Recreation (Facility)

Division of Child and Family Services (DCFS) Juvenile Justice Services (JJS) Statewide Policy

POLICY NUMBER:	DCFS/JJS 500.05
EFFECTIVE DATE:	August 30, 2022
APPROVED BY:	Sharon Anderson, Deputy Administrator – DCFS
	And
DATE:	8/26/2022
SUPERSEDES:	DCFS/JJS 500.05 Recreation and Programming effective February 23, 2016
APPROVED BY:	Dr. Cindy Pitlock, Administrator – DCFS
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DATE:	8/29/2022
REFERENCES:	NRS 63.505;
	Documentation Standards (DCFS/JJS 100.13);
	Performance-based Standards (PbS) (DCFS/JJS 100.14)
ATTACHMENTS:	None

I. SUMMARY

The Division of Child and Family Services (DCFS) Juvenile Justice facilities provides recreation opportunities to all youth while they are committed to a state facility.

II. PURPOSE

To provide guidance to facilities on providing recreation and large muscle activities.

III. DEFINITIONS

As used in this document, the following definitions shall apply:

- A. <u>Exercise</u>: Increased aerobic type activity which promotes health and well-being such as kickball, volleyball, basketball, football, walking or jogging.
- B. <u>Large Muscle Exercise</u>: Aerobic exercise and/or movement activities for youths. The Performance-*based* Standards (PbS) expected practice is to provide at least one hour of large muscle exercise per weekday for youths and two hours on each weekend day. The exercise may occur during school hours (e.g., gym classes).
- C. Leisure Activity: Any time most of the youths assigned to a living unit are engaged in staff

supervised, primarily self-directed, activities which engage youth, are multi-sensory, and offer opportunities for youth to develop socialization skills, strengths, talents, and interests, and learn to use leisure time constructively. Examples of leisure activities may include board games, cards, crafts, reading, puzzles, or other similar activities.

- D. <u>Medical Restricted Status</u>: Youth placed on limited activity restriction by a licensed medical professional whose medical condition would create a risk to their safety or health by performing in moderate to vigorous activity.
- E. <u>Recreation Activities</u>: Staff or volunteer directed activities which provide large muscle exercise. Activities may include playing sports, calisthenics, weightlifting, yoga, aerobics, running, and any other physical activity which provides large muscle exercise.
- F. <u>Recreation Areas</u>: May include outdoor yard, group rooms, activity room, gymnasium, or common areas in living units.

IV. GENERAL PROCEDURES

- A. Recreation and leisure shall be provided by all DCFS state facilities to:
 - 1. Promote physical fitness and overall health
 - 2. Promote creativity, self-expression, self-worth, self-confidence, and self-esteem
 - 3. Enhance prosocial skills, tolerance, and positive relationships with others
 - 4. Enhance adaptability and resiliency
 - 5. Develop problem solving skills with a healthy balance of competition
 - 6. Reduce boredom
 - 7. Increase exposure to different types of activities which promote positive recreation experiences
 - 8. Recognize recreation activities improve quality of life
- B. Large muscle exercise shall be a part of daily programming and included in monthly programming schedules (Performance-based Standards, DCFS/JJS 100.14).
 - 1. Activities shall teach sportsmanship and social skills.
 - 2. Activities must be scheduled for a minimum of one hour per day but can be scheduled for up to two hours per day on weekends, holidays, and for youth who not enrolled in school.
- C. Any youth on room confinement for more than 24 hours must receive at least one hour of out-of-room large muscle exercise each day, which includes access to outdoor recreation if weather permits (NRS 63.505).
- D. Cohort recreation programs must be justified, and the content shall parallel scheduled activities.
 - 1. When necessary, minor modification may be made to accommodate activities.
- E. Facility staff shall guide and monitor all exercise and recreation activities.
- F. Youth shall not sleep during scheduled large muscle or recreation activities, even if they

cannot participate due to a medical restriction.

- G. Exercise may not be used as a punishment.
- H. The minimum one hour of large muscle per day may not be removed as a disciplinary action.
- I. It is recommended facilities have an assigned staff person as the recreation director.

V. MEDICAL RESTRICTIONS

- A. Facility medical staff shall clearly identify and document any medical restrictions for youth which would limit exercise or recreation (Documentation Standards, DCFS/JJS 100.13).
- B. Medical or direct care staff shall determine alternatives for scheduled large muscle or recreation time and shall be noted in the youth's record of the DCFS web-based case management system.

Note: This is for long-term sports restrictions lasting more than two days.

VI. STANDARD OPERATING PROCEDURES

- A. Each facility shall create standard operating procedures consistent with this policy, to include:
 - 1. Scheduling and structure of large muscle and recreation programming.
 - 2. Documentation of large muscle and recreation activities.
 - 3. Documentation of youth with sports restrictions.
 - 4. Process and documentation for youth requiring alternative large muscle and recreation activities due to confinement or other medical restrictions.
 - 5. Criteria for updating a youth's case plan due to a medical restriction.
- B. This policy shall be reviewed every two years or sooner if deemed necessary.