



Bernalillo County Youth Services Center  
JDAI Facility Self- Inspection Standards  
Findings and Recommendations  
June 26, 27, and 28, 2012



Bernalillo County Youth Service Center

## JDAI Self-Inspection Interim Report 2012

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## **Introduction**

This report documents the findings of an intensive self-inspection of the Bernalillo County Youth Services Center (BCYSC) which was conducted June 26, 27, and 28, 2012. This inspection was commissioned by the facility Director, pursuant to the facility's collaborative participation as a nationally designated site implementing the Juvenile Detention Alternatives Initiative (JDAI) in New Mexico.

This is the third JDAI facility self-inspection for the BCYSC and the second dual inspection incorporating JDAI and the Children Youth and Families Department (CYFD) of New Mexico Juvenile Detention Certification process. Both are similar in protecting the rights of our incarcerated youth as well as promoting programming and alternative initiatives in an attempt to reduce the recidivism rate amongst our youth.

As the Bernalillo County JDAI self-inspection was being conducted and findings documented in this interim report, the Youth Services Center experienced turnover in its top administrative positions. The work on the report was delayed by over six months as the new administrators oriented themselves to their positions.

Previously the oversight for conducting and carrying out the corrective action plan has been the responsibility of the Assistant Director of Operations for the facility. The new administrators decided to minimize the perception of conflict of interest by reassigning the responsibility for conducting the self-inspection and carrying out the corrective action plan to the JDAI Model Site Coordinator. Timelines for completion of the corrective action plan have been readjusted and a final report will be issued at the end of December, 2013.

## **JDAI Values**

JDAI embraces the philosophy that court-involved youth should be served in the least restrictive environment possible: in their own homes, schools and communities whenever appropriate and possible. When secure detention is necessary to protect public safety, JDAI works to ensure that conditions of confinement meet all Constitutional standards, case law requirements and professional best practices.

JDAI is a methodology that creates fairer, more efficient and more effective juvenile justice systems by ensuring that the right youth is served in the right place with the right services. Ultimately, it results in re-directing public funds away from expensive secure detention beds, and



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towards alternatives to secure detention which are less costly and more effective in reducing juvenile crime while protecting the community.

### **The Core Strategies of JDAI**

There are eight core strategies each JDAI site commits to implement:

1. Interagency collaboration to improve problem solving and coordination.
2. Reliance on accurate data to guide program and policy.
3. Use of objective instruments to guide detention admissions decisions.
4. Increased or enhanced community-based alternatives to secure detention.
5. Expedited case processing to reduce lengths of stay and speed case resolutions.
6. Innovations to reduce the use of secure detention for probation violations, warrants and cases in which youth are awaiting placement.
7. Use of best practices to reduce racial disparities in the detention population.
8. Routine facility inspections to improve conditions of confinement. Detention Self-Inspection

It is the eighth JDAI strategy (above) which is the basis for the detention self-inspection undertaken by the BCYSC. The purpose of the self-inspection process is to help ensure the safe and humane conditions for detained youth by thorough assessment of the physical plant and detention programming.

The evaluation is conducted using standards, guidelines and an inspection instrument developed specifically for JDAI sites by the Youth Law Center. Some of the standards included in the self-inspection are based on Constitutional guarantees, statutes, and evolving case law. Other standards are derived from current best professional practices aimed at protecting the health, safety and legal rights of detainees. In all, there are 308 standards grouped under eight general categories:

- classification
- health care
- access issues



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- programming
- training and supervision of employees
- environmental issues
- restraints, punishment and due process
- safety

Based on their evaluation, the self-inspection team then offers comments and corrective suggestions for the officials responsible for administering detention. The process is intended to be open, constructive and ultimately of valuable assistance to detention administrators as well as of direct benefit to detained youth.

The detention evaluation is called “self-inspection” because it is generated from within the juvenile justice system, not because it is conducted exclusively by people from within the facility.

### **The Team**

BCYSC’s JDAI project began assembling the self-inspection team in February 2012. The team included people who work within the detention facility as well as professionals from outside the facility.

The self-inspection team consisted of:

#### (Community Professionals)

- Arthur Murphy, Loss Prevention Specialist, NM Association of Counties
- Zoila Zapien, Sergeant, Luna County Juvenile Detention Center
- Leslie Pacheco, LISW, Region 3 Clinical Supervisor, Juvenile Probation Office
- Leonel Urdenetta, MD, Regional Psychiatry Director, Corizon
- Kelly Jo Parker, Juvenile Probation Officer Supervisor, Juvenile Probation Office Court Unit
- Monica Roybal, Deputy Court Administrator, Juvenile Justice Center, 2nd Judicial Court
- Rafael Martinez, Director-Student Support, ACE Leadership High School
- Patti Vowel, State JDAI Coordinator, Children Youth and Families Department Juvenile Justice
- Danny Martinez, Staff Manager, Children Youth and Families Department Juvenile Justice



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- Michelle Rael, Continuum Coordinator, Sandoval County Juvenile Justice Board
- Liyen Jong, Loss Prevention Manager, Bernalillo County Risk Management
- Diane Speakman, Deputy Fire Marshall, Bernalillo County Fire and Rescue Department
- Grace Phillips, Attorney, NM Association of Counties

(Facility Professionals)

- Craig Sparks, Director
- Chris Sanchez, Assistant Director of Operations
- Mark Saiz, Food Services Manager
- Eleanor Molina, Training Manager
- Eveline Zamora, Quality Assurance
- Mark Portillos, Intake Program Manager
- Cookie Norris, Program Manager
- Jason Salazar, Program Manager
- Eddie Baca, Special Projects Coordinator

The team was supported by an in-house work group co-led by Craig Sparks, Director, Chris Sanchez, Assistant Director of Operations, and Danny Martinez, Staff Manager CYFD. This team worked intensively to pull together and organize all necessary documentation, including relevant policies and procedures, logs, and forms which related to each of the 308 standards contained in the self-inspection requirements.



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## **The Process**

The Facility Self-inspection team for the BCYSC site participated in a two-day training session provided by Craig Sparks and Chris Sanchez regarding the auditing process, use of the JDAI Standard Instrument, usage of the JDAI Audit Tool and interpretation of policies and procedures.

The file preparation began in May of 2012. Because the BCYSC has been accredited by the American Correctional Association (ACA) for approximately 20 years, the files were prepared in the format following the ACA process for review of documentation in accordance with the established JDAI Facility Self-Inspection Standards.

The BCYSC self-inspection team met between the dates of June 8-15, 2012. At these meetings, the teams were trained on observation and interview techniques as outlined by the JDAI Self-Inspection standards. Further, a self-inspection agenda was discussed and agreed-upon in regards to conducting the formal facility self-inspection.

Finally, self-inspection team leaders met discussed and finalized team assignments for their respective sections. Also, a staff and resident town-hall meeting was conducted to inform facility personnel and residents about the process the facility was undertaking regarding the JDAI Facility Self-Inspection.

Detention administration provided the self-inspection teams with a private conference room and meeting space. Documentation and other supplies were made available in the conference room so team members could study the written materials as their schedules permitted. The team had unlimited access to the detention area, either as a group or as individuals, any time of the day or night.



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On June 26, 2012 Mr. Sparks and Mr. Sanchez kicked off the official start of the facility self-inspection by greeting all the inspection team members, provided a brief overview of the goals and objectives for the inspection and thanked everyone in advance for dedicating their time and efforts in assisting the facility through this process. Immediately following the introduction, Mr. Sanchez reviewed the three-day facility self-inspection agenda and provided each team with their respective JDAI section files for review.

Before conducting the documentation and policy and procedure review, a comprehensive tour of the facility was provided to the self-inspection team members. After the completion of the facility tour, team leaders assembled their team members and began a detailed inspection of the section files.

On June 27, and 28, 2012, evaluation of each standard was conducted through a combination of review of relevant policy and/or other documentation, observation by the team and interviews of staff and residents in accordance with their assigned JDAI Facility Self-Inspection Sections and New Mexico Juvenile Detention facility standards.

Prior to interviewing youth and staff, the team agreed on a protocol for how to introduce themselves and explain their purpose to ensure consistency in how they were perceived by youth and staff. The team explained they were an independent evaluation team, looking at detention programming and the facility in order to ensure the best possible services for detained youth. They assured staff and youth that their shared opinions and experiences were of great help in this effort. They also stated to youth that their privacy would be respected and all of their comments would be anonymous, except if they shared something which would invoke mandatory reporting, for example, reports of abuse or other crimes. On June 28, 2012, an out-briefing was conducted by each team leader with their team's representative regarding their findings, observations and interviews related to their JDAI Facility Self-Inspection Sections.

### **Findings and Recommendations**

The team's findings and recommendations are summarized in Appendix A, JDAI Self-Inspection Instrument.

### **Summary**

Overall, the teams were very impressed with the file preparation, documentation supplied to them, professionalism, dedication and quality of care shown by facility administration, managers



and staff. They observed hard work, creativity, and sensitive, meaningful interaction with residents in a professionally operated facility.

Additionally, the teams expressed how professional and “youth-centered” the facility staff was during the inspection. Self-inspection teams applauded staff for being professional and very engaged with the youth.

Appendix A:

### **Classification System and Intake**

**Detention is a traumatic event for a young person. From the moment the youth arrives at the facility, staff need to gather information quickly, make critically important decisions, and address the young person’s emotional mental health, and physical needs. The classification section addresses these front end considerations, including criteria governing who comes into detention, housing and programmatic assignments to keep youth safe and mechanisms to reduce crowding an unnecessary detention.**

### **Specific Detention Limitations:**

**JDAI Standard: There are written limitations on lower and upper ages for detention in the facility, and in no case may a youth under the age of 12 be held in the facility.**

- **Finding:** Policy and Procedure does not explicitly state that youth under the age of 12 will not be detained; however New Mexico Children’s Code Section 32-A-10 requires that no youth under the age of 11 will be detained.
- **Recommendation:** None given.
- **YSC Response/Action Taken:**



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**JDAI Standard: The facility does not detain youth simply because the youth is undocumented.**

- **Finding:** Policy and Procedure does not explicitly state that youth will not be detained solely based on undocumented status, however, the New Mexico Children’s Code only allows a child to be detained when an alleged delinquent act has been committed. Based on this statute the BCYSC does not detain youth solely based on immigration status.
- **Recommendation:** Implement policy that states youth will not be detained solely on undocumented status.
- **YSC Response/Action Taken:**

**JDAI Standard: The facility does not detain youth with immigration hold if they have no delinquency case or charge, or if they would be released under state law.**

- **Finding:** Policy and Procedure does not explicitly state that youth will not be detained solely based on undocumented status.
- **Recommendation:** Implement policy that states youth will not be detained solely on undocumented status.
- **YSC Response/Action Taken:**

**JDAI Standard: Youth with serious medical or mental health needs, or youth who are severely intoxicated, are not admitted into the facility unless and until appropriate medical or mental health professionals clear them. Youth transferred from or cleared by outside medical or mental health facilities are admitted only if the detention center has the capacity to provide appropriate ongoing care.**

- **Finding:** Policy and Procedure does not reference intoxicated youth.
- **Recommendation:** Implement a policy that references intoxicated youth.
- **YSC Response/Action Taken:**

**JDAI Standard: Prior to the admission of the youth with disabilities (physical, visual, auditory, developmental or intellectual) the facility and its educational program document that the physical plant can accommodate the youth, and the facility’s programming can adequately address the youth’s needs. The facility has preexisting arrangements with the appropriate alternative placements to handle youth with disabilities.**



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- **Finding:** Policy and Procedure makes reference to the accommodation of youth with disabilities (reference Policy and Procedure 2.1 R.); however Policy and Procedure does not address what the process is for youth with disabilities “prior to the admission”.
- **Follow-up:** Intake and the Assistant Director of Operations will meet with YPO III’s on a quarterly basis as a means to evaluate this process.
- **YSC Response/Action Taken:**

**Intake:**

**JDAI Standard: When communicating with parents of detained youth, staff does not rely on youth to serve as interpreters.**

- **Finding:** Policy and Procedure makes reference to our access to bilingual personnel for interpretation purposes as well as the maintenance of a list available of all bilingual personnel (reference Policy and Procedure 6.1.1.4).
- **Recommendation:** Insert in the translation policy statement “A youth will not be used to translate when communication with non-English speaking parents.”
- **YSC Response/Action Taken:**

**Detention Process:**

**JDAI Standard: Staff screen youth to identify immediate individual issues, such as intoxication or injury, and collect information about the youth’s family, education status, and delinquency history.**

- **Finding:** Policy and Procedure makes reference to the screening of youth for injury and intoxication; however it does not mention the collecting of information about youth’s family, education status, and delinquency history.
- **Recommendation:** Implement a policy that states we shall collect education history upon intake.
- **YSC Response/Action Taken:**

**JDAI Standard: Rules on contraband and facility search policies.**

**Information is provided in a manner the youth can understand paying particular attention to language and literacy needs of youth. At the time of admission or shortly thereafter, youth receive a written and oral orientation to institutional rights, rules and procedures including:**

- **Finding:** Policy and Procedure was not located in reference to the search of youth for potential contraband.



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- **Recommendation:** Policy and Procedure does not clearly state what is considered contraband and should be revised.
- **YSC Response/Action Taken:**

**JDAI Standard: Policies on use of force, restraints, and isolation.**

**Information is provided in a manner the youth can understand paying particular attention to language and literacy needs of youth. At the time of admission or shortly thereafter, youth receive a written and oral orientation to institutional rights, rules and procedures including:**

- **Finding:** No information was located in the youth orientation handbook in reference to detained youth being made aware of the use of force, restraint, and isolation policies.
- **Recommendation:** Revise the Resident Orientation handbook to reflect information of the facilities use of force, restraints and isolation policies.
- **YSC Response/Action Taken:**

**JDAI Standard: Emergency procedures.**

**Information is provided in a manner the youth can understand paying particular attention to language and literacy needs of youth. At the time of admission or shortly thereafter, youth receive a written and oral orientation to institutional rights, rules and procedures including:**

- **Finding:** Policy and Procedure was not located in reference to the youth of BCYSC receiving the emergency procedures of the facility.
- **Recommendation:** During initial orientation, residents will be informed of emergency procedures.
- **YSC Response/Action Taken:**

**Classification Decisions:**

**JDAI Standard: Housing and programming decisions are made in accordance with classification policies. The facility administrator or designee regularly reviews the process and any decisions that depart from established policies.**

- **Finding:** Policy and Procedure do not address this standard.
- **Recommendation:** Develop policy and procedures to reflect the classification practice being carried out in intake.
- **YSC Response/Action Taken:**



**JDAI Standard: Separation of younger from older youth.**

- **Finding:** Policy and Procedure do not address this standard.
- **Recommendation:** The facility needs to develop a comprehensive Classification Policy and Procedure.
- **YSC Response/Action Taken:**

**JDAI Standard: Written Policy, Procedures, and actual Practices ensure that youth with disabilities receive appropriate accommodations in accordance with the Americans with Disabilities Act (ADA) and section 504 of the Rehabilitative Act of 1973.**

- **Finding:** Policy and Procedure do not address this standard.
- **Recommendation:** Incorporate language from the ADA and section 504 of the Rehabilitative Act of 1973 into YSC policy and procedure.
- **YSC Response/Action Taken:**

**JDAI Standard: Housing and programming decisions are made in accordance with written classification policies. The facility administrator or designee regularly reviews the process and any decisions that depart from established policies.**

- **Finding:** Policy and procedures do not address the standard.
- **Recommendation:** Develop policy and procedures to reflect the classification practice being carried out at intake with each youth. Also develop procedures to red-flag non-compliance to classification policy and procedures and designate facility staff to review and investigate as necessary.
- **YSC Response/Action Taken:**

**Health Care**

**Youth often come into detention with medical and mental health conditions needing prompt attention. Many youth have not received adequate health care in the community and have unrecognized health needs. Other youth have chronic medical or mental health care needs.**

**Mental Health Services:**



- **JDAI Standard:** Youth with significant mental health needs receive a professional evaluation by a qualified mental health professional and ongoing mental health services in accordance with a treatment plan. The treatment plan includes identification of mental health issues to be addressed; medication or medical course of action to be pursued; planned activities to monitor the efficacy of any medication or the possibility of side effect; A description of any behavior management plan or strategies to be undertaken; a description of any counseling or psychotherapy to be provided; a determination of whether the type of level of treatment can be provided in the detention center; a plan for monitoring the course of treatment; any necessary modifications to the standard use of force and restraint procedure; a transition plan for when the youth leaves the care of the facility.
- **Finding:** There is not a treatment plan- mental health services at BCYSC are reported to be crisis oriented and based on suicide level. Mental Health/ Behavioral Health issues are generally identified but diagnosis is not provided- biopsychological assessments done on all clients. There is a lack of groups/ interventions for mental health issues except for substance abuse which has limited groups. There is no plan for monitoring treatment. Mental Health staff does not develop a transition plan for youth, and rely on JPO.
- **Recommendation:** Review the YSC current practices and address the findings as stated.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff encourages youth who are assessed as vulnerable or at risk of self-harm to engage in appropriate activities and programs that will raise their self-esteem and reduce the risk of further self-harming behavior.**

- **Finding:** There are limited interventions available for youth assessed as vulnerable for self-harm other than individual therapy/ pet therapy.
- **Recommendation:** Review current activities and programs. Identify best practice programs that reduce the risk of self-harming behavior. Implement revised and or enhanced programs that work towards raising the self-esteem of residents
- **YSC Response/Action Taken:**

**JDAI Standard: Staffing for psychiatric care is adequate for the number and anticipated needs of youth in the facility, including regular on-site services.**

- **Finding:** Mental Health staff report the current psychiatric care is not enough to meet the needs of the population and that they have to “staff” kids to receive psychiatric care and many kids get bumped from the list due to the need to triage more serious cases.
- **Recommendation:** Review current practice to ensure adequate psychiatric care is available for youth in the facility.
- **YSC Response/Action Taken:**



**JDAI Standard: On site staffing for psychological care is adequate for the number and anticipated needs of youth in the facility.**

- **Finding:** The two clinical staff interviewed do not feel that there is adequate mental health staff to meet the needs and that they are limited on the interventions that can be provided other than “crisis oriented” and substance abuse groups. Lack of clinical supervision- the two staff who aren’t independently licensed have to pay for and get supervision outside of the facility. Consult cases with behavioral health director on as needed basis but not regular and they are not provided clinical feedback.
- **Recommendation:** Review data regarding youth needs for psychological care in the facility. Create a strategic plan to address any identified staffing needs including clinical supervision.
- **YSC Response/Action Taken:**

**JDAI Standard: On-site staffing for care by a psychiatric social worker and or psychiatric nurse is adequate for the number and anticipated needs of youth in the facility.**

- **Finding:** There is not staff with this level of expertise.
- **Recommendation:** None given
- **YSC Response/Action Taken:**

**JDAI Standard: If the facility relies on health staff who are not mental health professionals to provide any mental health service otherwise permitted by state law (e.g., screening interviews), the responsible mental health authority for the facility approves such staff, and ensure that they have received adequate training in identifying and interacting with individuals in need of mental health services .**

- **Finding:** Documentation of staff receiving MAYSI training is not centralized- lack of process of identifying residents who do not take the MAYSI seriously. Mental Health staff feel training is needed but not adequate for line staff and clinical supervision training.
- **Recommendation:** Review current practice and ensure that training is provided and a centralized process is developed as it pertains to the MAYSI.
- **YSC Response/Action Taken:**

**JDAI Standard: All staff working with youth receives training on recognition of behavioral and verbal cues indicating vulnerability to suicide, and what to do in case of suicide attempts or suicides (e.g., the use of a cut- down tool for youth hanging)**

- **Finding:** Line staff are very knowledgeable of the suicide protocols but not the behavioral or verbal cues they were unable to name.



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- **Recommendation:** Provide best practice suicide prevention training to all staff in the facility. Examples can be found on the SAMSHA website.
- **YSC Response/Action Taken:**

**JDAI Standard: Youth on suicide watch are not left naked, or clothed or housed in degrading, embarrassing, or uncomfortable garments or environments.**

- **Finding:** Youth on suicide watches are required to wear gowns and are subject to teasing from other residents. Additionally that information is documented on boards that are in the common public area on every unit that can be seen by other residents.
- **Recommendation:** None given
- **YSC Response/Action Taken:**

**JDAI Standard: Staff provide youth released from suicide watch enhanced supervision for at least two days.**

- **Finding:** There was no enhanced supervision plan in the file nor could the unit staff or clinical staff provide an example of how they have done this.
- **Recommendation:** Review current practice to ensure that an enhanced supervision plan is in place.
- **YSC Response/Action Taken:**

**JDAI Standard: Youth released from suicide watch have an individualized plane of care that is followed by mental health staff and communicated to all staff who come into contact with the youth.**

- **Finding:** No individualized plan was observed nor file and the clinical staff report that this isn't something they do.
- **Recommendation:** Review current practice to ensure that a suicide prevention plan is in place.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff promptly notify parents or guardians following any incident of suicidal behavior or self-harm.**

- **Finding:** Clinical and medical staff state that there is not a procedure for this and it is not done consistently.
- **Recommendation:** Review policy and procedure to ensure that this standard is incorporated into policy and practice of key medical and behavioral health personnel as well as administrative staff at the facility.
- **YSC Response/Action Taken:**



### **Medical, Mental Health and Dental Records:**

**JDAI Standard: Written policies, procedures, and actual practices ensure that access to confidential information is limited to those staff with a demonstrable “need to know” consistent with applicable state and federal laws. Written policies, procedures, and actual practices ensure that staff information where appropriate to provide for safety, security, health, treatment, and continuity of care for youth.**

- **Finding:** Concerns about confidential information being posted on white boards regarding clients suicide/ self-destructive/ RASA (which is assumed to be sex offender) violating confidential information.
- **Recommendation:** Review current practice to ensure confidentiality is maintained for all residents within the facility.
- **YSC Response/Action Taken:**

**JDAI Standard: There is a record for each child that includes screening forms, assessment records, findings, diagnosis, treatments, prescribed medications and records of administration, lab test records, consent for refusal forms, insurance information, discharge summaries, and reports from other health providers (e.g., dental or psychological).**

- **Finding:** Consent for mental health services was signed by client not approved by parent but client lacked mental capacity to give consent (developmentally delayed).
- **Recommendation:** Review current practice and policy to ensure safe guards are implemented for any youth deemed incapable or not having the mental capacity to give consent.
- **YSC Response/Action Taken:**

**JDAI Standard: Written policies, procedures and actual practices ensure that staff transfer medical records with youth between facilities or placements so youth receive consistent and timely medical services.**

- **Finding:** Medical records aren't transferred to other placements or facilities.
- **Recommendation:** Review current policy and practice to verify that we are in compliance with the established JDAI standard.
- **YSC Response/Action Taken:**



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**ADDITIONAL FINDINGS and SUGGESTIONS:**

Self-inspection team members reported to have found “no policies addressing Quality Assurance and Continuous Quality Improvement (CQI). Credentialing is part of this process and we found no specific policy devoted to that aspect of management”.

They also reported that they “did not find policies pertaining to the scope of practice of each service (nursing, medical, psychiatric, Mental Health) and guiding their relationships”.

**SUGGESTIONS:**

Develop a QA and CQI program with their respective policies and procedures. Peer Review and Utilization Management, very important parts of such program, require special attention.

Consider having standard forms for the medical and psychiatric evaluation and follow up of patients.

Care Management meetings should have documentation in the records of the respective patient.

Supervision should be documented with supervisory notes.



## **Environmental Issues**

**Juvenile detention facilities should not look like or be operated as jails. This section encourages facilities to provide a non-penal environment appropriate for youth who need to be held in a secure setting. It requires that the facility is clean, meets fire and safety codes, and has properly functioning temperature controls, light, ventilation and offer youth appropriate living conditions. This section also encompasses quality of life issues- assuring that youth will have clean, properly-fitting clothing; pleasant, normal eating experiences and that they may have personal items and some measure of privacy.**

### **Positive Institutional Atmosphere:**

**JDAI Standard: The buildings and grounds are well maintained.**

- **Finding:** Shed's on the south side have a large pile of wire. Units: Openings left by removing the washers and dryers. Unit C: The back area coming from the unit to the back field is covered by vegetation.
- **Recommendation:** Wire needs to be placed into either a 55 gallon drum to keep in a cleaner state then it is currently. Units: Cover the openings left by removing the washers and dryers. Unit C: The back area coming from the unit to the back field need to be cleared of all the vegetation.
- **YSC Response/Action Taken:**

### **Temperature, Ventilation, and Noise:**

**JDAI Standard: There is adequate ventilation in indoor areas.**



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- **Finding:** Warehouse air quality due to no ventilation from all the laundry supplies and the heat from the dryer.
- **Recommendation:** Request for purchase of an air conditioning unit for the warehouse area.
- **YSC Response/Action Taken:**

**Emergency Preparedness and Fire Safety:**

**JDAI Standard: The facility has fire extinguishers in appropriate locations and in working condition. Staff receive training in the use of fire extinguishers. Staff regularly check and service fire extinguishers, and document the servicing.**

- **Finding:** ABC fire extinguishers do not belong in the kitchen. Staff are not receiving fire extinguisher training as per International Fire Code (IFC).
- **Recommendation:** Replace ABC extinguishers with K fire extinguishers in the kitchen. YSC Employees shall all be instructed in the use of proper of portable fire extinguishers and other manual fire suppression equipment. Training on proper use of portable fire extinguishers for all new staff shall be provided promptly upon entrance on duty. Refresher training shall be provided annually.
- **YSC Response/Action Taken:**

**Safety**

All JDAI standards were met in this section as the inspection team noted no discrepancies and no recommendations.

**Training and Supervision of Employees**

**The quality of any facility rests heavily upon the people who work in it. This section requires that properly qualified staff is hired, and that they receive the training they need to work with troubled youth. Staff should also perform their work in an operational setting that enables them to do their work well- through appropriate staffing ratios and proper administrative supervision. The section further requires that the facility engages in ongoing quality assurance and self-improvement through documentation of serious incidents, citizen complaints, and child abuse reports.**

**Staffing:**

**JDAI Standard: The facility has adequate staff with language capacity to provide limited English proficient youth with meaningful access to programs and activities. The facility**



**keeps accurate records of staff able to speak other languages and youth with limited English proficiency.**

- **Finding:** It appears it's understood that staff are available to help with translation, but there is no list of staff kept with translating capabilities.
- **Recommendation:** Review current practice and ensure an up to date list of staff able to speak proficient in other languages for all shifts, and is readily available to all.
- **YSC Response/Action Taken:**

## **Restraints, Isolation, Due Process, and Grievances**

**Security and good order in a facility are best exercised when expectations are clear; staff is well-trained to help prevent and de-escalate crisis; and there are positive relationships between youth and staff. This section addresses what happens when those protective factors are insufficient and force, restraint, room confinement or isolation must be used. This section includes the facility's rules for discipline, provisions for due process, and discipline sanctions. Finally, this section addresses the facility response to concerns and complaints by youth through an effective grievance process.**

### **Physical Force, Mechanical and Chemical Restraints:**

**JDAI Standard: (Written policies and procedures in the facility set forth the principles below for use of force and mechanical restraints): Except for handcuffs used during transportation or facility emergencies, the only mechanical restraints that staff may use in the facility are soft or "therapeutic" restraints: fleece-lined leather, rubber, or canvas hand and leg restraints, and only with physician or mental health authorization as provided in this section.**

- **Finding:** Policy and Procedure 3.4 Use of Force & Use of Restraints does not reflect that only soft-restraints will be utilized nor does it reflect the need for authorization by medical or mental health provider/ staff.



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- **Recommendation:** Review and change current policy and procedures to ensure the correct language and practice is reflected as indicated by standard.
- **YSC Response/Action Taken:**

**JDAI Standard: (Written policies and procedures in the facility set forth the principles below for use of force and mechanical restraints): During transportation (inside or outside of the facility), staff may use handcuffs to prevent injury or escape. In the rare instances that staff need additional restraints during transportation, such as belly belts/chains or leg shackles, staff must provide particularized reasons for their use and obtain approval by the facility administrator. Staff do not use belly belts/chains on pregnant girls. Staff do not handcuff youth together during transportation, or restrain youth to the vehicle.**

- **Findings:** Policy and Procedure does not address the use of mechanical or soft restraints for youth moved within the facility. It does address the use of mechanical restraints as a routine practice during outside transports, but not as an exception.
- **Recommendation:** Review and change current policy to ensure the correct language and practice is reflected regarding use of mechanical restraints outside the facility and with pregnant girls as indicated by standard.
- **YSC Response/Action Taken:**

**JDAI Standard: (Written policies and procedures in the facility set forth the principles below for use of force and mechanical restraints): During facility emergencies, staff may use handcuffs to prevent injury or escape. Staff remove handcuffs promptly after youth is placed in his or her room, or is otherwise in a safe place. In the rare instances in which the youth remains out of control, staff seek physician or mental health authorization for the use of soft restraints.**

- **Finding:** Policy and Procedure does not reflect the criteria or practice of when and how to use mechanical or soft restraints.
- **Recommendation:** Review and change current policy to ensure the correct language and practice is reflected regarding use of mechanical restraints and soft restraints during facility emergencies, as indicated by standard.
- **YSC Response/Action Taken:**

**JDAI Standard: (Written policies, procedures, and actual practices prohibit): Use of chemical agents, including pepper spray, tear gas, and mace.**

- **Finding:** Policy and Procedure does not specifically address the prohibited use of chemical agents, pepper spray, tear gas, and mace.
- **Recommendation:** Review and change current policy and procedure to ensure language and practice conform to the JDAI standards regarding the use of chemical restraint.



- **YSC Response/Action Taken:**

**JDAI Standard: Staff may only use soft restraints where a youth's behavior threatens imminent harm to self or others.**

- **Finding:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** Review and change current policy and procedure to ensure language and practice conforms to the JDAI standard regarding mechanical and soft restraints.
- **YSC Response/Action Taken:**

**JDAI Standard: Except in a clear emergency, only a physician or qualified mental health professional may authorize use of soft restraints. In a clear emergency, where neither time nor availability permit authorization by a physician or qualified mental health professional, facility staff who have been certified by the physician or psychiatrist may authorize the temporary use of soft restraints. The only facility staff who may be so certified and who may authorize of restraints are the facility administrator, the deputy administrator, the officer in charge of the facility, or a unit supervisor. If any of these facility staff authorize the use of restraints in an emergency situation, they must immediately contact a qualified mental health professional for consultation and crisis intervention.**

- **Findings:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** Review and change current policy and procedure to ensure language and practice conforms to the JDAI standard for authorization of soft restraint.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff do not use soft restraints unless and until they try less restrictive techniques, such as talking with youth to de-escalate the situation and bringing in staff, mental health professionals, or other youth to talk with the youth, and such less restrictive techniques have proven ineffective. At the time restraints are applied, staff must tell the youth the reason for using the restraints and that they will remove the restraints as soon as the youth regains self-control. Except in emergencies, staff may not use soft restraints on girls who are pregnant.**



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- **Findings:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** Review and change current policy and procedure to ensure language and practice conforms to the JDAI standard for use of de-escalation and any other less restrictive restraints before soft restraints are utilized.
- **YSC Response/Action Taken:**

**JDAI Standard: During any time that a youth is in isolation, staff provide one-on-one crisis intervention and observation. The staff member should be either in the cell with the youth or directly outside the cell providing constant observation of the youth and interaction as appropriate.**

- **Findings:** There is no documented or recorded training for staff as it relates to youth isolation (i.e., one-on-one crisis intervention, observation, etc...)
- **Recommendation:** Ensure annual staff training is documented and supports best practice and JDAI Standards.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff do not place a youth in restraints for any fixed period of time. Staff must release a youth from restraints as soon as the youth's behavior ceases to threaten imminent harm to self or others.**

- **Findings:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** . Ensure annual staff training is documented and supports best practice and JDAI Standards.
- **YSC Response/Action Taken:**

**JDAI Standard: A medical professional or health-trained staff directly monitors any youth in isolation at least every 15 minutes. A qualified mental health professional must directly monitor any youth held in isolation for longer than 30 minutes. If a youth is in isolation for longer than one hour, a qualified mental health professional must directly monitor the youth at least once every hour the youth is in isolation.**

- **Findings:** Policy and procedure does not reflect JDAI standards for isolation.
- **Recommendation:** Ensure policy and procedure reflects best practice JDAI Standards for youth held in isolation.
- **YSC Response/Action Taken:**



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**JDAI Standard: A qualified mental health professional may not authorize the use of soft restraints for longer than four hours. If a qualified mental health professional determines that a youth needs to be in soft restraints for longer than four hours, staff shall transport the youth to a mental health facility.**

- **Findings:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** Ensure annual staff training is documented and supports best practice and JDAI Standards and details new policy and procedures.
- **YSC Response/Action Taken:**

**JDAI Standard: Youth in restraints have reasonable access to water, toilet facilities, and hygiene supplies.**

- **Finding:** Policy and Procedure does not reflect the protocols for use of mechanical or soft restraints. (NOTE: A written directive dated November 2010 was provided that addressed these issues, but were not written as policy and procedure revisions.)
- **Recommendation:** Ensure annual staff training is documented and supports best practice and JDAI Standards.
- **YSC Response/Action Taken:**

**JDAI Standard: (Facility staff document all incidents in which a youth is placed in isolation, including): Referrals and contact with medical and mental health staff, including the date, time and person contacted.**

- **Finding:** Documentation does not reflect that mental health staff are notified following any use of force or use of restraints incident.
- **Recommendation:** Suggest that the use of force report form or medical observation form identifies mental health staff notification, which includes time, date, and who was notified.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff and youth involved in use of force or restraint incidents undergo an immediate debriefing process with supervisory staff and mental health staff to explore what might have prevented the need for force or restraint and alternative ways of handling the situation. Staff also notify parents of use of force or restrain incidents and ask for input and support on ways to prevent future such incidents.**



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- **Finding:** There was no documentation to review that supported a debriefing of staff or youth took place following a use of force/ restraints reviewed.
- **Recommendation:** Review current policy and practice to ensure that a debriefing process in place and is documented.
- **YSC Response/Action Taken:**

**JDAI Standard: A restraint review committee, which includes the facility administrator or designee, training staff, mental health staff, and line staff, regularly reviews all force and restraint incidents to identify departures from policy and issues needing policy clarification, to develop targeted training, and to provide feedback to staff on effective crisis management.**

- **Finding:** No documentation reflecting a restraint review committee exists. (NOTE: It is known that the facility has an active Multi-Disciplinary Team- MDT Committee where such issues are discussed and reviewed.)
- **Recommendation:** Review current practices to ensure the Youth Services Center is in compliance with the JDAI standard for creating a restraint review committee, and that this review is documented.
- **YSC Response/Action Taken:**

**Voluntary Time Outs:**

**JDAI Standard: Staff allow youth to have a voluntary time out for a short period of time at the youth's request. A voluntary time out is defined as a youth choosing to remove him or her from programming to "cool off"; the youth is allowed to return to programming automatically without needing staff permission.**

- **Finding:** Policy and Procedure does not reflect the option of resident Voluntary Time-Out... the opportunity for a resident to request short term room time in order to regain his-her composure. However, such a practice is noted on the respective Shift logs within each unit.
- **Recommendation:** Review policy and procedure to ensure language is incorporated as it pertains to "cool off" and the resident's right to use.
- **YSC Response/Action Taken:**

**Grievance Procedures:**

**JDAI Standard: Facility administrators ensure that youth receive no reprisals for utilizing grievances procedures.**



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- **Finding:** There is no policy statement which specifically prevents reprisals against residents using the grievance process.
- **Recommendation:** Review policy and procedure to ensure language and practices are implemented in order to conform to the JDAI standard.

### Access Issues

Success in the community is often linked to supportive relationships that youth have with family and others. This section addresses the rights of detained youth to have access to the outside community through visitation, correspondence, and access to the telephone. It also addresses the need for youth to be able to visit with and communicate with their attorneys and other advocates about their cases, problems in the facility, or other issues requiring legal assistance.

### Mail:

**JDAI Standard: Facility staff do not routinely read incoming or outgoing mail. Staff only read mail if there is a reasonable suspicion based on specific information that the mail itself constitutes a criminal act or threat to the security of the facility.**

- **Finding:** Policy and Procedure 6.5.1 F states that “mail is read” and Policy and Procedure 6.5.1 5 states that “mail shall not be censored or read by staff”.
- **Recommendation:** Need to consolidate policies and not contradict them. All mail sections should be combined to ensure consistency and reduce confusion.
- **YSC Response/Action Taken:**

**JDAI Standard: Facility staff only open envelopes containing mail for a youth in the presence of the youth in order to inspect for contraband.**

- **Finding:** Policy and Procedure does not require youth presence.



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- **Recommendation:** Review current policy and procedure to ensure language is implemented in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**JDAI Standard: If staff withhold mail for any reason, staff inform the youth, log the date, time and reason for the action, place the mail in the youth's private property, and advise the youth that he or she may file a grievance over the decision to withhold the mail.**

- **Finding:** No Policy and Procedure in place that allows youth to file a grievance in regards to withheld mail.
- **Recommendation:** Need explicit notification to youth and sender/publisher that they can grieve refusal of mail or mail that is withheld. Be more detailed in reference as to what is prohibited/ subject to refusal. Document refusal of mail or withheld mail and details of why the action was taken.
- **YSC Response/Action Taken:**

**JDAI Standard: Youth may receive reasonable numbers of books and magazines, which may be inspected for contraband.**

- **Finding:** Policy and Procedure in place 6.5 1.E. does not conform to standard.
- **Recommendation:** Allow youth to receive publisher's publications so long as the content is appropriate.
- **YSC Response/Action Taken:**

**JDAI Standard: Staff distribute mail within 24 hours of arrival at the facility, and post outgoing mail within 24 hours of receipt of mail from youth.**

- **Finding:** Policy and Procedure in place 6.5 1.H. does not conform to standard.
- **Recommendation:** Review current policy and procedure to ensure language is changed and practice is implemented in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**Telephone:**

**JDAI Standard: Facility staff provide youth with reasonable access to telephones, and staff do not routinely listen in on or record youth's conversations.**

- **Finding:** Policy and Procedure does not address the prohibition of routinely listening in on youth phone conversations.
- **Recommendations:** Review current policy and procedure to ensure language is changed and practice is implemented in order to conform to the JDAI standard.



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- **YSC Response/Action Taken:**

**JDAI Standard:** Telephone calls are a minimum of 10 minutes in length (after a connection is established), at least twice a week. Staff may impose reasonable restrictions on length of calls beyond 10 minutes in order to accommodate all youth wishing to make telephone calls.

- **Finding:** Policy and Procedure does not mention either the length of telephone calls for youth or access restriction.
- **Recommendation:** Review current policy and procedure to ensure language changed and practice is implemented in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**Visitation:**

**JDAI Standard:** Visits are at least one hour in length and are contact visits. Staff impose noncontact visits only when there is a specific risk to the safety and security of the facility.

- **Finding:** Policy and Procedure 6.5.7 c is not clear and is confusing as it mixes Super Honors with regular special visits.
- **Recommendation:** Policy and Procedure needs clarification and separation between the Super Honors special visits and the regular special visits.
- **YSC Response/Action Taken:**

**JDAI Standard:** Staff may supervise the visiting area, but may not monitor conversations, absent a reasonable suspicion that a crime, escape, or threat to safety or security may occur.

- **Finding:** Policy and Procedure is not clear in regards to this standard.
- **Recommendation:** Review current policy and procedure to ensure language is changed and practice is implemented in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**JDAI Standard:** If staff conduct searches following visits, they use the least intrusive measure to protect against the introduction of contraband into the facility. Written policy and procedure clearly describes the facility's practice.



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- **Finding:** Policy and Procedure 6.5.7 a. xvi clearly states that all visits will begin and end with a strip search which is not the least intrusive measure to protect against the introduction of contraband into the facility
- **Recommendation:** Review current policy and procedure to ensure language is implemented in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**JDAI Standard: Visitors are able to ask questions or register complaints about the treatment of youth. Facility staff or administrators promptly reply to such questions or complaints.**

- **Finding:** Policy and Procedure in regards to this standard could not be located.
- **Recommendation:** Review current policy and procedure to ensure language is developed and practice is developed for a parent grievance procedure in order to conform to the JDAI standard.
- **YSC Response/Action Taken:**

**Access to Courts, the Counsel and Public Officials:**

**JDAI Standard: Attorneys other than the youth's delinquency attorney may visit, with consent of the youth. Youth may have access to legal assistance (e.g., pro bono lawyers, law students, paralegals) and legal research materials both pre- and post- adjudication**

- **Finding:** Policy and Procedure for this standard could not be found.
- **Recommendation:** Implement a legal/ law library for youth
- **YSC Response/Action Taken:**

**Programming**

**Education:**

**JDAI Standard: The facility school operates twelve months a year.**

- **Finding:** Summer curriculum different from school calendar year.
- **Recommendation:** Review current summer program curriculum.
- **YSC Response/Action Taken:**

**JDAI Standard: The facility school identifies youth with limited English proficiency and provides appropriate instruction to those students to allow for meaningful access to**



**curriculum. Please list the teaching staff available for youth with limited English proficiency to the facility.**

- **Finding:** Students (Spanish speaking) did not know if Spanish language books/materials were available for educational purposes.
- **Recommendation:** Review current policy and procedure to ensure language is changed and practice is implemented in order to conform to the JDAI standard..
- **YSC Response/Action Taken:**

**JDAI Standard: The facility school is annually reviewed and evaluated by the county superintendent of schools. Alternatively, the school program is accredited by and independent body (e.g., the North Central Association of Colleges and Secondary Schools, the Middle States, Southern States, or Western States Association).**

- **Finding:** No documentation on school accreditation nor could staff confirm.
- **Recommendation:** Meet with school principal to determine how the YSC/ APS is evaluated and accredited.
- **YSC Response/Action Taken:**