

**San Diego County Juvenile Justice Commission
2015 Inspection**

According to Welfare and Institutions Code 229, the Juvenile Justice Commission conducts annual inspections of the juvenile detention facilities in San Diego County. It shall report the results of such inspections together with its recommendations based thereon, in writing, to the Juvenile Court and to the Board of State and Community Corrections.

A. Detention Facility Information:

Facility Name:	
GIRLS' REHABILITATION FACILITY	
Facility Address: 2861 Meadow Lark Drive San Diego, CA 92123	Date of Inspection: April 23, 2015
	JJC Chair: Kathleen Edwards
	JJC Admin. Officer: Scott Brown JJC Admin. Assistant: Amber Scott
	Chief of Probation: Mack Jenkins
	Presiding Judge of the Juvenile Court: Hon. Carolyn M. Caietti
Facility Administrator: Alex Zermeno, Division Chief	Telephone: (858) 694-4510
Detention Facility Contact: Alex Zermeno, Division Chief	Telephone: (858) 694-4510

B. Recommendations

The 2015 Juvenile Justice Commission recommends that Behavioral Health:

1. That Behavioral Health provide a weekend psychiatrist for the facility, which could be shared with Kearny Mesa Detention Facility. While the services provided for during the week are exemplary, the weekend is the most stressful time and should have the same coverage available.
2. That Behavioral Health provide increased counseling for minors leaving detention.

The 2015 Juvenile Justice Commission recommends that the San Diego County Office of Education:

1. That the SDCOOE work with the Supervisor of GRF in regards to the graduations of the girls so that none will miss the opportunity to receive their diplomas prior to graduating the GRF program. Additionally, coordination should be done to return the girls to their regular high school upon completion of the program, rather than Court Schools or Community programs.
2. That SDCOE improve the Intersession program to provide a continuum of services to the youth, and avoid a disruption of the CORE program during the intersessions.
3. That there be an increased number of referrals for IEP services and for those with active IEP's, increased referrals to Educationally Related Mental Health Services.

The 2015 Juvenile Justice Commission recommends that the San Diego County Probation Department:

1. A policy change to create a deeper connection between the Probation Officer of record and the GRF staff in regards to aftercare planning with more meetings during the transition period.
2. That a meeting be set up to discuss the Critical Incidents in regards to use of force that will best examine the information needed to address use of force issues.

C. General Comments

The GRF program continues to be a well planned and well-rounded program for the girls adjudicated to the facility. While grossly under-utilized at this time, the program appears to function well, and provides an environment of caring and concern. There appears to be enough programming to provide a "rehabilitative" environment. Changes have been made to address the concerns brought on by last year's suicide incident, which include having made the doors to the rooms a "50-50" with the top of the door able to be open during the daytime hours, as well as a change in the venting system within the rooms. The staff in the facility appear to be caring and while following the care, custody and control rules of the institution, still provide an atmosphere where the girls can receive the counseling and programming necessary to provide success.

In regards to the 2013-2014 recommendations, Probation has worked to comply with the recommendations made. While a study has not been done on the database question, this involves many departments, all of which have their own protocols and regulations. There are ongoing discussions on how best to get the information to the parties who need the information but an actual coordination of all the databases is cost-prohibitive and will take a long time to put into place.

There is newly developed Suicide Watch Protocol and there is ongoing collaboration to assure it best meets the needs of the minors. Probation did enact protocols in regards to the secure storage of gardening tools to protect the minors. At this time, the Horticultural program is a therapy program, rather than ROP, so that the minors do not lose any educational time, but rather it is an after-school program.

SDCOE has worked to minimize the loss of regular educational staff at GRF and this appears to be working well. There have been more SST meetings, however, the IEP's remain an issue and recommendations have been made this year to address this. Also, since the horticultural program is not and ROP program, this has not interrupted educational time.

D. Population & Staffing Information:

Average Daily Population:

	Adult Male	Adult Female	Juvenile Male	Juvenile Female	Total
Facility Capacity	0	0	0	45	45
Facility Average Daily Population	0	0	0	31	31

Has the facility exceeded capacity since the last inspection? Yes No

Does the facility house minors under California Welfare & Institutions Code Section 601? Yes No

If yes, are youth adjudicated pursuant to 601 separated from youth adjudicated pursuant to 602? Yes No

List the languages spoken by Probation staff members: Spanish

Probation Staffing Ratios:

Awake: 1 / 15

Asleep: 1 / 30

Probation Staffing:	# Filled	# Open
Director	1	0
Supervisors	1	0
DPOs	0	0
CDPOs	16	0
Admin/Support	1	0
Other: Senior Probation Officers	3	0
Psychologist & Alcohol and Drug Counselor	2	0

E. CSA/Other Inspections:

List inspections conducted by other agencies and dates of most recent inspection:

<u>Agency</u>	<u>Date</u>
Board of State and Community Corrections	6/9/14
US Marshall	9/10/13, not required for 2014, inactive.
Fire Department	10/28/14
California Medical Association	6/5/13
Grand Jury	10/17/14

Title 15

Environmental Health Evaluation	9/29/14
Nutritional Health Evaluation	11/19/14
Medical/Mental Health Evaluation	9/29/14

Date of last Fire drill: 12/31/14

F. Serious Incidents in Facility During the Calendar Years:

2013:

Indicate the number of:

- Suicides: 1
- Attempted suicides: 1
- Deaths from other causes: 0
- Escapes: 0
- Attempted escapes: 0
- Serious assaults on detainees: 0
- Serious assaults on staff: 0
- Other serious incidents: 2
- Serious incidents above for which there is a written record: 4

2014:

Indicate the number of:

- Suicides: 0
- Attempted suicides: 0
- Deaths from other causes: 0
- Escapes: 0
- Attempted escapes: 0
- Serious assaults on detainees: 0
- Serious assaults on staff: 0
- Other serious incidents: 0
- Serious incidents above for which there is a written record: 0

G. Problems/Complaints Affecting Facility During the Calendar Years:

2013:

- Court Orders Affecting Facility (Please have a Copy, if Available): Yes No
- Pending Litigation: Yes No
- Number of Written Complaints / Grievances Involving:
 - Residents: 283
 - Attorneys: 0
 - Family Members: 0
 - Medical: 0
 - Abuse: 0

2014:

- Court Orders Affecting Facility (Please have a Copy, if Available): Yes No
- Pending Litigation: Yes No
- Number of Written Complaints / Grievances Involving:
 - Residents: 139
 - Attorneys: 0
 - Family Members: 0
 - Medical: 0
 - Abuse: 0

Note: the number of grievances appear to be down due to more stability and consistency of staffing as well as the decrease in population.

H. Visual Review of Facility:

JJC Inspection Team Comments: The Commission’s inspection team completed a visual review of the facility during the tour portion of the inspection. The facility is in good condition and provides a somewhat homier environment than most facilities, which would appear to be beneficial to the success of the wards.

I. Review of Confinement Conditions:

JJC Inspection Team Comments: The Commission’s inspection team completed a visual review of the confinement conditions during the tour portion of the inspection.

SECTION A: ADMINISTRATION/MANAGEMENT

A.1 Policy Development and Monitoring

Who is primarily responsible for creating, updating, or modifying policies and procedures?

Title: The Division Chief

How often are policies and procedures reviewed for accuracy and consistency with daily practices? ongoing

Are policy and procedure manuals available on site? Yes No

Does the manual include the title, and contact information of the staff member to whom one can report a grievance or complaint? Yes No

Does the manual include the title, and contact information of the staff member to whom one can propose a change to a policy? Yes No

If yes, list the number of manuals available and the locations:

Number 3

Locations: One in dayroom, one in Senior's Office, one in Supervisor's office, on-line

Are probation staff members permitted to access these manuals? Yes No

Are contractors familiarized with these manuals during contractor orientation? Yes No

Are the youths' attorneys permitted to access these manuals via subpoena? Yes No

A.2 Internal Inspections and Reviews

Does the administrator in charge ever conduct a walk-through/visual inspection of the entire facility? Yes No

If yes, how often: At least weekly or as needed.

How often does the administrator in charge meet with probation staff members to discuss operations? At least weekly or as needed

How often does the administrator in charge meet with medical staff to discuss operations?

At least weekly or as needed

How often does the administrator in charge meet with mental health staff to discuss operations and services? At least weekly or as needed

How often does the administrator in charge meet with contracted programming representatives to discuss operations and services? At least weekly or as needed

How often does the administrator in charge meet with school/education staff members to discuss operations and services? At least weekly or as needed

A.3 Youth Records

Are case records regarding individual youth kept on site? Yes No

Records for the youth are kept in a locked area, only accessible to staff.

A.4 Admission and Orientation

Are minors oriented to rules and procedures? Yes No

Girls entering the program are given a full orientation which includes the rules and policies of the program. They are allowed to ask questions at this time.

Are minors given copies of rules and procedures? Yes No

Can minors request that rules and procedures be provided in a language other than English? Yes No

Can parents request that rules and procedures be provided in a language other than English? Yes No

Are minors required to sign a document indicating they understand rules and procedures? Yes No

Are rules and procedures posted anywhere in the facility? Yes No

If yes, please indicate the number of postings and the locations.

Number: 26

Locations: All occupied rooms. Each girl is given one in her packet upon entry into the program.

A.5 Personal Property and Monies

Are personal property and monies recorded, stored, and returned upon release? Yes No

Personal property is limited to toiletries and letters. All other properties are stored and returned and signed for upon release.

A.6 Youth Release and Transition

Are there established protocols for transitioning youth out of the facility and into the community? Yes No

Do facility probation staff members ("inside POs") consult with the probation officer that will be assigned to the youth when they leave ("outside POs") to discuss transition-related concerns? Yes No

Has the facility received any complaints from parents regarding the transition process? Yes No

Has the facility received any complaints from attorneys regarding the transition process? Yes No

A.7 Accommodations for the Disabled

Does the facility accept youth with disabilities? Yes No

Has this facility been determined to be an inappropriate facility for a youth with a disability (physical, developmental, emotional, psychological, intellectual, etc.) in the 2013 Calendar Year? Yes No

..... in the 2014 Calendar Year? Yes No

SECTION B: SECURITY AND CONTROL

B.1 Post Orders

Do probation staff members have access to a detailed copy of their job description? Yes No

Do probation staff members have performance reviewed annually? Yes No

B.2 Permanent Logs

Are there policies and procedures in place that describe the types of incidents and occurrences which must be documented on a daily basis? Yes No

Are these logs stored electronically? Yes No

If logs are stored electronically, is there sufficient technical support to ensure that the electronic files that contain these logs are not compromised, corrupted, or deleted? Yes No

B.3 Security Features

Does the facility have ample security features (i.e. cameras, locks, alarms, etc.)? Yes No

B.4 Security Inspections

Does the administrator in charge ever visually inspect the facility for security-related concerns? Yes No

If yes, how often: _____ monthly, as needed _____

Are random reviews of security tapes conducted? N/A Yes No

If yes, how often: _____

B.5 Control of Contraband

Has a weapon been found in the possession of a youth in the facility during the 2013 Calendar Year? Yes No
..... during the 2014 Calendar Year? Yes No

Has a controlled substance (i.e. alcohol, tobacco, illegal drugs, or prescription drugs for which the youth in possession does not have a prescription) been found in possession of a youth during the 2013 Calendar Year? Yes No
..... 2014 Calendar year? Yes No

Describe if there have been a high number of incidents related to a specific type of contraband: One incident where it was suspected that meth was brought in—not found but girl tested positive.

B.6 Detainee Searches

Do probation staff search sleep areas/rooms? Yes No

If staff search sleep areas/rooms, do probation staff members search the room in the presence of the youth? Yes No

If staff search sleep areas/rooms, is clean bedding or clothes mixed with soiled bedding or clothes during this process? Yes No

B.7 Accountability and Supervision

Staff provided supervision that provides for the care, custody and control of the youth they are supervising. Girls are held accountable for their behavior and are awarded grades based on their compliance.

B.8 Use of Force

Are there written policies in place to ensure that force is used only when necessary? Yes No

Are there written policies in place to ensure that force is used only as long as necessary? Yes No

Is each instance of a use of force documented? Yes No

If yes, are these documents reviewed by the administrator in charge? N/A Yes No

When there is an instance where force is used, does an internal committee or task force convene to discuss the incident? Yes No

Number of instances in 2013: 6 _____

Number of instances in 2014: 2 _____

B.9 Use of Oleoresin Capsicum (OC) Spray

Are there written policies in place to ensure that OC spray is used only when necessary? Yes No

Are there written policies in place to ensure that OC spray is used only as long as necessary? Yes No

Is each instance of OC spray documented? Yes No

If yes, are these documents reviewed by the administrator in charge? N/A Yes No

Number of instances in 2013: 1 _____

Number of instances in 2014: 0 _____

B.10 Non-routine Use of Restraints

Are there written policies in place to ensure that restraints are used only when necessary? Yes No

Are there written policies in place to ensure that restraints are used only as long as necessary? Yes No

Is each instance of a use of restraints documented? Yes No

If yes, are these documents reviewed by the administrator in charge? N/A Yes No

When there is an instance where use of restraints is used, does an internal committee or task force convene to discuss the incident? Yes No

Number of instances in 2013: 0 _____

Number of instances in 2014: 2 _____

B.11 Confinement

Are there written policies in place to ensure that solitary confinement is used only when necessary? N/A Yes No

Are there written policies in place to ensure that solitary confinement is used only as long as necessary? N/A Yes No

Is each instance of solitary confinement documented? N/A Yes No

If yes, are these documents reviewed by the administrator in charge? N/A Yes No

Number of instances in 2013: 0 _____

Number of instances in 2014: 0 _____

B.12 Tool & Equipment Control

- Is there a written policy to ensure the adequate control of keys? Yes No
- Is there a written policy to ensure the adequate control of tools? Yes No
- Is there a written policy to ensure the adequate control of culinary utensils and equipment? Yes No
- Is there a written policy to ensure the adequate control of medical equipment? Yes No
- Is there a written policy to ensure the adequate control of supplies? Yes No
- Is there a written policy to ensure the adequate control of vehicles? Yes No

B.13 Weapons Control

- Are weapons of any types permitted in the facility? Yes No
- Is there a weapons locker on site? Yes No
- If yes, where is it located? Outside front door of GRF

B.14 Discipline

- Are there written policies that describe the discipline process? Yes No
- Are measures taken to ensure that due process is preserved? Yes No

Of a random sample of 40 grievances, approximately what percent of grievances/appeals related to disciplines are resolved in favor the youth? 20% for 2014

B.15 Supervision for Special Housing

Administrative segregation, protective custody and disciplinary detention are not available at GRF.

B.16 Contingency/Emergency Plans

Are there written plans in place for the following contingencies/emergencies?
Check all that apply:

- Contagious disease outbreak (Tuberculosis, Flu, etc.)
- Earthquake
- Fire
- Power outage/failure
- Unit disturbance
- Other: Medical emergencies, hostage situations, bomb threats, explosion and floods.
- Other: Violence in the workplace, Africanized bees and wildlife, and nuclear attacks.

SECTION C: FOOD SERVICE

C.1 Sanitation and Meal Service

- Are kitchen staff members trained regarding sanitation and food handling procedures? Yes No

Have kitchen staff members received any training in the last year other than training given to newly hired employees? Yes No

If yes, describe what the training included: Training is provided by the Sheriff's Department on an ongoing basis.

Do youth work in the kitchen? Yes No

If yes above, have they been trained? N/A Yes No

Are youth permitted to converse during meals? Yes No

If yes, may a youth seated at one table converse with a youth seated at a different table? N/A Yes No

Are meals served cafeteria style? Yes No

Are youth permitted 20 minutes or more to eat? Yes No

Who/what agency maintains the kitchen area? Sheriff's Department

Describe the types of work youth perform: prepare meal trays, deliver food, clean up after meals

C.2 Adequate and Varied Meals

Is there a weekly menu posted? Yes No

Does a nutritionist, dietitian, or other health professional participate in the creation of the menu? Yes No

How many calories per day does a youth who eats all of the standard meals provided consume? 2800 Yes No

Are weaker youths protected from having food taken from them? Yes No

What approximate percent of calories are from the following:

Protein: 17%

Carbohydrate: 56%

Fat: 27%

C.3 Special Diets

Can special diets be accommodated when medically necessary? Yes No

Was the facility unable to accommodate a special diet based on medical reasons during the 2014 calendar year? Yes No

Can special diets be accommodated when based on a youth's religious practices or beliefs? Yes No

Was the facility unable to accommodate a special diet based on a youth's religious practices or beliefs during the 2014 calendar year? Yes No

SECTION D: COMMUNICATION

D.1 Staff-Youth Communication

Are youth provided opportunities to communicate with staff in writing? Yes No

Are youth provided opportunities to communicate with staff verbally? Yes No

Are communication aids (translators, hearing aids, etc.) provided when necessary? Yes No

D.2 Interpersonal Communication/Diversity Training

Do Probation staff members participate in training to provide them with the skills to communicate with youth in a developmentally appropriate manner? Yes No

List types of diversity training attended by Probation staff members: Safe Crisis Management, Embracing Diversity Encouraging Respect, Sexual Harassment, Integrated Behavioral Intervention Strategies. (Note: these are all mandatory trainings.)

D.3 Grievances

Is there a formal grievance policy? Yes No

Are written grievances reviewed daily? Yes No

Are grievances tracked in some manner that would permit facility leaders to observe trends in grievance report? Yes No

Is there a method for youth to be able to express concerns about the facility to a Probation Department official who is not assigned to the facility? Yes No

Are youth made aware on a routine basis that they can express concerns about their detention to their attorneys? Yes No

Is there a formal grievance process available for parents? Yes No

If yes, how many parents have submitted grievances in 2013? 0

If yes, how many parents have submitted grievances in 2014? 0

SECTION E: SAFETY AND SANITATION

E.1 Fire Safety

Do facility leaders have specific concerns about fire safety? Yes No

E.2 Non-Hazardous Furnishings

Are mattresses and bedding fire-resistant and non-toxic? Yes No

E.3 Control of Dangerous Materials

Are dangerous materials (toxins, biohazards, etc.) stored on site? Yes No

E.4. Environmental Control

Does the facility appear clean and sanitary? Yes No

Does the facility appear appropriately ventilated? Yes No

On the day of inspection, did the facility's temperature seem appropriate for the season and weather? Yes No

E.5 Clothing and Bedding

Are additional blankets available on request? Yes No

How often is bedding laundered? Sheets weekly, blankets monthly

How often are youth given clean clothes? Daily

E.6 Personal Hygiene/Showers

How frequently must youth shower?

Showers per week: 7

Minutes per shower: 5-6

Girls are allowed to have personal hygiene products, or have them provided to them. Staff monitor all use of these products.

E.7 Physical Facility and Equipment

Does this facility have a court holding area? Yes No

If yes, is there access to water and a toilet? Yes No

SECTION F: SERVICES AND PROGRAMS

F.1 Classification, Review, and Housing

Are youth assessed upon intake to determine appropriate classification? Yes No

Do facility leaders conduct adequate re-classification reviews periodically? Yes No

Girls are classified by a level system where they can move up or down based on behavior.

F.2 Religious Practices

Are youth religious services offered in the facility? Yes No

If yes, list the religious/faith traditions for which services are offered: Catholic and Protestant, others upon request.

Are religious services offered in a language other than English? Yes No

If yes, list the languages in which services are offered: _____

Are youth offered religious or faith-based counseling services? Yes No

Are youth permitted to keep religious texts in their sleeping rooms? Yes No

F.3 Work Assignments

Are sentenced youth in the facility permitted to work or perform chores on a *voluntary* basis? Yes No

All girls in the program perform chores on a voluntary basis.

Are unsentenced youth in the facility permitted to work or perform chores on a *voluntary* basis? N/A Yes No

Are sentenced youth in the facility *required* to work or perform chores? Yes No

Are unsentenced youth in the facility *required* to work or perform chores? N/A Yes No

F.4 Programming

For which of the following areas are formalized programs or services offered (either by probation staff members or a contractor)? Check all that apply:

Anger management classes/Counseling/Groups

- Conflict resolution skills
- Diversity/Tolerance/Human relations
- Domestic/Relationship violence education
- Family reunification planning
- Financial literacy education
- Gang awareness/Prevention/Intervention
- Health and wellness education
- Parenting education
- Sexual health education
- Social/interpersonal skills
- Substance abuse counseling
- Survivors of abuse/maltreatment/violence counseling
- Victim awareness
- Vocational training
- Other: Human Trafficking/Commercially Sexually Exploited of Children
- Other: Medical and Mental Health issues, Horticulture Therapy

F.5 Exercise and Out-of-Sleeping Room Opportunities

Are youth given opportunities for physical recreation/exercise? Yes No

If yes, how many hours per day? 2 hours

Is participation in physical recreation/exercise required? Yes No

Are youth given opportunities for other types of recreation outside of their sleep rooms (play games, watching movies, etc.)? Yes No

If yes, how many hours per day? Three hours on school days, five hours on weekends and holidays.

F.6 Access to Legal Services

Are youth permitted to have reasonable contact with their attorneys? Yes No

Has an attorney in in the 2014 calendar year complained that they were not able to communicate with a youth/client? Yes No

Has a parent complained in the 2014 calendar year that their son or daughter was denied access to his or her attorney? Yes No

F.7 Telephone Access

Are youth permitted to use the telephone to contact parents/guardians? Yes No

Are youth permitted to use the telephone to contact anyone other than parents/guardians and attorneys? Yes No

If no above, are youth permitted to use the telephone to contact other close family members under special circumstances (such as upon the recommendation of a counselor or therapist)? Yes No

Are telephone calls monitored? Yes No

Are telephone calls recorded? Yes No

Has a parent/guardian complained in the 2014 calendar year that their son or daughter was denied reasonable access to the telephone? Yes No

F.8 Visitation Privileges

What are the visitation hours for this facility? Thursdays 6-8pm, Sundays 9-11am

Who may visit youth? Check all that apply:

Parents/Legal guardians

Adult siblings

Minor siblings

Other: Court ordered, Special Circumstances, Baby Visits

Is there ample space in the facility for visitation? Yes No

Are youth permitted to have private conversations with visitors? Yes No

Do probation staff members supervise visits? Yes No

Has there been an instance in the 2014 calendar year of a visitor bringing contraband into the facility? Yes No

Has there been an instance in the 2014 calendar year of a visitor threatening a youth or staff member? Yes No

List the primary reasons why family members do not visit youth: transportation issues, child care issues, work hours conflict with visiting hours (exceptions may be made for this).

F.9 Detainee Mail and Correspondence

Are youth permitted to receive mail? Yes No

Are youth permitted to send mail? Yes No

Is postage free? Yes No

Is mail screened for contraband? Yes No

Does a staff member read mail addressed to a youth? Yes No

SECTION G: HEALTH CARE

Medical Staffing:	# Filled	# Open	Contractor (Y/N)
Physician	1	0	yes
Physician's Assistant	1	0	yes
Registered Nurse	5	0	yes
Licensed Vocational Nurse	12	0	yes
Nurse Practitioner	1	0	yes
Emergency Medical Tech	0	0	NA

G.1 Intake Health Screening

Which of the following health screenings are conducted upon intake? Check all that apply:

- Medical
- Dental
- Vision
- Mental health/Psychological
- Sexually transmitted infections
- Pregnancy tests (if females are held in the facility)
- Other: _____

G.2 Medical, Dental, and Mental Health Appraisals

Which of the following complete health appraisals are conducted within 14 days of admission to the facility? Check all that apply.

- Medical (Complete history and physical)
- Dental
- Vision
- Mental health/Psychological
- Sexually transmitted infections
- Pregnancy tests (if females are held in the facility)
- Other: _____

G.3 Access to Routine, Chronic, and Emergency Health Services

Is there a procedure in place for youth to request medical services? Yes No

Is there a procedure in place for youth to request dental services? Yes No

Is there a procedure in place for youth to request mental services? Yes No

Are probation staff members permitted to refer youth for medical treatment? Yes No

Are probation staff members permitted to refer youth for mental health services? Yes No

Who makes the determination whether or not a minor is seen after a sick call slip is turned in?

Every youth is seen according to triage of urgency.

Of a random sample of 50 sick call slips, how many were responded to and in how many hours?
All within eight hours

Are reasonable arrangements made to permit youth to see their personal or family healthcare providers? Yes No

G.4 Experimental Research

Are youth permitted to be subjects of any of the following types of research? Check all that apply:

- Behavioral/Psychological

- Biomedical
- Cosmetic
- Pharmaceutical
- Other: _____

Do youth consent to participation in research? N/A Yes No

Do parents consent to participation in research? N/A Yes No

Describe any research studies in which youth in the facility participated in the 2014 calendar year.

Research at GRF currently includes an NIH/NICHD funded efficacy and effectiveness trial of Seeking Safety, a concurrent PTSD and substance use cognitive behavioral intervention, relative to treatment as usual.

1. Research projects are assessed on a case by case basis by the San Diego County Probation Department, sometimes in conjunction with the Juvenile Court. The specifics of each approved project vary (e.g., who is responsible for the research--i.e., the Principal Investigator, specific approvals sought, regulatory agencies involved, training required or provided etc.) and depend, in part, on whether the research involves only archival data or collaborative data analysis conducted in conjunction with the Probation Department research office versus data collected directly from minors in custody at Probation run facilities or minors who are Wards of the Court but living in the community.
2. An ongoing inter-disciplinary research program led by Dr. Amy E. Lansing and funded by the National Institute of Health (e.g., National Institute of Child & Human Development, National Center on Minority Health & Health Disparities), NIH-supported organizations within the University of California, San Diego system (e.g., UCSD's Clinical & Translational Research Institute, UCSD's Comprehensive Research Center in Health Disparities) and UCSD organizations (e.g., Academic Senate) utilize the following criteria to protect youth who participate in their research as well as UCSD staff:
 - a) Juvenile Court applications are submitted to request access to Wards of the State. After review, any needed modifications, and approval, a Juvenile Court Order provides access to youth in Probation facilities and/or monitored by the Probation Department.
 - b) Project requests are made to the San Diego County Chief Probation Officer and appropriate Deputy Chiefs (e.g., Deputy Chief of Institutional Services for research occurring on site at Probation Department facilities). Probation Department approval is sought for each research project.
 - c) The Institutional Review Board (IRB) at the University of California, San Diego (and IRBs at any collaborating institutions such as Yale University, San Diego State University) must first approve any research project before it begins. The IRB always consists of a Prisoner Representative, as well as other members with specific expertise relevant to each reviewed project (e.g., Developmental Psychologist, Neuropsychologist, Radiologist, Pediatrician, Neurologist etc.). See <https://irb.ucsd.edu/3.7.pdf>
 - d) After UCSD IRB approval is obtained, the research protocol and all consent and assent forms are sent to the California Department of Health and Human Services for review related to Subpart C regulations (43 FR 53655; Additional DHHS Protections Pertaining to Biomedical and Behavioral Research Involving Prisoners as Subjects). Research involving incarcerated youth may only begin after this additional approval is obtained. See <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html#subpartc>
 - e) All youth participants voluntarily assent (13-17 year olds) or consent (18 year olds), following ethical standards and using language geared toward adolescents. A hierarchy of specific questions are asked of the youth even after assent/consent is obtained, to confirm that the youth does understand what participation in the study means.
 - f) Parental Consent is sought for minors and neutral Participant Advocates facilitate youth and/or parental consent.

- g) Consent/Assent (answering questions, reviewing right to withdraw from the study at any time etc.) is an ongoing process during participation.
- h) A Federal Certificate of Confidentiality is obtained for each research project and protects collected data. See <http://grants.nih.gov/grants/policy/coc/>
- i) UCSD Youth Study staff who have contact with the youth and/or collect archival data at Probation run facilities, each go through:
 - i. UCSD's background check for Staff (non-salaried/non-staff students go through Probation's background check, see ii below) San Diego County Probation Department's Volunteers in Probation process (See VIP details at: http://www.sdcounty.ca.gov/probation/volunteer_opportunities.html) which includes submitting a personal application, being cleared after a County health appointment, providing finger print records, and completing a background check and clearance.
 - ii. Collaborative Institutional Training Initiative for human subjects' protections training. See <https://www.citiprogram.org/aboutus.asp?language=english>
 - iii. Basic training related to the Prison Rape Elimination Act (e.g., assessing and detecting sexual abuse and assault) and mandated reporting criteria under a Federal Certificate of Confidentiality.
 - iv. Safety orientations specific to requirements at each site (e.g., Girls Rehabilitation Facility).
 - v. Assessing mental health issues (e.g., suicidality, homicidal ideation, non-suicidal self-injury etc.) and/or protection of information (HIPAA, see <https://www.privacyrights.org/content/health-privacy-hipaa-basics>) relevant to that staff member's contact with youth and/or archival data.
- j) UCSD Youth Studies Principal Investigator Contact Information: Amy Lansing, phone: 858 534 5557, email: alansing@ucsd.edu.

G.5 Response to Medical, Mental, and Dental Health needs

Does the facility have adequate staff to respond to the medical needs of the youth in the facility?

Yes No

Does the facility have adequate staff to respond to the mental health needs of the youth in the facility?

Yes No

Does the facility have adequate medical equipment to respond to the medical needs of the youth in the facility?

Yes No

Does the facility have adequate clinic space and treatment rooms to respond to the medical needs of the youth in the facility?

Yes No

On average, how long does it take for clinic staff to respond to a sick call slip? 72 hours per contract, most are answered in less than eight hours.

On average, how long does it take for clinic staff to respond to an emergency? Within minutes.

On average, how long does it take for clinic staff respond to a request for an inhaler? Within minutes

While there is always a possibility of malingering, this is not usually an issue. If there is a problem, it is dealt with by the nursing staff.

G.6 Suicide Prevention

Is there a written suicide prevention plan in place?

Yes No

Have there been any instances in the 2013 calendar year where the written plan was not followed in response to a youth at risk of suicide?

N/A Yes No

Have there been any instances in the 2014 calendar year where the written plan was not followed in response to a youth at risk of suicide? N/A Yes No

G.7 Intoxicated Minors:

Does the facility have written procedures for the handling of minors under the influence of any intoxicating substances? N/A Yes No

Are medical clearances obtained prior to booking any minor who displays outward signs of intoxication or is known or suspected to have ingested any substance that could result in a medical emergency? N/A Yes No

Who provides medical clearance for these minors? The Clinic or Children's Hospital for Juvenile Hall prior to a youth being transferred to GRF.

Did the facility detain any minors determined to be under the influence of an intoxicating substance? N/A Yes No

If yes:

Was medical clearance obtained? Yes No

Were these detentions documented? Yes No

Were there documented safety checks at least once every 15 minutes? Yes No

G.8 Hunger Strikes

Is there a written plan that describes the appropriate response to a youth who engages in a hunger strike? Yes No

Have there been any instances in the 2013 calendar year where the written plan was not followed in response to a youth on a hunger strike? Yes No

Have there been any instances in the 2014 calendar year where the written plan was not followed in response to a youth on a hunger strike? Yes No

G.9 Death

Is there a written plan that describes the response to a youth's death in the facility? Yes No

Have there been any instances in the 2013 calendar year where the written plan was not followed in response to the death of a youth? Yes No

Have there been any instances in the 2014 calendar year where the written plan was not followed in response to the death of a youth? Yes No

G.10 Informed Consent/Involuntary Treatment

Is informed consent obtained, when appropriate, prior to the delivery of care? Yes No

Are youth fully explained the nature of the care they receive and the side effects or complications that may occur as a result of treatment or medications? Yes No

G.11 Infectious Disease

Is there an infection control program that aims to ensure that safety of youth, staff, and visitors?

Yes No

SECTION H: EDUCATION

School Staffing:	#Filled	# Open	SDCOE/JCCS? (Y/N)
Credentialed Teachers Total	2	0	yes
Credential Special Education Teachers Total	1	0	yes
Teachers' Aides	1	0	yes
Paid Tutors	0	0	NA
Volunteer Tutors	6	0	VIP
Other			

H.1 School Capacity/Attendance

How many youth are attending school? All youth attend school.

Estimate the average grade level of youth participating in school in the facility: 9-10

Estimate the average age of youth participating in school in the facility: 16

All girls participate in the school program. At this time, one is preparing to graduate. The school program is Common Core A-G courses. There are 54 classes in Odyssey and the girls are now able to do the Plato program.

Is there adequate classroom space for the number of youth attending school?

Yes No

H.2 Supplies

Are there an adequate number of textbooks?

Yes No

Are the textbooks available up-to-date and consistent with educational standards in the State of California?

Yes No

Are there adequate school supplies (pens, pencils, paper, etc.)?

Yes No

Are there a sufficient number of computers available for teachers and school staff to use?

Yes No

Are there computers available for youth to use?

Yes No

If yes, are youth supervised while using the computers?

Yes No

H.3 High School Programs/GED

Do youth have the opportunity to receive high school credits that can be transferred to their home school districts?

Yes No

Are records from previous schools available to facility school staff?

Yes No

Are youth given an opportunity to take the California High School Exit Examination (CAHSEE) when appropriate? Yes No

H.4 Post-High School/GED

Are there educational opportunities available for youth you have completed high school or their GED? Yes No

Are youth given information and counseling regarding community college and four-year college options? Yes No

Are youth given information and counseling regarding financial aid options for college? Yes No

Are youth given resources for college entrance exam preparation when appropriate? Yes No

Are youth able to take courses for college credit online? Yes No

Do youth in the facility take military readiness testing? Yes No

If yes, are they required to do so? N/A Yes No

H.5 Vocational Programs/ROP

Do vocational programs and ROP opportunities have sufficient space and resources for the number of youth interest in participating? N/A Yes No

Has a youth been denied participation in one of these programs in the 2013 calendar year? N/A Yes No

Has a youth been denied participation in one of these programs in the 2014 calendar year? N/A Yes No

We were very impressed with the horticultural program provided at GRF—a Master Gardner oversees the program, and the girls have built an impressive garden area where they have grown several varieties of vegetables, herbs and berries. They have had a person come in and cook with them using the vegetables they have grown. They are currently planning and will put in a garden for the County Office of Education. Their garden has whimsy as well, providing an artistic outlet for some of the girls.

ROP is changing to CTE (Career-Technical Education) and in addition to the horticultural program they are going to provide Advance Technology-Robotics, Droning, Coding, as well as other programs on-line.

H.6 Special Education/IEP Programs

Do credentialed special education teachers participate in lesson planning and curriculum development? Yes No

How many youth in the facility have an Individualized Education Program (IEP)? 5

Are regular IEP meetings held? Yes No

Are parents notified of these meetings? Yes No

Are parents permitted to attend these meetings? Yes No

Describe the most common obstacle to IEP compliance: Delay in receiving school records, lack of parental response.

Are there sufficient resources available to accommodate youth with special education needs? Yes No

H.7 Special Programs and Activities

Describe other special programs or activities sponsored by school staff: ROP/CTE, GED prep, Book Club, Art, Special excursions (such as to the Timkin museum, and La Jolla Playhouse where they received a behind the scenes tour, as well as guest speakers such as Jim the Poet. They also participated in a USD-World Link Conference for Social Justice.

H.8 Independent Study

Are independent study options available? Yes No

H.9 Relationship with Other Stakeholders

JJC Inspection Team Comments: SDCOE's relationship with Probation is a good working relationship. They coordinate field trips and projects and provide information as requested.

SECTION I: WORKFORCE INTEGRITY

I.1 Staff Background and Reference Checks

- Do staff members have an initial background before they are hired? Yes No
- Do staff members have reference checks before they are hired? Yes No
- Do staff members meet with a psychologist before they are hired? Yes No
- Do staff members undergo drug testing before they are hired? Yes No
- Do staff members undergo periodic criminal history checks after they are employed? Yes No

I.2 Staff Training, Licensing, and Credentialing

For which of the following topics below do staff members receive training? (Check all that apply)

- Adolescent development. If yes, how often? Annually
- Appropriate relationships/boundaries with youth. If yes, how often? Annually
- Appropriate disciplinary techniques. If yes, how often? Annually
- Confidentiality. If yes, how often? Annually
- Conflict management. If yes, how often? Annually
- CPR/First Aid. If yes, how often? Every two years
- Emergency response. If yes, how often? Annually
- Ethical decision-making. If yes, how often? Every 2 years
- Inclusion methods for youth with disabilities or special needs.
If yes, how often? ISOPS/CORE, Every 2 years
- Reporting requirements for abuse, neglect, or maltreatment that occurs in the facility.
If yes, how often? Every two years
- Reporting recruitments for abuse, neglect, or maltreatment that occurred outside the facility. If yes, how often? Every two years
- Sexual harassment. If yes, how often? Every two years

- Signs of abuse or neglect. If yes, how often? Every two years
- Use of force. If yes, how often? DTAC/ two times a year
- Use of restraints. If yes, how often? DTAC, two times a year
- Other: Medical Issues in Jails, every two years.

I.3 Staff Misconduct

Are there written policies for addressing staff misconduct? Yes No

Have there been any allegations during the calendar year of a staff member physically assaulting a youth?

- | | |
|--|--|
| <p><u>2013:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> | <p><u>2014:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> |
|--|--|

Have there been any allegations during the calendar year of staff member sexually assaulting a youth?

- | | |
|--|--|
| <p><u>2013:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> | <p><u>2014:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> |
|--|--|

Have there been any allegations during the calendar year of a staff member verbally threatening a youth?

- | | |
|--|--|
| <p><u>2013:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> | <p><u>2014:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> |
|--|--|

Have there been any allegations during the calendar year of a staff member touching a youth in any inappropriate way?

- | | |
|--|--|
| <p><u>2013:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> | <p><u>2014:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> |
|--|--|

Have there been any allegations during the calendar year of a staff member commenting on the physical appearance of a youth in a manner that is outside the scope of the staff member's job duties?

- | | |
|--|--|
| <p><u>2013:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> | <p><u>2014:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors in custody</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Minors out of custody</p> |
|--|--|

Have there been any allegations during the calendar year of a staff member entering a youth's sleeping room for any reason that was outside the scope of the staff member's job duties?

2013:

- Yes No
 Yes No Minors in custody
 Yes No Minors out of custody

2014:

- Yes No
 Yes No Minors in custody
 Yes No Minors out of custody

SECTION J: BUDGET AND FISCAL CONCERNS

JJC Inspection Team Comments: No concerns noted.

SECTION K: BEHAVIORAL HEALTH

K.1 Behavioral Health Service Provision

1. When MAYSI is administered, who does initial and follow-up interpretation?

Youth complete the MAYSI-2 upon entry into Kearny Mesa Juvenile Detention Facility (KMJDF). KMJDF is the only point of entry for youth coming into the detention facilities. The MAYSI-2 is a self-administered screening tool written at the 5th grade level, completed on computer. If the youth's answers regarding suicidal ideation exceed an established threshold, a probation officer will complete a face-to-face screening with questions that specifically address suicidal ideation. If there are continued concerns, the youth is immediately placed on Suicide Watch and is closely monitored by probation.

A Probation Officer, reviews the screening reports from all completed MAYSI-2 screenings. If a youth scores in the "Warning" level on any of the 7 scales (Alcohol/Drug Use, Angry-Irritable, Depressed-Anxious, Somatic Complaints, Suicide Ideation, Traumatic Experience, and, for boys only, Thought Disturbance), the Probation Officer forwards the report to the Mental Health Resources Center clinician.

- a) Title?

Licensed Marriage and Family Therapist (MFT) employed by the Mental Health Resources Center through a County contract (part of the San Diego Unified School District). The clinician enters the data into a scoring program operated by San Diego Unified School District Mental Health Resources Center; the scoring algorithm was developed by Licensed Clinical Psychologist. If the score is within an established range indicating a need for further evaluation, the clinician goes to juvenile hall and conducts a face-to-face assessment using a structured interview.

- b) What happens to this interpretation?

The clinician makes appropriate referrals for follow-up and appropriate interventions for services both in the detention facilities and out of the detention facilities. Possible referrals include the Stabilization, Transition, Assessment, and Treatment Team (STAT-Team), psychiatric medication management, outpatient mental health services upon release from detention. For example, the Assertive Community Treatment (ACT) or Multisystemic Therapy (MST) program may be utilized. The Probation Officer Case Manager receives the recommended referrals and works to coordinate care for the youth once discharged from the detention facilities.

- c) What are the clinical credentials of person who does initial and follow-up interpretation?

The clinician is a Licensed Marriage and Family Therapist.

- d) What other mental health screening tools are used?

The California Forensic Medical Group (CFMG) conducts a face-to face medical intake that has questions pertaining to mental health and substance use. The Initial Booking and Screening Questionnaire, the Juvenile Health Appraisal, and the Juvenile Re-admission Health Appraisal include questions about suicide risk factors, substance use, trauma etc. If there are concerns regarding immediate safety, CFMG will place the youth on Suicide Watch, the youth will be closely monitored by Probation, and CFMG will initiate a more in depth mental health assessment. If there are concerns regarding mental health that are not imminent, a referral to the STAT-Team is generated.

Referrals for a STAT-Team evaluation can be generated by any individual with concerns about a youth, both in the institutions (Probation, CFMG, Education staff, etc.) and outside the institution (family, outpatient mental health providers, etc.)

2. Number of minors with psychiatric diagnoses?

In FY 13-14 the STAT Team served a total of 1,630 unduplicated clients in the 5 detention facilities. Some of the youth transfer within facilities and obtain STAT services in multiple locations. In FY 13-14, the vast majority of STAT Team clients (76.5%) had one or more identified psychiatric diagnoses; the remaining (usually those who were seen very briefly) had not been formally diagnosed.

3. Number of minors on psychotropic meds?

On 3/31/15, there were 134 youth prescribed psychotropic meds in all detention facilities; this was 28% of the total population of 470. Data by detention facility:

	Youth Prescribed Medication	Total Population	Percentage
GRF	6	20	30%

On 3/31/15, an additional 37 youth were not prescribed medication but were receiving psychiatric oversight. In FY 13-14, an average of 133 youth were prescribed psychotropic medications per month; this resulted in an average of 26% of the total population in the detention facilities per month.

In FY 13-14 a total of 746 unduplicated clients received a Medication Support service from the STAT Team which constitute 49% of the total youth served in that time frame. A psychiatric encounter may or may not lead to psychotropic medications being administered during the youth's stay in the detention facility.

4. Number of minors in individual therapy?

In FY 13-14 a total of 1441 youth, or 88.4% of the 1630 youth who received services, received an individual therapy encounter with a STAT-Team member. Individual therapy encounters vary depending on the needs of the youth and the facility where the youth resides; at KMJDF it is often short term and focused on relief of distress and symptomology, while at EMJDF and the camps it is often more in-depth and longer term

because the youth are in the facilities for longer periods of time and it is possible for clinicians to provide ongoing psychotherapy. On 3/31/15, the following are the numbers of clients at the different sites who were being provided ongoing individual therapy:

	Receiving Individual Therapy	Total Population	Percentage
GRF	16	20	80%

5. Number of minors in group therapy?

In FY 13/14, there were 157 group therapy sessions provided. Of the 1,630 unduplicated youth served that year, 381 (23.4%) received one or more group therapy services provided by STAT-Team.

At the Girls Rehabilitation Facility, the STAT-Team psychologist provides therapy groups when she identifies a specific need of the population in the institution and determines that group therapy would be the most effective modality. However, given the significant mental health needs of the youth, her focus is on seeing the girls individually. There is an ongoing NIH/NICHD funded efficacy and effectiveness inter-disciplinary research program utilizing Seeking Safety, a concurrent PTSD and substance use Cognitive Behavioral intervention, provided by UCSD to select youth. Additionally, there are contracted providers (Social Advocates for Youth and San Diego Youth Services) who provide ongoing psychoeducational and treatment oriented groups. Other community providers also provide groups focused on specific issues.

6. How often are therapy clients served per week?

The frequency of therapy is determined by clinical need. Many youth who are arrested and brought to KMJDF have immediate distress, and will be seen by a STAT-Team clinician who assesses the youth and provides the needed therapeutic interventions. Youth are offered continued services and instructed how to request services, and some decline additional mental health services; this is the case at all the institutions. Youth who have a mental illness and/or have significant behavioral dyscontrol will be seen on an ongoing basis, frequently weekly and sometimes several times a week. This occurs at both detention facilities (KMJDF, EMJDF) in addition to Girls Rehabilitation Facility, Camp Barrett, and the Juvenile Ranch Facility.

Youth who are experiencing serious difficulties in the institution, have serious mental illness, and/or may be at risk of self-harm or harm to others are provided Individualized Special Protocols. These are intervention protocols developed collaboratively that delineate specific interventions to be implemented by Probation, STAT Team, and medical clinic staff. The protocols are reviewed weekly, updated as needed, and discontinued when the youth stabilizes.

7. Number of LCSW, LMFT, or Ph.D.'s providing BH services?

See attached schedule for specific staffing assignments per institution.

The STAT Team is managed by two (2) Licensed Clinical Social Workers (LCSW) employed as Behavioral Health Program Managers. Primary staffing are as follows:

Staff assigned to **GRF** is 1 full-time Psychologist.

There are 6 Psychiatrists, working both full- and part-time, who provide consultation, medication assessments and ongoing medication management services at the 5 facilities.

8. Number of unlicensed staff providing BH services?

In addition to the licensed staff outlined in response to #7, there are 7 pre-doctoral interns providing services at the 5 juvenile detention facilities. Six of the pre-doctoral interns work an average of 40 hours per week. The seventh intern provides services solely at the JRF on a part time basis. Services total 6.5 full-time equivalents (FTE). All are under the supervision of a STAT Team licensed psychologist. Please see attached schedule for specific staffing assignments per institution.

9. Number of minors with psychiatric diagnoses served in aftercare programs?

On 3/31/15, there were 29 youth being seen in the community by a STAT-Team clinician as part of the transitional services program. All of the youth have a psychiatric diagnosis.

Institution	Number of youth in aftercare program through STAT-Team on 3/31/15
Girl's Rehabilitation Facility	2

K.2 Behavioral Health Emergency Referral Process

1. Number of referrals of minors with suicidal ideation?

When there is any suspicion (a verbalization or other indication) that a youth has suicidal ideation, the youth is placed on Suicide Watch (SW).

Youth at the Girls Rehabilitation Facility (GRF) placed on Suicide Watch are immediately transferred to KMJDF for close monitoring; thus, there are no Suicide Watch referrals to the STAT psychologist at GRF.

2. How long before a JFS/STAT member calls the institution to respond to suicidal ideation?

When probation staff or other staff member identifies a youth who has or may have suicidal ideation, the youth is placed on Suicide Watch and is under the close supervision of probation to maintain safety. When the STAT-Team is on-site, a face-to-face evaluation is immediately facilitated. After hours, an on-call STAT-Team psychiatrist is contacted to review the circumstances and determine if an immediate face-to-face evaluation is indicated. This can occur via a transfer to the Emergency Screening Unit or through the on-call psychiatrist. Only licensed staff evaluate youth on Suicide Watch.

3. What percentage of those calls result in JFS/STAT member physically seeing the youth?

All youth placed on Suicide Watch are physically seen by a licensed STAT-Team clinician unless the youth had imminent needs and was transferred to the Emergency Screening Unit. STAT-Team and Probation policies are that only a licensed STAT-Team clinician can discontinue Suicide Watch.

4. Is Behavioral Health Staff familiar with Probation's policies and procedures regarding Administrative Segregation and Room Confinement of mentally ill minors or minors with suicidal ideation?

Yes

5. Is Behavioral Health Staff familiar with Probation's policies and procedures regarding Administrative Segregation and Room Confinement of mentally ill minors or minors with suicidal ideation?

Yes

6. How long before a JFS/STAT member sees the youth?

Referrals are triaged with intent to provide services as soon as possible but not to exceed the established protocol.

Urgent Behavioral Health Care:

Child will be seen as soon as possible and within 24 hours by a STAT-Team Clinician. Examples of Urgent referrals include, but are not limited to, the following:

- Imminent dangerousness with symptoms of mental illness.
- Homicidal or suicidal ideation/behavior.

Urgent Medical Care:

Child will be seen by a STAT psychiatrist or psychiatric nurse as soon as possible but no later than twenty-four (24) hours. Examples of medically urgent referrals include, but are not limited to, the following:

- Admission to Juvenile Hall on medications that should not be discontinued suddenly.

Priority Care:

Child will be seen as soon as possible but within one (1) week. Examples of Priority cases include, but are not limited to, the following:

- Youth with a history of having been prescribed psychotropic medication who has recently been non-compliant with medication will be seen within one (1) week if there is a history of rapid decompensation when without medication.

Routine Care:

Child will be seen as soon as possible and as time permits. Examples of Routine cases include, but are not limited to, the following:

- Mild psychiatric symptoms.

7. What are the specific criteria used to determine if "eyes on" happens (what factors determine that they physically see the minor)?

See item 6.

8. What percentage of those calls result in a medication being prescribed and how long before a psychiatrist comes in to review the medication impact?

When a youth is prescribed a psychotropic medication by a STAT-Team psychiatrist, the prescribing doctor determines, based on the specific medication and other factors, how soon s/he will see the youth again for medication monitoring. Follow-up is typically between one and four weeks. Data on medication utilization is captured in item 3.

9. What percentage of those calls result in Emergency Screening Unit (ESU) contact?

In FY 13-14, there were 7 youth transported to ESU for assessment which constitutes 0.43% of youth served by the STAT-Team. Some youth were transported on more than one occasion resulting in 11 total incidents where a youth was transported to ESU for assessment subsequent to an assessment by STAT-Team.

10. What percentage of those ESU contacts result in hospitalization or other transfer?

See item 11.

a) If "other" what is the "other" transfer?

See item 11.

11. What percentage of those ESU contacts result in "stabilization"?

a) Where does "stabilization" occur?

b) What percentage of "stabilizations" are not adequate?

All youth transported to ESU receive crisis intervention and crisis stabilization services. Crisis stabilization includes a therapeutic assessment completed by a team of child and adolescent psychiatrists and licensed mental health professionals. The goals of crisis stabilization are to avert hospitalization or re-hospitalization, provide normative environments with a high assurance of safety and security for crisis intervention, stabilize individuals in psychiatric crisis, and mobilize the resources of the community support system, family members, and others for ongoing maintenance, and rehabilitation.

Eighty-two percent (9 out of 11) of ESU contacts resulted in psychiatric hospitalization. The remaining eighteen percent (2 of 11) were returned to the juvenile detention facility after having received crisis stabilization services which allowed for stabilization and prevented the need for psychiatric hospitalization.

12. How long does JFS/STAT team follow each youth with suicidal ideation and what determines the number of continued contacts?

Youth who are on Suicide Watch are seen daily by a STAT-Team clinician except on Sundays when a psychiatrist is available via on call status. Youth who were previously on Suicide Watch are seen as clinically indicated. Consideration is given to a youth's history, level of risk, and other factors.

K.3 Coordination of Care

1. Is Behavioral Health aware of the non-school programming available to youth in detention?

Yes. STAT-Team clinicians are aware of the non-school programming that is available to youth in the juvenile detention facilities. There are a variety of programs offered by community based agencies and volunteers to youth in detention.

a) Does BHS work with Probation to ensure that any such programming is appropriate for youth in detention, given the fact that many such youth have experienced trauma?

Yes. The STAT-Team, in conjunction with Probation, have regularly scheduled Multi-Disciplinary Teams which identify the mental health needs of the youth in detention and are a conduit for making recommendations regarding what programming may be appropriate for a given youth. MDTs have been in operation at the Girl's Rehabilitation Facility (GRF) and the Juvenile Ranch Facility (JRF) for some time. KMJDF commenced these MDTs on 4/15/15 and start dates are pending for MDTs at EMJDF and Camp Barrett.

b) If not, who makes this determination?

N/A

- c) Does BHS ensure that program providers have appropriate training in the areas of trauma and cultural sensitivity?

Yes. STAT-Team members receive routine training in trauma informed care and cultural sensitivity. Any program provider that is under contract with Behavioral Health Services (BHS) have training requirements in these areas that must be satisfied as part of their contractual agreement with BHS. Some examples of these trainings include: Gender Responsive Services for Men and Boys; Trauma Informed Care; Family Stress; Lesbian, Gay, Bi-sexual and Transgendered Communities; Various trainings regarding diversity in ethnic communities, such as African Americans, Latino's, the Pan Asian Communities, and Somali and Iraqi Refugee issues.

- d) If not, who does?

N/A

2. Does BHS or any other agency, evaluate the programming provided to make sure that such programming is appropriate, is available to all youth, and is the best use of the youth's time?

Yes. BHS is available on a consultation basis and works collaboratively with the probation team. In addition to the STAT-Team, Probation has clinical expertise on their team.

3. How often does BH staff review CIR's for each facility?

STAT Team and BHS are not involved in reviewing CIR's that are internal to the Probation Department or any other provider at the Juvenile facilities.

What is the format for this review and what actions are taken based on the information in CIR's?

N/A

4. If a minor enters custody with a mental health history, how is this information shared with all departments including BH, Education, Probation, and Nursing?

During the intake process youth are screened by Probation, through the use of the MAYSI-2, and by CFMG. Any youth with a reported mental health history or current medications identified by Probation and/or CFMG are referred to the STAT-Team for triage, evaluation and continued care. The STAT Team utilizes an electronic health record (Anasazi) where mental health history is captured for individuals served through the public behavioral health system through the County. The Multi-Disciplinary Teams are utilized for cross system information sharing to best serve minors.

STAT-Team Schedules

Name	Main Site	Days	Hours	Office#	Cell Phone#
AW, LCSW	KM	Monday & Thursday Wednesday	08:00 am - 02:00 pm 08:00 am - 03:00 pm		
CN, Ph.D.	JRF/Campo	Monday, Tuesday, Wednesday &	07:00 am - 05:30 pm		
CE, LCSW	Juvenile Prob.	Monday thru Friday	Varied		
CL, LCSW	KM	Monday thru Friday	08:00am- 05:00 pm		
CU, LMFT	KM	Tuesday, Wednesday, Thursday &	07:00 am - 05:30 pm		
	EM	Tuesday	08:00am- 12:00 pm		
DS, LCSW	KM	Monday thru Friday	08:00 am - 04:30 pm		
	EM KM	Wednesday	08:00 am - 07:00 pm		
EA, MD		Monday, Friday & Saturday	08:00 am - 07:00 pm		
ED, LMFT	EM	Monday	08:30 am - 05:00 pm		
		Tuesday	08:00 am - 05:30 pm		
		Wednesday & Thursday	07:00 am - 02:30 pm		
		Friday	07:00 am - 04:30 pm		
GO, Ph.D.	EM	Monday, Tues, Wed, Thurs, & Friday	08:00 am - 04:30pm		
FE, LCSW	Camino del Rio	Monday thru Friday	Varied		
	Camp Barrett	Monday, Tuesday & Friday	07:30 am - 06:00 pm		
HS, Ph.D.	KM	Thursday	07:30 am - 06:00 pm		
	EM KM	Friday Saturday Monday Monday	12:30 pm- 10:00 pm		
JG, MD		Wednesday	03:00 pm - 09:00 pm		
			09:00 am - 12:00 pm		
			03:00 pm - 09:00 pm		
			04:00 pm - 10:00 pm		
	KM	Tuesday, Wednesday & Thursday	08:00 am - 04:30 pm		
KS, LMFT		Friday	08:00 am - 02:00 pm		
	EM	Monday	02:00 pm - 07:30 pm		
		Tuesday	08:00 am - 05:30 pm		
KS, Ph.D.		Friday	08:00 am - 02:30 pm		
		Monday	07:30 am - 02:30 pm		
		Tuesday & Thursday	07:30 am - 03:00 pm		
LH, Ph.D.		Wednesday	07:30am- 01:30 pm		
		Friday	08:00 am - 12:00pm		
	KM	Tuesday & Friday	09:30 am - 08:00 pm		
MM, LMFT	EM	Wednesday & Thursday	09:30 am - 08:00 pm		
MP, LMFT	EM	Monday thru Friday	08:30 am - 05:00 pm		
ML, MD	KM	Wednesday	08:00 am - 06:00 pm		
	ESU	Tuesday & Thursday	08:00 am - 06:00 pm		

	KM	Monday & Friday	09:00 am - 01:30 pm		
MS, Ph.D.	North County	Tuesday & Wednesday	09:00 am - 05:30 pm		
MT, MD	KM & GRF	Thursday	08:30 am - 03:00 pm		
	EM	Monday & Tuesday	08:00 am - 06:30 pm		
RK, MD	KM	Tuesday	09:00 am - 07:30 pm		
RS, Psy.D.	KM	Thursday & Friday	09:00 am - 07:30 pm		
	KM	Monday thru Friday	07:30 am - 04:30 pm		
SB, Ph.D.	KM	Monday, Wednesday, Friday	10:00 am - 06:30 pm		
TS, RN	EM	Tuesday & Thursday	08:30 am - 05:00 pm		
TR, Ph.D.	GRF	Monday, Tuesday, Thursday & Friday	08:30 am - 07:00 pm		
VP, RN	GRF	Monday, Tues, Wed, Thursday & Friday	08:00 am - 05:00 pm		
	KM	Monday, Tuesday, Wednesday, &	07:00 am - 05:30 pm		

2014-2015 Intern Site Schedule Days & Hours 4/17/2015

Name	Monday	Tuesday	Wednesday	Thursday	Friday
OG	KM 7:30am-4:00pm≠	KM 7:30am-4:00pm≠	KM 7:00am-3:30pm≠	KM 7:30am-4:00pm≠	KM 7:30am-4:00pm≠
KG	Campo 10 hrs/var. sched	Campo 10 hrs/var. sched	Campo 10 hrs/var. sched	Campo 10 hrs/var. sched	Off
JH	EM 8:30am-5:00pm*	KM 8:00am-5:00pm	EM 8:30am-5:00pm*	KM 8:00am-5:00pm	KM 8:00am-5:00pm
ZK	Campo 9:00am-7:00pm	KM (for Group) 9:00am-11:00am	Campo 10 hrs/var. sched	Campo 10 hrs/var. sched	Off
HM	Campo 9:00am-7:00pm	Campo (KM Group) 9:00am-7:00pm	Campo 9:00am-7:00pm	Campo 8:30am-7:00pm	Off
AS	EM 8:30am-5:00pm*	KM 8:00am-5:00pm	EM 8:30am-5:00pm*	KM 8:00am-5:00pm*	KM 8:00am-5:00pm
KT	Barrett 9:00am-5:00pm	EM (KM for Group) 9:00am-4:30pm	EM 8:30am-5:00pm *	EM 8:30am-5:00pm*	Barrett 9:00am-5:00pm

* Planning to stay later if licensed staff is present

≠ Coming in early is contingent on presence of licensed staff