Detention Home Facility Administrator is responsible for establishing and implementing effective policies, procedures and practices for operating and maintaining the facility and its programs in accordance with applicable federal, state, and/or local laws and regulations, Office of Juvenile Affairs (OJA) Requirements for Secure Juvenile Detention Facilities, and the American Correctional Association (ACA) Standards for Juvenile Detention Facilities. To aid employees and the public, the facility will create and maintain a computerized and written system of coordinated manuals for the management of its policy, procedures, practices, safety and emergency contingency plans, medical standing and post orders, personnel handbooks, guidelines, administrative rules, and forms. A governmental agency has an obligation to make public its philosophy, goals, and program objectives. Therefore, in accordance with the Federal Freedom of Information Act and the Oklahoma Open Records Act, these manuals and other related documentation, except for confidential and security related information, will be available to the public on the agency website or upon written request to the Facility Administrator and with the approval of the agency Director at an established cost per page.

**II. Applicable To:** This policy is applicable to all personnel of the Detention Home.

### **III. Definitions:**

**Agency** – The Tulsa County Juvenile Bureau of the District Court

**Citizens’ Advisory Committee** – a statutorily created volunteer seven (7) member panel appointed by the Judge of the Juvenile Division to aid in the effective administration of state statutes relating to juveniles and for the purpose of advise and counsel to the agency.

**Administrative Committee** – a committee appointed by the Bureau Director to utilize a systematic, widely accepted management model and approach for the continuous improvement of processes for the delivery of quality services with the goal of improving efficiency and quality.

**Director** – The chief administrative officer responsible for the organization and management of the Juvenile Bureau, subject to the direction and supervision of the Judge of the Juvenile Division.

**Judge of the Juvenile Division** – an elected official to act as the chief executive officer and Presiding Judge of the Juvenile Bureau, subject to the general administrative authority of the Presiding Judge of the Judicial Administrative District and Board of County Commissioners.

**Policy** – answers the question “why” and “what”. A policy states the facility’s philosophy and therefore determines its present and future decisions. It is a definitive statement of the facility’s position on an issue of concern to the operation of the Detention Home.

**Procedure** – answers the question “how”. A procedure is a detailed, step-by-step description of the sequence of activities necessary for achieving a specific policy.

#### **IV. Procedures:**

- A. **Promulgation of Written Rules, Outline Policies and Procedures** – As directed by state law in Title 10 Section 7302-6.3(A), the Board of Juvenile Affairs shall promulgate written rules (*OJA’s Requirements for Secure Juvenile Detention Facilities*), outline policies and procedures governing the operation of facilities operated by or through contract with the Oklahoma Department of Juvenile wherein juveniles may be housed. Said policies and procedures shall include, but not limited to, standards of cleanliness, temperature and lighting, availability of medical and dental care, provision of food, furnishings, clothing, toilet articles, supervision, appropriate and permissible use of restriction and confinement, procedures for enforcing rules of conduct consistent with due process of law and visitation privileges.
- B. **Minimum Legally Required Policies and Procedures** – Title 10 Section 7302-6.3(B) of the Oklahoma state statutes requires that the facility’s policies shall, at a minimum, ensure that:
1. **Unlawful Punishment** - A resident shall not be punished by physical force, deprivation of nutritious meals, denial of family visits or solitary confinement.
  2. **Right to Exercise** - A resident shall have the opportunity to participate in physical exercise each day.
  3. **Clothing and Hygiene** - A resident shall be allowed daily access to showers and the resident’s own clothing or individualized clothing, which is clean.
  4. **Communication** - A resident shall have constant access to writing materials and may send mail without limitation, censorship or prior reading, and may receive mail without prior reading, except that mail may be opened in the presence of the resident, without being read, to inspect for contraband, as defined by Section 21 of Title 57 of the Oklahoma statutes or as otherwise defined by rules promulgated by the Board of Juvenile Affairs, or to inspect for materials harmful to minors, as defined by Section 1040.75 of Title 21 of the Oklahoma statutes.

5. **Visitation** - A resident shall have reasonable opportunity to communicate and visit with the child's family on regular basis and to communicate with persons in the community.
  6. **Medical Care** - A resident shall have immediate access to medical care as needed and shall receive necessary psychological and psychiatric services.
  7. **Education** - A resident shall be provided access to education including teaching, educational materials and books, provided, that such policies shall provide emphasis upon basic literacy skills, including but not limited to curricula requirements stressing reading, writing, mathematics, science, vocational-technical education, and other courses of instruction designed to assure that such residents will be capable of being assimilated into society as productive adults capable of self-support and full participation. Upon leaving the custody of facility, a resident shall be afforded a copy of the literacy or educational progress report to be utilized for individualized service plans or for continued use at the next school placement of the child.
  8. **Legal Assistance** - A resident shall have reasonable access to an attorney upon request.
  9. **Right to Grievance** - A resident shall be afforded a grievance procedure, including an appeal procedure.
  10. **Mental Health Care** - A resident's mental health needs and mental well-being will be met, protected and served through provision of guidance, counseling and treatment programs, staffed by competent, professionally qualified persons, serving under the supervision of licensed psychologists, psychiatrists or licensed clinical social workers as defined by the regulations of the State Board of Licensed Social Workers.
- C. **Minimum OJA Requirements for Facility Policy and Procedures** – as directed by OJA's Requirements for Secure Juvenile Detention Facilities (377:3-13-38); the facility shall have a Policy and Procedure Manual which specifically describes its purpose, programs, and other services offered. The manual is to be reviewed at least annually and updated if necessary. The facility's Policy and Procedures Manual must include, but not limited to:
- Screening Criteria
  - Admission Procedures
  - Visiting Arrangements
  - Disciplinary Procedures
  - Security and Control
  - Discharge Procedures
  - Personnel Practices

- Juvenile Rights
- Resident Grievance Procedures
- Abuse Reporting Procedures which comply with OJA rules 377:3-1-25 & 377:3-1-26
- Clothing Provisions
- Personal Hygiene Provisions
- Medical and Health Care Provisions
- Educational Programs
- Recreational Programs
- Food and Nutrition Requirements
- General Emergency Procedures
- Fire Safety
- Transportation Procedures
- Suicide Prevention Guidelines

**D. Facility Policy and Procedures Manual** – a written policy and procedures manual will be developed in accordance with state law, OJA requirements and American Correctional Association (ACA) standards; following these general rules:

1. **Organization** – A uniform system will be developed so that topics are grouped by management category or like topics and duplication eliminated. The Detention Home will utilize *ACA's Guide to Developing a Policy and Procedure Manual* (Enclosure 1).
2. **Forms** – A system will be developed for creation, authorization, annual review, issuance, and control of all Detention Home forms.
3. **Compliance Monitoring** – A system will be developed by the facility's Accreditation Manager to monitor compliance with policies, procedures, administrative rules, and applicable federal regulations and state statutes as they relate to OJA requirements and ACA standards.

**E. Facility Policy and Procedures Manual Availability**

1. **General Access** - The Facility Policy and Procedures Manual will be readily available to all staff and all authorized regulatory authorities.
2. **Restricted Access** - Procedures that compromise safety and security shall not be available to the public or residents.

F. **Responsibility for Adoption of Juvenile Bureau Policies and Procedures** – Adoption of policies and procedures will occur in the following manner:

1. **Juvenile Bureau Policy and Procedure** - To aid in the more effective administration of the statutes relating to juveniles and for the purpose of counsel and advice to the Judge of the Juvenile Division; the Citizen Advisory Committee will be responsible for the final review and adoption of agency policies, procedures and practices during regularly scheduled open meetings. Upon the approval of the Citizen Advisory Committee and signature of the Judge of the Juvenile Division and chairperson of the Citizens' Advisory Committee, the Juvenile Bureau will distribute agency policies and procedures to manual holders and place the appropriate policies and procedures on the agency internet website for the public's information. The agency will develop guidelines and safeguards for the distribution of confidential and security related policies and procedures.
2. **Department Policy and Procedure** - The Juvenile Bureau Director will be responsible for the adoption of operational policies and procedures for all agency departments and programs. The Director will ensure compliance with agency policies, procedures, administrative rules, and applicable federal regulations and state statutes. Duplication of policies and procedures shall be eliminated and each department/program will be responsible for developing operational policies and procedures consistent with established agency guidelines. Upon this approval and the signature of the Director and related department/program supervisor, the individual departments/programs will distribute its internal operational policies and procedures to appropriate manual holders and place the open record policies and procedures on the agency internet website for the public's information.

V. **Authority/References:**

- 10 O.S. 7305-1.1 (Juvenile Bureau)
- 10 O.S. 7305-1.2 (Director and other Personnel)
- 10 O.S. 7305-1.3 (Uniformity of Procedures and Care)

VI. **Enclosures:** None

**VII. Action:**

The facility administrative staff and the Facility Administrator will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator, the Director and/or the Judge of the Juvenile Division.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-21

Distribution: Juvenile Detention Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-21-1**

**Employee Dress Code**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-21-1</i>
Employee Dress Code		<i>Current Revision</i>	<i>07/22/03</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Juvenile Detention Home to project a positive image of staff and the facility through establishing basic standards of professional dress appropriate to the unique atmosphere of the detention home.**

**I. Purpose:** In order to ensure a positive and competent image with the community, residents and other agency staff, there shall be basic standards of professional dress for all detention staff. These standards will be based on safety, security, health concerns and the need to project a professional image of the facility. The Facility Administrator has the responsibility of determining appropriate workplace dress and has the absolute right to set, amend, or delete any section of the facility dress code. The dress code will be relevant to each staff member's position and duties.

**II. Applicable To:** This policy is applicable to all volunteers, interns and personnel employed and paid by the Juvenile Detention Home.

### **III. Procedures:**

**A. ADMINISTRATIVE STAFF: (Facility Administrator, Accreditation Manager, Program Manager, Training Supervisor):** An administrator may be required to represent the facility at the highest levels at any time and as such their appearance should be consistent with his/her role as a professional. However, as facility needs dictate, administrative staff may wear detention work dress, casual dress or professional dress.

1. **Shoes** – They may be of any color or brand, but must be in acceptable condition. Administrative female staff may wear open toe shoes while acting in an administrative capacity. Male staff is required to wear shoes not sandals.
2. **Socks** – Administrative staff is expected to wear appropriate business casual attire. Socks are required for male staff.
3. **Hats or Ball Caps** – No hats or ball caps will be worn while on duty in the facility.
4. **Jewelry** – Jewelry will be acceptable, with limitations, if worn in moderation and in keeping with the professional image of the facility. Limitations will include but are not limited to:

- a. No more than one set of earrings may be worn at a time.
  - b. No tongue rings will be acceptable while on duty.
  - c. Any observable body or facial piercing will be prohibited.
  - d. Any form of jewelry or ornamentation that presents a safety or security concern will be prohibited.
5. **Personal Items** – The facility will not be responsible for any personal items that become lost, broken or stolen. The facility will provide employee lockers that may be used to secure staff belongings. Additionally, all personal items brought into the facility are subject to search and content review by administrative staff. Employees are discouraged from bringing personal items such as electronic equipment, expensive gym bags, or large amounts of cash. Exceptions to this section include:
- a. Personal eyeglasses required for the staff to work may be replaced by the facility if they are broken in the line of duty.
  - b. The Facility Administrator may make exceptions to this section on a case by case basis given unusual circumstances.
  - c. Administrative staff will be required to carry cellular telephones as determined by the Facility Administrator, Executive Team, and Director.
6. **Hair** – Staff may wear their hair any length or style, with some limitations. Hair should always be clean and neatly groomed. Limitations include but are not limited to hair color that is appropriate to a professional setting.
7. **Facial Hair** - Staff may wear mustaches, sideburns and beards of reasonable length. All must be clean and properly groomed.
8. **Fingernails** – Fingernails should be of an appropriate length and style as to permit the smooth operation of office machines and technology. Only reasonable colors will be acceptable, as defined by the Facility Administrator, however, black nail polish is prohibited. No designs of any kind will be permitted.
9. **Shirts and Blouses** – Shirts will be of an appropriate size and fit. Shirts must be neat and clean as well as free of any holes, rips, or tears. Logos of appropriate content are acceptable. No tank tops, tops with deep cut or plunging necklines, or tops made with see through materials will be acceptable. Sleeveless top may be worn providing it fits properly around the arm and underarm.
10. **Pants and Slacks** – Pants will be of an appropriate size and fit and must be free of any holes, rips or tears. Casual pants, slacks or jeans must have pockets in order to secure security keys. Pants or slacks must be full lengths and any rolling up of pants to adjust overall length is prohibited, especially on one leg. Pants shall not be worn in a “sagging manner”, as it is a commonly known definition among youth.
11. **Shorts** – No shorts are to be worn by staff during work, training, or staff meetings. Pants that are three quarters length or less are not permitted. This includes but is not limited to:

- a. Capri pants
- b. Knickers

12. **Dresses and Skirts** - Dresses or skirts must be of acceptable length. No mini skirts.

**B. SUPPORT STAFF: (Administrative Secretary, Unit Secretary, Kitchen Manager, Cooks) Support staff are defined as any staff member whose duties do not bring him/her into significant contact with juveniles on a regular basis, but whose responsibilities provide support to administrative staff and the overall mission of the facility.**

1. **Shoes** – They may be of any color or brand, but must be in acceptable condition; however, no open toe shoes, sandals or thongs will be acceptable. Support staff may be required to wear business dress in relation to certain duties or relevant activities. Due to this requirement, secretarial staff may be allowed to wear open toe shoes while acting in an administrative support capacity.
2. **Socks and Undergarments** – All facility staff are expected to wear undergarments. Female staff will be expected to wear a bra. Administrative Secretary and Secretarial Staff are not required to wear hose or socks while performing administrative duties.
3. **Hats or Ball Caps** – No hats or ball caps will be worn while on duty in the facility.
4. **Jewelry** – Jewelry will be acceptable, with some limitations, if worn in moderation and in keeping with the professional image of the facility. The facility accepts no responsibility if jewelry is lost, broken or stolen. Limitations will include but are not limited to:
  - a. No more than one set of earrings may be worn at a time.
  - b. Any observable body or facial piercing will be prohibited.
  - c. No tongue rings or posts will be worn while on duty, in training, in court, or conferences.
  - d. Any form of jewelry or ornamentation that presents a safety or security concern will be prohibited
5. **Personal Items** – The facility will not be responsible for any personal items that become lost, broken or stolen. The facility will provide employee lockers that may be used to secure staff belongings. Additionally, all personal items brought into the facility are subject to search and content review by administrative staff. Employees are discouraged from bringing personal items such as electronic equipment, expensive gym bags, or large amounts of cash. Exceptions to this section include:
  - a. Personal eyeglasses, required for the staff to work, may be replaced by the facility if they are broken in the line of duty.
  - b. The Facility Administrator may make exceptions to this section on a case by case basis given unusual circumstances.

6. **Hair** – Staff may wear their hair any length or style, with some limitations. Hair should always be clean and neatly groomed. Limitations include but are not limited to hair color that is appropriate to a professional setting.
  7. **Facial Hair** - Staff may wear mustaches, sideburns and beards without limitation on size or hair length. All must be clean and properly groomed.
  8. **Fingernails** – Fingernails should be of an appropriate length and style as to permit the smooth operation of office machines and technology. Only reasonable colors will be acceptable, as defined by the Facility Administrator, however, black nail polish is prohibited. No designs of any kind will be permitted.
  9. **Shirts and Blouses** – Shirts will be of an appropriate size and fit. Shirts must be neat and clean as well as free of any holes, rips, or tears. Logos of appropriate content are acceptable. No tank tops, tops with deep cut or plunging necklines, or tops made with see through materials will be acceptable. Sleeveless top may be worn providing it fits properly around the arm and underarm.
  10. **Pants and Slacks** – Pants will be of an appropriate size and fit and must be free of any holes, rips or tears. Pants, slacks or jeans must be full length and any rolling up of pants to adjust overall length is prohibited, especially on one leg.
  11. **Shorts** – No shorts are to be worn by staff while on duty. Pants that are three quarters length or less are not permitted. This includes but is not limited to:
    - a. Capri pants
    - b. Knickers
  12. **Uniforms** – Facility cooks daily dress will conform to Oklahoma Health and Safety code requirements.
  13. **Dresses and Skirts** – Dresses and skirts must be of acceptable length. No mini skirts.
- C. **DIRECT CARE STAFF: (Detention Counselors, Main Control Room Operators, Unit Shift Supervisors)** Direct care staff perform a variety of functions within the facility which require a more active form of dress. Direct care staff should be prepared to participate with residents during outdoor or indoor activities, in addition to completing housekeeping assignments. For these reasons, direct care staff will adhere to specific dress code designed to assist them in meeting the requirements of their duties.
1. **Shoes** – Direct care staff will wear athletic shoes with rubber sole for prolonged periods of standing and involvement in recreational activities. They may be of any color or brand but must be in acceptable condition. The following items are specifically prohibited:
    - a. Open toe shoes, high heels, hard sole dress shoes
    - b. Sandals, flip flops, backless shoes
    - c. Steel-toe work boots, Cowboy boots or any such foot wear

2. **Socks and Undergarments** – All facility staff are expected to wear undergarments, socks or hose ankle length, or knee high. Female staff will be expected to wear a bra.
3. **Hats or Ball Caps** – No hats or ball caps will be worn while on duty in the facility.
4. **Jewelry** – Due to safety concerns, the facility requires that direct care staff not wear any jewelry that may scratch, snag, cut or potentially injure a resident in a restraint situation. However, if worn in moderation, no risk to resident safety is observable and the jewelry is in keeping with the professional image of the facility, jewelry will be acceptable, with some limitations. Limitations will include but are not limited to:
  - a. No more than one set of earrings may be worn at a time.
  - b. No tongue rings or posts will be worn while on duty, in training, court, or conferences.
  - c. Any observable body or facial piercing will be prohibited.
  - d. Any form of jewelry or ornamentation that presents a safety or security concern will be prohibited.
  - e. Rings with sharp edges are prohibited. Direct care staff may wear no more than two rings, and each ring must meet stated safety requirements.
  - f. Necklaces may not be worn, unless concealed under the shirt. The facility will not replace any necklace that is lost, broken or stolen.
5. **Personal Items** – The facility will not be responsible for any personal items that become lost, broken or stolen. Additionally, all personal items brought into the facility are subject to search and content review by administrative staff. The facility will provide employee lockers that may be used to secure staff belongings. Staff are discouraged from bringing personal items such as electronic equipment, expensive gym bags, or large amounts of cash. Limitations to this section include but are not limited to:
  - a. Eyeglasses, required for the staff to work, may be replaced by the facility if they are broken in the line of duty.
  - b. The Facility Administrator may make exceptions to this section on a case by case basis given unusual circumstances.
  - c. Direct care staff are prohibited from carrying any form of personal electronic communication devices while on duty unless issued by the facility. Such items may be properly stored securely in the facility. Laptop or palm pilot may be authorized by the Facility Administrator, when kids are not in the program.
  - d. Any item of objectionable content will be removed from facility property.
  - e. Direct care staff may wear sunglasses while engaged in outdoor activities. Sunglasses will not be worn indoors.
  - f. Unit Shift Supervisors will be required to carry a radio while on duty as directed.
6. **Hair** – Staff may wear their hair any length or style, with some limitations. Hair should always be clean, neatly groomed and present a professional appearance. Limitations include but are not limited to hair color that is appropriate to a professional setting.

7. **Facial Hair** - Staff may wear mustaches, sideburns and beards of reasonable length. All must be clean and properly groomed.
  8. **Fingernails** – Direct care staff may be required to engage in use of force situations on a regular basis. Fingernails should be of an appropriate length and style as to avoid accidental injury to any juvenile or staff member during a use of force. Reasonable nail colors will be acceptable, as defined by the Facility Administrator; however, black nail polish is prohibited. No designs of any kind will be permitted.
  9. **Shirts and Blouses** – Shirts will be of an appropriate size and fit. Shirts must be neat and clean as well as free of any holes, rips, or tears. Logos of appropriate content are acceptable. No sleeveless tops, tank tops, tops with deep cut or plunging necklines, or tops made with see through materials will be acceptable.
  10. **Pants and Slacks** – Pants will be of an appropriate size and fit and must be free of any holes, rips or tears. All pants must have pockets to secure keys on your person. This includes jeans, casual pants, athletic pants, and sweat pants. All pants must be full lengths and any rolling up of pants to adjust overall length is prohibited, especially only one leg. Pants shall not be worn in a “sagging manner”, as it is a commonly known definition among youth.
  10. **Shorts** – No shorts are to be worn by staff while on duty. Pants that are three quarters length or less are considered shorts and are not permitted. This includes but is not limited to:
    - a. Capri pants
    - b. Knickers
  12. **Dresses and Skirts** - Direct Care staff shall not wear dresses or skirts.
- D. **Agency staff:** Tulsa County Juvenile Bureau staff will be bound by the dress code of the Juvenile Bureau of the District Court. (see JBDC P&P: 006, Employee Dress Code)
- E. **Volunteers:** Volunteers or interns will refer to the dress code for the position applicable to their duties while servicing the detention home. Volunteers may be required to wear an authorized visitor’s badge.
- F. **Visitors:** When possible, visitors will be informed of professional dress standards before touring the facility. However, this facility will demonstrate professional courtesy to any visitor who was not informed of required standards and whose appearance is within acceptable limits. Visitors will be required to wear an authorized visitor’s badge.
- G. **Disciplinary Action:** It is the policy of the Detention Home that all employees will dress appropriately for the position held at all times while on duty and/or in the work place. Specific requirements may vary among work areas and types of duty. In general, however, appropriate dress means clean, neat, well-groomed and clothed in attire appropriate to the requirements of the employee’s particular duties. The Facility Administrator reserves the right to determine whether an employee’s appearance is acceptable, for all instances not specifically covered by the facility dress code. Failure to dress appropriately may subject the employee to disciplinary action.

**IV. Authority/References:**

Tulsa County Juvenile Bureau of the District Court Policy and Procedure Manual  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (1C-01)

**V. Enclosures:**

1. Juvenile Bureau of the District Court P&P, Sect. 006: Employee Dress Code

**VI. Action:**

The Agency Unit-Shift Supervisors will be responsible for the day to day compliance monitoring of this policy.

The Agency Administrative staff will be responsible for annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Chief Judge of the Juvenile Division, Juvenile Bureau Director or the Facility Administrator of the Detention Home. This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I.01-21-1.

Distribution: Juvenile Detention Home Policy and Procedure Manual.

	<h1>POLICY</h1> <h2>TULSA COUNTY JUVENILE BUREAU EMPLOYEE DRESS CODE</h2>		Policy File Number <b>JBDC 104</b>	
	Approved By: <b>JUSTIN JONES, DIRECTOR</b>	Approval Date: <b>09/11/2015</b>	Supersedes: <b>JBDC 006</b>	Previous Date: <b>12/2002</b>

**A. SUMMARY:**

Establishes standards for appropriate dress by employees of the Tulsa County Juvenile Bureau.

**NOTE:** As stated in the Tulsa County Employee Handbook, Tulsa County is represented by its employees at all times. Each employee is expected to dress appropriately for the job. Supervisors will offer guidance as to proper attire. Failing to adhere to dress code standards may result in formal disciplinary action.

**B. APPLICABLE TO:**

Employees of the Tulsa County Juvenile Bureau.

**C. REFERENCES:**

1. Rules of the District Court, Tulsa County, Oklahoma – General Rules – Courtroom Attire.
2. Tulsa County Employee Handbook.

**D. POLICIES:**

**GENERAL REQUIREMENTS**

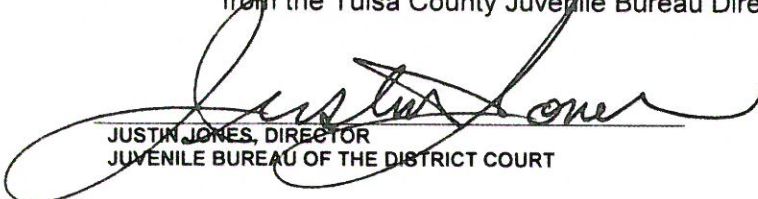
1. It is the policy of the Juvenile Bureau that all personnel will dress appropriately for the position held at all times while on duty and/or in the workplace. Specific requirements may vary among work areas and types of duty, as determined by the appropriate supervisor.
2. **Courtroom attire shall be business professional.**

**UNACCEPTABLE ATTIRE**

3. Examples of unacceptable apparel for employees to wear to work include, but are not necessarily limited to: jeans, overalls, painter pants, shorts, muscle shirts, tank tops, spaghetti strap tops, t-shirts, military type clothing, hunting/fishing vests, athletic shoes, casual flip flops, and midriff type tops. Reasonable exceptions may be made by an employee's supervisor based upon duties and/or assignments on any particular day.
4. No inappropriate or excessively revealing clothing shall be worn.

**EXCEPTIONS**

5. Fridays are designated as casual days when acceptable jeans may be worn. Jeans worn on "casual Fridays" must be in good condition, free of holes, rips or other blemishes, and otherwise suitable for the workplace and the day's anticipated work duties.
6. Any exception to the policies or procedures provided herein will require prior written approval from the Tulsa County Juvenile Bureau Director.

  
 JUSTIN JONES, DIRECTOR  
 JUVENILE BUREAU OF THE DISTRICT COURT



# **Administration and Management**

**1-21-2**

**Post-Hire**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-21-2</i>
Post-Hire Process		<i>Current Revision</i>	<i>07/31/15</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/31/15</i>

It shall be the policy, procedure and practice of the Juvenile Detention Home to provide for a system of initiating the orientation, training and evaluation of new employees.

I. **Purpose:** An employee’s success with the facility requires access to training and relevant information, clearly communicated expectations and constructive feedback. To ensure that the facility can meet its obligations to new employees and to indoctrinate them into the organization the following practices shall be implemented.

II. **Applicable To:** This policy is applicable to all volunteers, interns and personnel employed and paid/unpaid by the Tulsa County Juvenile Detention Center.

### III. **Procedures:**

A. **Welcome Program** – In order to ensure that all employees and volunteers are competent, qualified and meet all standards for interacting and providing direction to juveniles placed in custody, a system of hiring and evaluation will be completed.

1. **General Compliance** – Nothing in this policy is meant to conflict with established Tulsa County policy and procedure, except for where the unique environment of the facility requires different measures to maintain the operational nature of the facility or in instances where Office of Juvenile Affairs contractual requirements must be met to maintain the licensing of the facility. Any person who desires to be an employee at the Tulsa County Juvenile Detention Center (TCJDC) must complete a Tulsa County application form, additional documentation as required by Tulsa County and an authorization for the TCJDC to complete the required background checks. Any applicant who fails to comply will be removed from consideration for employment.

2. **Welcome Packet** – To include a welcome letter from the Facility Administrator, copy of core values and beliefs, County employee perks memo detailing discounts available to county employees. This packet should be mailed to the new employee within 72 hours of hire.

3. **Administrative Contact** – The new employee should receive a call from an Administrator or Supervisor within 2 weeks of hire. The purpose of the call should be to welcome the new staff member and answer any questions he/she may have.
  4. **Pre-Orientation Meeting** – Each new hire will meet with the Administrative Assistant to complete all necessary new hire paperwork for Tulsa County payroll, the organizational loyalty oath and other specified information. This meeting shall take place on the new employees 1<sup>st</sup> regular day of work.
  5. **Detention Home Initial Orientation Meeting** – The facility Training Coordinator will meet with each new employee to review training checklist, training expectations (*including requirements for the orientation test*), evaluation process, orientation to the physical plant and leadership on the resident unit. The employee shall be notified in writing that failure to meet training expectations is grounds for termination at the 6 month evaluation. This meeting shall take place on the new employee's 1st regular day of work. During this meeting the Training Coordinator will arrange a meeting with the Juvenile Bureau Director.
  6. **Training Period Ending Conference** – Should be conducted at least 10 workdays after the employee's 1<sup>st</sup> day of employment. During the TPEC, the Training Coordinator will review the completed training checklist, answer any questions, make provisions for any incomplete training and set a date for the Orientation Test. Every new employee will be required to complete an orientation test within 30 days of hire.
- B. New Employee Assessment and Review** – The facility will complete a series of reviews and assessments to determine the new employee's ability to absorb, retain and synthesize the knowledge and skills necessary to maintain employment with Tulsa County Juvenile Detention.
1. **Orientation Test** – Should be completed by every staff member to verify that they have retained the necessary information to proceed in the process. Staff must obtain an 80% or higher score within the first 60 days of hire.
  2. **60/90 Day Evaluations** – Recognizing that timely and relevant feedback is essential to employee success, new employees should have an informal review at 60 and 90 day intervals. The feedback provided should be constructive and designed to help the employee improve their performance.
  3. **6 Month Employee Performance Evaluation** – The employee will be evaluated on the Employee Performance Evaluation Form as provided for by Tulsa County policy after completing 6 months of employment as a regular full time employee as defined by Tulsa County. This review shall begin at the end of the provisional period. During the 6 month orientation period, the employee must complete the following to be retained as an employee:

- a. 40 hour Orientation with completed Training Checklist relevant to the new employee's position
- b. 40 Hours of on-the-job training under direct supervision
- c. 80% or better on the Orientation Test
- d. Full participation and completion of the Detention Home Training Academy
- e. Average score of 2.0 on the 6 month Employee Performance Evaluation

4. **Certificates of Recognition** – Each employee who completes facility training and achieves a satisfactory score on their 6 month Employee Performance Evaluation shall receive a certificate of completion identifying them as a fully trained staff member for their employee file and personnel record keeping.

C. **Interns, Volunteers and Seasonal Employees** – Interns, volunteers and seasonal employees who are not regular full time employees shall have an orientation process and training appropriate to their level of contact with the facility. This contact must consist of a pre-orientation meeting, an orientation specific to their duties and training hours prorated according to their level of expected hours of service.

D. **On-Call Staff** – Shall have an orientation process and training appropriate to their level of contact with the facility. This contact must consist of a pre-orientation meeting, an orientation specific to their duties and training hours pro-rated according to their level of expected hours and service.

#### IV. **Authority/References:**

OAC: 377:3-13-36 Office of Juvenile Affairs Requirements for Secure Juvenile Detention Centers  
Tulsa County Employee Handbook Rev. July 2014

V. **Enclosures:** None.

#### VI. **Action:**

The Agency Administrative staff will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator of the Detention Center.

This policy will be effective as indicated.

Replaced: TCJDC P&P None.

Distribution: Juvenile Detention Home Policy and Procedure Manual.

# **Administration and Management**

**01-22**

**Employee Leave**

## Tulsa County Juvenile Detention Home Policy and Procedures

General Administration		<i>Policy</i>	<i>01-22</i>
Employee Leave		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice of the Juvenile Detention Home to provide for a system of tracking and recording employee time worked and compensation owed, which shall be in compliance with Tulsa County Personnel department requirements.**

**I. Purpose:** Tulsa County Juvenile Detention, in congruence with Tulsa County, provides several types of leave benefits to regular employees. All uses of leave benefits must be approved by the employee’s supervisor or administrative staff, in advance whenever possible. In order to properly track employee use of benefits and accumulation of leave time, the facility reserves the right to impose reasonable practices that facilitate the good working order of the organization and compliance with Tulsa County policies.

**II. Applicable To:** This policy is applicable to all volunteers, interns and personnel employed and paid by the Juvenile Detention Home.

**III. Procedures:**

**A. Employee Leave:** Paid leave will be available to all regular employees that are in a pay status for a minimum of 143 hours a month. Leave is provided and usage is based on the employment date of the employee. All leave must be approved by the employee’s supervisor before the employee goes on leave status. A complete and detailed listing of all types of leave provided for by Tulsa County can be found in the Employee Handbook. (See Tulsa County Handbook for more details on employee leave Section4.5.)

1. **Personal Leave** – Personal leave may not be used as an extension of or in lieu of vacation leave. Personal leave will be used and accumulated according to Tulsa County Policy.
2. **Vacation** – Vacation leave will be used and accumulated according to Tulsa County Policy.
3. **Holidays** – Holiday leave pay is given to all provisionary and full time employees who are in wage status and work the scheduled work day proceeding and following the holiday or who have permission to be absent. Seasonal, part time, on call and temporary employees are not eligible for holiday pay.

- a. Employee whose regular work schedule includes holiday shall receive an alternative day off for that holiday. Employees whose regularly scheduled day off falls on a holiday shall receive and alternate day off for that holiday.
  - b. Holiday time is not considered part of an employee's vacation or personal leave. If an employee is sick the day before or after a holiday the supervisor may require a doctor's statement for the employee to receive holiday pay.
4. **Funeral Leave** – In the event of a death in the family of a regular employee, the employee will be given (2) days of funeral leave per occurrence. Funeral leave will be used according to Tulsa County Policy. Immediate family for funeral leave purposes shall include and is limited to:
  - a. Employee's spouse,
  - b. child, child's spouse,
  - c. brother, sister,
  - d. parent or parent in-law, brother in-law, sister in-law,
  - e. step-parent, step-parent in-law or step-child,
  - f. Legal guardian, grand parent or grandchild.
5. **Military Leave (Paid)** – Paid military leave is provided within limits specified by Tulsa County, for employee's have completed at least one year of regular County employment and who are required to report for military duty (including medical examinations, drills, training, and or emergency obligations) as a member of a national guard or any armed forces reserve unit. The employee must immediately submit both a copy of the military orders and a request for leave to the supervisor. Military leave will be used and accumulated according to Tulsa County Policy.
  - a. Any employee granted military leave will be re-employed in accordance with all applicable state and federal laws.
6. **Military Leave (Unpaid)** – Any employee who enters active military duty with any branch of the armed Forces of the United States will be granted military leave of absence without pay.
  - a. Any employee who has not completed at least one year of regular employment with Tulsa County and who is a member of any armed forces Reserve component or National Guard unit will be granted a military leave of absence without pay for all required active duty military duty (including medical examinations, drills, training, and or emergency obligations) as a member of a national guard or any Armed Forces Reserve unit.
7. **FMLA** - FMLA leave will be used and accumulated according to Tulsa County Policy. (see Tulsa County Employee Handbook Section4.11.)
8. **Worker's Compensation** – TCJDH will comply with state and federal laws concerning worker's compensation through following the standard policies of Tulsa County.

**B. Request For Leave Form:** Employees wishing to request leave must complete a request for leave form and turn it in 10 calendar days prior to the date requested. Due to the unique nature of the facility's 24 hour operation and contractual/compliance requirements leave request may not be approved if submitted later than as described.

1. **Emergencies** – In emergency situations the employee must contact their Supervisor or the Administrator on Call as soon as possible if they will not be available for work. Additionally a leave request must be completed within 48 hours of returning to work.
2. **Illness or Injury** – If unable to be present for work due to illness or injury, the employee must contact their immediate Supervisor and the Administrator on Call at least one hour prior to the beginning of the shift. Additionally a leave request must be completed within 48 hours of returning to work.

#### **IV. Authority/References:**

Tulsa County Employee Handbook  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (1C-01)

**V. Enclosures:** None.

#### **VI. Action:**

The Agency Program Manager, Accreditation Manager and Unit-Shift Supervisors will be responsible for the day to day compliance monitoring of this policy.

The Agency Administrative staff will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Juvenile Bureau Director or the Facility Administrator of the Detention Home.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:01-22

Distribution: Juvenile Detention Home Policy and Procedure Manual.

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Facility Administrator, Tulsa County Juvenile Detention



# **Administration and Management**

**01-23**

## **Interstate Compact Participation**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-23</i>
Interstate Compact Participation		<i>Current Revision</i>	<i>02/10/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure, and practice of the Detention Home to cooperate with agency’s Intake Department in the holding and/or release of out-of-state juveniles, pursuant to the provisions established by Oklahoma State statues concerning the Interstate Compact on Juveniles.**

**I. Purpose:** The Intake Department is designated by the Juvenile Bureau to act as the interstate compact coordinator for out-of-state juveniles held in the Detention Home. The Detention Home’s cooperation with the implementation of the Interstate Compact places special attention to Article IX, which pertains to detention practices.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. General Guidelines -** The Intake Department will coordinate with the requesting state for the pick-up and release of these out-of-state juveniles and ensures that all legal matters, such as waivers of extradition are addressed and/or obtained before being released.

**1. Compliance -** Participation in the Interstate Compact of Juveniles is necessary to control the unregulated interstate movement of unsupervised adjudicated juveniles and the facility will cooperate with all legal entities in compliance with Article IX requirements.

**2. Verification of Status -** The facility makes every effort to provide that “no juvenile or delinquent juvenile shall be placed or detained in any prison, jail, or lockup, or be detained or transported in association with criminally vicious or dissolute persons.”

**3. Interagency Cooperation –** The facility will coordinate with the Intake Department and assist through whatever means necessary, being legal and in congruence with facility purpose.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-14)

VI. **Enclosures:** None.

**VII. Action:**

The assistant Facility Administrator or Designee be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: New.

Distribution: Detention Home Policy and Procedure Manual  
Tulsa County Juvenile Bureau Intake Department

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-24**

**Resident Funds and Valuables**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-24</i>
Resident Funds and Valuables		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

**It shall be the policy, procedure, and practice of the Detention Home to safeguard and account for a juvenile’s personal funds by using accepted accounting procedures while he/she is detained in the facility. Such funds shall be strictly controlled and immediately returned upon release.**

**I. Purpose:** The responsibility for the control and accounting of a resident’s personal funds and valuables starts upon admission and continues until his/her money is returned upon release. Every resident with money shall receive a money receipt.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**Valuables Closet Key**– In order to maintain security and accountability only one staff member per shift has documented control and access to juvenile funds kept in a secure area. Access to this area requires a facility key that must be signed out from main control.

### **IV. Procedures:**

**A. General Guidelines** – The facility is committed to the security and control of juvenile’s funds in order to ensure that a juvenile’s monies are appropriately received and returned when released.

**1. Staff Resident Transactions** – At no time shall staff or volunteers accept money or any form of compensation from a resident or a resident’s family member. With the Superintendent’s approval, staff may be allowed to donate funds or materials to a resident.

**2. Resident Accounts** – The facility does not offer any form of monetary benefit to juveniles in the form of interest bearing accounts. Juvenile funds are held as property and returned to the juvenile when released. Additionally, the facility shall not maintain a canteen like account for resident’s funds while in custody.

**3. Administrative Audit and Supervision** – The Facility Administrator, or his designee, shall personally audit all juvenile monies and receipts using standard accounting procedures.

- B. Receiving Juvenile Funds** – During admission staff shall complete the property card on any child accepted into the Detention Home, it will be necessary to enter the (Amount of money space with either the "amount of money accepted", or "no money" to note that the space wasn't overlooked.
1. **Receipt for Money** - If there is money involved, it is necessary to fill out a Detention Home Receipt for money form attached to this policy.(see Attachment 1)
  2. **Receipt for Money Form 3072** - This form comes in pads and is generally located in the control room storage on shelf marked with name accordingly.
  3. **Completing Money Transactions** – The following procedures should be followed when handling resident funds.
    - a. Always count money in the presence of child (and counselor, or law agent, or another staff member if available).
    - b. Be sure that the amount is also listed on the property card.
    - c. Staff must have two (2) receipts to complete this transaction. Each receipt form sheet is capable of reproducing print on the next page because of carbon on the reverse side of the sheet. This is the reason for not writing on the pad itself (because several copies would be made; many more than is necessary.
    - d. Fill out this form in presence of child (if necessary explain to child that you are making a receipt for the money to insure its return) place the money into the money envelope, seal the envelope, staff and resident will both initial the envelope. The yellow copy of the money receipt will then be stapled to the envelope sealing envelope (Careful not to staple the paper money inside.) The original copy will be placed in the resident behavior file.
  4. **Foreign Currency** - In the event any part of money received is in foreign currency or coins, it should be so noted on the property card and placed in an envelope with amount of money, what type of money, child's name, staff's name, and date written on this envelope.
    - a. It is placed in the Money Envelope like other money, but noted so on the property card.
    - b. It is also advisable to make out a separate receipt for these foreign coins or currencies and distribute just like the regular money process.
    - c. The staff member carrying the Valuables Closet Key is never to loan it out on a set of keys or to lay it down. They are responsible for any amount of money missing.
  5. **Resident Valuables** - Any other valuables i.e. cell phones, wallets, jewelry, or other small items are to be listed on the admission property form and placed in the labeled

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**Policy: Receipt for Money****Policy Number: 01-24**

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valuables bag along with sealed money envelope. Once the property is secured in valuables bag, a security zip tie will be placed in zipper and hole in valuables bag. **Once sealed, this bag is not to be opened without approval of the Program Manager or Unit Shift Supervisor. An incident report will be completed stating the reason and what items were removed or added form personals bag and noted in the resident behavior file.**

- a. Get another staff member or secretary to co-sign or initial if available
- b. Contact the staff member designated to carry the "Valuables Closet Key." Give to them the original copy of the receipt and the valuables bag. He/she will place this bag alphabetically in the valuables cabinet located in the Valuables Closet. The white copy of that original is to be attached to the property card.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-10, 1B-11, 1B-18, 1B-19, 1B-20, 1B-21)

**VI. Enclosures:**

1. Tulsa County Juvenile Detention Home Receipt for Money Form 3072 (Rev. 12-80)

**VII. Action:**

Facility Administrator or his designee will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-01.

Distribution: Detention Home Policy and Procedure Manual

TULSA COUNTY  
JUVENILE DETENTION HOME

Receipt for money \_\_\_\_\_ Date \_\_\_\_\_

From \_\_\_\_\_  
(Name of Juvenile)

\$ \_\_\_\_\_ Dollars

\_\_\_\_\_  
(Detention Worker)

Form 3072 (Rev. 12-80) Amount: \$ \_\_\_\_\_



# **Administration and Management**

**01-25**

**Releasing Juvenile Funds (In Custody)**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-25</i>
Releasing Juvenile Funds(In Custody)		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

It shall be the policy, procedure, and practice of the Detention Home to document and control any financial transaction (release of money) by a detained juvenile. No financial transaction may occur between detained juveniles, juveniles and staff and/or any other person without the approval of the Facility Administrator.

**I. Purpose:** The responsibility for the control and accounting of a resident's personal funds starts upon admission and continues until his/her money is returned upon release. Every resident transaction with money shall be documented.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines -**

1. **Authorization** – When a resident request to release money or property he or she may do so but the must sign the required documentation authorizing staff to complete the transaction. Staff may require that certain items, such high priced jewelry, electronics or large amounts of cash, be released to authorized individuals.
2. **Individual Authorized to Receive** – Only the counselor, attorney, parent, or legal guardian shall be authorized to receive a resident money or property while in custody of the facility.
3. **Special Circumstances** – The facility recognizes that special or unique circumstance can occur. Exceptions and additions to who may be considered authorized to receive a juvenile's money or property may be made by the Facility Administrator on a case by case basis.

**B. Releasing Resident Funds**

1. **Release of Resident Money Form 789 (2-78)** - This form is used in the event a detained child requests that money be released to someone. It must be completed before any release of money or property can occur. (see Attachment 1)

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**Policy: Releasing Resident Funds (In Custody)      Policy Number: 01-25**

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2. **Verification of Identity** – Before releasing funds staff should verify the identity of the counselor, attorney, parent, or legal guardian. Staff may request a picture identification card such as a driver’s license.
  
3. **Release Transaction** – Staff shall follow the following procedure when completing a release transaction.
  - a. Before releasing money to a resident’s counselor, attorney, parent, or legal guardian the money release form must be completed.
  - b. The child must sign this form to authorize such release of money.
  - c. The person taking said money must sign as well to acknowledge receiving the money.
  - d. The "witnessed by" category is signed by someone who may witness the transaction; i.e., another staff member, the secretary, assigned counselor, etc.
  - e. Staff shall ensure that this form is filled out completely before any money is released.
  - f. When transaction is completed, attach this form to the child's property card.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-19, 1B-21)

**VI. Enclosures:**

1. Property Release Form 789 (2-78)

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-02

Distribution: Detention Home Policy and Procedure Manual

I, \_\_\_\_\_, authorize  
the Superintendent to release \$ \_\_\_\_\_ Dollars from  
my valuables held by him for Tulsa County Juvenile Detention

Home to \_\_\_\_\_  
(Person Receiving Money)

\_\_\_\_\_  
Date Signature of Juvenile

\_\_\_\_\_  
Time Signature of Detention Worker

\_\_\_\_\_  
Received By

\_\_\_\_\_  
Witnessed By

# **Administration and Management**

**01-26**

**Release of Resident Property**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-26</i>
Release of Resident Property		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

It shall be the policy, procedure, and practice of the Detention Home to document and control any transfer of resident property (release of property) by a detained juvenile. No transfer of property may occur between detained juveniles, juveniles and staff and/or any other person without the approval of the Facility Administrator.

I. **Purpose:** Uncontrolled property transfers can foster illegal activities.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

III. **Definitions:** None.

### IV. **Procedures:**

#### A. **General Guidelines**

1. **Authorization** – When a resident request to release property he or she may do so but the juvenile must sign the required documentation authorizing staff to complete the transaction. The Facility Administrator may require that certain items, such high priced jewelry, electronics or large amounts of cash, be released to authorized individuals.
2. **Individual Authorized to Receive** – Only the counselor, attorney, parent, or legal guardian shall be authorized to receive a resident money or property while in custody of the facility.
3. **Special Circumstances** – The facility recognizes that special or unique circumstance can occur. Exceptions and additions to who may be considered authorized to receive a juvenile’s property may be made by the Facility Administrator on a case by case basis.

B. **Release of Property** - In the event the facility is requested, or directed, to release personal property belonging to a detained child to his parent, legal guardian, counselor, attorney, law enforcement agent, or authorized individual a property release form must be completed.

1. **Property Release Form (718)** - This form is used when releasing resident property and applies to items such as a billfold, jewelry, keys, etc. NOTE: Personal property may not be released without signature of child. The line denoting “Witness” is signed by someone who witnesses the transaction (preferably another staff member).

- a. Before releasing property to a resident's counselor, attorney, parent, or legal guardian the property release form must be completed.
- b. The child must sign this form to authorize such release of property and identify each item to be released.
- c. The person taking said property must sign as well to acknowledge receiving the specified items.
- d. The "witnessed by" category is signed by someone who may witness the transaction; i.e., another staff member, the secretary, assigned counselor, etc.
- e. Staff shall ensure that this form is filled out completely before any property is released.
- f. When transaction is completed, attach this form to the child's property card.

2. **Receiving Property** -

- g. After taking all of the child's valuables, have the officer search the boy, or have a female staff member search the girl, while officer is still present.
- h. Store valuables (with exception of money) in a plastic security bag writing the child's name on it; last name first, and place it below the detention window on the floor as the child waits in the lobby.
- i. If the child is admitted, the bag is to be filed alphabetically in the "VALUABLES" file cabinet.
- j. Expensive jewelry is to be placed in a standard letter size envelope and placed in the detention safe.
- k. On the front of the envelope should be recorded the child's name, the date, the amount and type of contents, accompanied by the initials of two staff members who acknowledge receipt of the jewelry. The same information should be recorded on the property card.
- l. Place a signed receipt in the child's valuables and follow the receipt procedure. (SEE RECEIPT PROCEDURE UNDER RELEASES CATEGORY.)

3. **Confiscated Items** - Any confiscated items (illegal size knife, a gun, drugs, etc.) found at this time are to be placed in an envelope with date and the child's name on the envelope and submitted to the Facility Administrator of Detention with an incident report regarding the situation.

- a. A unit shift supervisor should be notified immediately and an incident report should be submitted to the Facility Administrator before the end of the shift it occurred on.

- b. Confiscated items may be returned to the parent by the Program Manager or shift supervisor in the absence of Facility Administrator.
  
- c. The envelope containing the confiscated item or items should be stored in the safe until submitted to the Facility Administrator.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-19, 1B-21)

**VI. Enclosures:**

- 1. Form 718 (2-7-8)

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-03.

Distribution: Detention Home Policy and Procedure Manual



PROPERTY RELEASE FORM

I, authorize the Juvenile Detention Home Superintendent to release the below listed items of property, contained in my Personal Property Bag, held by him for the Tulsa County

Juvenile Detention Home to

ITEMS OF PROPERTY

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_

\_\_\_\_\_ JUVENILE

\_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_ DETENTION WORKER

\_\_\_\_\_ PROPERTY RECEIVED BY \_\_\_\_\_ WITNESS

# **Administration and Management**

**01-27**

**Wages for a Partial Month**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-27</i>
Wages for a Partial Month		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the Policy, procedure and practice of the Juvenile Detention Home to provide for a system of employee compensation which complies with county rules and regulations for employee pay.**

**I. Purpose:** The detention home shall enact specific plans to ensure that staff is compensated appropriately.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

**A. General Guidelines** - When an employee is to be paid for part of a month, amount of compensation is figured on the number of work days in the month.

**1. Wages for a Partial Month** - When compensation is figured on a work day basis as an example (a), the pay per work day amounts to more than if it is figured on the total number of days in the month.

**2. Pay Calculation** - If the employee is to be paid for comp time and/or vacation, these days are included in the pay period. For example, if the employee is to work 7-1 thru 7-15 and has 2 days vacation coming and 3 days comp time, then the pay period is adjusted to 7-1 thru 7-21.

**3. Notification** - Therefore, when preparing a memo of notification that an employee is working only part of a month, please clarify the last day the employee is to be paid thru and including and note that this does include all vacation and comp time.

**a. Example:** An employee is to be paid for working 7-1 thru 7-15

- **Monthly salary: \$662.00**
- Work days in July: 21
- \$662.00 divided by 21 = \$31.5238 per work day
- \$31.5238 times 10 work days = \$315.24

b. **Example:** Salary figured on # days in month

- Monthly salary: \$662.00
- # days in July: 31
- \$662.00 divided by 31 = \$21.3548 per day
- \$21.3528 times 15 days = \$298.97

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures:** None.

**VII. Action:**

Facility Administrator or his designee will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-06.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-28**

**Requisitioning Supplies**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-28</i>
Requisitioning Supplies		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It shall be the policy, procedure and practice for the Juvenile Detention Home to govern the requisition and purchase of supplies and equipment. This process shall comply with the established purchasing procedures of Tulsa County, as well as bidder and vender selection guidelines as defined by the Tulsa County Board of Commissioners.**

**I. Purpose:** All supplies and equipment for the facility are procured on a competitive bid basis, which is coordinated through the Tulsa County Purchasing Office and the Board of County Commissioners.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

#### **A. General Guidelines**

- 1. Designated Bidders and Vendors** – Tulsa County Board of County Commissioners have sole authority to accept bids and designate vendors. The facility may request bids from specific vendors, whose services or goods are required, but not normally provided by the County.
- 2. Procurement** – All supplies and equipment must be obtained according to Tulsa County procedures located in the Book Keeper’s Handbook.
- 3. Authority** – The Director and the Facility Administrator, as designated requisition officers, shall have signature authority to authorize the purchase of goods and services for the facility. Additionally, as requisition officers, they shall decline or refuse payment for goods or services identified as inadequate.

#### **B. Requisitioning Supplies and Equipment**

- 1. Requisition Form** - The requisition form is a form for use by Unit-Shift Supervisors, and Program Manager for the purpose of ordering new supplies and/or equipment. The Administrative Assistant shall coordinate staff request for supplies and equipment.

2. **Staff Responsibility** - Staff shall send all such request through a Unit-Shift Supervisor. Notify the Unit-Shift Supervisor if any supply is running low.

C. **Storage of Bulk Items** – When it is convenient and fiscally wise to do so, certain items will be stored in bulk.

1. **Running Inventory** – Any item identified by the facility as critical to operations in support of facility services, juvenile services, institutional operations, or physical plant needs will be maintained on a running inventory. Such inventory will be maintained by designated staff, in a manner reflecting compliance with Tulsa County warehousing procedures.

## V. **Authority/References:**

Bookkeeper’s Desk Reference for Purchasing TCP 805 (Rev.12/01/03)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-15)

## VI. **Enclosures:**

1. Requisition Form 753 (3-74)
2. Bookkeeper’s Desk Reference for Purchasing TCP 805 (Rev.12/01/03)

## VII. **Action:**

Facility Administrator and Fiscal Officer will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-07.

Distribution: Detention Home Policy and Procedure Manual

REQUISITION FORM

TO: PURCHASING

FROM:

DATE:

HOW MANY	NAME OF ITEM	ITEM NUMBER	COLOR	SIZE



# **Administration and Management**

**01-29**

**Inventory Control**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-29</i>
Inventory Control		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It is the policy, procedure, and practice of the Detention Home to govern inventory control of property, supplies, and other facility assets. Scheduled and periodic inventories shall be conducted in accordance with applicable statutes and regulations.**

**I. Purpose:** Current and complete inventory records should be maintained for all facility property and equipment. By classifying facility property and establishing a systematic property control system, the Detention Home can accurately control and account for all its assets. This procedure promotes the development and maintenance of property and inventory records. Such records are an essential tool for management in its efforts to make sound decisions based on timely and accurate information, to identify and eliminate loss or theft, and to avoid unnecessary purchases.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

A. **General Guidelines** – All practices inventory practices shall comply with Tulsa County guidelines.

1. **Clothing, Linen and Program Supplies Inventory** - This inventory will be conducted by a Unit-Shift Supervisor along with their designees, during the first quarter of each calendar year. Clothing, linen, and program supplies shall be maintained at a central storage area and issued from there to the individual units as necessary.
2. **Tulsa County Property** – Tulsa County requires an annual audit of property with a Tulsa County Property Tag. This audit is completed by the Administrative Assistant for the through the Detention’s parent agency.
3. **Medical Inventory** – A regular inventory of medical supplies and equipment shall be completed by the facility Nurse and reviewed by the Responsible medical Authority.
4. **Training Supplies and Equipment** – Annually the Training Coordinator/Training Supervisor shall perform an inventory of all training supplies and equipment and turn it into the Facility Administrator or his designee for review.

**B. Annual Inventory Documentation and Records** - An annual inventory of property, supplies, and other facility assets shall be completed and documented. The facility Program Manager shall complete a review of all documentation of the inventories and audits and turn them into the Facility Administrator or his designee.

**1. Inventory Record Sheets** – Inventory Record Sheets shall be used to document the daily use and access to program clothing, linen and supplies. Only designated staff shall have access to the central storage area. Inventory record sheets shall be kept in a log book located in the central storage area.

**2. Tulsa County Inventory Records** – The original audit record shall be returned to Tulsa County via the parent agency. The Detention Home shall keep a copy on file in the central filing area.

**3. Medical Inventory Records** – Facility medical inventory records shall be completed by the Nurse, reviewed by the Responsible Medical Authority and turned into the Facility Administrator or his designee to be placed in the central files. A copy shall be kept in the facility medical clinic.

**C. Discarding Items** – From time to time items will wear out, reach the end of their usefulness or simply become unsustainable. Such items must be discarded in a systematic way which meets Tulsa County policy for decommissioning unusable items.

**1. Tulsa County Property Tag** – Any items with a Tulsa County Property Tag must be returned to the parent agency and Tulsa County notified before it can be discarded.

**2. Expendable Items** – Items such as socks, underwear and T-Shirts are considered used when dispensed from the central storage area. Attached is a full list of expendable items. Such items must be ruled unusable by a Unit-Shift Supervisor before they can be discarded or destroyed. This must be documented to the Program Manager.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-14)

## **VI. Enclosures:**

1. Inventory Record Sheet Form
2. Expendable Items List
  - a. Resident Clothing
  - b. Toiletries
  - c. Recreational Items
  - d. Bedding
  - e. Secretarial Supplies

## **VII. Action:**

The facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-08.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



# **Administration and Management**

**01-30**

**Budget Preparation**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management	<i>Policy</i>	<i>01-30</i>
Budget Preparation	<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i> Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

It shall be the policy, procedure, and practice of the Detention Home to ensure that the facility's budget request complies with the policies, procedures, and instructional deadlines established by the Juvenile Bureau and Tulsa County. Annually, facility staff shall participate in the facility's budget development by submitting program recommendations and equipment request. The Facility Administrator shall participate in budget deliberations conducted by the Juvenile Bureau Director and it is the Superintendent's responsibility to submit request for a budget revision to the Juvenile Bureau Director. Significant adjustments to the Detention Home's annual budget must be approved by the Director and comply with the fiscal approval process and guidelines established by Tulsa County.

I. **Purpose:** Because the facility's budget is based on anticipated revenues and expenditures, a periodic budget revision or adjustment may be needed to meet unexpected needs. All budget revisions must meet the approval of the agency Director and comply with the rules/guidelines established by the Tulsa County Budget Board as approved by the Board of County Commissioners. Staff participation in budget development helps define needed resources and provides a better understanding of budgetary constraints and priorities.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

III. **Definitions:** None.

### IV. **Procedures:**

A. **General Guidelines** - The Detention Facility Administrator will prepare and submit an annual equipment needs report to the Director of the Juvenile Bureau.

1. **Timeline** - Each March 1, the Facility Administrator will submit an inventory of equipment needs and needs to replace equipment, as need dictates. On April 1, the Director will compile all costs and priority of need and submit equipment requests for the next year to the County Budget Board.
2. **Source Data** - Equipment needs will be generated from information compiled on the Healthful Environment Weekly Inspection forms. This form is used in a systematic

review of detention equipment on a weekly basis (see enclosed form). Detention staff submits a Major/ Minor Repair Request Memo reporting necessary repairs to the Facility Administrator on an as needed basis. (see enclosed form)

3. **Summary Report** - A summary of the equipment needs will be submitted to the Director on the Request for Equipment for Fiscal Year form (see enclosed form).

**B. Budget Monitoring** – It is the Superintendent’s responsibility to monitor the facility budget and to anticipate budget needs. A Fiscal Officer, who will oversee the daily functions of accounting and reconciling funds and accounts in addition to other duties, will assist him.

1. **Budget Revisions** - It is the Superintendent’s responsibility to submit request for a budget revision to the Juvenile Bureau Director. Significant adjustments to the Detention Home’s annual budget must be approved by the Director and comply with the fiscal approval process and guidelines established by Tulsa County.
2. **Position Control** – The Facility Administrator is responsible for maintaining position control through monitoring the facility’s full time employee allotment (FTE). The Facility Administrator verifies that all positions are in budget and authorized by the Tulsa County Personnel Department for payroll. Payroll is based on time records maintained by the Facility Administrator or his designee.

**C. Staff Participation** – Staff has a vital role in the formation of the budget process through annual goals, repair request, and staff may submit program proposals.

1. **Annual Goals** – Annually staff are required to submit suggestions in the following areas
2. **Repair Request** – Facility repair request, completed by staff, are kept on file for review during formation of the facility equipment needs report.
3. **Proposal Plan** – Staff may submit formal proposal plans requesting additional funds for programming, materials, equipment and capital improvements.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-05, 1B-06, 1B-07, 1B-16)

## **VI. Enclosures:**

1. Healthful Environment Weekly Inspection Forms
2. Major/ Minor Repair Request Memo
3. Request for Physical Needs Form
4. Annual Goals Form (Staff)

## **VII. Action:**



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**Policy: Budget Preparation****Policy Number: 01-30**

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Facility Facility Administrator will be responsible for compliance monitoring of this policy. Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-09.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# Tulsa County Juvenile Detention Home

## Weekly Sanitation, Safety and Security Inspection Form

Inspection **Date**:----- **Time**:-----

Inspection Conducted **By**:-----

Uving, Activity Areas dean	Y/N
Toilets, Sinks, Showers Function Properly	YIN
Exit lights	Y/N
Ughting	YIN
Mattresses, bedding and linens	Y/N
Clothing, Supply And Storage Areas	Y/N
Doors And Windows	Y/N
Locks And Keys	Y/N
Intercom System And Telephones	Y/N
Surveillance Cameras, Security System	YIN
Fire Safety Equipment, Alarm System	Y/N
Regulation Compliance	Y/N
Courtyard Drains dear Of Debris	Y/N
Emergency Exits dear Of Debris	Y/N
Facility Fencing Secure And Undamaged	Y/N
Temperature Is Appropriate (66-80 F Summer, 61-73 F Winter)	Y/N
Laundry Facilities Clean, Dryer Vent Clean	Y/N
Kitchen and Dining Area dean	Y/N
Refidgerator Temperature 35-40 F, Freezer 0 FOr Below	YIN
Pencil marks and food stains in units	Y/N

Deficiencies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Administrator Review

\_\_\_\_\_  
Date

**REPAIR REQUEST**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ AM  
PM

TO:

FROM:

SUBJECT: MAJOR/MINOR

Equipment needing **repair**: -----

Location of equipment: \_\_\_\_\_

Problem with equipment: \_\_\_\_\_

Suggested repair needed: \_\_\_\_\_

**How you tried to altar problem:** \_\_\_\_\_

\_\_\_\_\_  
Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  
PM

Reported to: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  
PM

Repair Started: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  
PM

Repair Completed: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  
PM

Nature of repair: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Delay(Reason): -----

\_\_\_\_\_

Additional Notes: -----

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE TYPE/WRITE HARD - REMEMBER, THERE ARE 6 COPIES.

**REQUEST FOR SERVICE  
BUILDING OPERATIONS**

JOBNO: -----  
                  YYMMDD       ###       DO       CC

REQUESTING DEPT./DIV.: ----- CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE REQUESTED: \_\_\_\_\_ DATE NEEDED: \_\_\_\_\_

DESCRIBE BUILDING AND LOCATION WHERE WORK IS TO BE DONE:

DESCRIBE WORK REQUESTED:

\_\_\_\_\_  
REQUESTING ELECTED OFFICIAL/DIVISION DIRECTOR

APPROVED BY: -----  
                                  BUILDING OPERATIONS DIRECTOR

\_\_\_\_\_  
                                  ASSISTANT SUPERVISOR

CREWMAN ASSIGNED: \_\_\_\_\_  
                                  LEAD

INITIAL DATE: -----  
                                  LEAD

CREW ASSIGNED: \_\_\_\_\_  
                                  (ASSISTANT SUPERVISOR)

INITIAL DATE: -----  
                                  LEAD

CREW NO.	HOURLY RATE	HOURS WORKED	ITEM NO.	DESCRIPTION	QTY.	UNIT PRICE	EXTENDED PRICE	WH NO.	U/M
----------	-------------	--------------	----------	-------------	------	------------	----------------	--------	-----

PARTS \$ \_\_\_\_\_

TOTAL HOURS WORKED X NO. OF CREWMEN \_\_\_\_\_ X HOURLY RATE = TOTAL LABOR \$ \_\_\_\_\_

FINAL COST \$ =====



**Institutional Operations** (*Security & Control, Safety & Emergency Procedures, Rules & Discipline, Juvenile Rights, Special Management*)

**Facility Services** (*Food Services, Sanitation & Hygiene, Health Care*)

**Juvenile Services** (*Admission & Orientation, Social Services, Academic, Literacy & Library, Recreation & Activities, Religious Programs, Mail, Telephone, Visiting, Release*)

Employee Signature

Date

# **Administration & Management**

**01-31**

**Fiscal Control**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-31</i>
Fiscal Control		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It is the policy, procedure, and practice of the Detention Home to provide that the Facility Administrator is responsible for the fiscal management and control of the facility. The Juvenile Bureau fiscal officer is assigned with the management and coordination of the Detention Home's fiscal operation. The Detention Home shall ensure that the fiscal officer for the facility has the appropriate professional qualifications. In order to maintain compliance with changing Tulsa County fiscal requirements, this policy shall be reviewed annually and revised as needed.**

**I. Purpose:** The Facility Administrator with the approval of the Juvenile Bureau Director is responsible for the fiscal management and control of the Detention Home. The agency's fiscal officer is assigned to maintain close coordination with the Facility Administrator and to assist in the fiscal management of the facility. The fiscal officer maintains current and complete fiscal records, so that the agency Director and Facility Administrator can accurately control and account for all its income and expenses. Accurate fiscal records are an essential tool for fiscal planning and budgeting.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Requisition Officer** – An administrative staff member, 90 level or above, may be designated by the Chief Judge or Director of the Juvenile Bureau to act as a requisition officer. Requisition officers are authorized to sign facility checks, purchase orders, bid request sheets and refuse payment for goods, materials or equipment. The Chief Judge shall designate at least two requisition officers per year.

### **IV. Procedures:**

#### **A. Fiscal Control**

**1. Signature Authority** – Only the Facility Administrator and the Director have authority to sign checks or purchase orders for any and all expenditure of facility funds. No Juvenile Detention Home funds may be utilized without the knowledge of the Facility Administrator.



2. **Administrative Responsibility** – The Facility Administrator is responsible for the fiscal control and management of facility funds, although a designated agency staff member shall assist in the management of fiscal operations.
- B. Fiscal Officer** – The fiscal officer has appropriate experience and educational qualifications to perform required functions of the position.
1. **Qualifications** - A bachelor’s degree in business administration or related field. The degree requirements may be satisfied by completion of a career development program that includes work-related experience, training, or college credits at a level of achievement equivalent to a bachelor’s degree.
  2. **Experience** - Three (3) or more years of demonstrated experience in job field and/or administrative experience.
  3. **Duties** – The fiscal officer is an agent of the facility’s governing agency, the Tulsa County Juvenile Bureau, and the duties of the fiscal officer include but are not limited to:
    - a. The fiscal officer ensures that facility practice and records are consistent with Tulsa County Purchasing Department rules and regulations regarding the collection, safeguarding and disbursement of monies.
    - b. The fiscal officer ensures that the accounting system is capable of showing the current status of income and expenditures upon request of the Facility Administrator or the Director.
- C. Internal Controls** - It is the policy, procedure, and practice of the Detention Home to establish internal control guidelines for at minimum the following fiscal areas:
1. **Audits** – Facility funds are managed by Tulsa County, which submits to annual audits by the Oklahoma State Auditors office.
  2. **Petty Cash Fund** – The facility does not utilize a petty cash fund, but does have an emergency purchase order procedure, authorized by the Tulsa County Purchasing Office, that allows for the speedy acquisition of equipment and supplies in unforeseen circumstances. (see Bookkeeper’s Handbook)
  3. **Bonding of Appropriate Staff** – Tulsa County is self-insured and does not require fiscal officer or requisition officer positions to be bonded.
  4. **Signature Control on Checks** – Agency policy requires the signature of one (1) of the two (2) requisition officers and the signature of the fiscal officer to be valid.
  5. **The Issuing and/or use of Tulsa County Purchase Orders** – To access facility funds, the county has in place a purchase order system, which is maintained on-site by the fiscal officer. The fiscal officer ensures that only valid purchase orders are designated for payment by the county and that a requisition officer signs each purchase order.

Purchase orders will only be issued by the county purchasing office. (see Bookkeeper's Handbook)

**D. Regional Services** - The Detention Home receives funding from the Office of Juvenile Affairs (OJA) to operate the facility and in accordance with Oklahoma's State Plan for the Establishment of Juvenile Detention Services. The facility has ten (10) beds of its fifty-five (55) designated for contract use on a regional basis. It is the policy, procedure, and practice of the Detention Home to charge all contract users an equal per diem rate as reviewed by OJA.

1. **Regional Contracts** – Annually the facility contracts with other counties in the state to hold juveniles on a regional basis.
  - a. The Oklahoma Office of Juvenile Affairs (OJA) by law establishes an operational reimbursement rate for the facility that considers the costs associated with the treatment, care, supervision, administrative overhead, and capital improvement considerations.
  - b. OJA then annually contracts with the Detention Home to fund the facility's operation at 85% of their established reimbursement rate times the number of beds for the number of calendar days of that year.
  - c. Tulsa County and the other regional contract users are then expected to provide the remaining 15% of costs.
  - d. The facility in accordance with OJA's funding contract and established rules is only authorized to charge established 15% per diem rate of facility costs for regional detention services.
  - e. Once this rate is established by OJA, the facility can not negotiate different rates with different users.

## **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

Tulsa County Bookkeeper Desk Reference

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-01, 1B-02, 1B-03, 1B-04, 1B-12, 1B-13, 1B-17)

## **VI. Enclosures:**

1. Regional Contract (Blank)

## **VII. Action:**

Facility Administrator and Bureau Director will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:02-10.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

TCJDC Facility Administration based on the projected needs of Tulsa County Law Enforcement Agencies.

(b) During the referral process, the User County or referring party must advise TCJDC of all pertinent information relating to the juvenile, including, but not limited to, any known suicide attempts, suicidal threats, threats of violence towards others, medical conditions, medications, etc. If a juvenile is under the influence of drugs or alcohol, the User County shall be responsible for obtaining a medical clearance for said juvenile to be detained before the juvenile is admitted to TCJDC. This medical clearance must be provided to TCJDC at the time of admittance. The User County is also responsible to make certain that any medications the resident is currently taking are brought to detention with the juvenile at the time of admission. It is the responsibility of User County to make all necessary arrangements that medications of this type are timely refilled and delivered to TCJDC. Any juvenile who arrives without his/her medically necessary prescription medication may not be admitted until the medication is received.

(c) All admissions to TCJDC shall be approved by TCJDC in advance of transportation to the Center. It shall be the responsibility of the User County authorities to initiate and obtain the detention authorization for the juvenile. A written detention order of the District Court for the User County shall be delivered to TCJDC in one of three methods: (1) by facsimile prior to the transportation and delivery of the juvenile; or (2) hand-delivery to TCJDC by User County's transportation officer delivering the juvenile to TCJDC; or (3) by verbal order of User County's District Court Judge providing that the written detention order is delivered by facsimile by 5:00p.m. of the next judicial day. Acceptance of verbal detention orders shall only be granted in cases of exigent circumstances and in TCJDC's discretion. TCJDC shall advise the User County if beds are not available.

##### 5. REPORTS AND COURT ORDERS:

All copies of the written detention orders shall include: the name and signature of the User County's juvenile judge, the full name of the juvenile, the date of admission to TCJDC, and authorization for emergency and/or necessary medical, dental and mental healthcare. Necessary reports from User County shall include: arrest information, a written list of all known significant medical issues, identification and all contact information of adult to be notified in case of a medical emergency. Upon release of the juvenile from TCJDC, the User County shall provide to TCJDC a written release order which shall state the juvenile's name, the date the juvenile is to be released, a clear identification of the person to whom release of the juvenile is authorized and the juvenile judge's signature. Said written release order shall be received by TCJDC prior to the release. Verbal orders of the court may be accepted at the discretion of TCJDC provided a written order is delivered by facsimile by 5:00p.m. of the next judicial day. The Chief Judge of the Juvenile Division of the 14th Judicial District, having administrative authority over the Juvenile Bureau of the District Court and TCJDC, reserves the right to order the release of any juvenile detained in TCJDC to the appropriate User County Authorities. It shall be the responsibility of the User County authorities to arrange for immediate transport.

beds; meeting written rules, policies and procedures for certification pursuant to IO  
O.S. § 2-7-603 and as promulgated by the Board of Juvenile Affairs; and

9) WHEREAS, the User County desires to contract with BOCC for the purpose of  
detaining juveniles at the Tulsa County Regional Detention Center:

IT IS HEREBY AGREED AS FOLLOWS:

1. TERM:

This Agreement shall be in effect until the 30<sup>th</sup> day of June, 2013, provided, however, that in  
the event the respective Boards shall each approve a renewal of the Agreement, on or after  
July 1 of each fiscal year, then this Agreement shall remain in effect for each succeeding fiscal  
year. Either party may terminate this Agreement at any time by giving the other party thirty  
(30) days written notice.

2. SERVICES:

Tulsa County Juvenile Detention Center shall provide and make available to the User County  
the services and facilities of the TCJDC in Tulsa, Oklahoma, on a space available basis, as  
determined by TCJDC, subject to the following terms and conditions in relation to juvenile  
cases arising in the User County under Title IOA of Oklahoma Statutes and requiring  
detention of certain juveniles.

3. FILING:

It shall be the responsibility of User County authorities to file a petition within five (5) judicial  
days after a juvenile is taken into custody as per Title IOA of the Oklahoma Statutes.

4. REFERRAL AND ADMISSION:

Subject to the certificate of insurance by User County sufficient to meet the criteria set out in  
Section 14 of this Agreement, the following provisions apply:

(a) Prior to admission, all juveniles referred to TCJDC for secure detention will be screened by  
the User County's Office of Juvenile Affairs (OJA), Juvenile Services Unit or other designated  
persons and will be determined eligible for placement in a secure detention facility by utilizing  
the detention screening guidelines adopted by the State Judicial Oversight Committee on Juvenile  
Justice. These guidelines are attached hereto as "Attachment A" and incorporated by reference.  
These guidelines will be utilized in the following manner: Juveniles will be accepted who meet  
the definition of Numbers IA, serious offenders IOA O.S. § 2-7-902; IB, Attempted serious  
offenders, IOA O.S. § 2-7-902; 2A, habitual offenders, juveniles with three (3) or more prior felony  
adjudications; 2B, seriously assaultive/destructive offenders, IOA O.S. § 2-3-10 I; 2C, juvenile  
adjudicated in a JD case who escape from an institution or Level E group home; 3A, an offender  
charged with a felony and meeting certain criteria; and 3B, a juvenile adjudicated in a JD case  
who escape from a Level D group home or below, as further described in "Attachment A". Numbers  
3C and 4B will be accepted on a case-by-case basis. Number 4A shall not be accepted. Space  
availability will be determined by the

Detention Services Agreement By and Between The Board of  
County Commissioners for Tulsa County and The Board of  
County Commissioners, for  
\_\_\_\_\_County, Oklahoma

THIS AGREEMENT made the \_\_\_\_\_ day of \_\_\_\_\_, between the Board of County Commissioners for Tulsa County on behalf of the Tulsa County Juvenile Detention Center, hereinafter referred to as "TCJDC" and the Board of County Commissioners of \_\_\_\_\_ County, Oklahoma, hereinafter referred to as "User County".

RECITALS

- 1) Whereas, the State of Oklahoma has mandated pursuant to 10A O.S. § 2-3-103 that each county shall make provisions for the temporary custody of juveniles in a juvenile detention facility certified by the Office of Juvenile Affairs pursuant to IOA O.S. § 2-3-103, and
- 2) Whereas, it is permitted that juvenile bureaus be statutorily formed and utilized to operate juvenile detention facilities pursuant to IOA O.S. § 2-3-103 (C) (3), and
- 3) Whereas, Tulsa County has been named pursuant to 10A O.S. § 2-7-608 by the State Legislature as a regional detention center to provide ten (10) beds to be available for use as regional detention facility, and
- 4) Whereas, the Tulsa County Juvenile Bureau operates the Tulsa County Juvenile Detention Center, and
- 5) Whereas, it is the position of this Board of County Commissioners that it is in the health, welfare and safety interests of the taxpayers of Tulsa County and Northeast Oklahoma, and in the long-term interest of juvenile offenders, that the Tulsa Board of County Commissioners support the Tulsa County Juvenile Bureau in its efforts to comply with this State mandate,
- 6) Therefore, until or unless deemed improper or otherwise directed by the State Legislature, it shall be the policy of the Tulsa Board of County Commissioners to permit and encourage the Tulsa County Juvenile Bureau, subject to a final vote of approval of the Tulsa Board of County Commissioners, to initiate contracts with other counties to provide additional bed space in the Tulsa County Juvenile Detention Center for juvenile offenders of the northeast region of the State subject to the terms and conditions outlined herein, and
- 7) WHEREAS, a Board of County Commissioners shall have the authority pursuant to 10A O.S. § 2-3-103 (C)(3)(c) to enter into a contract with and to pay a public agency, private agency, or a Board of County Commissioners of another county for juvenile detention services in a juvenile detention facility and for alternatives to secure detention; and
- 8) WHEREAS, pursuant to 10A O.S. § 2-3-103 (C); the TCJDC is certified and licensed by the Office of Juvenile Affairs (OJA) to operate secure regional detention

#### 6. NOTIFICATION:

Prior to transporting any juvenile to the TCJDC, it shall be the responsibility of the User County to notify such juvenile's parents of said juvenile's apprehension and detention. Further, that prior to the juvenile's detention hearing, the User County should notify his/her attorney of record of his / her detention

#### 7. TRANSPORTATION:

With the exception of transportation for emergency medical, dental or mental healthcare arising subsequent to admission to TCJDC as described herein, User County will provide transportation to and from the TCJDC for all of its juveniles who are detained at the Center. TCJDC will only transport for medical reasons that are addressed in Section 8 of this Agreement.

#### 8. MEDICAL NEEDS:

Any juvenile detained in TCJDC requiring emergency medical, dental or mental health attention not due to pre-existing conditions shall be taken to local health care facilities by TCJDC. The User County shall be notified within 24 hours or by the close of the next judicial day. It is the responsibility of the User County to provide any needed security if the juvenile is hospitalized. User County shall be immediately notified of any non-emergency illness or injury, as determined by medical staff at TCJDC, occurring subsequent to the juvenile's admission. The User County may elect to transport the juvenile to be treated within the User County and transportation of said juvenile shall be the sole responsibility of the User County. Financial responsibility for all medical services, whether emergency or not, shall be with the parents, legal guardians or legal custodians of the juvenile and/or the User County. User County agrees to pay direct or reimburse TCJDC for all payments due or expenses incurred for said juvenile, except such expenses as may be occasioned by the negligence of TCJDC. Tulsa County bears no responsibility to collect payment from the parents, legal guardians or legal custodians of the juvenile and/or the User County.

#### 9. JUDICIAL PROCEEDINGS and OJA SERVICES:

All judicial proceedings and OJA services regarding the User County's juveniles detained in TCJDC shall be the responsibility of the User County. It shall be the responsibility of User County to provide TCJDC with necessary written judicial orders such as, but not limited to: secure detention, release from detention, transportation, emergency medical/mental health treatment, and temporary releases. It shall further be the responsibility of the User County to ensure that legally proper detention hearings are timely conducted with the resulting copies of written court orders being received by TCJDC with a written judicial order for secure detention, an order for a juvenile to be released from detention, orders to transport, authorization for emergency medical treatment, temporary release orders, and any medication the resident is currently taking. Juveniles adjudicated as Youthful Offenders shall only be eligible for admission after being placed in the temporary custody of the Office of Juvenile Affairs. Juveniles shall not be accepted into the TCJDC after they have reached their eighteenth (18th) birthday.

#### 10. JUDICIAL REVIEW:

Whenever the District Court of the User County orders a juvenile to be held in the TCJDC, that order of secure detention shall remain in force and effect for not more than ten (10) days after such order. Upon application of the User County's District Attorney and after a hearing on such application, the District Court of the User County may extend the effective period of such an order for an additional period not to exceed ten (10) days after such hearing. The total period of preadjudicatory or predisposition detention shall not exceed the ninety (90) day limitation as specified by the Oklahoma Juvenile Code. No preadjudicatory or predisposition detention order shall remain in force and effect for more than thirty (30) days. The District Court of the User County, for good and sufficient cause shown, may extend the effective period of such an order and additional period not to exceed sixty (60) days. It is the responsibility of User County to make certain that the juvenile shall be present at the hearing on the application of extension unless, as authorized and approved by the Court, the attorney for the juvenile is present at the hearing and the juvenile is available to participate in the hearing via telephone conference communication. "Telephone conference communication" means use of a telephone device that allows all parties, including the juvenile, to hear and be heard by the other parties at the hearing. After the hearing, the District Court of the User County may order continued detention at TCJDC, may order the juvenile detained be moved to another placement, or may order the juvenile released.

#### II. OBSERVATION NOTES:

While a juvenile, detained upon the request of the User County, is a resident in the TCJDC, said TCJDC will provide, at the request of the User County, observation notes or other information on such juvenile while in detention, provided TCJDC is given ample time to produce such information.

#### 12. PAYMENT:

The parties agree that the User County shall reimburse Tulsa County for juvenile detention services at a daily rate of forty-four dollars (\$44.00). The User County agrees to reimburse Tulsa County based on the rate, which represents the actual daily operating cost not paid by OJA. Should this Agreement be extended beyond the date set forth in Section I above, the rate per day shall remain the same for any succeeding months of the extended agreement. Should the daily rate change, TCJDC shall notify the User County thirty (30) days in advance of the effective date of the rate change when possible. Payment for services will be made upon receipt of a Claim/Invoice submitted by TCJDC to the Board of County Commissioners of User County. The parties agree that reimbursement for services provided pursuant to this Agreement will be delivered to the Board of County Commissioners of Tulsa County within thirty (30) days of the submission of the Claim/Invoice to User County. It is understood by both parties that this daily charge does not include reimbursement for any expenditure(s) made by TCJDC or Tulsa County for medical care or expenses associated with medical treatment of User County's detained juvenile. Expenses of this nature will be billed in the same manner as outlined above as additional charges over and above the daily detention service fee. Reimbursement for such additional charges will be made by



User County pursuant to the same conditions set forth above for payment for the daily rate

### 13. LIABILITY:

The parties agree that each party shall be responsible for its own negligence, if any, in the delivery of services pursuant to this contract. TCJDC shall be liable only for the delivery of custodial services at the TCJDC. The User County Court shall retain all legal responsibility for the determination and demotion of the detention of its juveniles. In the event a juvenile of User County detained in TCJDC under this Agreement causes damages or participates in causing of damages to the TCJDC facilities, furnishings, equipment, or any other property located at the Detention Center, Tulsa County reserves the right to file appropriate charges against the juvenile for reimbursement of damages and /or seek the benefit of the insurance provided by User County pursuant to Section 14 of this Agreement.

### 14. INSURANCE

Pursuant to IOA O.S. § 2-3-104, the Board of County Commissioners of User County shall provide to TCJDC a certificate of insurance coverage naming Tulsa County as a coinsured in amounts sufficient to meet the limits of liability provide in the Oklahoma Governmental Tort Claims Act (51 O.S. § 1S1 *et seq.*) as set out in S1 O.S. § 154 for any tort liability risk incurred as a result of providing or providing for the tempomry detention of juveniles in TCJDC pursuant to the provisions of the Oklahoma Juvenile Code. This certificate of insurance must be received and approved by the Tulsa County District Attorney's Office before any juvenile of User County can be admitted to TCJDC.

### 15. MODIFICATION OR TERMINATION:

This agreement may be modified with the written approval of both parties or may be terminated by either party upon thirty (30) days written notice to the other party.

### 16. MISCELLANEOUS PROVISIONS

The failure of either party to enforce any of the provisions of this Agreement, or a waiver thereof in any instance shall not be construed as a geneml waiver or relinquishment on its part of any such provision, but the same shall, nevertheless, be and remain in full force and effect.

This Agreement contains the entire agreement of the parties with respect to the services described herein, and no other Agreement, statement, or promises made by any party, or to any employee, officer, or agent of any party, which is not contained in this Agreement shall be binding or valid.

This Agreement expressly supersedes all previous agreements between the parties.

If any provision in this Agreement is construed or found to be unlawful, the parties agree that this Agreement shall be construed as if that provision were not contained herein if the exclusion of such provision is reasonable and does not materially alter or affect the provisions of this Agreement.

APPROVED this \_\_\_\_\_ day of \_\_\_\_\_ • 20 \_\_\_\_.

BOARD OF COUNTY COMMISSIONERS OF  
TULSA COUNTY. OKLAHOMA

\_\_\_\_\_  
Chairman

ATTEST:

\_\_\_\_\_  
County Clerk

Tulsa

APPROVED as to form:

\_\_\_\_\_  
Assistant District Attorney  
Tulsa County. Oklahoma

APPROVED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

BOARD OF COUNTY COMMISSIONERS

\_\_\_\_\_ COUNTY, OKLAHOMA

User County

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Member

\_\_\_\_\_  
Member

ATTEST:

APPROVED as to form:

\_\_\_\_\_  
County Clerk

\_\_\_\_\_  
Assistant District Attorney

\_\_\_\_\_ County, Oklahoma

# **Administration and Management**

**01-32**

**Policy and Procedure Manuals**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-32</i>
Policy and Procedure Manuals		<i>Current Revision</i>	<i>05/24/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

The Detention Home will establish, maintain and make available to all facility employees the agency's personnel manual and will provide as an administrative reference, a Tulsa County employee handbook. It shall be the practice of the Detention Home to comply with all applicable personnel rules and laws; to ensure that personnel policies are equitably administered; to promote a professional and ethical environment through the establishment of appropriate work rules and criteria for the recruitment, selection, retention, and promotion of a qualified, professional staff; and to provide a guide for the appropriate management of employee services, benefits, and relations.

**I. Purpose:** Written personnel regulations help ensure equitable and consistent treatment of all employees. Every employee should be provided with a Tulsa County employee handbook and to have the opportunity to review the agency's personnel manual at the time of employment and any time thereafter. It is the goal of this agency to provide employment opportunities to the widest possible range of candidates and shall select from that group the best-qualified persons to meet the agency's needs. Selection, retention and promotion shall be based upon merit; applicable statutes and personnel policies as set forth in directives from the Presiding Judge of the Juvenile Division and Juvenile Bureau Director. Consultants, volunteers, and contract personnel who work with juveniles shall agree to comply with written policies of the agency, especially on confidentiality of information.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

**A. Administration of Employee Personnel Policies** – the Detention Home Facility Administrator and facility administrators are responsible for the administration of the facility's personnel policies and procedures; and to ensure that they comply with applicable law and agency rules. The Detention Home administrators and assigned supervisors are responsible for ensuring that individual employees receive information about personnel policies and procedures during their orientation period. Facility administrators and supervisors will also be responsible for providing interpretations and/or referrals to appropriate resources.

**B. Policy and Procedure Manual and TCJB Personnel Manual** – the agency will establish, maintain, and make available a policy and procedure manual and a Tulsa County Juvenile Bureau Personnel Manual to use as a professional reference that covers at a minimum the following areas:

- Equal Opportunity Provisions (Legally defined “At Will” Employment Status)
- Equitable Administration and Non-Discriminatory Practice (ADA Compliant)
- Confidentiality and the Right to Privacy
- Table of Organization (Organizational Charts/Lines of Authority)
- Recruitment, Background Investigation, Post Offer Physical and Drug Testing
- Selection, Retention, and Promotion
- Job Descriptions and Qualifications
- Work Hours
- Dress Code
- Nepotism
- Classification and Compensation Determination
- Personnel Records
- Employee Benefits and Leave
- Orientation and Probation
- Personnel Records and Employee Evaluations
- Staff Development and Training (Including In-Service Training Requirements)
- Reporting and Responding to Workplace Injuries (First Aid and CPR Training)
- Retirement, Disability Separation, Layoffs, Resignation, and Termination
- Reemployment
- Employee/Management Relations
- Code of Conduct and Code of Ethics
- Disciplinary Procedures
- Employee Grievance and Appeal Procedures
- Conflicts of Interest and Prohibited Political Activities
- Insurance, Legal Representation and Professional Liability Requirements
- Safety and Security
- Personal Safety, Use of Force, and Non-Violent Crisis Intervention (CPI Training)
- Emergency Contingencies and Procedures
- Firearm Prohibition
- Workplace Violence
- Sexual Harassment
- Drug-Free Workplace
- Smoking Policy
- Use of Agency Equipment
- Internet, E-Mail and Network Security/Administration
- Personal Calls and Long Distance Calls
- Parking and Use of County Vehicles
- Continuing Education and Tuition Assistance

C. **Notification of Staff** – During orientation, each employee shall sign a statement acknowledging that he/she understands their responsibility for being aware of facility policy and procedure and complying with all required sections.

1. **Employee Access** – All employees shall have access to facility policy and procedure manuals that are maintained in a central and open location.
2. **Policy and Procedure Updates** – When there are policy and procedure updates staff will be notified in writing of specific changes and where they can be found.

D. **Annual Review** – The Facility Administrator shall direct an annual review of all policy and procedures and submit recommendations for changes to the Juvenile Bureau for review.

## V. **Authority/References:**

10 O.S. 7302-8.3 (Standards of Cleanliness)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-01, 1C-02, 1C-03)

## VI. **Enclosures:**

1. Employee Acknowledgement Form
2. Employee Acknowledgement of Receipt Form

## VII. **Action:**

The facility Accreditation Manager will be responsible for compliance monitoring of this policy.

The facility Facility Administrator or his designee will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-01.

Distribution: Detention Home Policy and Procedure Manual

Tulsa County Juvenile Detention Home  
Acknowledgment and Agreement Form

I, by the signature below,

Print Name

Position

acknowledge that I have access to the Tulsa County Juvenile Detention Policy & Procedure

Manual from \_\_\_\_\_ and understand that I am

responsible to read, be current, to adhere and follow its policies and procedures. I further understand that in circumstances if I fail to adhere to the policies and procedures, that I will be subject to disciplinary action, up to and including discharge from employment. This document does not constitute an employee contract.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Administrative Staff Signature

\_\_\_\_\_  
Date



# **Administration and Management**

**01-33**

**Staffing Requirement**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-33</i>
Staffing Requirements		<i>Current Revision</i>	<i>05/24/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

**The Facility Administrator of the Detention Home shall have the responsibility to periodically review and assess facility staffing requirements for all categories of personnel to ensure that residents have access to staff, programs, and services.**

**I. Purpose:** The Facility Administrator should determine staffing requirements on more than Office of Juvenile Affairs (OJA) mandated staff to juvenile ratios and juvenile population figures. This periodic assessment should include the quarterly and annual review of staffing needs for all facility programs and services. Workload ratios should take into account the need for training, personal and holiday time off, and vacation. Additionally, the facility's staffing should also consider such factors as goals, legal requirements, the character and needs of the juveniles supervised, and other duties required of and/or performed by facility staff. It is essential that assigned workloads for direct care staff to be sufficiently low in order to provide constant access to staff and availability of effective services.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

### **III. Definitions:**

**Vacancy:** - any authorized position which is not filled by a permanent designee.

**Authorized Positions:** - positions assigned to the facility, in writing, by the parent agency.

**Budget and Planning Committee:** - all facility supervisors and the administrative team of the Detention Home.

### **IV. Procedures:**

**A. Monthly Report** - The Program Manager shall provide the Facility Administrator with accurate statistics about facility staffing. Monthly staffing statistics shall be provided in the facility's Monthly report and shall include the following:

- Total number of staff assigned to each section.
- Total vacancies in each section.
- Vacancies anticipated.
- New staff expected.

- Total vacancies in the facility.
- Total number of authorized positions.

**B. Evaluation of Facility Operations -**

1. **Role of Unit-Shift Supervisors** – Unit-Shift Supervisors shall constantly monitor and evaluate facility operations and propose operational improvements as needed to include the increase need for staffing. Proposals shall include written justification and projected effects to currently allocated position funding. Daily, Unit-Shift Supervisors shall evaluate staffing levels to ensure programming and state requirements are met. Any variation in this area shall be reported to administrative staff.
2. **Role of Administrators** - Facility administrators will be required to insure realistic and facility mandated minimum coverage for all essential posts. Facility schedules must allow coverage for training, days off, annual and personal/sick leave and all emergency leaves. Administrative staff charged with maintaining schedules will monitor and report to the Facility Administrator any irregularities in scheduling that may affect the facility ability to adequately provide resident access to staff, programs and services.

**B. State Requirements** – The facility shall comply with state requirements for resident staffing as delineated in OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47). Facility administrators are responsible for maintaining current data on state requirements, and ensuring dissemination of such information as well as verifying compliance.

**V. Authority/References:**

10 O.S. 7302-8.3 Juvenile Detention Facilities  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-04)

**VI. Enclosures:****VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility Program Manager will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-02.

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**01-34**

## **Equal Employment Opportunity**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-34</i>
Equal Employment Opportunity		<i>Current Revision</i>	<i>05/24/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>07/01/11</i>

**It is the policy, procedure, and practice of the Detention Home to ensure that equal opportunities exist for all positions within the facility. The Detention Home will document annual reviews of this public policy goal and implement any changes necessary to remain current with the applicable federal and state equal employment opportunity (EEO) laws and regulations.**

**I. Purpose:** Equal employment opportunity is a public policy goal. All qualified persons must be allowed to compete equally for entry into and/or promotion within the facility. The facility should actively encourage the participation of members of minority groups, individuals with disabilities, and women.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

**A. Equal Employment Opportunity** – Tulsa County Juvenile Detention Home is a division of Tulsa County and as such is bound and required to comply with Tulsa County’s policy on Equal Employee Opportunity (Tulsa County Employee Hand Book Section 1:1.4).

**1. General Guidelines** – The Detention Home is dedicated to providing equal employment opportunity to all qualified individuals. It is the policy of the Detention Home to recruit, employ, compensate and promote the most qualified persons for all classified positions within the Detention Home, solely on the basis of job-related qualifications and competency.

**V. Authority/References:**

Tulsa County Employee Handbook Section 1.4 (Equal Employee Opportunity)  
10 O.S. 7302-8.3 Juvenile Detention Facilities  
 OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
 ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-05)

**VI. Enclosures:** None.

**VII. Action:**

The facility Facility Administrator will be responsible for compliance monitoring of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-03.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-35**

**At Will Employment**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-35</i>
At Will Employment		<i>Current Revision</i>	<i>05/24/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

**It is the policy, procedure, and practice of the Detention Home to ensure that all facility employees understand and know that state law legally establishes an “at will” employment relationship within the facility. However, all individuals will be selected, retained, and/or promoted on the basis of merit and specified qualifications. Every new employee is entitled to receive consideration and credit for any prior training and/or experience.**

**I. Purpose:** All hiring policies are reviewed by the parent agency, Tulsa County Juvenile Bureau, and by the Tulsa County Office of Personnel to ensure that the personnel system is open and fair with no artificial barriers to employment. Required qualifications are related to the skills needed to perform the work and are documented in specific job descriptions for each position.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Staff Selection and Promotion** – Initial selection and promotions shall be based on experience education, training and performance. Employment and promotion requirements shall be evaluated by written test, oral interviews, and background investigation verification, or combination of the three. Staff members must be able to demonstrate that they have the skills required to perform specific job-related tasks.

**1. Lateral Appointments** – Lateral entry into and within the facility shall be made permissible at all levels. The Facility Administrator shall give personnel within the facility the first opportunity for advancement or lateral movement; however, no section shall initiate or allow any practice that restricts selection or promotion of qualified personnel from outside the section of the detention home.

**2. Reassignment** – Staff shall be subject to reassignment. Such changes will be made with due consideration of the needs of the staff, however the needs of the facility shall be of primary concern.



3. **Promotions** – It is the policy, procedure, and practice of the Detention Home to provide for promotion from within the facility and from other sources. Anyone with the required education, experience, and background shall be eligible for consideration for any position at any level within the agency and/or facility he or she is qualified for. The facility's practice is to emphasize promotion from within, but will accept qualified lateral transfers from other agency departments or Tulsa County offices, before opening it up to the public.
  4. **Educational Substitutes** - It is the policy, procedure, and practice of the Detention Home to specifically outline experience and education substitutes for all facility position qualifications. In cases where a person is highly qualified due to experience but does not possess the academic training, a substitution for experience shall be allowed and specifically outlined in the facility's posted job description. However, any substitution for experience must be directly related to the position sought. Similarly, there are cases where education may be substituted for experience. Where such substitutes are appropriate, shall be specifically defined in individual job descriptions, which shall be made available to applicants
  5. **Equal Employment Notice** - The Detention Home complies with Tulsa County's policy on equal employment opportunity. Therefore, it is the policy of the Detention Home that there shall be no discrimination against any individual because of race, color, sex, age, religion, national origin, ancestry, marital status, handicap or political affiliation, with regard to all terms, conditions eligibility's and privileges of employment for all positions in the detention home.
- B. Professional Specialist** – It is the policy, procedure, and practice of the Detention Home to require all professional specialists working in the facility to be qualified (licensed and/or certified) in their fields.
1. **Required Credentials** - Professional specialist are those individuals utilized by the Detention Home that work in the fields of education, theology, recreation, social work, library science, medicine, pharmacy, dentistry and/or psychology that require specific preparation to achieve professional status. Individuals working in these fields in or for the facility must provide and maintain their professional credentials, through either current license or certification. The facility will verify the credentials of any professional specialist working within the facility.

## **V. Authority/References:**

TC Employee Handbook 1.4: Equal Employment Opportunity Policy

10 O.S. 7302-8.3 Juvenile Detention Facilities

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-06, 1C-07, 1C-08, 1C-09)

## **VI. Enclosures:** None

**VII. Action:**

The Facility Administrator will be responsible for compliance monitoring of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-06.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration and Management**

**01-36**

**Criminal Record Check**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration and Management</b>	<i>Policy</i>	<i>01-36</i>
<b>Criminal Record Searches</b>	<i>Current Revision</i>	<i>01/01/15</i>
<b>Approved by:</b> Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>02/28/15</i>

It shall be the policy, procedure and practice of the Juvenile Detention Home to provide for a system of criminal record checks that comply with Tulsa County Human Resources procedures and Requirements for Secure Juvenile Detention Centers as published by the Oklahoma State Office of Juvenile Affairs.

I. Purpose: To ensure that the facility can meet its obligations under Oklahoma Administrative Code 377: 3-13-43 and maintain compliance with Office of Juvenile Affairs contract requirements, as well as Tulsa County Employment practices, the facility will manage and administer a system to perform an appropriate criminal history investigation on perspective employees and current employees as necessary.

II. Applicable To: This policy is applicable to all volunteers, interns and personnel employed and paid/unpaid by the Tulsa County Juvenile Detention Center.

### III. Procedures:

A. Criminal Record Searches – In order to ensure that all employees and volunteers are competent, qualified and meet all standards for interacting and providing direction to juveniles placed in custody, a system of legal and authorized criminal record searches will be completed. Individuals in this category have completed an application, form 327 (rev. 9-14) and an Applicant Release of Information, form 2173 (Rev. 3-05), indicating that they have authorized the facility to complete a background check in order to be considered for employment with the facility.

1. General Compliance – Nothing in this policy is meant to conflict with established Tulsa County policy and procedure, except for where the unique environment of the facility requires different measures to maintain the operational nature of the facility. Any person who desires to be an employee at the Tulsa County Juvenile Detention Center (TCJDC) must complete an application form and an authorization for the TCJDC to complete the required background checks. Any applicant who fails to comply will be removed from consideration for employment. All staff of the TCJDC must complete the full background check as described in OAC 377: 3-13-43.

2. Volunteers and Internships – All persons who may be placed in the supervision of juveniles must complete the criminal record check process. Individuals such as special

speakers, tour groups and those sent to the facility to provide services for the juveniles by a recognized state agency will not be required to complete a full background check.

3. Documentation – The facility will document the results of employee criminal record search in the confidential employee file. Each background check shall be reviewed and approved by the Facility Administrator of TCJDC.
  4. Criminal Record Search - A criminal record search shall consist of the following:
    - a. NCI-111 -with fingerprint option
    - b. DOC violent Offender Registry
    - c. DOC Sex Offender Registry
    - d. Oklahoma State Bureau of Investigations Criminal History
    - e. DHS Child Care Restricted Registry (Joshua's List)
    - f. TCSO Driver License Traffic Record
    - g. TCSO Criminal Record Inquiry
- B. Facility Responsibility - The facility will provide the means to complete the criminal record check process and communicate facility expectations to applicant and staff.
1. Notification – All applicants and staff of the facility shall be notified that a criminal record check is required and that the facility reserves the right to perform criminal record checks as a condition of continuing employment.
  2. Tulsa County Sheriffs Office -All facility criminal record checks will be conducted by trained staff through the Tulsa County Sheriff's Office (TCSO). This includes the fingerprinting of staff for NCI III.
  3. Processing a Criminal Record Search – When an applicant or a staff member is referred for a criminal record Search the following shall be completed:
    - a. The applicant/employee must complete an Applicant Release of Information form and turn it in to the Superintendent's Administrative Assistant.
    - b. The Administrative Assistant will review the form for completeness and obtain the approval of the Facility Administrator to start the criminal record check process.
    - c. After the Administrative Assistant obtains approval, they will contact the TCSO and complete a Record Search Request form, which may be sent via electronic communication.
    - d. After the Administrative Assistant obtains approval, they will contact the OSBI and complete a Record Search Request form, which may be sent via electronic communication.
    - e. When the record checks are complete, the TCSO will contact the facility and the facility will arrange for pick up. Only specifically authorized administrative staff will be allowed to handle criminal record search information.
    - f. The criminal record check information will be reviewed by the Facility Administrator.
    - g. If the applicant is disqualified from further consideration they will be notified by the Facility Administrator through letter.

- h. If a current employee's record check reveals any information which might affect their ability to continue as an employee of TCJDC, they will be notified in person if possible and shall have the right to explain the information in question before any permanent action is taken.
4. **Security of Documentation-** Each employee's criminal record search information will be placed into a separate section of the confidential employee files and kept under lock and key. General access to employee confidential files is restricted.

#### IV. Authority/References:

OAC: 377:3-13-36 Office of Juvenile Affairs Requirements for Secure Juvenile Detention Centers  
OAC 377:3-1-34 HB3496 child trafficking reporting law  
OAC 377:3-13-39 SB929 (pg 32), statute citation for detention  
OAC 377:3-13-43 Detention - Tb & background searches  
OAC 377:3-13-88 CICs - Tb & background searches  
OAC 377:3-13-88 for CICs mirrors 377:3-13-43 for detention  
OAC 377:3-17-29 SB1781 OJA access to adult jails, lockups, & facilities, plus data  
OAC 377:10-1-8 SB929 (pg 4) & SBI235 (pg 4), records to the child & to DMHSAS  
OAC 377:10-7-3.2 SB1791, DHS CWrecords check for OJA Foster Care applicants  
OAC 77:10-7-30 SB929 (pg 32), statute citation for detention  
OAC 377:15-11-3 SBI449 DHS-operated children's shelters possibility  
OAC 377:25-3-1 SB929 (pg 32), statute citation for detention  
OAC 377:25-3-2 SB929 (pg 32), statute citation for detention  
Tulsa County Employee Handbook Rev. July 2014

#### V. Enclosures:

##### 1. Record Search Request Form

#### VI. Action:

The Agency Administrative staff will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator of the Detention Center.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-08

Distribution: Juvenile Detention Home Policy and Procedure Manual.



**DISTRICT COURT OF THE STATE OF OKLAHOMA**  
FOURTEENTH JUDICIAL DISTRICT  
**DORIS L. FRANSEIN**  
Chief Judge  
Juvenile Division

**APPLICANT RELEASE OF INFORMATION**

POSITION APPLIED FOR: \_\_\_\_\_

FULL LEGAL NAME: (Print)

\_\_\_\_\_  
First Middle Last (Suffix)

ANY OTHER NAME USED: (Maiden)

\_\_\_\_\_  
First Middle Last (Suffix)

D.O.B. \_\_\_\_\_ RACE \_\_\_\_\_ SEX \_\_\_\_\_

SOC. SEC. NO. \_\_\_\_\_

DRIVER LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_

This will authorize \_\_\_\_\_  
Person/Title

of the Juvenile Bureau of the District Court, 315 S. Gilcrease Museum Rd., Tulsa Oklahoma 74127, to conduct a criminal record check and background investigation for the sole purpose of inquiries regarding my qualification for employment with the Juvenile Bureau.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Form 2173 (Rev. 5-12)



Juvenile Bureau of the District Court of Tulsa County, Oklahoma  
315 South Gilcrease Museum Road • Tulsa, Oklahoma 74127-8403 • (918) 596-5971

# **Administration and Management**

**01-37**

**Physical Examination**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-37</i>
Physical Examination		<i>Current Revision</i>	<i>05/25/04</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/30/12</i>

**It is the policy, procedure, and practice of the Detention Home to require that employees who have direct contact with residents to receive a physical examination that includes a Montoux Tuberculin skin test before being employed. Employees will be subject to re-examinations according to a defined need or as required by applicable state health and safety standards.**

**I. Purpose:** Staff whose responsibilities include security and control and/or regular direct contact with residents must have a physical examination and subsequent TB skin test to protect their health and ensure that they can carry out their work assignments effectively. The basic health status of all employees should be evaluated against specific and applicable state health and safety standards required for their facility assignments. The physical examination and screening procedures will be reviewed by the facility's medical authority and must be established in accordance with applicable employment laws and personnel regulations.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

**A. General Guidelines** - All staff whose responsibilities include security and control, food services, medical services, or regular direct contact with detention residents must have a post job offer physical examination prior to any job assignment. The basic health status of all employees should be evaluated against the specific requirements of their specific job assignment, in accordance with established State and Federal Regulations.

**1. Review and Approval** - The Detention Home physical examination and screening procedures are approved, by the facility physician, whose is the Medical Health Authority of the Detention Home. This policy is reviewed annually and revised as necessary.

**B. Post-Offer of Employment Physical** - After a formal criminal background record check is completed and received by the Facility Administrator, the prospective employee will be scheduled for a physical. The Detention Home Administrative Secretary will coordinate the appointment with the Tulsa County Social Services nurse. The appointment date and time will be given to the applicant.

1. **TB Skin Test Requirements** - It will be necessary that the applicant meet the schedule requirement, because it is mandatory for the applicant to return two days later for the nurse to interpret the TB Skin Test results. Failure to return on the designated date will void the TB test. This will require a new date to be set for another TB test and reading. This will require an additional one week wait until a new TB shot can be administered.
  - a. Failure to complete the physical exam requirements a second time will dismiss the applicant from consideration. All results must be returned to the Administrative Secretary as they are completed. If the physical and TB test is complete the applicant will be sent to take an employment drug test.
2. **Eligibility Requirements** - If the applicant is not eligible for employment, due to the physical or TB results, and it is determined that it would affect his/her ability to carry out the job duties effectively, then the Facility Administrator will explain the matter of consequence to the applicant in confidence. Minutes of this conference will be stored in a separate, secure and confidential file as are all employee medical records.

#### **V. Authority/References:**

10 O.S. 7302-8.3 Juvenile Detention Facilities  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-14)

VI. **Enclosures:** None.

#### **VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-09

Distribution: Detention Home Policy and Procedure Manual

# **Administration and Management**

**01-38**

**Performance Reviews**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration and Management		<i>Policy</i>	<i>01-38</i>
Performance Reviews		<i>Current Revision</i>	<i>04/28/04</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Detention Home to conduct an annual written performance review of each facility employee. This review is based on defined criteria established by the Tulsa County Personnel Office and the results are discussed with the individual employee. Every employee shall have an opportunity to make comments about their review in writing.**

**I. Purpose:** Performance reviews are an ongoing process with written evaluations completed annually. These annual reviews are required and established to be objective and based on specifically defined criteria and performance standards set forth by Tulsa County. Annual evaluations are required by the Office of Juvenile Affairs and American Correctional Association standards.

**II. Applicable To:** This policy is applicable to all personnel, consultants, volunteers, and contract personnel who work within or for the Detention Home.

**II. Definitions:** None

### **IV. Procedures:**

**A. General Guidelines** – Tulsa County Juvenile Detention Home is a division of Tulsa County and operates under the auspices of the Juvenile Bureau of the District Court and must comply with the requirements, policy and procedures of both organizations. Tulsa County policy requires annual assessments of each employee’s status so that the employee understands areas of his/her performance identified as worthy of praise and areas in need of improvement. Additionally the agency’s, through the employee’s supervisor, shall work with the employee to set goals for future employee development.

**1. Pay Increment** – It is the policy of Tulsa County that before any annual pay increase is approved; an annual evaluation must be on file.

**B. Goals of Employee Evaluations** – Any organizations success ultimately depends on the caliber and performance of its employees. A formalized performance evaluation system should attempt to accomplish several goals for the employee, the supervisor and employer. Performance Evaluations shall:

**1. Benefit the Employee by –**

- a. Provide employees with an understanding of their work performance as viewed by management
- b. Provide employee with recognition of those areas of work performance in which they excel and those areas needing improvement.
- c. Provide employees an opportunity to discuss work-related ambitions, expectations and/or problems.
- d. Provide employees a formal vehicle with which to meet and confer with management relative to any problem areas confronting both parties.

**2. Benefit the Supervisor –**

- a. Help head off serious disciplinary actions by addressing any problems in the early stages.
- b. Provide supervisors with an understanding of the employees' view of their job and place in the departmental structure.
- c. Encourage communication between supervisors and employees' in order that supervisors may make informed decisions relative to training, promotions, retention, etc.
- d. Provide supervisors a major role in personnel decisions.

**3. Benefit the Agency -**

- a. Provide an overview of the efficiency of utilization of personnel and allow the employer to determine whether the right individual is in the right job.
- b. Provide a profile of group performance.
- c. Serve as a check on employment practices. A consistent pattern of widespread poor performances may result from improper standards or failure to properly use the provisional period.
- d. Measure the quality of supervision.

**C. Evaluation Process -**

- 1. **Preparation** – In preparation for the evaluation, the rating supervisor should review the position description. Only job-related matters may be considered. Any personal problems, which the employee may have at the time, shall not be considered unless there is clear evidence that such an issue has had an effect on their work performance. Supervisors evaluating staff should review the evaluation form and manual. Identify and review the time period the evaluation is to cover in order to develop a proper

perspective. Raters should not allow one incident, no matter how significant at the time, to unduly affect the overall evaluation. The evaluation is concerned with an employee's total performance and not isolated incidents.

2. **Completion** – This section involves the completion of the standard employee evaluation form, of which there are two versions.
    - a. Non-Supervisory Evaluation Forms – are used for detention counselors, secretaries, cooks and other support staff.
    - b. Supervisory Evaluation Forms – any employee who is tasked with the supervision of subordinates in their job description and/or who's duties require management skills prudent judgment.
  3. **Review** – The Supervisor rating the employee shall review the evaluation form with the program Manager before meeting with the employee. This allows a third party to make suggestions and give feedback to the supervisor before any issues have a chance to develop. The conference should be designed to:
    - a. Give the employee a clear understanding of his or her job performance.
    - b. Indicate those areas of performance that deserve merit.
    - c. Indicate those areas of performance that need improvement.
    - d. Aid in building good relations between supervisors and employees.
    - e. Eliminate any misunderstanding that exists.
    - f. Provide an opportunity for the employee to discuss any facets of work that are understood or in which the employee feels help is needed.
- D. **Employee Conference** – It is acknowledged that in some cases this process will be difficult. Supervisory staff should recognize that the ease and success of each interview will depend to some extent on the level of communication and rapport they have previously established with the employee. To minimize any difficulties, the general guidance below is provided to help in conducting a successful interview; however, the degree to which these suggestions are beneficial in specific cases will vary with each employee.
1. **Schedule Adequate Time** – Although the allotted time will vary with each evaluation, be sure to schedule enough time to avoid rushing the interviewer or giving the employee the impression that the process does not merit enough time. Interviews should not be overly lengthy, but should provide sufficient time for a complete exchange of information.
  2. **Respect Privacy** – Arrange for the conference to be conducted in an office or other location which assures maximum privacy. Only the employee and appropriate supervisory/management personnel are meant to participate in and know details of the individual evaluation. Privacy creates an atmosphere in which the employee may feel

more at ease and free to speak, and also helps ensure that any negative factors discussed do not become common knowledge.

3. **Maintain Relevancy and a Positive Approach** – Although it may be helpful to engage in some helpful small talk, don't let the interview ramble at great lengths on subjects not relevant. It should also be remembered that performance evaluation and conferences are not meant to be used as punish or scold an employee, but rather to help both the employee and management identify the strengths and weaknesses of both the employee and his or her operational area. Used in this manner, the performance evaluation can become a positive morale builder.
  4. **Appropriately Manage Corrections** – In discussion with the employee, identify problem areas, recommend changes necessary to alleviate the situation, and establish a time period within which improvement must be shown. Supervisors should note the time period specified for improvement and monitor the employee's activity accordingly. If improvement is shown, the employee should be informed that his progress is appreciated. If no progress is shown, further counseling may be the answer or disciplinary action may be necessary.
- E. **Administrative Review** – After the Evaluation is written by the employee's supervisor it must be reviewed by administrative staff before staff is allowed to view it. After staff have reviewed it and discussed it with their supervisor staff should sign it in the appropriate area. When staff sign the evaluation they are not agreeing or disagreeing with its contents. It is merely documenting that they have seen it and it has been reviewed with them. The supervisor that prepared and reviewed the evaluation with the employee is required to sign the evaluation as well. The Facility Administrator of Juvenile Detention is required to review and approve all formal evaluations before they are sent to the Tulsa Court personnel.

## **V. Authority/References:**

TCP 209: Performance Evaluation

Tulsa County Personnel Department Performance Evaluation Manual (Non-Supervisory)

Tulsa County Personnel Department Performance Evaluation Manual (Supervisory)

10 O.S. 7302-8.3 Juvenile Detention Facilities

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-16)

## **VI. Enclosures:**

## **VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-11

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



# **Administration & Management**

**01-39**

**Attendance and Tardiness**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-39</i>
Attendance and Tardiness		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be the policy, procedure and practice of Tulsa County Juvenile Detention Home to create and meet staffing guidelines for all staff categories required for the safe and effective operation of the facility. This shall include setting standards for appropriate staff attendance and tardiness.**

**I. Purpose:** Tulsa County Juvenile Detention expects regular and prompt attendance from its employees. Excessive non-paid absences, tardiness and leaving the job early are all unacceptable. If the rate is excessive, regardless of cause, the employee may be subject to disciplinary action up to and including discharge.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Excessive Tardiness** – Employees who are late in reporting for duty on more than three (3) occasions in a calendar month.

**Excessive Absences** – Employees who have seven (7) or more absences during an evaluation year for issues not related to FMLA or Workmen’s Compensation.

### **IV. Procedures:**

**A. Scheduling** – Multiple shifts or overtime schedule may be required as determined by management. The facility will give as much prior notice as possible when schedule adjustments or overtime is required. Refusal to work overtime may result in discipline up to and including termination.

**1. Checking the Schedule** – It is the employee’s responsibility to check the schedule and be present for scheduled shifts. Because the Detention Home has the unique requirement to stay within a state required ratio of staff to residents, mandatory overtime may be required. Employees are advised to check the schedule each day as changes due to call- offs may occur at any time.

**2. Requesting an Alternate Schedule** – Employees who desire an alternative temporary adjustment to their normal schedule must provide a written request to the Program Manager. No permanent alternate schedules will be approved. Any accommodation in this area must not impede the ability of the schedule to meet state required guidelines.

**B. Notification** – Employees are expected to personally notify their supervisor one (1) hour prior to the beginning of their assigned shift if they are going to be absent or late for work. Due to the unique needs of the facility, direct care staff are required to contact their supervisor and the Administrator on Call (AOC). The employee is responsible for knowing the appropriate call-in numbers for both hours and off-hours.

1. **Personal Contact** – Notification must be made by the employee, not another person. Leaving a message with a co-worker or on a machine is unacceptable. Employees who fail to comply are subject to disciplinary action.
2. **Regular Contact** – The employee must contact the facility each day they are absent, unless it is understood by their supervisor that they will not return to work for a specific number of days. Employees who must be away from work for an extended period must advise their supervisor or AOC regularly concerning the ability to return to work if no specific number of days is determinable.
3. **Emergency Call Off** – All staff shall be trained on the facility emergency call of procedure and it shall be documented in their employee training file. Failure to appropriately use the emergency contact procedure may result in disciplinary action. More than 6 call offs in

**C. Attendance Requirements** – All employees are expected to be present and on time for all scheduled shifts. It is the employee’s responsibility to know his or her schedule and to stay in contact with their supervisor concerning any changes.

1. **Conditions of Relief** - Due to the unique environment that exist in the facility, special consideration must be given to the Office of Juvenile Affairs staffing ratio which requires (1) direct care staff member for every (7) residents. For this reason and safety/security of both residents and staff the following shall be enforced:
  - a. No direct care staff member may leave his/her post without being properly relieved by the oncoming Unit-Shift Supervisor. If staffs are required to stay past their normal end of shift, they will be compensated at the overtime rate or its equivalent in compensation time.

## **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1C-04)

**VI. Enclosures:** None

## **VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-12

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**01-40**

**Wages and Compensation**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management	<i>Policy</i>	<i>01-40</i>
Wages and Compensation	<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i> Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be the Policy, procedure and practice of the Juvenile Detention Home to provide for a system of employee compensation which complies with Tulsa County rules and regulations for employee pay.**

**I. Purpose:** The detention home shall enact specific plans to ensure that staff is compensated appropriately.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** - When an employee is to be paid for part of a month, amount of compensation is figured on the number of work days in the month.

- 1. Pay Scale Compliance** – The Detention Home shall comply with the salary structure published by the Juvenile Bureau of the District Court.
- 2. Compensation System** – The Detention Home shall comply with the compensation system rules of Tulsa County as published in the Employee Handbook.
- 3. Wages for a Partial Month** – The Detention Home shall notify the Juvenile Bureau Fiscal Office and submit the required documentation of time worked. The Fiscal Officer shall complete and refer the appropriate compensation to the Tulsa County Payroll Department.
- 4. Pay Calculation** – Shall be determined by Tulsa County Payroll department. All matters concerning pay and payroll questions should be directed to Facility Administrator who will contact the Payroll Department if necessary. Pay information shall be submitted by the physical officer of the Juvenile Bureau through the established Tulsa County Payroll system.
- 5. Notification** – If there are changes to the payroll, they must be submitted to the Fiscal Officer prior to the cutoff date established by Tulsa County each month, but usually ten (10) days prior to the last day of the month.

**V. Authority/References:**

**VI. Enclosures:** None.

**VII. Action:**

Facility Administrator will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:03-13

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**01-41**

## **Juvenile Staff Training Program**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-41</i>
Juvenile Staff Training Program		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure, and practice of the Detention Home to ensure that its staff development and training program is planned, coordinated, and supervised by a qualified supervisory employee. The facility's training plan will be reviewed and approved annually.**

**I. Purpose:** The facility's training plan will include all pre-service, in-service, and/or specialized training curriculums, with specifically established time frame for completion of each training unit/requirement. The facility's training plan will comply with ACA minimum training requirements.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

- **General Guidelines** - All new full-time employees are given 40 hours of orientation training prior to beginning their job assignments. The 40 hours of pre-service training may consist of an exposure to all shifts and shift duties, and procedures. Each employee is required to read and review the Juvenile Detention Home policy and procedure manual. Training credit is given for approved training received prior to the job. A description of that training must be submitted in writing to the Facility Administrator or his designee. Approval of the training will be given based on its merit.
  1. **Educational Assistance Program** - The Detention Home encourages employees to continue their formal education. Tulsa County provides a direct reimbursement to employees taking approved job related courses by refunding 75% of the cost of tuition. The application process shall be initiated through the Program Manager.
  2. **Salary Increment** - A salary increment of 5% may be available upon completion of undergraduate and/or graduate degree with recommendation of the department head and approval of the Director of the Juvenile Bureau. (Any increment is contingent on current county policy and/or budget restraints).
  3. **Employee Travel** - Travel reimbursement will cover approved cost for lodging, meals, and mileage. These funds must be pre-approved and mileage must be submitted on Mileage Report Form 2005. Any reimbursement must be pre-approved.

4. **Responsible Staff** - The Training Supervisor is responsible for planning, coordinating and supervising all pre-service and in-service training programs. The Accreditation Manager and the Program Manager shall provide assistance and support to the Training Supervisor. This will include conducting training as necessary. The detention staff trainers must have achieved at least supervisory level or level 60, received specialized training designed for trainers, and demonstrated both a working and applied knowledge of all Juvenile Bureau departments, procedures and policies.
  5. **Space and Equipment** – The Detention Home provides the necessary space and equipment for the training and staff development program.
  6. **Off-Site Training** - Training sponsored by community agencies, organizations, local or state colleges and universities may be attended by Detention Staff. Training programs sponsored by social service agencies and Tulsa County are posted and made available to the staff on a regular basis. Staff requests to attend training must be submitted in writing to the Facility Administrator for approval. Training leave must be compatible with working schedules and proper shift coverage.
  7. **Annual Review** - The detention training program is developed and reviewed annually. The Facility Administrator monitors the training program throughout the year. During a regularly scheduled staff meeting in January, the Facility Administrator requests that staff discuss and evaluate the previous year's training. Subsequently, the Facility Administrator, Program Manager, Accreditation Manager and Unit-Shift Supervisors review staff's evaluation and discussion of the training program, making necessary revisions in the training curriculum, as required. Changes to new training program are announced during a regularly scheduled staff meeting in March. Final approval of the training program is given by the Facility Administrator. The updated training program is implemented in July of that calendar year. A copy of the updated training program is made available to all employees in the facility manual training section.
- **Facility Orientation** - All full-time employees will receive orientation training relative to their job description. Training program must be approved by the Facility Administrator. Off-sight training must be pre-approved by the Facility Administrator. The Training Supervisor of Detention has responsibility for all pre-service and in-service staff training programs.
    1. **Direct Care Staff Orientation**: All full-time direct care staff will receive 40 hours of orientation training and 120 hours of training during their first year of employment. The training covers, but is not limited to the following areas:
      - Interpersonal relations
      - Crisis intervention and problem solving
      - Child growth and development
      - Detention Philosophy
      - Physical plant and equipment operations
      - Residents' rules and regulations
      - Residents' rights and responsibilities
      - Grievance and disciplinary procedures
      - Security procedures
      - Use of force regulations

- Supervision of residents
  - Report writing
  - Key control
  - Fire and emergency procedures
  - First Aid and CPR/medical emergencies
  - Medical procedures and health care
  - Search and seizure/rules of evidence
  - Sexual harassment
  - Signs of suicide risk/suicide prevention
  - Reporting of child abuse
  - Communicable diseases
  - Sexual Assault
  - Communication skills
  - Signs and Symptoms of Mental Health
  - Adolescent Drug and Alcohol Abuse
  - PREA
2. **Clerical Staff:** All clerical full time regular staff shall have 40 hours of orientation training and an additional 16 hours of training in the same year. The training shall include but is not limited to the following:
- Detention home mission and philosophy
  - Relevant Policies and Procedures
  - Workplace conditions
  - Employee rights and responsibilities
  - General Over view of corrections
  - Fire and emergency procedures
3. **Support Staff:** All full time regular support staff shall have 40 hours of orientation training and an additional 40 hours of training in the same year. The training shall include but is not limited to the following:
- Detention home mission and philosophy
  - Relevant Policies and Procedures
  - Workplace conditions
  - Employee rights and responsibilities
  - General Over view of corrections
  - Fire and emergency procedures
  - Security Procedures
  - Emergency Procedures
  - Suicide Risks and Facility Precautions
  - Use of Force Policy
  - Report Writing
4. **Administrative Staff:** All full time regular support staff shall have 40 hours of orientation training and an additional 40 hours of training in the same year. The training shall include but is not limited to the following:
- General Management

- Labor Law
  - Staff/ Management Relations
  - The Juvenile Justice system
  - Relationships with Other Service Agencies
5. **Non-Regular Staff** – All part-time staff, volunteers, and contract personnel receive formal orientation appropriate to their job duties and additional training as needed. This training will include at minimum orientation to job duties and facility policy and procedure.
6. **Medical Staff** - All full time regular professional medical staff shall have 40 hours of orientation training and an additional 40 hours of training in the same year. The training shall include but is not limited to the following:
- Interpersonal relations
  - Residents' rules and regulations
  - Residents' rights and responsibilities
  - Security procedures
  - Use of force regulations
  - Supervision of residents
  - Report writing
  - Key control
  - Fire and emergency procedures
  - First aid and CPR/medical emergencies
  - Medical procedures and health care
  - Sexual harassment
  - Signs of suicide risk/suicide prevention
  - Communication skills
  - Counseling Techniques
  - Social/ Cultural Lifestyles of the Juvenile Population
- **Annual Training** - All full-time employees will receive a minimum number of hours training relative to their job description each year after the first year. Training must be approved by the Facility Administrator. Off-sight training must be pre-approved by the Facility Administrator. The Facility Administrator of Detention and the Training Supervisor have the responsibility for all pre-service and in-service staff training programs.
1. **Clerical Staff** - All clerical full time regular staff shall have 16 hours of training each year. At least 8 hours should be directly related to their daily shift duties.
2. **Direct care, Support, Medical and Administrative staff** - All full time regular staff in these categories shall have 40 hours of training each year.
3. **Non-Regular Staff** - All part-time staff, volunteers, and contract personnel receive training as needed. Part time direct care staff shall receive training hours prorated according the average monthly work hours.

V. **Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1D-01, 1D-02, 1D-05, 1D-06, 1D-07, 1D-08, 1D-09, 1D-10, 1D-11, 1D-12, 1D-13, 1D-14)

## **VI. Enclosures:**

1. Current Annual Training Plan
2. Application for Educational Reimbursement
3. Training Checklist (each position)
4. List of Training Equipment

## **VII. Action:**

Accreditation Manager, Training Supervisor and Facility Supervisors will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:04-01.

Distribution: Detention Home Policy and Procedure Manual

## Tulsa County Juvenile Detention Home Annual Training Schedule -2003

Date	Day(s)	Time	Hrs.	Course #	Sec.	Course Title	Instructor
1/6	M	10:00am	1	IRP-1	0	Interpersonal Relations	USS
1/8	W	9:30am	2	B-05	1	Video-Cultural Diversity	USS
1/11	Sa	9:00am	8	A-24	0	Supervisor's Training Retreat	Training Coordinator
1/15	W	3:00pm	2	B-09	1	Building Relationships	Training Coordinator
2/3	M	10:00am	1	IRP-2	2	Communication Skills	USS
2/5	W	8:30am	4	A-11	1	CPR	Jeff Rahilly
2/5	Th	1:00pm	4	A-12	1	First Aid	Jeff Rahilly
2/6-2/7	W	9:00am	16	A-01	1	CPI	Daniel Williamson
2/19	Th	9:30am	2	B-19-1	1	Video-Working with Hostile Teens	USS
3/3	M	8:30am	1	IRP-3	0	Resident Rights	USS
3/5	W	8:30am	1	B-19-2	1	Video-Working with Resistant Teens	USS
3/19	W	9:30am	2	B-19-2	1	Building Relationships	Training Coordinator
4/7	M	10:00am	1	IRP-4	0	Counseling Techniques	USS
4/9	W	9:30am	2	B-20	2	Video-Offenders Mental Disorders	USS
4/16	W	3:00pm	2	B-07-1	2	Building a Positive Environment	Training Coordinator
5/5	M	10:00am	1	IRP-5	0	Medical Standing Orders	USS
5/7	W	8:30pm	4	A-11	2	CPR	Jeff Rahilly
5/7	W	1:00pm	4	A-12	2	First Aid	Jeff Rahilly
5/8-5/9	Th-F	8:30am	16	A-01	2	CPI	Daniel Williamson
5/14	W	3:00pm	2	B-07-2	2	Building a Positive Environment	Training Coordinator
6/2	M	10:00am	1	IRP-6	0	Adolescent Culture	USS
6/4	W	10:00am	2	A-06	1	Video-Critical Hour	USS
6/11	Th	9:00am	2	B-11	3	Lakeside Tour	USS
6/18	Th	3:00pm	2	B-07-3	3	Positive Environment	Training Coordinator
7/7	M	10:00am	1	IRP-7	0	Safety Procedures	USS
7/16	W	3:00pm	2	B-09-1	4	Child Development	Training Coordinator
7/21	M	10:00am	2	A-08	4	Video-Suicide in Juvenile Facilities	USS
8/4	M	10:00am	1	IRP-8	0	Work Place Safety	USS
8/6	W	8:30am	4	A-11	3	CPR	Jeff Rahilly
8/6	W	1:00pm	4	A-12	3	First Aid	Jeff Rahilly
8/7-8/8	Th-F	8:30am	16	A-01	3	CPI	Daniel Williamson
8/13	W	10:00am	2	A-07	3	Video-Aids in Juvenile Facilities	USS
9/8	M	10:00am	1	IRP-9	0	MSDS Review	USS
9/10	W	3:00pm	2	B-09-2	5	Child Development	Training Coordinator
9/24	Th	9:00am	2	B-11	5	Christopher Youth Center Tour	Sherry Cooper
10/6	M	10:00am	1	IRP-10	0	Key Control	USS
1018		1:00pm	2	8-08	6	Video-Report Writing	USS
1011&		3:00pm	2	8-08-ct	6	Teaching Discipline	Training Coordinator
1113		10:01m	1	IRP-11	0	Supervision of Juveniles	USS
1115		8:30am	4	A-11	4	CPR	Jeff Rahilly
11/5	W	1:00pm	4	A-12	4	First Aid	Jeff Rahilly
111a-11n		9:00am	1a	A-01	0	CPI	Daniel Williamson
11112		3:00pm	2	8-08-6	...	Teaching Discipline	Training Coordinator
1211		1:00pm	1	IRP-12	0	Mission and Philosophy Statement	USS
12110		3:00pm	2	8-08-8	8	Teaching Discipline	Training Coordinator
12117		9:00am	2	14	5	Radar Tour	Sherry Cooper

**TULSA COUNTY  
EDUCATIONAL ASSISTANCE REQUEST**

SCHOOL \_\_\_\_\_

DEGREE PROGRAM (OR VO-TECH EQUIVALENT) \_\_\_\_\_ SEMESTER TERM \_\_\_\_\_

EMPLOYEE NAME \_\_\_\_\_ EMPLOYEE PHONE NUMBER \_\_\_\_\_

EMPLOYEE NUMBER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_ EMPLOYEE E-MAIL ADDRESS \_\_\_\_\_

	COURSE NAME / DESCRIPTION	REQUISITE COURSE?*	TUITION COST	HOURS	ED.BD ACTION		BOCC ACTION	
					APP.	DENY	APP.	DENY
1.								
2.								
3.								

DATE OF ED.BD. ACTION \_\_\_\_\_

DATE OF BOCC ACTION \_\_\_\_\_

*DESCRIBE HOW COURSE RELATES TO JOB DUTIES*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

<p><b>STATEMENT OF AGREEMENT:</b> I agree to disclose all governmental, institutional or organizational education grants, scholarships and financial assistance received by me for my education. I understand that educational assistance from Tulsa County will be reduced by an amount equal to the sum of all sources identified above. I agree to supply Tulsa County with an "Award Letter" from the school I attend detailing any financial assistance I am receiving and to supply Tulsa County with information concerning financial aid from the sources listed above and not administered by the school I attend. I am aware that I must work one (1) year for Tulsa County after the completion of the course(s) or repay the reimbursed assistance. If I receive this requested assistance and cease employment for any reason other than reduction in work force within one (1) year after the course completion, I authorize Tulsa County to withhold that amount from my final paycheck, or I will pay the amount on demand.</p>	<p><b>SUPERVISOR'S RECOMMENDATIONS</b></p>
<p>EMPLOYEE'S SIGNATURE _____</p>	<p>SUPERVISOR'S SIGNATURE _____</p>
<p>DATE _____</p>	<p>DATE _____</p>
<p>ELECTED OFFICIAL / DIVISION DIRECTOR'S SIGNATURE _____</p>	<p>DATE _____</p>

## ***Update Information:***

Changes in the Educational Assistance Program procedure were approved by the Board of County Commissioners effective July 19, 2004. The main changes are indicated within the text of the procedure on the following pages by a revision symbol in the margin.

As part of the procedure's revision, the related Educational Assistance Request (Form 3806) was changed. When applying for educational assistance, please be sure you are using the version of the form with Rev. Date 6-04 shown at the bottom.

The revised Educational Assistance Request form which has been posted in a separate file here on the County Info intranet site has been designed with user-editable fields which allow you to complete most of the form electronically, if you choose to do so. Brief introductory instructions appear in a "pop-up" menu embedded within the Request form file itself. (If the pop-up instructions do not automatically display and you would like to read them, double-click the yellow circled question-mark icon at the top of the online form.) If you would like to read more detailed instructions for completing the Request form, consult the separate file titled "About the Online Educational Assistance Form." (Of course, the form can still be printed "as is" for completion by hand, if you prefer to fill it out using a pen or a typewriter.)

## ***Important Advisory:***

*The contents of this file have been made available (or informational purposes only) by the Tulsa County Personnel Office, a division of the Board of County Commissioners. The material presented was current on the date of posting, but is subject to change without notice.*

The contents of this file do not constitute a contract or agreement of any kind. None of the provisions have been, or are required to be, approved by any employee or employee group. Tulsa County reserves the right to change, interpret, withdraw or add to the material in this file at its sole discretion, and without prior notice or consideration to any employee.

*Please consult the Tulsa County Personnel Office for any guidance or assistance you may require regarding the contents of this file.*



 <b>Tulsa County</b>	<p><b>PROCEDURE</b></p> <p>EDUCATIONAL ASSISTANCE PROGRAM</p> <p>Approved By: <b>TERRY TALLENT, PERSONNEL DIRECTOR</b></p> <p>Approval Date: <b>07/19/04</b></p>	<p>Procedure File Number</p> <p><b>TCP 108</b></p> <p>Supercedes: <b>TCP 108</b>      Previous Date: <b>12/01/97</b></p>
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**A. SUMMARY:**

Establishes policies and procedures for the Tulsa County Educational Assistance Program.

**B. APPLICABLE TO:**

1. Tulsa County Regular Employees .
2. Educational Review Board.
3. Board of County Commissioners .
4. Personnel Director.
5. County Fiscal Officer .

**C. DEFINITIONS:**



1. **Regular Employee:** A non-temporary, non-provisionary employee who works in a full-time capacity in his/her respective organization and is paid a monthly rate of compensation. *Regular Employees* are eligible to participate in Tulsa County sponsored employee benefit and group insurance programs.

2. **Job-Related:** As used with reference to eligibility of courses for reimbursement through the Educational Assistance Program, the term *Job-Related* means:
- a. Directly associated with the work responsibilities of an employee's current County job position.
  - OR-
  - b. Directly associated with the reasonably anticipated future work responsibilities of an employee's current County job position (as identified by the department/division's leadership).
  - OR-
  - c. Directly associated with the reasonably anticipated future advancement of an employee into another specifically designated County job position (as identified by the department/division's leadership).

**D. REFERENCE:**

Tulsa County Employee Handbook (Form 622).

**E. ENCLOSURE:**



Tulsa County Educational Assistance Request (Form 3806).

# PROCEDURE

## EDUCATIONAL ASSISTANCE PROGRAM

Procedure File Number

TCP 108

### F. POLICIES:



1. Educational assistance, through 75% reimbursement of approved tuition and course lab fees, is provided as a benefit to Tulsa County regular employees, subject to the provisions of this policy.
  2. To be considered for reimbursement through the Educational Assistance Program, the course taken by the employee must:
    - a. Be an academic, vocational or trade course provided by a state-accredited educational institution.
    - AND-
    - b. Be job-related or a required course leading to a job-related bachelor's degree, master's degree or equivalent vocational-technical credential.
  3. Career education programs above the master's level or equivalent shall not be considered for reimbursement under the Educational Assistance Program. These include (but are not limited to): Law School, Medical School, Pharmacy School and doctorate programs.
  4. Training seminars, college non-credit courses, conferences and short-term training programs do not qualify for funding under the Educational Assistance Program. This type of training may be funded through the department/division's regular budget at the discretion of the Elected Official/Division Director.
  5. Employees shall submit their Educational Assistance Request forms before actually beginning classwork. Submitting an Educational Assistance Request does not guarantee approval for reimbursement. If an employee pays tuition or begins classwork without prior written notification that the assistance request has been approved, the employee is solely responsible for all expenses incurred if the assistance request is ultimately denied.
  6. Employees agree to:
    - a. Disclose all governmental, institutional, or organizational grants, scholarships and financial assistance received by them for their current education.
    - b. Supply Tulsa County with:
      - 1) An "Award Letter" from the school they attend, detailing any financial assistance they are receiving.
      - 2) Information concerning financial aid from sources listed above and not administered by the school.
  7. Employees agree that educational assistance from Tulsa County will be reduced by an amount equal to the sum of all sources identified above.
  8. Employees granted educational assistance are committed to work for Tulsa County for at least one year after completion of course(s).
- NOTE:** If an individual's employment terminates with Tulsa County for any reason except a reduction in workforce within this one year period, the amount of the assistance may be withheld from the employee's final paycheck or shall be subject to repayment on demand.

# PROCEDURE

## EDUCATIONAL ASSISTANCE PROGRAM

Procedure File Number

TCP 108

### F. POLICIES: (CONTINUED)

9. Employees must make a grade of "C" or better to receive educational reimbursement.
10. The Educational Review Board meets to consider requests for educational assistance before the beginning of fall, spring and summer semesters.
11. All Educational Assistance Request forms must be submitted to the Personnel Director before the Educational Review Board meets to consider requests.
12. The reimbursement of tuition and lab fees will not exceed the reimbursement rate for tuition and lab fees of State universities.

**NOTE:** Additional fees (such as books, activity fees, ID fees, student center fees, etc.) will not be reimbursed.

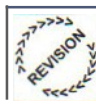


13. Reimbursement for educational assistance to any employee shall be limited to a maximum of \$1,000.00 per calendar year and a lifetime maximum of \$5,000.00.

### G. APPLICATION PROCEDURE:

#### EMPLOYEE APPLICANT

1. Before the semester begins, completes an Educational Assistance Request form (Form 3806, see Enclosure).



**NOTE:** Employees with approved access may print a copy of Form 3806 from the County's intranet "Info" site. Copies of the form are also stocked at the forms desk in Administrative Services.

2. Submits completed form to Supervisor .

#### SUPERVISOR

3. Reviews Educational Assistance Request.
4. Enters comments on form under Supervisor's Recommendations.
5. Signs Supervisor's Signature block.
6. Forwards Educational Assistance Request form to Elected Official/Division Director.

#### ELECTED OFFICIAL DIVISION DIRECTOR

7. Reviews form and enters signature, if approval is indicated.
8. Forwards Educational Assistance Request to Personnel Director.

#### PERSONNEL DIRECTOR

9. Receives all Educational Assistance Requests.
10. Schedules the next meeting of the Educational Review Board.

# PROCEDURE

## EDUCATIONAL ASSISTANCE PROGRAM

Procedure File Number

TCP 108

### G. APPLICATION PROCEDURE: (CONTINUED)

- PERSONNEL DIRECTOR**
11. Has copies of the Educational Assistance Requests made for each board member.
- EDUCATIONAL REVIEW BOARD**
12. Reviews each Educational Assistance Request.
13. Votes to recommend approval or rejection of each request.
- PERSONNEL DIRECTOR**
14. Completes the portion of each Educational Assistance Request form that is designated for the Educational Review Board.
- NOTE:** If applicant is rejected, forwards letter of rejection to applicant. (See Section I, "Appeals Procedure.")
15. Forwards a memo to the Board of County Commissioners (BOCC) Chairman, listing:
- a. Names of employees recommended for approval.
  - b. Course names.
  - c. County's portion of the cost for each course.
16. Places recommended Educational Assistance Requests on next Board of County Commissioners meeting agenda.
- BOCC**
17. Reviews requests recommended for approval.
18. Approves requests if approval is in order.
- PERSONNEL DIRECTOR**
19. Completes the Board Action portion of the forms.
20. Has the forms filed in the Personnel division.
- BOCC CHAIRMAN**
21. Notifies applicants by letter of the Board's decision.
- COUNTY FISCAL OFFICER**
22. Initiates purchase order to reimburse the employee for eligible tuition and lab fees.
23. Forwards purchase order to Personnel division.
- NOTE:** The purchase order is held by the Personnel division until the employee qualifies for reimbursement. (See Section H, "Reimbursement Procedure.")
- APPROVED APPLICANT**
24. Pays tuition and lab fees (if applicable) for approved courses.
25. Keeps receipts and obtains "Awards Letter" (if applicable) from school, listing financial assistance.

<b>PROCEDURE</b>	Procedure File Number
<b>EDUCATIONAL ASSISTANCE PROGRAM</b>	<b>TCP 108</b>

**H. REIMBURSEMENT PROCEDURE:**

**NOTE:** Employees approved for the Educational Assistance Program must file for reimbursement within 90 days of the end of the semester for which the employee was approved to receive educational assistance .

- |                              |  |
|------------------------------|--|
| <b>EMPLOYEE</b>              | 1. Completes approved course(s).   |
|                              | 2. Within 90 days, sends a copy of "C" or better grades, copy of "Award Letter" from school (if applicable) and the original receipts to the Personnel Director. |
| <b>PERSONNEL DIRECTOR</b>    | 3. Has grades and financial assistance information filed in the employee's personnel file .  |
|                              | 4. Approves purchase order for payment, provided the employee has satisfied all required criteria.   |
| <b>COUNTY CLERK/DESIGNEE</b> | 5. Notifies Personnel division when the reimbursement warrant (check) has been prepared.   |
| <b>PERSONNEL DIVISION</b>    | 6. Notifies the employee when the reimbursement warrant (check) is received.   |
| <b>EMPLOYEE</b>              | 7. Either picks up the warrant (check) or requests that it be mailed.  |

**I. APPEALS PROCEDURE:**

- |                      |  |
|----------------------|--|
| <b>EMPLOYEE</b>      | 1. Upon receiving a letter rejecting educational assistance request, may write a letter appealing the Educational Review Board's decision to the Board of County Commissioners Chairman.   |
|                      | 2. States reasons that request should be approved by the Board.  |
|                      | 3. Includes with appeal letter copies of: <ul style="list-style-type: none"> <li>a. Educational Assistance Request form, listing class(es) rejected by Educational Review Board.</li> <li>b. Letter of rejection from Educational Review Board.</li> </ul> |
| <b>BOCC CHAIRMAN</b> | 4. Has appeal for educational assistance placed on next scheduled Board of County Commissioners' Management Conference agenda.   |

<b>PROCEDURE</b>	Procedure File Number
<b>EDUCATIONAL ASSISTANCE PROGRAM</b>	<b>TCP 108</b>

**I. APPEALS PROCEDURE: (CONTINUED)**

**BOCC CHAIRMAN**

5. During meeting, offers applicant making the appeal an opportunity to speak.

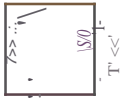
**BOCC**

6. Votes to approve, disapprove or continue the appeal to a subsequent meeting.

**NOTE:** BOCC's decision is entered into the minutes of the meeting.

[Signed, Terry Tallent]  
TERRY TALLENT, DIRECTOR  
PERSONNEL DEPARTMENT

[Signed, Randi Miller]  
RANDI MILLER, CHAIRMAN  
BOARD OF COUNTY COMMISSIONERS



TULSA COUNTY

EDUCATIONAL ASSISTANCE REQUEST

SCHOOL \_\_\_\_\_ SEMESTER TERM \_\_\_\_\_

DEGREE PROGRAM (OR VO-TECH EQUIVALENT) \_\_\_\_\_

EMPLOYEE NAME \_\_\_\_\_ JOB TITLE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

	COURSE NAME/DESCRIPTION	REQUISITE	TUITION	HOURS	ED. BD ACTION		BOCC ACTION
					APP	DENY	
1		COURSE? * YES / NO	COST				
2		YES / NO					
3		YES / NO					

DESCRIBE HOW COURSE RELATES TO JOB DUTIES

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

STATEMENT OF AGREEMENT: I agree to disclose all government, national or organizational education grants, scholarships and financial assistance received by me for my education. I understand that educational assistance from Tulsa County will be reduced by an amount equal to the sum of all sources identified above. I agree to supply Tulsa County with an "Award Letter" from the school detailing any financial assistance I am receiving and to supply Tulsa County with information concerning financial aid from the sources listed above and not administered by the school I attend. I am aware that I must work one (1) year for Tulsa County after the completion of the course(s) or repay the reimbursed assistance. If I receive this requested assistance and cease employment for any reason other than reduction in work force within one (1) year after the course completion, I authorize Tulsa County to withhold that amount from my final paycheck, or I will pay the amount on demand.

EMPLOYEE SIGNATURE \_\_\_\_\_ IDA \_\_\_\_\_

SUPERVISOR'S RECOMMENDATIONS \_\_\_\_\_

SUPERVISOR'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ELECTED OFFICIAL'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ENCLOSURE

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# Unit Shift Supervisor Orientation and On The Job Training Checklist

Employee's Name

Date of Hire

Assigned Trainer

Training Start Date

Date Assigned

Training End Date

## Orientation Training Schedule:

Day #	Day	Date	Time	Trainer	Duty	Location
1						
2						
3						
4						
5						

Day #	Day	Date	Time	Trainer	Duty	Location
1						
2						
3						
4						
5						



## Administrative Position Orientation and On-the-Job Training

### Orientation Objectives

Trainee    Trainer    Date

<b>A      Program Manager</b>				
1	Employee Paperwork (Payroll, Identification, Education)			
2	Shift Assignment			
3	Shift Duties (All Shifts)			
5	Chain of Command			
6	Disciplinary Procedures			
7	Authority and Legal Responsibilities			

<b>B      Accreditation Manager/Training Coordinator</b>				
1	Staff Training Documentation (Training Binder)			
2	Key Security: Control System			
3	Vehicle Maintenance			
4	ACA Compliance Issues			
5	OJA Compliance Issues			
6	Video - Legal Issues 1			
7	Video - Legal Issues 2			
8	Reviewing Documentation for Record			

<b>C      Program Manager</b>				
1	Security Camera System and use of Doors and Keys			
2	Detention Tour (Facility Floor Plan - Locate All Items on Plans)			
3	Bureau Tour (Intake, Probation, Admin. Services, and Courts)			
3	Emergency Power Generator			
4	Emergency Lighting			
5	Emergency Water Systems			
6	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
7	Emergency Evacuation Procedures			
8	Main Water Valve and Fire Sprinkler System (Emergency Only)			
9	Information to Communicate at Shift Change			
10	Interaction and Relationship with Intake and Probation Departments			

<b>D      Medical Authority</b>				
1	Medication Administration			
2	Medical Records Maintenance			
3	Contact Protocols			
3	Critical Information Checklist			
4	Accepting Medication from External Sources			
5	Medical Assessment			
6	Mental Health Issues/Gate keeping Requirements			

		Trainee	Trainer	Date
<b>E</b>	<b>Superintendent</b>			
1	Review Personnel Policy and Procedures			
3	Employee Grievance Procedure			
4	Employee Conduct / Expectations			
5	Legal Issues: Employee/Supervisor Relationship			
6	Chain of Command / Appropriate Communication			
7	Leadership / Supervisor - Principles, Traits			
8	Mission of TCJDH - Care, Welfare, Safety, and Security			
9	Review of OJA Rules for Secure Detention			
10	Form - Reporting Abuse, Neglect, Policies and Procedures			
11	Form - Use of Force, The Law / Overview of CPI Training			
12	Jolts Records/Computer Access Regulations			
13	Juvenile Rights			
14	Public Information / Confidentiality			
15	Fiscal Management: Funding and Procurement			
16	Investigation and Research Procedures			
17	Utilization of Intake On-Call List			
18	Utilization of Probation On-Call List			
19	Resident Release Prioritization List			

		Trainee	Trainer	Date
<b>F</b>	<b>Superintendent</b>			
1	Superintendent's Orientation: The High Road			
2	Sexual Harassment/ Hostile Work Environment Policy			
3	EEOC / Discrimination			
4	Supervision: Theory and Practice			
5	Interdepartmental Communication			
6	Contact Imperatives			
7	Tulsa County Juvenile Justice System			
8	Understanding the Need for Change			
9	Staff Disciplinary Techniques, Procedures and Documentation			
10	Staff Motivational Skills			
11	Conducting Staff Training			
12	Resident Release Prioritization List			

## Training Checklist Acknowledgement

I, \_\_\_\_\_ have completed the Detention Home 80 hour  
**General Orientation and Position Orientation / On-the-Job Training Checklist as Directed.**

\_\_\_\_\_  
Program Manager                      Date

\_\_\_\_\_  
Accreditation Manager                      Date

\_\_\_\_\_  
Superintendent                      Date

# Tulsa County Juvenile Detention Home Cook

## Orientation Training Checklist

Employee's Name

Date of Hire

Kitchen Manager

Training Start Date

Date Assigned

Training End Date

### Orientation Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

# Tulsa County Juvenile Detention Home Cook

Kitchen Objectives		Trainee	Trainer	Date
<b>A</b>	<b>Program</b>			
1	Orientation of Resident Rules			
2	Dining Room Supervision			
<b>B</b>	<b>Safety and Security Equipment</b>			
1	Emergency Power Generator			
2	Emergency Lighting			
3	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
4	Emergency Evacuation Procedures			
5	Kitchen System Alarm/Bell Signals			
6	Automatic Fire Suppression System			
7	Fire Procedures			
8	Security of Kitchen Keys			
9	Security of Interior and Exterior Doors			
10	Security of Kitchen Knives			
11	Security of Serving Counter			
12	Kitchen Security (Pre-shift)			
13	Kitchen Security (Before Meal Utensil & Cutlery Count)			
14	Kitchen Security (After Meal Utensil & Cutlery Count)			
15	Security Awareness: 7-3 Activities			
16	Security Awareness: 3-11 Activities			
17	Reporting Alleged Child Abuse			
<b>C</b>	<b>Food Services</b>			
1	Meal Preparation (Breakfast)			
2	Meal Preparation (Lunch)			
3	Meal Preparation (Dinner)			
4	Meal Preparation (Snack)			
5	Food to Resident Rooms			
6	Special Diets			
7	Cleaning and Sanitation			
<b>D</b>	<b>Forms</b>			
1	Review of Kitchen Forms			
2	Kitchen Inventory Control			
3	County Ordering Policy and Procedures			

# Tulsa County Juvenile Detention Home Cook

<b>Kitchen Objectives</b>		Trainee	Trainer	Date
<b>E Unit Shift Supervisors</b>				
1	Information to Communicate to Unit Shift Supervisor			
<b>F Care and Use of Equipment</b>				
1	Dishwasher			
2	Freezer			
3	Refrigerators			
4	Ice Machine			
5	Mixers			
6	Other Kitchen Equipment			
7	Hot Water Tanks			
8	Heating and Cooling Units, Thermostats			
9	Janitorial Duties			
10	Review Facility Floor Plan			
<b>G Review of Shift Duties, Job Descriptions</b>				
1	Breakfast Shift (5:30am-1:30pm)			
2	Regular Shift (10:00am-6:00pm)			
3	Cooks Job Description			
<b>H Communication Equipment</b>				
1	Telephone			
2	Facility and Emergency Numbers			

# Tulsa County Juvenile Detention Home Cook

## Training Checklist Acknowledgement

I, \_\_\_\_\_ have completed the Detention Home  
Orientation Training Checklist as Directed.

\_\_\_\_\_  
Kitchen Manager                      Date

\_\_\_\_\_  
Cook                                      Date

\_\_\_\_\_  
Accreditation Manager              Date

## Part-Time Detention Counselor Orientation and On-the-Job Training Checklist

Employee's Name

Date of Hire

Assigned USS

Training Start Date

Date Assigned

Training End Date

### Orientation Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1	Wed				Observation	Unit
2	Thursday				Observation	Unit/Main Control
3	Friday				Observation	Unit
4	Saturday				Observation	Unit/Main Control
5	Sunday				Observation	Unit

### On-the-Job Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1	Wed				Shadow / Assist	Unit
2	Thursday				Shadow / Assist	Unit/Main Control
3	Friday				Shadow / Assist	Unit
4	Saturday				Shadow / Assist	Unit/Main Control
5	Sunday				Shadow / Assist	Unit



<b>Main Control Objectives</b>		<b>Trainee</b>	<b>Trainer</b>	<b>Date</b>
--------------------------------	--	----------------	----------------	-------------

<b>A Safety and Security Equipment</b>				
1	Computer Record Checks on JOLTS			
2	Law Enforcement Reports and Warrant Recall Procedure			
3	Distinguish Different Types of Warrants			
4	Admissions Criteria (Who is Eligible?)			

<b>B Admissions</b>				
1	Computer Entry of Admission Data on Jolts			
2	Security Searches (Use of Metal Detector)			
3	Intake On-Call List			

<b>C Releases</b>				
1	Computer Entry of Release Data on Jolts			
2	Contingency Release Program			

<b>D Safety and Security Equipment</b>				
1	Main Control Console			
2	Main Control Telephone System			
3	Main Control Security Camera and Monitor System			
4	Main Control Key Control			
5	Fire Procedures			

<b>E Review of Shift Duties, Job Descriptions</b>				
1	Main Control Operator (All Shifts)			

### 7-3 Shift Objectives

**Trainee    Trainer    Date**

<b>A</b>	<b>Shift Duties</b>			
1	Key Control			
2	Review Behavior Forms			
3	Discuss Daily Program Agenda with Supervisor			
4	Dinning Room Supervision			
5	Wake up Procedure			
6	Admission and Orientation of Residents			
7	Resident Releases			
8	Supervising the Education Program			
9	Role of Intake and Probation			
10	Program Supervision			
11	Clean up Procedures			
12	Resident Visitation, Letter Writing, and Phone Calls			
13	Shift Briefing of Staff			
14	Information to Communicate to Supervisors			
15	Resident Rules and Discipline			
16	Security Search of Residents and Facility			

<b>B</b>	<b>Forms</b>			
1	Resident Temporary / Permanent Release Forms			
2	Daily Observation Notes			
3	Resident Admission Forms			
4	Resident Room Charts			
5	Nurse Referral Sheet			
6	Incident Report/Witness Statement			
7	Disciplinary Report/Disciplinary Hearing Form			
8	Resident Grievance Form			

<b>C</b>	<b>Safety and Security Equipment</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 7-3 Activities			
3	Mechanical Restraints			
4	Material Safety Data Sheets: Location and Use			
5	First Aid Kit/ Fire Extinguisher Locations			
6	Emergency Safety Procedures			
7	Personnel Authorized Access to Detention			

<b>E</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			

### 3-11 Shift Objectives

**Trainee    Trainer    Date**

<b>A</b>	<b>Shift Duties</b>			
1	Key Control			
2	Review Behavioral Reports and Shift Log			
3	Preparation of Snacks			
4	Role of Intake and Probation			
5	Resident Admissions			
6	Resident Releases			
7	Supervision of Education Program			
8	Resident Groups and Life Skills Programs			
9	Resident Visitation, Letter Writing, and Phone Calls			
10	Resident Shower Procedure			
11	Environmental Controls			
12	Clean up Procedures			
13	Information to Communicate to Unit Shift Supervisors			

<b>B</b>	<b>Forms</b>			
1	Resident Temporary / Permanent Release Forms			
2	Daily Observation Notes			
3	Resident Admission Forms			
4	Resident Room Charts			
5	Nurse Referral Sheet			
6	Incident Report/Witness Statement			
7	Disciplinary Report/Disciplinary Hearing Form			
8	Resident Grievance Form			

<b>C</b>	<b>Safety and Security Equipment</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 3-11 Activities			
3	Mechanical Restraints			
4	Material Safety Data Sheets: Location and Use			
5	First Aid Kit/ Fire Extinguisher Locations			
6	Gym or Outside Activities and Security Meas. Required			
7	Personnel Authorized Access to Detention			

<b>D</b>	<b>3-11 Programming</b>			
1	Phillip Roy			
2	Group Discussions (3-11 Shift)			
3	Gym or Outside Activities and Security Meas. Required			
4	Art Room and Art Program			
5	Group Discussions (3-11 Shift)			
7	Lights out Procedure			
8	Special Programs Schedule			

<b>E</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			

### 11-7 Shift Objectives

**Trainee    Trainer    Date**

<b>A</b>	<b>Shift Duties</b>			
1	Check Key Inventory			
2	Unit Security Checks			
3	Review Behavioral Reports, Shift Logs			
4	Resident Room Check Procedure			
5	Resident Admissions			
6	Resident Releases			
7	Laundry Procedure			
8	Dryer Maintenance			
9	11-7 Clean up Procedure			
10	Dishwasher Care and Use			
11	Flag Raising Procedure			
12	Information to Communicate to Supervisors			
13	Bureau Area Security Searches			

<b>B</b>	<b>Program</b>			
1	Action for Emergencies			
2	Grievance Procedure			
3	Intake On call List			
4	Contingency Release Program			

<b>C</b>	<b>Health Care</b>			
1	Medical Eligibility for Detention			
2	Medication Procedure			

<b>D</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Detention Counselor (All Shifts)			
2	Unit Secretary (8a-3:30p)			

## Training Checklist Acknowledgement

I, \_\_\_\_\_ have completed the Detention Home 80 hour  
Orientation / On-the-Job Training Checklist as Directed.

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

\_\_\_\_\_  
Detention Counselor      Date

\_\_\_\_\_  
Accreditation Manager      Date

**Tulsa County Juvenile Detention Home  
Detention Counselor  
Orientation/On-the-Job Training Checklist**

Employee's Name

Date of Hire

Assigned USS

Training Start Date

Date Assigned

Training End Date

**Orientation Training Schedule:**

Day #	Day	Date	Time	Mentor	Duty	Location
1					Observ. No Key	Unit
2					Observation	Unit
3					Observation	Unit
4					Observation	Unit

Day #	Day	Date	Shift	Mentor	Duty	Location
1					Shadow/Assist	Unit
2					Shadow/Assist	Unit
3					Shadow/Assist	Unit
4					Shadow/Assist	Unit

## Detention Counselor Orientation/On-the- Job Training Checklist

<b>Main Control Objectives</b>		<b>Trainee</b>	<b>Trainer</b>	<b>Date</b>
<b>A</b>	<b>Safety and Security Equipment</b>			
1	Computer Record Checks on JOLTS			
2	Law Enforcement Reports and Warrant Recall Procedure			
3	Distinguish Different Types of Warrants			
4	Admissions Criteria <b>(Who is Eligible?)</b>			
<b>B</b>	<b>Admissions</b>			
1	Computer Entry of Admission Data on Jolts			
2	Security Searches <b>(Use of Metal Detector)</b>			
<b>C</b>	<b>Releases</b>			
1	Computer Entry of Release Data on Jolts			
<b>D</b>	<b>Safety and Security Equipment</b>			
1	Main Control Console			
2	Main Control Telephone System <b>(Phone Etiquette)</b>			
3	Main Control Security Camera and Monitor System			
4	Main Control Key control/How to check out and monitor keys			
5	Unit A, B, Key Control			
6	Fire Procedures			
<b>E</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Main Control Operator (All Shifts)			

Reviewed by Unit Shift Supervisor \_\_\_\_\_

Date \_\_\_\_\_

## Detention Counselor Orientation/On-the- Job Training Checklist

<b>Sec 1 Shift Objectives</b>		Trainee	Trainer	Date
<b>A</b>	<b>Admissions</b>			
1	Orientation of Rules (Read to Resident)			
2	Completing Forms, Making Folders			
3	Room Chart and Count			
4	Admission Showering Procedure			
5	Orientation to Room and Activity Areas			
6	Admission Security/Searches			
7	Notifications (Parents, Administration, etc)			
8	Role of Intake and Probation			
<b>B</b>	<b>Releases</b>			
1	Computer Entry of Admission Data on Jolts			
2	Security Searches ( <b>Use of Metal Detector</b> )			
3	Completing release Procedures			
<b>C</b>	<b>Releases</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 7-3 Activities			
3	Security Search of Returning Residents			
4	Material Safety Data Sheets: Location and Use			
5	Computer Entry of Release Data on Jolts			
<b>D</b>	<b>Safety and Security Equipment</b>			
1	Resident Wake-up Procedure			
2	School Program			
3	Visitation (Saturday & Sunday 1:30pm-2:30pm)			
4	Report Writing (Behavior Observation, Incident Report)			
5	Letter Writing			
6	Facility clean-up Procedures (Daily and Weekend)			
5	reporting Alleged Child Abuse			
6	Resident Rules and Discipline			
<b>E</b>	<b>Health Care (At detention facility)</b>			
1	Medical Administration Summary/How we administer medical			
2	Medical Emergency			
3	Medical Standing Orders			
4	Blood borne Pathogens Exposure Control Plan			

Reviewed by Unit Shift Supervisor \_\_\_\_\_

Date \_\_\_\_\_



## Detention Counselor Orientation/On-the-Job Training Checklist

<b>Sec 2 Shift Objectives</b>		Trainee	Trainer	Date
<b>A Admissions</b>				
1	Detention Reception (Form 760) <b>(Pink Form)</b>			
2	Money Receipt and Cash Drawer Procedure			
3	Filling Valuables Form and Personal Property			
4	How to Contact Intake Using "On Call Listing"			
5	Guidelines for Detaining Juveniles			
6	Admission Security/Searches			
7	Notifications (Parents, Administration, etc)			
8	Role of Intake and Probation			
<b>B Forms</b>				
1	Review of Detention Home Forms			
2	Resident Grievance Form			
<b>C Releases</b>				
1	Emergency Power Generator (Location) <b>(When does it activate?)</b>			
2	Emergency Lighting <b>(When do they activate?)</b>			
3	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
4	Emergency Evacuation Procedures			
5	Use of Force, Use of Restraints			
6	Main Water Valve & Fire Sprinkler System <b>(Emerg. Only)</b>			
7	Main Water Valve for Unit A and B			
8	Security/Emerg. Water Pressure Controls to Indi. Rooms			
9	Security Awareness: 3-11 Activities			
10	Security of Doors and Keys			
10	Employee Expectations <b>(County Handbook Sec. 2.1)</b>			
<b>D Program</b>				
1	Dining Room Supervision			
2	Dayroom Break Time: Free Time			
3	Gym or Outside Activities and Security Meas. Required			
4	Art Room and Art Program			
5	Group Discussions (All Shifts) Issues Group/At Risk Group			
6	Shower Procedures <b>(Evenings, Med. Care, After Gym)</b>			
5	Bed Time <b>(Resident and Staff Expectations)</b>			
6	Visitation (Wednesday 6:00-7:00pm)			
<b>E Unit Shift Supervisors</b>				
1	Information to Communicate to Unit Shift Supervisors			
2	Resident Rights (Form 5146) (Given out during admissions)			

Reviewed by Unit Shift Supervisor \_\_\_\_\_

Date \_\_\_\_\_

## Detention Counselor Orientation/On-the-Job Training Checklist

<b>Sec 3 Shift Objectives</b>		Trainee	Trainer	Date
<b>A</b>	<b>Safety and Security Equipment</b>			
1	Unit Security Camera and Monitor System			
2	Unit Key Control/Unit A and B key boxes			
3	Building Security Searches/ <b>How often and when?</b>			
<b>B</b>	<b>Program</b>			
1	Action for Emergencies/Location of emergency plan books			
2	Grievance Procedure/Staff and Resident procedures			
<b>C</b>	<b>Care and Use of Equipment</b>			
1	Dishwasher			
2	Washer and Dryer			
3	Hot Water Tanks ( <b>location Units A, B and Kitchen</b> )			
4	Heating and Cooling Units, Thermostats ( <b>location Units A and B</b> )			
5	Janitorial Duties/ all shifts should leave facility clean			
6	Review Facility Floor Plan			
<b>D</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Detention Counselor (All Shifts)			
2	Unit Secretary (8a-3:30p)			

Reviewed by Unit Shift Supervisor \_\_\_\_\_

Date \_\_\_\_\_

## Detention Counselor Orientation/On-the-Job Training Checklist

<b>Resident Transportation Orientation</b>		Trainee	Trainer	Date
<b>A</b>	<b>Transport Policy and Procedure</b>			
1	Searching Residents and Chain of Custody			
2	Escapes and Run A Ways from Detention			
3	Vehicle Security			
4	Transporting Residents			
5	Detention Door Security			
6	Emergency Medical Transport of Residents			
7	Emergency Treatment of Resident			
8	Tulsa county Cell Phone Policy			
9	Tulsa County Seat Belt Policy			
10	Information to Communicate to Supervisors			
<b>B</b>	<b>Forms</b>			
1	Resident Temporary/Permanent Release Forms			
2	Medical Observation Notes			
3	Resident Admission Forms <b>(Check for Medication)</b>			
4	Resident Medical Information (Confidentiality Requirements/HIPPA)			
5	Nurse Referral Sheet			
6	Incident Report			
7	Tulsa County Vehicle Accident Report			
8	Vehicle Trip Report Form			
9	Medical Release Instructions <b>(Mental Health/Hospital)</b>			
<b>C</b>	<b>Safety and Security Equipment</b>			
1	<b>Unit "A" and Main Control "Secure Exit Points"</b>			
2	Security Awareness While Transporting			
3	Mechanical Restraints for Transport			
4	Facility Cell Phone: Location and Use			
5	First Aid Kit Locations			
6	Emergency Safety Procedures (Vehicle)			
7	Authorized Access to Resident While on Transport			
<b>D</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency/ <b>What is Considered a transport emergency?</b>			
3	Medical Confidentiality and Standing Orders			
<b>E</b>	<b>Vehicle Care and Use</b>			
1	Refueling Procedure			
2	Basic Maintenance/notify administrator/no report			
3	Serious Mechanical Malfunction Protocol/Incident Report			

Reviewed by Unit Shift Supervisor \_\_\_\_\_

Date \_\_\_\_\_

**Tulsa County Juvenile Detention Home  
Detention Counselor**

**Training Checklist Acknowledgement**

I, \_\_\_\_\_ have completed the Detention Home 8 hour  
Orientation / On-the-Job Training Checklist as Directed.

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

\_\_\_\_\_  
Detention Counselor      Date

\_\_\_\_\_  
Training Supervisor      Date

**Tulsa County Juvenile Detention Home  
Lead Detention Counselor**

**Training Checklist**

**Position Orientation and On-the-Job Training**

Employee's Name

Date of Hire

Assigned Trainer

Training Start Date

Date Assigned

Training End Date

**Unit Shift Supervisor Orientation Training Schedule:**

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

# Tulsa County Juvenile Detention Home

## Lead Detention Counselor

### Position Orientation and On-the-Job Training

#### Orientation Objectives

Trainee    Trainer    Date

#### **A      Program Manager**

1	Employee Paperwork (Payroll, Identification, Education)			
2	Shift Assignment			
3	Shift Duties (All Shifts)			
5	Chain of Command			
6	Disciplinary Procedures			
7	Authority and Legal Responsibilities			

#### **B      Accreditation Manager/Training Coordinator**

1	Staff Training & Documentation			
2	Key Security: Control System			
3	Vehicle & Facility Maintenance			
4	ACA Compliance Issues			
5	OJA Compliance Issues			
6	Videos - Legal Issues 1 & 2			
7	Videos - Ten Danger Zones For Supervisors			
8	Reviewing Documentation for Record			

#### **C      Unit Shift Supervisor Mentor**

1	Security Camera System and use of Doors and Keys			
2	Detention Tour (Facility Floor Plan - Locate All Items on Plans)			
3	Bureau Tour (Intake, Probation, Admin. Services, and Courts)			
3	Emergency Power Generator			
4	Emergency Lighting			
5	Emergency Water Systems			
6	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
7	Emergency Evacuation Procedures			
8	Main Water Valve and Fire Sprinkler System (Emergency Only)			
9	Information to Communicate at Shift Change			
10	Interaction and Relationship with Intake and Probation Departments			

#### **D      Medical Authority**

1	Medication Administration			
2	Medical Records Maintenance			
3	Contact Protocols			
3	Critical Information Checklist			
4	Accepting Medication from External Sources			
5	Medical Assessment			
6	Mental Health Issues/Gate keeping Requirements			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home Lead Detention Counselor

## Position Orientation and On-the-Job Training

		Trainee	Trainer	Date
<b>E</b>	<b>Superintendent</b>			
1	Review Personnel Policy and Procedures			
3	Employee Grievance Procedure			
4	Employee Conduct / Expectations			
5	Legal Issues: Employee/Supervisor Relationship			
6	Chain of Command / Appropriate Communication			
7	Leadership / Supervisor - Principles, Traits			
8	Mission of TCJDH - Care, Welfare, Safety, and Security			
9	Review of OJA Rules for Secure Detention			
10	Form - Reporting Abuse, Neglect, Policies and Procedures			
11	Form - Use of Force, The Law / Overview of CPI Training			
12	Jolts Records/Computer Access Regulations			
13	Juvenile Rights			
14	Public Information / Confidentiality			
15	Fiscal Management: Funding and Procurement			
16	Investigation and Research Procedures			
17	Utilization of Intake On-Call List			
18	Utilization of Probation On-Call List			
19	Resident Release Prioritization List			

		Trainee	Trainer	Date
<b>F</b>	<b>Superintendent</b>			
1	Superintendent's Orientation: The High Road			
2	Sexual Harassment/ Hostile Work Environment Policy			
3	EEOC / Discrimination			
4	Supervision: Theory and Practice			
5	Interdepartmental Communication			
6	Contact Imperatives			
7	Tulsa County Juvenile Justice System			
8	Understanding the Need for Change			
9	Staff Disciplinary Techniques, Procedures and Documentation			
10	Staff Motivational Skills			
11	Conducting Staff Training			
12	Resident Release Prioritization List			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home

## Lead Detention Counselor

### Position Orientation and On-the-Job Training

Trainee    Trainer    Date

A      Safety and Security Equipment				
1	Security System			
2	Care and Use of Mechanical Restraints			
3	Care and Use of Humane Restraint Chair			
4	Security Searches (Use of Metal Detector)			
5	Key Security: Supervising Staff			

B      Admissions				
1	Computer Entry of Admission Data on Jolts			
2	Verifying of Warrants			
3	Intake Counselor Functions/Contact Procedures			
4	Medical Admission Assessment			
5	Issues in Training Staff on Admits			

C      Releases				
1	Computer Entry of Release Data on Jolts			
2	Verifying Releases			
3	Releasing Medical Information and Medication			
4	Issues in Training Staff on Releases			
5	Contingency Release Program			

D      Maintaining Program Continuity				
1	Program Schedule Integrity			
2	Free time Supervision: When and How			
3	School Program: Interaction with Teachers and Staff			
4	Phone Security			
5	Appropriate Program Adjustments			

E      Review of Shift Duties, Job Descriptions				
1	Main Control Operator (All Shifts)			
2	Detention Counselor (All Shifts)			
3	Unit Secretary			
4	Lead Detention Counselor			
5	Nurse			
6	Unit Shift Supervisor			
7	Program Manager			
8	Superintendent			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_



**Tulsa County Juvenile Detention Home**  
**Lead Detention Counselor**  
**Training Checklist Acknowledgement**

I, \_\_\_\_\_ have completed the Detention Home 40 hour

**General Orientation and Position Orientation / On-the-Job Training Checklist as Directed.**

\_\_\_\_\_  
Unit Shift Supervisor                      Date

\_\_\_\_\_  
Program Manager                              Date

\_\_\_\_\_  
Accreditation Manager                      Date

(Revised 7/30/06)

## Part-Time Detention Counselor Orientation and On-the-Job Training Checklist

Employee's Name

Date of Hire

Assigned USS

Training Start Date

Date Assigned

Training End Date

### Orientation Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

### On-the-Job Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

Main Control Objectives		Trainee	Trainer	Date
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A Safety and Security Equipment		Trainee	Trainer	Date
1	Computer Record Checks on JOLTS			
2	Law Enforcement Reports and Warrant Recall Procedure			
3	Distinguish Different Types of Warrants			
4	Admissions Criteria (Who is Eligible?)			

B Admissions		Trainee	Trainer	Date
1	Computer Entry of Admission Data on Jolts			
2	Security Searches (Use of Metal Detector)			
3	Intake On-Call List			

C Releases		Trainee	Trainer	Date
1	Computer Entry of Release Data on Jolts			
2	Contingency Release Program			

D Safety and Security Equipment		Trainee	Trainer	Date
1	Main Control Console			
2	Main Control Telephone System			
3	Main Control Security Camera and Monitor System			
4	Main Control Key Control			
5	Fire Procedures			

E Review of Shift Duties, Job Descriptions		Trainee	Trainer	Date
1	Main Control Operator (All Shifts)			

Assigned Unit Shift Supervisor \_\_\_\_\_ Date \_\_\_\_\_

### 7-3 Shift Objectives

Trainee    Trainer    Date

<b>A</b>	<b>Shift Duties</b>			
1	Key Control			
2	Review Behavior Forms			
3	Discuss Daily Program Agenda with Supervisor			
4	Dinning Room Supervision			
5	Wake up Procedure			
6	Admission and Orientation of Residents			
7	Resident Releases			
8	Supervising the Education Program			
9	Role of Intake and Probation			
10	Program Supervision			
11	Clean up Procedures			
12	Resident Visitation, Letter Writing, and Phone Calls			
13	Shift Briefing of Staff			
14	Information to Communicate to Supervisors			
15	Resident Rules and Discipline			
16	Security Search of Residents and Facility			
<b>B</b>	<b>Forms</b>			
1	Resident Temporary / Permanent Release Forms			
2	Daily Observation Notes			
3	Resident Admission Forms			
4	Resident Room Charts			
5	Nurse Referral Sheet			
6	Incident Report/Witness Statement			
7	Disciplinary Report/Disciplinary Hearing Form			
8	Resident Grievance Form			
<b>C</b>	<b>Safety and Security Equipment</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 7-3 Activities			
3	Mechanical Restraints			
4	Material Safety Data Sheets: Location and Use			
5	First Aid Kit/ Fire Extinguisher Locations			
6	Emergency Safety Procedures			
7	Personnel Authorized Access to Detention			
<b>E</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			

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Assigned Unit Shift Supervisor      Date

### 3-11 Shift Objectives

Trainee    Trainer    Date

A	Shift Duties			
1	Key Control			
2	Review Behavioral Reports and Shift Log			
3	Preparation of Snacks			
4	Role of Intake and Probation			
5	Resident Admissions			
6	Resident Releases			
7	Supervision of Education Program			
8	Resident Groups and Life Skills Programs			
9	Resident Visitation, Letter Writing, and Phone Calls			
10	Resident Shower Procedure			
11	Environmental Controls			
12	Clean up Procedures			
13	Information to Communicate to Unit Shift Supervisors			
B	Forms			
1	Resident Temporary / Permanent Release Forms			
2	Daily Observation Notes			
3	Resident Admission Forms			
4	Resident Room Charts			
5	Nurse Referral Sheet			
6	Incident Report/Witness Statement			
7	Disciplinary Report/Disciplinary Hearing Form			
8	Resident Grievance Form			
C	Safety and Security Equipment			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 3-11 Activities			
3	Mechanical Restraints			
4	Material Safety Data Sheets: Location and Use			
5	First Aid Kit/ Fire Extinguisher Locations			
6	Gym or Outside Activities and Security Meas. Required			
7	Personnel Authorized Access to Detention			
D	3-11 Programming			
1	Phillip Roy			
2	Group Discussions (3-11 Shift)			
3	Gym or Outside Activities and Security Meas. Required			
4	Art Room and Art Program			
5	Group Discussions (3-11 Shift)			
7	Lights out Procedure			
8	Special Programs Schedule			
E	Health Care			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

### 11-7 Shift Objectives

Trainee    Trainer    Date

A	Shift Duties			
1	Check Key Inventory			
2	Unit Security Checks			
3	Review Behavioral Reports, Shift Logs			
4	Resident Room Check Procedure			
5	Resident Admissions			
6	Resident Releases			
7	Laundry Procedure			
8	Dryer Maintenance			
9	11-7 Clean up Procedure			
10	Dishwasher Care and Use			
11	Flag Raising Procedure			
12	Information to Communicate to Supervisors			
13	Bureau Area Security Searches			

B	Program			
1	Action for Emergencies			
2	Grievance Procedure			
3	Intake On call List			
4	Contingency Release Program			

C	Health Care			
1	Medical Eligibility for Detention			
2	Medication Procedure			

D	Review of Shift Duties, Job Descriptions			
1	Detention Counselor (All Shifts)			
2	Unit Secretary (8a-3:30p)			

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Assigned Unit Shift Supervisor      Date

**Training Checklist Acknowledgement**

I, \_\_\_\_\_ have completed the Detention Home 24 hour  
Orientation / On-the-Job Training Checklist as Directed.

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

\_\_\_\_\_  
Detention Counselor      Date

\_\_\_\_\_  
Accreditation Manager      Date

# Tulsa County Juvenile Detention Home

## Training Checklist Position Orientation and On-the-Job Training

Employee's Name

Date of Hire

Assigned Trainer

Training Start Date

Date Assigned

Training End Date

### Administrative Training Schedule

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						



# Tulsa County Juvenile Detention Home

## Position Orientation and On-the-Job Training

### Orientation Objectives

Trainee    Trainer    Date

<b>A      Program Manager</b>				
1	Employee Paperwork (Payroll, Identification, Education)			
2	Shift Assignment			
3	Shift Duties (All Shifts)			
5	Chain of Command			
6	Disciplinary Procedures			
7	Authority and Legal Responsibilities			

<b>B      Accreditation Manager/Training Coordinator</b>				
1	Staff Training & Documentation			
2	Key Security: Control System			
3	Vehicle & Facility Maintenance			
4	ACA Compliance Issues			
5	OJA Compliance Issues			
6	Videos - Legal Issues 1 & 2			
7	Videos - Ten Danger Zones For Supervisors			
8	Reviewing Documentation for Record			

<b>C      Unit Shift Supervisor Mentor</b>				
1	Security Camera System and use of Doors and Keys			
2	Detention Tour (Facility Floor Plan - Locate All Items on Plans)			
3	Bureau Tour (Intake, Probation, Admin. Services, and Courts)			
3	Emergency Power Generator			
4	Emergency Lighting			
5	Emergency Water Systems			
6	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
7	Emergency Evacuation Procedures			
8	Main Water Valve and Fire Sprinkler System (Emergency Only)			
9	Information to Communicate at Shift Change			
10	Interaction and Relationship with Intake and Probation Departments			

<b>D      Medical Authority</b>				
1	Medication Administration			
2	Medical Records Maintenance			
3	Contact Protocols			
3	Critical Information Checklist			
4	Accepting Medication from External Sources			
5	Medical Assessment			
6	Mental Health Issues/Gate keeping Requirements			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home

## Position Orientation and On-the-Job Training

		Trainee	Trainer	Date
<b>E</b>	<b>Superintendent</b>			
1	Review Personnel Policy and Procedures			
3	Employee Grievance Procedure			
4	Employee Conduct / Expectations			
5	Legal Issues: Employee/Supervisor Relationship			
6	Chain of Command / Appropriate Communication			
7	Leadership / Supervisor - Principles, Traits			
8	Mission of TCJDH - Care, Welfare, Safety, and Security			
9	Review of OJA Rules for Secure Detention			
10	Form - Reporting Abuse, Neglect, Policies and Procedures			
11	Form - Use of Force, The Law / Overview of CPI Training			
12	Jolts Records/Computer Access Regulations			
13	Juvenile Rights			
14	Public Information / Confidentiality			
15	Fiscal Management: Funding and Procurement			
16	Investigation and Research Procedures			
17	Utilization of Intake On-Call List			
18	Utilization of Probation On-Call List			
19	Resident Release Prioritization List			

		Trainee	Trainer	Date
<b>F</b>	<b>Superintendent</b>			
1	Superintendent's Orientation: The High Road			
2	Sexual Harassment/ Hostile Work Environment Policy			
3	EEOC / Discrimination			
4	Supervision: Theory and Practice			
5	Interdepartmental Communication			
6	Contact Imperatives			
7	Tulsa County Juvenile Justice System			
8	Understanding the Need for Change			
9	Staff Disciplinary Techniques, Procedures and Documentation			
10	Staff Motivational Skills			
11	Conducting Staff Training			
12	Resident Release Prioritization List			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home

## Position Orientation and On-the-Job Training

		Trainee	Trainer	Date
<b>A Safety and Security Equipment</b>				
1	Security System			
2	Care and Use of Mechanical Restraints			
3	Care and Use of Humane Restraint Chair			
4	Security Searches (Use of Metal Detector)			
5	Key Security: Supervising Staff			
<b>B Admissions</b>				
1	Computer Entry of Admission Data on Jolts			
2	Verifying of Warrants			
3	Intake Counselor Functions/Contact Procedures			
4	Medical Admission Assessment			
5	Issues in Training Staff on Admits			
<b>C Releases</b>				
1	Computer Entry of Release Data on Jolts			
2	Verifying Releases			
3	Releasing Medical Information and Medication			
4	Issues in Training Staff on Releases			
5	Contingency Release Program			
<b>D Maintaining Program Continuity</b>				
1	Program Schedule Integrity			
2	Free time Supervision: When and How			
3	School Program: Interaction with Teachers and Staff			
4	Phone Security			
5	Appropriate Program Adjustments			
<b>E Review of Shift Duties, Job Descriptions</b>				
1	Main Control Operator (All Shifts)			
2	Detention Counselor (All Shifts)			
3	Unit Secretary			
4	Lead Detention Counselor			
5	Nurse			
6	Unit Shift Supervisor			
7	Program Manager			
8	Assistant Superintendent			
9	Superintendent			

Reviewed by Program Manager \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home

## Training Checklist Acknowledgement

I, \_\_\_\_\_ have completed the Detention Home 40 hour  
General Orientation and Position Orientation / On-the-Job Training Checklist as Directed.

\_\_\_\_\_  
Unit Shift Supervisor                      Date

\_\_\_\_\_  
Program Manager                              Date

\_\_\_\_\_  
Accreditation Manager                      Date

## Volunteer/Intern Orientation Training Checklist

Volunteer's Name

Date of Hire

Assigned USS

Training Start Date

Date Assigned

Training End Date

### Volunteer Orientation Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1					Observation	Unit
2					Observation	Unit
3					Observation	Unit
4					Observation	Unit
5					Observation	Unit

### Volunteer Orientation / On-the-Job Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1					Shadow / Assist	Unit
2					Shadow / Assist	Unit
3					Shadow / Assist	Unit
4					Shadow / Assist	Unit
5					Shadow / Assist	Unit

**General Orientation**

## Orientation Objectives

Trainee    Trainer    Date

<b>A      Program Manager</b>			
1	Volunteer Paperwork (Welcome, Identification, Education)		
2	Training Documentation (Training Binder, Notifications)		
3	Overview of Philosophy		
4	History of Tulsa County Juvenile Detention		
5	Review Volunteer Job Description		
6	Confidentiality of Files and Record Security		
7	Shift Assignment		
8	Assigned Supervisor		
9	Detention Tour (Facility Floor Plan - Locate All Items on Plans)		
10	Role of Intake and Probation Departments		
11	Bureau Tour (Intake, Probation, Admin. Services, and Courts)		

<b>B      Unit Shift Supervisor</b>			
1	Training Documentation (Training Binder, Notifications)		
2	Assigned Mentor(s)		
3	Organizational Chart - Current Staff Positions		
4	Emergency Evacuation Procedures		
5	Floor Plan - Emergency Equipment		
6	Fire Alarm System, Smoke Detectors, Fire Extinguishers		
7	Information to Communicate to Unit Shift Supervisors		
8	Security of Doors and Keys		
9	Report Writing		
10	Disciplinary Procedure		
11	Resident Grievance Procedure		

<b>C      Mentor</b>			
1	Unit Orientation		
2	Shift Activities		
3	Interaction with Residents		
4	Free time Supervision		
5	Cafeteria Monitoring		
6	Group Rules and Procedures		
7	Security Search Procedures		
8	Visitation Procedures		
9	Resident Phone Call Rules		
10	Staff Break Rooms		
11	Employee Parking		

Assigned Unit Shift Supervisor      Date

## General Orientation

Orientation Objectives		Trainee	Trainer	Date
<b>D</b>	<b>Unit Shift Supervisor / Kitchen Manager</b>			
1	Program Observation (Day 1)			
2	Program Observation (Day 2)			
3	Program Observation (Day 3)			
4	Program Observation (Day 4)			
5	Program Observation (Day 5)			
6	Fire Procedures			
7	Review Detention Home Policy and Procedures			
8	Review Detention Home Forms			
9	Review Job Descriptions (All Personnel Positions)			
10	Form - Juvenile Contact Directive			
<b>E</b>	<b>Administration / Manager</b>			
1				
2	Sexual Harassment Policy			
3	Employee Grievance Procedure			
4	Employee Conduct / Expectations			
5	Suicide Prevention and Plan			
6	Form - Use of Force, The Law / Overview of CPI Training			
7	Copy of OJA Rules for Secure Detention			
8	Leadership / Supervisor - Principles, Traits			
9	Form - Reporting Abuse, Neglect, Policies and Procedures			
10	Mission of TCJDH - Care, Welfare, Safety, and Security			
11	Computer Use / Records			
12	Chain of Command / Appropriate Communication			
13	Legal Issues / Liability			
14	Public Information / Confidentiality			
15	Fiscal Management / Funding			
16	EEO / Discrimination			
17	Juvenile Rights			
18	Video - Legal Issues 1			
19	Video - Legal Issues 2			

Assigned Unit Shift Supervisor \_\_\_\_\_ Date \_\_\_\_\_

## Position Orientation and On-the-Job Training

Main Control Area Objectives		Trainee	Trainer	Date
<b>A</b>	<b>Safety and Security Equipment</b>			
1	Computer Record Checks on JOLTS			
2	Law Enforcement Reports and Warrant Recall Procedure			
3	Distinguish Different Types of Warrants			
4	Admissions Criteria (Who is Eligible?)			
<b>B</b>	<b>Admissions</b>			
1	Computer Entry of Admission Data on Jolts			
2	Security Searches (Use of Metal Detector)			
<b>C</b>	<b>Releases</b>			
1	Computer Entry of Release Data on Jolts			
<b>D</b>	<b>Safety and Security Equipment</b>			
1	Main Control Console			
2	Main Control Telephone System			
3	Main Control Security Camera and Monitor System			
4	Main Control Key Control			
5	Main Control Fire Procedures			
<b>E</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Main Control Operator (All Shifts)			

Assigned Unit Shift Supervisor \_\_\_\_\_ Date \_\_\_\_\_



## Position Orientation and On-the-Job Training

<b>7-3 Shift Unit Objectives</b>		<b>Trainee</b>	<b>Trainer</b>	<b>Date</b>
<b>A</b>	<b>Admissions</b>			
1	Orientation of Rules (Read to Resident)			
2	Completing Forms, Making Folders			
3	Room Chart and Count			
4	Admission Showering Procedure			
5	Orientation to Room and Activity Areas			
6	Admission Security / Searches			
7	Notifications (Parents, Administration, etc.)			
8	Role of Intake and Probation During Admissions			
<b>B</b>	<b>Releases</b>			
1	Temporary / Permanent			
2	Return of All Personal Items, Valuables, and Money			
3	Completing Release Procedures			
<b>C</b>	<b>Safety and Security Equipment</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 7-3 Activities			
3	Security Search of Returning Residents			
<b>D</b>	<b>Program</b>			
1	Resident Wake-up Procedure			
2	School Program			
3	Visitation (Saturday & Sunday 1:30pm-2:30pm)			
4	Report Writing (Behavior Observation, Incident Report)			
5	Letter Writing			
6	Facility Clean-up Procedures (Daily and Weekend)			
7	Reporting Alleged Child Abuse			
<b>E</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			
4	Video - Suicide in Juvenile Facilities			
5	Video - Aids in Juvenile Facilities			

Assigned Unit Shift Supervisor \_\_\_\_\_ Date \_\_\_\_\_

## Position Orientation and On-the-Job Training

<b>3-11 Shift Unit Objectives</b>		Trainee	Trainer	Date
<b>A</b>	<b>Reception of Referral or Admit</b>			
1	Detention Reception (Form 760)			
2	Money Receipt and Cash Drawer Procedure			
3	Filing Valuables Form and Personal Property			
4	How to Contact Intake Using "On Call List"			
5	Guidelines for Detaining Juveniles			
<b>B</b>	<b>Safety and Security Equipment</b>			
1	Security/Emergency Water Pressure Controls to Indiv. Rooms			
2	Security Awareness: 3-11 Activities			
3	Security of Doors and Keys			
<b>C</b>	<b>Program</b>			
1	Dining Room Supervision			
2	Dayroom Break Time: Free Time			
3	Gym or Outside Activities and Security Meas. Required			
4	Art Room and Art Program			
5	Group Discussions (3-11 Shift)			
6	Shower Procedures (Evenings, Med. Care, After Gym)			
7	Bed Time			
8	Visitation (Wednesday 6:00pm-7:00pm)			
<b>E</b>	<b>Unit Shift Supervisors</b>			
1	Information to Communicate to Unit Shift Supervisors			

Assigned Unit Shift Supervisor \_\_\_\_\_ Date \_\_\_\_\_

## Position Orientation and On-the-Job Training

<b>11-7 Shift Unit Objectives</b>		<b>Trainee</b>	<b>Trainer</b>	<b>Date</b>
<b>A</b>	<b>Safety and Security Equipment</b>			
1	Unit Telephone System			
2	Unit Security Camera and Monitor System			
3	Unit Key Control			
4	Building Security Searches			
<b>B</b>	<b>Program</b>			
1	Action for Emergencies			
2	Resident Grievance Procedure			
<b>C</b>	<b>Care and Use of Equipment</b>			
1	Dishwasher			
2	Washer and Dryer			
3	Hot Water Tanks			
4	Heating and Cooling Units, Thermostats			
5	Janitorial Duties			
6	Review Facility Floor Plan			
<b>D</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Detention Counselor (All Shifts)			
2	Unit Secretary (8a-3:30p)			

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Assigned Unit Shift Supervisor      Date

## Training Checklist Acknowledgement

I, \_\_\_\_\_ have completed the Detention Home 80 hour

**General Orientation and Position Orientation / On-the-Job Training Checklist as Directed.**

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

\_\_\_\_\_  
Detention Counselor      Date

\_\_\_\_\_  
Accreditation Manager      Date

\_\_\_\_\_  
Administrative Staff      Date

# Tulsa County Juvenile Detention Home Main Control Operator

Employee's Name

Date of Hire

Assigned USS

Training Start Date

Date Assigned

Training End Date

## Orientation Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

## On-the-Job Training Schedule:

Day #	Day	Date	Time	Mentor	Duty	Location
1						
2						
3						
4						
5						

# Tulsa County Juvenile Detention Home Main Control Operator

Main Control Objectives		Trainee	Trainer	Date
<b>A</b>	<b>Safety and Security Equipment</b>			
1	Computer Record Checks on JOLTS			
2	Law Enforcement Reports and Warrant Recall Procedure			
3	Distinguish Different Types of Warrants			
4	Admissions Criteria (Who is Eligible?)			
5	Detention Reception Form (#760)			
6	Regional Bed Policy - Procedure and Notification			
7	Dealing with the Public and Authorized Visitors			
8	Dealing with Law Enforcement and Court Personnel			
9	Money Receipt and Cash Drawer Procedure			
10	Filing Valuables Form and Personal Property			
11	How to Contact Intake Using "On-Call List"			
12	Guidelines for Detaining Juveniles			
<b>B</b>	<b>Admissions</b>			
1	Computer Entry of Admission Data on Jolts			
2	Security Searches (Use of Metal Detector)			
3	Security Searches of Returning Residents (MC Area)			
4	Completing Forms, Making Folders			
5	Room Chart and Count			
6	Admission Security / Searches and Holding Room			
7	Notifications (Parents, Administration, etc.)			
8	Role of Intake and Probation			
<b>C</b>	<b>Releases</b>			
1	Computer Entry of Release Data on Jolts			
2	Temporary / Permanent			
3	Return of All Personal Items, Valuables, and Money			
4	Completing Release Procedures			
<b>D</b>	<b>Program</b>			
1	Report Writing (Behavior observation, Incident Report)			
2	Reporting Alleged Child Abuse			
3	Grievance Procedure			

Reviewed by Supervisor \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home Main Control Operator

<b>Main Control Objectives (Cont.)</b>		<b>Trainee</b>	<b>Trainer</b>	<b>Date</b>
<b>E</b>	<b>Safety and Security Equipment</b>			
1	Main Control Console			
2	Main Control Telephone System			
3	Main Control Security Camera and Monitor System			
4	Main Control Key Control			
5	Fire Procedures			
6	Security of Doors and Keys			
7	Action for Emergencies (M.C. Procedures)			

<b>F</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Main Control Operator (All Shifts)			
2	Detention Counselor (All Shifts)			
3	Unit Secretary (8:00am-3:30pm)			

<b>G</b>	<b>Forms</b>			
1	Main Control Operator (All Shifts)			

<b>H</b>	<b>Unit Shift Supervisors</b>			
1	Information to Communicate to Unit Shift Supervisors			

Reviewed by Supervisor \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home Main Control Operator

## 7-3 Shift Objectives

Trainee    Trainer    Date

<b>A</b>	<b>Admissions</b>			
1	Orientation of Rules (Read to Resident)			
2	Admission Showering Procedure			
3	Orientation to Room and Activity Areas			

<b>B</b>	<b>Safety and Security Equipment</b>			
1	Unit "A" and "B" Consoles			
2	Security Awareness: 7-3 Activities			
3	Security Search of Returning Residents			

<b>C</b>	<b>Program</b>			
1	Resident Wake-up Procedure			
2	School Program			
3	Visitation (Saturday & Sunday 1:30pm-2:30pm)			
4	Letter Writing			
5	Facility Clean-up Procedures (Daily and Weekend)			
6	J.B.D.C. Critical Personnel Policies Review			

<b>D</b>	<b>Health Care</b>			
1	Medical Administration Summary			
2	Medical Emergency			
3	Medical Standing Orders			
4	Bloodborne Pathogens Exposure Control Plan			

Reviewed by Supervisor \_\_\_\_\_ Date \_\_\_\_\_



# Tulsa County Juvenile Detention Home Main Control Operator

## 3-11 Shift Objectives

Trainee    Trainer    Date

A	Safety and Security Equipment			
1	Emergency Power Generator			
2	Emergency Lighting			
3	Fire Alarm System, Smoke Detectors, Fire Extinguishers			
4	Emergency Evacuation Procedures			
5	Use of Force, Use of Restraints			
6	Main Water Valve & Fire Sprinkler System (Emerg. Only)			
7	Security/Emerg. Water Pressure Controls to Indiv. Rooms			
8	Security Awareness: 3-11 Activities			
9	Security of Doors and Keys			

D	Program			
1	Dining Room Supervision			
2	Dayroom Break Time: Free Time			
3	Gym or Outside Activities and Security Meas. Required			
4	Art Room and Art Program			
5	Group Discussions (3-11 Shift)			
6	Shower Procedures (Evenings, Med. Care, After Gym)			
7	Bed Time			

Reviewed by Supervisor \_\_\_\_\_ Date \_\_\_\_\_

# Tulsa County Juvenile Detention Home Main Control Operator

## 11-7 Shift Objectives

Trainee    Trainer    Date

<b>A</b>	<b>Safety and Security Equipment</b>			
1	Unit Telephone System			
2	Unit Security Camera and Monitor System			
3	Unit Key Control			
4	Building Security Searches			
5	Action for Emergencies (Unit Procedures)			

<b>B</b>	<b>Care and Use of Equipment</b>			
1	Dishwasher			
2	Washer and Dryer			
3	Hot Water Tanks			
4	Heating and Cooling Units, Thermostats			
5	Janitorial Duties			
6	Review Facility Floor Plan			

<b>D</b>	<b>Review of Shift Duties, Job Descriptions</b>			
1	Detention Counselor (All Shifts)			
2	Unit Secretary (8a-3:30p)			

Reviewed by Supervisor \_\_\_\_\_ Date \_\_\_\_\_

**Tulsa County Juvenile Detention Home**  
**Main Control Operator**  
**Training Checklist Acknowledgement**

I, \_\_\_\_\_ have completed the Detention Home  
80 Hour Orientation / On-the-Job Training Checklist as Directed.

\_\_\_\_\_  
Assigned Unit Shift Supervisor      Date

\_\_\_\_\_  
Main Control Operator      Date

\_\_\_\_\_  
Accreditation Manager      Date

Tulsa County Juvenile Detention Home  
Training Equipment Checklist

4 Dell Desktop Training Computers

2 Dell Laptop Training Computers

1 Sony Handheld Camcorder

1 Dell 2200mp Projector

1 Phillips DVD/VHS player

1 15ft Power cord

10 Adult CPR Manikins

1 Child CPR Manikin

1 Infant CPR Manikin

1 Practice model (AED) Automated External Defibrillator

# **Administration & Management**

**01-42**

**Information System**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-42</i>
Information System		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure and practice of the Detention Home to contribute to and participate in an organized system of information storage, retrieval and review. The Detention Home information system is part of overall research and evaluation system the facility uses make decisions concerning future plans relating to both the juvenile and operational needs.**

**I. Purpose:** It is essential that the collection, recording and processing of Detention data, be thorough, uniform, and precise. Uniform definitions should apply to all similar data. Information systems facilitate decision making, research, and timely responses to offended needs and outside inquiries. Within the Detention Home the responsibilities for the design, maintenance, and updating of the general information system are shared with the Tulsa County IT, Office of Juvenile Affairs IT and the Detention Home.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** – The facility shall maintain information systems consisting of files and records, both manual and computer assisted, that cover all major areas of facility operations.

**1. Organized Information System** – The Facility Administrator shall determine the system’s capability for on-demand information by performing the following tasks:

- a. The surveying similar programs to determine types of information being collected.
- b. Analyzing reports generated in the past to determine types of information required.
- c. Provide written summary of the staff’s findings to ensure potential on demand information is incorporated in the system.

**2. Responsible Staff** – The Facility Administrator shall assign staff to participate in the development and revision of systems for the collection, verification, processing, storage, access, and handling of necessary operation and planning data fir the facility. These practices should be reviewed regularly by the Facility Administrator or his designee. The system’s overall effectiveness is reviewed annually.

3. **Retrieval and Review of Information Collected** – The system shall generate monthly reports summarizing the data collected. Reports shall be reviewed by the Facility Administrator and other designated staff and submitted to the Juvenile Bureau Director. Future program adjustments and programs should be developed as necessary as a result of these reports.
  4. **Juvenile On-Line Tracking System (JOLTS)** – The state wide system for maintaining data on juveniles who are now, or have been, in the juvenile justice system. JOLTS has an administrator, who is an employee of the state, who is responsible for managing system operations throughout the state. The Detention Home is required to access, update and monitor information on JOLTS including admissions, release, and current juvenile beds available. The Facility Administrator shall designate specific staff to be tasked with the in house responsibility of up-dating JOLTS, and shall authorize all access granted to any employee. Staff who have been granted JOLTS access shall be given an access ID code. The security of the ID code is the responsibility of the staff member it was issued to, and said employee shall be held liable for any misuse associated with his or her ID code.
  5. **Agency Reports** – The facility information system shall be capable of providing the Facility Administrator and administrative staffs with data necessary to define program needs, perform short and long range planning, and design programming to meet the needs of juveniles in custody. The facility should maintain a catalog of all monthly, annual and irregular reports produced by the facility.
- B. Collaboration with Other Agencies** – The facility shall make every effort to share information with other facilities, the Juvenile Bureau, and any other juvenile justice or service agency that would ask in order to promote efficiency, effective management and standardization.
1. **Research Requests** – All proposals for research must be approved by the Facility Administrator. The Facility Administrator or his designee shall discuss opportunities for research projects, their research design, and a full budget break down of any proposed research contract awarded by the facility or the Juvenile Bureau, as well as specified research and evaluation needs of the facility. All research Request shall be answered as soon as possible. Applications to conduct outside research shall include the following:
    - a. Title of the Study
    - b. Names, addresses, and telephone numbers of the principle researcher and all research staff
    - c. A summary of the goals of the study and the justification of the research
  2. **Obtaining Approval** – Two copies of the application shall be submitted to the Facility Administrator for review. If the study requires direct involvement of the juveniles, the Facility Administrator may ask a representative group of staff to review the proposal and submit a recommendation for approval or disapproval. The Facility Administrator shall keep one copy and forward one copy of the proposal to the Bureau Director with a recommendation to approve or disapprove. The Bureau Director shall review the proposal and all recommendations and decide if the study would be in the best interest of the Juvenile Bureau.

3. **Conducting Research** – All research conducted must comply with professional and scientific ethics in addition to county, state and federal guidelines for the use and dissemination of findings. The Principal researcher shall maintain adequate records enabling the Facility Administrator to ascertain the status of the study at any time.
  - a. Any Data collected during the research can only be used as agreed to by the participants, before the study began.
  - b. No juvenile or staff member shall receive compensation or payment of any kind in connection with a research study without the written permission of the Facility Administrator and the Director.
4. **Follow-Up Reports** – A brief report shall be prepared by the principal researcher following the completion of any research conducted in the facility. This report, including a summary of the content of the study, shall be copied for the director of the Juvenile Bureau. In any report of results, researchers shall not use correct names or describe any of the facility subjects in such detail that they might be identified.
5. **Violations of Research Agreements** – Permission to conduct any research study may be discontinued for any violation of agreements or facility policy and procedure. Violator may be subject to civil or criminal liability.

C. **Annual Review** - The facility's complete information system should be evaluated for its effectiveness as it relates to overall facility management at least annually, in writing. The system should be updated and or revised as needed.

## V. **Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1A-05, 1F-01, 1F-02, 1F-03, 1F-04, 1F-05, 1F-06, 1F-07, 1F-08)

## VI. **Enclosures:**

1. Definitions of Research Criteria
2. Facility Report Catalog

## VII. **Action:**

Facility Administrator and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:05-01

Distribution: Detention Home Policy and Procedure Manual



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Facility Administrator, Tulsa County Juvenile Detention

# Tulsa County Juvenile Detention Performance Monitoring Procedures Review Forms

Objectives	Performance Measured	Recommended Measures
Security/Control	Escape	Escape
	Incidents	Number of Incident Reports Per Month
intake/Admission	Preadjudicated/Adjudicated Juveniles Who Cannot Live in an Open Setting	Written Criteria for Intake Number of Juvenile Meeting Criteria
Humane Treatment/ Life and Safety	Institutional Abuse	Physical Abuse (Documented/ Critical incidents Average Population
	Safety/Emergency	Number of Injuries Number of Injuries Resulting In Hospitalization
	Fire Safety	Fire-related Deficiencies Number of Fires in Facility Each <b>Year</b>
	Sanitation/Hygiene	Number of Cleanliness Deficiencies/All Possible <b>Deficiencies</b> Number of Serious Health Hazards/Possible Hazards
Treatment/Health	Physical Health Status	Number of Hospitalizations Number of Physical Examinations
	Mental Health Status	Number of Suicides Number of Attempted Suicides Percentage of juveniles Asking for Medication to Relieve Mental Distress Percentage of juveniles Asking for Medication to Relieve Mental Distress  Percentage of Juvenile with Symptoms of Mental Distress

# Tulsa County Juvenile Detention Performance Monitoring Procedures Review Forms

<u>Objectives</u>	<u>Performance Measured</u>	<u>Recommended Measures</u>
Humane Treatment/ Programs and Services	Food Service	Juvenile Satisfied with Amount and Preparation of Food Written Menu Plan/ Balanced Diet Meeting FDA Standards
	Counseling	Number of Staff Hours Spent in Counseling/Number of Juveniles Counseled Dissatisfied juvenile/Total Population
	Education	Number of Juvenile Educationally Diagnosed Number of Juveniles Attending Education Program/Total Population
	Recreation	Number of Hours Spent in Physical Recreation/Total Number of Hours Recreation Provided
	Library	Number of Hours Spent Using Library/Total Number of Hours Service Provided
	<b>Religious</b>	Number of Types of Religious Services Available Percentage of Population Using Services
	Citizen/Community Involvement	Number of Volunteers per Ten Juveniles Number of Community Resources Programs
Release/Transfer	Expeditious Release	Release Average Number of Days Before juvenile Adjudicated Average Number of Days After Adjudication to Transfer or Release

# **Administration & Management**

**1-43**

**Daily Detention Log**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-43</i>
Daily Detention Log		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Tulsa County Juvenile Detention Center that the Admissions Counselor prepares the Daily Detention Log and distributes it to specified Juvenile Bureau Personnel documenting current population statistics, admissions and releases.**

**I. Purpose:** An orderly and timely system for recording, maintaining, and using data about juveniles increase the efficiency and effectiveness of program service delivery and the transfer of information to the courts and release authorities. .

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A.** The following information is generated from the Jolts System and documented on the Daily Detention Log form

- a. Name and accumulate days of care
- b. Birthdates
- c. Age
- d. Race
- e. Sex
- f. Referred By
- g. Date and Time of Admission
- h. Offense
- i. Petition File (yes/no)
- j. Legal Status
- k. Assigned Counselor
- l. Room Assignment
- m. Judge Assigned

**B.** Copies of the Daily Detention Log are distributed to the following:

- a. Judges and Bailiffs
- b. Probation and Intake Supervisors
- c. Judicial Clerks

- d. Director of Juvenile Bureau
- e. Facility Administrator of Detention
- f. Detention Bulletin Board
- g. Training Supervisor
- h. Public Defender
- i. DHS
- j. Intensive Supervision Program
- k. Court Clerk
- l. Special Services Secretary
- m. Steno Pool
- n. District Attorney Office
- o. Medical Clinic

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-40)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1E-0-1, 1E-02)

**VI. Enclosures:** None**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:05-02

Distribution: Detention Home Policy and Procedure Manual

# **Administration & Management**

**01-44**

## **Maintaining Juvenile Records**

# Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration &amp; Management</b>	<i>Policy</i>	<i>01-44</i>	
<b>Maintaining Juvenile Records</b>	<i>Current Revision</i>	<i>05/06/02</i>	
<i>Approved by:</i>	<b>Alondo Edwards , Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Tulsa County Juvenile Detention Center that resident detention files, which contain sensitive information, be maintained with strict confidentiality, further that manual records are properly marked and the computerized information system security ensured.**

**I. Purpose:** A juvenile’s constitutional right to privacy can be violated if records are improperly disseminated. The institution establishes the above procedure to limit access to records to persons and public agencies with both a “need to know” and a “right to know” and that can demonstrate that access to such information is necessary for juvenile justice purposes.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home (or whoever it applies too)

### **III. Definitions:**

### **IV. Procedures:**

#### **A. Detention Records:**

1. All folders are appropriately marked
2. All file cabinets are appropriately marked
3. Only authorized personnel are to have access to these files
  - a. Detention Administrators
  - b. Detention Supervisors
  - c. Medical Staff
  - d. Unit Secretaries
  - e. Detention Counselors

#### **B. Computerized records:**

1. Maintained in locked Admission or Unit control room
2. All data protected by secure access codes



3. All personal computers contained behind a locked door

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1E-08)

**VI. Enclosures: None****VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:05-04

Distribution: Detention Home Policy and Procedure Manual

# **Administration & Management**

**01-45**

**Detention Research Guidelines**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-45</i>
Detention Research Guidelines		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be that written policy and procedure govern the practice of research within the Tulsa County Juvenile Detention Home regarding compliance with professional scientific ethics and with state and federal guidelines for the use and dissemination of research findings.**

**I. Purpose:** The Juvenile Detention Home supports and encourages research requests from all sources, e.g., Juvenile Bureau, Universities, Colleges, Law enforcements agencies, federal, State, and local government agencies, and outside professionals, dealing with any relevant topic, such as: referred youth, case investigation, detention, or general statistics. Public safety is always a primary consideration for the Detention Home in approving or rejecting research proposals and any new proposals should be examined for possible conflicts to public safety. All individuals doing collaborative research with Detention will be informed of any Juvenile policy relating to their research, ensuring compliance with state and federal guidelines and they related to confidentiality issues. Juveniles in temporary custody of the Juvenile Detention Home are never to be subjected to any form of medical or pharmaceutical testing for experimental or research purposes.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

1. **Written Request and Appraisal:** The researcher will submit a written request to carry out a specified research design to the Director of the Juvenile Bureau, and the Facility Administrator of Detention. The design must have a description and intended use of the proposed research. The Director and Facility Administrator will evaluate the request and decide whether or not to approve or disapprove the research.
2. **Confidentiality:** If approved, the researcher must sign a written statement agreeing not to disclose information considered confidential and sensitive.
3. **Facility Staff Participation:** Detention staff will assist the researcher to the extent deemed appropriate by the facility's administrators.

4. **Completion of Research:** When the research is finished, the researcher will submit his/her findings to the Facility Administrator and the Director; who will evaluate the research findings and decide whether or not to give their final approval for it to be released.
  
5. **Bureau Support:** When possible the Detention or Bureau will suggest the use of any fiscal resources, either Public or Private, to help support research programs. This will depend on availability.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1F-04, 05, 06, 07, 08)

**VI. Enclosures:**

1. Letter of Agreement
2. Juvenile Interview Consent Form

**VII. Action:**

Facility Administrator and the Bureau Director will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:06-03

Distribution: Detention Home Policy and Procedure Manual

ACCESS FOR THE PURPOSE OF RESEARCH, EVALUATION, STATISTICAL ANALYSIS, INTERVIEWS, PRESENTATIONS, OR PHOTOGRAPHS

Letter of Agreement

Prior to being granted authorization to interview, photograph, or speak to any resident(s) in the temporary custody of the Tulsa County Juvenile Detention Home

\_\_\_\_\_

NAME

representing-----  
INSTITUTION/AGENCY/NEWS MEDIA

acknowledge making a full commitment to comply with all related State laws and regulations, facility safety and security policies, and to insure the confidentiality of all juvenile records. I agree not to reveal the identity of any residents(s) held in detention without the written consent of the Chief Judge of the Tulsa County Juvenile Bureau of the District Court.

\_\_\_\_\_  
Signature of Speaker/Agency/News Media Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorization Signature of Superintendent  
Tulsa County Juvenile Detention Home

\_\_\_\_\_  
Date

# **Administration & Management**

**01-46**

**Detention Home Process of Paper Flow**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-46</i>
Detention Home Process of Paper Flow		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the detention home that a standard system governs the movement of facility information throughout the facility.**

**I. Purpose:** Standardized systems of information movement improve facility efficiency and security of confidential documentation.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines -**

**1. Information to Bureau** – The following documentation shall be sent to Bureau Records and Intake Supervisor for assignment, or Probation Supervisor for assignment:

**a.** Arrest Report, or Detention Home Admission Request, and Detention Intake Form, and Intake Release Form.

**2. Resident's Detention File** – The Following information shall be placed in a resident detention file:

**a.** Admission Card, Property Sheet, Property Receipt, Behavior Observation Sheet, Detention Disciplinary Report, Medical Health Record;(Money Release Form and Property Release Form if required), to Temporary Release Form; Phone Call Log.

**3. Permanent Release Form** – A resident permanent release form shall be sent to the following:

**a.** Resident's Detention File, Resident, Parent or Guardian, and Attorney of Record

**4. Resident Grievance Form** - This information shall be placed in:

**a.** Superintendent's File, and Resident's Personal Property

5. **Incident Report** – Incident reports are a primary source of documentation and shall be kept on file in the following locations:
  - a. Resident's Detention File, Detention Shift Log, Facility Administrator, and Assigned Counselor, Central Filing System.
  
6. **Repair Request Memo** - A repair request form shall be sent to the following:
  - a. Program Manager, Central File
  
7. **Healthful Environment Weekly Inspection Form** - A Healthful Environment Weekly Inspection repair request form shall be sent to the following:
  - a. Program Manager Superintendent's File
  
8. **Medical Information** – All medical information including but not limited to, Resident Health Record, medical notes, records of medical tests, medical referrals, special diets and records of medication administration shall be sent to and or reviewed by:
  - a. Nurse, Physician, resident medical file
  
9. **Special Diet Memo** - Documentation indicated a need for a special diet for religious of health purposes shall be sent to the following:
  - a. Resident's medical file, Kitchen Manager and the Cook's Menu Planning Guide
  
10. **Detention Home Resident File and Juvenile On-Line Tracing System (JOLTS)** - The Resident's Detention File, The Daily Detention Log Report and The Detention Computer System, which is linked to JOLTS, will collectively maintain the following data:
  - (1) Documented legal authority to accept juvenile
  - (2) Information on referral source Initial
  - (3) Intake Information Form
  - (4) Record of court appearance
  - (5) Signed release of information forms
  - (6) A record of cash and valuables held
  - (7) Notations of temporary absences from the facility, if any.
  - (8) Visitors' name and dates of visits, if any;
  - (9) A record of telephone calls, if any;
  - (10) Probation officer or caseworker assigned
  - (11) Progress reports on program involvement
  - (12) Program rules and disciplinary policy signed by Juvenile
  - (13) Grievance and Disciplinary Record, if any;
  - (14) Referrals to other agencies, if any; and
  - (15) Final discharge or transfer report.
  - (16) Court case number (if any) and detention facility admission number.
  - (17) Date and time of admission and release
  - (18) Last known address
  - (19) Legal status (authority for detention)



- (20) Name of attorney, if any;
- (21) Name, title and signature of delivering officer
- (22) Specific charge(s)
- (23) Sex
- (24) Date of Birth
- (25) Place of Birth
- (26) Race or Nationality
- (27) Education and school attended
- (28) Employment, if any;
- (29) Religion
- (30) Health Status
- (31) Medical Consent Forms
- (32) Name, Relationship, address and phone number of parent(s)/ guardians (s) person(s) juvenile resides with at time of admission
- (33) Driver's license number, social security number and Medicaid number, if applicable
- (34) Date of petition
- (35) Court and disposition, if any;
- (36) Space for remarks (to include notation of any open wounds or sores requiring treatment, evidence of disease or body vermin, or tattoos)
- (37) Person recording data
- (38) Inventory of property
- (39) Emergency contact
- (40) Name and Nicknames

#### **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-09)

#### **VI. Enclosures:**

#### **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-01.

Distribution: Detention Home Policy and Procedure Manual

# **Administration & Management**

**01-47**

**Detention and Bureau Records**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-47</i>
Detention and Bureau Records		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy procedure and practice to provide Detention record management, including at a minimum the following areas: the use and content of juvenile records; the right to privacy; secure placement and preservation of records; and schedule for retiring or destroying inactive records.**

**I. Purpose:** An orderly and timely system for recording, maintaining and using data about juveniles increases the efficiency and effectiveness of program and service delivery and the transfer of information to the courts and release authorities.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Important Terms** – defined for a consistent application of the policy.

**IV. Procedures:** Detention records are a vital part of the information system necessary in providing security and safety for all residents in Detention. These records contain data about the resident and family, the resident's medical history, behavior and incident reports, charges and disposition information, admission and release dates; all of which is sensitive in nature and must be utilized and maintained with strict confidentiality and proper management.

**A. Data Collection** - Only relevant and necessary information that will contribute to the accuracy and utility of the juvenile's record should be collected. All data and information in the Detention Home File, Social History File and Legal File is highly confidential and safeguards must be maintained to prevent misuse or improper dissemination's of information contained therein.

**1. Daily Detention Log** - There is a computer print out record (daily detention log) identifying all juveniles admitted to Detention and data in the computer on all juveniles presently being detained. These are maintained in the locked Detention Control Room and Admission Area. This log includes, but is not limited to, the date of admission, total days of stay worker assigned, and the resident room assignment.

**2. Juvenile On-Line Tracking System** - Codes accessing records maintained on the Juvenile On-Line Tracking System (JOLTS) are processed, approved and managed by the Oklahoma Office of Juvenile Affairs (OJA). Access codes must be routinely changed according to policy/procedure established by OJA Management Information Systems and that of Tulsa County MIS. The facility, required through contract with OJA, routinely updates information on juveniles admitted and released to the facility.

3. **Juvenile Detention Resident File** – The resident files contains a record that is available on each resident and includes at a minimum the following:

- Detention Home Health Record
- Detention Reception Sheet
- Detention Home Admission Form
- Authority to detain Juvenile
- Individual Education Plan (if applicable)
- Referrals to other Agencies
- Permanent Release Form
- Disciplinary Reports
- Acknowledgment of Orientation and Juvenile Rights
- Combination Hearing Form
- Individual Resident Telephone Log
- Behavioral Observation

4. **Medical Folder** – The medical file is considered part of the Detention Home Resident File and contains admission document requiring medical review, such as the Detention Home Health Record Form, Medical referrals, and Medial Consent and Release of Information form, which are completed on all residents as a part of the admission process in addition to entries of the responsible physician or other medical staff and documentation of medication given. The resident's active health record is maintained separately from the confidential record.

B. **General Security of Files** – All facility files and records produced, received or created with in the facility pertaining to, or concerning any resident, or a residents family member(s), is considered confidential. The control of this information is mandated by state law and can only be released though a court order or within the confines of 10 O.S. 7307-1.3 which governs the disclosure of confidential records. No files, records, photos or the information contained there in may be reproduced for an unauthorized purpose or released from the facility without the Superintendent's approval.

1. **Authorized Access** - Detention records are maintained in locked Control Rooms and Property Room. All folders are marked "Confidential" and all File cabinets are marked "Confidential" with only authorized personnel have access to these files. Authorized staff may include Detention Administration, Supervisors, Medical Staff, Detention Counselors, Main Control Operations, and Unit Secretaries, Bureau Counselors, Bureau Administration, Court Psychologist, and Assigned Case Worker. Any exceptions to this list must be approved by Detention Facility Administrator, Director, or the Judge.

2. **Computer Security** - Data maintained and stored on computers are protected by secure access codes, which are limited to key personnel. Each access code has certain retrieval and/or deletion capabilities. PC's are located in the Bureau Records Room, Detention Intake Office, Detention Home Control Rooms, Admissions Desk, Medical Clinic, and each administrative office.

3. **Access to Medical Files** - Access to the health record is controlled by the facility Medical Authority and the Detention Facility Administrator. Only authorized medical staff, medical-technicians, and other limited shift supervisors and admissions personnel approved by the responsible physician and the Facility Administrator will have access to the medical records. The Facility Administrator who identifies approved personal maintains a roster. It is periodically and annually updated, or as required by personal changes.

a. Medical records are stored and maintained in the locked, limited access, medical clinic in a secure file cabinet. In active files are stored in a locked, limited access, storage room in secure file cabinets.

4. **Disposition of Records** - A periodic and timely destruction of files and records (expungement) will be implemented to maintain structure and integrity to the record system, and to comply with Oklahoma State Statutes.

C. **Juvenile Bureau Records** -

1. **Order to Seal a Record** - Consistent with Oklahoma State Statute 7307-1.7 the court may order the records of a juvenile alleged to be delinquent to be sealed, when the person has been alleged to be a delinquent and one (1) year has elapsed from the latter of dismissal or closure of the case by the court, or notice to the court by the office of Juvenile Affairs or the Tulsa County Juvenile Bureau, and the juvenile has not been found guilty of or admitted to the commission of a subsequent criminal offense in either a juvenile or adult proceeding, and no juvenile or adult proceeding for a criminal offense is pending.

2. **Order to Unseal a Record** - Consistent with Oklahoma State Statute 7307-1.7 the court may issue an order unsealing sealed juvenile court records, for use for the following purposes:

a. In subsequent cases against the same child pursuant to this title;

b. In an adult criminal proceeding pursuant to Section 7303-4.3 or 7306-1.1 of Oklahoma State Statute.

c. Upon conviction of a criminal offense in a adult proceeding, in connection with the sentencing of such person.

d. If the person is placed in the custody or under the supervision of the Department of Corrections.

e. In accordance with the guidelines adopted pursuant to the Serious and Habitual

Juvenile Offenders Act and Section 620.6 of this title, for maintaining juvenile justice and criminal justice statistical information;

f. For the purpose of a criminal investigation; or

- g. When the court finds that there is a compelling reason and it is in the interest of justice to order the record unsealed; delinquency case or proceeding may petition the court for an order unsealing a juvenile
3. **Request to Unseal a Record** - Any person or agency having a legitimate interest in a court record. If, after a hearing, the court determines that there is any reason and it is necessary for the protection of a legitimate public or private interest to unseal the records, the court shall order the record unsealed.
4. **Disposition of Records** - Any record ordered to be sealed pursuant to this section, if not unsealed within ten (10) years of the order, shall be obliterated or destroyed at the end of the ten-year period.
5. **Order to Expunge** - Upon the entry of an order to expunge any juvenile court record, or, any part thereof, the subject official actions shall be deemed never to have occurred, and the person in interest and all juvenile and criminal justice agencies may properly reply, upon any inquiry in the matter, that no such action ever occurred and that no such record exists with respect to the person.
6. **Social Files** – The Juvenile Bureau shall maintain files and such information that might be pertinent to the court given the following provision:
- Maintained in a supervised record room
  - Files must be authorized for release by the Bureau Records Manager or proper delegate
  - Only authorized personal of the Juvenile Bureau are allowed in the records room or adjacent steno room
  - Files checked out to authorized Bureau staff must always-be maintained in a secure and confidential manner
  - The records Manager conducts timely re-call of all social files to conduct an accounting of files
7. **Legal Files** – The Court shall maintain file and such information that might be pertinent to the court, given the following provisions:
- Maintained in a secure area
  - Files are supervised by a Legal File Clerk
8. **Confidentiality** - The information contained in legal files and social files is highly confidential. These files should not be released to attorneys, their clients, or other unauthorized persons. If good cause exists, authorized personnel of the Juvenile Bureau may permit an attorney to inspect the relevant portion of the legal file in the presence of the authorized person. Before this is done, authorized person should inspect the file to ensure that it does not contain any information or documents that the attorney would not be entitled to view. The following personnel are authorized to permit inspection of the legal files: Chief Juvenile Judge, Special Judge, Referee, Director, Intake Supervisor, Probation Supervisor, Child Protective Intake Counselor, and Court Clerk: Any exceptions to the above must be approved by the Chief Juvenile Judge or Director.
9. **Security** - All records maintained in the computer system are protected through the

integrity of confidential "access codes", given only to authorized personnel. Personal Computers workstation codes are authorized only by the Facility Administrator” and Bureau Director; which are processed, approved and managed by the Tulsa County Management Information Systems (MIS).

**10. Control** - MIS also controls and monitors the integrity of Internet Access and use of the records system. Codes accessing records maintained on the Juvenile On-Line Tracking System (JOLTS) are processed, approved and managed by the Oklahoma Office of Juvenile Affairs (OJA). Access codes must be routinely changed according to policy/procedure established by OJA Management Information Systems and that of Tulsa County MIS.

**11. Breach of Confidentiality** - Any confirmed unauthorized disclosure or dissemination of confidential information pertaining to any of the above mentioned categories is subject to disciplinary action up to and including discharge from employment as well as civil or criminal actions.

## **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures:** None.

## **VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-03.

Distribution: Detention Home Policy and Procedure Manual

# **Administration & Management**

**01-48**

**Main Control Room Security**



## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Administration &amp; Management</b>	<i>Policy</i>	<i>01-48</i>
<b>Main Control Room Security</b>	<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i> Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the Detention Home that the Main Control Room is designated an area that is available to authorized personnel only. All other personnel must be accompanied by authorized personnel.**

**I. Purpose:** The purpose of this directive is to ensure the security and confidentiality of the case files and computer files.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:** None.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-04.

Distribution: Detention Home Policy and Procedure Manual

# **Administrative & Management**

**01-49**

**Long Distance Telephone Log**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-49</i>
Long Distance Telephone Log		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy procedure and practice of the Detention Home to record all long distance telephone business calls.**

**I. Purpose:** Appropriate physical controls require cross checking telephone calls charged to the Detention Home. This log is maintained.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:** Staff who makes long distance telephone calls shall record the phone call on a long distance phone call log.

**A. Completing the Log** – All long distance telephone calls made by detention staff must be made on a facility phone line set up to make long distance calls. Each category on the log must be filled in.

**1. Staff Responsibility** – Staff tasked with making long distance telephone calls for residents or staff, who in the course of their duties, are required to make long distance telephone calls shall ensure the following information is placed on the long distance telephone log:

- Date
- Call made by
- Person called or Agency
- City and State
- Area Code
- Telephone number
- Time
- To whom the call was charged

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-06

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**01-50**

**Daily Resident Observation Sheets**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-50</i>
Daily Resident Observation Sheets		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the Policy procedure and practice of the Juvenile Detention Home to ensure that all staff understand and properly apply standard techniques and process for making regular entries in a detention resident file.**

**I. Purpose:** The daily observation sheet is an essential part of the detention program. It is not only a record of behavior and performance, but is a form for transmitting documentation of behavior from one shift to the next. It should be stressed that any noteworthy behavior observed should be recorded in detail whether exceptionally positive or exceptionally negative.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

**A. General Guidelines** - In writing daily entries staff are expected to be objective. Staff shall include all relevant and any situation that are unusual. Factual and objective recording of the actual behavior is the most meaningful information transmitted to those involved with the juvenile.

- 1. Regularity of Entries** – Each shift shall document the residents’ behavior or any notable observations that occurred with the resident in his/her file. These observations should be completed toward the end of the shift and definitely prior to the beginning of the next shift; unless a necessary and timely re-entry is required. The entry should always be entered relevant to shift time (i.e., 7-3 shift, 3-11 shift, 11-7 shift) also any entry staff make should always be initialed. 11 to 7 shift entries will be the beginning of each new day.
- 2. Reviewing Entries** - It is also important for each on-coming staff member on the new shift to read these reports and make themselves aware of the juvenile's behavior on that particular day.
- 3. Inter-Departmental and Non-Bureau Staff Access** - These observation sheets are read daily by the Intake and Probation staff and on occasion these reports are subpoenaed for court. Office of Juvenile Affairs (OJA) and Department of Human Services (DHS) staff will have access to the files of residents in their charge. Other professionals working with the residents may be granted access by the Facility Administrator. Attorneys or their

representatives must have the approval of the Facility Administrator before accessing any detention files.

- B. Completing Daily Observation Sheets** - Any pertinent information you gain from the juvenile concerning his case should be recorded on this sheet. Refrain from excessive verbalization. Make as few inferences and assumptions as possible, and do not label the child (such as homosexual, killer, rapist, etc.) in these reports. Describe the behavior the resident has displayed. The following suggestions will help staff to document behavior in reports. The following are examples of appropriate information to include.

- 1. Examples of Terms to include** – While it is expected that each staff member has a particular perspective, the following will aid staff in identifying and documenting appropriate information supplementing your own methods used in written communication specifically designed to convey your observations clearly to the reader limiting his/her task of interpreting your meaning. Staff should use specific and individual examples when describing a resident's behavior.

- a. Resident John Doe seemed (tense, or angry, or uptight, or pensive) because of his/her behavior in the (where) with (whom), during (what activity). The behavior seemed to result from (what cause), or was a result of (cause).
- b. Resident shows little if any commitment (to program guidelines, or to a particular program activity that you list or note).
- c. Resident was making unacceptable non-verbal gestures directed at peers (or staff).
- d. Resident was presenting unacceptable behavior in dining-room (being rude or bad manners, or testing limits, or throwing food, etc.)
- e. Resident conveys a "could care less" attitude when confronted by staff regarding his negative influence on peer members; acting immature (or silly), or by fostering (or supporting) others acting out (or behavior).
- f. Resident took no ownership for his/her (acting out behavior, or the incident, or the conflict).
- g. Resident was aware of the consequences of such limit testing behavior and was room confined shortly after a discussion with this staff member regarding the behavior described above (or within this report).

- 2. Information to Communicate in Daily Observation Notes** – Staff should consider the following issues when making shift entries regarding residents' daily activities.

- a. How does child relate to authority figures?
- b. How does he respond to structure and/or being told no?
- c. How does he/she relate to other kids?

- d. How competitive?
  - e. How does he/she handle defeat in gym?
  - f. How does the resident handle confrontation?
  - g. Who is he friends or enemies with?
  - h. How does he/she seek attention?
  - i. How involved is the resident in groups (day or evening)?
  - j. Significant observations or happenings during visitation with parents.
  - k. Any scheming or talk of escape when counselor takes for physical or staffing.
  - l. Any problems in school during the day?
3. **Report Writing of Counseling Effect** – When it is necessary to counsel one or more residents about minor rule violations it would assist any staff reviewing the file if each entry would record that who talked with the juvenile and what specifically was suggested to him/her informed them of, told them to do (or not to do), reminded them of, etc. Staff should document their efforts to redirect residents and positive interactions that result from conferences with residents.
4. **Disciplinary Actions** - If a resident behavior requires disciplinary action staff should document the action and what counseling efforts were made to redirect the resident's behavior. Staff shall document that the resident had the reason for the action explained to him/her and that the resident had the opportunity to explain his/her actions.

## **V. Authority/References:**

### Applicable Federal Law or Regulations

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

## **VI. Enclosures:**

- 1. Daily Observation Sheet Form

## **VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.



This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-07.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**BEHAVIOR OBSERVATION NOTES**

<b>JUVENILE'S NAME</b>	<b>DATE</b>
------------------------	-------------

<b>VISITED BY ASSIGNED COUNSELOR</b> <b>(COUNSELOR'S/CASE WORKER'S SIGNATURE)</b>
--

<b>PHONE CALL (YES) <input type="checkbox"/></b>	<b>SUPERVISED BY</b> <b>(COUNSELOR'S/CASE WORKER'S INITIALS)</b>
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<b>VISITOR'S NAME</b>	<b>RELATION</b>

**DAILY SHIFT REPORTS**

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# **Administration & Management**

**01-51**

**Daily Shift Log**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-51</i>
Daily Shift Log		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy procedure and practice of the detention home that detention staff maintain a daily shift log that record routine information, emergency situations and/or unusual events.**

**I. Purpose:** Adequate supervision of juveniles requires a formal written reporting system. Each shift shall maintain a written report, on the standard form, as a record of pertinent information.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:** Each unit and main control will maintain a permanent Daily Shift Log that highlights routine and emergency situations that happen during each shift.

**A. General Guidelines** - This log should record the following information: Date and shift; number of residents at shift beginning and shift end; key assignments to staff; admissions and releases; emergency situations; special medical or behavioral problems of residents; summary of shift activities and programs; equipment malfunctions; security systems malfunctions; and unusual telephone calls or incidents, residents on room confinement, key count, and completion of shift checklist.

**1. Responsibility** - The Daily Shift Log will be written by the Unit-Shift Supervisor on duty; or in their absence a Detention Counselor. Shift logs are recorded on Shifts 11:00 P.M. to 7:00 A.M., 7:00 A.M. to 3:00 P.M., and 3:00 P.M. to 11:00 P.M. Each unit and Main Control will maintain a log book on site.

**2. Review of Shift Logs** – Shift logs are a primary means of communication between shifts and as such, Unit Shift Supervisors and Detention Counselors are required to read the logs each day before starting the shift. All Unit Shift Supervisors and Detention Counselors are also required to read the Log pertaining to information recorded since he/she last worked. The shift log may be reviewed on demand by the Facility Administrator, Program Manager or Accreditation Manager.

**3. Disposition and Storage** – At the end of each month, the Shift logs will be collected and turned into administrative staff for review and processing. After processing they will be maintained in the detention home secure storage for 3 years.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-09)

**VI. Enclosures:**

1. Daily Shift Log Form 3749 FRONT-BACK

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-11.

Distribution: Detention Home Policy and Procedure Manual

# DETENTION DAILY SHIFT LOG

DATE \_\_\_\_\_ DAY \_\_\_\_\_ SHIFT \_\_\_\_\_ UNIT \_\_\_\_\_

BEGINNING POPULATION \_\_\_\_\_ ENDING POPULATION \_\_\_\_\_

SHIFT PERSONNEL / KEY NO.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SHIFT CHECK LIST

(X)

Review staff schedule / arrivals \_\_\_\_\_  
Security count of keys and pencils \_\_\_\_\_  
Security count of kitchen utensils \_\_\_\_\_  
Security search of rooms \_\_\_\_\_  
Cash drawer audit \_\_\_\_\_  
Review room charts / pop. count \_\_\_\_\_  
Departing shift briefing \_\_\_\_\_  
Review shift logs / incident reports \_\_\_\_\_  
Review medical files and medication \_\_\_\_\_  
Review resident's behavior reports \_\_\_\_\_  
Distribution of resident mail \_\_\_\_\_  
On-coming shift briefing \_\_\_\_\_  
List any deficiency in above \_\_\_\_\_

RESIDENTS ON ROOM CONFINEMENT / RM.

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RELEASES \_\_\_\_\_

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SEE SHIFT SUMMARY ON BACK PAGE

**SHIFT SUMMARY (Including programs, activities, incidents, or any emergency)**

**DATE \_\_\_\_\_ DAY \_\_\_\_\_ SHIFT \_\_\_\_\_ UNIT \_\_\_\_\_**

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**SHIFT LOG SUBMITTED BY \_\_\_\_\_**

# **Administration & Management**

**01-52**

**Request for Information**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-52</i>
Request for Information		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the Detention Home to comply with state and federal law regarding the request of information. The facility uses a standard Request for Information Form which meets all required laws and regulations.**

**I. Purpose:** The Confidentiality and protection of information pertaining to juveniles are required by State Law and Office of Juvenile Affairs rules for juvenile detention facilities. As provided for by 10 O.S. 7301-1.3, judicial, correctional and social service agency authorities involved with a resident's case have access to juvenile information without consent forms being required.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** - The Request of Information form is used in all cases where information is requested from any type of community agency, including a court from another jurisdiction.

**1. Request for Information Form 751** - The form may be typed or hand written. The form is initiated by the assigned Bureau Counselor or designated agency staff. The form includes the following:

- a. Date mailed (by our agency).
- b. Name of Person, Agency or organization making disclosure.
- c. Name of Person, Agency, or Organization to which disclosure is to be made.
- d. Name of Juvenile and date of birth.
- e. Purpose or need for disclosure.
- f. Extent or nature of information to be disclosed.
- g. Signature of Juvenile and date signed.
- h. Signature of staff witness to Juvenile Signature.

- i. Printed name of staff witness.
- j. Signature of Consenting Parent or guardian and date of signature.

2. **Responsible Staff** - The agency staff person mailing the form is responsible to prepare one copy for the Detention File. The copy should be placed in the detention mail box at the Bureau receptionist desk. The Detention support staff will transfer this copy to the Detention File.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1E-05)

**VI. Enclosures:** None

- 1. Release of Information Form 751

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:07-12.

Distribution: Detention Home Policy and Procedure Manual

# Request For Information



**DISTRICT COURT OF THE STATE OF OKLAHOMA**  
FOURTEENTH JUDICIAL DISTRICT  
**DORIS L. FRANSEIN**  
Chief Judge  
Juvenile Division

Date: \_\_\_\_\_

To \_\_\_\_\_  
Name of agency making disclosure and address

\_\_\_\_\_ JBDC, 315 S. Gilcrease Museum Rd., Tulsa, OK 74127, (918) 596-5971.  
Person & Agency Requesting Disclosure

Name of Child: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

In order for the Juvenile Bureau of the District Court (JBDC) to provide services as required by Title 10 70302-3.1,

I, \_\_\_\_\_ give permission for \_\_\_\_\_  
(Parent, Guardian/Legal Custodian) (Agency or Service Provider)

to release any Medical, Psychological or other information regarding the above stated individual to the Juvenile Bureau of the District Court (JBDC) with the understanding that such material is to be held confidential by all parties.

**Please check all that apply:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Psychotropic Medication | <input type="checkbox"/> Educational Records/Assessments  | <input type="checkbox"/> Mental Health Records |
| <input type="checkbox"/> Case History            | <input type="checkbox"/> Immunizations                    | <input type="checkbox"/> Psychosocial History  |
| <input type="checkbox"/> Discharge Summary       | <input type="checkbox"/> Psychological/Neuropsychological | <input type="checkbox"/> Other: _____          |
| <input type="checkbox"/> Medical History         | <input type="checkbox"/> Drug/Alcohol Abuse Information   | _____  |
|  | <input type="checkbox"/> Substance Abuse Treatment        | _____  |

The information I/we authorized for release may include what may be considered information about a communicable or venereal disease which may include, but is not limited to, diseases such as hepatitis, syphilis, gonorrhea, and the human immune-deficiency virus, also known as Acquired Immune Deficiency Syndrome (AIDS). I/we understand that the information in my records concerning a communicable or venereal disease is made confidential by law and cannot be released without special permission except in limited circumstances, including release to the persons who have had risk exposures, release pursuant to an order of the court of the Department of Health, release among health care providers or release for statistical or epidemiological purposes. When such information is released, it cannot contain identifying information unless release of the identifying information is authorized by me, by an order of the court or the Department of Health by law.

We understand that I/we can revoke permission to release information. If I/we want to do this, it must be in writing, but I/we cannot revoke permission for information that has already been released. Unless I/we revoke permission sooner, this authorization will expire upon closure of the case with JBDC.

_____ Juvenile's Signature	_____ Print Name	_____ Date
_____ Parent/Guardian/Legal Custodian's Signature	_____ Print Name	_____ Date
_____ Witness: JBDC Worker	_____ Print Name	_____ Date



Juvenile Bureau of the District Court of Tulsa County, Oklahoma  
315 South Gilcrease Museum Rd • Tulsa, Oklahoma 74127-8403 • (918) 596-5971

# **Administration & Management**

**01-53**

**Orientation**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-53</i>
Orientation		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to provide a general orientation to admitted residences during the reception period.**

**I. Purpose:** For the reception period to Detention to includes interviews, testing, and other admissions-related activities, including distribution of information about programs, services, rules, and regulations.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

- A. Greet Juveniles to Detention** – At this initial screening the admissions counselor checks/gauges the demeanor of a juvenile and their fitness to immediate join the detention program.
- B. Identifying photo** – A photo snapshot is taken of the Juvenile to be placed in their detention file for the purpose of identification.
- C. Provide a copy of Resident Orientation** – The detention home orientation form gives an in depth overview of the rules and expectations of the detention home program. New admissions are requested to read the form in the presence of admission staff and if unable to do so, admission staff is to read it to them. The form 2481 is available in English and Spanish translations.
- D. Provide a copy of Juvenile Rights** – New admissions to detention are given form 5146 to make them aware of the treatment they can expect while preserving their individual rights while in detention.
- E. Initial Admission Phone Call** – A telephone call is made to the parent or legal guardian notifying them of the admission of the juvenile and the hearing date the Juvenile is allowed to speak with the parental authority pending their demeanor, and this information is recorded on form 5012.
- F. Handling of personal effects** - At the time admission to detention all personal items of the juvenile are to be recorded on form 760.

G. **Blue card** – Demographic information is compiled and recorded on form 747.

H. **Tulsa County Juvenile Detention Home Resident Guide to Preventing Sexual Misconduct** – The detention home PREA booklet is given to each resident. New admissions are requested to read to the form in the presence of admission staff, if unable to do so, admissions staff is to read it to them. Each new admit will sign Form OJAPREA01 indication of the PREA Resident Guide was received and understood.

## V. **Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5A-14, 15, 16)

## VI. **Enclosures:**

1. Form 2481
2. Form 5146
3. Form 5012
4. Form 760
5. PREA Resident Guide Handbook
6. Form OJA PREA01

## VII. **Action:**

Facility Supervisors, Program Manager and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:15-04

Distribution: Detention Home Policy and Procedure Manual

### DETENTION RECEPTION SHEET

JUVENILE'S NAME	(last)	(first)	(middle)	AGE
PARENT/GUARDIAN NAME				PARENT/GUARDIAN PHONE NUMBER
BROUGHT TO FACILITY BY (print) NAME		'AGENCY		SIGNATURE

### INVENTORY OF PROPERTY

PERSONAL CLOTHING (Category, Color & Description)	VALUABLES (List & Describe Each Item)
	MONEY
	FOREIGN CURRENCY (DESCRIBE)

### DETENTION CLOTHING

STANDARD ISSUE	YES	NO	EXCEPTIONS
STANDARD ISSUE RETURNED	YES	NO	EXCEPTIONS

### ROOM ASSIGNMENT

UNIT	ROOMNUMBER
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### RESTITUTION

LIST OF DAMAGE TO DETENTION PROPERTY OR PHYSICAL PLANT DURING STAY (if any).

ALL PERSONAL PROPERTY LISTED ABOVE HAS TO BE SECURED BY THE FACILITY STAFF	ALL PERSONAL PROPERTY LISTED ABOVE HAS BEEN RETURNED TO ME.
SIGN IN (Juvenile)	SIGN OUT (Juvenile)
STAFF	STAFF
DATE   TIME	DATE   TIME

# Individual Resident Telephone Log

Resident's Name: \_\_\_\_\_ Admit Date: \_\_\_\_\_  
 \_\_\_\_\_ Release Date: \_\_\_\_\_

Admission Telephone Calls(s)										
Date	Time Began	Ext./Number Called From	Number Called	Person Called	Relationship	Accept/Decline Not Complete	Time Ended	Rcl. Int.	Ghen/Supeniscd B) (Print name)	Starr Inc.
	AM						AM			
	PM						PM			
	AM						AM			
	PM						PM			

Resident Use & Access to Telephone Call(s)										
Date	Time Began	Ext./Number Called From	Number Called	Person Called	Relationship	Accept/Decline Not Complete	Time Ended	Rc. Int.	(;iven/Supeniscd B) (Print Name)	Stall' Inc.
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	PM						PM			
	AM						AM			
	PM						PM			
	AM						AM			
	PM						PM			
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	AM						AM			
	PM						PM			



Date	Time Began	Ext./Number Called From	Number CaUed	Person Called	Relationship	Accett/Decline Not complete	Time Ended	Res. Int.	Given/Supervised By (Prmt Name)	Staff inc.
	AM						AM			
	PM						PM			
	AM						AM			
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**NOTES & ADDITIONAL COMMENTS**

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# Tulsa County Juvenile Detention Home

## ACKNOWLEDGEMENT OF ORIENTATION AND JUVENILE RIGHTS

The Detention Home is committed to preserving the rights of juveniles placed in custody. Detention Home staff shall not diminish or deny a detained juvenile his/her rights for disciplinary reasons. The rights of a juvenile in detention are subject only to the limitations necessary to maintain order and security in the facility. Each juvenile has the rights listed below.

- A resident shall have freedom from discrimination because of race, national origin, color, creed, sex or physical handicap.
- Male and female juveniles shall have equal access to all programs and services offered in the Detention Home.
- Each resident has the right to file a written grievance in accordance with the facility's standard grievance procedure. This process allows for (2) levels of appeal to ensure proper review of all resident grievances.
- Juveniles in custody have the right to participate in regular religious programs and counseling on a voluntary basis.
- Juveniles in custody have the right to on-site access to recreational opportunities, including daily outdoor exercise, weather permitting. Accordingly the facility ensures that adequate recreational equipment is available to all residents.
- Residents have the right to access to the media, courts, their attorneys and their authorized representatives limited only by the facility's need to maintain order and security. Accordingly, a standard procedure and process is used to facilitate resident access. This access shall include, but is not limited to personal visits, uncensored letters, and telephone conversations.
- Residents have the right to feedback, verbal redirection and discipline by authorized staff. The resident shall be supervised by staff or training volunteers.
- Staff shall not discipline a resident by using corporal punishment, humiliation, mental abuse, or punitive interference with the daily functions of living such as eating or sleeping.
- Residents have the right to determine their own hair length and to keep facial hair if desired, except in such cases where such restrictions are necessary for reasons of health and safety.
- Residents have a right to educational instruction as required by law. The facility contracts with Tulsa Public Schools to provide such education according to the guidelines established by the Board of Education.
- Residents have a right to visitation as regulated by the facility's written policy.

I have been given an orientation and read the rules of detention, or have had them read to me. I understand what is expected of me during my stay in detention. If I have any questions, I know to ask a staff member.

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date/Time

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date/Time

## DETENTION HOME RESIDENT ORIENTATION

While you are in detention, there are some rules that you will need to be aware of. This orientation is for your benefit so that you will understand what is expected of you, and to prevent any possible misunderstanding between you and staff.

1. While in detention you will wear a combination of detention clothes with your own jeans and shoes if they meet facility guidelines. These will be worn to Court, doctor, or any staffing that you might have at a possible placement. Your other personal clothing is kept locked in a storage room, separate from the other clothing, until you are released permanently from the Detention Home.
2. When shown your room you will learn the operation of the toilet, washing facilities, how to drink from the fountain and how to use the intercom (room number, name, then what you need).
3. You will be held responsible for damages you cause to your room or any property belonging to the detention home. You will be charged for this when you leave detention if damages occur.
4. During the week you will be awakened between 7:00a.m. and 7:15a.m., and will eat breakfast at 8:00a.m. Afterwards the rooms and halls are cleaned until school begins at 9:00 a.m. School is a required part of our program.
 

9:00 a.m. - School	1:30 p.m. - School
10:25 a.m. - Break	2:40 p.m. - Break
10:30 a.m. - School	2:45 p.m. - School
11:50 a.m. - Break	3:30p.m.-Afternoon/EveningPrograms
12:00 p.m. - 1:30 p.m. - Lunch and P.E.	9:00 p.m. - Bedtime (10:00 p.m. Friday-Saturday)
5. Visitation hours for parents or legal guardian are:
 

	Wednesday, 6:00p.m. -7:00p.m.
	Saturday & Sunday, 1:30 p.m. - 2:30p.m.

Visiting hours with court counselor or social worker are:
 

	Monday-Friday, 8:30 a.m. - 5:00 p.m.
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6. Except for those on "special diets" recommended by a physician, nurse, or dictated by religious belief, a single menu will be served each day. If you do not want a particular food, tell the cook and she will not give it to you. You are expected to maintain a responsible attitude during the meals. (Explain responsible attitude.)
7. You are expected to participate in all group activities designated by staff members, unless excused by staff. This includes school, sports, art, group discussions, and cleanup. Refusal to participate may result in lost privileges or temporary restriction. A non-denominational religious service on Sunday morning is voluntary.
8. You are not to be standing by, or knocking on, the Control Room windows or doors. The Control Room is the glassed-in room in the center of detention. If you need something, it can be discussed with a staff member in the dayroom or you should wait until the person you need to speak with comes into the dayroom.
9. All persons are expected to help in daily cleaning of rooms and detention activity areas. Counselors will advise you of the time of these tasks and provide instructions for the duties.
10. You may write letters after school hours. Letters will be mailed Monday through Friday, and must be submitted by 10:00 a.m. to be mailed. Letters may also be given to your visitors to be mailed. Detention will provide only two stamps per week for your letters.
11. Feet do not belong on the furniture, which includes chairs, tables or anything other than the floor. No lounging on the couches or sitting on the bookcases.
12. No discussion of breakout. This is a matter of prime importance and discussion of breakout will not be tolerated. Room confinement could result if you discuss breakout.
13. There will be no discussion of gang set, throwing gang signs, or any gang-related talk. These actions will not be tolerated and could result in room confinement.
14. Name calling, nicknaming, and vulgar language will not be tolerated in detention. Many times something that starts off as kidding can end up in a serious misunderstanding or conflict.
15. No physical contact with others in detention. This includes hand holding, trading punches, fighting, horseplay or anything else which requires physical contact.
16. You are not to write or exchange notes with another juvenile in Detention.
17. While you are in detention, there will be no discussion of drugs or sexual experiences. Your case, or present offense, is not to be discussed with others while you are in the detention home. This could hinder your attorney in your defense.
18. The television is to be operated by staff members only. Staff will determine programming. The TV is located in the dayroom for approved viewing.

19. When you have been out of the detention home visiting with counselors, parents, or at court, your clothes will be thoroughly searched when you return. Your room will be routinely searched daily for contraband, or items you are not authorized to have.
20. There is no smoking in the detention home or in the detention home lobby which includes the visitation periods.
21. While you are here, the staff will write behavior observation notes describing your attitude and behavior during each day. They write down the good things as well as the not-so-good things that you do. These are read by counselors making recommendations about you to the court.
22. You can make two (2) 3-minute admission phone calls to parents, or guardian, or attorney under the supervision of an assigned court counselor or admitting counselor. You can make two (2) 3-minute calls each week thereafter. These calls will be supervised by your assigned court counselor or D.H.S. worker. The procedure is posted in the dayroom.
23. There are no restrictions on the length or style of your hair, including facial hair. Haircuts are available if you feel you need one. There is a written procedure on how to get haircuts posted in the dayroom.
24. There is a formal grievance procedure available to you upon request. Consult a counselor or unit-shift supervisor if you have a grievance. A grievance is a complaint you wish to put in writing about the program or the way you are treated.

### MEDICAL SERVICES

Medical services are available to all residences in detention, both general and emergency. A nurse will be available at the Detention Clinic for "Sick CaD" during the morning, Monday through Friday. If necessary you will be referred to be examined by the Doctor Monday through Friday. Procedures provide for emergency medical services at a general hospital, if necessary. Your parent or guardian will be advised of all hospital emergency treatment.

To get medical services, tell a Detention Counselor or a Unit-Shift Supervisor of your medical complaint. He/she will determine if you need to be given treatment with general medication covered under the Doctor's Standing Medical Orders and refer you to the nurse for follow-up; or see the nurse as quickly as possible; or refer you directly to a hospital and physician as the injury or complaint warrants.

If the nurse refers you to be seen by the physician or a dentist, your assigned counselor will arrange for transportation to and from the medical treatment.

### RESIDENT DISCIPLINE

The objective of disciplinary action is to establish certain resident limitations and responsibilities within the program. Resident disciplinary action and restriction shall be initiated in such a way to create a learning experience, and shall be directly related to the severity of the rule broken. Disciplinary action will be taken only at such time and in such degree as necessary to regulate a resident's behavior within acceptable limits.

The type of disciplinary action taken may be influenced by:

The specific rule violation.

The attitude and behavior that you display when staff talk with you about the rule violation.

Your cooperation in staff attempt; to resolve the problem.

A rule violation may be "informally resolved" or may be charged as a Major Rule Violation. Specific Rule Violations and examples of Disciplinary Action are posted in the resident dayroom. You will have a Disciplinary Hearing Review of any disciplinary action within 7 days, if you have been confined to your room or have lost privileges or activities extending beyond 24 hours. This Disciplinary Hearing will be reviewed in detention by Detention Staff and Supervisors, and should not be confused with a "Judicial Court Hearing."

### FORMS OF DISCIPLINE

1. Verbal Intervention — Counseling by staff.
2. Dayroom Restriction — "Cooling off" period, 15 minutes to 60 minutes.
3. Activity Restriction — Temporary Joss of one or more program activity privileges.
4. "Time Out" Room Restriction — 15 minutes to 60 minutes.
5. Extended Room Confinement — Room confinement for more than 1 hour, up to 24 hours or longer.
6. Formal Charges Filed for Law Violations -The Superintendent will notify law enforcement and request charges be filed in Juvenile Court.

This orientation is designed to assist you during your stay in detention, and to minimize problems for you. If there is anything you do not understand about this orientation, you should ask for it to be explained to you now. You will sign your name to an Orientation Form to acknowledge your receipt of this detention orientation.

# **Administration & Management**

**01-54**

**Detention Volunteer Program**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>01-54</i>
Detention Volunteer Program		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure, and practice of the Tulsa County Juvenile Detention Home to allow citizen involvement in the form of volunteers, to enhance and expand the services and programs offered to the residents, which will allow increased personal contacts with the broader community, and to increase public awareness of juvenile services within detention.**

**I. Purpose:** A citizen involvement and volunteer service program can generate a wide variety of services for juveniles during confinement and after release – for example, information on and referrals to release programs and recreational and cultural activities in the community. Confidentiality of records and or other privileged information is critical to facility security. Within this policy the facility has procedures specifying volunteers respect all privacy issues of the facility and residents.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

- A. Recruitment, Screening, and Selection -** Recruitment, screening, and selection of volunteers shall include a diverse cross-section of all cultural and socioeconomic segment of the community and is a staff responsibility under the supervision of the facility administrator or his/her designee.
- B. Application -** Prospective volunteers shall complete an application for volunteer service. The facility administrator shall then interview each applicant to determine whether the prospect talent can be used. A check of criminal records and for a history of child abuse shall be conducted for each applicant. Falsification of any information will result in denied access to the facility.
- C. Training and Orientation -** Prior to assignments, each volunteer shall complete orientation to the nature of his/her assignment. Approved citizen volunteers shall be briefed by the facility administrator on all rules and procedures important to their effective functioning.
- 1.** Juveniles shall receive orientation designed to help them understand the role of volunteers, the limit of volunteers authority, and the mutual responsibilities of the juvenile and volunteer before a working relationship is initiated.

2. All volunteers are expected to comply with facility rules and policies and agree to them in writing. The security of the facility and the safety of the juveniles, the public, and facility staff is foremost in the duties of all detention staff and volunteers.

**D. Assignments and Duties** - Volunteers shall be placed in assignments based on the needs of the facility and their interests and capabilities. A wide variety of services can be provided to benefit the facility as well as the juveniles. Volunteers shall provide professional services only when certified to license to do so.

**E. Volunteer Code of Ethics** -

Volunteers are required to do the following:

- Keep confidential matters confidential
- Interpret volunteer to mean working without compensation in money but according to the same standard as permanent staff
- Maintain an attitude of open-mindedness and a willingness to be trained
- Complement staff efforts and assist in developing good teamwork
- Maintain a professional attitude toward volunteer work
- Accept obligation to assist the facility and the juveniles
- Accept differences in people in terms of cultural of economic background, race, religion, and values

**F. Volunteer Identification and Control** -

1. Volunteer identification shall be provided to all volunteers on a daily basis, and should be kept on the person of the volunteer at all times while in the facility.
2. Any individual may be asked to submit to a search when deemed necessary to the security of the facility. Anyone discovered in possession of contraband shall be detained. Supervisory staff shall be notified, as well as the local law enforcement authorities.
3. The facility administration has both the authority and responsibility to deny facility access to any person whose presence is believed to jeopardize the order, security, or safety of the facility. The staff member responsible for taking such action shall submit a written report of circumstances to the facility administrator. The facility administrator shall affirm or rescind the action and determine the condition of reinstatement.

**G. Supervision and Evaluation of Volunteers** - The facility Program Manager shall coordinate and supervise the volunteer program. Supervisors shall work with this administrator to provide adequate control and coordination of volunteer activities, as well as assist in evaluation the programs in which they are involved.

**H. Termination of Volunteers** - The Program Manager may curtail, postpone, or discontinue the services of a volunteer or volunteer organization when substantial reasons for doing so exist. Any of the following may warrant such action:

- Breach of confidentiality
- Unlawful conduct or breach of facility rules and regulations
- Physical or emotional illness
- Inability to cooperate with staff
- Activities that threaten the order or security of the facility or the safety of the volunteer
- Erratic or unreliable attendance
- Unsatisfactory service

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1G-01)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1G-02, 03, 04, 05, 06, 07, 08)

**VI. Enclosures:**

1. Background Check
2. Sign-in Sheet
3. Orientation Check Sheet
4. Policy Acknowledgement

**VII. Action:**

Facility Supervisors, Program Manager and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure I:20-01

Distribution: Detention Home Policy and Procedure Manual





**DISTRICT COURT OF THE STATE OF OKLAHOMA**  
FOURTEENTH JUDICIAL DISTRICT  
**DORIS L. FRANSEIN**  
Chief Judge  
Juvenile Division

**APPLICANT RELEASE OF INFORMATION**

**POSITION APPLIED FOR:** \_\_\_\_\_

**FULL LEGAL NAME: (Print)**

\_\_\_\_\_  
**First**                      **Middle**                      **Last**                      **(Suffix)**

**ANY OTHER NAME USED: (Maiden)**

\_\_\_\_\_  
**First**                      **Middle**                      **Last**                      **(Suffix)**

**D.O.B.** \_\_\_\_\_ **RACE** \_\_\_\_\_ **SEX** \_\_\_\_\_

**SOC. SEC. NO.** \_\_\_\_\_

**DRIVER LICENSE NO.** \_\_\_\_\_ **STATE** \_\_\_\_\_

**This will authorize** \_\_\_\_\_  
**Person/Title**

**of the Juvenile Bureau of the District Court, 315 S. Gilcrease Museum Rd., Tulsa Oklahoma 74127, to conduct a criminal record check and background investigation for the sole purpose of inquiries regarding my qualification for employment with the Juvenile Bureau.**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**



# Memorandum

To: \_\_\_\_\_

From: Brent McQuarters, Accreditation Manager

Subject: Orientation/On-the-Job Training Documents

Enclosed in this binder is your General Orientation and Position Orientation / On-the-Job Training paperwork. You are responsible for the condition, security, and storage of this binder and its contents. This Binder and all enclosed documentation must be turned-in at the Training Period Ending Conference. Any incomplete documentation shall be completed on or before the conference date.

Do not remove the Orientation Binder and Contents from the Detention Home. When leaving work bring it to the Main Control Operator, who will place it in a holding place for you until you arrive back to work.

This binder includes the following:

1. General Orientation and Position Orientation /On-the-Job Training Checklist
2. Sexual Harassment Memorandum
3. Policy and Procedure Memorandum
4. Use of Force Policy
5. Juvenile Contact Directive
6. Reporting Abuse and Neglect Memorandum
7. Facility Confidentiality Memo
8. Emergency Call in Procedure Memo /Absentee Tardiness Form
9. Orientation Training Manual

Procedures:

1. General Orientation and Position Orientation /On-the-Job Training Checklist

All of the objectives must be met during the ten-day training period. A trainer and trainee must initial each of the objectives and then the training date recorded. At the end of your orientation a test will be given. There are five areas of objectives:

1. General Orientation Objectives -Complete over a 5-day period.
2. Main Control Objectives -Complete over a 1-day period.
3. 7-3 Shift Objectives- Complete over a 2-day period.
4. 3-11 Shift Objectives -Complete over a 1-day period.
5. 11-7 Shift Objective- Complete over a 1-day period.

*NOTE: Ideally, the objectives that correspond to these training areas should be completed when the employee is working the shift, but this is not mandatory. An employee may be oriented on any objective any time by any supervisor or designated staff. Again, complete all objectives.*

# Memorandum

## 2. Training File Information Sheet

Complete this sheet and include with this form your highest degree diploma and First Aid and CPR cards if they are current.

## 3. Sexual Harassment Memorandum

This memo must be signed and dated once completed and understood .

## 4. Policy and Procedure Memorandum

This memo must be signed and dated once the Orientation Manual has been read completely.

## 5. Use of Force Policy

This policy must be signed and dated by the trainer and trainee after training is completed and understood .

## 6. Juvenile Contact Directive

This directive must be signed and dated once completed and understood .

## 7. Reporting Abuse and Neglect Memorandum

This memo must be signed and dated once completed and understood .

## 8. Orientation Training Manual

During your first ten days on the job you should read the policies included in this binder and if there are any questions about the policies ask a Unit Shift Supervisor or designated staff for help.

## 9. Facility Confidentiality Memo

This memo must be signed and dated once completed and understood .

## 10. Emergency Contact Directive / Absentee Tardiness Memo

This memo must be signed and dated once completed and understood .

Training Period Ending Conference (TPEC): On this date and time you must complete an orientation test and demonstrate a competency of 75% or better. Failure to do so may result in removal from the schedule, retraining and re-testing .

Date: -----

Time: -----

Note : To remain on the Work Schedule this binder with all the enclosed training documentation must be complete and turned in on the above Training Period Ending Conference date. The TPEC marks the end of the initial orientation period, not the completion of all required training.

---

Employee Signature

Date

---

Administrative Signature

Date

# Tulsa County Juvenile Detention Home

## Memorandum

To: STAFF TRAINING FILE

From: \_\_\_\_\_  
(Print Name) (Position)

SUBJECT: Tulsa County Juvenile Detention Home Policy and Procedure Manuals

I acknowledge that I have been trained as a part of my initial orientation and through continued professional training; that I am required to understand and read the Tulsa County Juvenile Detention Home's Policy and Procedure Manuals. It is my responsibility to keep current with all the policies, rules, regulations of the superintendent. I have also been informed as to my responsibility to keep myself current with the Office of juvenile Affairs (OJA) state certification Requirements for Secure Juvenile Detention Facilities" and with Oklahoma State Law, Title 10 Chapter 73, referred to as the Juvenile Code for the State of Oklahoma. I am aware that the Detention Home's policies and procedures manuals and all other related standards, rules and regulations are readily available to me for use as a reference.

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Trainer

\_\_\_\_\_  
Date

# **Administration and Management**

**1-55**

**Time Clock**

# Tulsa County Juvenile Detention Home

Administration and Management		<i>Policy</i>	<i>01-55</i>
Time Clock System		<i>Current Revision</i>	<i>04-18</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>09/15/17</i>

## Policy and Procedures

It shall be the policy, procedure and practice of the Tulsa County Juvenile Detention Home (TCJDH) to operate a time clock attendance system for the consistency of treatment for non-exempt employees. The system shall be considered the primary record of the workday, which assist the agency's ability to maintain a standardized system within the facility.

**I. Purpose:** A time clock, also known as a clock card machine or punch clock is used to "clock" in to work by inserting a piece of card stock into a machine, which will stamp the card indicating the time an employee arrived and left their place of work.

**II. Applicable To:** This policy shall apply to all non-exempt personnel of the Detention Home.

### **III. Definitions:**

**Time Clock** - mechanical application or electronic timepiece used to assist in tracking the hours worked by an employee of a company.

**Employee ID Number** – Unique number that is assigned to each employee upon hire.

**Straight Time** – Hours physically worked up to 40 hours.

**Overtime** – Hours physically worked beyond 40 hours during a workweek.

**Time Cards** – A card used to record an employee's starting and quitting times. Usually stamped by a time clock.

### **IV. Procedures:**

#### **A. Time Clock**

1. Every TCJDH employee is assigned a time card and an Employee ID Number within 30 days of their first day of employment. At the beginning of each month a new time card will be put in the Main Control for each non-exempt employee, with the exception of the Kitchen staff. Kitchen staff time cards will be kept in the Kitchen Managers office.
2. Each day when reporting for work an employee will receive the time card from the Main Control Operator and clock in using the Time Clock. After clocking in the employee will return the time card to the Main Control Operator, receive radio, keys, and sign key log verifying receipt of keys and radio.

3. At the end of each shift the employee will receive the time card from the Main Control Operator and clock out using the Time Clock. After clocking out the employee will return the time card to the Main Control Operator along with the employee's radio, keys and sign the key log verifying the return of key and radio.
  4. Kitchen staff upon reporting to work will get the time card from the Kitchen Manager's office and clock in using the Time Clock. After clocking in the kitchen employee will return the time card to the Kitchen Manager's office.
  5. At the end of each shift the kitchen employee will receive the time card from the Kitchen Manager's office and clock out using the Time Clock. After clocking out the employee will return the time card to the Kitchen Manager's office.
- B. Clock Location** -Time clocks are located in front of main control lobby area and in the kitchen. Kitchen staff are the **ONLY** employees that are to clock in or out on the kitchen clock, all other staff are to report to Main Control to use the Time Clock in the Main Control lobby area.
- C. Daily Clock In/Out Requirement** - It is a job requirement that all non-exempt employees must "clock in" and "clock out" at the start and end of their shift. Employees are expected to clock in and out at their regularly scheduled time. The employee will be required to "clock in" and "clock out" if they are coming to the worksite for trainings or staff meetings. Under certain conditions (such as training at an off-site location, extracurricular events, etc.) when an employee cannot "clock in" at their worksite, the employee should report time worked to the Unit Shift Supervisor, so that their time worked can be manually recorded.
- D. Viewing Hours Worked** - Employees can view their hours worked on their time cards daily. **FALSIFICATION, TAMPERING, AND UNAUTHORIZED VIEWING:** These following infractions are prohibited and will be considered severe. Due to the severity of these infractions, employee may be subject to immediate corrective action, up to and including termination.
- 1) Any attempt to tamper with timekeeping hardware
  - 2) Punching in or out for another employee
  - 3) Interference with another employee's use of the Time Clock system
  - 4) Unauthorized viewing of another employee's time in the Time Clock system
- E. Clock Problems** - If an employee is unable to punch in or out because of a time clock malfunction, accidental oversight, or other reason, it is the employee's responsibility to immediately inform their Shift Supervisor and complete the Time Clock correction form. In this situation, the Unit Shift Supervisor will manually correct the clock in or clock out information and this form must be maintained at the worksite. The Unit Shift Supervisor will notify the Program Manager of any time clock problems or malfunctions with the Time Clock.



- F. **Breaks** - Non-exempt employees are allowed paid breaks during their shift as defined by their work schedule and their supervisor. Any non-exempt employee who is directed to take an unpaid lunch period must do so at the direction of a Shift Supervisor or an administrator.
  
- G. **Unreported Hours** - All hours worked must be reported using the Time Clock timekeeping system. Any time spent working while not clocked in (a.k.a. “working off the clock”) is strictly prohibited.

Employees are required to clock in before performing any work and are not permitted to clock out until all work has stopped. Employees that under report or fail to report hours worked are subject to corrective action up to and including termination. (This includes Trainings and All Staff Meetings)

Example of “working off the clock” may include:

- a. “not clocking as required by facility policy”
- b. Voluntarily continuing to work at the end of regular working hours without prior approval from a supervisor or administrator.

Once an employee has clocked in, he/she is responsible for starting work. When a shift has been completed, it is the employee’s responsibility to clock out. Employees conducting personal business or simply not working while clocked in may be considered “riding the clock” and could be subject to corrective action up to and including termination.

- H. **Disputes Over Time Clocked In or Out** - In the event an employee has a dispute over time that was clocked in or out, they should bring it to the attention of their supervisor immediately.
  
- I. **Holidays** - Employees who are eligible for paid holidays will have those days manually entered into the Time Clock system.
  
- J. **Overtime** - Unauthorized overtime is prohibited. Any time worked by an employee that exceeds the employees budgeted position hours must be approved by the employee’s immediate supervisor prior to the time being worked. All approved overtime will be calculated based on the actual hour recorded and credited to the employee as measured by the Time Clock timekeeping system in the Time Clock Week.

Example:

Overtime paid as Straight Time

35 hours physically worked

8 hours out on leave

43 hours paid at the regular hourly rate (no overtime)

Overtime paid at Overtime Rate

42 hours physically worked (2 hours paid at overtime rate of time-and-a half)

- K. Time Clock** - Time clock Managers are appointed by the Program Manager as those responsible for monitoring and editing the time clock records for a worksite. This includes:
- a. Collecting, verifying, and maintaining the Time Clock Edit Forms
  - b. Editing employee's time as needed to correct missed punches
- L. Time Clock Supervisions** - The Program Manager is responsible for monitoring and approving the electronic time and attendance information.
- M. Time Clock Edit Form** - Any corrections to time that occur must be completed by the employee and signed by the employee's supervisor prior to the Time Clock Manager making any change to the employee's time. The original Time Clock Edit Form is kept on file with the employee's Time Clock Manager and the employee is provided with a copy.
- a. Correcting missed punches
  - b. Adjusting the clock in or clock out time

**V. Authority/References:**

**VI. Enclosures:**

- 1. Time Card
- 2. Corrective Form

**VII. Action:**

The Program Manager will be responsible for compliance monitoring of this policy.

The Detention Service Administrator will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Detention Service Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced:      New

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network  
*"Restricted Distribution"*





# Detention Time Clock Correction Form

**EMPLOYEES:** If a punch is missed, or needs a correction, please complete this form and return it to your supervisor. Use a separate form for each date. Enter the ACTUAL time you arrived, or left NOT your scheduled time.

**SUPERVISORS:** Please enter corrections no later than Wednesday for the prior week. This form should be submitted to the Program Manager on the following Monday. Please make a copy of this form and save for your documentation.

Name:	Employee ID #	Shift 7-3                      3-11                      11-7
Record you correction below. Sign and give to supervisor.		
Date:	In-Time AM                                      PM	Out-Time AM                                      PM
Required: Reason for correction:		
Employee Approval: I certify that the information reported above reflects the accurate correction needed for the Time Clock		
_____		_____
Signature		Date
Supervisor Approval: I certify the above correction is accurate.		
_____		_____
Supervisor Signature		Date

## OFFICE USE ONLY

Program Manager Approval	<input type="checkbox"/>	CORRECTED
_____		_____
Program Manager Signature		Date

# **Administration & Management**

**03-27**

**Residents Grievances**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>03-27</i>
Residents Grievances		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home that there be a written grievance procedure that is made available to all juveniles, that includes at least one level of appeal.**

**I. Purpose:** A grievance procedure is an administrative means for the expression and resolution of juveniles' problems. The facility's grievance mechanism includes provision for the following:

- written responses to all grievances, including the reasons for the decision
- response within a prescribed, reasonable time limit, with special provisions for responding to emergencies
- supervisory review of grievances
- participation by staff and juveniles in the procedures design and operation
- access by all juveniles, with guarantees against reprisals
- applicability over a broad range of issues
- means of resolving questions of jurisdiction

**II. Applicable To:** This policy shall apply to all personnel and residents of the Detention Home.

**II. Definitions:**

**Grievance** - A complaint made by a resident of Detention relating to Detention policies, practices, rules, treatment, conditions, or exercising of authority by detention staff.

**IV. Procedures:**

**A. General Guidelines:** Residents are informed during the admission orientation that grievance procedures are available upon request. Each resident signs an acknowledgement of orientation form, documenting receipt of the orientation. Every resident has the right to file a formal expression of grievance. Every effort will be made by Detention counselors to resolve any resident's complaint. When a resident writes a grievance, it is transmitted to the facility Unit-Shift Supervisor who is responsible for receiving and investigating the grievance without alteration, interference or delay. Residents will not be discriminated against for filing a grievance. Juveniles will have the opportunity for impartial hearings and reviews of their grievances if verbal conferences do not provide resolutions.

- B. Grievance Coordinator:** The Facility Administrator shall designate an administrative level staff member (70 level or higher) to supervise the proper handling of grievances and maintain OJA requirements and ACA standards for the resolution and documentation of resident grievances.
- C. Documentation of Grievances:** Resident is given a grievance form upon request. The Unit-Shift Supervisor allows the resident to fill out the grievance form completely at a set aside time in a solitary location. Once the grievance form is completed it is placed in the grievance box located on either unit.
- D. Resident Grievance Box:** Each unit is equipped with a resident grievance box which is checked each day by the grievance coordinator. The resident grievance box allows juveniles the ability to confidentially address their issues to administrative staff without the review or initial attempt to resolve by a unit-Shift Supervisor.
- E. Prohibition of Interference:** Staff members shall not in anyway discourage any juvenile from filing a grievance or appealing a grievance resolution. Any juvenile may submit a grievance confidentially to administrative staff without review or approval, interference or delay due to actions of facility staff.
- F. Formal Grievances** – The resident grievance process allows for (3) levels of appeal
- G. Initial Grievance Resolution Attempt – Informal attempt to resolve**

**1. Resident:**

The Resident completes the Resident's Grievance form, (enclosure #1). Separates the second part of the form and gives the white page to the Unit-Shift Supervisor within 24 hours of the incident. The resident keeps the yellow copy until the grievance is resolved. This form will be used throughout the grievance process.

**2. Unit Shift Supervisor –**

The Unit Shift Supervisor receives the Resident's Grievances form and immediately investigates the incident. The Unit-Shift Supervisor must decide upon a resolution of the incident with 24 hours. When a proposed resolution is decided upon, the Unit-Shift Supervisor completes the appropriate sections on the front side of the Statement of Grievance and Resolution form (enclosure #2). The Unit-Shift Supervisor then shows the resident the written proposed resolution on the Statement of Grievance and Resolution form. If the resident agrees with the resolution, the Unit-Shift Supervisor completes the following steps:

- a. Has the resident sign on the Resident's Signature line in the appropriate section.
- b. Gives a copy of the form to the resident.
- c. Gives a copy of the form to the Facility Administrator for review and filing. Files the original in the designated grievance file.

**3. Resident:**

If dissatisfied with the Unit-Shift Supervisor's resolution, then he/she requests the Unit-Shift Supervisor to take the grievance to his/her supervisor.



**4. Unit Shift Supervisor:**

Informs the Program Manager of the grievance and the request by the resident to appeal his/her decision,

**H. Appeal Level One****1. Program Manager:**

Investigates the incident and decides upon a resolution within 24 hours and completes the Resolution on First Appeal section of the Statement of Grievance and Resolution form and shares it with the resident. If the resident agrees with the resolution the Program Manager completes the following steps:

Has the resident sign on the Resident's Signature line in the appropriate section.

- a. Gives a copy of the form to the resident.
- b. Gives a copy of the form to the Accreditation Manager for review and filing.
- c. Files the original in the designated grievance file.

**2. Resident:**

If dissatisfied with the Program Manager's resolution, then he/she requests that the grievance be taken to the Accreditation Manager of Detention.

**I. Appeal Level Two****1. Program Manager:**

Due to residents dissatisfaction with the Accreditation Managers decision regarding the Grievance process it is the Accreditation Managers position to now inform the Facility Administrator of the grievance and the resident's requests to appeal the resolution.

**2. Accreditation Manager:**

Investigates the incident and decides upon a resolution. When a proposed resolution is decided upon, the Facility Administrator completes the Resolution on Second Appeal section on the back side of the Statement of Grievance and Resolution form, and shows the resident the written proposed resolution. If the resident agrees with the resolution, the Facility Administrator completes the following steps:

- a. Has the resident sign on the Resident's Signature line in the appropriate section.
- b. Gives a copy of the form to the resident.
- c. Files the original in the designated grievance file.

**3. Resident:**

If dissatisfied with the Assistant Superintendent's resolution, then he/she requests the Facility Administrator to review the grievance.

**J. Appeal Level Three****1. Facility Administrator:**

Investigates the grievance and all proposed resolutions, and when a proposed solution is decided upon, completes the Resolution on Third Appeal section on the back side of the Statement of Grievance and Resolution form. The Director shows the resident the written proposed resolution. If the resident agrees with the resolution, the Director completes the following steps:

- a. Has the resident sign on the Resident's Signature line in the appropriate section.
- b. Give a copy of the form to the resident.
- c. Files the original in the designated grievance file.

**2. Resident:**

This represents the highest level of appeal offered by the facility and the decision of the Facility Administrator is final.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures:**

1. Grievance Form
2. Grievance Resolution Form

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure III:13-08

Distribution: Detention Home Policy and Procedure Manual

**TULSA COUNTY  
JUVENILE DETENTION HOME**

**STATEMENT OF GRIEVANCE AND RESOLUTION**

Date of Submission \_\_\_\_\_

Case Number \_\_\_\_\_ Resident's Name \_\_\_\_\_

Ward of The Court Yes \_\_\_\_\_ No \_\_\_\_\_ OJA Custody Yes \_\_\_\_\_ No \_\_\_\_\_ Jolts Number \_\_\_\_\_

Location \_\_\_\_\_

Subject of Grievance: \_\_\_\_\_

Resident's Proposed Resolution: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Resident's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Received by \_\_\_\_\_ Date \_\_\_\_\_ Assigned to \_\_\_\_\_ Date \_\_\_\_\_  
Title \_\_\_\_\_

Proposed Resolution By Unit Shift Supervisor: \_\_\_\_\_

\_\_\_\_\_

Were Resolutions Adopted?: ( ) Yes ( ) No  
Does Resident Accept Proposed Resolution?: ( ) Yes ( ) No  
Will Resident Appeal to Program Manager? ( ) Yes ( ) No

Resident's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Unit/Shift Supervisor/ Program Manager: \_\_\_\_\_ Date \_\_\_\_\_

**RESOLUTION ON FIRST APPEAL**

Grievance Resolution By: Program Manager

Proposed Resolution: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

First Appeal "cont."

Were Resolutions Adopted?: ( ) Yes ( ) No  
Does Resident Accept Proposed Resolution?: ( ) Yes ( ) No  
Will Resident Appeal to Assistant Superintendent? ( ) Yes ( ) No

Resident's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Program Manager's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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**RESOLUTION ON SECOND APPEAL**

Grievance Resolution By: ( ) Assistant Superintendent

Proposed Resolution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were Resolutions Adopted?: ( ) Yes ( ) No  
Does Resident Accept Proposed Resolution?: ( ) Yes ( ) No  
Will Resident Appeal to Asst. Superintendent? ( ) Yes ( ) No

Resident's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Assistant Superintendent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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**RESOLUTION ON THIRD APPEAL**

Grievance Resolution By: ( ) Superintendent

Proposed Resolution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were Resolutions Adopted?: ( ) Yes ( ) No  
Does Resident Accept Proposed Resolution?: ( ) Yes ( ) No  
Will Resident precede with notification of OJA? ( ) Yes ( ) No

Resident's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date \_\_\_\_\_



# **Institution Operations**

**03-28**

# **Disciplinary Guidelines**

## Tulsa County Juvenile Detention Home Policy and Procedures

Institutional Operations		<i>Policy</i>	<i>03-28</i>
Disciplinary Guidelines		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/01</i>

**It shall be the policy, procedure, and practice of the Detention Home to specify acts prohibited within the facility and penalties that can be imposed for various degrees of violation. These rules will be reviewed annually, and the Facility Administrator will approve any update.**

**I. Purpose:** The Oklahoma Juvenile Code (10 O.S. 7302-6.3) defines the rights of a juvenile in custody. This policy is not intended infringe on the stated rights of any juvenile, but put in place an organized predictable system of discipline that is consistent with the goals and mission of the Detention Home. This system is designed to utilize positive approaches that encourage the juvenile to be personally responsible for his or her actions. The degree of disciplinary actions, sanctions, or related restrictions initiated on a resident shall be directly related to the severity of the rule broken as detailed in the resident orientation form and disciplinary guidelines. The objective of disciplinary sanctions shall be to hold residents accountable and encourage responsible behavior within the program.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. General Guidelines** - All disciplinary actions shall fall within the following guidelines:

- 1. Least Amount of Restriction Necessary** - Disciplinary action shall be taken only at such time and in such measures and degree as is necessary to manage a resident's behavior within acceptable limits.
- 2. Equality of Treatment** - Resident behavior shall be managed in a completely impartial and consistent manner. A Unit-Shift Supervisor or an Administrator must approve any deviation from the established disciplinary guidelines.
- 3. Resident Protections** - Disciplinary action shall not be used indiscriminately or in the nature of retaliation or revenge. If a resident feels that they have been treated unfairly, they have the right file a grievance and avail themselves of the appeal process if they so choose.

4. **Prohibited Forms of Discipline** - Corporal punishment or unusual punishment, humiliation, mental abuse, or punitive interference with the daily functions of living, such as eating or sleeping is prohibited. Any sanction which may adversely affect a juvenile's health either physical or psychological is expressly prohibited. Routine use of physical restraints or psychological intimidation shall never be practiced. No disciplinary actions will be employed that deny a juvenile regular meals, sufficient sleep, exercise, medical care, correspondence with parents or legal assistance. Any staff member found to violate disciplinary guidelines will be subject to disciplinary action up to and including termination.

## **B. Initiation and Supervision of Disciplinary Actions**

1. **Staff Responsibility** - The initiation and supervision of disciplinary measures against any resident shall be exercised by staff and/or trained volunteers only. Residents shall never be allowed to initiate or supervise disciplinary actions against another resident. The administration and Unit Shift Supervisors shall ensure that the disciplinary process is utilized to develop a safe, caring environment.
2. **Training** - All full/part-time personnel shall be sufficiently trained regarding the rules of conduct and shall be familiar with the available sanctions and rationale for the rule. Continuous in-service training shall emphasize the clarity and specificity of the rules, which shall preclude discrepancies in the interpretation among staff members.
3. **Resident Orientation to Rules** - The resident orientation form details resident's rights, program features, prohibited behavior and penalties that may be imposed for rule violations. The objective of the resident orientation form is to inform the juvenile of his rights and responsibilities while in custody, as well as initiate the resident to a positive social environment. **Disciplinary Guidelines are posted in the dayroom.**
  - a. Each resident shall be given a copy of the Resident Orientation form that should be kept in his or her room during their stay. The staff member assigned to admit the resident will ensure that the resident understands all information on the Orientation form. If a language barrier exists, efforts will be made for the information to be translated into the appropriate language.
  - b. Conduct specified as prohibited shall be limited to observable behavior that clearly has a direct adverse affect on the program, another resident, or a staff member. Written procedures specify how the regulations are presented to every resident.
4. **Program Changes** - Program assignments and changes shall be made to achieve effective programming and attain goals, not as punishment or reward. Such changes shall be approved by the Facility Administrator.
5. **Major Crimes** - (Law Violations) committed by juveniles in custody shall not be handled internally. Where a juvenile allegedly commits an act covered by criminal law, the case should be referred to the appropriate court or law enforcement officials for consideration for prosecution.



- 6. Resident Notification** - Prior to disciplinary action, the resident will have the reason for the action explained to him or her and will have the opportunity to explain the behavior exhibited prior to the imposition of disciplinary action. Disciplinary action shall be taken immediately after the occurrence of misconduct, or as circumstances permit.

**B. Forms of Disciplinary Action**

- 1. Verbal Intervention** - Consistent verbal interaction shall be utilized in detailing rules and procedures in an effort to prevent unwarranted behavior. Staff is encouraged to resolve incidents involving minor rule violations informally. However, where informal resolution is not possible staff should report the incident in written form and file it according to procedure. Staff shall maintain a profile that demonstrates active interest and involvement in the resident's activities and emotional status.
- 2. Dayroom Restriction** - When a resident is displaying a minor behavior problem like teasing, taunting, or antagonizing other residents, Staff shall take the resident aside to another area and attempt to use the crisis prevention verbal skills acquired in training, and attempt to de-escalate the situation. If a resident initially ignores verbal warnings by staff and crisis intervention does not work, staff may place a resident on dayroom restriction, or time out, for no more than 15 minutes. At the completion of this 15-minute time out, staff will again attempt to use verbal counseling interventions and assist the resident in returning his behavior to a manageable state.
- 3. Activity Restriction** - The temporary loss of one or more program activity privileges shall be utilized in specific instances when a resident's negative behavior is linked with a certain activity. For example, if a resident is observed tearing cards while playing a card game, that resident may not be able to play card games for the remainder of the shift. Activity restriction is intended to serve as an alternative to room confinement for minor offenses and certain major offenses should circumstances permit. This sanction does not require a written disciplinary form, but must be documented in the resident's behavioral folder just as any other attempt to manage a resident's behavior.
- 4. Room Restriction (Time-out)** - If a resident refuses to take advantage of the dayroom time out, he or she may receive a room restriction time out. This room restriction time out will last 15 to 60 minutes and serve as a "cooling off period" during which the resident will be removed from the program and checked on by staff every 15 minutes or less should circumstance require it. At the time the resident is placed in his room "one hour Room time out" will be marked on the resident's room supervision log. However, if during the timeout the resident demonstrates appropriate behavior and is able to make positive commitments, the resident will be able to return to the program in progress. The resident will assist in determining the length of stay in his room. Whether it is 15 minutes or 60 minutes will solely depend on residents desire to comply with the behavioral standards of the facility. This cooling off period is considered an alternative to room confinement and does not require a disciplinary form to be completed. However, an entry in the residents behavioral folder, detailing the resident's behavior and counseling efforts made to redirect his/her negative actions, and a room supervision log documenting the timeout are necessary. The Unit-Shift Supervisor approving the room restriction must review and sign the room supervision log. Room Restriction may be extended if a resident's behavior will not allow him or her to safely return to the program. If the room

extension occurs, the room supervision log will be marked as an extended time out and the resident will continued to be monitored every 15 minutes, until a positive commitment is made to rejoin the program.

- 5. Room Confinement** - When a resident commits a major violation he or she may be placed on room confinement. This sanction is designed to be a last resort when the resident has been unresponsive to verbal counseling or committed an act so serious; it threatens the safety and security of the facility. Residents shall be room confined for major violations which relate to the self protection of the juvenile, to separate juveniles who are fighting, to restrain juveniles who have escaped or who are in the process of escaping, to prevent property destruction, and to stop behavior that incites other residents which jeopardizes the safety of staff and residents of the facility. No resident will be room confined for 24 hours or more without the opportunity of a disciplinary review by the administrator or his designee who was not involved in the incident. The Process for placing a resident in room confinement shall be as follows:
- a. Prior to room restriction or confinement, staff shall explain the reasons for the restriction or confinement to the resident and shall give the resident an opportunity to explain his or her behavior.
  - b. Every resident placed on room restriction or confinement must be visibly observed every 15 minutes and this will be documented on each resident's room supervision log.
  - c. Juveniles placed on room confinement shall be afforded living conditions, essential services and privileges approximating those available in the program. No resident will be denied access to mail, daily exercise, regular phone calls, visitation, access to attorney or worker due to disciplinary sanction. Any exceptions are justified by clearly documented evidence that the resident's behavior will not allow completion of the activity. The Facility Administrator or his designee must approve all exceptions.
  - d. The resident will be released when staff determines that he or she can safely be returned to the program. The resident will assist in determining his or her length of consequence.
  - e. A written disciplinary report will be completed for each instance of resident room confinement. This report shall include who authorized the action, names of persons observing the resident in his or her room, the person authorizing release, and the time of release. A Unit-Shift Supervisor, who was not involved in the incident, must review and approve each disciplinary report resulting in resident room confinement. The following documents will be placed in a resident's file as a result of disciplinary action:
    - Detention Home Disciplinary report
    - Copy Incident report(if needed)
    - Room Supervision Log
    - Entry in resident behavioral folder detailing the incident
    - Resident (3) Hour Room Confinement Review Form(if needed)
  - f. A copy of the disciplinary report will be given to the resident when placed in his room or within 24 hours of the room confinement, as his behavior permits.

- 6. Extended Room Confinement** - The extension of an existing room confinement of a resident may exceed 24 hours or more if the resident continues to display negative behavior and/or fails to de-escalate their negative behavior. A resident on extended room confinement must have his sanction reviewed by the administrator or his designee every 24 hours. Additionally, a resident may request a hearing on any major disciplinary action levied against him. Extended room confinement must meet the following criteria:
- a. The extended confinement shall be constructed within the facility Guidelines for disciplinary actions and not as a means of revenge or retaliation.
  - b. Residents shall be allowed to use personal hygiene items and shower while on room confinement.
  - c. Residents will lose part or all program privileges while on extended confinement. To the extent possible, living conditions and privileges approximating those available to the general resident population will be provided; to include sleeping room, food, clothing, exercise, correspondence and legal assistance. Any exception will be justified by clear and substantiated evidence. This shall be documented in the resident's file,
  - d. A Unit-Shift Supervisor, Lead Detention Counselor acting as Supervisor, or an Administrator shall decide the hours of restriction.
  - e. A resident on room confinement will be assessed every 3 hours by a Unit- Shift Supervisor, or Lead Detention Counselor acting as Supervisor, that was not involved in the incident to determine if the confinement should continue.
  - f. Resident's room confined for 24 hours or more shall have a disciplinary hearing and be allowed to present evidence or witnesses in their favor if they choose.
- 7. Special Behavior Management** - When a resident presents behaviors or issues that stand outside the normal disciplinary guidelines a special behavior management program may be devised. A special behavior management program is not designed as a punishment or a disciplinary measure in and of itself. It is an attempt by the facility to recognize and adapt to specific and dramatic circumstances that an individual resident poses as evidenced by demonstrated behavior. Through a recent record of violent acts, a resident may demonstrate a need for special behavior management. Additionally, residents with mental health or medical issues that will not allow them to participate fully in the program may also require a specific programming.
- a. Residents on special behavior management will not be denied any rights afforded juveniles under Title 10 sect. 7302 6.3, nor shall any special behavior management
  - b. program violate facility guidelines for resident discipline, any exceptions will be documented with clear evidence and approved by administrative staff.
  - c. Special Behavior Management will be an individually designed program to influence the behavior of a resident who has a demonstrated need for alternate programming.

- d. Specific goals and intervention strategies will be devised as a condition of return to the program.
- e. Before a resident can be placed on Special Behavior Management the following criteria will be met:

- (1) The resident will have at least one documented incident of extremely serious and/or highly disruptive behavior which threatens the safety and security of the program. Or present with a significant issue which would prevent him from interacting with normal program.
- (2) The Unit-Shift Supervisor seeking this action will review the resident's folder and conduct a Disciplinary Review with the resident in question. If, at the completion of this review, the sitting disciplinary committee concludes that the residents behavioral management needs cannot be met within standard disciplinary guidelines the committee may recommend a program of behavior management. The unit-shift supervisor, in conjunction with the disciplinary committee, shall complete a special behavior management plan form.
- (3) Having concluded that special behavior management is necessary for the safety and security of the program and is in the best interest of the resident in question, the unit-shift supervisor seeking this action will present documentation detailing the resident's behavior, disciplinary review forms and a plan of special behavior management to administrative staff to review and approve.
- (4) Before approving any such action, administrative staff may consult the facility medical authority, the resident's court appointed representative or any recognized professional that could provide guidance in developing the best possible programming for the resident in question. Administrative staff shall approve or disapprove the special behavior management plan within 24 hours of receiving it.
- (5) A unit-shift supervisor will review the resident's status every twenty-four hours and document the findings of such review in the resident's detention folder.
- (6) Administrative staff will review the resident's status at the completion of the given period, but no more than five days after the start of the behavior management program.

8. **Formal Charges filed for Law Violations** - Actions taken by a resident that would normally be considered a felony shall be referred to the District Attorney's Office for prosecution. The Facility Administrator or his designee will make this notification and request that charges be filed in juvenile court. Incidents that will require contacting legal authorities will include but are not limited to:

- Resident on resident sexual assault
- Attempted Murder
- Theft
- Physical assault on staff

- C. **Resident Room Confinement Review** - Any Resident placed on room confinement or extended room confinement shall have that room confinement reviewed at least once (1) every three (3) hours by administrative staff or a Unit-Shift Supervisor who was not directly

involved in the incident. Reasons for continued room confinement shall be documented. The review process shall adhere to the following guidelines:

1. **Resident Confinement Review Form** - Room confinement of juveniles shall be reviewed every 3 hours on the standard Resident Room Confinement Review, which must be completed by a supervisor or an administrator.
  - a. This form requires a decision to continue room confinement or return the resident to the program and the justification for the decision must be documented.
  - b. A Unit-Shift Supervisor or Administrator must assess the resident's behavior and document the reason for continued room confinement if the resident is not released to the program.
  - c. Every resident placed on formal disciplinary action shall have a completed Room Confinement Review for in his/her detention behavioral folder.

#### **V. Authority/References:**

OJA Requirements for Secure Detention Facilities 377:3-13-44 Security and Control  
10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3C-02, 3C-04, 3C-05, 3C-06, 3C-08, 3E-01, 3E-02, 3E-03, 3E-05)

#### **VI. Enclosures:**

1. Disciplinary Report Form
2. Incident Report Form
3. Room Confinement Log
4. Special Behavior Management Plan Form
5. Resident Behavior Review Form
6. Three Hour Review

#### **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the facility Administrator the Director of the Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure III:14-01.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



Details of Incident/Complaint (continued):

Multiple horizontal lines for writing details of the incident/complaint.

Resolution: \_\_\_\_\_

Multiple horizontal lines for writing the resolution.

Evidence/Property (List and Describe, Chain of Evidence Attached, Repair Request Completed):

Multiple horizontal lines for listing evidence and property details.

Was Property Damaged/Destroyed: Yes \_\_\_\_\_ No \_\_\_\_\_ (If YES, is a Request for Restitution Needed/Attached?)

Location of Evidence/Property:

Notification (List the Time and All Notifications of this Incident/Complaint Including SUPERVISOR/DEPARTMENT HEAD/DIRECTOR):

- 1) \_\_\_\_\_ 4) \_\_\_\_\_
2) \_\_\_\_\_ 5) \_\_\_\_\_
3) \_\_\_\_\_ 6) \_\_\_\_\_

Enclosures (list all attached Statements, Receipts and Related Documents):

- 1) \_\_\_\_\_ 4) \_\_\_\_\_
2) \_\_\_\_\_ 5) \_\_\_\_\_
3) \_\_\_\_\_ 6) \_\_\_\_\_

Was Use of Force Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Was Medical Attention Required: Yes \_\_\_\_\_ No \_\_\_\_\_ First Aid \_\_\_\_\_ Nurse \_\_\_\_\_ Hospital \_\_\_\_\_

Disciplinary Action Taken: Yes \_\_\_\_\_ No \_\_\_\_\_ (Attach a copy of disciplinary report - Form 3119)

DISTRIBUTION (Administrative Use Only):

Administrative File \_\_\_\_\_ Assigned Counselor \_\_\_\_\_ OJA \_\_\_\_\_ District Attorney's Office \_\_\_\_\_
Judicial \_\_\_\_\_ TPD \_\_\_\_\_ TCSO \_\_\_\_\_ DHS \_\_\_\_\_ Other (Specify) \_\_\_\_\_

Administrator's Review \_\_\_\_\_ Date \_\_\_\_\_



**TULSA COUNTY JUVENILE DETENTION HOME DISCIPLINARY REPORT**

Resident's Name \_\_\_\_\_ Assigned Unit \_\_\_\_\_ Room Number \_\_\_\_\_

Jolts Number \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Which Specific Rule Violation? \_\_\_\_\_

- 1. Self Protection
- 2. To prevent inflicting harm on themselves or others
- 3. Destruction of Property (What Property?) \_\_\_\_\_
- 4. Inciting\* \_\_\_\_\_
- 5. Fighting
- 6. Attempting Escape/Inciting to Escape

Location in Detention \_\_\_\_\_ Occurring Date \_\_\_\_\_ Time \_\_\_\_\_ a.m. / p.m.

On the above date and time: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Injuries, if any \_\_\_\_\_ Property Damage, if any \_\_\_\_\_

Disposition of Physical Evidence or Contraband \_\_\_\_\_

Staff Witnesses \_\_\_\_\_

\_\_\_\_\_ a.m./p.m. \_\_\_\_\_ a.m. / p.m. \_\_\_\_\_

Time restraints applied Approved by Time Restraints removed Approved by

Room Confined: Yes \_\_\_ No \_\_\_ Time Confined \_\_\_\_\_ a.m. / p.m. By \_\_\_\_\_

Hours Confined \_\_\_\_\_ Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Released from Confinement:

Returned to Program: Date: \_\_\_\_\_ Time \_\_\_\_\_ a.m. / p.m. By \_\_\_\_\_

Action Reviewed and Approved by Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Major Violation Report Delivered to Resident by: \_\_\_\_\_ Date: \_\_\_\_\_

24-Hour Disciplinary Confinement Reviewed by Supervisor \_\_\_\_\_ Date: \_\_\_\_\_

I have been informed verbally and in writing about this report and am aware I have a right to a Disciplinary hearing within 7 days if I have been confined to my room or have lost privileges or activities extending beyond 24 hours. I have been advised that I may have a Disciplinary Hearing within 24 hours with my written consent.

\_\_\_\_\_  
Resident Signature Date: \_\_\_\_\_

I agree to have my hearing in less than 24 hours \_\_\_\_\_ Date: \_\_\_\_\_  
Resident Signature

Hearing Date \_\_\_\_\_ Time \_\_\_\_\_ a.m. / p.m. Location \_\_\_\_\_

\* Describe how resident was inciting other juveniles to jeopardize the safety of staff and residents.

Original - Resident File                      Canary - Superintendent                      Pink - Resident

## ROOM SUPERVISION LOG

RESIDENT'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ ROOM NO: \_\_\_\_\_

PURPOSE FOR RESTRICTION: One Hour Room Time Out  Resident's Request   
 Room Confinement  Medical   
 Extended Room Confinement  Suicide Watch

7:30 a.m. _____	11:00 a.m. _____	2:30 p.m. _____	6:00 p.m. _____
7:45 a.m. _____	11:15 a.m. _____	2:45 p.m. _____	6:15 p.m. _____
8:00 a.m. _____	11:30 a.m. _____	3:00 p.m. _____	6:30 p.m. _____
8:15 a.m. _____	11:45 a.m. _____	3:15 p.m. _____	6:45 p.m. _____
8:30 a.m. _____	12:00 noon _____	3:30 p.m. _____	7:00 p.m. _____
8:45 a.m. _____	12:15 p.m. _____	3:45 p.m. _____	7:15 p.m. _____
9:00 a.m. _____	12:30 p.m. _____	4:00 p.m. _____	7:30 p.m. _____
9:15 a.m. _____	12:45 p.m. _____	4:15 p.m. _____	7:45 p.m. _____
9:30 a.m. _____	1:00 p.m. _____	4:30 p.m. _____	8:00 p.m. _____
9:45 a.m. _____	1:15 p.m. _____	4:45 p.m. _____	8:15 p.m. _____
10:00 a.m. _____	1:30 p.m. _____	5:00 p.m. _____	8:30 p.m. _____
10:15 a.m. _____	1:45 p.m. _____	5:15 p.m. _____	8:45 p.m. _____
10:30 a.m. _____	2:00 p.m. _____	5:30 p.m. _____	9:00 p.m. _____
10:45 a.m. _____	2:15 p.m. _____	5:45 p.m. _____	

### ADMINISTRATIVE REVIEW

TWENTY FOUR HOUR ADMINISTRATIVE REVIEW OF ROOM CONFINEMENT

CONDUCTED BY \_\_\_\_\_ UNIT-SHIFT SUPERVISOR \_\_\_\_\_ DATE \_\_\_\_\_

# SPECIAL BEHAVIOR MANAGEMENT PLAN

Resident's Name: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Submitted to: \_\_\_\_\_

**Justification:** (Please list and detail why behavior management plan is necessary. All documentation should be attached for review.)

**Recommended Programming Adjustments:** (List suggested programming changes for resident.)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

**Performance Measures:** (List requirements for resident's return to standard programming. Note: projected completion date must be included.)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

**Interventions:** (List any special disciplinary measures in response to rule violations.)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

**Administrative Review:** (Must be completed before plan is implemented.)

Reviewed by Administrative Staff \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Approve or Declined by Administrative Staff (circle one)

Reason Plan Declined: \_\_\_\_\_

Reviewed by Superintendent \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Implementation Date \_\_\_\_\_





# Tulsa County Juvenile Detention Home Resident Room Confinement Review

Resident's Name \_\_\_\_\_  
(First Name) (Last Name)

Date/Time Confined \_\_\_\_\_

### Administrative Morning Review

Decision: ( ) Room confinement is now terminated and the resident is returned to normal programming.

Decision: ( ) Room confinement shall be continued.

Explain How Resident Is Unsafe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Administrative Review: \_\_\_\_\_  
----- Sign a tu re ----- Date/Time

### 3 Hour Assessments

Time: \_\_\_\_\_ Contact Results: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Released: ( ) Yes ( ) No Staff Signature

Time: \_\_\_\_\_ Contact Results: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Released: ( ) Yes ( ) No Staff Signature

Time: \_\_\_\_\_ Contact Results: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Released: ( ) Yes ( ) No Staff Signature

# Tulsa County Juvenile Detention Home Resident Room Confinement Review

Time: \_\_\_\_\_ Contact Results: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Released: ( ) Yes ( ) No Staff Signature

Time: \_\_\_\_\_ Contact Results: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Released: ( ) Yes ( ) No Staff Signature

## Administrative Evening Review

Decision: ( ) Room confinement is now terminated and said resident is returned to normal programming.

Decision: ( ) Room confinement shall be continued.

Explain How Resident Is unsafe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Administrative Review: \_\_\_\_\_  
Signature Date/Time

# **Institutional Operations**

**03-30**

**Rewarding Positive Behavior**

## Tulsa County Juvenile Detention Home Policy and Procedures

Institutional Operations		<i>Policy</i>	<i>03-30</i>
Rewarding Positive Behavior		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the written policy, procedure, and practice of the Detention Home to provide a system of rewarding the positive behavior of juveniles in our care. This policy is not meant to conflict with the safe and secure nature of this facility.**

**I. Purpose:** Tulsa County Juvenile Detention Home understands that the positive accomplishments of juveniles in our custody must be recognized in order to provide a complete system of discipline with positive and negative consequences.

**II. Applicable To:** All staff and residents of Tulsa County Juvenile Detention Home.

### **III. Definitions:**

**Detention Currency** - Facility form documenting a positive behavior or action of a resident may be given in response to a specific action or for an identifiable pattern of positive behavior. To be valid it must be signed by both the issuing staff and a Unit Shift Supervisor or an administrator.

### **IV. Procedures:**

**A. General Guidelines** - Individual residents may receive a reward for displaying positive behavior. Although no level system is in use, those residents demonstrating a high level of personal responsibility or show marked improvement in behavior will be identified by line staff and receive Juvenile Detention Dollars. The Juvenile Detention Dollars will be good for redemption regarding the following privileges.

**1. Staff Responsibility** – Staff should issue Juvenile Detention Dollars to residents who display unexpected levels of assistance. Staff are allowed 10 detention dollars per week to issue to residents for positive behavior. It is the staff’s responsibility to record all of information pertaining to any detention dollars issued that must include: The resident’s name, the current date, the reason why the resident received the detention dollar and the staff’s name issuing the detention dollar. Staff are responsible for also recording all above information into the Resident Detention Dollar Log Book located on both units; that will also be entered into the database by one of the unit secretaries.

- Additional T.V. time after bedtime (30 to 60 minutes)
- Additional snacks
- Additional phone calls
- Teams captains in recreational activities



**B. Juvenile Detention Dollar Redemption** -After receiving Juvenile Detention Dollars filled out by staff and approved by a supervisor, a resident may redeem his or her Juvenile Detention Dollar at any time. However,

**1. Limitations** - the following limitations apply:

- a.** Presentation of the Juvenile Detention Dollars will not be honored if it would place the safety or security of the program in jeopardy.
- b.** Juvenile Detention Dollars may not be carried over from stay to stay.

**C. Documentation and Records** - After being redeemed, the Juvenile Detention Dollar will be placed in the resident's behavioral folder for record

**V. Authority/References:**

Applicable OJA Requirements for Secure Detention Facilities

Applicable ACA Standard: 3C-01 (Ref. New)

Applicable Administrative Orders, Tulsa County and/or agency Policies & Procedures

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

**VI. Enclosures:**

- 1. Juvenile Detention Dollar

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from or Juvenile Bureau Director or Facility Administrator.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure III:14-04.

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-01**

**Waste Disposal**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-01</i>
Waste Disposal		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**The Detention Home shall provide for a waste disposal system in accordance with a waste disposal plan that is reviewed and approved by the Tulsa City/County Department of Health and/or any other appropriate regulatory agency having jurisdiction.**

- I. Purpose:** Waste disposal must conform to appropriate jurisdictional requirements. Liquid and solid waste must be collected, stored, and disposed of in a manner that will avoid nuisance and hazards; and that will protect the health and safety of residents.
- II. Applicable To:** This policy shall apply to all personnel of the Detention Home.
- III. Definitions:** None.
- IV. Procedures:** The Detention Home will adhere to all local health regulations as outlined by the Tulsa City-County Health Department relating to the inspection of the facility and the collection, storage and disposal of liquid and solid wastes.
- A. Administrative Responsibility** – The Facility Administrator shall ensure that waste disposal is provided by either a private contractor or, if available, Tulsa County Building Operations. The City of Tulsa Water Department in accordance with requirements of the Oklahoma State Department of Environmental Quality manages sewage treatment.
- B. Waste Disposal Plan** – Trash and solid waste shall be collected and removed as often as necessary to avoid creating a menace to health and maintain sanitary conditions.
- 1. Trash Disposal** - Each trash container is lined with a sanitary plastic liner which is changed daily.
- a. Each trash container within the building is sanitized daily.
  - b. All trash is removed from the building on a daily schedule
  - c. If waste is determined to be an immediate nuisance or hazard to the health of the residents or staff, then it is removed immediately from the building.

- d. Trash is placed in the metal trash dumpster located beside the service drive at the southeast corner of the building.
  - e. The trash dumpster is emptied and removed from the premises by a licensed refuse company on a regular schedule.
2. **Solid Waste disposal** - Solid waste shall be collected and stored in approved containers and removed by a licensed contractor for disposal.
- a. The facility is equipped with grease traps that prevent solid waste from being discarded with normal sewage.
  - b. The facility grease traps will be emptied at regular intervals or as often as necessary to avoid creating a menace to health and maintain sanitary conditions.
  - c. That facility has two containers for cooking grease disposal located in the rear of the building in the southeast corner. The facility provides for a licensed contractor to remove and dispose of this waste as often as necessary.

#### V. **Authority/References:**

Federal Safe Drinking Water Act  
10 O.S. 7302-8.3 (Standards of Cleanliness)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-04 / **MANDATORY**)

VI. **Enclosures:** None.

#### VII. **Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-02.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-02**

**Control of Vermin & Pests**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-02</i>
Control of Vermin & Pests		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure, and practice of the Detention Home to provide for the control of vermin and pests.**

**I. Purpose:** The facility's pest control program must conform to appropriate jurisdictional requirements. Any condition that contributes to the harboring or breeding of insects, rodents, or other vermin must be eliminated immediately. Licensed pest control professionals should be used on a regular basis or as needed or required to fumigate the facility. Control of vermin and pest is essential to the safe and sanitary operation of the Detention Home.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**Pests/Vermin** – An annoying or destructive insect or animal that may cause discomfort or disease which may be harmful to staff and resident's health. Examples include, but are not limited to, flies, bees, hornets, wasps, cockroaches, spiders (including the Brown Recluse and Black Widow), silverfish, ants, termites, weevils, crickets, pill bugs, mice, rats and snakes (both poisonous and non-poisonous).

### **IV. Procedures:**

**A. Pest and Vermin Control** – For the Detention Home is provided by Tulsa County (Building Operations) on an annual contractual basis with a professional and licensed pest control company. Pest control is necessary to avoid the creation of any potential health or safety risk and to assist in maintaining sanitary conditions within the facility.

**1. Service Contract** – The annual pest control contract provides the following:

- a.** That a licensed pest control professional will twice per month or as often as necessary, conduct pest control service calls to the Detention Home.
- b.** That the pest control company will be on call for unlimited call backs within 24 hours of notification of any possible pest control emergency situations.
- c.** That the pest control company will provide a list of the pesticides and chemicals and will provide the appropriate Material Safety Data Sheets (MSDS) added to the facility's chemical inventory list (CIL).

2. **Pest Control Service Calls** – when the licensed pest control professional arrives at the facility; the following procedures shall be followed:
- a. The licensed pest control professional will sign in the facility as an authorized visitor at the Main Control Room.
  - b. A facility staff member in accordance with facility policy must escort the licensed pest control professional throughout the facility with special consideration given to the following areas of concern:
    - (1) *Food Service and Storage Section (Kitchen & Pantry)*
    - (2) *Resident Housing (Unit A & Unit B Resident Halls and Rooms)*
    - (3) *Medical Service and Storage Section (Clinic)*
    - (4) *Control Rooms (Unit A & Unit B)*
    - (5) *Admissions Area (Main Control & Holding Cells)*
    - (6) *Public Visitation Area (Lobby)*
    - (7) *Supply Storage Areas (Basement & Unit A Supply Room)*
  - c. Facility staff must keep the licensed pest control professional under direct and continuous supervision while performing the pest control service in the Detention Home.
  - d. At the completion of the pest control service call, the facility staff member escorting the licensed pest control professional and witnessing the service; will sign and date the invoice copy of the service call as the receiving customer and verifying that the service was conducted.
  - e. An invoice copy of the pest control service call will be obtained prior to the licensed pest control professional being escorted back to the Main Control Room and being signed out of the facility.
  - f. The invoice copy of the pest control service will be forwarded to the Facility Administrator.
  - g. The facility will copy and file this invoice; and will forward the original to the Director's Administrative Assistant for final disposition.
3. **Pest Control Service Call-Backs**
- a. Staffs are required to notify a supervisor and to write a detailed incident report of any observation of pest or vermin problems within the facility. This report will be reviewed and approved by a supervisor, who will forward it to the Facility Administrator.
  - b. The Facility Administrator or administrative designee will implement the appropriate corrective action and are the only person(s) authorized to make an emergency call back of the pest control service contractor.



4. **Weekly Health and Sanitation Inspections** – A designated facility staff member will conduct a weekly health and sanitation inspection of all facility areas in accordance with facility policy.
  - a. The weekly health and sanitation inspection report is submitted to the Facility Administrator and contains an inspection for the facility’s control of pest and vermin.
  - b. All pest or vermin deficiencies and corrective actions are documented as they occur.

**V. Authority/References:**

10 O.S. 7302-8.3 (Standards of Cleanliness)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-05 / **MANDATORY**)

**VI. Enclosures:** None

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-03.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-03**

**Exchange of Clothing and Linen**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-03</i>
Exchange of Clothing and Linen		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy procedure and practice of the Detention Home to provide for the suitable clean bedding, linen and clothing for each resident. This shall also include provision for the maintenance and exchange of clothing bedding and linen.**

**I. Purpose:** Collection storage and exchange for bedding, clothing, and linens should be done hygienically; that is blankets, pillows, and mattresses should be cleaned before reissue, and linen towels and clothing must be laundered before reissue.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

None

**IV. Procedures:**

**A. Clothing, Linen and Bedding Supplies**– The facility maintains a supply of bedding, linen and clothing that exceeds the need of the facility at any one time. The facility has a maximum capacity of 55 beds and maintains at minimum %25 above the level required to operate at maximum capacity.

**1. Accountability** – Residents will be given the standard issue of clothing during admission. Any exceptions will be noted. Residents will be accountable for the destruction of any items issued to them to include, but not limited to, clothing bedding linen or mattresses.

**2. Protective Clothing**– Residents shall be issued protective clothing if it is required to perform the normal daily/weekly cleaning on the resident units. Residents are not allowed to work in the kitchen, garage or in any other part of the physical plant they are not normally allowed to go.

**3. Maintenance of clothing linen and bedding**– The facility provides for regular laundering of resident clothing, bedding and linen.

**a.** Resident T-shirts underwear and socks are laundered each night, residents jeans are laundered every other night, but not less than three times per week. Residents receive a clean T-shirt, underwear and socks each night after showering.

**b.** Residents are issued clean blankets, sheets and pillowcases once per week during linen turn in. Staff shall verify that each resident's turns in their soiled linen before any fresh linen is issued.

- c. Residents are never issued a mattress or pillow unless it has been cleaned. Additionally, residents are required to clean their own mattresses at least once a week.
- d. A resident's clothing or bedding may be exchanged sooner if required for medical reasons or at the direction of a Unit-Shift Supervisor. Residents may exchange soiled clothing and bedding in a timely manner if necessary for health reasons. Additionally a resident's personal clothing shall be laundered upon admission to the facility

**B. Clothing, Linen and Bedding Issue** - Upon admission to the facility, each resident is issued a complete set of clean clothing and bedding, consisting of the following:

1. **Standard Issue Clothing**: Each resident, appropriate to gender, shall be issued a(1) T-Shirt, Underwear, Socks, Tennis Shoes (unless he/she wears his/her own tennis shoes), Bra and gown for girls, Jeans (until his/her own jeans can be washed and labeled with his/her name).
2. **Standard Issue Linen** - Each resident shall be issued (2) sheets, (1) blanket.
  - a. Resident bedding and linen shall be exchanged at least once per week or more if necessary to maintain appropriate health and sanitation requirements.
3. **Standard Issue Bedding** - Each resident shall be issued (1) mattress and (1) pillow.
  - b. Resident bedding shall be cleaned at least once per week or more if necessary to maintain appropriate health and sanitation requirements.

Residents are provided with sufficient laundry services to allow them to change their clothing and towel on a daily basis and their bedding linen once a week (Sunday) or more often as required for health reasons. This ensures proper sanitary conditions. If one or more resident need fresh clothing and or bedding more often, the laundry services at Detention are sufficient to meet the need.

Detention Staff members wash residents clothing and blankets subsequent to every release. These items are returned to storage.

## **V. Authority/References:**

Applicable OJA Requirements for Secure Detention Facilities

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-07, 4B-08, 4B-09, 4B-10, 4B-11, 4B-12, 4B-13, 4B-14)

**VI. Enclosures:**

1. Related Form or Forms
2. Report Format
3. Employee Acknowledgement
4. Related documents, maps, instructions, etc.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-04**

## **Residential Housekeeping Plan**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-04</i>
Residential Housekeeping Plan		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure, and practice of the Detention home to provide for regular cleaning of residential areas while maintaining safety and security requirements.**

**I. Purpose:** To maintain the best care, welfare, safety, and security a sanitary environment is necessary. The facility is committed to maintaining the highest standards in residential sanitation and cleanliness. To achieve this, the facility will enact a residential housekeeping plan that will function within set guidelines and shall address daily and weekly cleaning schedules as well as provisions for special projects.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**Simple Green D-** Concentrated deodorizer/disinfectant that has multiple applications and has a chemical composition that renders it harmless if swallowed or splashed into eyes.

**IV. Procedures:**

**A. General Guidelines**

1. **Security** – Security should be maintained at all times during the cleanup period. There should be a staff member in the immediate areas that are being cleaned at all times and residents shall never be left alone with other residents. When residents are allowed to assist with cleaning, they must be directly supervised by staff. While doing clean up residents should clean their own rooms and staff shall keep the children out of the security areas, and keep the doors locked. Staff will issue the exact number of tools (brushes, brooms, etc.), and lock the storage closet while the children are cleaning. Only the items necessary to complete clean up shall be removed from the mop closet.
  - a. If a cleaning detail comprised of not more than 4 residents is selected to clean all individual rooms they are to be directly supervised room by room and no two residents should be in a room alone.
  - b. Room confined residents must clean his/her own room unless the youth's behavior will not allow. Staff should clean the room not other residents.
2. **Safety** – Facility staff are responsible for ensuring a safe environment and that workplace safety measures are observed. **RESIDENTS SHALL NEVER BE ALLOWED TO**

**HANDLE ANY CLEANERS OR DISINFECTANTS.**

3. **Access** - Residents will not be allowed access to any area of the facility where they would not normally be allowed to go. Residents shall not be used as employees and can only assist in clean up of areas they reside in or have regular access to. Involvement of youngsters is subject to completion of school assignments during school days. Cleanup on school days should not interfere with a youngster's school activities.

B. **Daily Clean Up** - Disinfecting of toilets, sinks, floors, and the in restrooms should be done daily. Daily Cleaning consists of the following:

- Individual room swept.
- Fold neatly all covers and nighties.
- Store in one pile in the same place in each of the individual room.
- Sweep, mop, and/or scrub the main bathrooms, hall, and rooms.
- Individual toilets and sinks are scrubbed with disinfectant cleaner.
- The main rest room scrubbed with disinfectant cleaner, including the walls to the shower, the floor of the shower, the fixtures, the sinks, and the toilets.
- Use disinfectant deodorant spray in rooms and hallways.
- Clean the toilet bowl in the resident's room **daily**.
- Holding Cells

C. **Major Clean Up** - Major cleaning of the boy's and girl's wings and other detention areas should take place once each week on the weekend (usually Saturday). Major Clean Up shall consist of the following:

- Sweep, mop, and/or scrub the entirety of every room, including Holding Cells with disinfectant cleaner, including the toilet, sink, and bunk.
- Scrub and disinfect the entire shower area.
- Clean all windows.
- Polish all windows.
- Polish all metal.
- Scrub and disinfect all sinks and toilets, inside and out. In any of the toilets that are stained, flush water out of the toilet, and use disinfectant (as directed) to remove the stain. **Only** staff members will use this cleaner, although it is not very dangerous if swallowed, or splashed in anyone's eyes.
- See to it that all storage points are neat and proper.
- Repeat the same procedure above as they apply to the dayroom.
- Spray the entire area with disinfectant air deodorant spray.
- Sweep the entire area with a dust mop.
- Clean all other windows in the Detention area with disinfectant window cleaner.
- Polish and clean all metal in the detention area.
- Clean properly and thoroughly all other detention restrooms, inside and out.
- Take all containers (clothing, trash, etc.) and disinfect, clean, and deodorize each item.
- Sweep and mop the gym.

D. **Materials** - Storage of all clean equipment is important. The wet rood is to be hung over the sink, with the head of the rood at the top. Brooms are to be stored in the broom closet with



the head up. Allow the hose to drain in the sink; keep the floor in the storage room closet dry at all times. Empty, rinse, and store the mop bucket upside down over the sink.

**E. Additional Assignments** - Administrative staff or Unit-Shift Supervisors may designate special assignments for staff and residents that may entail decorating for seasonal appreciation and/or special cleaning details that are not performed on a daily or weekly basis, but are suggested or required under the facility's master housekeeping plan. Do any and all other assignments on a priority basis. In essence, all that can really be said is to what it takes to get things clean, and to keep things clean."

**1. Tulsa County Janitorial Staff** - The floors shall be mopped and stripped of old wax periodically by Tulsa County Janitors. Materials for this purpose will be provided and maintained by county janitorial department. All materials not used, or no longer used, will be returned to the janitorial supply by Tulsa County janitors.

## **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-05)

**VI. Enclosures:** None.

## **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-06.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Institutional Operations**

**04-05**

**Noncombustible Containers**

## Tulsa County Juvenile Detention Home Policy and Procedures

Institutional Operations		<i>Policy</i>	<i>04-05</i>
Noncombustible Containers		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

It shall be the policy, procedure, and practice of the Detention Home to equip the facility with noncombustible refuse containers at accessible locations throughout the living quarters of the facility. Special containers shall be provided and utilized for flammable liquids and for rags or other materials used with flammable liquids. *The Detention Home is a Non-Smoking facility,* but shall provide noncombustible receptacles for smoking materials at designated smoking areas located outside the physical plant of the facility.

**I. Purpose:** Facility administrators should plan and execute all reasonable procedures for the prevention and prompt control of fires. The proper and safe containment of flammable materials and the sanitation of such containers are essential activities in fire prevention.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. Trash Receptacles** – Receptacles are located throughout the facility and are monitored regularly by staff to reduce the risk of fire. Additionally, all receptacles are emptied at least daily and the trash can liner is replaced.

**1. Fire Rated Receptacles** - Trash receptacles shall be made of a fireproof material and are located on each unit and in other readily accessible areas. Documentation of fire rating shall be on file and approved by the facility fire and safety officer. These receptacles will be emptied at least daily and the trash can liner will be replaced.

**a.** Any flammable item should be disposed of in a fire rated receptacle only, and then removed from the building.

**2. Exterior Receptacles** - When located outside, trash receptacles have a lid that fits tightly; and all receptacles are emptied at least daily. All noncombustible refuse containers must be emptied daily.

3. **Recycling Receptacles** – These receptacles are marked for recycling and are further identifiable by their blue color. These receptacles are for paper products only and are part of a larger organization program to be environmentally conscience. They are emptied as needed and are placed throughout the facility in specific locations.
  
4. **Facility Smoking Urns** - The facility is a designated non-smoking area and all smoking must be conducted outside the physical plant of the Detention Home. Specific areas located outside the physical plant shall be established and equipped with fire proof smoking urns.
  - a. Smoking areas are located in the rear of the building on the loading dock and on the north side of the building near the main entrance.
  
  - b. Smoking Urns are located at each smoking area and are not to be removed without the approval of the Facility Administrator. They emptied and cleaned as needed.
  
- B. **Staff Responsibility** - To achieve the safest possible environment it is necessary for staff to completely understand their role in facility fire and safety. Any variation of this policy will require an incident report.
  1. **Personal Combustible Material** - While the facility recognizes the rights of all its employees facility safety and security must be the central focus of every staff member of the detention home. Therefore, the control of personal lighters, matches, cigarettes and any such smoking materials shall be a mandatory issue. Staff who elect to bring such items into the facility must:
    - a. Never place smoking materials into trash containers inside or outside the facility.
  
    - b. Secure any smoking materials in the control room and never carry such items in the program.
  
    - c. Use only the smoking urns placed in smoking areas to dispose of smoking materials and any such items.
  
  2. **Disciplinary Action** – Staff who violate this policy and jeopardize the safety of residents and facility staff will be subject to disciplinary action up to and including termination.

## V. **Authority/References:**

10 O.S. 7302-8.3 (Standards of Cleanliness)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3B-04 / **MANDATORY**)

## VI. **Enclosures:** None.

## VII. **Action:**

The facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

The Facility Administrator will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure 09-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-06**

## **Resident Showers**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-06</i>
Resident Showers		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

It is the policy procedure and practice of the Detention Home to provide resident access to operable showers with temperature-controlled hot and cold running water at a minimum ratio of one shower for every eight juveniles. Water for showers is thermostatically controlled to temperatures ranging for 100 to 120 degrees Fahrenheit to ensure the safety of juveniles and promote hygienic practices.

**I. Purpose:** Resident showers should be treated as a high security situation due to the chances of accidental injury to residents and the fact that some offenders may attempt to use showers as an opportunity to attack other residents.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

**A. Evening Showers for Male Residents -** Residents are allowed to take showers no less than once per day.

- 1. General Guidelines** – No less than two male counselors should be supervising showers, on one hall at a time.
  - a.** Only one male should be allowed in the shower at a time. Another male may be at the sink performing their hygiene.
  - b.** Each resident is issued one clean towel and one clean hand towel at each shower time.
  - c.** Residents are issued total body wash, which is a combination of shampoo and body soap, at each shower time. Residents must shower every night.
  - d.** After they are through showering and dried off, they are given a clean T-shirt, underwear, and socks.
  - e.** The dirty towels and laundry are put in a laundry bins or bags to be washed.

- f. After they have put their underwear and t-shirts on and combed their hair, they are to return to their rooms and another boy is brought down to shower.
  - g. Resident's shoes and pants are left outside the door.
  - h. During the shower period, only staff members are to hand out towels, clothing, and grooming supplies.
2. **Staff Responsibility** – Only male staff shall shower male residents. After room checks have been done, the boys are to stand in front of their locked doors.
- a. One at a time they are put in their rooms without tennis shoes, and directed to remove their jeans and t-shirts for staff to search.
  - b. The juvenile will then wait in the locked room wearing underwear, until taken to the shower area.
  - c. When placing a juvenile in his room, make certain to check on the floor and behind the door to be certain that nothing was slipped under the door from the hallway.
  - d. Jeans and shoes should be checked while the juvenile is in his room awaiting showers. After being checked, the jeans and shoes are left outside of the room, by the door.
  - e. Each juvenile has the option to wear or not wear his socks in the room.
- B. **Evening Showers for Female Residents** - Residents are allowed to take showers no less than once per day.
1. **General Guidelines** – No less than two female counselors should be supervising showers, on one hall at a time.
- a. Only one female should be allowed in the shower at a time. Another girl may be at the sink performing their hygiene.
  - b. Each resident is issued one clean towel and one clean hand towel at each shower time.
  - c. Residents are issued total body wash, which is a combination of shampoo and body soap, at each shower time.
  - d. After they are through showering and dried off, they are given a clean T-shirt, underwear, and socks.
  - e. Females are issued nightgowns once per week.
  - f. The dirty towels are put in a laundry bag to be washed.



- g.** After they have put their underwear and t-shirts on and combed their hair, they are to return to their rooms and another girl is brought down to shower.
- h.** Resident's shoes and pants are left outside the door.
- i.** During the shower period, only staff members are to hand out towels, clothing, and grooming supplies.

**2. Staff Responsibility** – Only female staff will shower female residents. After room check is done, place each girl's gown by her door before girls go back to shower.

- a.** Each girl is told to go to her room and stand by her locked door. One at a time they are put in their room, stripped completely, and put only their gown on.
- b.** Watch to see that nothing is being held in their hand. Also, check their hair after they are in their gowns.
- c.** When placing a juvenile in her room, make certain to check on the floor to be sure that she has not slipped anything underneath the door.
- d.** After all girls are locked in their rooms, check all the clothing, leaving jeans, shoes, and bra outside the rooms.
- e.** After all the clothing has been checked, let each girl out to shower, one at a time. While the juvenile is showering, place clean towels, deodorant, toothpaste, panties, socks, and blouse for the next day in the dressing area.
- f.** She is to wear only panties and gown in her room.
- g.** Return her to her room, have her place other clean clothing neatly outside the door, and lock the door.
- h.** Socks may be worn during sleep upon resident's request.

**C. Showers After Gym or Exercise**

- 1. Resident Request** - Security, safety, and supervision will continue to be the priority; however, the shower schedule allows for shower time after gym or strenuous exercise. It is not mandatory that each resident participates; but implemented for residents who request it. Staff will supervise this "supplemental shower period" being sure to follow "Evening Shower" procedure.

**D. Water Temperature** - Water for showers is thermostatically controlled to temperatures between 100 and 120 degrees Fahrenheit. The facility hot water tanks are equipped with temperature regulators that automatically maintain the preset temperature range.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-09.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**04-07**

**Hair Care Services**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>04-07</i>
Hair Care Services		<i>Current Revision</i>	<i>11/16/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the Detention Home to provide access to hair care services to juveniles placed in custody.**

**I. Purpose:** Hair care services are provided by the facility in accordance with 10 O.S. 7302-6.3 and Office of Juvenile Affairs rules for Juvenile Detention facilities. Residents are allowed to maintain their hair in any fashion they choose, so long as it does not represent a safety or security risk.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

#### **A. General Guidelines**

1. **Access to Services** - Hair care services are provided for residents at the detention facility. Each request will be evaluated on its own merit by the Unit Shift Supervisor. Denial of a hair cut must be justified by clear and convincing evidence, and documented in the resident's file.
2. **Qualifications** - In the interest of detention security the barber or beautician must be 21 years of age and be approved by the facility administration. The facility reserves the right to request proper legal I.D. and to conduct a criminal record check on prospective hair care professional. The barber or beautician must present proof of state license to administrative staff before being allowed to work with juveniles.
3. **Review** – This procedure will be reviewed annually. Any problems in the hair care procedure and practice must be brought to the attention of the Unit-Shift Supervisor and the Program Manager.

#### **B. Providing of Services** -

1. **Coordinating Services** - The Detention Home, through the Program Manager, shall coordinate the time and date of services. Hair care services are provided through a contract service provider. Services are provided 2 times per month. A Unit-Shift Supervisor will make a list of names of requests for hair care.

2. **Facility Access for Service Providers** - The facility will provide an available interview room, for no longer than three hours for barber services. The hair cut must be supervised by a detention counselor. If a female resident has a haircut it is "mandatory" that a female detention counselor be present, especially if the hair stylist is a male. The Authorized Visitor's Log must be signed by all persons giving haircuts.
  
3. **Limitations** - Hair cut style will be limited to only a shorter cut of the "existing style cut" that the resident has. No "buzz cut" or drastic departure from that style cut may be made. Such as long hair to a "Bald Cut." Only a conservative modification of the hair is acceptable, whether male or female resident.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-15)

**VI. Enclosures:** None.

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-10.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-08**

## **Water Supply**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-08</i>
Water Supply		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**The Detention Home will ensure that the facility's potable water source and supply, which is provided by the Tulsa public water department, is annually approved by the Oklahoma Department of Environmental Quality to verify it to be in compliance with federal and state water quality standards.**

**I. Purpose:** Safe drinking water is basic to human health and should be provided in any facility operation.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:** The detention home receives its water from Tulsa Public Water Works and will seek independent verification that water provided meets provisions of the Federal Safe Drinking Water Act.

**A. Administrative Responsibility** - Not less than annually the Facility Administrator, or his designee, will contact the Oklahoma Department of Environmental Quality and obtain written verification of the appropriateness of facility access to potable water. This communication will verify that the facility's water supply meets federal and state guidelines.

**B. Staff Responsibility** – Any staff member that becomes aware of a situation that may affect the drinking water or access to safe drinking water will report it to the Facility Administrator at first knowledge.

**V. Authority/References:**

Federal Safe Drinking Water Act

10 O.S. 7302-8.3 (Standards of Cleanliness)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4B-03 / **MANDATORY**)

**VI. Enclosures:** None.

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:09-13.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



# **Facility Services**

**04-09**

**Responsible Healthcare Authority**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-09</i>
Responsible Healthcare Authority		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home to provide a designated health authority with the responsibility for the facility's healthcare delivery system as established by written agreement, contract, or job description. The facility's health authority may be a physician, health administrator, or health agency. However, if the designated health authority is other than a physician, final healthcare judgement for the facility will rest with a single designated physician.**

**I. Purpose:** The responsibility of the health authority includes arranging for all levels of healthcare (medical, dental, mental health) and assuring the quality of all health services and that facility residents have access to them.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Health Care** – The sum of all actions taken, preventive and therapeutic to provide for the physical and mental well being of facility residents. Health care, among other aspects includes medical, psychiatric, and dental services, personal hygiene, dietary and food services, and environmental conditions.

**Local Responsibility** – means that the health authority is someone who is on-site at least part-time and provides primary health care for the residents of the facility.

**IV. Procedures:** The Facility Administrator will be responsible for ensuring the presence of a medically trained and professionally licensed individual responsible for all facets of the medical program and for verifying the credentials of all medial staff. The Facility Administrator may, with permission of the director, enter into written agreements with outside providers or facilities make contracts with individual physicians, dentist or mental health professionals in order to meet all levels of care.

**A. Responsible Health Authority** – Should be a physician whose responsibilities include arranging for all levels of care and ensuring quality and accessibility for all health services provided to juveniles. The responsible medical authority will be a medically licensed and able to practice medicine in the State of Oklahoma. The medical authority will have local responsibility for the all residents of the facility and will be qualified to

act as responsible medical authority given a contract, job description or written agreement with the facility. Additional supervision responsibilities shall include but are not limited to:

1. **Health Administrator** – A person, designated by the Facility Administrator, who by education and experience, meaning a licensed practical nurse, a registered nurse, physicians assistant, a nurse practitioner or another physician authorized to practice medicine in the State of Oklahoma, will assume responsibility for arranging for all levels of health care and ensuring quality and accessibility of all services provided to juveniles if the responsible physician is unavailable, under the general supervision of the responsible physician.
2. **Private and Family Physicians** – The activities of private physicians working with residents in detention will be coordinated through the responsible physician. The Nurse will screen all residents with pre-existing illness or injury which may require medication or additional treatment. Medication prescribed by a private physician will be verified by the facility nurse or other medically trained staff. All treatment or medication will be continued as necessary. The resident will be examined by the facility physician if complications or additional patient complaints occur during the residents stay in the facility. Subsequent treatment or a change in treatment will be coordinated through the private physician.
3. **Medical Records** - Access to the medical records in detention is controlled by the supervising physician. The physician-patient privilege is the principal of law which protects the patient from disclosure of confidences entrusted to a physician during the course of treatment. The physician has the authority to discuss medical matters with appropriate detention home personnel. This is necessary because the facility, as a temporary custodian, assumes responsibility for providing routine, preventive and emergency medical care during the period of custody. All measure of procedure in maintaining the confidentiality of all records in detention will be strictly adhered to by all staff. This is inclusive of medical information.

**Medical Consent** - The Juvenile Medical Consent and Release of Information form will be completed on all residents in detention. The parent or legal guardian's signature authorizes that medical information about their juvenile be released to detention. A copy of the Medical Consent form will be maintained in the resident's medical section of the detention file. (See attached form 2255-Rev 7-84) State [Statute Title 10-1107 D](#) also authorizes the release of pertinent medical information to the Juvenile Bureau, as deemed necessary, in the interest of the juvenile's health. Stating that all such information will be held in strict confidence. Access to any medical information about residents in detention may only be authorized by the responsible physician and/or the Chief Judge of the Juvenile Bureau, or the Facility Administrator.

- B. **Credentials** – The Facility Administrator, or his designee, will verify the credentials of all medical staff annually. All medical staff must have and maintain appropriate licensing certifying them to practice medicine in the state of Oklahoma.

- C. **Medical Autonomy** – Matters of health care are the sole provinces of the responsible physician and other health professionals. In such matters, neither administrators nor staff may countermand or adjust medical orders of the responsible physician or medically licensed staff. However, security policy and procedures that apply to facility personnel also apply to health personnel.
- D. **Facility Administrator's Authority** – The Facility Administrator reserves the right to refuse admission or request for transfer of a juvenile who because of mental illness, developmental disability, physical condition or need of detoxification services, cannot perform adequately in detention, or who for other reasons is in need of more sophisticated service than is available in detention.
1. **Coordination with the Juvenile Bureau** – Such a determination shall be made after consultation with the responsible physician. Notification to the appropriate Juvenile Bureau staff and Judge, if required, shall be completed before the resident is moved. The rationale for the refusal or request for transfer shall be documented and submitted to Juvenile Bureau staff and or the appropriate judge upon their request.

V. **Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-01 / **MANDATORY**, 4C-42)

VI. **Enclosures:** None.

VII. **Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-01.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-10**

**Physician Facility Relationship**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-10</i>
Physician Facility Relationship		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the facility to govern the relationship between the facility and the responsible Health.**

**I. Purpose:** The Physician responsible for the Tulsa County Juvenile Detention Home Medical and Health Services will not have any restrictions imposed upon him or her by the facility administration regarding the practice of medicine. The provision of care is a joint effort and can only be achieved with mutual trust and cooperation. Medical services of the physician are provided through written contract, or agreement with a physician or Agency which provides medical services.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any physicians or medically trained personnel with permission to provide medical care in the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

**A. General Guidelines:**

1. **Medical Judgment** - Medical, including Psychiatric and Dental matters, involving medical judgment is the sole province of the responsible Physician, Facility Nurse and Dentist, respectively.
2. **Safety and Security** - Security regulations that are applicable to Detention personnel also apply to Health Care Personnel.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-02)

**VI. Enclosures:** None.

**VII. Action:**

Facility Administrator will be responsible for compliance monitoring of this policy.

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**Policy: Physician Facility Relationship****Policy Number: 04-10**

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Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-02.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-11**

**Administration of Treatment**



## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-11</i>
Administration of Treatment		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

When facility staff (other than a licensed physician, dentist, psychologist, optometrist, podiatrist, or other qualified health care provider) must provide health care treatment; it shall be the policy, procedure and practice of the Detention Home to perform such care only pursuant to approved written standing or direct orders by personnel authorized by law to give such orders. The facility will allow nurse practitioners and physician's assistants to practice health care treatment within the limits of applicable laws and regulations.

- I. Purpose:** Any treatment that is administered by facility personnel other than medically licensed staff must be under standing medical orders or direct orders from the responsible health authority, who is a physician. Provisions have been made for the short term medical, dental and mental health care services under the supervision of the responsible physician, facility nurse and Detention Facility Administrator. All direct care detention staff shall be familiar with all medical procedures. The facility Nurse shall be the first medical authority to screen of residents request or referrals for medical services. In their absence, detention staff will follow standing orders and procedures in the Health care section of the Detention Home manual. All staff must be familiar with procedure to be followed in medical emergencies.
- II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Standing Orders** – A collection of written definitive treatments of identified conditions used for on-site treatment of emergency conditions for any person having the condition to which the order pertains. Standing orders will be reviewed and approved by the responsible health authority, who is a physician, annually.

**Direct Orders** – Are written specifically for the treatment of one person's particular condition by the responsible medical authority, who is a physician, or other medically licensed staff.

### **IV. Procedures:**

- A. Medical Standing Orders** - The Medical standing orders for the Detention Home is collected and approved information that provides a criterion to assist detention staff in

delivering 24 hour health care to residents. It is in conjunction with the health care service policy and procedures maintained in detention home manual. These standing orders are approved by the responsible health authority, who is a physician, as are all medical policies and procedures. Detention staff shall only provide health care consistent with medical standing orders and First Aid and CPR training.

1. **Content** – Medical standing orders will address the following areas:

- a. Standing Orders Issue of Medication Formula Description
- b. Available over the Counter Medications
- c. Medical Records
- d. General Guide for Conferences
- e. Emergency Procedures for Major and Minor Injuries or Illness
- f. General Care for Common Conditions

2. **Review** – The Responsible Health Authority, who is a physician, will review the content of the standing orders and make changes or updates as may be required. Medical Standing Orders will be reviewed and approved annually by the Responsible Health Authority.

B. **Direct Orders** – Direct medical orders address the specific needs of an individual resident and can only be issued by staff medically qualified to do so. Direct medical orders may include specific treatment protocols, medication, or other actions necessary for proper medical attention.

1. **Authority** - The Responsible Health Authority, who is a physician, will issue direct orders for the treatment of residents in accordance with recognized state medical laws. Additionally, other trained professionals including nurses, dentist, psychologist, optometrist, podiatrist or other independent providers, such as the resident's personal physician, may issue direct orders as they pertain to the health care of a resident. Facility staff will follow the medical orders and directions of licensed medical professionals.

C. **Training** - Detention staff will receive training on Standing Medical Orders during orientation and copies of the standing orders shall be placed in easily accessible locations for reference. The facility Nurse, Unit-Shift Supervisors, and Med-Tech trained staff will be trained on the following:

1. **Obtaining Medical Consent**
2. **Health Appraisal Data Collecting**
3. **Obtaining non emergency medical services**
4. **Obtaining Dental services**
5. **Emergency Medical Services**

6. Deciding degree of emergency in illness and injury
7. Dental screening, prevention, examination and treatment.
8. Providing chronic care
9. Notifying a parent or guardian in case of serious, injury or illness or death
10. Providing medical preventive care
11. Screening, referral and care of mentally ill and retarded juveniles.
12. Informing staff of special medical problems
13. Implementing special medical programs.
14. Immunizing
15. Delousing procedures
16. Detoxification procedures
17. Medication, receiving/documentation/administration

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-11 / **MANDATORY**)

VI. **Enclosures:** None.

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-03.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-12**

**Participation in Research**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-12</i>
Participation in Research		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy of the Detention Home that no resident shall be used for medical, pharmaceutical, or cosmetic experiments. This policy does not preclude individual treatment of a juvenile based on his/her need for a specific medical procedure that is not generally available.**

**I. Purpose:** No juvenile in temporary custody of the Tulsa County Juvenile Detention Home will be subjected to any form of medical, pharmaceutical, or cosmetic testing for experimental or research purposes. This policy includes both mandatory and voluntary testing. This policy does not preclude individual treatment of a resident based on his or her need for a specific medical procedure that is not generally available. Any such treatment must be approved by their physician. Administration of these medications is not allowed for disciplinary reasons or for the purposes of program management.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:** None.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-43 / **MANDATORY**)

**VI. Enclosures:** None.

**VII. Action:**

The facility Accreditation Manager will be responsible for compliance monitoring of this policy.

The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-04

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-13**

**Emergency Medical/Dental/Mental  
Health Care**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-13</i>
Emergency Medical/Dental/Mental Health Care		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

It shall be the policy, procedure and practice of the Detention Home to provide 24-hour emergency medical, dental, and mental health care for residents. Healthcare availability shall be outlined in a written emergency plan that includes arrangements for following:

1. On-site emergency first aid and crisis intervention.
  2. To call 911 in all life threatening emergencies and when to summon the use of an emergency medical vehicle (ambulance) to evacuate a resident from the facility.
  3. When to transport a non-life threatening emergency and the utilization the facility's emergency vehicle to evacuate a resident from the facility.
  4. Which hospital(s) emergency rooms or other appropriate health care facilities to utilize in a medical, dental, or mental health emergency.
  5. The availability and emergency contact communication numbers for the facility's designated physician or nurse, dentist, or mental health professional.
  6. The specific security measures to use when transporting or transferring a resident in an emergency and subsequent release authorization procedures to utilize when appropriate.
- I. **Purpose:** In the event of a medical emergency affecting the health and safety of a detention home resident, it is imperative to recognize the signs and symptoms contributing to the crisis, and have a knowledge of actions required to provide immediate care and transfer to the proper medical provider.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

III. **Definitions:**



- **Life Threatening Emergency:** is a situation that presents a serious threat to the life of a resident and requires immediate medical intervention from licensed emergency medical professional to avoid serious injury or death.
- **Minor Emergency:** A medical emergency that will require a diagnosis and treatment by a physician at the hospital, but the nature of the illness or injury will not require an ambulance or be adversely affected by the passage of time.

#### **IV. Procedures:**

##### **A. Action For Emergencies**

1. **Training** - All direct care staff will maintain certifications in First Aid/CPR from a certified trainer of a nationally recognized system.
  - a. All staff will receive training on emergency medical procedures, emergency medical transports, medical standing orders, and security during transports.
2. **Staff Responsibility** - In an emergency situation, where professionally licensed staff are not available, any staff member may render initial first aid/CPR measures per their level of training.
  - a. A staff member, having discovered a situation requiring First Aid or CPR should locate the nearest co-worker or supervisor and advise them of the situation. One staff member should remain with the injured or ill resident assuring him/her that treatment is forth coming. Staff should administer First Aid and CPR as required.
  - b. A staff member will inform a supervisor and the supervisor will assess the situation and direct the main control operator to call for emergency services if necessary.
  - c. The supervisor will describe the nature of the emergency to the dispatcher.
  - d. Staff will continue First Aid and CPR until professional medical assistance arrives per their training.
  - e. If a supervisor is not readily available and the situation is deemed a life threatening emergency staff will direct the main control operator to contact emergency medical services.

- B. Emergency Medical Transportation** -In the event of a medical emergency affecting the health and safety of a detention resident, it is imperative to recognize the signs and symptoms contributing to the crisis, and have knowledge of actions required to provide immediate care and transfer to the proper medical provider. A nationally recognized system of C.P.R. and First Aid Training is given to detention staff to assist them in proper identification of and response to a medical emergency in the facility. The proper

response is determined by the nature of the illness or injury. Staff must evaluate the crisis to be either Life Threatening (requiring an ambulance) or minor-emergency (in which transportation is provided by facility staff and time is not a major factor).

**1. Life Threatening Emergency**

- a. Administer First Aid and C.P.R. as required. A staff member should remain with the injured or ill resident assuring him/her that treatment is forth coming.
- b. Main Control Operator calls 911 for an ambulance to transport.
- c. Main Control Operator describes the nature of the emergency giving the location to the dispatcher.
- d. Main Control Operator advises the Detention Facility Administrator immediately.
- e. Main Control Operator gathers appropriate forms to take to the hospital (Resident's Medical Release Form, Form 2225, a copy of the relevant sections of Resident's Medical Record file, a copy of Oklahoma State Statute Title 10-7303 1.1 from the main control room.
- f. Main Control Operator contacts parent or legal guardian advising of emergency and direct them to meet our staff at the hospital.
- g. The Intake Counselor or Detention Counselor must accompany the resident to the hospital and remain until the medical authority makes a diagnosis and treatment determination (admission to hospital or return to detention). The emergency room will give you a written release to return to detention with the resident.
- h. If available, the parent or legal guardian must sign necessary hospital forms to include authorization for treatment. If the physician determines that immediate treatment is necessary, then in the absence or unavailability of parent or guardian the Juvenile Bureau Intake Counselor or Detention Counselor has the statutory authority to authorize treatment. Explanation of such authority is outlined in the copy of Oklahoma State Statute Title 7303 1.1 "as peace officer or employee of the court."
- i. Staff should present their Juvenile Bureau I.D. and the residents Medical Consent form to the medical personnel. If this documentation is unsatisfactory to the physician you should contact your Supervisor, Program Manager who will contact the Judge to authorize the physician by phone to render the required treatment upon his authority.
- j. Staff should return all necessary medical forms to detention, both those taken from detention files, and hospital forms documenting treatment and convalescent care.
- k. Written Incident Reports shall be prepared by staff involved and forwarded to the

Daily Shift Log, resident's file, and the Facility Administrator.

2. **Minor Medical Emergency** - This is a medical emergency that will require diagnosis and treatment by a physician at a hospital, but the nature of the illness or injury will not require an ambulance or be adversely affected by the passage of time. Our agency staff, or detention staff, will provide transportation. The Detention Home vehicle is assigned to detention for such emergencies and always parked in the Southeast parking lot. The assigned key located in the main control key cabinet. It is stored in the Detention Control room key cabinet. It should be signed out in the Key Check Out Log anytime it is used.
  - a. The intake staff or probation staff on duty may arrange for Tulsa County Sheriff Office to transport to and from hospital. The Detention Program Manager may also assist in facilitating transportation by Tulsa County Sheriff Office. This should be coordinated between Intake, Detention and the Facility Administrator or the superintendent's designee.
  - b. In minor-emergency situations follow the preceding procedures for Life Threatening Emergency, without the telephone call to 911.
3. **Security During Transport** - To ensure the health and welfare of residents and staff during emergency medical transports the following is to occur. The use of mechanical restraints during transport are authorized and required. Staff transporting a resident will wear Tulsa County Juvenile Detention Home identification and may be required to carry a facility badge.
  - a. Having been notified of a minor emergency situation, or at the request of the responsible health authority, the unit-shift supervisor or program manager shall coordinate with relevant agency and outer agency personnel to insure all proper notifications are made before the resident is transported.
  - b. The facility vehicle is equipped with special safety features that would allow one resident to be safely transported by one staff member; however, if dealing with a resident believed to be an unusually high security risk, additional staff maybe assigned to assist in the transport of the juvenile.
  - c. Anytime a resident is transported by facility staff the juvenile will wear leg restraints, handcuffs and waist restraints. At times it maybe necessary to transport a resident with medical situations that may hinder the use of restraints. Oversized handcuffs and leg restraints are available if necessary.
  - d. Before leaving the building staff shall complete the Temporary release form and insure that he/she has all necessary medical referrals, copies of relevant health records and a copy of OSC Title 10 7307 1.1 authorizing staff to seek medical attention for the resident.

- e. The juvenile being transported should always sit in the back seat on the passengers side. After escorting the resident to the vehicle and strapping him/her in, staff will insure that the seat belt fits appropriately.
- f. While the resident is in the medical facility, he/she remains in the custody and presence of the staff member conducting the transport. While every effort should be made to accommodate the needs of medical staff security must be maintained.
- g. If medical staff indicate that it may be necessary to admit the juvenile, staff will contact the facility. The Facility Administrator or his designee will be notified and if necessary the residents' judge will be contacted.
- h. Residents returning to the facility must return with a medical release or doctors instructions. Staff will physically escort the resident into the facility and check him/her in through main control, record the outcome of the transport on the temp release form and sign it.
- i. After the resident is secured in the detention admission area, the restraints may be removed. The resident will be returned to his/her unit and the unit-shift supervisor will be advised.

**C. Emergency Medical Arrangements** – The facility will maintain agreements with local medical organizations to provide emergency care that the facility is unable to provide.

- 1. **Emergency Medical Care** – Tulsa Regional Medical Center (TRMC) is the designated emergency medical care facility for the Detention Home. TRMC is capable of providing emergency dental and mental health care if required. The Facility Administrator or his designee will verify accessibility to its services for residents annually.
  - a. TRMC has a behavioral health center which provides mental health assessments, placement or referral for residents with emergency mental health needs.
  - b. The Tulsa County Health Department provides dental care to residents referred by the facilities responsible health authority, who is a physician.
  - c. Mobile Psychiatric evaluations may be utilized if available.

**V. Authority/References:**

10 O.S. 7303-1.1 (Authority to Seek Emergency Medical Care)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-26 / **MANDATORY**)

**VI. Enclosures:** None.

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-05

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-14**

**Health Screening  
(Intrasystem Transfer)**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-14</i>
Health Screening (Intrasystem Transfers)		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

Upon an intra-system resident's transfer to this facility, it shall be the policy, procedure and practice of the Detention Home to require a medical, dental, and mental health screening. Either the facilities nurse/qualified health care professional or health-trained staff will perform this health screening. All information and findings are recorded on screening form(s) approved by the facility's designated health authority. The facility's intra-system health care screening and related form(s) must include at a minimum the following:

### Inquiry Info

1. Whether the intra-system transfer resident is being treated for a medical, dental, or mental health problem.
2. Whether the intra-system transfer resident is presently on medication.
3. Whether the intra-system transfer resident has any current medical, dental, or mental health complaint.

### Observations

1. Of general appearance and behavior.
2. Of physical deformities or limitations.
3. Of evidence of abuse or trauma.

**Medical Disposition of Resident**

- 1. Placed with general population.**
- 2. Placed with general population with an appropriate referral for health care service.**
- 3. Transferred or transported to an appropriate health care service provider for emergency treatment.**

**I. Purpose:** Through screening of intra-system transfers is necessary for the detection of juveniles who pose a health and /or safety threat to themselves or others and who may require immediate medical attention.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

**A. Detention Home Health Record** – All resident shall have a health screening performed by a facility staff member certified in CPR and First Aid and capable of identifying critical and serious conditions that would require immediate medical attention and disallow a resident's admission to the facility until a medical clearance is received. Juveniles deemed unable to be admitted until a medical release is received. The health screening shall be completed and documented on the standard Detention Home Health Form (FORM 752), which as been approved by the responsible medical authority.

**1. Staff Responsibility** - This medical form must be completed on all juveniles prior to each admission to Detention according to the following practice.

**a.** Each section must be answered, or recorded "unknown", if resident cannot recall the information.

**b.** Staff must date and sign this form upon completion.

**c.** The nurse will review and assess the Health Record on all residents. The health appraisal section on vital signs will be completed by the nurse. She will also recheck height and weight that is recorded at the time of admission.

**d.** Be sure to note any visible injury and record it on the medical notes form.

**B. Detention Reception Sheet** – The Detention Home Reception Sheet (Form760) shall be completed indicating a resident's medical disposition, regarding his/her release into the



program with out restriction, referral to an appropriate emergency medical service or admitted to the program and referred to the nurse.

**C. Initial Nurse’s Medical Review and Evaluation**

1. **Initial Medical Evaluation** - Each resident, admitted to detention must be referred to the nurse for medical screening within 72 hours for the purpose of the following:
  - a. To review the Detention Home Health Record (Form 752) completed by Detention counselors at each admission.
  - b. To interview each resident about his/her state of health and conduct a brief examination.
  - c. To check and record vital signs of blood pressure, temperature, pulse and respiration.
  - d. To check and record height and weight.
  - e. To determine if the resident should be referred to the physician for further examination or testing if necessary.
2. **Nurse’s Referral Sheet** - Detention Counselors will enter each admitted resident's name on the Nurse Referral Sheet to ensure the following.
  - a. "Sick Call" is 8:00 a.m. to 10:00 a.m., Monday through Friday. Detention staff will provide the nurse with the Referral Sheet Folder and each Resident Medical File of the referred residents, which includes all medical data.
  - b. The nurse will conduct the medical screening, record necessary data, and place the files in the active medical records section. Detention will be advised of the names of residents to be seen that day by the physician or nurse.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3B-05 / **MANDATORY**)

**VI. Enclosures:**

Detention Home Health Record (Form 752)  
Nurse’s Referral Sheet (Form 2709)  
Detention Reception Sheet (Form 760)

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

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**Policy: Health Screening (Intra-system Transfers)    Policy Number: 04-14**

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The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure 10-06

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**TULSA COUNTY JUVENILE  
DETENTION HOME HEALTH RECORD**

Name		Address		City	State
Race	Sex	Height	Weight	Hair	Eyes
Age	Birthdate	Identification Marks			
Father			Address		Phone
Mother			Address		Phone
Other			Address		Phone
School		Grade	Social Security Number		Religion
Place of Birth			Employment		
Date Admitted		Day of Week		Time	A.M. P.M.
Staff Completing Initial Health Record			Nurse Taking Vital Signs		Date Taken
<b>SCREENING-VISION &amp; AUDIOMETRIC TESTING</b>			<b>VITAL SIGNS</b>		
Results:		1 Results	Temp.	!Rasp.	jPulse
			Blood Pressure		

**HEALTH HISTORY**

A. FAMILY HISTORY	YES	NO	WHO	B. PERSONAL HISTORY	YES	NO
Cancer				Measles		
Diabetes				Mumps		
Tuberculosis				Chicken Pox		
Heart Disease				Asthma		
High Blood Pressure				Seizures or Fainting		
Stroke				Diabetes		
Psychological Disorder				Whooping Cough		
Drug Addiction				Discharge from Vagina or Penis		
Alcohol Addiction				Venereal Disease		
<b>C. IMMUNIZATIONS</b>	<b>YES</b>	<b>NO</b>	<b>AGE</b>	Other Infectious Disease		

D. MENSTRUAL HISTORY
Skin Test Smallpox Polio OPT (3 in 1) 3 Day Measles Hard Measles
Menses began at age _____ • Periods are (regular-irregular) occurring every _____ days with _____ days duration. Row is (heavy-moderate-light). Cramps _____ . Date of last period _____ . Ever _____ been pregnant Yes. No. If yes, (miscarriage-delivered). Date _____

**E. GENERAL HEALTH**

(1) Are you Diabetic, Epileptic, or Physically Disabled? — — — — — Describe _____ (2) Medication required _____ (3) <b>Allergies</b> ----- (4) Major Illness or surgeries ----- (5) Do You Smoke _____ Packs per day _____	(6) Any Restrictions of Activities for Medical Reasons — — — — — — 11 Yes, Explain ----- — — (7) Family Physician ----- Date of Last Medical Exam _____ Date of Last Dental Exam ----- Date of Last Eye Exam ----- Do you wear glasses or contacts _____
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DOES JUVENILE HAVE CURRENT MEDICAL, DENTAL, OR MENTAL HEALTH COMPLAINT?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS THE JUVENILE EVER BEEN THE VICTIM OF A SEXUAL ASSAULT? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

IF SO, WHO WAS IT REPORTED TO?

HAS JUVENILE BEEN TREATED FOR, OR DIAGNOSED WITH A MEDICAL, DENTAL OR MENTAL HEALTH CONDITION? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS JUVENILE ATTEMPTED SUICIDE? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

DATE LAST HOSPITALIZED

NAME OF TREATING PHYSICIAN

OBSERVATION OF GENERAL APPEARANCE AND BEHAVIOR

STATE OF CONSCIOUSNESS- AWARE \_\_\_\_\_ INTOXICATED/CHEMICAL \_\_\_\_\_

ALERT  DROWSY  CONFUSED  ABUSE  **D**

CONDUCT GOOD  FAIR  POOR  **D**

TREMORS (Trembling) YES  NO

SWEATING YES  NO  **D**

BODY DEFORMITIES \_\_\_\_\_ NONE  **D**

EASE OF MOVEMENT RESTRICTION  WHERE \_\_\_\_\_ NO RESTRICTION  **D**

CONDITION OF SKIN: List any trauma markings, bruises, lesions, jaundice, rashes, infestations, and needle marks or other indications of drug abuse .....

USE OF ALCOHOL AND OTHER DRUGS

Types of drugs used	Mode of use	Amounts used	Frequency used	Date or time of last use

History of problems that may have occurred after use (e.g., convulsions)

TULSA COUNTY JUVENILE DETENTION  
NURSE REFERRAL SHEET

DATE OF REFERRAL	JUVENILE'S NAME	JUVENILE'S MEDICAL COMPLAINT/SYMPTOMS	DETENTION STAFF REFERRING	DATE SEEN	NURSE'S EVALUATION AND RECOMMENDATION	REFERRED TO PHYSICIAN YES/NO
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# **Facility Services**

**04-15**

**Health Screening  
(New Admits)**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-15</i>
Health Screening (New Admits)		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

Upon a juvenile's arrival to be admitted to this facility (excluding intra system transfers) it shall be the policy, procedure and practice of the Detention Home to require a medical, dental, and mental health screening. Either the facility's nurse or specifically designated health-trained staff will perform this health screening. All screening information and findings will be recorded on approved healthcare form(s). The facility's healthcare screening form(s) for new admissions shall be approved by the facility's designated healthcare authority and must include at a minimum the following:

### Inquiry Info

1. Any current illness and/or health related problems. (To include the option for screening for venereal disease and/or any other infectious disease deemed necessary by medical staff.
2. If the juvenile is presently on medication.
3. Dental problems.
4. Mental health problems.
5. Use of alcohol and/or drugs, which includes the type of drugs used, mode of use, amounts used, frequency of use, date or time of last use, and a history of problems that have occurred after ceasing use. (e.g. convulsions, hallucinations)
6. Past or present treatment or hospitalization for mental disturbance or attempted suicide.
7. Any other health related problem designated to be screened for by the facility's responsible healthcare authority.

### Observations

1. Of general appearance and behavior, which includes the state of consciousness, mental state, conduct, tremors, and/or sweating.



2. **Of physical deformities of the body, ease of movement, and/or any other physical limitations.**
3. **Of evidence of abuse or trauma, photos may be required at the discretion of medical staff.**
4. **Of the condition of the skin, including trauma markings, bruises, lesions, jaundice, rashes, infestations, and/or needle marks or any other indicators of drug use.**

### **Medical Disposition of Resident**

1. **Placed with general population.**
2. **Placed with general population with an appropriate referral for healthcare service.**
3. **Transferred or transported to an appropriate healthcare service provider for emergency treatment.**

**I. Purpose:** Health screening of new admissions allows for a system of structured inquiry and observation designed to prevent those juveniles who pose a health or safety threat, to themselves or others, from being placed in the program with the general population and to rapidly transport or deny admission to those juveniles needing immediate healthcare treatment. This admission health screening can only be performed by the facility nurse or by properly trained and authorized staff members. This health screening must be conducted on all juveniles being admitted to the Detention Home

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

### **IV. Procedures:**

**A. Detention Home Health Record** – All resident shall have a health screening performed by a facility staff member certified in CPR and First Aid and capable of identifying critical and serious conditions that would require immediate medical attention and disallow a residents admission to the facility until a medical clearance is received. The health screening shall be completed and documented on the standard Detention Home Health Form (FORM 752), which as been approved by the responsible medical authority.

1. **Staff Responsibility** - This medical form must be completed on all juveniles prior to each admission to Detention according to the following practice.
  - a. Each section must be answered, or recorded "unknown", if resident cannot recall the information.
  - b. Staff must date and sign this form upon completion.

- c. The nurse will review and assess the Health Record on all residents. The health appraisal section on vital signs will be completed by the nurse. She will also recheck height and weight that is recorded at the time of admission.
- d. Be sure to note any visible injury and record it on the medical notes form.

**B. Detention Reception Sheet** – The Detention Home Reception Sheet (Form 760) shall be completed indicating residents medical disposition, regarding his/her release into the program with out restriction, referral to an appropriate emergency medical service or admitted to the program and referred to the nurse.

**C. Initial Nurse’s Medical Review and Evaluation**

1. **Initial Medical Evaluation** - Each resident, admitted to detention must be referred to the nurse for medical screening within 72 hours for the purpose of the following:
  - a. To review the Detention Home Health Record (Form 752) completed by Detention counselors at each admission.
  - b. To interview each resident about his/her state of health and conduct a brief examination.
  - c. To check and record vital signs of blood pressure, temperature, and pulse.
  - d. To check and record height and weight.
  - e. To determine if the resident should be referred to the physician for further examination or testing if necessary.
2. **Nurse’s Referral Sheet** - Detention Counselors will enter each admitted resident's name on the Nurse Referral Sheet to ensure the following.
  - a. "Sick Call" is 8:00 a.m. to 10:00 a.m., Monday through Friday. Detention staff will provide the nurse with the Referral Sheet Folder and each Resident Medical File of the referred residents, which includes all medical data.
  - b. The nurse will conduct the medical screening, record necessary data, and place the files in the active medical records section. Detention will be advised of the names of residents to be seen that day by the physician or nurse.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-21 / **MANDATORY**)

**VI. Enclosures:**

Detention Home Health Record (Form 752)  
Nurse's Referral Sheet (Form 2709)  
Detention Reception Sheet (Form 760)

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure 10-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**TULSA COUNTY JUVENILE  
DETENTION HOME HEALTH RECORD**

Name		Address		City	State
Race	Sex	Height	Weight	Hair	Eyes
Age	Birthdate	Identification Marks			
Father			Address		Phone
Mother			Address		Phone
Other			Address		Phone
School		Grade	Social Security Number		Religion
Place of Birth			Employment		
Date Admitted		Day of Week		Time	A.M. P.M.
Staff Completing Initial Health Record			Nurse Taking Vital Signs		Date Taken
<b>SCREENING-VISION &amp; AUDIOMETRIC TESTING</b>			<b>VITAL SIGNS</b>		
Results:		1 Results	Temp.	!Rasp.	jPulse
			Blood Pressure		

**HEALTH HISTORY**

A. FAMILY HISTORY	YES	NO	WHO	B. PERSONAL HISTORY	YES	NO
Cancer				Measles		
Diabetes				Mumps		
Tuberculosis				Chicken Pox		
Heart Disease				Asthma		
High Blood Pressure				Seizures or Fainting		
Stroke				Diabetes		
Psychological Disorder				Whooping Cough		
Drug Addiction				Discharge from Vagina or Penis		
Alcohol Addiction				Venereal Disease		
<b>C. IMMUNIZATIONS</b>				Other Infectious Disease		
	YES	NO	AGE	<b>D. MENSTRUAL HISTORY</b>		
Skin Test				Menses began at age _____ • Periods are (regular-irregular) occurring every		
Smallpox				_____ days with _____ days duration. Row is (heavy-moderate-light).		
Polio				Cramps _____ . Date of last period _____ . Ever		
OPT (3 in 1)				been pregnant Yes. No. If yes, (miscarriage-delivered).		
3 Day Measles				Date _____		
Hard Measles						

**E. GENERAL HEALTH**

<p>(1) Are you Diabetic, Epileptic, or Physically Disabled? — — — — — Describe _____</p> <p>(2) Medication required _____</p> <p>(3) <b>Allergies</b>-----</p> <p>(4) Major Illness or surgeries -----</p> <p>(5) Do You Smoke _____ Packs per day _____</p>	<p>(6) Any Restrictions of Activities for Medical Reasons — — — — — — 11 Yes, Explain ----- — —</p> <p>(7) Family Physician ----- Date of Last Medical Exam _____ Date of Last Dental <b>Exam</b>----- Date of Last Eye Exam ----- Do you wear glasses or contacts _____</p>
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DOES JUVENILE HAVE CURRENT MEDICAL, DENTAL, OR MENTAL HEALTH COMPLAINT?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS THE JUVENILE EVER BEEN THE VICTIM OF A SEXUAL ASSAULT? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

IF SO, WHO WAS IT REPORTED TO?

HAS JUVENILE BEEN TREATED FOR, OR DIAGNOSED WITH A MEDICAL, DENTAL OR MENTAL HEALTH CONDITION? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS JUVENILE ATTEMPTED SUICIDE? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

DATE LAST HOSPITALIZED

NAME OF TREATING PHYSICIAN

OBSERVATION OF GENERAL APPEARANCE AND BEHAVIOR

STATE OF CONSCIOUSNESS- AWARE \_\_\_\_\_ INTOXICATED/CHEMICAL \_\_\_\_\_

ALERT  DROWSY  CONFUSED  ABUSE  **D**

CONDUCT GOOD  FAIR  POOR  **D**

TREMORS (Trembling) \_\_\_\_\_ YES  NO  **D**

SWEATING \_\_\_\_\_ YES  NO  **D**

BODY DEFORMITIES \_\_\_\_\_ NONE  **D**

EASE OF MOVEMENT \_\_\_\_\_ RESTRICTION  WHERE \_\_\_\_\_ NO RESTRICTION  **D**

CONDITION OF SKIN: List any trauma markings, bruises, lesions, jaundice, rashes, infestations, and needle marks or other indications of drug abuse .....

USE OF ALCOHOL AND OTHER DRUGS

Types of drugs used	Mode of use	Amounts used	Frequency used	Date or time of last use

History of problems that may have occurred after use (e.g., convulsions)

TULSA COUNTY JUVENILE DETENTION  
NURSE REFERRAL SHEET

DATE OF REFERRAL	JUVENILE'S NAME	JUVENILE'S MEDICAL COMPLAINT/SYMPTOMS	DETENTION STAFF REFERRING	DATE SEEN	NURSE'S EVALUATION AND RECOMMENDATION	REFERRED TO PHYSICIAN YES/NO
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### DETENTION RECEPTION SHEET

JUVENILE'S NAME	(last)	(first)	(middle)	AGE
PARENT/GUARDIAN NAME				PARENT/GUARDIAN PHONE NUMBER
BROUGHT TO FACILITY BY (print) NAME			AGENCY	SIGNATURE

### INVENTORY OF PROPERTY

PERSONAL CLOTHING (Category, Color & Description)	VALUABLES (Ust & Describe Each Item)
	MONEY
	FOREIGN CURRENCY (DESCRIBE)

### DETENTION CLOTHING

STANDARD ISSUE	YES	NO	EXCEPTIONS
<del>STANDARD ISSUE RETURNED</del>	<del>YES</del>	<del>NO</del>	<del>EXCEPTIONS</del>

### ROOM ASSIGNMENT

UNIT	ROOMNUMBER
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### RESTITUTION

LIST OF DAMAGE TO DETENTION PROPERTY OR PHYSICAL PLANT DURING STAY (if any) .

ALL PERSONAL PROPERTY LISTED ABOVE HAS TO BE SECURED BY THE FACILITY STAFF	ALL PERSONAL PROPERTY LISTED ABOVE HAS BEEN RETURNED TO ME.
SIGN IN (Juvenile)	SIGN OUT (Juvenile)
STAFF	STAFF
DATE   TIME	DATE   TIME

# **Facility Services**

**04-16**

**Treatment  
(Direct & Standing Orders)**



## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-16</i>
Treatment (Direct & Standing Orders)		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

When facility staff (other than a licensed physician, dentist, psychologist, optometrist, podiatrist, or other qualified health care provider) must provide health care treatment; it shall be the policy, procedure and practice of the Detention Home to perform such care only pursuant to approved written standing or direct orders by personnel authorized by law to give such orders. The facility will allow nurse practitioners and physician's assistants to practice health care treatment within the limits of applicable laws and regulations.

I. **Purpose:** Any treatment that is administered by facility personnel other than medically licensed staff must be under standing medical orders or direct orders from the responsible health authority, who is a physician.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

### III. **Definitions:**

**Standing Orders** – A collection of written definitive treatments of identified conditions used for on-site treatment of emergency conditions for any person having the condition to which the order pertains. Standing orders will be reviewed and approved by the responsible health authority, who is a physician, annually.

**Direct Orders** – Are written specifically for the treatment of one person's particular condition by the responsible medical authority, who is a physician, or other medically licensed staff.

### IV. **Procedures:**

A. **Medical Standing Orders** - The medical standing orders for the Detention Home is collected and approved information that provides a criterion to assist detention staff in delivering 24 hour health care to residents. It is in conjunction with the health care service policy and procedures maintained in detention home manual. These standing orders are approved by the responsible health authority, who is a physician, as are all medical policies and procedures. Detention staff shall only provide health care consistent with medical standing orders and First Aid and CPR training.

1. **Content** – Medical standing orders will address the following areas:
  - a. Standing Orders Issue of Medication Formula Description
  - b. Medical Records
  - c. General Guide for Conferences
  - d. Emergency Procedures for Major and Minor Injuries or Illness
  - e. General Care for Common Conditions, and available OTC medications.
2. **Review** – The Responsible Health Authority, who is a physician, will review the content of the standing orders and make changes or updates as may be required. Medical Standing Orders will be reviewed and approved annually by the Responsible Health Authority.
3. **Training** – Detention staff will receive training on Standing Medical Orders during orientation and copies of the standing orders shall be placed in easily accessible locations for reference.

**B. Direct Orders** – Direct medical orders address the specific needs of an individual resident and can only be issued by staff medically qualified to do so. Direct medical orders may include specific treatment protocols, medication, or other actions necessary for proper medical attention.

1. **Authority** - The Responsible Health Authority, who is a physician, will issue direct orders for the treatment of residents in accordance with recognized state medical laws. Additionally, other trained professionals including nurses, dentist, psychologist, optometrist, podiatrist or other independent providers, such as the resident’s personal physician, may issue direct orders as they pertain to the health care of a resident. Facility staff will follow the medical orders and directions of licensed professionals.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-11 / **MANDATORY**)

VI. **Enclosures:** None.

## **VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy.

The facility administrator will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-08

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**04-17**

**Medical Services for Female Residents**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>04-17</i>
Medical Services for Female Residents		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It is the policy, procedure and practice of the Tulsa county juvenile detention home to recognize and provide for the special medical needs of female residents.**

**I. Purpose:** Medical service to meet the health care needs of female residents will be provided under the supervision of the responsible medical authority and the Facility Nurse. The facility shall provide resources necessary to maintain the health and hygiene needs of female residents as defined by medical staff.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. General Guidelines**

**1. Pregnancy Management** – The responsible medical authority shall coordinate or provide medical consultation, examination, testing, diagnosis and treatment as warranted. Pregnancy management includes:

- a. Pregnancy testing
- b. Routine pre-natal care
- c. High-risk pre-natal care
- d. Special diet
- e. Recreational needs or restrictions
- f. Management of chemically addicted pregnant resident
- g. Coordinating care with primary care physician
- h. Postpartum follow up

**2. Nursing Services** – The facility Nurse shall be assigned to provide initial health screening, consultation, evaluation and referrals to the physician or proper medical care provider.

**3. Support Services** – Tulsa City-County Health Department Education Division provides lecture and video presentation, question and answer sessions. These occur as one hour class sessions on a rotating schedule.

- a. Domestic Violence

- b. Sexually transmitted diseases
- c. Personal hygiene
- d. Smoking and its consequences
- e. Drug and alcohol abuse
- f. Human growth and development
- g. Contraception
- h. Cancer and self examination
- i. Stress management

**B. Female Hygiene:**

1. **Female Hygiene Products** – Detention staff are not authorized to provide any female resident with any brand of tampons. Sanitary napkins are made available. There will be no exceptions; unless otherwise approved by the responsible medical authority or the facility nurse. Such an exception will be documented in the residents medical file.
2. **Availability** – All necessary feminine hygiene products shall be provided to female residents at their request. They shall be allowed to utilize sanitary napkins in the privacy of their sleeping room and the appropriate amount of time.
3. **Sanitation** – The disposal of used feminine hygiene products shall be disposed of in and orderly fashion compliant with guidelines for blood borne pathogens.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition

**VI. Enclosures:** None.**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure 10-11

Distribution: Detention Home Policy and Procedure

Manual

# **Administration & Management**

**04-18**

**Detoxification**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>04-18</i>
Detoxification		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure and practice of Tulsa County Juvenile Detention Home to recognize its medical limitations in providing care to juveniles who may be in medical crisis due to drug overdose and are in need of detoxification before they can be safely admitted into the detention Home.**

**I. Purpose:** Treatment should be determined on an individual basis and existing community resources should be used whenever possible.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Detoxification** – The process by which an individual is gradually withdrawn from drug or alcohol addiction. (see ACA J DF, 3rd Edition pg. 123)

**IV. Procedures:** Detoxification from alcohol, opiates, barbiturates, and similar drugs is performed at a hospital, prior to admission to detention. Law enforcement personnel who takes the juvenile into custody or the transporting law enforcement personnel must take the juveniles, who demonstrate symptoms of alcohol or drug abuse, to the hospital for medical examination and treatment as deemed necessary by the physician there. Unless otherwise requested by parents or guardians the closest medical facility is generally used by local law enforcement and the detention facility.

**A. Pre-Admission Medical Review** – Every juvenile brought to detention is given a cursory review from a Unit-Shift Supervisor or staff member trained as a Med-Tech. The purpose of this review is to determine if there is any medical reason why a resident should be required to obtain a medical release before entering detention. The facility does not have the level of medical supervision necessary to treat a juvenile in need of a medical detoxification program. If it is determined that a juvenile is so intoxicated that he or she cannot participate in their own admission then the juvenile shall not be admitted. In this instance admitting the juvenile would present an unreasonable risk to his or her safety.

**1. Medically Appropriate for Juvenile detention** – All residents admitted to the facility must be deemed to be medically appropriate for detention by a Unit-Shift Supervisor, the facility Nurse or another staff member who has been trained by the Facility Nurse. Elements to be considered in this determination are level of consciousness, presence of major injuries, communicable diseases or evidence of recent major injuries that have not been medically treated.



2. **Denial of Admission** – Juveniles who are not deemed medically fit for detention, and who have meet the criteria for legal admission into the facility, will be referred to the closest medical facility for examination. If the juvenile is returned to the facility with a medical release signed by a physician indicating that he or she has been treated and is in no immediate medical jeopardy, at that point he or she may be admitted to the facility. No detention staff member is authorized to transport a juvenile who has not been admitted into the facility. No staff member shall knowingly accept a juvenile in need of medical treatment.
3. **Post-Admission Medical Exam** - When a juvenile returns with a medical release stating that he or she has been treated and the medical release also indicates that medical follow up is necessary the juvenile may be accepted and if accepted should be placed on the nurses medical list. Until the Facility Nurse sees the resident any restrictions or orders given by the treating physician shall be in effect. The facility Nurse will review the medical release documentation and examine the resident to determine if referral to the facility physician is necessary. At this time any medical orders or restrictions will be reviewed and facility medical staff with direct Unit-Shift Supervisors on how to proceed with the resident care.

**B. Management of Chemical Dependency**: When medical screening and examination be the Facility Responsible Physician results in a diagnosis of chemical dependency, requiring detoxification for alcohol or drugs, the physician will recommend transfer to a hospital of psychiatric medical services which will be facilitated by the Detention Home and the Juvenile Bureau. The resident may be returned to detention if release from the hospital or psychiatric provider by order of that attending or admitting physician.

1. **Clinical management** – The clinical management of chemically dependent residents will be maintained as a result of that condition being diagnosis by a licensed physician. An individual treatment plan will be coordinated through and supervised by the Detention Home Physician and Nurse. In concert with other medical and mental health care providers, the facility physician will instruct the Facility Nurse and Detention staff to implement and maintain the proper treatment plan; to include pharmacological support if required.
  - a. Any Changes in the health status or adverse symptoms should be reported immediately to the facility nurse or the administrator on call. Additionally, any such changes should be documented in the resident’s medical file and if medical follow up is necessary; the resident should be placed on the nurses’ referral log.
2. **Documentation** - The physician’s medical orders will be carried out and documented by trained detention staff. The resident’s ongoing medical records and progress will be continually monitored by the facility nurse and detention supervisors. All physician encounters will be documented in the resident medical file and will include required referral to specified community resources and Juvenile Bureau staff during the residents stay.
3. **Post –Release Planning** – In order to maintain the best possible continuum of care the medical follow up will be facilitated by the assigned juvenile bureau counselor, OJA worker, parent or legal guardian. The above identified are authorized to have whatever

medical information concerning the resident as will provide for the proper care when out of detention.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF 4C—40, 4C-41)

**VI. Enclosures:** None.**VII. Action:**

Facility Supervisors, the Facility Nurse and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-12.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-19**

**Nurse Referral and Notifications**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-19</i>
Nurse Referral and Notifications		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

The policy, procedure and practice of the Juvenile Detention Home shall provide for an orderly referral of residents with medical complaints to the Facility Nurse and prompt notification of juvenile’s responsible agency and or parents/legal guardian in case of serious illness, surgery, injury or death.

I. **Purpose:** Whenever a resident has a medical complaint or is referred to the facility nurse for serious illness or injury, requires surgery or dies, the resident’s responsible agency, parents or guardian are notified promptly by the quickest means possible. The Agency worker is generally responsible for contacting parents except in an emergency.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

III. **Definitions:** None.

### IV. **Procedures:**

A. Residents medical complaints are monitored and responded to daily by Detention Counselors who, under the supervision of the Facility Nurse, Physician and medical standing orders provide treatment of refer the resident to the nurse for a more complete examination. The nurse may recommend treatment or refer the resident to the physician.

1. **Responding to a resident medical complaint** – When the Detention Counselor receives the medical complaint from a resident they should:

- a. Record the complaint and symptoms on the Medical Record of the individual resident’s file.
- b. Record the complaint on the Nurses Referral Sheet completing all necessary categories.
- c. Advise the Unit-Shift Supervisor of the complaint.
- d. Proceed with Medical standing Orders to treat the complaint, if standing orders are relevant to the complaint. Record all standing orders implemented on the medical record of the detention file.

2. **Sick Call** –Detention staff will provide the Nurses Referral Sheet and bring each referred resident to the nurse on each sick all day. Sick call shall be held by the facility Nurse Monday through Friday 9:00am to 10:00am. At his time resident will meet the facility nurse and have their complaints assessed. The Nurse will them recommend a course of treatment or will refer the resident to the Doctor.

3. **Referral to Physician** – The nurse will complete the Nurse Referral Sheet and make a note in the resident’s medical file.
  - a. The Nurse shall record the date the resident was seen on both forms and initial each.
  - b. Record the evaluation made and recommended treatment on both forms.
  - c. If a resident is referred to the Doctor, the Nurse documents the Nurses referral Sheet under the appropriate category, and references the same in the resident’s medical file.
  - d. The Nurse will advise the Unit-Shift Supervisor or designate of the referral to the Doctor.
  - e. If the nurse refers the resident to an outside physician, for instance the resident’s primary care physician or a mental health professional, then the nurse will immediately inform the Unit-Shift Supervisor or the designate. IF the referral requires transport outside of the facility the Nurse should also notify the Program Manager.
4. **Documentation of Referral** – The Nurse’s Referral Form shall be the primary documentation to Unit-Shift Supervisors and Juvenile Bureau staff that notifies them of a resident’s medical needs.
5. **Notifications to Juvenile Bureau or Outside Staff** – The Nurse will notify the appropriate OJA staff, Intake Counselor, Probation Counselor or DHS staff member if necessary to obtain medical treatment for a resident in the Detention Home. **After notification, the individual counselor or worker is responsible for coordinating medical or mental care outside the facility.**
6. **Resident referral for Transport** –The assigned counselor or bureau staff member who is transporting the resident is required to:
  - a. Obtain a copy of the resident’s medical referral, relevant medical notes, Detention Home Health Form, insurance information and any other relevant information that might be needed during he transport.
  - b. Contact the resident’s worker or parent/guardian to let them know the resident is leaving the building and seeking medical treatment. In some cases the worker or legal guardian must be present to proceed with accessing the required medical or mental health care.
  - c. Obtain a copy of the medical release, prescriptions and any treating instructions before leaving the medical facility.
  - d. Return to the Detention Home with the all medical form copies, medical release form, prescriptions, and treating instructions to give to the Unit-Shift Supervisor or the facility nurse.
  - e. a completed description of all requirements for general residents transport can be found in P&P III, 12-11 (Transporting Juveniles).
7. **Medication or Prescriptions Obtained on Transport** – If juvenile has been returned with medications each pill should be counted and inventoried per standard procedure by the Nurse, Unit-Shift Supervisor or Med-Tech trained staff member.
  - a. Medication will be given in accordance with the prescribing physician’s orders. Any subsequent re-examination to change the orders must be documented in the resident’s file.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-45)

**VI. Enclosures:**

1. Nurses Referral Sheet

**VII. Action:**

Facility Supervisors, Program Manager, and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-13.

Distribution: Detention Home Policy and Procedure Manual

TULSA COUNTY JUVENILE DETENTION  
NURSE REFERRAL SHEET

DATE OF REFERRAL	JUVENILE'S NAME	JUVENILE'S MEDICAL COMPLAINT/SYMPTOMS	DETENTION STAFF REFERRING	DATE SEEN	NURSE'S EVALUATION AND RECOMMENDATION	REFERRED TO PHYSICIAN YES/NO
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# **Administration & Management**

**04-20**

**Health Record Files**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>04-20</i>
Health Record Files		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy procedure and practice of the Detention Home to provide for a standard method of creating medical files, recording entries, and maintaining medical information and documentation that observes state requirements for confidentiality and security of medical files.**

**I. Purpose:** The principles of maintaining an accurate medical records system and observing the confidential relationship between the physician and patient are vital to ensuring the health and welfare of residents in the Detention Home. Thus it is necessary to maintain an active medical records system under security, and completely separate from the resident's confinement record.

**II. Applicable To:** This policy shall apply to all of the Detention Home employees, consultants, and contract personnel and volunteers who work with juveniles.

**II. Definitions:**

- **Confidentiality** – Confidentiality means that no employee, visitor, or volunteer at TCJDH shall make reference outside the facility or court to anything he/she has learned about a resident while visiting/working here. No information about a resident may be revealed to any other person, regardless of his/her relationship to the juvenile, unless said person is the parent, legal guardian, recognized court services counselor or juvenile justice worker of the juvenile and then only within the professional context the facility requires.

**III. Procedures:**

**A. General Guidelines** – The method of recording entries in the record, the form and format of the records, and the procedures for their maintenance and safe keeping are approved by the responsible physician and or the facility health authority.

1. **Confidentiality** – All facility staff are trained in maintaining resident confidentiality of medical information resident information and are required to document this training and their compliance. Failure to abide by the facility guidelines in this area could result in disciplinary action up to and including discharge.
2. **Security of Files** – Facility medical files shall be kept under double lock and key. Facility medical files will color coded blue to make them readily identifiable in an effort to avoid inadvertent disclosure. Facility medical files shall be marked confidential.

3. **Authorized Access** – Medical files within the facility shall be placed in an area of limited access not open to the general public or facility staff. Only those staff that require access in accordance with their duties will be permitted to access resident medical files. A list of the medically authorized staff shall be maintained in the facility clinic by the facility nurse and shall be reviewed by the responsible physician at least annually.

**B. Detention Home Health Record –**

1. **Creation of Resident Medical files** – All direct care staff are trained to complete this task a part of the resident admission process. Resident medical files shall be structured to meet OJA requirements for secure juvenile detention facilities (377:3-13-44) requirements for admission and the format and forms shall be approved by the responsible physician.
2. **Facility Nurses Review** – The Facility Nurse shall review the resident medical file after creation. The nurse will review and assess the Health Record on all residents. The health appraisal section on vital signs will be completed by the nurse or a health trained staff member. She will also recheck height and weight that is recorded at the time of admission.
3. **Detention Home Health Record Form** – This medical form must be completed on every resident during admission in to the facility. Each section must be completed or recorded as “unknown” if the resident cannot recall or doesn’t know. Staff completing the physical review shall be sure to document any visible injury or bruising.

- C. **Transferred and Inactive Files** – Residents being transferred to other facilities shall be sent with copies of their medical records at the request of the receiving facility. The receiving facility has responsibility for maintaining the continuum of care and to do so effectively should have access to the juvenile’s medical records.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-46, 4C-47, 4C-48)

**VI. Enclosures:**

1. Detention Home Record Form
2. Confidentiality Directive

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility

Administor and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-14

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**TULSA COUNTY JUVENILE  
DETENTION HOME HEALTH RECORD**

Name		Address		City	State
Race	Sex	Height	Weight	Hair	Eyes
Age	Birthdate	Identification Marks			
Father			Address		Phone
Mother			Address		Phone
Other			Address		Phone
School		Grade	Social Security Number		Religion
Place of Birth			Employment		
Date Admitted		Day of Week		Time	A.M. P.M.
Staff Completing Initial Health Record			Nurse Taking Vital Signs		Date Taken
<b>SCREENING-VISION &amp; AUDIOMETRIC TESTING</b>			<b>VITAL SIGNS</b>		
Results:		1 Results	Temp.	!Rasp.	jPulse
			Blood Pressure		

**HEALTH HISTORY**

A. FAMILY HISTORY	YES	NO	WHO	B. PERSONAL HISTORY	YES	NO
Cancer				Measles		
Diabetes				Mumps		
Tuberculosis				Chicken Pox		
Heart Disease				Asthma		
High Blood Pressure				Seizures or Fainting		
Stroke				Diabetes		
Psychological Disorder				Whooping Cough		
Drug Addiction				Discharge from Vagina or Penis		
Alcohol Addiction				Venereal Disease		
<b>C. IMMUNIZATIONS</b>				Other Infectious Disease		
	YES	NO	AGE	<b>D. MENSTRUAL HISTORY</b>		
Skin Test				Menses began at age _____ • Periods are (regular-irregular) occurring every		
Smallpox				_____ days with _____ days duration. Row is (heavy-moderate-light).		
Polio				Cramps _____ . Date of last period _____ . Ever		
OPT (3 in 1)				been pregnant Yes. No. If yes, (miscarriage-delivered).		
3 Day Measles				Date _____		
Hard Measles						

**E. GENERAL HEALTH**

<p>(1) Are you Diabetic, Epileptic, or Physically Disabled? — — — — — Describe _____</p> <p>(2) Medication required _____</p> <p>(3) <b>Allergies</b> -----</p> <p>(4) Major Illness or surgeries -----</p> <p>(5) Do You Smoke _____ Packs per day _____</p>	<p>(6) Any Restrictions of Activities for Medical Reasons — — — — — — 11 Yes, Explain ----- — —</p> <p>(7) Family Physician ----- Date of Last Medical Exam _____ Date of Last Dental Exam ----- Date of Last Eye Exam ----- Do you wear glasses or contacts _____</p>
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DOES JUVENILE HAVE CURRENT MEDICAL, DENTAL, OR MENTAL HEALTH COMPLAINT?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS THE JUVENILE EVER BEEN THE VICTIM OF A SEXUAL ASSAULT? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

IF SO, WHO WAS IT REPORTED TO?

HAS JUVENILE BEEN TREATED FOR, OR DIAGNOSED WITH A MEDICAL, DENTAL OR MENTAL HEALTH CONDITION? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN

HAS JUVENILE ATTEMPTED SUICIDE? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

DATE LAST HOSPITALIZED

NAME OF TREATING PHYSICIAN

OBSERVATION OF GENERAL APPEARANCE AND BEHAVIOR

STATE OF CONSCIOUSNESS- ~~AWARE~~ \_\_\_\_\_ INTOXICATED/CHEMICAL \_\_\_\_\_

ALERT  DROWSY  CONFUSED  ABUSE  **D**

CONDUCT GOOD  FAIR  POOR  **D**

TREMORS (Trembling) YES  NO

SWEATING YES  NO  **D**

BODY DEFORMITIES \_\_\_\_\_ NONE  **D**

EASE OF MOVEMENT RESTRICTION  WHERE \_\_\_\_\_ NO RESTRICTION  **D**

CONDITION OF SKIN: List any trauma markings, bruises, lesions, jaundice, rashes, infestations, and needle marks or other indications of drug abuse. -----

USE OF ALCOHOL AND OTHER DRUGS

Types of drugs used	Mode of use	Amounts used	Frequency used	Date or time of last use

History of problems that may have occurred after use (e.g., convulsions)

TULSA COUNTY JUVENILE BUREAU OF THE DISTRICT COURT  
JUVENILE DETENTION HOME  
CONFIDENTIALITY DIRECTIVE

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Written policy, procedure, and practice provide that employees, consultants, and contract personnel who work with juveniles are informed in writing about the facility's policies on confidentiality of information and agree to abide by them in writing per American Correctional Association standard 3-JDF-1C-22.

It is the policy of the Tulsa County Juvenile Detention Center (TCJDH) to maintain strict confidentiality concerning all juveniles and their records. All employees, visitors, and volunteers must be diligent about adhering to this practice. All information regarding Juvenile Court Services' youth and/or their families is privileged information pursuant to Federal Law, Oklahoma State Law, the Office of Juvenile Affairs and Juvenile Court Rules. Any personal information gained or documentation created regarding any juvenile, who is a resident at the TCJDL is privileged information pursuant to all of the above and can not be removed from the facility without the permission of the Superintendent.

Confidentiality means that no employee, visitor, or volunteer at TCJDH shall make reference outside the facility or court to anything he/she has learned about a resident while visiting/working here. No information about a resident may be revealed to any other person, regardless of his/her relationship to the juvenile, unless said person is the parent, legal guardian, recognized court services counselor or juvenile justice worker of the juvenile and then only within the professional context the facility requires.

Within TCJDJL care should be taken to insure confidentiality and privacy when talking with or about residents and/or fellow staff members in settings where residents and/or visitors might overhear. This practice is intended to protect the facility and individual staff from potential liability through reducing the risk of inadvertent disclosures and insure that confidential information, including personal health information, is protected.

Please sign below to indicate that you have read, understood, and agree to comply with the above stated confidentiality/privacy policies. Any deliberate or knowing violation of these policies may result in official disciplinary action, up to and including discharge. Additionally, unlawful disclosures of personal health information could result in legal prosecution and civil litigation against any individual failing to maintain confidentiality.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date Signed

# **Facility Services**

**04-21**

**Special Medical Programs**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-21</i>
Special Medical Programs		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure and practice to provide for special health programs for residents requiring close medical supervision. A written individual treatment plan, which includes directions to the facility nurse, Unit-Shift Supervisors and other line staff regarding their roles in the care and supervision of the patient, is developed for each resident. The facility physician and the facility nurse shall coordinate the care with the appropriate medical professionals.**

**I. Purpose:** All special medical programs will be monitored and supervised by the responsible physician who will see all referrals interviewed and examined by the nurse. Any resident who comes under the category of special medical problems will be referred to the nurse. Medical Standing Orders as well as the Medical and Health Care Services section of the manual specifically reflect procedures to be followed until the residents are examined by the physician. The Facility Nurse, Unit-Shift Supervisor and/or the Med-Tech Trained staff member will be responsible for implementing the physician's orders or standing orders in the event that the resident has not yet seen-the physician.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**II. Definitions:**

- **Prosthesis** - Replacement of a missing part by an artificial substitute.
- **Treatment Plan** – After a medical examination the responsible physician will determine a course of action implementable by the Unit-Shift Supervisors and direct-care staff. The treatment plan shall be designed to maintain the health of the resident and at a minimum have set provisions for emergency care.

**IV. Procedures:**

**A. Chronic Health Problems** - Each juvenile admitted to detention who indicates he/she has a chronic health statue is to be referred to the nurse and seen by the responsible physician at the earliest time available. The physician will recommend orders and guidelines for the chronic condition that detention staff should be aware of. Each juvenile's treatment plan will be based on an individual basis and on the merit of each case. Examples include, but are not limited to, the following:



1. **Epilepsy** - Medication will be reviewed by the nurse and physician. See medical standing orders on emergency treatment procedures.
  2. **Diabetes** - Physician will review the individual juvenile's diet guidelines (800-1500 calories) and the nurse will review with the juvenile his/her injection procedures, time and dosage. Be aware of symptoms of "insulin shock". Insulin shock is the condition resulting from an overdose of insulin resulting in reduction of blood sugar level below normal (hypoglycemia). See medical standing orders on emergency treatment procedures.
- B. Convalescent Care** - Any resident admitted to detention who is recovering from an injury or illness will be seen by the nurse and referred to the responsible physician at the earliest available time. The responsible physician will determine and recommend the proper medical treatment during the convalescent care period. This treatment plan may be coordinated with the previous attending physician to initiate any re-check visits required by that physician. The assigned counselor will facilitate transportation and supervision of these residents to the physician.
- C. Prosthesis and Orthodontic Devices** - Medical and dental prosthesis are provided when the health of the juvenile would otherwise be adversely affected, as determined by the responsible physician. The procedure for acquiring medical prosthesis shall be made available in accordance with the following conditions:
1. **Assessment of Need** - The responsible physician shall determine which cases warrant this treatment, and will recommend that the assigned Bureau Counselor or OJA staff coordinate with the parent or legal guardian, an appointment with a physician or dentist, to facilitate such treatment. The responsible facility physician will coordinate with the resident's primary care physician before a final determination can be made.
  2. **Notification of Parent or Legal Guardian** - The parent or legal guardian must be notified before the facility seeks medical equipment in the form of prosthesis. The parent or legal guardian will be responsible for such medical expenses as it may take to purchase the device. In the event the parent or guardian cannot, or will not pay, the dental services will be provided by the City-County Health Department.
  3. **Documentation** - All determinations shall be entered in the juvenile's medical record, both that of the responsible physician and the resident's primary care physician. Copies of appropriate medical records and medical consent shall be provided by the Detention Home to the assigned counselor and parent or legal guardian transporting the juvenile to the physician.
- D. Disabled Residents** - All disabled and infirm residents shall be cared for appropriate to their needs. Every effort shall be made to allow disabled juveniles to participate in regular programming. Extensive evaluation by Bureau staff and the responsible physician should be conducted to determine if an alternate or more appropriate facility is available in the event the resident is unable to participate in regular programming. Consideration of such transfer must be evaluated on legal status and within the guidelines of State Statutes that may require the security of detention.

E. **Treatment Plan** - This treatment plan may be coordinated with the previous attending physician to initiate any re-check visits required by that physician. The assigned counselor will facilitate transportation and supervision of these residents to the physician.

F. **Security Considerations** – Develop protocols for particular devices as dictated by medical personnel and attending staff.

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-30, 4C-31, 4C-32)

**VI. Enclosures:** None or list them.

1. Treatment Plan (Example).

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-16.

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-22**

**Suicide Prevention and Intervention**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-22</i>
Suicide Prevention and Intervention		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

**It shall be the policy, procedure and practice of the Detention Home provide a written suicide prevention and intervention plan and program that is annually reviewed and approved by the responsible health authority. All facility staff with the responsibility of resident supervision will be advised of the availability of this plan and trained in the implementation of the program, which must include specific procedures for screening, assessment, identification, and supervision of potential “suicide-risk” juveniles. .**

**I. Purpose:** This policy and procedure describes the essential components of the facility’s suicide prevention and intervention plan, and provides written guidelines for the screening, assessment, identification, and management of a potential “suicide-risk” juvenile.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Active Mental Health/Substance Abuse Treatment Information** - a section in the resident’s individual healthcare record maintained in a designated and secure area of the Detention Home which contains mental health and substance abuse information collected during the course of a youth's on-going mental health or substance abuse treatment while in the facility. This active mental health/substance abuse treatment information must be readily accessible to mental health and/or substance abuse professionals working in the facility and also to designated administrative, supervisory or medical staff who have a need for the information in connection with their duty to monitor the youth's progress or to participate in the assessment or treatment of the youth.

**Acute Emotional Distress** - the rapid onset of an intense mental state of arousal, unrest and/or disorganization which is often accompanied by an intense sense of being unable to cope with or control the mental state.

**Assessment of Suicide Risk** - an assessment of a resident's suicide potential or suicide intent to determine whether the youth is a suicide risk and the level of risk. An assessment of suicide risk must be conducted by a qualified mental health professional, who is a licensed mental health professional or works under the direct supervision of a licensed mental health professional.

**Close Supervision**- The supervision of a youth at five-minute intervals throughout their stay in their rooms. Visual checks must be made of the youth's condition at intervals not to exceed five minutes.

**Suicide risk**: refers to factors, conditions or characteristics, which indicate that an individual may be at risk of suicidal behavior. Within the context of this policy, the "suicide risk" or "at risk" youth refers to youths who have a history of, or demonstrate behaviors which indicate that he/she is thinking about or contemplating suicide, but has not made a suicide attempt.

**Suicide Attempt** any action deliberately undertaken by the juvenile which, if carried out would result in his/her death. (*An acutely suicidal youth who attempts suicide or presents an imminent threat of suicide and must be treated as a mental health emergency*)

**Suicidal Ideation** - Thoughts, wishes or desire to deliberately take one's own life.

**Suicidal Intent** - Identified decision and/or plan to take one's own life.

**Suicide Precautions** - Within the context of this manual, suicide precautions refer to specific action taken within the facility or program to protect a youth considered "at risk" of suicide from potential self injury or suicide. Suicide precautions primarily involve decisions regarding level of supervision required to protect the youth.

**Suicidal Threat** - A warning direct or indirect, verbal or non-verbal, which reasonably suggests that the youth plans to attempt suicide.

#### **IV. Procedures:**

- A. **Suicide Prevention Plan** – the Detention Home will develop and implement a written suicide prevention and intervention plan and program that must include the following elements:
1. **Identification** - The Facility Administrator or Program Manager must ensure that any youth identified as a potential suicide risk under the Suicide Risk Screening Instrument, (conducted during *detention screening*), Psychosocial Intake Assessment or Mental Status Checklist for Adolescents, (conducted upon admission to a juvenile assignment center), and Residential Intake Mental Health and Substance Abuse Screening or Clinical Mental Health/Substance Abuse Screening, (conducted upon admission to a residential commitment program), is referred for an *assessment of suicide risk*.
  2. **Assessment** - When suicidal risk behaviors or tendencies are indicated by screening or staff observations, an *assessment of suicide risk* must be conducted to determine the level of suicide risk. A licensed mental health professional or an unlicensed mental health professional working under the direct supervision of a licensed mental health professional may conduct an assessment of suicide risk.
  3. **Training** - Staff receive training to recognize verbal and behavioral cues that indicate suicide risk as well as the facility standard precautions to take when a resident displays suicidal behaviors or language.

4. **Suicide Precautions** - The suicide prevention plan should specify the facility's procedures for supervising, observing, monitoring, and housing the youth that has been identified as a potential suicide risk. Constant supervision should be maintained, and the suicide risk youth should not be placed in a locked room unless constant supervision is maintained and the room is as suicide proof as possible.
5. **Levels of Supervision** - The suicide prevention plan should describe levels of supervision of youths consistent with the following definitions:
  - a. **One-to-One Supervision** refers to the supervision of one youth by one staff member who must remain within close proximity of the youth at all times (including when the youth uses the shower or toilet). The staff member must maintain constant visual and sound monitoring of the youth at all times.
  - b. **Constant Supervision (Sight and Sound Supervision)** refers to the continuous and uninterrupted observation of a youth by a staff member who has a clear and unobstructed view of the youth and unobstructed sound monitoring of the youth at all times. This may be done by audio/visual means.
  - c. **Close Supervision** - refers to supervision of youths at five-minute intervals throughout their stay in their rooms. Visual checks must be made of the youth's condition at intervals not to exceed five minutes.
6. **Referral** – Residents determined to be at risk for suicide will be referred to the responsible health authority by staff making the initial observation of suicidal behavior or verbally stated intentions. The responsible health authority will refer the resident to a licensed mental health provider for suicide risk assessment if in the responsible health authority's medical opinion it is necessary to protect the health and welfare of the resident. Pending the results of that assessment the resident may be released into the custody of the mental health provider or returned to the facility. If returned to the facility, the mental health provider should provide documentation of the assessment findings.
7. **Communication** – The responsible health authority will maintain contact with mental health providers to ensure continuity of care for any resident referred for mental health assessment and subsequently placed in the custody of the mental health provider. This will include the release of the resident's medical history information if required for appropriate treatment. Any medical orders or recommended directions of care for a resident returned to the facility following a mental health assessment will be placed in the residents medical folder for review by the responsible health authority. Any special conditions or instructions from the mental health provider will be communicated to detention staff. The program manager or unit-shift supervisor may act a liaison between the facility and mental health provider in emergencies.
8. **Notification** – The responsible health authority will notify the Program Manager or Unit-Shift Supervisor on duty, and Case Worker of any referral made for suicidal risk assessment of any resident. The program manager or unit-shift supervisor shall be responsible for timely notification of the Facility Administrator.

9. **Documentation** – When residents are placed on suicide precautions, due to an attempt or verbal threats, such precautions will be documented in the shift log and in the resident’s folder. Any referral by the responsible health authority will be documented in the resident’s medical folder. Any mental health assessments will also be maintained in the resident’s medical folder.
10. **Review** – The responsible health authority and administrative staff will review the suicide prevention plan annually.

## **V. Identification of “At Risk” Youth**

A. **Screening for Suicide Risk** - Screenings conducted during initial intake to the juvenile detention home and at entry to facility programs assist in identifying suicide risk as follows:

1. **Suicidal Ideation/Intent Screening** – All residents will be screened with the facility’s suicidal ideation assessment form. If further assessment is indicated by the suicidal ideation assessment form administered by the detention counselor or detention nurse (i.e., there is a score of five or more on the suicidal ideation assessment form), the following must take place:
  - a. The youth must be placed on constant supervision (sight and sound supervision) until the responsible health authority reviews the resident’s situation and decides if it is necessary to seek an assessment of suicide risk by a qualified mental health professional.
  - b. The Facility Administrator or designee must be immediately notified of the youth's suicide risk. The Facility Administrator or his/her designee is responsible for consulting the Responsible Health Authority or the mental health professional who is to conduct the assessment to discuss the case and request an assessment of suicide risk.
  - c. The Facility Administrator or his/her designee and the Responsible Health Authority, shall confer regarding cases viewed as urgent and, if it is determined that an emergency exists, act according to the facility operating procedures for emergency transport for medical care.
  - d. The Responsible Health Authority or the facility nurse must document the referral for assessment of suicide risk by a licensed mental health provider.
  - e. The Facility Administrator or designee must ensure that procedures for staff supervision, observation and monitoring of youth identified as "at risk" on the suicidal ideation assessment form are in place within the facility.
  - f. If, in the judgment of the responsible health authority, the case is not an emergency, the assessment of suicide risk must be conducted within 24 hours of the referral.
2. **Staff Observations** -Each departmental facility or program should develop operating procedures to ensure that all direct care and clinical staff are aware of the necessity of immediately documenting and reporting any of the following observations to the Facility Administrator/Program Manager:

- **Intentional self-injurious behavior** – any actions deemed to cause, or potentially cause physical harm to one’s self. Including past history of suicide attempts.
- **Statements or Threats** - which suggest thoughts, intent or plans to harm self. Active discussion of suicide plans.
- **Behaviors that Suggest Intent** - or plans to harm self, such as tying of clothing or sheet in a noose.
- **Suicidal Notes or Writings** - which suggests thoughts, intent or plans to harm self.
- **Statements Suggesting lack of hope** – such as “ life is just not worth living” or preoccupation with death or dying.
- **Extreme withdrawal or lack of interest** - Severe loss of interest in activities or relationships which juvenile had previously enjoyed or engaged. Depressed state, indicated by withdrawal, periods of crying, insomnia lethargy (sluggishness, indifference to surroundings).
- **Significant loss of appetite** - unexplained loss of weight or disinterest in food.
- **Bequeathing** - Giving valued possessions away.
- **Change in Sleeping Patterns** - Sudden drastic change in sleeping habits. Could be expressed as either insomnia or sharp increase in sleep time.

**VI. Suicide Precautions** - Within the context of this manual, "*suicide precautions*" refers to specific action taken within the facility or program to protect the "at risk" youth from potential self injury or suicide. While a variety of options are available regarding suicide precautions the facility will use the following methods for protecting residents when indicated. The decision as to specific methods used for a particular youth may be made by the Facility Administrator, Program Manager and Responsible Health Authority or licensed mental health provider.

**A. Precautionary Observation** - refers to the constant supervision of a "suicide risk" youth in designated observation areas of the facility or program, which are safe and secure. *Precautionary Observation* is intended to permit the "at risk" youth to participate in selected activities with other youths in the program while being maintained on constant supervision.

**1. Criteria** - When a resident has been identified as a potential suicide risk, either through medical diagnosis, or other informal source, or through the resident's past or present behavior, special supervision will be required. To insure for the safety of the resident he/she will be placed on a “suicide precautions”.

**a.** Residents who return to detention from a hospital or psychiatric care unit, who were transferred from detention due to a psychiatric emergency or a suicide attempt in the facility should be placed on a "suicide watch status" also. These residents have



demonstrated, in a more dramatic fashion, the need for close supervision.

**2. Documentation** - Communication of a suicide watch will be recorded in the resident's file where it is read by all detention staff and assigned agency counselors.

- a. A red color coding adhesive 3/4" **round label** (dot) will be placed on the outside of the resident's folder below the name label; drawing this status to staff attention.
- b. The responsible health authority will document his/her medical orders interviews, assessments or referrals in the resident medical folder.
- c. Any recommendations or directions for resident care by a mental health provider will be maintained in the resident's medial file.

**3. Staff Responsibilities** – Detention staff shall:

- a. The resident should be encouraged to remain in the program during program hours, and not isolated in his/her sleeping room. Counseling and support should be emphasized. Encourage involvement in activities and programs.
- b. When the resident is in his/her assigned sleeping room during program hours supervision checks should be made every 15 minutes and recorded.
- c. If the situation warrants, remove the sheet and pillowcase if harm to self is believed to be possible. Additionally, any item a resident attempts to use, or may attempt to use to harm him/her self should be removed.
- d. Finger food may be required if a plastic utensil is or has been broken, hidden in the room, or used destructively. This is done only when it is necessary to take a meal to the resident's room. It may be necessary to observe the resident eat the room meal then immediately retire the plate and utensil.
- e. It is preferred that all meals be eaten in the dining, room under staff supervision.
- d. Suicide watch residents should be closely observed and kept in sight at all times in the program; in as much as supervision of the entire group may allow.
- e. Any significant behavior observed, or comment made by the resident, about suicide should be documented in his/her file following established procedure.

**B. Discontinuation/Termination of Precautionary Observation** – The youth must be maintained on *Precautionary Observation* until he/she has received an *assessment of suicide risk* by a qualified mental health professional, Facility Nurse or the Responsible Health Authority.

**1. Staff Responsibility** - The assessment of suicide risk findings and recommendations must be reviewed by the responsible health authority. Based upon the *assessment of suicide risk* findings, the responsible health authority and Facility Administrator or Program Manager.

or designee will determine and document the appropriate course of action to be taken with regard to continued supervision and monitoring.

- a. When deemed appropriate by the responsible health authority and Facility Administrator or Program Manager or designee, the youth may be removed from *Precautionary Observation*. The Facility Administrator or Program Manager or designee's authorization is required for removal of a youth from *Precautionary Observation*.

**VII. Secure Observation** - At times, a youth's suicide risk behavior may require a level of observation and control beyond that which can be provided by *Precautionary Observation*. The facility holding rooms may be used as a secure observation room for a youth whose level of suicide risk behaviors potentially threaten the youth's safety. When used as a *secure observation room*, it will function as a designated safe, empty, locked room within the facility which is used for the purpose of preventing a youth from injuring himself or herself, or others, and to provide continuous staff supervision and monitoring. A *secure observation room* shall be used for observation of "at risk" youths only when other less restrictive means of control are not effective or inappropriate. The *secure observation* should not be used for residents who present an imminent threat of suicide. Such youth should be referred for emergency care.

A. **Purpose** - This section discusses a framework for the detention home to implement procedures governing the use of secure observation with potentially suicidal youths. This section serves to:

- Specify the criteria used to determine whether a suicide risk youth should be placed in a *secure observation room*;
- Specify procedures for placing a suicide risk youth in a *secure observation room*;
- Define staff supervision requirements for suicide risk youths who are placed in a *secure observation room*;
- Specify the structural requirements for a room designated for use as a *secure observation room*; and
- Specify requirements for removal of a suicidal youth from secure observation.

B. **Accountability** - The Facility Administrator, program manager and unit-shift supervisor is charged with the responsibility of daily on-site facility management and operation and is accountable for assuring that a *secure observation room* is appropriately utilized. He/she must ensure that abusive and arbitrary use of secure observation does not occur. The guidelines set forth in this procedure are intended to guide the program manager and or unit-shift supervisor in the use of secure observation. However, these guidelines are not intended to prescribe every action to be taken or decision to be made in using *secure observation rooms*. Therefore, the Facility Administrator has developed a self monitoring plan addressing the following:

1. **Self-Monitoring Plan**- The facility shall have in place a self-monitoring plan to track, manage and facilitate oversight of secure observation practices. The self-monitoring plan requires:

- a. An incident report must be completed documenting the situation requiring the use of secure observation. Each incident of secure restraint must be pre-approved by the Facility Administrator or the Program Manager.
  - b. Each incident of secure observation will require the Facility Administrator's review and approval.
  - c. Each time a resident requires this level of observation he/she will be referred to the responsible health authority. The responsible health authority may refer the resident for suicide risk evaluation by a licensed mental health provider.
  - d. Use of Mechanical Restraints during a mental health situation that threatens the health and safety of a resident shall be authorized and documented.
3. **Proper Use** - The facility self-monitoring plan will ensure that secure observation is used in a humane and non-abusive manner. No resident will be placed in secure observation more than eight hours without approval of the responsible medical authority, the Facility Administrator, or his designee.
4. **Staff Training** - The Training Supervisor, Program Manager and Supervisor are accountable for ensuring that facility staff are appropriately trained in the use of secure observation procedures.

C. **Structural Requirements of a Secure Observation Room -**

1. **Size** - A minimum of 35 square feet of unencumbered space.
2. **Doors** - Solid core hardwood or metal that has a shatter-resistant observation window. The door observation window must permit constant visual and sound monitoring of the youth.
3. **Floors/Walls** - Solid, smooth and high impact resistant without protrusions.
4. **Ceilings** - Solid, single piece ceiling which is out of the youth's reach and has no appendages that can be grasped or tied onto with cloth or other materials.
5. **Vents** - Must be covered with small mesh or a metal plate (holes no larger than 3/16 inch). Vents must be unreachable to the youth. Edges of wire mesh or metal covering must not be exposed.
6. **Lighting** - Light fixtures should be recessed and covered with shatter-resistant material.
7. **Windows** - Must be made of shatter-resistant material.
8. **Toilet/Sink** - Fixtures must be smooth and devoid of handles or parts that cloth or other material could be tied to or hung from. Fixtures must also be mounted against the wall with water shut off valve outside of room.

9. **Electrical Switches/Outlets** - Electrical outlets are not permitted in side the room and light switches are located outside the room.
  10. **Beds** - Must provide a security-rated plastic mattress suitable for floor use or suicide resistant bed. The sleeping surface should be mounted on the floor and secured to the wall, be of one-piece construction (no springs) and have a plastic fire retardant mattress.
  11. **Security Cameras** – Secure observation areas are equipped with security cameras for remote viewing of resident behavior.
- D. Authorization and Criteria for Placement in a Secure Observation Room** - Secure Observation may be used as a suicide precaution only if authorized by the Facility Administrator, Program Manager, or Supervisor in conjunction with the pending review of the responsible health authority or mental health services provider. A youth may be placed in a secure observation room if he or she meets one of the following conditions:
1. **Condition One** - The youth is demonstrating suicide risk behaviors that threaten his or her safety and is verbally stating a repeated and consistent desire to harm his or her self.
  2. **Condition Two** - The youth has attempted suicide during the past six months and currently demonstrates behavior, which potentially threatens his or her safety.
- E. Procedures for Placement in a Secure Observation Room** - The Facility Administrator, Program Manager or Supervisor must confer with the responsible health authority, or mental health professional, as to whether *secure observation* is appropriate for a specific youth. The consultation with the mental health professional and reason for *secure observation* must be documented. When the decision has been made to place an "at risk" youth in a *secure observation room*, the following should occur:
1. **Staffing** - Sufficient staff should be available to assure the physical means to enforce the placement.
  2. **Inspection** - The *secure observation room* must be inspected prior to the youth's placement to ensure that it is safe and secure.
  3. **Health Check** - A staff member of the same sex will conduct a visual check of the youth to determine if there are any observable injuries that would make placement in the *secure observation room* inappropriate. This visual check will be in accordance with first aid and CPR training that staff receives. If a physical injury is observed, the youth complains of injury or illness, or the youth has been observed to have experienced a fall, impact or blow to such an extent that injury would be expected, medical personnel must be immediately notified for an immediate assessment and treatment. If after hours the Facility Administrator should be notified and the emergency medical system should be activated.
  4. **Security Search** - The resident must be searched by a staff member of the same sex. At the time of the search, all jewelry, pocket items, hair ties, and hairpins must be removed. All clothing items which could be used for self-injury must be removed (e.g., shoes,

shoelaces, stretch socks, and belt). The youth is not to be stripped; however, any item that the resident has used or may be used to injure or choke himself/herself must be removed.

5. **Staff Responsibility** - The resident should be told that his/her behavior requires observation beyond that normally provided, and a period in the *secure observation room* is needed until he or she is seen by a mental health professional. Staff shall maintain a caring and concerned demeanor and should mechanical restraint become necessary they will be applied in a humane manner. Consideration will be given to any injuries a resident may have before restraints are used.
6. **Limitations** – No resident may remain on secure confinement in an observation room more than eight hours without the approval of the responsible medical authority, the Facility Administrator, or his designee.

#### **F. Mental Health Consultation and Assessment of Suicide Risk -**

1. **Staff Responsibility** - Each youth placed in a *secure observation room* due to suicide risk behavior must be immediately referred the facility nurse and or responsible medical authority. The responsible medical authority will refer the resident for suicide risk assessment if indicated. The *assessment of suicide risk* must be conducted with in the time specified by the responsible medical authority. The resident placed in secure observation during the evening or night shift must be referred the facility nurse and or responsible medical authority during the following workday. A youth may not remain in a *secure observation room* for more than eight hours unless the responsible medical authority or mental health professional has been consulted and agrees to a time extension.

#### **G. Supervision Requirements**

1. **Types of Supervision** - Youths placed in a *secure observation room* due to suicide risk behavior must be maintained on either one-to-one or constant supervision. *one-to-one supervision* should be maintained until the Facility Administrator, Program Manager or designee receives specific recommendations from the responsible health authority or mental health professional that is to conduct the *assessment of suicide risk*. One-to-one supervision and constant supervision are defined as follows:
  - a. **One-to-One Supervision** refers to the supervision of one youth by one staff member who must remain within five feet of the youth at all times (including when the youth uses the shower or toilet). If the youth is in a *secure observation room*, the staff member assigned to *one-to-one supervision* of the youth must be stationed at the entrance to the room, no further than five feet from the door. The staff member must maintain constant visual and sound monitoring of the youth at all times.
  - b. **Constant Supervision (Sight and Sound Supervision)** refers to the continuous and uninterrupted observation of a youth by a staff member who has a clear and unobstructed view of the youth and unobstructed sound monitoring of the youth at all times.
2. **Notification** - The staff person assigned to observe the youth must record observations of the youth's behavior in the *secure observation room* on the behavior observation

form. Staff observations of behaviors flagged as "warning signs" of a mental disturbance must be brought to the immediate attention of the Facility Administrator, Program Manager or designee.

3. **Staff Responsibility** - The staff person assigned to observe the youth should periodically converse with the youth, and be available to talk to the youth when he or she expresses a desire to talk. The staff person should convey an attitude and message of concern for the youth's well being.
4. **Security Searches** - When it is necessary to temporarily remove the youth from the *secure observation room* for any reason, the youth must be searched again before being placed back into the *secure observation room*.

#### **H. Discontinuation/Termination of Secure Observation**

1. **Duration** - The "at risk" youth can not be maintained on secure observation more than eight hours or until he or she has received an examination from the responsible medical authority, who will determine the need for an *assessment of suicide risk* by a qualified mental health professional.
2. **Referral** - The referral and/or recommendations of the responsible medical authority must be reviewed by the Facility Administrator, Program Manager or designee. Based upon the responsible medical authority's examination and referral the Facility Administrator, Program Manager or designee shall arrange for an assessment of suicide risk by a mental health professional. The Facility Administrator, Program Manager or designee will determine and document the appropriate action to be taken with regard to continued supervision and monitoring with the medical authority's guidance.
3. **Release Authority** - When deemed appropriate by the responsible medical authority and/or mental health professional and the Facility Administrator, Program Manager or designee, the resident may be removed from the *secure observation room*. The Facility Administrator, Program Manager or designee's authorization is required for removal of the youth from *Secure Observation*.

#### **I. Monitoring upon Removal from Secure Observation**

1. **Staff Responsibility** - The youth removed from *Secure Observation* should continue to be monitored until deemed stable by the Designated Mental Health Authority or mental health staff.
2. **Precautionary Observation** - Close Observation should be initiated and maintained until mental health staff indicates that such level of supervision is no longer necessary.
3. **Continuity of care** - The responsible health authority or mental health provider, if possible, should maintain regular contact with the youth for support and to determine changes in his or her status until no longer necessary.

**J. Administrative Review** - The Facility Administrator, Program Manager or the designee must review the incident report/reports regarding the placement of any resident in a "Secure Observation Room" to determine whether the use of the *secure observation room* was appropriate. If the use of the *secure observation room* is determined to have been inappropriate or not in compliance with this policy and procedure, the Facility Administrator or Program Manager will initiate corrective action; which may include disciplinary action for staff involved.

**K. Documentation** -

**1. Secure Observation Room Log** - Consistent with the administrative self-monitoring plan, the facility will maintain a monthly "secure observation room log" on which to enter each incident of the use of secure observation. This log must contain the following data:

- The name of each youth placed in the secure observation room;
- Date and time of placement in the secure observation room;
- Date and time of release from the secure observation room;
- The name of the staff making the placement in the secure observation room.

**a.** A new "secure observation room log" must be started at the beginning of each month. The completed "secure observation room logs" are to be maintained in an administrative file marked "secure observation".

**2. Incident Reports** - A copy of each of the incident report must be placed in the youth's detention file or medical file as may be appropriate.

**a.** A copy of the incident report may be forwarded to the resident's court counselor or recognized professional with responsibility for the care and welfare of the resident.

**3. Medical Information** – Medical information is restricted by law and may require a release for access by non-medical professionals. All medical information including mental health provider assessments and medical notes pertaining to a resident's mental health will be maintained in a secure area with limited access.

**VIII. Four Point Restraint** - Four-point restraint should be used in extreme instances and only when other types of restraint and/or observation have proven to be ineffective. A four-point restraint is both hands and feet secured, but never with hand and feet hooked together. The Humane Mobile Restraint Chair shall be the only form of four-point restraint authorized by the Facility Administrator for use in the facility.

**A. Approval** - If it is necessary that a resident be placed in a four-point restraint advance approval must be obtained from the Facility Administrator.

**B. Medical Review** - A review must also be subsequently obtained from the Facility Physician or nurse, when residents are restrained in a four-point position.

C. **Staff Responsibility** - The following minimum procedures will be followed if it is necessary to place a resident in secure restraint for his or her own protection:

1. **Direct observation** - by staff must be continuous prior to obtaining the review from Facility Physician or Nurse. After restraints are removed staff observations must be made at least every 15 minutes. One to one observation will be maintained with any resident while in four-point restraint.
2. **Compliance Review** – Restraints for the purpose of preventing a resident from harming himself will conform with guidelines approved by the Facility Administrator and responsible physician for the use of force and mechanical restraints. The Facility Administrator, or his designee, and the responsible medical authority review each situation.
3. **Limitations** - In all instances when physical force is necessary the amount of force used should be only to the degree necessary to control the situation. An excessive amount of force may be grounds for termination. Never use chemical agents, such as tear gas, mace, or pepper spray.
4. **Written Incident Reports** - must be filed in the Superintendent's mail tray, the Detention Daily Shift Log and the Resident's File. An Incident Report must be prepared before the end of the shift, during which the incident occurred.
5. **Contact Protocol** - The Facility Administrator can be contacted by telephone on a 24-hour basis. Numbers are available in all control rooms. The Facility Administrator must be contacted before the humane mobile restraint chair can be used.

## **IX. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-35 / **MANDATORY**)

## **X. Enclosures:**

Incident Report Form

Secure Observation Room Log

Suicide Intent/Ideation Assessment Form

## **XI. Action:**

The facility Supervisor and the Program Manager will be responsible for compliance monitoring of this policy.

The facility administrator will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.



This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-17

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention





# ROOM SUPERVISION LOG

RESIDENT'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ ROOM NO: \_\_\_\_\_

PURPOSE FOR RESTRICTION: One Hour Room Time Out  Resident's Request   
 Room Confinement  Medical   
 Extended Room Confinement  Suicide Watch

7:30 a.m. _____	11:00 a.m. _____	2:30 p.m. _____	6:00 p.m. _____
7:45 a.m. _____	11:15 a.m. _____	2:45 p.m. _____	6:15 p.m. _____
8:00 a.m. _____	11:30 a.m. _____	3:00 p.m. _____	6:30 p.m. _____
8:15 a.m. _____	11:45 a.m. _____	3:15 p.m. _____	6:45 p.m. _____
8:30 a.m. _____	12:00 noon _____	3:30 p.m. _____	7:00 p.m. _____
8:45 a.m. _____	12:15 p.m. _____	3:45 p.m. _____	7:15 p.m. _____
9:00 a.m. _____	12:30 p.m. _____	4:00 p.m. _____	7:30 p.m. _____
9:15 a.m. _____	12:45 p.m. _____	4:15 p.m. _____	7:45 p.m. _____
9:30 a.m. _____	1:00 p.m. _____	4:30 p.m. _____	8:00 p.m. _____
9:45 a.m. _____	1:15 p.m. _____	4:45 p.m. _____	8:15 p.m. _____
10:00 a.m. _____	1:30 p.m. _____	5:00 p.m. _____	8:30 p.m. _____
10:15 a.m. _____	1:45 p.m. _____	5:15 p.m. _____	8:45 p.m. _____
10:30 a.m. _____	2:00 p.m. _____	5:30 p.m. _____	9:00 p.m. _____
10:45 a.m. _____	2:15 p.m. _____	5:45 p.m. _____	

## ADMINISTRATIVE REVIEW

TWENTY FOUR HOUR ADMINISTRATIVE REVIEW OF ROOM CONFINEMENT

CONDUCTED BY \_\_\_\_\_ UNIT-SHIFT SUPERVISOR \_\_\_\_\_ DATE \_\_\_\_\_

## Suicidal Ideation/Intent Assessment

Resident \_\_\_\_\_  
(First Name)
(last Name)
(JOLTS#)

*Please check applicable box:*

Question	No	Sometimes	Most of The Time	Currently
1) Have you ever had thoughts of hurting yourself and made plans to do it?				
2) Have you ever thought your problems would be solved if you killed yourself?				
3) Have you ever made a statement such as, "If I get the chance, I will kill myself."				
4) Do you feel worthless and hopeless about your future?				
5) Have you expressed any suicidal thoughts to counselors, residents or others?				

**SCORE AS FOLLOWS:**

NEVER /NO SUICIDAL IDEATION	0
SOMETIMES HAS THOUGHTS OF SUICIDE	1
MOST OF THE TIME/FREQUENT THOUGHTS OF SUICIDE	2
CURRENTLY	5

**RESIDENT SCORES:**

Question 1	_____
Question 2	_____
Question 3	_____
Question 4	_____
Question 5	_____
Total	

**COMMENTS / OBSERVATIONS:**

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A SCORE OF 5 indicates the need for suicide precautions.  
 Contact a unit-shift supervisor immediately.

Date Completed \_\_\_\_\_ Time Completed \_\_\_\_\_  
 Staff Member \_\_\_\_\_

# **Facility Services**

**04-23**

**Communicable Diseases**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-23</i>
Communicable Diseases		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>01/01/11</i>

It shall be the policy, procedure and practice of the Detention Home to provide for the management of serious and infectious diseases through an organized program developed by the Facility Administrator and the Responsible Health Authority. The facility's responsible health authority in cooperation with the Facility Administrator shall supervise the Detention Home's program and it shall include the following:

1. That all direct-care staff and other appropriate personnel receive training on health-related situations involving a resident with Tuberculosis, Hepatitis-B and HIV/AIDS, and any other communicable diseases.
  2. Educational programming for facility residents which shall include control, treatment and prevention strategies. Confidential testing will be offered as a part of this program, and may be required in some situations.
  3. Confidentiality requirements and specific protocols for contacting the media.
  4. Exposure Control Plan and the use of universal healthcare precautions.
  5. When and under what conditions staff may be required to submit to testing.
- I. **Purpose:** Any Detention Home employee or resident with symptomatic signs of having a communicable disease will be requested to take an examination. The test results must be made available quickly to insure prompt and proper treatment. This is necessary to insure the health of residents and staff. There must exist substantial evidence to warrant such a request. Infectious diseases require special attention due to their serious nature and methods of transmission.
- II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**IV. Procedures:** In the event of a medical emergency affecting the health and safety of a detention home resident, it is imperative to recognize the signs and symptoms contributing to the crisis, and have a knowledge of actions required to provide immediate care and transfer to the proper medical provider.

**A. Training** – All Detention staff will have training on universal healthcare precautions, to include blood borne pathogen protections, during within the first 90 days of fulltime employment.

1. **Initial Orientation** – During initial orientation training staff will receive notification on facility universal precautions.

2. **Exposure Control Plan** – Within 90 days of employment, staff will receive training on the Tulsa County Exposure Control Plan, which is the standard set forth by the governing agency and utilized by the detention home. The exposure control plan will address the following issues:

- Purpose of Exposure Control Plan (ECP)
- General Program Management
- Exposure Determination and Vaccination Program
- Methods of Compliance
- Post-Exposure Evaluation and Testing
- Information and Specific Training Objectives

**B. General Guidelines**

1. **Facility Compliance** - The facility will comply with Tulsa County's policy regarding workplace exposures to Blood borne pathogens or communicable diseases.

2. **Workman's Compensation** - Staff that require testing as the result of a work place exposure are expected to follow notification guidelines established in workman's compensation rules. Staff are required to report any possible exposure within 24 hours to a supervisor or administrative staff.

**C. Conditions for Testing** – If a staff member or resident has reason to believe exposure has occurred it must be reported immediately to a unit-shift supervisor, facility nurse or an administrator. Before a staff member or resident may be tested, a risk of exposure to a communicable disease must be identified. Examinations will be requested for such diseases as: 1) Tuberculosis, 2) Ova and parasites, 3) Infections hepatitis A, B, or C, 4) Venereal Disease, 5) HIV/A.I.D.S (Acquired Immune Deficiency-Syndrome). If testing



is required, the following steps are to be taken.

1. **Confidential Testing** – All testing will occur in a fashion that protects the confidentiality of all staff and residents involved.
  - a. If necessary to prevent the possibility of further infection to other residents or staff, isolate the resident(s); or temporarily release the staff member from duty, pending proper medical inquiry by the medical authority.
  - b. Immediately advise Facility Administrator, Facility Nurse, and Detention Supervising Physician.
  - c. Prepare written reports for the necessary medical files, Facility Administrator, and Physician.
  - d. Require that proper test be conducted as directed by the facility physician. Upon the physician's confidential review of test results, he/she will provide a written authorization for the detention employee in question to return to regular work duties, or for a resident to return to the general detention population:
  - e. Follow the physician's written orders for implementing and maintaining the proper treatment plan.
  - d. Report further irregularities to the Facility Administrator and proper medical authorities.

**D. Confidentiality of Resident Medical Information** - All residents who are or have been in temporary custody of the Tulsa County Juvenile Detention Home have a right to confidentiality regarding disclosure of their identities and disclosure of confidential medical information contained in detention records. Non-organizational entities seeking release of Detention Home medical records must provide the facility with a medical release of information form signed by the resident or the resident's parent/guardian.

1. **Administrative Responsibility** – The Facility Administrator has the responsibility of safe guarding the anonymity of any juvenile, past or present, which is being or, has been detained in the detention facility. All medical information regarding any detention resident is confidential.
2. **Staff Responsibility** – Each staff member is individually liable for the inappropriate disclosures of confidential information. Any staff member that, by virtue of his position, comes into knowledge of any information pertaining to a residents current or past mental health, medical or legal status may not use or divulge such information without proper authorization. Inappropriate disclosures of confidential information will result in disciplinary action and are punishable by law.

**E. Delousing** - During each admission process screening shall include examination for lice. Should the presence of lice be indicated, follow standing orders and refer to the nurse and responsible physician at the next available time.

**F. Immunizations** - Many of our resident admissions are uncertain of their immunization history, as is also the case with some parents; the detention home medical program will not provide immunizations. In the event, the responsible physician determines the need for a particular immunization to be administered to a resident; the parent or legal guardian would need to furnish a complete shot record to facilitate the treatment.

1. **Referrals** - Consideration of any immunization will be on an individual as necessary basis. The responsible physician will provide tetanus shot if an injury sustained in detention requires it. Residents and guardians may be referred to the City-County Health Department for further screening regarding immunizations, after the release from detention.

**G. Media Contact** – In the event it becomes necessary to advise the local media of a potential health concern, the Facility Administrator, the Bureau Director, and the Chief Judge shall be the sole point of contact for the media. The above listed are the only individuals authorized to make statements to the news media and all interviews, questions or any other requests shall be referred to and must be approved by the above listed.

**V. Authority/References:**

10 O.S. 7303-1.1 (Authorization to Seek Emergency Medical Care)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4C-36, 3-JDF-4C-37, 3-JDF-4C-38)

VI. **Enclosures:** None.

**VII. Action:**

The facility Program Manager will be responsible for compliance monitoring of this policy. The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:10-18

Distribution: Detention Home Policy and Procedure Manual

# **Facility Services**

**04-24**

**Food Service Operations**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-24</i>
Food Service Operations		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure and practice of Tulsa County Juvenile Detention Home to provide a full-time staff member, experienced in food service management, to supervise food service operations which shall include budgeting and purchasing. Menu plans are reviewed and approved at least annually by the Kitchen Manager, and a dietician with training pertaining to nationally accepted nutritional guidelines.**

**I. Purpose:** The facility employs a full-time Kitchen Manager experienced in food service management. The Senior Cook/Kitchen Manager shall have the resources, authority and responsibility to provide the facility complete food service that includes three meals a day which are nutritionally adequate and meet National School Lunch Program Guidelines (NSLP); are palatable; attractive; and that are produced under sanitary conditions at reasonable cost.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Food Service Management** – The facility has an established food services staffing pattern appropriate to meet the needs of the facility at maximum population.

**1. Senior Cook/Kitchen Manager** – The facility shall have at least one full-time Senior Cook/Kitchen Manager with training and experience in food services management and administration and the responsibility of supervising the kitchen staff and functions of the food services operations. This position shall have a written job description detailing the duties and requirements of the position.

**2. Detention Cooks** – The facility cooks shall have current food service cards issued by the Tulsa City-County Health Department and complete an orientation and continuing training appropriate for their position. This position shall have a written job description detailing the duties and requirements of the position.

**3. Secure Supervision** – Detention Counselors and the Unit-Shift Supervisors shall be responsible for providing security in the cafeteria at all times during meals.

**B. Food Service Records** – Administrative records required for the operation of the kitchen shall be maintained by the Senior Cook/Kitchen Manager and will include at a minimum the following:

1. **Food and Equipment Inventory** – An annual inventory of all kitchen equipment and food stuffs shall be completed and on file in the Kitchen Managers’ office.
2. **Documentation** – The food service Senior Cook/Kitchen Manager shall maintain documentation for compliance with the American Correctional Association, Office of Juvenile Affairs and the Oklahoma Department of Education Child Nutrition Program. This documentation shall include, but is not limited to menu plans, records of meals served, equipment needs, staffing patterns, costs, sanitation, storage procedures and notation of any special problems.
3. **Fiscal Expenditures** – Food expenditures that identify per capita costs per meal, food requirements estimated for at least thirty days in advance and proof of effective procurement procedures that result in the purchase of food and supplies at competitive prices. Fiscal expenditures shall be in compliance with Tulsa County policy and procedure for procurement.
4. **Dietician’s Review** – The facility shall document at least annually that the facility menus have been reviewed by a Registered Dietician for compliance with nationally recommended food allowances.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-01, 4A-02 and 4A-03)

**VI. Enclosures:**

1. **Kitchen Manager Job Description**
2. **Detention Cook Job Description**
3. **Unit-Shift Supervisor Job Description**
4. **Detention Counselor Job Description**

**VII. Action:**

Facility Senior Cook/Kitchen Manager, the Program Manager and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-01.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**TULSA COUNTY**  
**Job Description Cover Sheet**

Job Title: Detention Counselor  
Department: Juvenile - Detention  
Report To: Unit Shift Supervisor  
FLSA Status: Non-Exempt  
Job Tide Code: 181  
Last Review: 04-01-05  
Grade: 40  
Job Group Code: E011

Approval of the attached job description

  
Approved By

  
Date Approved

## TULSA COUNTY Job Description

Job Title: Detention Counselor  
Department: Juvenile - Detention  
Reports To: Unit Shift Supervisor  
FLSA Status: Non-Exempt  
Job Title Code: 181  
Last Review: 04-01-05  
Grade: 40  
Job Group Code: EOII

### DEFINITION

Under direction and within the scope of department policies and guidelines, provides secure supervision, aids juveniles with personal and environmental difficulties by participation and interaction in programs.

### EXAMPLES OF WORK PERFORMED

Process all new admissions and releases; records and maintains all medical needs, administration of medicine, and referral to the nurse. Orientates residents to policies, rules, and procedures; supervises residents and enforces rules; guides residents in program participation; and provides security. Reports any irregularity, emergency or matters of consequence to the Superintendent. Acts as liaison between Bureau staff and residents. Records and maintains written reports regarding behavior and adjustments of residents. Makes sure all areas and rooms are clean, sanitized, and presentable at all times. Plans or assists in plmming and participates in staff meetings and staff training. Works any other shift during emergencies. Counsels the residents and supports positive changes in behavior. Uses personal computer for admissions and releases. Performs other duties as assigned.

### REQUIRED SKILLS, KNOWLEDGE AND ABILITIES

Skill in recognizing underlying causes of social problems; in counseling an individual concerning personal and family problems; in eliciting pertinent personal information Knowledge of personal computers; of principles and practices of sociology applicable to juvenile casework; of county and state regulations pertaining to juvenile care; and of departmental policies and procedures. Ability to deal tactfully with others; to express both orally and in writing, facts and opinions clearly and concisely; to establish effective interpersonal relationships; to gain respect and cooperation of others; to keep alert and vigilant; to handle stressful situations; and to create a constructive atmosphere for crisis problem solving.

### SUPERVISORY RESPONSIBILITIES

This job has no supervisory responsibilities.

### QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill,



( ) and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

#### EDUCATION and/or EXPERIENCE

Education equivalent to graduation from an accredited four year college or University with a degree in sociology or closely related field or any equivalent combination of education and experience, substituting one year of satisfactory, full time paid employment in juvenile work or closely related work for one year of the required education, with a maximum substitution of four years.

#### LANGUAGE SKILLS

Ability to read, analyze, and interpret general business periodicals, professional journals, technical procedures, or governmental regulations. Ability to write reports, business correspondence, and procedure manuals. Ability to effectively present information and respond to questions from groups of managers, clients, customers, and the general public.

#### MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

#### REASONING ABILITY

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

#### CERTIFICATIONS, LICENSES, REGISTRATIONS

First Aid & CPR Certifications

Valid Oklahoma Driven License

#### PHYSICAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to use hands to finger, handle, or feel; reach with hands and arms and talk or hear. The employee must respond and react to flight and tight encounters with detained residents. The employee is frequently required to stand; walk and sit. The employee is occasionally required to climb or balance; stoop, kneel, crouch, or crawl and taste or smell. The employee is occasionally required to physically restrain and secure one or more individuals to prevent escape, and to protect the individuals, and/or other residents, co-workers, or the public from harm, physical violence or injury. The employee is occasionally required to restrain male or female residents in excess of 200 pounds in stature up to 6'6"; and must assist in picking up and carrying restrained individuals to secure room. The employee must regularly lift and/or

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move up to 10 pounds, frequently lift and/or move up to 25 pounds and occasionally lift and/or move more than 100 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and ability to adjust focus.

#### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is occasionally exposed to toxic or caustic chemicals. Interacts consistently with juvenile residents and at times participates in physical altercations. The noise level in the work environment is usually loud.

{ ) JOB TITLE Detention Counselor  
JOB CODE 181

DEPARTMENT Juvenile - Detention  
LAST REVIEW 9-1-04

PHYSICAL DEMANDS	AMOUNT OF TIME			
	NONE	UNDER 113	113 TO 213	OVER 213
One-the-job time spent in the following physical activities. Show time by checking the appropriate boxes:				
Stand			X	
Walk			X	
Sit			X	
Use hands to finger, handle, or feel				X
Reach with hands and arms		X		X
Climb or balance		X		
Stoop, kneel, crouch or crawl		X		X
Force exerted. (Check appropriate boxes):				
Up to 10 lbs.				X
Up to 25 lbs.			X	
Up to 50 lbs.		X		
Up to 100 lbs.		X		
More than 100 lbs.		X		

Special vision requirements. Check all that apply.

- Close vision (clear vision at 20 Inches or less)
- Color vision (ability to identify and distinguish colors)
- Depth perception (three-dimensional vision, ability to judge distances and spatial relationships)
- Ability to adjust focus (ability to adjust the eye to bring an object into sharp focus)

- Distance vision (clear vision at 20 Inches or more)
- Peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)
- No special vision requirements

WORK ENVIRONMENT	AMOUNT OF TIME			
	NONE	UNDER 113	113 TO 213	OVER 213
Exposure to the following environmental conditions. Show time by checking boxes:				
Wet or humid conditions (non-weather)	X			
Work near moving mechanical parts	X			
Work in high, precarious places	X			
Fumes or airborne particles	X			
Toxic or caustic chemicals		X		
Outdoor weather conditions	X			
Extreme cold (non-weather)	X			
Extreme heat (non-weather)	X			
Risk of electrical shock	X			
Work with explosives	X			
Risk of radiation	X			
Vibration	X			

How much noise is typical for the work environment of this job? Check the appropriate level below.

- Very quiet (examples: forest trail, isolation booth for hearing test)
- Moderate noise (examples: business office with computers and printers, light traffic)

- Quiet (examples: library, private office)
- Loud (examples: metal can manufacturing department, large earth-moving equipment)



## TULSA COUNTY Job Description Cover Sheet

Job Title: Unit Shift Supervisor - Detention  
Department: Juvenile - Detention  
Report To: ACA Accreditation Program Manager  
FLSA Status: Exempt  
Job Title Code: 180  
Last Review: 11-01-01  
Grade: 60  
Job Group Code: 8026

Approval of the attached job description

  
Approved By

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Date Approved

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TULSA COUNTY  
Job Description

Job Title: Unit Shift Supervisor - Detention  
Department: Juvenile - Detention  
Reports To: ACA Accreditation Program Manager  
FLSA Status: Exempt  
Job Title Code: 180  
Last Review: 11-1-01  
Grade: 60  
Job Group Code: 8026

DEFINITION

Under general direction, supervises assigned personnel and the juveniles at the Juvenile Detention Home; responsible for overseeing all facets of program activities.

EXAMPLES OF WORK PERFORMED

Responsible for the daily supervision of the detention counselors, interns and volunteers. Supervises the recording and maintenance of all written reports, incident reports, and medical administration summaries. Responsible for processing new admissions and assigning counselors. Supervises the release of juveniles. Maintains an inventory control system of all Detention Home clothes and supplies. Assist in the planning of and participates in staff meetings and unit meetings. Implements and supervises programs and activities for the residents. Reports, as soon as possible, any shift emergency or matter of consequence to the Assistant Superintendent and/or Superintendent; to cover any shift as a result of an emergency. Subject to recall on a 24 hour basis. Confers and makes judgments on all grievances and room confinements when required. Uses personal computer for record checks, admissions and releases. Assists in documentation of ACA standards. Performs other duties as assigned.

REQUIRED SKILLS, KNOWLEDGE AND ABILITIES

Skill in supervising the work of others; in counseling groups and individuals; and in developing programs and activities. Knowledge of the principles and practices of sociology and public administration; of departmental policies and procedures; of supervisory principles and practices; and of personal computers. Ability to schedule, organize, and supervise the work of others; to organize and present facts and opinions clearly and concisely; and to develop social skills in others in the authoritative setting.

SUPERVISORY RESPONSIBILITIES

Directly supervises 45 employees in the Detention Counselors, Main Control Operators, Unit Secretaries and Detention Cooks. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

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## QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

## EDUCATION and/or EXPERIENCE

Education equivalent to graduation from an accredited four year college or university with a degree in sociology, psychology, or a related field, and two years of satisfactory, full time paid employment in social work, corrections, or closely related work, including one year of supervisory experience or any equivalent combination of education and experience, substituting one additional year of work experience for one year of education with a maximum substitution of four years of education.

## LANGUAGE SKILLS

Ability to read, analyze, and interpret general business periodicals, professional journals, technical procedures, or governmental regulations. Ability to write reports, business correspondence, and procedure manuals. Ability to effectively present information and respond to questions from groups of managers, clients, customers, and the general public.

## MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

## REASONING ABILITY

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

## CERTIFICATES, LICENSES, REGISTRATIONS

First Aid and CPR Certifications  
Valid Oklahoma Drivers License  
CPI Nonviolence Crisis Intervention Certification  
Pass a Drug Screen Test

## PHYSICAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to use hands to finger, handle, or feel; reach with hands and arms; and talk or hear. The employee frequently is required to stand, walk, sit, and climb or balance. The employee is occasionally required to stoop, kneel, crouch, or crawl. The employee must occasionally lift and/or move

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more than 100 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus.

#### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly exposed to HIV, TB, HDV and other bloodborne pathogens, and fumes or airborne particles. The employee is frequently exposed to extreme heat. The employee is occasionally exposed to wet and/or humid conditions, toxic or caustic chemicals, outside weather conditions, and risk of electrical shock. The noise level in the work environment is usually moderate.

JOB TITLE Unit Shift Supervisor-Detention

DEPARTMENT

Juvenile - Detention

JOB CODE 180

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11-01-01

PHYSICAL DEMANDS	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
On-the-job time spent in the following physical activities. Show time by checking the appropriate boxes:				
Stand			X	
Walk			X	
Sit			X	
Use hands to linger, handle, or feel				X
Reach with hands and arms				X
Climb or balance			X	
Stoop, kneel, crouch or crawl		X		
Talk or hear				X
Taste or smell		X		
Force exerted. Check appropriate boxes.				
Up to 10 lbs.		X		
Up to 25 lbs.		X		
Up to 50 lbs.		X		
Up to 100 lbs.		X		
More than 100 lbs.		X		

Special vision requirements. Check all that apply.

Close vision (clear vision at 20 inches or less)

Color vision (ability to identify and distinguish colors)

Depth perception (three-dimensional vision, ability to judge distances and spatial relationships)

Ability to adjust focus (ability to adjust the eye to bring an object into sharp focus)

Distance vision (clear vision at 20 inches or more)

Peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)

No special vision requirements

WORK ENVIRONMENT	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
Exposure to the following environmental conditions. Show time by checking boxes:				
Wet or humid conditions (non-weather)		X		
Work near moving mechanical parts	X			
Work in high, precarious places	X			
Fumes or airborne particles				X
Toxic or caustic chemicals		X		
Outdoor weather conditions		X		
Extreme cold (non-weather)	X			
Extreme heat (non-weather)			X	
Risk of electrical shock		X		
Work with explosives	X			
Risk of radiation	X			
Vibration	X			

How much noise is typical for the work environment of this job? Check the appropriate level below.

Very quiet (examples: forest trail, isolation booth for hearing test)

Moderate noise (examples: business office with computers and printers, high traffic)

Quiet (examples: library, private office)

Loud (examples: metal can manufacturing department, large earth-moving equipment)



**TULSA COUNTY**  
**Job Description Cover Sheet**

Job Title: Detention Home Cook  
Department: Juvenile - Detention  
Report To: Senior Cook/Superintendent  
FLSA Status: NonExempt  
Job Title Code: 182  
Last Review: 11-1-98  
Grade: B  
Job Group Code: H013

Approval of the attached job description

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Approved By

2-14-99

Date Approved

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## TULSA COUNTY Job Description

Job Title: Detention Home Cook  
Department: Juvenile - Detention  
Reports To: Senior Cook/Superintendent  
FLSA Status: Non-Exempt  
Job Title Code: 182  
Last Review: 11-1-98  
Grade: 8  
Job Group Code: H013

### DEFINITION

Under general supervision, prepares and serves meals for juveniles in detention.

### EXAMPLES OF WORK PERFORMED

Prepares meals according to the designated menu of detention home and numbers of persons to be served. Maintains security count of all utensils used at each meal and the return of same before juveniles leave the eating area. Prepares or leaves instructions for the preparation of snacks. Maintains kitchen inventory and requests supplies as needed. May purchase weekly perishable food needs as determined through inventory. Cleans and keeps sanitary all areas of kitchen and storage space, meets City-County Health Department sanitation codes. Provides proper care of equipment such as defrosting freezers, cleaning filters and reporting immediately any equipment failure to Superintendent. Performs other duties as assigned.

### REQUIRED SKILLS, KNOWLEDGE AND ABILITIES

Skill in estimating food requirements, in preparing and cooking foods to present an attractive appearance and pleasant flavor. Knowledge of general food preparation and cooking; of cutting meat of menu planning; of nutritional value of foods to prepare a balanced diet; and of inventory control and purchasing of food and supplies for food operation. Ability to understand and follow oral and written instructions; to deal tactfully with others; to apply sensory perception in judging flavor and readiness of foods by smell, taste or appearance; to meet meal schedules; to work varied shifts; and to understand and follow departmental policies and procedures.

### SUPERVISORY RESPONSIBILITIES

This job has no supervisory responsibilities.

### QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

### EDUCATION and/or EXPERIENCE

Demonstrated ability to read and write and follow written and oral instructions and one year of satisfactory, full time paid employment in quantity cooking.

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### LANGUAGE SKILLS

Ability to read and comprehend simple instructions, short correspondence, and memos. Ability to write simple correspondence. Ability to effectively present information in one-on-one and small group situations to customers, clients, and other employees of the organization.

#### MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

#### REASONING ABILITY

Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions. Ability to deal with problems involving a few concrete variables in standardized situations.

#### CERTIFICATES, LICENSES, REGISTRATIONS

Valid Food Handler Permit

#### PHYSICAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to stand; walk; use hands to finger, handle, or feel; reach with hands and arms; talk or hear; and taste or smell. The employee is occasionally required to sit and stoop, kneel, crouch, or crawl. The employee must regularly lift and/or move up to 10 pounds and occasionally lift and/or move up to 50 pounds. Specific vision abilities required by this job include close vision, color vision, peripheral vision, depth perception, and ability to adjust focus.

#### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly exposed to moving mechanical parts. The employee is frequently exposed to fumes or airborne particles and toxic or caustic chemicals. The employee is occasionally exposed to wet and/or humid conditions. The noise level in the work environment is usually moderate.

JOB TITLE Detention Home Cook

DEPARTMENT Juvenile - Detention

JOB CODE 182

LAST REVIEW 11-1-98

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PHYSICAL DEMANDS	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
On-the-job time spent in the following physical activities. Show time by checking the appropriate box:				
Stand				X
walk				X
Sit		X		
Use hands to finger, handle, or feel				X
Reach with hands and arms				X
Climb or balance Stoop, kneel, crouch or crawl	X			
Talk or hear			X	
Force exerted. Check appropriate box:				
Up to 10 lbs.				X
Up to 25 lbs.		X		
Up to 50 lbs.		X		
Up to 100 lbs.	X			
More than 100 lbs.	X			

Special vision requirements. Check all that apply.

Close vision (near vision at 20 inches or less)

Color vision (ability to identify and distinguish colors)

Depth perception (three-dimensional vision, ability to judge distances and spatial relationships)

Ability to adjust focus (ability to adjust the eye to bring an object into sharp focus)

Distance vision (near vision at 20 inches or more)

Peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)

No special vision requirements

WORK ENVIRONMENT	AMOUNT OF TIME			
	NONE	UNDER 1/3	1/3 TO 2/3	OVER 2/3
Exposure to the following environmental conditions. Show time by checking the appropriate box:				
Wet or humid conditions (non-weather)		X		
Work near moving mechanical parts				X
Work in high, precarious places	X			
Fumes or airborne particles			X	
Toxic or caustic chemicals			X	
Outdoor weather conditions	X			
Extreme cold (non-weather)	X			
Extreme heat (non-weather)	X			
Risk of electrical shock	X			
Work with explosives	X			
Risk of radiation	X			
Vibration	X			

How much noise is typical for the work environment of this job? Check the appropriate level below.

Very quiet (examples: forest trail, isolation booth for hearing test)

Moderate noise (examples: business office with computers and printers, light traffic)

Quiet (examples: library, private office)

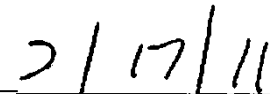
Loud (examples: metal can manufacturing department, large earth-moving equipment)

**TULSA COUNTY**  
**Job Description Cover Sheet**

Job Title: Kitchen Coordinator  
Department: Juvenile Bureau  
Report To: Superintendent  
FLSA Status: Non-Exempt  
Last Review: 01-27-11  
Grade: C  
Job Class Code: H065

Approval of the attached job description

  
Approved By

  
Date Approved

# TULSA COUNTY

## Job Description

Job Title: Kitchen Coordinator  
Department: Juvenile Bureau  
Reports To: Superintendent  
FLSA Status: Non-Exempt  
Last Review: 01-27-11  
Grade: C  
Job Title Code: H065

### DEFINITION

Under general supervision plans, prepares and serves meals for juveniles in the Detention Home and manages the kitchen operation.

### EXAMPLES OF WORK PERFORMED

Manages the kitchen staff and arranges work schedules. Maintains leave records for staff. Prepares meals according to the designated menu of the Detention Home and number of persons to be served. Maintains a security count of all utensils used at each meal and the return of same before juveniles leave the dining area. Prepares or leaves instructions for the preparation of snacks. Plans for and provides for the purchasing of all necessary food and commodities as determined through inventory, quality, yield and cost. Maintains kitchen inventory and requests supplies as needed. Purchases weekly perishable foods as needed and in accordance with Tulsa County procurement policy and procedure as determined through inventory. Cleans and keeps sanitary all areas of the kitchen and storage space. Meets City/County Health Department sanitation codes as well as Child Nutrition Program requirements. Provides proper care of equipment such as defrosting freezers, cleaning filters and reporting any equipment failure immediately to the Superintendent. Frequently uses the computer to produce reports or ordering food products and inventory. Performs other duties as assigned.

### REQUIRED SKILLS, KNOWLEDGE AND ABILITIES

Skill in estimating food quantity requirements; in training and supervising others; in preparing meals to present an attractive appearance and pleasant flavor. Knowledge of general food preparation and cooking; of cutting meat; of menu planning; of nutritional value of foods in order to prepare a balanced diet; of inventory control; of purchasing food and supplies for a kitchen operation. Ability to understand and follow oral and written instructions; to deal tactfully with others; to apply sensory perception in judging flavor and readiness of foods by smell, taste or appearance; to meet meal schedules; to work varied shifts; to understand and follow departmental policies and procedures.

### SUPERVISORY RESPONSIBILITIES

Directly supervises five employees in the Juvenile Detention Home Kitchen. Carries out supervisory responsibilities in accordance with the policies and procedures of the County of Tulsa. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

## QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

## EDUCATION AND/OR EXPERIENCE

High school diploma or general education degree (GED) supplemented by Vo-Tech training in Culinary Arts; over five years of satisfactory full time paid employment in institutional food service; or equivalent combination of education and experience.

## LANGUAGE SKILLS

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

## MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

## REASONING ABILITY

Ability to apply common sense understanding to carry out instructions furnished in written, oral, or diagram form. Ability to deal with problems involving several concrete variables in standardized situations.

## COMPUTER SKILLS

To perform this job successfully, an individual should have knowledge of Internet software; Inventory software and Microsoft Excel Spreadsheet software.

## CERTIFICATES, LICENSE, REGISTRATIONS

Valid Food Handlers Permit  
Valid Food Manager's Certification  
Valid Oklahoma Drivers License

## PHYSICAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to stand; walk; use hands to finger, handle, or feel; reach with hands and arms; talk or hear; and taste or smell. The employee frequently is required to stoop, kneel, crouch or crawl. The employee is occasionally- required- t sit.-The employee- must-regularly lift and/or-move up- tcr 10-pounds- ---- ----- and occasionally lift and/or move up to 50 pounds. Specific vision abilities required by this job include close vision, color vision, peripheral vision, depth perception and ability to adjust focus.

**WORK ENVIRONMENT**

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this Job, the employee is regularly exposed to moving mechanical parts. The employee is frequently exposed to fumes or airborne particles and toxic or caustic chemicals. The employee is occasionally exposed to wet and/or humid conditions and extreme cold. The noise level in the work environment is usually moderate.

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# **Facility Services**

**04-25**

**Menu Planning and Meal Service**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-25</i>
Menu Planning and Meal Service		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

It shall be the policy procedure and practice of Tulsa County Juvenile Detention Home Policy to insure the nutritional adequacy of meals and their preparation under sanitary conditions. The Detention Home cooks will provide meals that are palatable, that are served as soon as possible after preparation and at an appropriate temperature. Detention's food service menu is reviewed and approved annually by the licensed responsible physician or a Registered Dietician.

I. **Purpose:** There is a single menu for staff and juveniles. All persons in the program, except for those on special medical or religious diets, should eat the same food. Food flavor, texture and appearance are important and every effort should be made to present meals hot. **Food shall never be withheld or varied as a form of punishment.** To the extent possible, food ordering and preparation should take into account ethnic tastes and food preferences of the Residents.

II. **Applicable To:** This policy shall apply to all personnel of the Detention Home.

III. **Definitions:** None.

IV. **Procedures:**

A. **Menu Plan -**

1. **Meal Frequency** – Following an approved and structured menu, the Detention Home Kitchen Manager, Cooks and Detention Counselors shall prepare meals everyday for the residents and staff of the facility. The facility shall provide three meals each day: breakfast, lunch and dinner. Meals should be served at appropriate periods and include an evening snack.
2. **Planned Menus** – Weekly menus shall be completed by the Kitchen Manager up to four weeks in advance, but not less than one week in advance of the meal. Posted menus should comply with Oklahoma Child Nutrition Program Standards. Posted weekly menus shall consist of no less than two hot meals each day.
3. **Menu Review** – Annually, the meal plan shall be reviewed by a Registered Dietician, for nutritional value and recommendations of variety. This review shall be documented.

4. **Menu Changes** – Other than properly identified special diets, all residents and staff should eat the same meal. Residents confined to their rooms must have the same meal or

as close to the same meal as others residents, with the understanding that they may not have knives, forks or spoons in their room. Kitchen staff are authorized to make minor changes to the daily menu, in order to accommodate Federal commodities and encourage the use of the freshest fruits and vegetables, but such changes must comply with nutritional standards.

**B. Meal Service** – All food service practices shall comply with the Tulsa City-County Food Service Guidelines. Additionally:

1. **Meal Preparation** – Following an approved menu the Detention Home Cooks shall prepare meals during the week or weekend. During an emergency, when a cook cannot be present, Unit Shift Supervisors or Lead Detention Counselors may prepare the meals.
2. **Staff Supervision** – During all meals Detention Counselors shall eat with the Residents and supervise the meal environment. Any problem or unusual occurrences observed should be reported to the Unit Shift Supervisor or Lead Detention Counselor on duty.
3. **Standard Meal Service Times** – meals are provided at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. However, provided that nutritional minimums are met, variations may be allowed on weekends and holidays.
4. **Resident Participation** – Residents of the facility are prohibited from entering the kitchen or participating in the service of food.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-04, 4A-05, 4A-12, 4A-13)

**VI. Enclosures:**

- A. Weekly Menu Example

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-02.

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

Meal Planning Worksheet Grades 9-12  
7 Day Menu

LUNCH: Grades 9-12	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Weekly Totals
Fruit								
1/2 Cup Daily	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	Fruit/Fruit Juice 1 cup	
3.5 Cups Weekly								
Vegetables								
3/4 Cup Daily								
5.25 Cups Weekly								
Dark Green			Romaine			Steamed Broccoli	Spinach Salad	
1/2 cup Weekly			1/2 cup			1/2 cup	1/2 cup	
Red/Orange		Corn	Salsa			Sweet Potatoe Fries		
3/4 cup Weekly		1/2 cup	1/2 cup			3/4 cup		
Beans/Peas	Baked Beans		Refried Beans					
1/2 Cup Weekly	1/2 cup		1/2 cup					
Starchy				Mashed Potatoes				
1/2 Cup Weekly				3/4 cup				
Other Vegetable	Cucumber & Celery	Broccoli Salad		Green Beans	California Blend		Steamed Carrots	
1/2 Cup Weekly	1/2 cup	1/2 cup		1/2 cup	3/4 cup		1/2 cup	
Additional Veg. to								
1 1/2 Cup Weekly								
Grains, 2 oz. daily	WW Bun	Bread	Brown Rice	WW Roll	WW Bread	WW Bun	Garlic Toast	
14 -16 Per Week	2	2	1 slice 1/2 cup	1/2 cup 1	2 Noodles 1/2 cup	2 Noodles	1 slice 1/2 cup	
Meat / Meat Alternate	Turkey Dog	Goulash	Taco Salad	Meatloaf	Chicken and Noodle Chicken	Hamburgers	Spaghetti/Meat Sauce	
2 oz. daily				3 oz				
14 - 16 per week	2	2	2	2	2	2 oz	3 oz	
Milk, 2 varieties								
1 Cup Daily								
Non Creditable Food	Oatmeal Cookie					Apple Crisp		
items	Ranch							
Calories: 750 -850								
Sodium ≤740 mg								
Sat Fat ≤10 %								
Trans Fat								

Nutrition label or manufacturer specifications must indicate ZERO grams of trans fat per serving

**Instructions: Plan 1 week of meals for Grades 9-12 to meet daily and weekly requirements. Indicate calories for each item in the bottom box for each day and weekly totals.**

# **Facility Services**

**04-26**

## **Special Diets**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-26</i>
Special Diets		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be the policy, procedure and practice of the Tulsa County Juvenile Detention Home to provide for special diets as prescribed by authorized medical and dental personnel.**

**I. Purpose:** Therapeutic diets are provided upon written medical authorization. Specific diets should be prescribed only by appropriate medical or dental personnel. The diet prescription should be recorded in all relevant file areas, including memorandum form to the staff preparing the meals. Special diets should be kept as simple as possible and should conform as closely to the food served to the other residents. Where a juvenile's religious beliefs require adherence to dietary law, efforts will be made to provide a special diet.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Therapeutic Diet** – Special foods or meals prescribed by a medical professional as a part of a resident's treatment.

### **IV. Procedures:**

**A. General Guidelines:** Therapeutic diets should be available upon medical authorization. Specific diets should be prepared and served to residents according to the orders of the facility Nurse, Doctor or treating dentist. Approved request should be in writing and reviewed monthly

- 1. Therapeutic Diets** – Resident's who require a special diet due to allergies, sickness or injury must be approved by the Facility Nurse.
- 2. Religious Diets** – The facility menu is structured to allow a significant level of variation and accommodation for most residents' religious needs. However; the facility will provide special religiously acceptable diets upon verification of a resident's religious needs.
- 3. Prohibited Use of Food** – At no time will a special diet be used as a disciplinary measure.

**B. Special Diet Request:** Request for a therapeutic diet should be completed on the standard form by authorized staff. Authorized staff includes Medical Staff, Administrative staff and Unit Shift Supervisors. All special diets should be available upon medical or dental authorization. Specific diets should be prepared and served to juveniles according to the

orders of the treating physician or dentist, or as directed by the responsible health authority. Medical or dental diet prescriptions should be specific and complete, furnished in writing to the food service manager, and rewritten monthly. Special diets should be kept as simple as possible and should conform as closely as possible to the foods served other juveniles.

1. **Medical Staff** – When there is a medical necessity for changing a resident’s diet it shall be documented in the resident’s medical file and the facility Nurse or Doctor shall complete a standard request for a special diet.
2. **Emergency Requests** – When medical staff is not available Unit Shift Supervisors may authorize a special diet at a residents request until he or she can be seen by the Facility Nurse.
3. **Documentation** – All requests made by medical staff must be in writing on a standard memo form and include the following information:
  - a. Name of person making the request.
  - b. Specific guidance on requested restrictions or additions
  - c. Start date and stop date.

#### **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-4A06, 4A-07, 4A-08)

#### **VI. Enclosures:**

- A. Request for Special Diet Memo

#### **VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-03.

Distribution: Detention Home Policy and Procedure Manual



# Kitchen Memorandum

Date:

To:

From:

Subject:

# **Facility Services**

**04-27**

**Adequate Health Protection**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-27</i>
Adequate Health Protection		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

It shall be the policy, procedure, and practice of the Detention Home to provide adequate health protection for all residents and staff in the facility, to include those working in the food services department by complying with the following requirements:

1. As required by applicable health regulations, all personnel involved in the preparation of food must receive a pre-assignment medical examination and periodic re-examinations to ensure freedom from diarrhea, skin infections, and/or any other disease/illness transmissible by food or utensils. These examinations shall be conducted in accordance with local health requirements.
  2. If the facility should ever utilize or contract for food services by an outside agency or individual, the Detention Home must obtain appropriate documentation that the outside provider has a valid food handlers permit and verification that they comply with state and local regulations regarding food service.
  3. That the facility will instruct all staff and food handlers to wash their hands upon reporting for duty and after using the restroom.
  4. Residents are not authorized to work in the facility's kitchen for health and safety reasons.
  5. The food services manager or designee shall monitor food service staff each day for health and cleanliness.
- I. **Purpose:** All food service personnel should be in good health and free from communicable disease and open infected wounds; have clean hands and fingernails; wear clean, washable clothing; and employ hygienic food handling techniques. The facility will meet local and state regulations for health and sanitation as well as submit to regular inspection of food service areas by local authorities.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None.

**IV. Procedures:**

- A. Physical Examinations** – All staff working in the food service area and with juveniles will have a pre-employment physical examination that will include a test for tuberculosis and ensure that staff is free of communicable disease. Food service staff shall also be free of open or infected wounds.
1. **Outside Providers** – When food service is provided by an outside agency, the facility shall have written verification that the outside providers comply with state and local food regulations. Any outside provider will be required to comply with facility standards for safety and sanitation.
- B. Training for Food Service Staff** – All food service staff are required to receive training from the Tulsa City/County Health Department and maintain a valid food handlers card. Additionally, staff is given an orientation appropriate to their role and responsibilities and participates in regular training.
1. **Orientation Training** – At a minimum staff shall be trained in the following:
- a. proper storage techniques for food
  - b. safe use of kitchen tools and appliances
  - c. cleaning and sanitation
  - d. location and use of emergency fire safety equipment and evacuation plans
  - e. proper procedures for reporting accidents and hazardous conditions
2. **First Aid and CPR Training** – All kitchen staff are required to be certified in First Aid and CPR, which addresses emergency treatment of burns, scalds, cuts and other injuries.
- C. Responsibilities of Food Service Staff** – All food service staff are required to do the following:
1. **Maintain Hygiene** – All food service staff are required to wash their hands when reporting for duty and after using the bathroom, wear clean clothing each day, have clean finger nails and will be monitored by the food service manager for overall health and cleanliness. Any staff member serving food will wear sanitary gloves while serving food.
2. **Maintain Equipment** – All food service staff are required to assist in the cleaning and sanitation of kitchen equipment, utensils and general area.

3. **Notifications** – All food service staff are required to make appropriate notifications to the Supervisor, Program Manager or the Facility Administrator of any hazards or observed health violations.
  4. **Maintain Records** – All food service staff shall assist in keeping accurate records of all meals served and of any substitutions made.
- D. Responsibilities of Kitchen Manager** – The Kitchen Manager’s responsibilities shall include but are not limited to:
1. **Regular Inspections** – The Kitchen Manager shall regularly inspect the kitchen area for cleanliness and sanitation. The Kitchen Manager shall also ensure that kitchen staff use gloves while serving, the food service staff use appropriate techniques for sanitation of kitchen tools and utensils. The Kitchen Manager shall also ensure that food service staff wear clean, washable garments and are free from open or infected wounds.
  2. **Review Documentation** – The Kitchen Manager shall review all documentation produced by food service staff to include freezer and refrigerator temperature logs, resident meals, and special menus.
  3. **Training** – The Kitchen Manager shall ensure that all food service staff receive required training during orientation and annually.
  4. **Records** – The kitchen Manager shall establish and maintain a record keeping system for the food service department.
  5. **Administrative Notification** – The Kitchen Manager shall ensure that any health violation or hazard be reported to administrative staff as quickly as possible. An Incident Report shall also be required.
- E. Direct Care Staff Responsibilities** – Direct care staff shall ensure that residents wash their hands before each meal and after using the restroom. If required to assist in the kitchen area, direct care staff will wash their hands before reporting for duty.
- F. Inspections** – The Tulsa City/County Health Department will perform regular unannounced inspections pursuant to relevant codes for health and sanitation. A report shall be issued to kitchen staff who will forward it to administrative staff for review. The Kitchen Manager will be responsible for correcting any deficiency identified.

## **V. Authority/References:**

10 O.S. 7302-8.3 (Standards of Cleanliness)  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-47)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-14 / **MANDATORY**)

**VI. Enclosures:** None.

**VII Action:**

The facility Program Manager and Kitchen Manager will be responsible for compliance monitoring of this policy.

The facility administrators will be responsible for annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-04

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-28**

**Supervision of Meal and Food Services**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-28</i>
Supervision of Meal and Food Services		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be the policy procedure and practice that staff members directly supervise residents during meals and eat the same menu as Residents in the facility.**

**I. Purpose:** The practice of having staff member present contributes to a more orderly experience in the dining area and enhances the relationship between kids and staff. This practice also minimizes waste, careless serving and the abuse of a juvenile by another juvenile. It also permits observation and reporting of unusual eating habits of individual residents, such as rejection or overeating.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:** All meals are served under the direct supervision of Detention Counselors to insure that favoritism, careless serving and waste are avoided, but most importantly, to insure that safety and security for Residents and staff is maintained.

**A. General Guidelines**

1. **Constant Supervision** - Residents should never be left unsupervised in the dining room. Residents shall be escorted into and out of the cafeteria in an orderly fashion.
2. **Safety and Security** –
  - a. Staff shall make seating arrangements, if necessary for behavior management.
  - b. A Detention Counselor should sit at each table.
  - c. One staff member shall be stationed by the serving window facing the group. This staff observes the serving of food and return of plates and utensils.
  - d. All silverware is counted prior to the shift, before the meal and after the meal to insure the count is accurate and maintained.
3. **Staff Responsibility** - Counselors should sit at the tables with Residents (avoid sitting with another Detention Counselor) and choose a seat in which he/she can have a full view of the dining room area. Interaction with residents during this time is very important. Be aware and alert, but do not take the posture of a "Guard Walking the Perimeter". Sit down with Residents.



**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**VI. Enclosures: None**

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-06

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-29**

# **Therapeutic Diets**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services	<i>Policy</i>	<i>04-29</i>
Therapeutic Diets	<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>
		<i>11/06/10</i>

**It is the written policy, procedure, and practice of the Juvenile Detention Home to provide for special diets as prescribed by appropriate medical personnel.**

**I. Purpose:** Therapeutic diets are provided upon written medical authorization. Specific diets should be prescribed only by appropriate medical personnel. The diet prescription should be recorded in all relevant file areas, including memorandum form to the staff preparing the meals. Special diets should be kept as simple as possible and should conform as closely to the food served to the other residents. Where a juvenile's religious beliefs require adherence to dietary law, efforts will be made to provide such a special diet.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**IV. Procedures:**

1. **Special Diets:** Must be brought to the attention of a Facility Administrator for proper documentation and appropriate memos.
2. **Religious Diets:** Any request for a special diet required by Religious Dietary laws should be verified with the juvenile's parent or legal guardian.
3. **Notification:** The detention Kitchen Manager should be advised in writing of the special diet. This memo will be maintained in the Menu Planning Guide. In the absence of all cooks, Detention Counselors will be equally responsible in implementing Special Diets
4. **Documentation:** An entry of this information must be noted:
  - a. In the daily shift log
  - b. In the Residents Daily observation Report (detention file)
  - c. On the Medial Sheet (detention file)
  - d. In the weekly menu planning Guide in the kitchen;  
What food is substituted and on what day.
5. **Complaint Resolution:** Problems that the juvenile experiences with the special diet should be brought to the attention of the Unit-Shift Supervisor, who will investigate the concern or complaint.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-06, 08)

**VI. Enclosures:**

1. Kitchen Memo
2. Medical Notes
3. Daily Shift Log

**VII. Action:**

Facility Medical Staff, Program Manager and Supervisors and Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# Kitchen Memorandum

Date:

To:

From:

Subject:



# DETENTION DAILY SHIFT LOG

DATE \_\_\_\_\_ DAY \_\_\_\_\_ SHIFT \_\_\_\_\_ UNIT \_\_\_\_\_

BEGINNING POPULATION \_\_\_\_\_ ENDING POPULATION \_\_\_\_\_

SHIFT PERSONNEL / KEY NO.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SHIFT CHECK LIST

(X)

Review staff schedule / arrivals \_\_\_\_\_  
Security count of keys and pencils \_\_\_\_\_  
Security count of kitchen utensils \_\_\_\_\_  
Security search of rooms \_\_\_\_\_  
Cash drawer audit \_\_\_\_\_  
Review room charts / pop. count \_\_\_\_\_  
Departing shift briefing \_\_\_\_\_  
Review shift logs / incident reports \_\_\_\_\_  
Review medical files and medication \_\_\_\_\_  
Review resident's behavior reports \_\_\_\_\_  
Distribution of resident mail \_\_\_\_\_  
On-coming shift briefing \_\_\_\_\_  
List any deficiency in above \_\_\_\_\_

RESIDENTS ON ROOM CONFINEMENT / RM.

\_\_\_\_\_  
\_\_\_\_\_  
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ADMISSIONS \_\_\_\_\_

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RELEASES \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEE SHIFT SUMMARY ON BACK PAGE





# **Facility Services**

**04-30**

## **Food Handlers Guidelines**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-30</i>
Food Handlers Guidelines		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Detention Home to provide for the adequate health protection of all juveniles and staff in the facility and juveniles and other persons working in food service, including the following.**

**All employees hired by the Juvenile Detention home must pass a pre-employment physical, conducted by a licensed physician.**

**Residents of the Juvenile Detention home are not allowed to participated in the food service work of the facility**

**Staff working in the food services are monitored each day for health and cleanliness by the Kitchen Manager or by Administrative Personnel. The Facility Administrator will be advised of any conditions that adversely affect the sanitation, safety, or quality of food services.**

**I. Purpose:** All personnel involved in the preparation of food must wash their hands upon reporting to kitchen duty and after toilet facilities. All food service personnel should be in good health and free from communicable disease and open infected wounds; and have clean hands and fingernails; wear hairnets or caps; wear clean, washable garments; and employ hygienic food-handling techniques.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:** None

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-14/**MANDATORY**)

**VI. Enclosures:** None

**VII. Action:**

Facility Administrator and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-09

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

**Facility Services**

**04-31**

**Food Purchasing**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services	<i>Policy</i>	<i>04-31</i>
Food Purchasing	<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>
		<i>11/06/10</i>

**It is the policy, procedure, and practice of the Detention Home to require that accurate records are maintained of all meal served in regards to Budgeting and Purchasing.**

**I. Purpose:** A uniform system should be established to record meals served juveniles, employees, guests, and visitors. Such records are required for fiscal accounting, dietary purposes and budget planning. Food service records should include published menus, information on waste, food costs, and nutritional accounting. The Kitchen Manager has the authority to purchase food items through local retail stores when equivalent items cannot be obtained through local or state contract of bulk purchases.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:** The Detention Kitchen manager will purchase small quantity grocery items in the following manner:

1. **Standard Procurement Process:** The Tulsa County Juvenile Detention Home complies with the Tulsa County bookkeeping guide which details the process for purchasing, recording keeping and budget monitoring.
2. **Emergency Purchases:**
  - a. Make timely inventory of grocery need
  - b. Make purchases of groceries in the Detention Home Vehicle
  - c. Submit the itemized sales receipt and invoice to the Facility Administrator after signing and dating the receipts in the appropriate place.
  - d. The Facility Administrator reviews the purchase, signs the receipts and forwards them to the fiscal officer for processing.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-02)

**VI. Enclosures:** None

**VII. Action:**

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**Policy: Food Purchasing****Policy Number: 04-31**

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Facility Administrator and Kitchen Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-10

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-32**

# **Meal Frequency**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Facility Services</b>		<i>Policy</i>	<i>04-32</i>
<b>Meal Frequency</b>		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It is the written policy, procedure, and practice of the Detention Home to require that at least three meals, of which two are hot meals, are provided at regular meal times during each twenty four hour period, with no more than fourteen hours between the evening meal and breakfast. Provided basic nutritional goals are met, variations may be allowed based on weekend and holiday food service demands.**

**I. Purpose:** When juveniles are not absent from the facility for court or transportation purposes meals should be provided at regular times.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home

**III. Definitions:** None

**IV. Procedures:** To insure compliance, a Unit Shift Supervisor will:

- a. Review the Weekly Menu Planning Guide on a weekly basis
- b. Make daily inspection of meals served and condition under which they are prepared; reporting any irregularities to the Facility Administrator
- c. Insure that any areas of concern are communicated to Administration and the Kitchen Manager or head staff preparing meals
- d. Make note of any irregularities that rise to the level of documentation

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-4A-13)

**VI. Enclosures:** None

**VII. Action:**

Facility Administrator, Supervisors and the Kitchen Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.



Replaced: Facility Policy and Procedure IV:11-11

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Facility Services**

**04-33**

**Nutrition**

**Health and Wellness Program**

## Tulsa County Juvenile Detention Home Policy and Procedures

Facility Services		<i>Policy</i>	<i>04-33</i>
Nutrition Health and Wellness Program		<i>Current Revision</i>	<i>03/17/15</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>03/17/15</i>

The Tulsa County Juvenile Detention Home is committed to providing school environments that promote and protect children’s health, well-being and ability to learn by supporting healthy eating and physical activity. Therefore, it is the policy of the Detention Home that:

- The Detention Home will engage residents, staff, food service professionals, health professionals, and other interested community members in developing, implementing, monitoring, and reviewing nutrition and physical activity policies.
- All residents will have opportunities, support and encouragement to be physically active on a regular basis.
- Qualified nutrition professionals will provide residents with access to a variety of nutritious, and appealing foods that meet the health and nutrition needs of students; will accommodate the religious, ethnic, and cultural diversity of the residents in meal planning; and will provide clean, safe, and pleasant settings and adequate time for students to eat.
- To the maximum extent practical, the Detention Home will participate in available federal school meal programs including the School Breakfast Program, National School Lunch Program [including after-school snacks], Summer Food Service Program.
- The Detention Home will provide nutrition education and physical education to foster lifelong habits of healthy eating and physical activity and will establish linkages between health education and school meal programs.

**I. Purpose:** In accordance with the Healthy and Hunger-Free kids Act of 2010 all school districts with a federally-funded school meals program must implement a wellness policy that address nutrition, education, physical activity, nutrition promotion, all foods available on campus, and other school-based activities. As a facility that participates in the Federal School Lunch Program (FSLP), as administered by the Oklahoma Department of Education, Child Nutrition Program (CNP), it is our goal to maintain compliance with all applicable standards. The nutrition and physical activity policies below are designed to meet this federal requirement.

**II. Applicable To:** This policy shall apply to all students and personnel of the Detention Home.

**III. Definitions:** None.

#### **IV. Procedures:**

##### **A. Detention Home School Meals -**

1. **Criteria** - Meals served through the National School Lunch and Breakfast Programs will meet the following criteria:
  - a. be appealing and attractive to children;
  - b. be served in clean and pleasant settings;
  - c. meet, at a minimum, nutrition requirements established by local, state, and federal statutes and regulations;
  - d. offer a variety of fruits and vegetables;
  - e. five vegetable subgroups are offered weekly in required quantity.
  - f. serve only low-fat (1%) and/or fat-free unflavored milk, and/or, fat free flavored milk.
  - g. ensure that all of the served grains are Whole grain.
2. **Review and Distribution of Nutritional Information** - All menus are reviewed by a Registered Dietitian annually. The Detention Home, to the extent possible, will engage Residents, through taste-tests of new entrees and surveys, in selecting foods to be added to the menu in order to identify new, healthful, and appealing food choices. Such information could be made available on posted menus or on request.
3. **Meal Times and Scheduling** – The Detention Home shall comply with OJA guidelines for meal service as defined in OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44). Additionally, the following shall apply:
  - a. the facility will provide students with at least 10 minutes to eat after sitting down for breakfast and 20 minutes after sitting down for lunch;
  - b. meal periods shall be scheduled at appropriate times, *e.g.*, breakfast should be scheduled between 7:30a.m. and 8:00a.m., lunch 11 a.m. and 1 p.m., dinner between 4:30p.m. and 6:30p.m.;
  - c. the facility shall not schedule tutoring, counseling, or organizational meetings or activities during mealtimes, unless residents may eat during such activities;

- d. the facility will provide students access to hand washing or hand sanitizing before they eat meals or snacks; and
  - e. should take reasonable steps to accommodate the tooth-brushing regimens of students with special oral health needs (*e.g., orthodontia or high tooth decay risk*).
4. **Sharing of Foods and Beverages** - Residents are not allowed to share their foods or beverages with one another during meal or snack times, given concerns about allergies and other restrictions on some children's diets.
5. **Food or Beverages Sold Outside the Cafeteria** – The facility does not allow any food or beverages to be sold to residents.
6. **Snacks** - The Detention Home provides snacks through an after-school program and receives reimbursements through the National School Lunch Program. Snacks served during the school day or in after-school care or enrichment programs will make a positive contribution to children's diets and health, with an emphasis on serving fruits and vegetables as the primary snacks and water as the primary beverage. Schools will assess if and when to offer snacks based on timing of school meals, children's nutritional needs, children's ages, and other considerations. The facility shall work with a registered Dietician to create and review a list of healthful snack items to staff and kitchen personnel.
- B. **Staff Qualifications** - As part of the Detention Home's responsibility to operate a food service program, we will provide continuing professional development for all kitchen staff. Staff development programs should include appropriate certification and/or training programs for the Kitchen Manager and kitchen staff, according to their levels of responsibility.
- 1. **Kitchen Staff** – All kitchen staff are required to maintain a Food Handler's Permit which is issued by the Tulsa City-County Health Department and must be recertified every three years.
  - 2. **Kitchen Manager** – required to maintain a Food Handler's Permit which is issued by the Tulsa City-County Health Department and must be recertified every three years and complete the Tulsa County Health Department certification course on Kitchen Management.
  - 3. **Registered Dietitian** – Annually, the facility menu shall be reviewed by a Registered Dietitian (RD) in good standing state. The RD may also be asked to approve special menu or diets for individual residents.
- C. **Physical Activity Opportunities and Physical Education** -
- 1. **Daily Physical Exercise** - All Residents, including students with disabilities, special health-care needs, and in alternative educational settings, will have the opportunity to participate in daily physical exercise, unless otherwise directed by a physician. The Office of Juvenile Affairs (OJA) requires that Residents are offered at least one hour of large muscle activity each day. The Resident exercise plan will be developed and evaluated by a certified physical education professional.
  - 2. **Daily Recess** - All Residents will be offered at least 20 minutes a day of supervised free-time, preferably outdoors or in the gym, during which the facility shall encourage moderate to vigorous Physical activity verbally and through the provision of space and equipment.

3. **Physical Activity and Punishment** - Staff and facility personnel will not use physical activity (*e.g.*, running laps, pushups) or withhold opportunities for physical activity (*e.g.*, recess, physical education) as punishment.

#### **D. Monitoring and Policy Review**

1. **Monitoring** - The Facility Administrator or designee will ensure compliance with established facility nutrition and physical activity wellness policies. Food service staff will ensure compliance with nutrition policies within the facility food service areas and will report on this matter to the Facility Administrator. In addition, the facility will report on the most recent USDA School Meals Initiative (SMI) review findings and any resulting changes. If the facility has not received an SMI review from the state agency within the past five years, the district will request from the state agency that an SMI review be scheduled as soon as possible.
2. **Monitoring Report** -The Facility Administrator or designee will develop a summary report every three years on facility compliance with established nutrition and physical activity wellness policies, based on input from the, food service staff, the Program Manager and Supervisors. That report will be provided to the Director of the Juvenile Bureau for review.
3. **Policy Review** - Assessments of facility compliance shall be completed annually and shall be included in the Juvenile Detention Home Annual Report. Assessment should include a review policy compliance, assess progress, and determine areas in need of improvement. As part of that review, the facility will review nutrition and physical activity policies; provision of an environment that supports healthy eating and physical activity; and nutrition and physical education policies and program elements. The facility will, as necessary, revise the wellness policies and develop work plans to facilitate their implementation.
4. **Facility Health Councils** - The facility will create, strengthen, or work within existing school health councils to develop, implement, monitor, review, and, as necessary, revise nutrition and physical activity policies. The councils also will serve as resources to the facility for implementing those policies. The facility health council consists of a group of individuals representing the facility and Bureau, and should include the Kitchen Manager, Facility Nurse, a representative of the Tulsa City-County Health Department, a Unit-Shift Supervisor and, when possible, Residents of the facility.

#### **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities )  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition  
National Alliance for Nutrition and Activity (NANA) March 2005 Suggested Guidelines

#### **VI. Enclosures:**

1. Fitness Program for TCJDC

**VII. Action:**

Facility Administration, Supervisors, the Program Manager, Kitchen Manager, Nurse, Tulsa Public School Personnel and the Accreditation Manager will be responsible for compliance monitoring of the Nutrition Health and Wellness Program policy. Facility administrators will be responsible for the semi-annual review and revision of this policy.

Any exceptions to this policy statement will require written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure IV:11-12

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# **Administration & Management**

**05-01**

**Releasing Resident's Money**



## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>05-01</i>
Releasing Resident's Money		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Tulsa Country Juvenile Detention Home that Juvenile personal funds held by the facility are controlled by accepted accounting procedures.**

**I. Purpose:** The responsibility for the control and accounting of juveniles personal funds usually is delegated to the facility's business manager or designee. Juveniles should receive receipts for all financial transactions.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Release of currency while a resident is still in the Detention facility**

1. When a resident authorizes the release of currency to a parent, legal guardian or authorized person, property release form 789 is completed by the juvenile and on duty detention counselor.
2. This form is checked against the receipt for money (3072) initially signed when the resident was admitted to detention, contained in the residents detention file.
3. This staff member retrieves the assigned currency from the property bag located within the values room on the admission hall.
4. After verification of amounts listed within forms 789 and 3072 the currency is released to the authorized person.

**B.** The Detention home does not release partial funds. Upon on request and approval all currency that the resident came into the facility with are verified and released.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-1B-19)

**VI. Enclosures:**

1. Receipt for money Form 3072

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:15-06

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

TULSA COUNTY  
JUVENILE DETENTION HOME

Receipt for money \_\_\_\_\_ Date \_\_\_\_\_

From \_\_\_\_\_  
(Name of Juvenile)

\$ \_\_\_\_\_ Dollars

\_\_\_\_\_  
(Detention Worker)

Form 3072 (Rev. 12-80) Amount: \$ \_\_\_\_\_

# **Administration & Management**

**05-02**

## **Resident Property Release Form**

## Tulsa County Juvenile Detention Home Policy and Procedures

Administration & Management		<i>Policy</i>	<i>05-02</i>
Resident Property Release Form		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure and practice of the Tulsa County Juvenile Detention Center to govern the control and safeguarding of juvenile personal property. The personal property retained at the facility is itemized in a written list that is kept in the permanent case file, and that the juvenile receives a current copy of the list.**

**I. Purpose:** All personal property retained at the facility is accurately inventoried and securely stored. An inventory list is signed by the juvenile and a receipt given to the juvenile for all possessions stored. The property is available if required by the juvenile during their stay within the facility and is returned at the time of release, with a receipt signed by the juvenile acknowledging return of all property.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Property Release Form** – The personal property release form is the instrument used by the Detention Home to legally verify the itemized list of belongings of residents, which were on their person at the time of admission to the facility.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5A-16)

**VI. Enclosures:**

1. Property Release Form 718

**VII. Action:**

Facility Supervisors, Program Manager and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:15-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

PROPERTY RELEASE FORM

I, \_\_\_\_\_ authorize the Juvenile Detention Home Superintendent to release the below listed items of property, contained in my Personal Property Bag, held by him for the Tulsa County

Juvenile Detention Home to \_\_\_\_\_

ITEMS OF PROPERTY

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

\_\_\_\_\_ JUVENILE

\_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_ DETENTION WORKER

\_\_\_\_\_ PROPERTY RECEIVED BY \_\_\_\_\_ WITNESS

# **Juvenile Services**

**05-03**

**Detention Program Schedule**



## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-03</i>
Detention Program Schedule		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to provide that facility staff identify the collective service needs of the juvenile population at least annually. Special programs are provided to meet the needs of juveniles with specific types of problems.**

**I. Purpose:** Although the service needs of individual juveniles are important, the agency has a responsibility to assess periodically the collective needs of all confined juveniles to ensure that it is maximizing the delivery of services. This is particularly important in identifying youths who should be part of special programs, such as drug abusers, alcoholics, and mentally ill, mentally challenged, or gifted youths. Determination of collective needs emerge from a well-planned information system; careful screening of case files; and discussion with staff, juveniles, and other persons concerned with the program.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**1. Annual Assessment** – Once per year the facility Program Manager will provide an assessment to the Facility Administrator of the program in relation to program goals and evaluations of the program completed by staff. Facility residents will be offered the opportunity to provide input as to the nature and functionality of the program. The facility may use surveys to obtain information in addition to other efforts. Area evaluated will include, but are not limited to:

- Meal Program
- Religious Programming
- Mental Health and Medical Programs
- Resident Recreation
- Resident Groups
- Education Program

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5B-02)

**VI. Enclosures:**

1. Program Schedule

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:16-03

Distribution: Detention Home Policy and Procedure Manual

# Tulsa County Juvenile Detention Home

## Regular Program Schedule

Day Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0700	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
710	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up and hygiene	Wake up and hygiene
0730	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast
0800	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast
0830	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	Major Clean Up	Bed Linen Turn in
0900	<b>School Starts**TCCHD</b>	<b>School Starts**TCCHD</b>	<b>School Starts</b>	<b>School Starts*TCCHD</b>	<b>School Starts</b>	8:30-10:30	Supervised Free Time
1030	1st Break 10:30-10:40	1st Break	1st Break	1st Break	1st Break	Organized Activity	Religious Program*
1120	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break
1130	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch	1st Lunch
1200	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch	2nd Lunch
1230	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
1245	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>Prep for Visitation</b>	<b>Prep for Visitation</b>
1330	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Visitation 1330-1430	Visitation 1330-1430
1400	2nd Break 14:00-14:10	2nd Break	2nd Break	2nd Break	2nd Break	Security Search	Security Search
1530	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>*Hair Cuts</b>
1535	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
1545	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
1620	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break	Hygiene Break
1630	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group
1700	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group
1730	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity
1830	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	Religious Program*
1930	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
2030	ARG/ Snack**	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack
2100	Resident Showers	Resident Showers	Resident Showers	Resident Showers	Resident Showers*	Resident Showers*	Resident Showers
2145	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
2200	Lights Out	Lights Out	Lights Out	Lights Out	Lights Out	Lights Out	Lights Out

\*Tulsa City-County Health Department Presentation 10:00am to 11:00am

\* Physical Training Program \*\*At-Risk Group: Various Topics

\*Voluntary Religious Program 10:00am 11:00am

\*Resident Showers may be given earlier to allow residents later bed time

Effective:04/02/07

# **Juvenile Services**

**05-04**

**Agency Trainers and Speakers**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Juvenile Services</b>		<i>Policy</i>	<i>05-04</i>
<b>Agency Trainers and Speakers</b>		<i>Current Revision</i>	<i>11/06/10</i>
<i>Approved by:</i>	<b>Alondo Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to provide for a social services program that makes available a range of resources appropriate to the needs of juveniles, including but not limited to individual, group, and facility lectures, seminars and assemblies.**

**I. Purpose:** Social services can assist juveniles with family and personal problems through supportive guidance and professional assistance. Some of these services may be provided through contractual arrangements with volunteer, community and civic agencies.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Access to Speakers and Trainers** – From time to time the facility shall provide speaker and trainer for residents on areas of interest, vocation or recreation. All speakers and trainers will be approved by the Facility Administrator or his designee. They will complete a Letter of Agreement Form notifying them of their obligations under confidentiality rules and requirements. Staff shall always be present with the speakers or trainers.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5B-01)

**VI. Enclosures:**

1. Letter of Agreement

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:16-07

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

ACCESS FOR THE PURPOSE OF RESEARCH, EVALUATION, STATISTICAL ANALYSIS, INTERVIEWS, PRESENTATIONS, OR PHOTOGRAPHS

Letter of Agreement

Prior to being granted authorization to interview, photograph, or speak to any resident(s) in the temporary custody of the Tulsa County Juvenile Detention Home

\_\_\_\_\_

NAME

representing-----  
INSTITUTION/AGENCY/NEWS MEDIA

acknowledge making a full commitment to comply with all related State laws and regulations, facility safety and security policies, and to insure the confidentiality of all juvenile records. I agree not to reveal the identity of any residents(s) held in detention without the written consent of the Chief Judge of the Tulsa County Juvenile Bureau of the District Court.

\_\_\_\_\_  
Signature of Speaker/Agency/News Media Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorization Signature of Superintendent  
Tulsa County Juvenile Detention Home

\_\_\_\_\_  
Date

# **Juvenile Services**

**05-05**

## **Educational Program**



## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Juvenile Services</b>		<i>Policy</i>	<i>05-05</i>
<b>Educational Program</b>		<i>Current Revision</i>	<i>12/04/04</i>
<i>Approved by:</i>	<b>Alondo Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It shall be the policy procedure and practice of the Tulsa County Juvenile Detention Home to provide for a comprehensive education program for juveniles in custody.**

**I. Purpose:** The facility will provide juveniles with a broad educational program that is the most suited to their needs and abilities and includes but is not limited to: developmental education, remedial education, special education, multi-cultural education and tutoring services when needed. The educational program operates under the joint supervision of the Detention Home and the Tulsa Public School system.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and relevant educational staff assigned to the Detention Home School.

**III. Definitions:** None.

### **IV. Procedures:**

**A. General Goals** – The following general goals will be achieved to some extent by all juveniles. They will however vary according to the individual juvenile’s length of stay and ability based on diagnostic testing and individualized tutoring if indicated.

**1. Scope of the Program** – Each juvenile will be required to participate in basic developmental and life skills education. Instruction in these areas will be sensitive to academic and developmental level of the juveniles in custody.

**2. Strength Based Approach** - Each juvenile will function in a positive environment that builds on his/her strengths while recognizing and improving weaknesses.

**B. Education Plan** – The facility Program Manager shall assist the Facility Administrator and coordinate with the Tulsa Public School (TPS) systems educators and administrative representative to develop an educational plan that provides for the following elements:

**1. Assessment Tools** – Assessment materials and procedures to determine the need for remedial or special education services.

2. **Materials and Specialized Equipment** – Verify that facility’s educational materials and specialized equipment meet minimum Tulsa Public School standards.
  3. **Schedule** – Daily school schedules shall be established, but shall be designed to emulate TPS school schedule as closely as possible. The daily school schedule shall be posted.
  4. **Evaluation** – The education program will be reviewed annually by Detention Home administrative staff, Supervisors, and educational staff. The review will include Curriculum, assessment and testing materials, health and safety procedures, certification of general staff and the implementation of the facility educational plan.
- C. **Teachers Responsibilities** – Educational and tutoring staff must have education and qualifications appropriate to their responsibilities and are required to do the following:
1. **Documentation and Records** – Educators shall maintain attendance and file it with TPS, as well as assist the facility by providing records of grades for any juvenile in residence during 10 consecutive school days. Educators will also assist with maintaining records of resident testing.
  2. **Testing** – Only educators will assess juvenile academic testing results that will result in the creation of an individualized curriculum. While the facility has established the Brigance Assessment Tool as the standard test for determining a juvenile’s abilities, educators may do additional testing.
  3. **Credentials** – Educators are responsible for informing the facility if there is any change in their status as certified educators, or as employees of TPS.
  4. **Classroom Management** – Educators are expected to manage their class rooms with the support of detention staff, however if staff observe disciplinary issues with a specific juvenile or have knowledge of a situation which might effect facility security, detention staff may intervene at their discretion.
- D. **Exemption from the School Program** – Residents who display extremely negative behavior either in class or the program in general may temporarily be removed from the program pending the review of Detention Home staff. No class exemption will be granted to residents who may have graduated high school before entering detention. Educational staff will provide them with level appropriate work. Residents who are identified by the facility medical staff as being ill and unable to attend class shall be excused from school until medical staff determines they may return.
- E. **Classroom Attendance** – As per agreement with TPS, residents will be given credit for attendance. To receive credit juveniles must be present in class. Juveniles who are not present for any reason shall not receive credit for that day. Educators will take attendance each school day and turn it in to the TPS assigned registrar on a weekly basis.
- F. **Classroom Facilities** – Shall be designed to meet state and TPS educational space requirements. Any changes in facility class room space will be reviewed by TPS personnel to ensure compliance.

**G. Educational Supplies** – TPS is responsible for providing the facility and assigned educators with necessary educational materials and technology. The facility shall provide support material, such as paper and pencils, and access to relevant facility machines, such as copiers.

**H. General Equivalency Diploma Assistance Program** – In order to fully service all levels of resident ability the facility may offer assistance to juveniles qualified to seek a GED.

1. **Qualifications** – Residents considered for this program must be recommended by their facility educator after being assessed on the standard tools and demonstrating, in class, the ability to successfully complete level appropriate work. Detention staff will be consulted to ensure the resident’s behavior is appropriate and the resident does not present a security risk.

2. **Materials** – The facility will provide the necessary materials for approved juveniles to work on their GED while in custody.

3. **Records** - The Facility Tutor shall be responsible for maintaining a log of juveniles served, document hours she/he worked with the GED students, and the subjects covered at each session. This information shall be turned in monthly to the Program Manager.

**I. Vocational/Work programs** – Juveniles are not allowed to participate in any uncompensated work assignments unless the work is related to housekeeping, maintenance of the facility or grounds, personal hygienic needs, or part of an approved community service program of the court.

1. **Child Labor Prohibition** – Juveniles are not permitted to perform any work prohibited by state and federal regulations and statutes pertaining to child labor.

## **V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-45)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5C-01, 5C-02, 5C-03, 5C-04, 5C-05 and 5C-06)

## **VI. Enclosures:**

1. Daily School Schedule
2. TPS Contract

## **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:16-10

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# Tulsa County Juvenile Detention Home

## Regular Program Schedule

Day Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0700	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
710	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up, hygiene and Daily Clean up	Wake up and hygiene	Wake up and hygiene
0730	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast	1st Breakfast
0800	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast	2nd Breakfast
0830	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	<b>Sick Call</b>	Major Clean Up	<b>Bed Linen Turn in</b>
0900	<b>School Starts**TCCHD</b>	<b>School Starts**TCCHD</b>	<b>School Starts</b>	<b>School Starts*TCCHD</b>	<b>School Starts</b>	8:30-10:30	Supervised Free Time
1030	1st Break 10:30-10:40	1st Break	1st Break	1st Break	1st Break	Organized Activity	<b>Religious Program*</b>
1120	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>
1130	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch/PT*	1st Lunch	1st Lunch
1200	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch/PT*	2nd Lunch	2nd Lunch
1230	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
1245	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>School Resumes</b>	<b>Prep for Visitation</b>	<b>Prep for Visitation</b>
1330	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Court Hearings Begin	Visitation 1330-1430	Visitation 1330-1430
1400	2nd Break 14:00-14:10	2nd Break	2nd Break	2nd Break	2nd Break	<b>Security Search</b>	<b>Security Search</b>
1530	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>School Concludes</b>	<b>*Hair Cuts</b>
1535	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
1545	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
1620	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>	<b>Hygiene Break</b>
1630	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group	1st Dinner/Issues Group
1700	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group	2nd Dinner/Issues Group
1730	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity	Organized Activity
1830	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	Outdoor Activity	<b>Religious Program*</b>
1930	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time	Supervised Free Time
2030	ARG/ Snack**	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack	ARG/ Snack
2100	Resident Showers	Resident Showers	Resident Showers	Resident Showers	Resident Showers*	Resident Showers*	Resident Showers
2145	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>	<b>Resident Count</b>
2200	<b>Lights Out</b>	<b>Lights Out</b>	<b>Lights Out</b>	<b>Lights Out</b>	<b>Lights Out</b>	<b>Lights Out</b>	<b>Lights Out</b>

\*Tulsa City-County Health Department Presentation 10:00am to 11:00am

\* Physical Training Program \*\*At-Risk Group: Various Topics

\*Voluntary Religious Program 10:00am 11:00am

\*Resident Showers may be given earlier to allow residents later bed time

APPROVED

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STATE OF OKLAHOMA  
TULSA COUNTY

AGREEMENT

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THIS AGREEMENT is made this 1st day of July, 2013, by and between INDEPENDENT SCHOOL DISTRICT NO. 1 OF TULSA COUNTY, OKLAHO, r a TULSA PUBLIC SCHOOLS ("District"), and the BOARD ON.. :QM1:Y" r... COMMISSIONERS OF TULSA COUNTY, OKLAHOMA ("Board"), orilatill lf<.. 6E:itJ.:!.: , JUVENILE BUREAU OF THE DISTRICT COURT OF TULSA COUNTY, OKLAHOMA ("Juvenile Bureau"), operating the TULSA COUNTY JUVENILE DETENTION CENTER ("JDC").

RECITALS:

A. The Juvenile Bureau operates JDC within the District's boundaries. The Juvenile Bureau desires to obtain the District's educational services for qualified residential students placed in JDC. The District desires to provide educational services to qualified residential students placed in JDC.

NOW, THEREFORE, the parties agree as follows:

1. The District agrees to provide educational services at JDC to all qualified residential students.

2. Procedural safeguards shall be followed for eligible children with disabilities in accordance with the Individuals with Disabilities Education Act (IDEA), which includes the requirements for individualized education programs (where applicable) and placement in the least restrictive environment, and with Section 504 of the Rehabilitation Act and Title II of the Americans with Disabilities Act. For disabled students, the Juvenile Bureau shall provide the District with the current individualized education program (IEP) or Section 504 Plan (504 Plan), if any, prepared by the student's school district of residence, prior to the student's admission to the District's program. The instructional program for each disabled student shall be in accordance with the provisions of his or her IEP or 504 Plan. The Juvenile Bureau may have a representative present at the IEP or Section 504 team meeting to advise the team of any concerns or information the Juvenile Bureau has to offer regarding the student's educational needs and ehgtbhty for related servtces.

3. For any qualified residential students who are not residents of District, District personnel shall notify the student's school district of residence immediately upon finding that the student requires special education and related services. District staff will notify the student's school district of residence of the time, date and location of meetings for the purpose of planning the student's IEP and subsequent reviews. Juvenile Bureau staff and District staff shalJ coordinate with the student's school district of residence as necessary to develop the student's IEP.

4. Within five (5) school days of admittance, a team of professionals shall review the educational needs of each qualified residential student participating in the District's educational services at JDC. The purpose of this review is to determine the student's educational needs and to develop an Individualized Learning Plan consistent with state and federal laws and regulations. The professional team shall include a teacher or appropriately qualified educator representative and be under the direction of the District's Director of Alternative Education or

designee. The District's Director of Alternative Education or designee and a Juvenile Bureau representative shall develop a procedure to permit team members to communicate their recommendations and other relevant information to Juvenile Bureau staff on a regular basis. If the student has an IEP or Section 504 Plan, the IEP or Section 504 Plan will serve as the student's Individualized Learning Plan. Each student's Individualized Learning Plan will describe the appropriate curriculum, instructional time and education setting for the student based on his or her individual needs, with the aim of enabling the student to progress toward participation in a full day educational program. Each student's Individualized Learning Plan shall be implemented no later than ten (10) days from his or her admittance and will be reviewed periodically thereafter.

5. The District shall initially provide five (5) teachers appropriately certified by the Oklahoma State Department of Education to provide educational services to qualified residential students at JDC. The District will consult with JDC before placing any new teacher at JDC. The District will periodically reevaluate the number of teachers required in light of the number of qualified residential students at JDC. The District has the right to unilaterally reduce the number of teachers provided at JDC if the District determines that educational services can be appropriately provided with fewer teachers.

6. The District will make every reasonable effort to provide a substitute to cover classes during the absence of a teacher assigned to JDC and will assign substitutes, when available, in the same manner as substitutes are assigned in the District's schools. The staff assigned to JDC shall constitute a decision of the District.

7. Staff supplied by the District shall be evaluated by a District administrator. The evaluation process shall include the input of the Juvenile Bureau's assigned representative. In particular, the Juvenile Bureau's assigned representative shall provide the District's designee with information regarding the teacher's compliance with the Juvenile Bureau's regulations, treatment team attendance, interactions with the Juvenile Bureau's staff and general classroom structure. District staff members assigned to JDC will cooperate with JDC personnel to ensure the smooth functioning of the District's education programs as part of the overall Juvenile Bureau programs. Failure of District staff assigned to JDC to comply with applicable Juvenile Bureau regulations may result in reprimand or other disciplinary action by the District, up to and including transfer, dismissal or nonrenewal.

8. The Juvenile Bureau shall provide appropriate facilities and classroom space in which District personnel can provide educational services to students. The facilities shall meet accreditation standards of the State Board of Education for educational services and other existing applicable standards. The parties will comply with applicable safety and health standards. The Juvenile Bureau shall provide personnel to assist each teacher in the monitoring of State standardized testing. The District agrees to provide the training for the Juvenile Bureau personnel on monitoring tests.

9. The District shall provide textbooks, workbooks, teacher guides, and other material of the nature and type utilized in the District's schools. In the event specialized instructional materials are requested, designated representatives of the District and the Juvenile Bureau shall meet to discuss the materials requested, the relationship of the materials to the educational offering to students at JDC, and whether an agreement can be reached regarding the

sharing of costs for specialized material. Absent a cost-sharing arrangement approved by both parties, the District has no obligation to furnish special materials not otherwise used or required by the District in its schools.

10. The Juvenile Bureau will supply non-instructional material, including pencils, erasers, paper, crayons, tape, glue and similar material. The Juvenile Bureau shall also be responsible for providing and maintaining all classroom equipment including, but not limited to, student and teacher desks, chairs, chalkboards and similar equipment. Additionally, the Juvenile Bureau shall provide District staff access to a copier, typewriter and computer with Internet access and to the office equipment generally available to the Juvenile Bureau.

11. The District shall assume responsibility for the development and supervision of curriculum taught at JDC.

12. JDC and District administrators will develop a discipline policy and procedure outlining suspension, time-out and detention procedures. The District will provide classroom management with assistance from JDC in disciplinary situations. At District's request, the Juvenile Bureau will remove disruptive students from the classroom. The Juvenile Bureau will provide management for outside-of-classroom suspension, time-out and detention during school scheduled time.

13. The teachers will record student enrollment, attendance, days on roll, student absence, grades and withdrawals in accordance with District board policy. This information will be provided to Juvenile Bureau personnel upon request. The Juvenile Bureau agrees to provide a locking storage cabinet to which District personnel will have sole access for the storage of student records. Students at JDC shall earn credit for classes for which they are enrolled in the same manner as other students within the District.

14. Juvenile Bureau personnel are required to maintain the same level of confidentiality concerning information about students as is required of District personnel. Juvenile Bureau personnel will maintain and release any student data or records in their possession as required by Federal and State law and District policy, regulations and guidelines. This shall include, but is not limited to, the Family Educational Rights and Privacy Act. The State of Oklahoma Standard Form -- Consent for Release of Confidential Information -- Shall be utilized, when appropriate, to expedite the exchange of student records.

15. The undersigned individuals warrant and represent that they are authorized to execute this Agreement, and by executing this Agreement, bind their heirs, legal representatives, successors, agents and principals forever.

16. The term of this Agreement shall begin on the first school day following the parties' execution of this Agreement, and shall terminate on the last day of the fourth quarter of the 2013-2014 school year.

17. This Agreement may be amended by the mutual agreement of the parties hereto in writing to be attached to and incorporated into this Agreement.

18. In case any one or more of the provisions contained in this Agreement shall be



held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provision.

19. This Agreement supersedes any and all other agreements, either oral or in writing between the parties hereto with respect to the subject matter hereof and no other agreement, statement, or promise related to the subject matter of this Agreement, which is not contained herein, shall be valid or binding.

Executed the day and year first written above.

INDEPENDENT SCHOOL DISTRICT NO. 1  
OF TULSA COUNTY, OKLAHOMA, alk/a  
TULSA PUBLIC SCHOOLS

7 / 1 / 07  
By: Ruth Ann Fate, President  
Board of Education

Approved as to Form: KKB

"DISTRICT"

BOARD OF COUNTY COMMISSIONERS OF  
TULSA COUNTY, OKLAHOMA



By: [Signature]  
Name: Karen Keith  
Title: Chairman

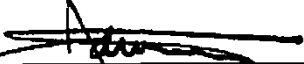
ATTEST:

           Tulsa County Clerk

[Signature]

"BOARD"

APPROVED AS TO FORM:

  
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**Assistant District Attorney**

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# **Juvenile Services**

**05-06**

**Religious Services and Counseling**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-06</i>
Religious Services and Counseling		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure and practice of the Juvenile Detention Center that juveniles have the opportunity to participate in practices of their religious faith which are deemed essential by the faiths judicatory, limited only b documentation showing threat to the safety of persons involved in such activity, or the activity itself disrupts order in the facility.**

**I. Purpose:** Religious practices shell include but are not limited to: access to religious publication; religious symbols; congregate worship/religious services in appropriate space; individual and group counseling, religious study classes and adherence to dietary requirements.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Religious Faith Judicatory** – Practices that are enforced by a religious faith that prescribes access to religious publications, religious symbols, worship/religious services, religious study classes, and adherence to dietary requirements.

### **IV. Procedures:**

**A. General Guidelines** – The facility shall attempt to accommodate the religious needs of residents placed in juvenile detention so far as physical space, funding and the good order of the program will allow. Special accommodations may require verification from parents/guardians or recognized clergy/representative of the resident’s faith in writing. Additionally, the primary concern of the facility is safety and security.

**1. Access to Religious Service** – All resident has access to religious services offered by the facility. The facility shall offer such services of a nature to meet the needs of the residents at any given time. Residents with a religious preference not represented may request the addition of those services or special visit with relevant clergy/representatives of the resident’s faith. Such request should be made through the facility program manager.

**2. Clergy Access and Credentials** – All clergy/representatives of faith who wish to visit the facility must be identified as a representative of that faith and have a background check completed before they are allowed to interact with residents. The background check must meet the criteria as defined by OAC 377:3-13-43-(6).

3. **Religious Counseling** – Staff chaplains’, part-time or volunteer clergy shall perform the following duties:
  - a. Speak to and counsel individually with residents when requested.
  - b. Be prepared to meet with facility residents at least weekly.
  - c. Keep pastoral confidences’ intact at the same time protecting the security of the facility and the safety of its staff and residents.

**B. Special Accommodations** – Resident with a documented need for a special accommodation due to their religious beliefs may be granted such accommodations as requested and given the organizational need to maintain safety and security.

1. **Special Diets** – Residents may be granted special diets due to religious requirements. These request must be clearly stated and the need verified by the parent/guardian or clergy/representative of faith.
2. **Religious Observance** – If a resident is required by their religious beliefs to oblige special observances during religiously significant holidays they must notify the facility with their specific request. The request must be verified by the parent/guardian or clergy/representatives of faith.

## **V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5F-01, 02, 03)

**VI. Enclosures:** None

## **VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:16-11

Distribution: Detention Home Policy and Procedure Manual

# **Juvenile Services**

**05-07**

**Recreation Gym and Playground**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-07</i>
Recreation Gym Playground		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Center to grant juveniles access to recreational opportunities and equipment, including outdoor exercise when the climate permits.**

**I. Purpose:** Exercise and recreation are important to good health. Large muscle development and opportunities for play and creative activity are essential for the growing youth. The facility provides juveniles a well-designed and comprehensive recreation program.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. General Guidelines** – It is the expressed intent of the facility to provide no less than 12 – 14 hours per day of programming, which shall include at least one hour of large muscle activity, one hour of organized activity, outdoor activities and daily recreation.

- 1. Regular Exercise** – The facility through schedule provides for physical training opportunities as a part of the daily program. This training and other activities provide for multiple opportunities for large muscle exercise.
- 2. Recreation Equipment** – The facility shall provide recreation equipment for sufficient amount and quality for support an active vigorous recreation program at no cost to resident.

**B. Recreation Activities**

- 1. Supervised Free-Time** - Consist of several activities including gym access, book/magazine reading, table games, letter writing and television access. During these periods residents are free to choose from these activities and more. All activities are subject to staff supervision and any specific activity may or may not be offered each day at the discretion of the Unit Shift Supervisor on duty.
- 2. Organized Activities** – Are usually group games and are considered a required part of the program unless the resident has physical restrictions which disqualifies his or her participation. Additionally organized activities may include special art projects, special visitors or special groups. These activities shall be staff lead and while a

resident maybe allowed to act as a captain of his or her team during group game, a resident may not take a leadership role in groups. Group games will consist of a list provided by the Program Manager and approved for use in the facility.

- a. Outdoor Activity** – Requires the residents to go outside on a daily basis, weather permitting. While outside, residents maybe required to participate in group games unless the resident has physical restrictions which disqualifies his or her participation. Outdoor activities are subject to staff supervision. The Unit Shift Supervisor shall determine the suitability for going outside, based on weather and staffing level. All outdoor activities must be documented in the daily shift log. The facility provides a secure outdoor play area which meets American correctional Standards for Juvenile Detention Facilities. (3<sup>rd</sup> Edition for Recreational Space)

## **V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5E-01, 02, 03, 04)  
OJA requirements for Secure Juvenile Detention Facilities (377:3-13-42-5)

## **VI. Enclosures:**

1. Daily Log

## **VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:16-15

Distribution: Detention Home Policy and Procedure Manual



# DETENTION DAILY SHIFT LOG

DATE \_\_\_\_\_ DAY \_\_\_\_\_ SHIFT \_\_\_\_\_ UNIT \_\_\_\_\_

BEGINNING POPULATION \_\_\_\_\_ ENDING POPULATION \_\_\_\_\_

SHIFT PERSONNEL / KEY NO.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SHIFT CHECK LIST

(X)

Review staff schedule / arrivals \_\_\_\_\_  
Security count of keys and pencils \_\_\_\_\_  
Security count of kitchen utensils \_\_\_\_\_  
Security search of rooms \_\_\_\_\_  
Cash drawer audit \_\_\_\_\_  
Review room charts / pop. count \_\_\_\_\_  
Departing shift briefing \_\_\_\_\_  
Review shift logs / incident reports \_\_\_\_\_  
Review medical files and medication \_\_\_\_\_  
Review resident's behavior reports \_\_\_\_\_  
Distribution of resident mail \_\_\_\_\_  
On-coming shift briefing \_\_\_\_\_  
List any deficiency in above \_\_\_\_\_

RESIDENTS ON ROOM CONFINEMENT / RM.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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ADMISSIONS \_\_\_\_\_

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RELEASES \_\_\_\_\_

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\_\_\_\_\_

SEE SHIFT SUMMARY ON BACK PAGE



**Juvenile Services**

**05-08**

**Library Services**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-08</i>
Library Services		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	<b>Alondo Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Center that library services are provided and available to all juveniles within the facility.**

**I. Purpose:** Library materials are selected to meet the educational, informational, and recreational needs of the juveniles. They are easily accessible and regulated by a system that prevents abuse.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

**Library Services** – A service that provides reading materials for convenient use; circulation of reading materials; service to help provide users with library materials, educational and recreational audiovisual materials; or a combination of these services.

### **IV. Procedures:**

**A. General Guidelines** – The library provides all juveniles access to a collection of general and specialized reading materials that meet the educational and recreational needs of the residents in the facility. The facility shall designate a staff member to coordinate library services with assigned administrative personnel.

- 1. Services** – The facility shall maintain a cooperative relationship with local city-county libraries and may regularly request support as needed in the form of books, periodicals and other materials as are useful in providing library service to the resident population.
- 2. Purchasing Materials** – The facility shall purchase magazines and periodicals to supplement service provided by local libraries. The designated staff member shall survey residents at least annually to determine resident needs and interest in reading material.
- 3. Resident Access** – All resident have unlimited access to library materials during school activities, free time or leisure activities. Residents must obtain permission before removing any library items to read in their sleeping rooms

**B. Detention Library** – The facility maintains a core of reading material on each unit that all resident has access to during school, free time or leisure activities. These materials are organized and accessible in an orderly fashion.

**1. Resident Request** – A resident may request to have a special book brought in by his/her parents. The facility cannot guarantee the physical safety or such materials and is not liable for defacement or destruction of any item allowed into the facility.

**2. Section of Books and Magazines** – The material selected shall be a collection or classic, recent material based on cultural, inspirational and recreational values. Material of a controversial nature shall be reviewed by the Facility Administrator or his/her designee.

**V. Authority/References:**

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5D-01, 02, 03)

**VI. Enclosures:** None

**VII. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V: 16-16

Distribution: Detention Home Policy and Procedure Manual

# **Juvenile Services**

**05-09**

## **Telephone Procedures**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-09</i>
Telephone Procedures		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to provide for juvenile access to a telephone to make personal calls to maintain ties with the community, legal guardians and attorneys.**

**I. Purpose:** Sufficient telephone access should be provided to permit reasonable and equitable time to all juveniles, except those in reception units and on disciplinary confinement. Written procedures should specify the hours of telephone available, maximum length of calls, and any limitation on telephone calls. Telephone facilities should allow for a reasonable amount of privacy.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Outgoing Calls**

1. **Phone Calls upon Admission** - Immediately on admission to the facility, a resident may make one telephone call to his/her parents, legal guardians, foster parents, custodians, or attorney. A juvenile may also make calls to his/her parents, legal guardian, foster parents, or attorney twice weekly for the duration of their designated stay in the facility.
2. **Assisting with Resident Phone Calls** - If a resident needs assistance in placing a call, the supervision detention counselor will place the call and remain present at a distance that allows for the appropriate amount of privacy. The duration and frequency of outgoing calls shall be limited (3-5 minutes) to allow equal opportunity and access to all juveniles.
3. **Weekly Residents Phone Access** – Residents are allowed to make two phone calls weekly. The resident’s court representative, OJA worker, DHS worker or OJA Liaison are responsible for allowing the resident to make their phone calls. If by Friday of each week, a resident has not received their two calls, facility staff may give those calls at a time that respects the need for security.
4. **Incoming Calls** – Residents are not allowed to receive incoming calls for confidentiality and security purposes. However, if a resident is participating in phone court, facility staff shall insure that the resident is present and able to participate, just

as they would do with regular court requirements. Any other exceptions must be approved by the Program Manager or an administrator.

**B. Attorney Calls****1. Calls to Legal Counsel**

A resident may phone his/her attorney at any time that does not interfere with the residents scheduled activities within the detention program. If the attorney agrees to accept the charges, the resident may phone as often as he/she wishes. The number of calls will be limited on weekends and holidays.

**C. Logging Juvenile Telephone Calls**

**1. Record of Phone Call Information** - If resident telephone calls are scheduled and supervised, a telephone log shall be established and maintained by the facility. All telephone calls received or made by residents shall be documented in the log, and the following information shall be recorded.

- Date and time call was made and/or received
- Name of resident making the call
- Name and telephone number of the person to whom the call was made
- Time of call
- Time call was completed
- If the call was long-distance

**V. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities)

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5A-11, 5G-11)

**VI. Enclosures:**

1. Telephone Log

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V: 17-01



Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention

# Individual Resident Telephone Log

Resident's Name: \_\_\_\_\_

Admit Date: \_\_\_\_\_

Release Date: \_\_\_\_\_

## Admission Telephone Calls(s)

Date	Time Began	Ext./Number Called From	Number Called	Person Called	Relationship	Accept/Decline Not Complete	Time Ended	RC, Int.	Chen/Supervised B (Print Name)	Staff Inc.
	AM PM						AM PM			
	AM PM						AM PM			

## Resident Use & Access to Telephone Call(s)

Date	Time Began	Ext./Number Called From	Number Called	Person Called	Relationship	Accept/Decline Not Complete	Time Ended	RC, Int.	(;iwn/Supcn iwd n, 1Print \ame 1 •	Staff Inc.
	AM PM						AM PM			
	AM PM						AM PM			
	AM PM						AM PM			
	AM PM						AM PM			
	AM PM						AM PM			
	AM PM						AM PM			
	AM PM						AM PM			

Date	Time Began	Ext. / Number Called From	Number Called	Person Called	Relationship	Accct/Decline Not complete	Time Ended	Res. Int.	Given/Supervisor (Print Name)	Staff Inc.
	AM						AM			
	PM						PM			
	AM						AM			
	PM						PM			
	AM						AM			
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**NOTES & ADDITIONAL COMMENTS**

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# **Juvenile Services**

**05-10**

**Resident Visitor Program**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-10</i>
Resident Visitor Program		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Tulsa County Juvenile Detention Home to grant residents the right to receive visits, subject to only the limitation necessary to maintain facility order and security.**

**I. Purpose:** Because strong family and community ties increase the likelihood that the juvenile will succeed after release, visits should be encouraged. Provision should be made for visitation in pleasant surroundings, with minimum surveillance to ensure a reasonable amount of privacy. Arrangements must be made to allow confidential visits with attorneys. No restrictions should be placed on juvenile visitation rights except where the facility administrator or designee can provide substantial justification for the restriction.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Visitor Sign-In** - Every visitor shall sign in on arrival at the facility. Handbags, briefcases, and packager are to be left outside the facility.

**B. Identification** - All visitors aged eighteen or over will be required to produce positive identification upon entry to the visitation area. Exception may be granted only by the Director or Facility Administrator.

**C. Publication and Distribution of Visitation Rules**

**1. Visitation Rules** - The facility shall publish the operational procedures governing visits in the resident policy and procedure handbook. This information is made available by the Supervisor to each resident on arrival to the facility and shall be made available to visitors prior to their arrival at the facility. The following information should be included:

- Days and times of visiting
- Approved visitors (parents, other family members, etc.)
- The number of visitors a juvenile is allowed to have at one time
- Regulations concerning special visits

- The possibility of being searched, notice of which shall also be posted in conspicuous place outside the visitation area
- Items allowed into the visitation area by the resident and the visitor
- The statute on trafficking, which shall also be posted in a conspicuous place outside the visitation area

**B. Denial of Visitation**

1. **Facility Action** - A denial of visitation privileges shall be based on the safety, security, and order of the facility and the safety of the individuals involved. The resident shall be notified in writing the Supervisor of a denial of visitation that includes the name of the restricted or prohibited visitor, the name of the person making the decision, and the resident's right to appeal the decision.
2. **Resident Right of Refusal** - A resident may also deny any visitor. Known ex-offenders other than family are prohibited unless prior approval has been granted by the Facility Administrator. The Facility Administrator or his designee may also terminate a visit based on the safety, security, and order of the facility. Visitors whose visits are terminated will be notified of the specific cause for the termination, and an incident report will be prepared for the residents file.
3. **Search of Visitors** - A visitor shall be informed about why the request for a search is being made. The use of metal detectors and the inspection of handbags, briefcases, and packages shall be governed by the security needs of the facility. All visitors are subject to search as posted.
4. **Exchange of property** - Residents are not allowed to receive clothing or property during visitation due to physical space limitations. Residents may be allowed to exchange pants or shoes if the facility cannot appropriately fit the resident during clothing issue while being admitted into detention. All exchanges must be approved in advance by the facility Program Manager or an Administrator.

**I. Authority/References:**

10 O.S. 7302-6.3 (Rules, Policies, Procedures Required in Facilities) -  
OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-3A-16-1)

**II. Enclosures:**

1. Visitor Sign Sheet

**III. Action:**

Facility Supervisors and the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

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**Policy: Resident Visitor Program****Policy Number: 05-10**

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Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:17-02

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention





# **Juvenile Services**

**05-11**

**Authorized Special Visits**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>Juvenile Services</b>		<i>Policy</i>	<i>05-11</i>
<b>Authorized Special Visits</b>		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	<b>Alondo Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to govern special visits.**

**I. Purpose:** Special visits may include visits from persons who have come long distances, visits to hospitalized juveniles, visits to juveniles in disciplinary status, and visits between juveniles and their attorneys. Written policies and procedures should specify the conditions of such visits.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Authorized Visitors -**

**1. Visitors Outside of Normal Visiting Schedule** – Attorneys, clergy, government officials, legislators, and media representatives may be approved for visitation by the Facility Administrator, or his designee, on a case by case basis and will not count against the juvenile’s normal visiting schedule. A special area shall be set aside for official interviews

**B. Visitor Sign-In** – The facility shall maintain a written log in the main control area managed by Main control Operators.

**1. Verification of Authorized Persons to Detention** - Every visitor shall sign in on arrival at the facility. Handbags, briefcases, and packager are to be left at the reception area.

**C. Identification** – No one shall be allowed access to the secure areas of the facility without providing positive identification of their identity.

**Valid and Appropriate age of Detention Visitors** - All visitors aged eighteen or over will be required to produce positive identification upon entry to the visitation area. Exception may be granted only by the Director or Facility Administrator. Visitors under the age of eighteen are not allowed in the visitation area during court time and must be accompanied by a parent or guardian at all other times.

**D. Publication and Distribution of Visitation Rules** – Visitation Rules shall be communicated to parents, legal guardians and authorized visitors prior to attending visitation if possible.

1. **Posting of Visitation Rules** - The facility shall publish the operational procedures governing visits in the resident policy and procedure handbook. This information is made available by the Supervisor to each resident on arrival to the facility and shall be made available to visitors prior to their arrival at the facility. The following information should be included:

- Days and times of visiting
- Approved visitors (parents, other family members, etc.)
- The number of visitors a juvenile is allowed to have at one time
- Regulations concerning special visits
- The possibility of being searched, notice of which shall also be posted in conspicuous place outside the visitation area
- Items allowed into the visitation area by the resident and the visitor
- The statute on trafficking, which shall also be posted in a conspicuous place outside the visitation area

E. **Denial of Visitation** – Every resident has the right to visitation with parents, legal guardians, clergy and legal representation, however, a resident’s right to visitation may be curtailed under certain conditions.

1. **Causes for Denial of Visitation** - A denial of visitation privileges shall be based on the safety, security, and order of the facility and the safety of the individuals involved. A resident’s violent behavior just prior to, during or as a result of visitation may result in termination of standard visitation privileges. The resident and parent/guardian shall be notified by the Supervisor of a denial of visitation and it shall be documented. If the termination is due to the behavior of a visitor due to unruly behavior or the attempted passing of contraband the resident’s court services worker or external representative will be notified. Visitors whose visits are terminated will be notified of the specific cause for the termination, and an incident report will be prepared for the residents file.

2. **Facility Action** - The Facility Administrator or his designee may also terminate a visit based on the safety, security, and order of the facility. If advised by the court or a reliable source of impending threats to the safety, security, and order of the facility the Facility Administrator may suspend visitation of any or all residents temporarily.

3. **Special Visitation** – If a resident is denied visitation they may be allowed to have a special visitation with their parents or guardians at another time, other than normal visitation hours. The resident’s court services worker or OJA/DHS worker will be required to directly supervise a special visitation. All special visitations must be approved in advance by the Program Manager or an administrator.

#### E. **Search of Visitors**

1. **Reason and Types of Detention Visitor Searches** - A visitor shall be informed about why the request for a search is being made. The use of metal detectors and the inspection of handbags, briefcases, and packages shall be governed by the security needs of the facility.

2. **Contra Band** – Any visitor found bringing contra band into the facility will be subject to legal action.

**F. Contact Visits**

1. **Physical Contact During Visitation** – Juveniles and their visitors shall not be physically separated unless required by security needs. They shall be allowed as much informality and privacy as possible.

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5G-12, 13, 14, 15)

**vi. Enclosures:**

1. Authorized Visitor Registration

**VII. Action:**

Facility Supervisors and the Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy. Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:17-03

Distribution: Detention Home Policy and Procedure Manual

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Facility Administrator, Tulsa County Juvenile Detention



# **Juvenile Services**

**05-12**

**Resident Mail**

## Tulsa County Juvenile Detention Home Policy and Procedures

Juvenile Services		<i>Policy</i>	<i>05-12</i>
Resident Mail		<i>Current Revision</i>	<i>05/06/02</i>
<i>Approved by:</i>	Alondo Edwards, Facility Administrator	<i>Effective Date</i>	<i>11/06/10</i>

**It is the policy, procedure, and practice of the Juvenile Detention Home to grant residents the right to correspond with persons or organizations subject only to the limitations necessary to maintain facility order and security, and to do so with a reasonable degree of privacy.**

**I. Purpose:** Access to the public is an integral part of rehabilitation. Residents should be permitted to correspond with their families and friends, as well with public officials, the courts, and their attorneys, without the censorship of said correspondence.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

**III. Definitions:**

**IV. Procedures:**

**A. Correspondence**

1. **Access to Postal Services** - Access to postal service is made available to all residents and reviewed annually and updated as needed.
2. **Limit of Mail Services** – The amount of mail a resident may send or receive is dependent on provision of postage.
  - a. Detention will provide postage for the mailing of minimum of two letters per week for each resident, if requested, excluding legal correspondence. Legal correspondence will be sent through county mail and postage paid. Detention will also provide writing paper and envelopes.
  - b. There will no limit on the amount of mail a resident send providing his/her parents/legal guardian furnishes the stamps. Stamps checked in with Unit Secretary for the resident must be recorded and log in and out on individual resident envelopes.
3. **Storage of Mail Received** - Letters are stored in the resident’s personal belongings after they are read. All personal belonging will be released to the resident upon permanent release date.

4. **Submission of Outgoing Mail** - Resident must submit “outgoing mail” to staff by 10:00 AM Monday - Friday. Outgoing mail will be forward within 24 hours, excluding weekends and holidays.
5. **Legal Correspondence** - Residents are permitted to send sealed letters to specified persons and organizations, including but not limited to the following groups:
  - **Courts**
  - **Counsel/Attorney**
  - **Officials of the confining authority**
  - **Administrators of grievance systems**
  - **Members of the releasing authority**

Mail to residents from this specified class of persons and organizations maybe opened only to inspect for contraband and only in the presence of the juvenile.

6. **Incoming Mail** - All “incoming mail” (including a package) is opened in the presence of the resident and examined for contraband within 24 hours, excluding weekends and holidays. Contraband must be documented in the resident’s folder and stored in his/her personal belongings until his/her release. “Illegal contraband” must be reported to the Facility Administrator with an Incident Report. This contraband will be reported to the proper authorities by the Facility Administrator. The physical evidence will be released to the Tulsa County Sheriff’s Office and or his designee.
7. **Money received through the Mail** - All money sent to resident is held in accordance to the following procedures; that has been approved by the parent agency:
  - a. All incoming mail is opened in the presence of a resident.
  - b. The amount of cash entered on the resident’s pink form within his file, on the valuables bag sheet, and money receipts forms.
  - c. The white copy of the Money Receipt form is separated from the yellow copy and stapled to the money envelope and put in the valuables bag, inside the valuables room.
  - d. The yellow copy of the Money receipt is attached to the Property Sheet Form and noted on the Property Sheet.
  - e. An incident report is needed each time a valuables bag and money envelope is opened to add any/all money received through the mail.
  - f. The money is returned to the resident when he/she is released.
8. **Examining or Investigating Incoming or Outgoing Mail** - All mail being sent or received is subject to review by the facility Facility Administrator, or his designate, if clear and convincing evidence warrants it. The purpose is to examine and investigate any communication that is suspected of creating a threat to the safety and security of the program, staff, juveniles, or the public place. If mail is to be read the resident will be



advised in advance and will be present when the letter is opened. This action will be documented in the resident's file folder.

9. What to do with the mail if it is returned and resident is no longer there or mail is received and resident is no longer there.

#### **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

ACA Standards for Juvenile Detention Facilities, 3rd Edition (3-JDF-5G, 01, 02, 03, 04, 05, 06, 07, 08, 09, 10)

#### **VI. Enclosures:** None

#### **VII. Action:**

Facility Supervisors, Program Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: Facility Policy and Procedure V:17-06

Distribution: Detention Home Policy and Procedure Manual

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>PREA Compliance</b>		<i>Policy</i>	<i>00-01</i>
<b>Zero Tolerance</b>		<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>06/01/16</i>

**It shall be the policy procedure and practice of the Tulsa County Juvenile Detention Home to comply with the Prison Rape Elimination Act (PREA) 28 C.F.R. Part 115, as it pertains to Juvenile Detention in the State of Oklahoma. Tulsa County Juvenile Detention Home maintains a zero tolerance policy for the sexual abuse or mistreatment of any juvenile placed in custody.**

**I. Purpose:** PREA requires that facility administrators take all reasonable steps to provide a safe secure environment for every resident in the facility. This requires that resident's be safe guarded from abuse, by other residents or staff, that all residents be assessed for past sexual traumas, that all staff be trained to recognized the symptoms of such trauma and the facility have in place such agreements and plans to address the needs of residents as they occur.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any visitors, volunteers, or contract staff.

**III. Definitions:** The following definitions are meant to apply to all detention policies in Section 21 regarding compliance to PREA.

**PREA** – Prison Rape Elimination Act, 28 C.F.R. Part 115, National Standards to Prevent, Detect, and Respond to Prison Rape (Juvenile Standards).

**Direct staff supervision** - means that security staff are in the same room with, and within reasonable hearing distance of, the resident.

**Gender non-conforming** - means a person whose appearance or manner does not conform to traditional societal gender expectations.

**Intersex** - means a person who's sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

**Medical Practitioner** - means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified medical practitioner" refers to such a professional who also successfully completed specialized training for treating sexual abuse victims.

**Mental Health Practitioner** - means a mental health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified mental health practitioner" refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

**Contractor** - means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency.

**Juvenile** - means any person under the age of 18, unless under Office of Juvenile Affairs custody and awaiting placement for treatment.

**Pat-down** - search means a running of the hands over the clothed body of an inmate, detainee, or resident by an employee to determine whether the individual possesses contraband.

**Resident** - means any person confined or detained in a juvenile facility or in a community confinement facility.

**Staff** - means employees.

**Volunteer** - means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

**Transgender** - means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

**Substantiated Allegation** - means an allegation that was investigated and determined to have occurred.

**Unfounded Allegation** - means an allegation that was investigated and determined not to have occurred.

**Unsubstantiated Allegation** - means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

**Exigent Circumstances** - means any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

**Full Compliance** - means compliance with all material requirements of each standard except for de minimis violations, or discrete and temporary violations during otherwise sustained periods of compliance.

**Voyeurism by a staff member, contractor, or volunteer** - means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breast; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

#### **IV. Procedures:**

- A. Administrative Responsibility** – The facility administrator is responsible maintaining facility compliance with all aspects of PREA. Specifically the Facility Administrator, who is the Superintendent of the Detention Home, shall be responsible for appointing a

PREA Compliance Manager who will be a management level employee of the Tulsa County Juvenile Detention Home

1. **PREA Compliance Manager** – The PREA Compliance Manger (PCM) is appointed by the Facility Administrator of the Detention Home and must be an administrative level staff member, 70 level or above. The PREA Compliance Manager will work for the Facility Administrator of Detention but will report to the Director of the Juvenile Bureau all matters concerning PREA Compliance.
  2. **Training** – Ensure that all required training has occurred as required and appoint staff as necessary to assist in training. This shall include but is not limited to:
    - a. An orientation to PREA standards and facility policy regarding PREA requirements.
    - b. Written notice of the facility zero tolerance of sexual abuse and requirement to report any suspected sexual abuse.
    - c. Required protective measures for any resident who reports or there is reason to believe has been sexually assaulted.
  3. **Outer Agency Contacts** – Work with outer agency authorities to insure that appropriate support services are available for residents who have experienced sexual abuse before entering the facility or while a resident of the Detention Home.
  4. **Preventive Measures** – The facility will make all reasonable efforts to prevent PREA violations. The Prevention efforts will include, but are not limited to:
    - a. Public Notices posted throughout the facility regarding PREA compliance requirements.
    - b. Education for residents on how to identify and report prohibited behavior.
    - c. Training for all staff, supervisors and managers on prevention and reporting requirements of PREA.
- B. Compliance With Office of Juvenile Affairs** – The Office of Juvenile Affairs (OJA) has been designated by the State of Oklahoma to provide policies and practices for juvenile detention facilities in the State of Oklahoma. It is the operational goal of Tulsa County Juvenile Detention to generally meet the requirements that OJA has set for its direct-care facilities as they pertain to short-term juvenile detention.
- C. Prohibited Behavior** – Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, with or without consent of the detainee or resident, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse. **No juvenile in custody can legally consent to sexual behavior.**
1. **Zero Tolerance Behavior** - Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer. The facility has **a zero tolerance** for any form of sexual abuse including but not limited to:

- a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
  - d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
  - e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
  - f. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a)-(e) of this section;
  - g. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and;
  - h. Voyeurism by a staff member, contractor, or volunteer.
2. **Unlawful Harassment** – Tulsa County maintains a **zero tolerance policy** for sexual harassment this applies to all persons in the environments it manages. This policy prohibits:
- a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward another; and
  - b. Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.
- D. **Disciplinary Action** – Any staff member with a substantiated allegation of the sexual abuse or harassment of a resident shall be terminated and reported to local authorities for legal prosecution.

## V. **Authority/References:**

28 C.F.R. Part 115115.5 General definitions.

28 C.F.R. Part 115.501 State determination and certification of full compliance.

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

## VI. **Enclosures:** None.

## VII. **Action:**

Facility PREA Compliance Manager and/or the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: New

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network

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Facility Administrator, Tulsa County Juvenile Detention

# **PREA COMPLIANCE**

**00-01**

**Zero Tolerance**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>PREA Compliance</b>		<i>Policy</i>	<i>00-01</i>
<b>Zero Tolerance</b>		<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Superintendent</b>	<i>Effective Date</i>	<i>06/01/16</i>

**It shall be the policy procedure and practice of the Tulsa County Juvenile Detention Home to comply with the Prison Rape Elimination Act (PREA) 28 C.F.R. Part 115, as it pertains to Juvenile Detention in the State of Oklahoma. Tulsa County Juvenile Detention Home maintains a zero tolerance policy for the sexual abuse or mistreatment of any juvenile placed in custody.**

**I. Purpose:** PREA requires that facility administrators take all reasonable steps to provide a safe secure environment for every resident in the facility. This requires that resident's be safe guarded from abuse, by other residents or staff, that all residents be assessed for past sexual traumas, that all staff be trained to recognized the symptoms of such trauma and the facility have in place such agreements and plans to address the needs of residents as they occur.

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home and any visitors, volunteers, or contract staff.

**III. Definitions:** The following definitions are meant to apply to all detention policies in Section 21 regarding compliance to PREA.

**PREA** – Prison Rape Elimination Act, 28 C.F.R. Part 115, National Standards to Prevent, Detect, and Respond to Prison Rape (Juvenile Standards).

**Direct staff supervision** - means that security staff are in the same room with, and within reasonable hearing distance of, the resident.

**Gender non-conforming** - means a person whose appearance or manner does not conform to traditional societal gender expectations.

**Intersex** - means a person who's sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

**Medical Practitioner** - means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified medical practitioner" refers to such a professional who also successfully completed specialized training for treating sexual abuse victims.

**Mental Health Practitioner** - means a mental health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified mental health practitioner" refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.



**Contractor** - means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency.

**Juvenile** - means any person under the age of 18, unless under Office of Juvenile Affairs custody and awaiting placement for treatment.

**Pat-down** - search means a running of the hands over the clothed body of an inmate, detainee, or resident by an employee to determine whether the individual possesses contraband.

**Resident** - means any person confined or detained in a juvenile facility or in a community confinement facility.

**Staff** - means employees.

**Volunteer** - means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

**Transgender** - means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

**Substantiated Allegation** - means an allegation that was investigated and determined to have occurred.

**Unfounded Allegation** - means an allegation that was investigated and determined not to have occurred.

**Unsubstantiated Allegation** - means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

**Exigent Circumstances** - means any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

**Full Compliance** - means compliance with all material requirements of each standard except for de minimis violations, or discrete and temporary violations during otherwise sustained periods of compliance.

**Voyeurism by a staff member, contractor, or volunteer** - means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breast; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

#### **IV. Procedures:**

- A. Administrative Responsibility** – The facility administrator is responsible maintaining facility compliance with all aspects of PREA. Specifically the Facility Administrator, who is the Superintendent of the Detention Home, shall be responsible for appointing a

PREA Compliance Manager who will be a management level employee of the Tulsa County Juvenile Detention Home

1. **PREA Compliance Manager** – The PREA Compliance Manger (PCM) is appointed by the Superintendent of the Detention Home and must be an administrative level staff member, 70 level or above. The PREA Compliance Manager will work for the Superintendent of Detention but will report to the Director of the Juvenile Bureau all matters concerning PREA Compliance.
  2. **Training** – Ensure that all required training has occurred as required and appoint staff as necessary to assist in training. This shall include but is not limited to:
    - a. An orientation to PREA standards and facility policy regarding PREA requirements.
    - b. Written notice of the facility zero tolerance of sexual abuse and requirement to report any suspected sexual abuse.
    - c. Required protective measures for any resident who reports or there is reason to believe has been sexually assaulted.
  3. **Outer Agency Contacts** – Work with outer agency authorities to insure that appropriate support services are available for residents who have experienced sexual abuse before entering the facility or while a resident of the Detention Home.
  4. **Preventive Measures** – The facility will make all reasonable efforts to prevent PREA violations. The Prevention efforts will include, but are not limited to:
    - a. Public Notices posted throughout the facility regarding PREA compliance requirements.
    - b. Education for residents on how to identify and report prohibited behavior.
    - c. Training for all staff, supervisors and managers on prevention and reporting requirements of PREA.
- B. Compliance With Office of Juvenile Affairs** – The Office of Juvenile Affairs (OJA) has been designated by the State of Oklahoma to provide policies and practices for juvenile detention facilities in the State of Oklahoma. It is the operational goal of Tulsa County Juvenile Detention to generally meet the requirements that OJA has set for its direct-care facilities as they pertain to short-term juvenile detention.
- C. Prohibited Behavior** – Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, with or without consent of the detainee or resident, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse. **No juvenile in custody can legally consent to sexual behavior.**
1. **Zero Tolerance Behavior** - Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer. The facility has **a zero tolerance** for any form of sexual abuse including but not limited to:

- a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
  - d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
  - e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
  - f. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a)-(e) of this section;
  - g. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and;
  - h. Voyeurism by a staff member, contractor, or volunteer.
2. **Unlawful Harassment** – Tulsa County maintains a **zero tolerance policy** for sexual harassment this applies to all persons in the environments it manages. This policy prohibits:
- a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward another; and
  - b. Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.
- D. **Disciplinary Action** – Any staff member with a substantiated allegation of the sexual abuse or harassment of a resident shall be terminated and reported to local authorities for legal prosecution.

## V. **Authority/References:**

28 C.F.R. Part 115115.5 General definitions.

28 C.F.R. Part 115.501 State determination and certification of full compliance.

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

## VI. **Enclosures:** None.

## VII. **Action:**

Facility PCM and/or the Accreditation Manager will be responsible for compliance monitoring of this policy.

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**Policy: PREA Compliance Requirement****Policy Number: 00-01**

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Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Superintendent and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: New

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network

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Superintendent, Tulsa County Juvenile Detention

# **PREA COMPLIANCE**

**00-02**

**Coordinated Facility Response**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>PREA Compliance</b>	<i>Policy</i>	<i>00-02</i>
<b>Coordinated Facility Response</b>	<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i>	<b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>
		<i>06/01/16</i>

**It shall be the policy, procedure and practice that Tulsa County Juvenile Detention Home has a ZERO TOLERANCE stance towards any type of sexual abuse, which includes sexual abuse of a resident by another resident or sexual abuse of a resident by a staff member, contractor or volunteer.**

**I. Purpose:** Tulsa County Juvenile Detention Home (TCJDH) in accordance with State Statute 10A O.S., § 1-2-101 and the Oklahoma Office of Juvenile Affairs Policy, has a ZERO TOLERANCE stance towards all forms of sexual abuse and sexual harassment. TCJDH will take appropriate action to prevent, detect, and respond to all forms of sexual abuse and sexual harassment in compliance with the Prison Rape Elimination Act (PREA) of 2003. (PREA 115.211 (a).

**II. Applicable To:** This policy shall apply to any staff member, contractor or volunteer of the Detention Home.

### **III. Definitions:**

**Important Terms** – defined for a consistent application of the policy.

### **IV. Procedures:**

#### **A. SEXUAL ABUSE -**

**1. Sexual Abuse of a resident** includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- b. Contact between the mouth and the penis, vulva, or anus;
- c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument
- d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

**2. Sexual Abuse of a resident by a staff member, contractor, or volunteer** includes any of the following acts, with or without consent of the resident:

- a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- b. Contact between the mouth and the penis, vulva, or anus;

- c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a) – (d) of this section;
- f. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a resident and
- g. Voyeurism by a staff member, contractor, or volunteer.

**B. SEXUAL HARASSMENT** -

- 1. TCJDC has a **ZERO TOLERANCE** stance regarding any type of Sexual harassment, which includes:
  - a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed towards another:
  - b. Repeated verbal comments or gestures of a sexual nature to a resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

**C. REPORTING SEXUAL MISCONDUCT** – It is the responsibility of every staff member to report possible sexual abuse or sexual harassment of residents or any person in our environment.

- 1. **Multiple Pathways to Report Misconduct** - The residents at TCJDH can report sexual misconduct by telling a staff member, sending a letter to the Facility Administrator, or the Office of Juvenile Affairs Office of Public Integrity (OPI). A resident grievance can be filed confidentially or the resident may contact DHS Child Protective Services Child Abuse Hotline at 1-800-522- 3511. Third party reporting can contact the Superintendent’s office. (PREA 115.351 (c) )
- 2. **Staff Responsibility to Report** - All staff will immediately report any incident to their supervisor or the Facility Administrator or his designee shall make all appropriate notifications to include the Office of Public Integrity for request for investigation, victim’s parents, guardian(s), attorney or legal representation, if the Courts retain guardianship. (PREA 115.361 (e).

1) (f) (PREA 115.361 (e.2) (e.3)) (4-JCF-3D-01)

**D. FIRST RESPONDER DUTIES** –

- 1. **Staff Responsibility** - Upon learning of an allegation of abuse of a resident, the first staff member to respond shall be required to follow the steps below:

- a. Issue a radio call to request assistance from a Unit Shift Supervisor or Lead Detention Counselor.
  - b. Separate those involved in the incident and retain a visual on all parties until a Supervisor or Lead Detention Counselor arrives to take charge of the situation.
  - c. Brief your supervisor when they arrive.
  - d. Write your report(s) and submit to appropriate authority.
2. **Supervisor Responsibility** – The Unit-Shift Supervisor (USS) is considered the first responder for any incident and will take control of the situation.
- a. The USS will contact the AOC and the PREA Compliance Manager.
  - b. The USS will ensure that the alleged victim and abuser are separated; (PREA 115.364 (a.1))
  - c. The USS will preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (PREA 115.364 (a.2))
  - d. If the abuse occurred within 72 hours and the physical evidence can be collected, the USS will request the alleged victim not to take any actions that could destroy physical evidence, including, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; (PREA 115.364 (a.3))
  - e. The USS will complete the first responder checklist and ensure all incident reports are gathered for the file. This form has been adopted from OJA.
  - f. The USS will take the victim and perpetrator to medical for evaluation as a precautionary measure or seek out medical aid through the facility nurse if after hours.
  - g. The USS will not make any requests for investigation without approval from the PREA Compliance Manager, Facility Administrator or designee.
3. **If No USS is Readily Available** - If a USS is not immediately available, the first staff notified shall request that the alleged victim not take any actions that could destroy physical evidence and contact Security. (PREA 115.364 (b))
4. **Administrative Responsibility** - Superintendents shall ensure that facility staff discourage and prevent sexual misconduct by providing clear definitions of prohibited conduct, establishing uniform methods for the prompt reporting and investigation of allegations of misconduct, and prescribing sanctions for both substantiated misconduct and false allegations. Sexual misconduct between staff and residents, volunteers or contract personnel and residents, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions
- E. SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS** – Informational posters, handbooks and other written formats will be posted throughout the facility. The information is both readily available and visible, in both English and Spanish. The information will be accessible to all residents including; deaf, visually impaired, limited English, limited reading skills or otherwise disabled. All residents will have an equal opportunity to participate in or benefit from PREA information. Administrator of Programs (AOP) will take reasonable steps to provide an interpreter if one is needed. (PREA 115.333 (b) (d) (e) (f)), (115.316 (a) (c))



1. **Orientation** – During the resident admission, facility staff will ensure that the resident receives information, during orientation, explaining the TCJDH ZERO TOLERANCE stance regarding sexual abuse and sexual harassment. All residents will view an age appropriate PREA video and will receive written PREA information. They will be required to sign an acknowledgement form, PREA-01, which will be kept in the Medical Records located in the facility nurse office, in their file. (PREA 115.333 (a) (b) (e))
  - a. During orientation the resident will complete a sexual assault and vulnerability Questionnaire. The questionnaire will be placed in the resident’s medical file and will be considered in the determination of the resident’s unit and room placement, education and work assignments with the goal of keeping all residents safe and free from sexual abuse. (PREA 115.341 (b) (d))
  - b. The Sexual Assault and Vulnerability Questionnaire, will be filled out by medical staff every 45 days, for those residents identified and will be placed in the resident’s file.
  - c. During orientation written material will be provided includes information regarding prevention and intervention, self-protection, reporting sexual abuse/assault, treatment and counseling services.
  
2. **Potential for Abuse Screening** - Medical staff will ensure all residents are screened for Risk of Sexual Victimization and Abusiveness within 72 hours of their arrival to the facility for potential vulnerabilities or tendencies of acting out in a sexually aggressive behavior. The form will be used in the initial screenings to ascertain information about: prior sexual victimization or abusiveness; (PREA 115.341(c.1)) Any gender non-conforming appearance, manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse. All sensitive information will be kept confidential in the resident’s medical file. (PREA 115.341 (e))
  - a. All residents identified as at risk for sexual victimization or who have experienced prior sexual victimization, whether the prior sexual victimization occurred in an institutional setting or in the community, medical staff will identify, monitor and refer to counseling. The medical staff will conduct a follow-up meeting with the resident within 14 days of the admission screening. (PREA 115.381 (a))

**F. MEDICAL AND MENTAL HEALTHCARE** - Licensed medical staff shall ensure resident victims will receive timely unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by the facility nurse and Responsible Physician according to their professional judgment. The victim may be taken outside of the facility for treatment with a Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE). The victim can request a victim advocate to accompany him during the examination. (PREA 115.382 (a) (b))(PREA 115.321)

1. **PREA Incident Log** - Licensed Medical staff shall maintain a PREA log that will provide the following information:

- a. Name of victim, time, date, where victim was taken, was it medically appropriate to send to SAFE/SANE for exam, who authorized sending the victim.
2. **Follow-up Care** – Medical staff will coordinate continuous medical or mental healthcare of facility residents with the program manager and the resident’s representatives concerning medical issues. Ongoing medical and mental health care will be provided for both the victim and the alleged perpetrator, if a resident.
- G. PROHIBITION AGAINST RETALIATION** – Tulsa County Juvenile Bureau and the TCJDH maintain a zero tolerance policy for retaliation or intimidation against anyone reporting a PREA violation or participating in a PREA investigation. The Facility Administrator, Program Manager, PREA Compliance Manager (PCM), Unit-Shift Supervisors will work cooperatively implementing the following steps to prevent retaliation. (PREA 115.367 (a))
1. **Protective Measures** – The following steps may be taken to prevent retaliation or protect possible victims if a report of retaliation is made.
    - a. Consideration of necessary housing changes or transfers for the victim or alleged abuser(s) (PREA 115.367 (b))
    - b. Program Manager or designee shall ensure that a resident is monitored for at least 90 days. The Unit-Shift Supervisors will document if there is evidence of retaliation and will continue to monitor past the 90 days. (PREA 115.367 (c))
    - c. The PREA Compliance Manager (PCM) will be notified of any resident disciplinary reports, housing or program changes, negative performance reviews. Also documentation of reassignments of staff. Periodic status checks will be conducted. (PREA 115.367 (d))
    - d. The Facility Administrator or designee shall take appropriate measures to protect any individual who cooperates with the investigation and expresses a fear of retaliation. (PREA 115.367 (e))
- H. REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS** - All allegations of sexual abuse or sexual harassment are referred for administrative or criminal investigation. (PREA 115.322 (a)(b)) All TCJDH employees, contract staff, volunteers and interns shall provide complete cooperation and full disclosure during an inquiry or investigation into an alleged act of sexual misconduct or related prohibited conduct. The facility will employ protective measures to protect both the resident and the staff during the investigation.
1. **Referrals for Investigation** - The Facility Administrator will refer PREA Investigations to external bodies to preserve the integrity of the process. The OJA Office of Public Integrity shall be designated to investigate PREA complaints at TCJDH. The Office of Public Integrity will forward investigation findings to the PREA Coordinator and the Advocate General of OJA. If so indicated, OPI will refer the investigation to the appropriate legal authorities.
  2. **Reporting for External Investigation** – The Facility Administrator will send a referral for investigation anytime a sexual assault is alleged, threatened, or occurs. The Office of Public Integrity (OPI) will ensure that an investigation is conducted and documented

- whenever a sexual assault is alleged, threatened, or occurs. In addition, OPI will ensure that an investigation is conducted and documented whenever sexual harassment is alleged by a resident. (PREA 115.322 (a))
3. **Interference with Official Process** - Any failure to report or attempt cover-up an incident of sexual misconduct, making an allegation or statement that the party or witness knew could not have been true, or any other form of failure to cooperate with an investigation or inquiry is deemed to constitute interference with official process and the employee may be subject to disciplinary action up to and including discharge.
  4. **Notifications** - The guardians/parents/attorney or legal representation will be contacted, unless the facility has official documentation showing the parents or legal guardians should not be notified or if under care of Child welfare or OJA, the caseworker. (PREA 115.361(e.3) (PREA 115.361 (e.1)(f)) (PREA 115.361 (e.2))
  5. **Completion of the Investigation** - Upon completion of the investigation, the investigating authority will inform both the Facility Administrator and the resident. Upon receipt of final investigation:
    - a. The Facility Administrator or designee shall ensure the victim receives notification using form, OJA-ISD-19-VN.
    - b. If the investigation finds the allegations unsubstantiated or inconclusive the Facility Administrator or designee will recommend the resident receive disciplinary action. (PREA 115.371 (a) (b))
  6. **PREA Compliance Manager (PCM)** – TCJDH has designated the Accreditation Manager as the PREA Compliance Manager (PCM). She/he will coordinate the facility’s efforts to comply with the PREA standards and serve as a liaison with the OJA PREA Coordinator. The PCM will ensure PREA signage is placed on all units and in all buildings of the facility. (PREA 115.311 (b))
  7. **Incident Review Meetings** - The PREA Compliance Manager will be responsible for conducting a review meeting with the Facility Administrator or Program Manager and Unit-Shift Supervisor, and Institutional Programs Coordinator (IPC) utilizing form OJA-ISD-19-SA, within 30 days of the conclusion of a PREA investigation. (PREA 115.386 (a) (b)) The PREA Compliance Manager will record the minutes of every meeting and maintain a file of the minutes for reference.
- I. **STAFFING PLAN** - The Facility Administrator shall develop, implement and document a staffing plan that provides for adequate levels of staffing and video monitoring to protect residents against sexual abuse. This facility supports the ongoing training, prevention, detection, response, investigation and tracking of all reported acts of sexual assault and harassment. (PREA 115.313 (d1)) To ensure the safety of both the residents and staff, cameras have been placed in all areas of the facility to reduce blind spots. (PREA 115.313 (d.3) 115.313 (a5)) PREA signage is visible in all units/buildings. All staff shall complete mandatory annual in-service PREA training. All staff will have, on file, a signed OJA-PREA-02, acknowledgment form. Volunteers and contractors will have on file a signed OJA-PREA-03-VCI, acknowledgment form.

**J. TRAINING** - All staff will receive PREA information during the orientation and annual in-service training. The training will involve a review of the policy, videos and booklets. Staff will also sign forms indicating they have attended the PREA training and understand that TCJDH is a ZERO TOLERANCE facility.

**1. Contract Staff, Volunteers and Interns** - Volunteers and contract staff will receive a packet of PREA information with a form to sign acknowledging they have read the material. These forms shall be maintained by the Training Coordinator.

## **V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
Prison Rape Elimination Act (PREA) Part(s) 115.115.311, 115.341, 115.371, 115.313, 115.342, 115.372, 115.315, 115.351, 115.373, 115.316, 115.353, 115.381, 115.318, 115.354, 115.382, 115.321, 115.361, 115.383, 115.322, 115.362, 115.386, 115.331, 115.363, 115.387, 115.332, 115.364, 115.388, 115.333, 115.365, 115.389, 115.334, 115.367, 115.335 and 115.368

## **VI. Enclosures:**

PREA Incident Log Form  
Sexual Assault and Vulnerability Questionnaire  
First Responder Form

## **VII. Action:**

Facility Supervisors and the PREA Compliance Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: None.

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network  
*“Restricted Distribution”*



Entered By <i>(Name Last, First, MI)</i>	Incident Report Number	PREA Case Number	Facility	Location of Incident	Date of Incident	Date Incident Reported	PREA Primary Investigator	Back-Up PREA Investigator
Law Enforcement Agency	Incident Type	Situation or Circumstance <i>(if applies)</i>	Resident JOLTS Number	Victim's <i>(Name Last, First, MI)</i>	Victim Type	Accused <i>(Name Last, First, MI)</i>	Accused Type	Disposition

Entered By <i>(Name Last, First, MI)</i>	Incident Report Number	PREA Case Number	Facility	Location of Incident	Date of Incident	Date Incident Reported	PREA Primary Investigator	Back-Up PREA Investigator
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Law Enforcement Agency	Incident Type	Situation or Circumstance <i>(if applies)</i>	Resident JOLTS Number	Victim's <i>(Name Last, First, MI)</i>	Victim Type	Accused <i>(Name Last, First, MI)</i>	Accused Type	Disposition

**Tulsa County Juvenile Detention Center  
Sexual Abuse and Vulnerability Questionnaire  
Assessment Instrument**

**Resident Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Jolts#:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Race:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Resident Interview:**

**1. Experience in Institution**

Ask: Is this your 1<sup>st</sup> time being in detention?

NO	SCORE 0 _____
YES	SCORE 2 _____

Award a score of 0 or 2

**2. Social Skills**

Ask: Is there any fear/anxiety about being in Detention with so many other juveniles?

Then Ask:

Do you feel you get along well with others? Y/N \_\_\_\_\_

Do you find it easy to make friends? Y/N \_\_\_\_\_

Do you feel OK about being in groups of people you don't know well? Y/N \_\_\_\_\_

Award a score of 0 or 1 for each answer, and then add up each answer for the total

Score of (0-3) Total Score \_\_\_\_\_

**3. Perception of Risk**

Ask: do you feel at risk from attack or abuse from other residents?

Example: Have you received threats, insults or harassment from other residents?

Not At All	SCORE 0 _____
SOMETIMES	SCORE 1 _____
OFTEN	SCORE 2 _____

Award a score of 0, 1 or 2

**4. History of Victimization:**

Ask: have you ever been attacked, bullied or abused by another resident?

Prompt with further questions if necessary.

NEVER	SCORE 0 _____
A FEW TIMES	SCORE 1 _____
OFTEN	SCORE 2 _____

Award a score of 0, 1 or 2

Ask: Have you ever had a sexual experience that you did not want to have  
 If yes, ask what & if the experience was ever reported.

NO	SCORE 0 _____
YES	SCORE 2 _____

Award a score of 0 or 2

**5. Offense Type:**

Have you ever been arrested on a sexual offense?  
 Also check the residents file for the information.

NO	SCORE 0 _____
YES	SCORE 4 _____

Award a score of 0 or 4

Have you ever been arrested on a violent offense?

NO	SCORE 0 _____
YES	SCORE 4 _____

Award a score of 0 or 4

**6. Ask: have you ever engaged in behavior that you would consider sexually aggressive?**

NO	SCORE 0 _____
YES	SCORE 4 _____

Award a score of 0 or 4

**7. Age of Resident:**

18-17	SCORE 0 _____
16-14	SCORE 1 _____
13-11	SCORE 2 _____
10 and under	SCORE 3 _____

Award a score of 0, 1, 2 or 3

**8. Intellectual impairment from the file review, is there any evidence that this offender has been previously reported to have an intellectual impairment (Low IQ), learning disability or special education classes?**

NO EVIDENCE	SCORE 0 _____
EVIDENCE	SCORE 2 _____

Award a score of 0 or 2

**9. "Lack of Fit" with the facility culture.** This item requires a judgment by the screener that this Offender is unlikely "fit in" within the mainstream resident culture.

(Place a check in applicable box)

<b>* Look for features of the resident's physical appearance such as:</b>
Small build
Looks younger than stated age
Impaired vision (requires glasses)
Pronounced disfigurement
Physical disability



Deaf	
Appears frail, weak	
<b>*Look for features of the resident's presentation and behaviors such as:</b>	
Inappropriate verbal behavior (e.g., giggling, odd remarks)	
Inappropriate physical behavior (boys wearing make-up, sexual behavior)	
Hunched fearful posture (e.g., very fearful, very shy)	
Obvious effeminate behavior	
Acts of aggression – observation	
Resident's behavior with other residents	
Resident's behavior in school	
Speech impediment	
Appears slow or "dull"	
Behaviors that are likely to irritate and annoy other residents (e.g., immature, silly)	
Behaviors that appear related to mental illness (e.g., jittery, crying, bizarre)	
<b>*Look for features of the resident which make him or her stand out such as:</b>	
Having a lack of exposure to delinquent lifestyle	
Being from an ethnic minority not well represented in the resident population (e.g., Middle Eastern, Vietnamese, Indian)	
Membership in a gang that is likely to be a target of attack from others.	
Note other features not listed above	
None or only one of the features listed above	SCORE 0 _____
Two or three features listed above	SCORE 2 _____
Multiple features (four or more) listed above	SCORE 4 _____

Mark all responses only once, and then award a score of 0, 2 or 4 at the bottom of the section

Total items checked

Total Score

Total SCORE \_\_\_\_\_

**10. File Review:**

Does file indicate the resident has been charged with a sex offense?

Information not available	SCORE 0 _____
NO	SCORE 0 _____
YES	SCORE 2 _____

Award a score of 0 or 2

Is there any information suggest prior sexual aggression or sexual victimization of others?

Information not available	SCORE 0 _____
NO	SCORE 0 _____
YES	SCORE 2 _____

Award a score of 0 or 2

**OVERALL RISK SCORE:**

**Vulnerability to Victimization:**

- 1. Experience in Facility SCORE \_\_\_\_\_
- 2. Social Skills SCORE \_\_\_\_\_
- 3. Perception of Risk SCORE \_\_\_\_\_
- 4. History of Victimization SCORE \_\_\_\_\_
- 7. Age of Resident SCORE \_\_\_\_\_
- 8. Intellectual Impairment SCORE \_\_\_\_\_
- 9. "Lack of Fit" with residents facility culture SCORE \_\_\_\_\_

Interview: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Overall Score** \_\_\_\_\_  
**Maximum score – 20**

**Sexually Aggressive Behavior:**

- 5. Offense Type SCORE \_\_\_\_\_
- 6. Violent Behavior SCORE \_\_\_\_\_
- 10. File Review SCORE \_\_\_\_\_

**Overall Score** \_\_\_\_\_  
**Maximum Score – 16**

**Risk Level:**

- Low (1-8)
- Medium (9-16)
- High (17 & above)

In the event that a resident needs to be moved to a lesser risk area, the shift supervisor will Determine the movement. It must be documented as to the reason why the resident is moved, i.e., threat, behavior, maturity, facility count, etc.

**Supervisor:** \_\_\_\_\_ **Date/Time of Move:** \_\_\_\_\_

**Signature of Screener:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_

# Tulsa County Juvenile Detention Center

## Facility PREA First Responders Checklist

Today's Date: \_\_\_\_\_ Timer: \_\_\_\_\_  AM  PM IRS # \_\_\_\_\_

JOLTS#

Name of Reporting Person: \_\_\_\_\_ (if youth) \_\_\_\_\_

### VICTIMS:

Name: \_\_\_\_\_ JOLTS # \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ JOLTS # \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

### PERPETRATIONS:

Name: \_\_\_\_\_ JOLTS # \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ JOLTS # \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

- Ensure the victim is safe and kept separated from the alleged abuser,
- Ask the victim the below questions and contact your chain of command
- Verbally notify the Grievance Coordinator and the PREA Coordinator and advise on the status of the Victim and alleged abuser, and
- Isolate victim and staff responder:

#### ASK ONLY THE FOLLOWING QUESTIONS:

1. When did the abuse occur?

Date: \_\_\_\_\_ Time: \_\_\_\_\_  AM  PM

2. Where did the abuse occur?

Location: \_\_\_\_\_

3. Was the abuse  vaginal  anal  oral or  other? (explain below)

Other: \_\_\_\_\_

4. When was the last time you showered or washed?

Date: \_\_\_\_\_ Time: \_\_\_\_\_  AM  PM

5. Have you changed any clothing since the abuse?  YES  NO

If yes, where is the clothing: \_\_\_\_\_

6. Have you brushed your teeth since the abuse?  YES  NO

7. Are there any witnesses to the abuse?  YES  NO

#### Remember:

- Do not let the victim out of sight,
- Verbally notify the Grievance Coordinator, PREA Coordinator and
- Call medical staff

Completed by: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

# **PREA COMPLIANCE**

**00-03**

**Data Collection and Reporting**

## Tulsa County Juvenile Detention Home Policy and Procedures

<b>PREA Compliance</b>	<i>Policy</i>	<i>00-03</i>
<b>Data Collection and Reporting</b>	<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i> Alondo D. Edwards, Superintendent	<i>Effective Date</i>	<i>06/01/16</i>

It shall be the policy, procedure and practice of the Tulsa County Juvenile Home to provide an environment free unlawful and abusive behavior. Therefore the facility mandates a zero tolerance toward all forms of sexual abuse and sexual harassment towards residents, staff or any person within our environment. Intrinsic to this goal is the collection of any relevant data and provisions for reporting regularly to required agencies.

**I. Purpose:** Every resident in custody has the right to be free from sexual abuse and sexual harassment. In accordance with the Prison Rape Elimination Act, the Tulsa County Juvenile Detention Home has a zero-tolerance policy for all forms of offender sexual abuse and sexual harassment. The facility will maintain such data and records as required by the Prison Rape Elimination act or deemed necessary and appropriate by the administration of the Juvenile Detention Home.

**II. Applicable To:** This policy shall apply to all personnel, interns, contractors or volunteers of the Detention Home.

### **II. Definitions:**

**PREA** – Prison Rape Elimination Act, 28 C.F.R. Part 115, National Standards to Prevent, Detect, and Respond to Prison Rape (Juvenile Standards).

**Direct staff supervision** - means that security staff are in the same room with, and within reasonable hearing distance of, the resident.

**Gender non-conforming** - means a person whose appearance or manner does not conform to traditional societal gender expectations.

**Intersex** - means a person who’s sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

**Medical Practitioner** - means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A “qualified medical practitioner” refers to such a professional who also successfully completed specialized training for treating sexual abuse victims.

**Mental Health Practitioner** - means a mental health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A “qualified mental health practitioner” refers to such a

professional who has also successfully completed specialized training for treating sexual abuse victims.

**Contractor** - means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency.

**Juvenile** - means any person under the age of 18, unless under Office of Juvenile Affairs custody and awaiting placement for treatment.

**Pat-down** - search means a running of the hands over the clothed body of a resident by an employee to determine whether the individual possesses contraband.

**Resident** - means any person confined or detained in a juvenile facility or in a community confinement facility.

**Staff** - means employees.

**Volunteer** - means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

**Transgender** - means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

**Substantiated Allegation** - means an allegation that was investigated and determined to have occurred.

**Unfounded Allegation** - means an allegation that was investigated and determined not to have occurred.

**Unsubstantiated Allegation** - means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

**Exigent Circumstances** - means any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

**Full Compliance** - means compliance with all material requirements of each standard except for de minimis violations, or discrete and temporary violations during otherwise sustained periods of compliance.

**Voyeurism by a staff member, contractor, or volunteer** - means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breast; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

#### **IV. Procedures:**

**A. Sexual Abuse Incident Reviews** – In compliance with PREA Section 115.386, the facility provides for a system of review concerning PREA allegations.

1. **Incident Review Team** - The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. 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. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (a) thru (e) of this section, and any recommendations for improvement and submit such report to the facility head and PREA Compliance Manager (PCM).
  - g. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.
  
2. **Incident Reviews** - 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 ordinarily occur within 30 days of the conclusion of the investigation.

**B. Data Collection** - The Detention Home shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. (PREA 115.387)

1. **Annual Report** – At least annually the PCM will submit an incident-based sexual abuse report of any and all allegations and their resolution to the Superintendent of Detention and the Director of the Juvenile Bureau. This report shall include, but is not limited to the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. (see SSV 2014 Attached)
  - a. Annual report of its findings and corrective actions for the Detention Home.
  - b. Report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse and sexual harassment.
  - c. The Detention Home Report shall be approved by the Superintendent of the Detention Home and the Director of the Juvenile Bureau and be made posted on the agency website.
  - d. Any information that might violate the privacy of juveniles must be redacted. (PREA 115.389)

- e. Additionally any information that presents a clear and specific threat to the safety and security of the facility may be redacted, but the nature of the material redacted must be indicated. (PREA 115.388)
2. **PREA Allegation Records** – The Detention Home shall maintain records of all sexual abuse and sexual harassment allegations in a central file managed by the PCM. Such files, given the sensitive nature of the information, shall be kept under double lock and key with limited access and directly supervised by the PCM. (PREA 115.387)
    - a. The agency shall maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of its initial collection unless Federal, State, or local law requires otherwise.
  3. **Research Cooperation** - Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. Additionally, the facility will comply to the best of its ability with any research request from the Department of Justice or the Oklahoma Office of Juvenile Affairs regarding PREA.
  4. **Data Review for Corrective Action** - The agency shall review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including:
    - a. Identifying problem areas;
    - b. Taking corrective action on an ongoing basis; and
    - c. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.
- C. **PREA Audits** - The Detention Home shall conduct audits pursuant to §§ 115.401-405.
1. **Frequency and Scope of Audits** – To verify compliance and the efficacy of facility programs regarding PREA the facility will submit to regular audits of policy, procedure and practice by authorities external to the Juvenile Detention Home.
  2. **Auditor Qualifications** – The facility will obtain verification of the credentials of the auditor or auditing body selected by the Juvenile Bureau Director and a copy will be maintained for record with the PCM. The qualification must meet the qualification standard in PREA § 115.402, Auditor Qualifications.
  3. **Audit Contents and Findings** - The completed audit will be submitted to the Juvenile Bureau Director, the Superintendent of the Detention Home and the PREA Compliance Manager. Additionally the following shall apply (PREA115.403) :
    - a. Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.
    - b. Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards.



- c. For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings: Exceeds Standard (substantially exceeds requirement of standard); Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period); Does Not Meet Standard (requires corrective action). The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.
  - d. Audit reports shall not describe methodology, sample sizes, and basis for the auditor's conclusions with regard to each standard provision for the Detention Home and shall include recommendations for any required corrective action plans.
  - e. Auditors shall redact any personally identifiable inmate or staff information from their reports, but shall provide such information to the agency upon request, and may provide such information to the Department of Justice.
  - f. The Detention Home shall ensure that the final PREA Audit Report is published on the Juvenile Bureau website with the permission of the Juvenile Bureau Director.
4. **Corrective Action Plans** - Whenever needed a corrective action plan will be created by the PCM and submitted to the Superintendent for review. (PREA 115.404) In addition, the following will be completed:
- a. A finding of "Does Not Meet Standard" with one or more standards shall trigger a 180-day corrective action period.
  - b. The auditor and the agency shall jointly develop a corrective action plan to achieve compliance. Any suggestions to reach compliance by the auditor should be included in the Detention Home corrective action plan.
  - c. The auditor shall take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies and procedures or re-inspecting portions of a facility.
  - d. After the 180-day corrective action period ends, the auditor shall issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action. This shall comprise written notification and added to the facility PREA records.
  - e. If the facility does not achieve compliance with each standard, it may (at its discretion and cost) request a subsequent audit once it believes that it has achieved compliance.
5. **Audit Appeals** – In accordance with § 115.405, the Juvenile Detention Homes reserves the right to appeal specific audit findings.
- a. If necessary, the Detention Home will lodge an appeal with the Department of Justice regarding any specific audit finding that it believes to be incorrect. Such appeal must be lodged within 90 days of the auditor's final determination.
  - b. If the Department determines that the agency has stated good cause for a re-evaluation, the Detention Home may commission a re-audit by an auditor mutually agreed upon by the Department and the agency. The Detention Home will work with the Juvenile Bureau to allocate funds for a re-audit if required.

- c. The findings of the re-audit shall be considered final. The Detention Home will continue to seek certification when appropriate.

**V. Authority/References:**

PREA 28 C.F.R. Part 115

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)

**VI. Enclosures:** None or list them.

1. Department of Justice of Sexual Victimization 2014 Format

**VII. Action:**

Facility PCM and/or the Accreditation Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Superintendent and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: New

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network



Superintendent, Tulsa County Juvenile Detention

# **PREA COMPLIANCE**

**00-04**

**Internal Review Process**

# Tulsa County Juvenile Detention Home Policy and Procedures

<b>PREA Compliance</b>	<i>Policy</i>	<i>00-04</i>
<b>Internal Review Process</b>	<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i> <b>Alondo D. Edwards, Facility Administrator</b>	<i>Effective Date</i>	<i>10/5/2016</i>

**It is the policy, procedure, and practice of the Tulsa County Juvenile Detention Center to comply with PREA Zero tolerance (PREA 115.311) that all allegations of sexual abuse or sexual harassment including third party and anonymous reports (PREA 115.371 (a)) go through an internal review process to ensure a thorough and objective review for referral to administrative or criminal investigation`**

**I. Purpose:** The internal review process should be viewed as a positive intervention. The internal review committee (IRC) is responsible for directing all aspects of the internal review process including: the meeting times, task delegation, summary reporting and follow up as needed. The results of the internal review are considered confidential (PREA 116.361 (c)).

**II. Applicable To:** This policy shall apply to all personnel of the Detention Home.

### **III. Definitions:**

#### **A. SEXUAL ABUSE -**

1. **Sexual Abuse of a resident** - includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
  - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument
  - d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
  
2. **Sexual Abuse of a resident by a staff member, contractor, or volunteer includes** - any of the following acts, with or without consent of the resident:
  - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

- d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a) – (d) of this section;
- f. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a resident and
- g. Voyeurism by a staff member, contractor, or volunteer.

**B. SEXUAL HARASSMENT -**

1. **Zero Tolerance** - TCJDC has a **ZERO TOLERANCE** stance regarding any type of Sexual harassment, which includes:
  - a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed towards another:
  - b. Repeated verbal comments or gestures of a sexual nature to a resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

**C. INTERNAL REVIEW COMMITTEE (IRC)** – The Internal Review Committee is composed of administration team in Tulsa County Juvenile Detention Center. Additional (External) members may be appointed or included as determined by the Facility Administrator or his designee (PREA 115.371 (f)).

1. **IRC Composition** – The IRC is composed of the PREA Compliance Manager, Program Manager, (1) Direct-Care Supervisor and a Lead Detention Counselor.

**IV. Procedures:****A. INTERNAL REVIEW PROCESS -**

1. **Meetings** - The Facility Administrator or his designee will coordinate meeting times and will delegate tasks to the committee members.
2. **External members** – When required specialized expertise will be invited to participate and will ask additional questions as needed of the internal review committee on the referral being reviewed.
3. **Written Decision** - Following the review in committee, the Facility Administrator or his designee will write a summary of recommendation of internal or external action (115.371. (l)). The summary report of the review will be sent to the person making the allegation.

**B. CONTENT OF SUMMARY REPORT -**

1. **Required Information** - The names and titles of the internal review committee members. A brief description of how the internal review process was conducted, including individuals' interview and documents reviewed. Additionally:
  - a. A citation of the area of non-compliance, with a summary of how the circumstances were subsequently addressed.
  - b. A list all documentation that was reviewed to demonstrate a sufficient internal review was conducted (115.371 (f)).

**V. Authority/References:**

OJA Requirements for Secure Juvenile Detention Facilities (377:3-13-44)  
Prison Rape Elimination Act (PREA) Part(s) 115 115.311, 115.371, 116.361,

**VI. Enclosures: None****VII. Action:**

Facility Facility Administrator, Supervisors and the PREA Compliance Manager will be responsible for compliance monitoring of this policy.

Facility administrators will be responsible for the annual review and revision of this policy.

Any exceptions to this policy statement will require the written approval from the Facility Administrator and/or Juvenile Bureau Director.

This policy will be effective as indicated.

Replaced: None

Distribution: Detention Home Policy and Procedure Manual  
Agency Website and Computer Network  
***“Restricted Distribution”***

# **PREA COMPLIANCE**

**00-05**

**Prison Rape**

**Elimination Act**

# Tulsa County Juvenile Detention Home

## Policy and Procedures

PREA Compliance		<i>Policy</i>	<i>00-05</i>
Prison Rape Elimination Act		<i>Current Revision</i>	<i>New</i>
<i>Approved by:</i>	Alondo D. Edwards, Facility Administrator	<i>Effective Date</i>	<i>10/5/2016</i>

**The Tulsa County Juvenile Detention Center (TCJDC) has a zero tolerance standard for all forms of sexual abuse and sexual harassment and attempts thereof and will make every effort to prevent, detect and respond to these incidents. The TCJDC will strictly enforce all federal and state laws regarding resident sexual misconduct, threats of sexual assault or retaliation by providing clear definitions of prohibited conduct. And will also establishing uniform methods of the prompt reporting and investigation of allegations of sex-related offenses to protect victims and prescribing sanctions for substantiated sexual offenses as well as false allegations.**

**I. Purpose:** To outline the prevention, detection, and response for incidents of sexual misconduct involving residents.

### **II. Definitions:**

**Agency:** The unit of a State, local, corporate, or nonprofit authority, or the Department of Justice, with direct responsibility for the operation of any facility that confines inmates, including the implementation of policy as set by the governing, corporate, or nonprofit authority.

**Agency Head:** The principal official of any agency.

**Contractor:** A person who provides services on a recurring basis pursuant to a contractual agreement with the agency.

**Direct Staff Supervision:** Security staff is in the same room with, and within reasonable hearing distance of the inmate.

**Employee:** A person who works directly for the agency of facility.

**Exigent Circumstances:** Any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

**Facility:** A place, institution, building (or part thereof), set of buildings, structure, or area (whether or not enclosing a buildings, or set of buildings) that is used by an agency for the confinement of individuals.

**Facility Head:** The principal official of a facility.

**Full Compliance:** Compliance with all material requirements of each standard except for minimal violations, or discrete and temporary violations during otherwise sustained periods of compliance.

**Gender Nonconforming:** A person whose appearance or manner does not conform to traditional societal gender expectations.

**Inmate:** Any person incarcerated or detained in a prison or jail.



**Intersex:** A person who's sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

**Jail:** A confinement facility of a Federal, State, or local law enforcement agency whose primary use is to hold persons committed to confinement after adjudication of criminal charges for sentences of one year or less, or persons adjudicated guilty who are awaiting transfer to a correctional facility.

**Juvenile:** Any person under the age of 18, unless under adult court supervision and confined or detained in a prison or jail.

**Juvenile Facility:** A facility primarily used for the confinement of juveniles pursuant to the juvenile justice system or criminal justice system.

**Law enforcement staff:** Employees responsible for the supervision and control of residents in detention.

**Lockup:** A facility that contains holding cells, cell blocks, or other secure enclosures that are:

- a. Under the control of a law enforcement, court, or custodial officer; and
- b. Primarily used for the temporary confinement of individuals who have recently been arrested, detained, or are being transferred to or from a court, jail, prison, or other agency.

**Medical Practitioner:** A health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A "qualified medical practitioner" refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

**Pat Search:** A physical search for contraband and weapons by a deputy or other officer conducted without removing the clothing, although shoes and socks may be removed.

**Secure Juvenile Facility:** A juvenile facility in which the movements and activities of individual inmates maybe restricted or subject to control through the use of physical barriers or intensive staff supervision. A facility that allows inmate's access to the community to achieve treatment or correctional objectives, such as through educational or employment programs, typically will not be considered to be a secure juvenile facility.

**Security Staff:** Employees primarily responsible for the supervision and control of inmates in housing units, recreational areas, dining areas, and other program areas of the facility.

Staff: Employees

**Strip Search:** A visual examination of the unclothed body for contraband. This search may include the examination of the clothes while removed.

**Substantiated Allegation:** An allegation that was investigated and determined to have occurred.

**Transgender:** A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

**Unfounded Allegation:** An allegation that was investigated and determined not to have occurred.

**Unsubstantiated Allegation:** An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

**Volunteer:** An individual who donates time and effort on a recurring basis to enhance the activities and program of the agency.

**Youthful Inmate/Juvenile Inmate:** Any person under the age of 18 who is under adult court supervision and incarcerated or detained in a prison or jail.

**Youthful Inmate/Juvenile Inmate:** Any person under the age of 18 who is under adult court supervision and detained in a lockup.

**III. Procedure:**

- A. Sexual abuse includes:
  - A.1 Sexual abuse of a resident by another resident, and
  - A.2 Sexual abuse of a resident by a staff member, contractor, or volunteer.
  
- B. Sexual abuse of a resident, by another resident, or includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
  - B.1 Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - B.2 Contact between the mouth and the penis, vulva, or anus;
  - B.3 Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
  - B.4 Any other intentional touching, either directly or through the clothing, of the genitalia anus, groin, breast, inner thigh, or the buttocks, of another person, excluding contact incidental to a physical altercations.
  
- C. Sexual abuse of a resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the resident.
  - C.1 Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - C.2 Contact between the mouth and the penis, vulva, or anus;
  - C.3 Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

- C.4 Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- C.5 Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- C.6 Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (a) – (e) of this section.
- C.7 Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an resident, and;
  
- D. Voyeurism: Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of a resident by staff for reasons unrelated to official duties, such as peering at an resident who is using a toilet in his or her cell to perform bodily functions; requiring an resident to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an resident’s naked body or of any resident performing bodily functions.
  
- E. Sexual harassment includes:
  - E.1 Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed toward another; and
  - E.2 Repeated verbal comments or gestures of a sexual nature to a resident, by a staff member, contractor, or volunteer, including demeaning references to gender, sexual suggestive or derogatory comments about body or clothing, or obscene language or gestures.
  
- F. Prevention and Planning.
  - F.1 Zero tolerance of sexual abuse and sexual harassment. TCJDC and all employees, contractors, volunteers and residents will adhere to a zero tolerance policy toward all forms of sexual abuse and sexual harassment of residents. TCJDC has established through this policy our approach to preventing, detecting and responding to such conduct.
  - F.2 PREA Coordinator. TCJDC will designate an upper-level, agency-wide PREA coordinator, with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities (See Policy 00-01 Zero Tolerance).

F.3 Contracting with other entities for the confinement of residents. TCJDC will ensure that all contracts for the confinement of its residents with private agencies or other entities, including other government agencies, will include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards and that any new contract or contract renewal will provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. Only in emergency circumstances in which all reasonable attempts to find a private agency or other entity in compliance with the PREA standards have failed, may the TCJDC enter into a contract with an entity that fails to comply with these standards. In such as case, Juvenile Detention Center will document its unsuccessful attempts to find an entity in compliance with the standards. (See 2015 Secure Detention Contract).

F.4 Supervision and monitoring. The Facility Administrator or his designee will develop and document a staffing plan that provides for adequate levels of staffing and where applicable, video monitoring, to protect residents against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, agencies will take into consideration.

(See Policy 03-02 Staffing Requirements.)

OJA Rules 377:3-13-44 (4) (5)

- a. The physical layout of each facility;
- b. The composition of the resident population;
- c. The prevalence of substantiated and unsubstantiated incidents of sexual abuse;  
and
- d. Generally accepted detention and correctional practices;
- e. Any judiciary findings of inadequacy;
- f. Any findings of from Federal investigative agencies;
- g. Any findings of inadequacy from internal or external oversight bodies;
- h. All components of the physical facilities layout including "blind-spots" or isolation locations'
- i. The number and placement of supervisory staff;
- j. Programs, program locations, and shift hours;
- k. Any applicable local, state, regulations, standards, or laws;
- l. Any findings from PREA review committee meetings
- m. Any other relevant factors.

F.5 In circumstances where the staffing plan is not complied with. Juvenile Detention Center will document and justify all deviations from the plan. Whenever necessary, but no less frequently than once each year, Juvenile Detention Center will assess, determine, and document whether adjustments are needed to:

- a. The staffing plan established pursuant to paragraph (a) of this section;
- b. Prevailing staffing patterns:

- c. The facility's deployment of video monitoring systems and other monitoring technologies; and
- d. The resources the facility has available to commit to ensure adequate staffing levels.

F.6 Unannounced reviews. Unit Shift Supervisors will conduct unannounced reviews to deter staff sexual abuse and mistreatment. Staff and employees will not announce the reviews unless such an announcement is related to legitimate operational functions. (see policy 12-01 security searches of residents)

- a. Unannounced reviews will be conducted on a random basis, on each unit, including the kitchen, property room, and equipment room and laundry areas. Unannounced reviews will be documented in the Main Control log, in the authorized visitors log area. Documentation should be noted as follows: date, time, location.
- b. Weekly, the Life Safety Officer will conduct reviews of areas to include, but not limited to, janitorial closets, residents dressing rooms, and the property room.

F.7 Juvenile Residents. TCJDC will make best efforts to avoid placing juvenile residents in isolation to comply with this provision. Absent exigent circumstances, TCJDC will not deny juvenile residents daily large-muscle exercise and any legally required special education services. Juvenile residents will also have access to other programs and vocational training opportunities to the extent possible.

- a. Classification will ensure that juvenile residents are assigned to the appropriate unit.
- b. Juvenile residents will be allowed exercise yard time daily, absent exigent circumstances, or discipline, or weather.

F.8 Limits to cross-gender viewing and searches. TCJDC employees will not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening).

F.9 Limited Viewing. TCJDC will ensure that residents are able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Upon arrival of any person of the opposite gender, employees will announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

- F.10 Transgender searches for purpose of genital status. TCJDC employees will 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 residents 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. Residents of unknown genital status will be reviewed by medical personal for a determination.
- F.11 Pat down searches of transgender and intersex persons. TCJDC does not perform pat down searches for any purposes.
- F.12 Residents with disabilities and Residents who are limited English proficient.
- a. TCJDC will ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the TCJDC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps will include:
- a.1 Providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
- a.2 That written materials are provided in formats or through methods that ensure effective communication with residents with disabilities, including residents who have intellectual disabilities, limited reading skills, or who are blind or have low vision.
- a.3 The Program Manager will ensure that disabled residents have access to these materials and programs. TCJDC is not required to take actions that can demonstrate or would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.
- b. TCJDC will ensure that reasonable step(s) are taken to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
- c. The agency will not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended

delay in extended delay in obtaining an effective interpreter could compromise the resident's safety. The performance of first response duties under staff first responder duties, or the investigation of the resident's allegations.

- F.13 Hiring and promotion decisions. TCJDC will not hire or promote anyone who may have contact with residents, and will not enlist the services of any contractor, who may have contact with residents, who:
- a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. § 1997)'
  - b. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
  - c. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a) of this section. (See Policies 03-03. OJA Rules 377:-13-43 (a,b,c,d))
- F.14 Background Checks. TCJDC will consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.
- a. Before hiring new employees who may have contact with residents, TCJDC Human Resources will:
    - a.1 Perform a criminal background records check; which will Include a Child Abuse Registry check;
    - a.2 Consistent for Federal, State, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.
  - b. TCJDC will also perform a criminal background records check before enlisting the services of any contractor who may have contact with residents.
    - b.1 All contractors will provide a state issued identification card for background search. Contractors who do not have any issued stated ID card will not be allowed inside the facility.
    - b.2 Background check forms can be located at the second floor administrative offices.
    - b.3 Background checks will be completed by the Jail Investigations unit prior to the contractor entering the facility or beginning any work, except in emergency circumstances.

b.4 Background checks will be reviewed by the Detention Administrator for approval or denial. All background check forms will be maintained by Jail Investigations.

c. TCJDC will conduct criminal background records check at least every five years of current employees and contractors.

d. TCJDC will also ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (A.12) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. TCJDC will also impose upon employees a continuing affirmative duty to disclose any such misconduct.

e. Material omissions regarding such misconduct, or the provision of materially false information, will be grounds for termination.

f. Unless prohibited by law, TCJDC will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. (See Policies 03-08 Criminal Records Check, 03-11 Performance Reviews)

F.15 Upgrades to facilities and technologies. When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, TCJDC will consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, TCJDC will consider how such technology may enhance the agency's ability to protect resident from sexual abuse. (Policy 08-04 Remodeling and Construction. OJA Rules 377:3-13-44 (5))

#### G. Responsive Planning:

G.1 Evidence protocol and forensic medical examinations.

a. To the extent TCJDC is responsible for investigating allegations of sexual abuse; TCJDC will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Investigators will use Chapter 8 section C for collection of evidence.

b. The protocol will be developmentally appropriate for youth where applicable, and as appropriate, will be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence against Women publication, "A National Protocol for Sexual Assault Medical Forensic



Examinations, Adults/Adolescents, “or similarly comprehensive and authoritative protocols developed after 2011.

c. TCJDC will offer all victims of sexual abuse access to forensic medical examinations without financial cost, where evidentiary or medically appropriate. Such examinations will be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. Tulsa County Juvenile Detention will document its efforts to provide exams.

d. TCJDC will attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, TCJDC will make available to provide these services a qualified staff member from a community-based organization or a qualified agency staff member. TCJDC will document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to any entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

e. As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals.

f. To the extent TCJDC itself is not responsible for investigations allegations of sexual abuse; the agency will request that the investigating agency (Tulsa Police Department )TPD) follow the requirements of paragraphs (a) Through (e) of this section

**G.2 Ensuring referrals of allegations for investigations.**

a. TCJDC will ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

b. TCJDC will ensure that all allegations of sexual abuse or sexual harassment are referred for investigation to the (TCJDC) PREA Review Committee.

b.1 Detention PREA Compliance Manager will ensure that there is a complete tracing system from the initial request through the final disposition.

b.2 Detention PREA Compliance Manager will retain statistical data to include:

1. Number of allegations of sexual abuse and sexual harassment received.

2. Number of allegations resulting in an administrative investigation.
  3. Number of allegations referred for criminal investigation.
  4. Number of investigation completed.
- c. TCJDC will publish such policy on its website.
  - d. TCJDC will document all such referrals
  - e. If a separate entity is responsible for conducting criminal investigations, the website will describe the responsibilities of both the agency and the investigating entity.

## H. Training and Education.

### H.1 Employee training.

- a. TCJDC will train all employees who may have contact with residents on:
  - a.1 The zero tolerance policy for sexual abuse and sexual harassment;
  - a.2 How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
  - a.3 Resident right to be free from sexual abuse and sexual harassment;
  - a.4 The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
  - a.5 The dynamics of sexual abuse and sexual harassment in confinement;
  - a.6 The common reactions of sexual abuse and sexual harassment victims;
  - a.7 How to detect and respond to signs of threatened and actual sexual abuse;
  - a.8 How to avoid inappropriate relationships with residents;
  - a.9 How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and
  - a.10 How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;
  - a.11 How to distinguish between consensual sexual contact and sexual abuse between residents
  - a.12 Relevant laws regarding the applicable age of consent
  - a.13 Such training shall be tailored to the unique needs and attributes of residents of juvenile facilities
  - a.14 Employees are advised that sexual conduct between staff and residents, volunteers or contractors regardless of consensual status, is prohibited and subject to administrative and disciplinary sanctions including termination.

- b. All current employees who have not received such training will be trained within one year of the effective date of the PREA standards, and the agency will provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, TCJDC will provide refresher information on current sexual abuse and sexual harassment policies. The training unit will retain a video and ensure that all employees have viewed the video.
- c. The training unit will document, through employee signature or electronic verification that employees understand the training they have received.

## H.2 Temporary contractor(s), regular contractor(s) and volunteer(s) training.

- a. TCJDC, will ensure that all volunteers and contractors who have contact with residents (or enter the secure portion of the facility) have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.
- b. The level and type of training provided to volunteers and contractors will be based on the services they provide and level of contact they have with residents, all volunteers and contractors who have contact with residents will be notified of the agency's zero tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.
  - b.1 Temporary Contractors will receive training via written form (attachment A). The written form will be provided by the operations desk after a full background has been completed. The Programs officer will ensure that all temporary contractors have signed the form and will work with Jail Investigations to ensure compliance with the background check standard.
  - b.2 Regular Contractors will receive training via written form (attachment A), the written form will be provided after a full background check has been completed, and after watching OJA sanctioned video training.
  - b.3 Volunteers will receive training via written form, the written form will be provided after a full background check has been completed, and after watching OJA sanctioned video training.
- c. TCJDC will maintain documentation confirming that temporary contractors, regular contractors and volunteers understand the training they have received. This documentation will be retained by the PREA Compliance Manager or Training Supervisor.

### H.3 Resident Education.

a. During the intake process, residents will receive information explaining the TCJDC's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. This information is communicated orally and in writing in a language clearly understood by the resident, prior to assignment to a housing unit.

a.1 In Admission, all residents will sign a form acknowledging the zero tolerance policy on sexual misconduct.

a.2 All residents will view the videos. The Admissions Counselor will ensure that residents who need to view the PREA video is noted in the daily room logs.

a.3 Any resident who does not view the video because of classification level, medical emergency or other issue, will be rescheduled through the PREA Compliance Manager or Training Supervisor. Unit Shift Supervisor will ensure that the Training Supervisor is aware of any resident who fits this category.

a.4 The Training Supervisor will work in conjunction with the Unit Shift Supervisor and PREA Compliance Manager to ensure that residents on room confinement have viewed the video within 14 days of arrival.

a.5 If the video is not working, the officer will contact the Training Supervisor. If it is after hours the Training Supervisor will still be contacted by chain of command.

b. TCJDC will provide refresher information whenever a resident is transferred to a different facility.

b.1 Once a quarter, as scheduled by programs, all residents will view a prerecorded video (additional in-depth training) about resident sexual assault.

b.2 Both versions English and Spanish will be played.

b.3 The PREA Compliance Manager will ensure that residents on room confinement receive this training.

b.4 All residents receiving additional in-depth training will sign acknowledgement of the training.

b.5 During dayroom viewing, Detention Counselors will have residents sign the roster acknowledging viewing and comprehension.

b.6 During individual viewing, the detention counselor or Unit Shift Supervisor will have residents sign the roster acknowledging viewing and comprehension.

b.7 Residents unable to sign due to limited English or disability will utilize the translation services to ensure comprehension (through the PREA compliance Manager).

c. TCJDC will provide resident education informants accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as residents who have limited reading skills. Residents identified in the category will be referred to programs for specialized training.

d. TCJDC will maintain documentation of resident participation in these education sessions.

d.1 Documentation of the training will include several forms, video, and documents.

1. Resident handbook acknowledgment form
2. Resident Zero Tolerance Sexual Misconduct form;
3. Resident grievance process attachment;
4. Resident handbook.

d.2 The resident handbook acknowledgement form and the resident Zero Tolerance Sexual Misconduct form will be retained in the residents medical file.

d.3 Video observation will be documented on the resident Zero Tolerance Sexual Misconduct form.

d.4 In addition to providing such education, the TCJDC PREA Compliance Manager will ensure that key information is continuously and readily available or visible to resident's through posters, resident handbooks, or other written formats. (See policies 16-10 Educational Programs, 04-01 Facility Training)

#### H.4 Specialized Training: Investigations.

a. The facility will not perform arrival investigations for possible prosecution. Criminal investigations will be referred to external legal authorizes such as Tulsa Police Department, Tulsa County Sheriff Office Sex Crimes Units.

b. Specialized training will include:

- b.1 Techniques for interviewing sexual abuse victims;
- b.2 Proper use of Miranda and Garrity warnings;
- b.3 Sexual abuse evidence collection in confinement settings;
- b.4 Criteria and evidence required to substantiate a case for administrative action or prosecution referral;

b.5 The TCJDC PREA Compliance Manager will maintain documentation that the agency that conducts external investigations have completed the required specialized training in conducting sexual abuse investigations.

H.5 Specialized training: Medical and mental health care.

- a. The TCJDC's Pres Compliance Manager will ensure that all full and part-time medical and mental health care practitioners who work in its facilities have been trained in:
  - a.1 How to detect and assess signs of sexual abuse and sexual harassment;
  - a.2 How to preserve physical evidence and sexual abuse;
  - a.3 How to respond effectively and professionally to victims of sexual abuse and professionally to victims of sexual abuse and sexual harassment; and
  - a.4 How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
- b. The TCJDC's Training Supervisor or PREA Compliance Manager will maintain documentation that medical and mental health practitioners have received the training.
- c. Medical and mental health care practitioners will also receive the training mandated for employees under training for (temporary) contractors and volunteers depending upon the practitioner's status.

I. Screening for Risk of Sexual Victimization and Abusiveness.

I.1 Screening for risk of victimization and abusiveness:

- a. All residents will be assessed during an intake screening and upon transfer from another outside facility for their risk of being sexually abused by other residents or sexually abusive toward other residents.
- b. Intake screening will take place within 24 hours of arrival at the facility.
- c. Such assessment will be conducted using both the existing digital classification system and paper systems.
- d. The intake screening will consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:
  - d.1 Whether the resident has a mental, physical, or developmental disability;
  - d.2 The age of the resident;

- d.3 The physical build of the resident;
  - d.4 Whether the resident has previously been incarcerated;
  - d.5 Whether the resident's criminal history is exclusively nonviolent;
  - d.6 Whether the resident has prior convictions for sex offenses against an adult or child;
  - d.7 Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
  - d.8 Whether the resident has previously experienced sexual victimization; and
  - d.9 The resident's detention status for civil immigration purpose.
- e. The intake screening will consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive.
- f. Within a set time period, not to exceed 30 days from the residents' arrival at the facility, the Program Manager in conjunction with the PREA Compliance Manager will reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. A resident's risk level will be reassessed by the Unit Shift Supervisor when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness. (see policy 10-07 Health Screening New Admits))
- g. Residents will not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked about mental physical or developmental disability, perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, has previously experienced sexual victimization, or residents own perception of vulnerability.
- h. TCJDC will control the dissemination within the facility of responses to questions asked or order to ensure that sensitive information is not exploited to the resident's detriment by staff or other resident's.
- h.1 Classification officers and supervisors may obtain access to this controlled information.

- I.2 Used of screening information.
  - a. TCJDC will use information from the risk screening form to notify housing, bed, work, education, and program assignments. TCJDC will attempt to keep separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.
  - b. TCJDC will make individualized determinations about how to ensure the safety of each resident.
  - c. In deciding whether to assign a transgender or intersex resident to housing and programing assignment, classification will consider on case-by-case basis whether a placement would ensure the residents health and safety, and whether the placement would present management or security problems.
  - d. Placement and programming assignments for each transgender or intersex resident will be reassessed by the Unit Shift Supervisor at least twice each year to review any threats to safety experienced by the resident. The Unit Shift Supervisor will document the reviews.
  - e. A transgender or intersex residents own views with respect to his or her own safety will be given serious consideration.
  - f. Transgender and intersex residents will be given the opportunity to shower separately from other residents. Residents will be housed with other residents unless based on the risk screening a safer alternative is possible.
  - g. TCJDC will not place lesbian, gay, bisexual, transgender, or intersex residents in dedicated facilities, unit, or wings solely on the basis of such identification or status, unless such placement is in the dedicated facility unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such residents
  
- J. Reporting.
  - J.1 Resident Reporting.
    - a. TCJDC will provide internal and external ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Reporting may occur via.
      - a.1 Resident Grievance process to the Administrator;
      - a.2 Verbally speaking with staff or supervisors;
      - a.3 Handwritten resident request; sent to OJA (OPI)
      - a.4 Handwritten note to Managers or staff;



- a.5 During resident evaluations;
  - a.6 Reporting to another resident;
  - a.7 To any contractor, volunteer, or employee;
- b. TCJDC will inform residents of at least one way to report abuse or harassment to a public or private entity or office that is not part of TCJDC and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to TCJDC officials, allowing the resident to remain anonymous upon request. Residents may contact the DHS HOTLINE at 1-800-522-3511.
- c. TCJDC will attempt to notify all residents upon arrival of the facility about sexual harassment, sexual misconduct, and sexual abuse. Residents may be informed via:
  - c.1 Posters inside each pod, booking, and various areas throughout the facility;
  - c.2 Intake handout;
  - c.3 Resident handbook.
- d. All employees, temporary contractors, regular contractors, volunteers, and employees will accept reports made verbally, in writing anonymously, and from third parties and will promptly document any verbal reports. All reports of sexual misconduct will be reported in accordance 20-12.
- e. TCJDC will provide a method for employee, temporary contractors, regular contractors, volunteers, and employees to privately report sexual abuse and sexual harassment of residents. Reports may be made.
  - e.1 To any Manager or employee;
  - e.2 To call DHS HOTLINE 1-800-522-3511.

## J.2 Exhaustion of Administrative Remedies.

- a. TCJDC will not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.
  - a.1 Employees will not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.
  - a.2 Nothing in this section will restrict TCJDC, Tulsa County Board of Commissioners or the Tulsa County Juvenile Bureau's ability to defend against a lawsuit filed by a resident or former resident on the ground(s) that the applicable statute of limitations has expired.

- b. TCJDC will ensure that:
  - b.1 A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint; and
  - b.2 Such grievance is not referred to a staff member who is the subject of the complaint.
  
- c. TCJDC will issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 30 days of the initial filing of the grievance. Computation of the 30 day time period will not include time consumed by resident in preparing any administrative appeal.
  - c.1 TCJDC may claim an extension of time to respond, of up to 30 days (not to exceed 160 days), if the normal time period for response is insufficient to make an appropriate decision. TCJDC will notify the resident in writing of any such extension and provide a date by which a decision will be made.
  - c.2 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.
  
- d. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, will be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and will also be permitted to file such requests on behalf of residents.
  - d.1 If a third party files such a request on behalf of an resident, TCJDC will require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.
  - d.2 If the resident declines to have the request processed on his or her behalf, the TCJDC will document the resident's decision.
  
- e. TCJDC has established procedures for the filing of any emergency grievance alleging that a residents subject to a substantial risk of imminent sexual abuse.
  - e.1 Residents who have an emergency grievance will report to the Supervisor on shift. Resident grievances of any emergency matter will be reviewed by the on shift supervisor.
  - e.2 After receiving an emergency grievance alleging and determining that the resident is subject to a substantial risk of imminent sexual abuse, TCJDC will immediately forward the grievance (or any portion thereof

that alleges the substantial risk of imminent sexual abuse) to a supervisor and PREA Compliance Manager. Supervisors will provide an initial response within 48 hours, and will issue a final agency decision within 5 calendar day. The initial response and final decision will document the determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

f. TCJDC may discipline a resident for filing a grievance related to alleged sexual abuse only where TCJDC demonstrates that the resident filed the grievance in bad faith.

### J.3 Resident access to outside confidential support services.

a. TCJDC will provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and by enabling reasonable communication between residents and these organizations, in as confidential a manner as possible.

a.1 Children's Advocacy Center 918-624-0200 or 918-624-0222

b.2 D.V. I. S. 1-918-585-3163

b. TCJDC will inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

c. TCJDC will maintain or attempt to enter into memoranda of understanding or other agreement with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. TCJDC will maintain copies of agreements or documentation showing attempts to enter into such agreements.

c.1 TCJDC has established a relationship with Demand Project

c.2 If in the future a formal MOU is completed. The MOU will be maintained at Office of the Bureau Director.

### J.4 Third-Party reporting.

a. TCJDC will establish a method to receive third-part reports of sexual abuse and sexual harassment and will distribute publicly information on its website of how to report sexual abuse and sexual harassment on behalf of a resident.

a.1 TCJDC will have one way of receiving third party reports.

1. Resident may report through DHS Hotline

a.2 Citizens may report through:

1. Directly contacting the PREA Compliance manager or facility Administration;

2. DHS HOTLINE

a.3 TCJDC will provide information on its website on all forms of reporting.

K. Official Response Following a Resident Report.

K.1 Staff and agency reporting duties:

a. TCJDC employees, temporary contractors, regular contractors, and volunteers will report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation to their immediate supervisor.

b. Apart from initial reporting to supervisor(s) or facility administrators staff will not reveal any information related to sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions.

c. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners will be required to report sexual abuse pursuant to paragraph (a) of this section and to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

d. If the alleged victim is under the age of 18 or considered a vulnerable adult under the State or local vulnerable person's statute, TCJDC will report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

e. TCJDC supervisors will report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to facility administrators.

K.2 Agency protection duties. When TCJDC learns that a resident is subject to a substantial risk of imminent sexual abuse, it will take immediate action to protect the resident.

- a. Section C.2 d. of the policy,, Investigating personnel will remove the suspected victim for interviewing in an area away from possible perpetrators by calling the resident out of the housing unto the interview room.
- b. The Unit Shift Supervisor will document these events in the completion of an incident report.

### K.3 Reporting to other confinement facilities.

- a. Upon receiving an allegation that a resident was sexually abused while confined at another facility, the facility Administrator that received the allegation will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.
- b. Such notification will be provided as soon as possible, but no later than 72 hours after receiving the allegation.
- c. The TCJDC facility Administrator will document that they have provided such notification.
- d. The facility Administrator that receives such notification will ensure that the allegation is investigated in accordance with these standards.

### K.4 Staff first responder duties.

- a. Upon learning of an allegation that an resident was sexually abused, the first security staff member to respond to the report will be required to:
  - a.1 Separate the alleged victim and abuser;
  - a.2 Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence:
  - a.3 If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating unless medically required; residents who have pre-existing conditions will be sent to medial for a medical review; and
- b. If the first staff responder is not a Supervisor, the responder will request that the alleged victim not take any actions that could destroy physical evidence and then notify the detention officer or supervisor.
- c. First responders will use the form “sexual misconduct/PREA checklist” and ensure that a copy is attached to the incident report of PREA Compliance Manager.

- K.5 Coordinated response. TCJDC will institute the written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among first responders, medical and mental health practitioners, investigators, and Supervisors.
- a. The PREA Compliance Manager will lead a coordinated response which includes.
    - a.1. A first responder will take the initial report and begin the investigation.
    - a.2 If the response involves resident and employee rape allegations. Facility administrators will coordinate with local authorities.
    - a.3 Facility administrators will also coordinate with Crime Scene Units for proper evidence collection;
    - a.4 Facility administrator will coordinate with domestic violence interventions services (call The Demand Project 1-918-609-0325 information).
- K.6 Agency protection against retaliation.
- a. TCJDC will protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The PREA Coordinator will monitor, in writing that all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations are protected from retaliation by other residents or staff.
  - b. TCJDC will utilized 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 who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
    - b.1 Supervisor will determine a secure location for resident victims. Classification may use all areas of the facility and will document all transfers or movements.
    - b.2 Facility Administrators and Supervisors will ensure that resident victims are removed from allegations involving volunteers, regular contractors, temporary contractors or any other abuser.
    - b.3 Resident victims will be allowed access to emotional support services through Demand Project 1-918-609-0325.

- c. For at least 90 days following a report of sexual abuse, the PREA Compliance Manager will monitor the conduct and 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 will act promptly to remedy any such retaliation. Items the agency should monitor include any resident disciplinary reports, housing, or program changes, negative performance review or reassignments of staff. The PREA Compliance Manager will continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- d. In the case of residents, such monitoring will also include periodic status checks.
- e. If any other individual who cooperates with an investigation expresses a fear of retaliation, the PREA Compliance Manager will take measures to protect the appropriate measures to protect that individual against retaliation.
- f. TCJDC's obligation to monitor will terminate if the investigation determines that the allegations is unfounded.
- g. Annually the PREA Compliance Manager will produce a report showing the number of retaliation follow ups.
- h. TCJDC will not terminate any internal administrative review process solely because the source of the allegation recants.

## L. Investigations

### L.1 Criminal and administrative agency investigations:

- a. When the TCJDC conducts its own investigations into allegations of sexual abuse and sexual harassment, it will do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
- b. Where sexual abuse is alleged, the agency will use outside investigators who have received special training in sexual abuse investigations pursuant to section C.4 of this policy.
- c. Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; will interview alleged victims, suspected perpetrators, and witnesses; and will review prior complaints and reports of sexual abuse involving the suspected perpetrator.
- d. When the quality of evidence appears to support criminal prosecution, the investigator will conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.
- e. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person's status as resident

or staff. No investigator will require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

f. Administrative investigations:

f.1 Will include an effort to determine whether staff actions or failures to act contributed to the abuse; and

f.2 Will 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.

g. Criminal investigations will be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

h. substantiated allegations of conduct that appears to be criminal will be referred for prosecution.

i. TCJDC will retain all written reports referenced in paragraphs (f ) and (g) of this section for as long as the alleged abuser is detained or employed by the TCJDC, plus five years.

j. The departure of the alleged abuser or victim from the employment or control of the facility or agency will not provide a basis for terminating an investigation.

k. When outside agencies investigate sexual abuse, the facility will cooperate with outside investigator and will endeavor to remain informed about the progress of the investigation. A Office of Client Advocacy investigator will be assigned to investigations outside of TCJDC. After the conclusion of the other agencies investigation, the Investigator will provide a written summary to the Facility Administrator.

L.2 Evidentiary standard for administrative investigations. TCJDC investigators will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

L.3 Reporting to residents

a. Following an investigation into an resident's allegation of sexual abuse the Facility Administrator will inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

b. If TCJDC did not conduct the investigation, the PREA Compliance Manager will request the relevant information from the investigative agency in order to inform the resident.



c. Following an resident’s allegation that a staff member has committed sexual abuse against the resident TCJDC will subsequently inform the resident (unless TCJDC has determined that the allegation is unfounded) whenever:

c.1 The staff member is no longer posted with in resident unit;

c.2 The staff member is no longer employed;

c.3 The agency learns that the staff member has been indicated on a charge related to sexual abuse within the facility; or

c.4 TCJDC learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

d. Following an resident’s allegation that he or she has been sexually abused by another resident TCJDC will subsequently inform the alleged victim whenever:

d.1 TCJDC learns that the alleged abuser has been indicated on a charge related to sexual abuse within the facility; or

d.2 TCJDC learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

e. All such notifications or attempted notifications will be documented.

f. TCJDC’s obligations to report under this standard will terminate if the resident is releases from the agency’s custody.

**M. Discipline.**

**M.1 Disciplinary sanctions for staff.**

a. All employees will be subject to disciplinary sanctions up to and including termination, and criminal prosecution for violating agency sexual abuse or sexual harassment policies.

b. Termination will be the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

c. Disciplinary sanctions for violations of policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

d. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, will be reported to law enforcement agencies, unless the activity was clearly not criminal and to any relevant licensing bodies.

M.2 Corrective action for contractors and volunteers.

- a. Any temporary contractor, regular contractor, or volunteer who engages in sexual abuse will be prohibited from contact with residents and will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.
- b. TCJDC will take immediate remedial measures, and will prohibit further contact with residents.

M.3 Disciplinary sanctions for residents.

- a. Resident will be subject to disciplinary sanctions pursuant to the formal disciplinary process following an administrative finding that the resident engaged in resident-on resident sexual abuse or following a criminal finding of guilt for resident on resident sexual abuse, as defined in TCJDC policy and the Resident Handbook. (see policy 19-03 Resident Rules and Discipline)
- b. Sanctions will be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other resident with similar histories.
- c. The disciplinary process will consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanctions, if any, should be imposed.
- d. TCJDC offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the TCJDC hearing officer will consider whether to require the offending resident to participate in such interventions as a condition of access to programming or other benefits.
- e. The Facility Administrator will discipline any resident for sexual contact with staff only upon finding that the staff member did not consent to such contact.
- f. For the purpose of disciplinary action, any report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- g. TCJDC prohibits any and all sexual activity between residents and will discipline residents for such activity.

N. Medical and Mental Care.

- N.1 Medical and mental health screening; history of sexual abuse.

- a. If the screening indicates that a person has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, classification will notify the hearing supervisor, medical, and the program officer who will ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. All documents pertaining to this section will be retained by records and/or medical.
- b. If the screening indicates that a person has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff will ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.
- c. Any information related to sexual victimization or abusiveness that occurred in an institutional setting will 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 assignment, or as otherwise required by Federal, State, or local law.

Medical and mental health practitioners will obtain informed consent from the resident before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

#### N.2 Access to emergency medical and mental health services.

- a. Resident victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.
- b. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders will take preliminary steps to protect the victim and will immediately notify the appropriate medical and mental health practitioners.
- c. Resident victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexual transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
- d. Treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates.

#### N.3 On going medical and mental health care for sexual abuse victims and abusers.

- a. TCJDC will offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
  - b. The evaluation and treatment of such victim's will include, as appropriate,
    - b.1 Follow-up services; and
    - b.2 When necessary, referral for continued care following their transfer to or placement in other facility, other their release from custody.
  - c. TCJDC will provide such victims with medical and mental health services consistent with the community level of care.
  - d. Resident victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy test.
  - e. If pregnancy results from conduct specified in paragraph (d) of this section, such victims will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
  - f. Resident victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.
  - g. Treatment services will be provided to the victim without financial cost and regardless of whether the victim name the abuser or cooperates with any investigation arising out of the incident.
  - h. The PREA Compliance Manager will ensure that medical conducts a mental health evaluation of all know resident-on resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.
- O. Data Collection and Review.
- O.1 Sexual abuse incident reviews:
    - a. The facility will conduct a sexual abuse incident review at the conclusion of every sexual abuse investigating, including where the allegation has not been substantiated, unless the allegations has been determined to be unfunded.
    - b. Such review will ordinarily occur within 30 days of the conclusion of the investigation.
    - c. The review team will include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.
    - d. The review team lead by the Facility Administrator or designee will:

- d. 1 Consider whether the allegation or investigation indicates a need to ~~change~~ policy or practice to better prevent, detect, or respond to sexual abuse.
- d.2 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.
- d.3 Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- d.4 Assess the adequacy of staffing levels in that area during different shifts;
- d.5 Assess whether monitoring technology be deployed or augmented to supplement supervision by staff; and
- d.6 Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d.1)- (d.5) of this section, and any recommendations for improvement, and submit such report to the facility head and PREA Compliance Manager.
- e. TCJDC will implement the recommendations for improvement, or will document its reasons for not doing so.

## O.2 Data Collection.

- a. TCJDC will collect accurate, uniform data for every allegation of sexual abuse a facilities under its direct control using a standardized instrument and set of definitions.
- b. The agency will aggregate the incident based sexual abuse data at least annually.
- c. The incident based data collected will include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- d. TCJDC will maintain, review, and collect data as needed from all available incident base documents including reports, investigations files, and sexual abuse incident reviews.
- e. Upon request, TCJDC will provide all such data from the previous calendar year to the Department of Justice no later than June 30 or during annual survey of Sexual Victimization.

## O.3 Data review for corrective action.

- a. TCJDC will review the data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response polices, practices, and training, including:
  - Identifying problem areas;
  - Taking corrective action on an ongoing basis; and
  - Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.
- b. Such report will include a comparison of the current year's data and corrective actions with those from prior years and will provide an assessment of the agency's progress in addressing sexual abuse.
- c. The report will be approved by the Facility Administrator and made readily available to the public through its website or, if it does not have one, through other means.
- d. TCJDC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

O.4 Data storage, publication, and destruction.

- a. TCJDC will ensure that data collected are securely retained.
- b. TCJDC will make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.
- c. Before making aggregated sexual abuse data public available, TCJDC will remove all personal identifiers.
- d. The agency will maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

P. Audits

P.1 Audits of standards.

- a. TCJDC will conduct audits pursuant to section L.

Q. Auditing and Corrective Action

A.1 Frequency and scope of audits:

- a. The facility will seek recertification of PREA compliance by the Department of Justice certified auditors at least once every three years.

- b. The Department of Justice may send a recommendation to the facility administrator for an expedited audit if the Department has reason to believe that a particular facility may be experiencing problems relating to sexual abuse. The recommendation may also include referrals to resources that may assist the agency with PREA-related issues.
- c. The Department of Justice will develop and issue an audit instrument that will provide guidance on the conduct of and contents of the audit.
- d. TCJDC will bear the burden of demonstrating compliance with the standards.
- e. The auditor will review all relevant agency-wide policies, procedures, reports, internal and external audits, and accreditations for the facility type.
- f. The audits will review, at a minimum, a sampling of relevant documents and other records and information for the most recent one-year period.
- g. The auditor will have access to, and will observe, all areas of the audited facilities.
- h. The auditor will be permitted to request and receive copies of any relevant documents (including electronically stored information).
- i. The auditor will retain and preserve all documentation (including, e.g., video tapes and interview notes) relied upon in making audit determinations. Such documentation will be provided to the Department of Justice upon request.
- k. The auditor will review and sampling of any available videotape and other electronically available data that may be relevant to the provisions being audited.
- l. The auditor will be permitted to conduct private interviews with residents.
- m. Residents will be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.
- n. Auditors will attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.
- o. The PREA Compliance Manager will prepare any pre-audit documents and will work in conjunction with the Detention Facility Administrator to ensure the facility is prepared for the audit.

## Q.2 Auditor Qualifications

- a. An audit will be conducted by:

- a.1 A member of a correctional monitoring body that is not part of, or under the authority of TCJDC (but may be part of, or authorized by, the relevant State or local government);
- a.2 A member of an auditing entity such as an Inspector general's or ombudsperson's office that is external to the agency; or
- a.3 Other outside individuals with relevant experience.
- b. All auditors will be certified by the Department of Justice. The Department of Justice will develop and issue procedures regarding the certification process, which will include training requirements.
- c. No audit may be conducted by an auditor who has received financial compensation from the agency being audited (except for compensation received for conducting prior PREA audits) within the three years prior to the agency's retention of the auditor.
- d. The agency will not employ, contract with, or otherwise financially compensate the auditor, with the exception of contracting for subsequent PREA audits.

**Q.3 Audit contents and finds.**

- a. Each audit will include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.
- b. Audit reports will state whether agency-wide policies and procedures comply with relevant PREA standards.
- c. For each PREA standard, the auditor will determine whether the audited facility reaches one of the following findings: Exceeds Standard (substantially exceeds requirement of standard); Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period); Does Not Meet Standard (requires corrective action). The audit summary will indicate, among other things, the number of provisions the facility has achieved at each grade level.
- d. Audit reports will describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility, and will include recommendations for any required corrective action.
- e. Auditors will redact any personally identifiable resident or staff information from their reports, but will provide such information to the agency upon request, and may provide such information to the Department of Justice.



f. The agency will ensure that the auditor's final report is published on the agency's website if it has one, or is otherwise made readily available to the public.

Q.4 Audit corrective action plan.

a. A finding of "Does Not Meet Standard" with one or more standards will trigger a 180-day corrective action period.

b. The auditor and the agency will jointly develop a corrective action plan to achieve compliance.

c. The auditor will take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies and procedures or re inspecting portions of a facility.

d. After the 180-day corrective action period ends, the auditor will issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action.

e. If the facility does not achieve compliance with each standard, it may (at its discretion and cost) request a subsequent audit once it believes that it has achieved compliance.

Q.5 Audit appeals

a. An agency may lodge an appeal with the Department of Justice regarding any specific audit finding that it believes to be incorrect. Such appeal must be lodged within 90 days of the auditor's final determination.

b. If the Department determines that the agency has stated good cause for a re-evaluation, the agency may commission a re-audit by an auditor mutually agreed upon by the department and the agency. The agency will bear the cost of this re-audit.

c. The finding of the re-audit will be considered final.

R. All case records associated with claims of sexual abuse or sexual harassment including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release and/or counseling are retained in accordance with this policy, policy 02-04 Records Administration, and CHC Policy, NCCHC J-B 04.

**IV. Authority/References:**

Prison Rape Elimination Act (28 C.F.R. Part 115)

OJA Rules

**V. Enclosures:**

None

**VI. ACTION:**

Facility Facility Administrator, Accreditation Manager,

Unit Shift Supervisors will be responsible for the

Compliance monitoring of this policy

Any exceptions to this policy statement will require the written approval of the Facility

Administrator or the Juvenile Bureau Director

This policy will be effective as indicated

Replaced: New

Distribution: PREA policy and procedure manual

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Facility Administrator, Tulsa County Juvenile Detention