

CONFINEMENT

	DIVISION OF CHILD AND FAMILY SERVICES Juvenile Justice Services STATEWIDE INSTITUTIONAL POLICY
SUBJECT:	Confinement
POLICY NUMBER:	DCFS/JJS 300.013
EFFECTIVE DATE:	5/10/19
APPROVED BY:	Kathryn rose – Deputy Administrator – Division of Child and Family Services
DATE:	5/8/19
SUPERSEDES:	DCFS/JJS 300.07
APPROVED BY:	Ross Armstrong – Administrator – Division of Child and Family Services
DATE:	5/8/19
REFERENCES:	NRS 63.505, NRS 63.425 ACA: 4-JCF-3C-03 DCFS/JJ 400.1 Suicide Prevention Policy Performance based Standards™ (PbS): Order
ATTACHMENTS:	Attachment A: Injury Body Chart Attachment B: Confinement Observation Check Form Attachment C: Confinement Over 2 Hours Authorization Form Attachment D: Extended Confinement Justification Form

I. POLICY

Confinement in the Division of Child and Family Services’ state facilities is used only when necessary, as a last resort, and consistent with policy, to ensure youths’ safety or the safety of others. Confinement is not used as a disciplinary sanction. When confinement of youth is required to maintain the safety and security of the state facility, it will be time-limited to the shortest amount of time necessary to restore order.

II. DEFINITIONS

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

- A. Administrative Room Confinement: Temporary room confinement of relevant youth in the process of an investigation into real or alleged safety concerns.
- B. Behavior Management: A variety of rehabilitative tools used to alter or change a youth’s behavior when they present a threat toward their own safety or the safety of others, including major disruption of programming.

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- C. Tyler Supervision: A secure web-based criminal justice software program that aids in the organization of data and case management based on client and Division needs.
- D. Cool Off: When a youth elects to separate themselves from the general population for the purpose of behavior management or self-control and the youth may return to regular programming at any time. Cool off may occur in a separate room, a hallway, or any area away from the general population as approved by the staff facilitating the cool off.
- E. Isolation: When a youth is placed in a room other than the room they normally sleep in and is not permitted to leave the room of their own volition. This may be with an open or closed door, locked or unlocked.
- F. LGBTQ: Lesbian, Gay, Bisexual, Transgender, or Questioning.
- G. Performance-based Standards (PbS): The data driven standards and data collection points collected biannually at each facility for comparison to facilities nationwide.
- H. Prison Rape Elimination Act (PREA): A federal law that supports the prevention, detection and response to sexual assault and sexual harassment within correctional systems. This law applies to all federal, state, local, and private facilities. State law (NRS 63.425) requires state facilities to comply with PREA.
- I. Room Confinement: When a youth is placed in the room in which they normally sleep and is not permitted to leave the room of their own volition. This may be with an open or closed door, locked or unlocked.

III. REQUIREMENTS FOR COOL OFF

- A. During intake, all youth shall be explicitly taught how to request a cool off, and when it may be requested.
- B. Cool off can only be initiated by the youth.
- C. The length of time in cool off is determined by the youth. However, if the youth's decision to separate from regular programming transitions from a self-control or regulation purpose into refusal to program, staff may terminate the cool off and take appropriate actions to address the refusal to program.
- D. If staff deny the youth's return to programming, cool off ends and confinement begins.
- E. Upon the youth's entry into the room, staff will initiate the Confinement Observation and Check Form (Attachment B) Staff will complete a safety and well-being check on the youth at irregular intervals, never exceeding more than ten (10) minutes, and document

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the checks as well as any other staff visitations or interactions on the Confinement Observation and Check Form.

- F. The youth must not be placed in mechanical restraints or be confined in a locked area during cool off.
- G. The location of the cool off is dependent upon the location of the incident and operational considerations in each facility. The door must remain unsecured at all times.
- H. Mental health or other staff may be requested by the youth or staff to assist in talking with youth in cool off.
- I. Staff shall use the safety and well-being checks to provide supportive statements regarding appropriate use of a cool off and inquire if the youth is ready to have a discussion about their behavior and/or rejoin regular programming as appropriate.

IV. REQUIREMENTS FOR ROOM CONFINEMENT OR ISOLATION

- A. Neither room confinement nor isolation may be used to punish, intimidate, or threaten any youth for their behavior.
- B. Unless specifically authorized in writing by the Deputy Administrator of Residential Services, neither room confinement nor isolation may be used solely to achieve PREA ratios or to ameliorate other staffing concerns.
- C. Room confinement or isolation will be initiated when less restrictive measures (e.g., verbal de-escalation, redirection) have been implemented, were not effective in changing the unwanted behavior, and the youth presents a security/safety risk to themselves or others. The less restrictive measures shall be clearly documented on the Confinement Observation and Check Form (Attachment B).
- D. Administrative uses of confinement or isolation may only be used for investigative purposes, and with the written authorization of the facility Superintendent or designee.
- E. Upon the youth's entry into the room, staff will initiate the Confinement Observation and Check Form (Attachment B). Staff will complete a safety and well-being check on the youth at irregular intervals, never exceeding more than ten (10) minutes, and document the checks as well as any other staff visitations or interactions on the Confinement Observation and Check Form (Attachment B).
- F. Room confinement or isolation time for purposes of documentation and reporting begins when staff place youth in the room with an open or closed door, locked or unlocked.

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- G. Regardless of the youth's behavior, staff will treat youth respectfully, maintain strength-based interactions, and will not scold, taunt, or engage in related behavior directed towards the youth.
- H. Neither the Superintendent nor other staff members may create a set amount of time in room confinement or isolation by type of incident as time in room confinement or isolation shall be based on the behavior demonstrated by the youth (see Section VII). Limited, prescribed early bedtimes imposed by staff for youth behavioral incidents are permitted and must be monitored and documented as room confinement.
- I. Time in room confinement or isolation shall not exceed more than two hours without written supervisory approval from an Assistant Head Group Supervisor or higher (per NRS 63.505). The Confinement Over 2 Hours Supervisor Authorization Form (Attachment C) will be used for this written approval.
- J. Continued room confinement or isolation shall be approved by the supervisor on duty every two hours until the youth demonstrates readiness to return to general programming (see Section VII).
- K. Facility staff shall thoroughly review an ongoing room confinement or isolation every 24 hours with all supporting documentation. If, upon review, the room confinement or isolation is continued, the continuation must be documented in writing, including, without limitation, an explanation as to why no other less restrictive option is available.
- L. Room confinement or isolation shall not last longer than 72 hours. If a room confinement or isolation incident surpasses 72 consecutive hours, the incident must be addressed in the Confinement Monthly Report, and the report must include the reason or reasons any attempt to return the youth to the general population of the facility was unsuccessful (per NRS 63.505).

V. ENVIRONMENT AND SAFETY

The following requirements apply to all instances of cool off, room confinement, or isolation:

- A. Prior to the youth's entry into the room, staff shall check the room for any safety or security concerns.
- B. Unless determined a health or safety risk the area used will be furnished with items necessary for the health and comfort of the youth, including but not limited to: bed, mattress, pillow and blankets. Any deviation from this requirement shall be approved by an Assistant Head Group Supervisor or higher, and will be documented on the Confinement Observation and Check Form (Attachment B).

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- C. If the youth is injured prior to or during room confinement, the nurse shall conduct an exam and complete an Injury Body Chart form (Attachment A) as soon as possible but no later than 4 hours after the incident.
- D. Staff may not require a youth to change clothing prior to room confinement unless there is a specific safety or security concern. The reason(s) for requiring a change of clothes must be documented on the Confinement Observation and Check Form (Attachment B). Youth who are required to change clothes must be allowed to do so in the most private setting available which does not put youth or staff at risk. If staff determine that the youth's shoes pose a safety/security risk, the youth will be required to give their shoes to the staff, and this will be noted on the Confinement Observation and Check Form (Attachment B) with justification.
- E. Youth will receive all prescribed medications while in room confinement. This will be documented in the notes section of the Confinement screen in Tyler Supervision.
- F. At no time will youth be restricted from communication with attorneys, public defenders, Youth Parole Counselors, medical staff, group supervisors, or mental health staff. The youth's parent(s)/guardian(s) will be notified of the confinement. The notification will be document on the Confinement Observation and Check Form (Attachment B).
- G. Youth in room confinement must be afforded the opportunity for one (1) hour of large muscle exercise outside of the room every 24 hours in room confinement (per NRS 63.505).
- H. Youth will receive the same food in the same quantities as youth in the general population, unless a food or menu alteration is ordered by a physician, nurse, or mental health professional due to safety reasons. Any deviations must be documented in the notes section of the Confinement screen in Tyler Supervision.
- I. Youth in room confinement will receive assigned academic coursework from the school on a daily basis. Work should be appropriate for the student in accordance to grade level, IEP status, and academic subject assignments.
- J. The facility will not conduct cross gender strip or body searches as part of room confinement or isolation procedures for any youth.
- K. Cross gender pat down searches are prohibited, except in exigent circumstances, and must be documented in Tyler Supervision. Staff must be trained in conducting cross gender, intersex, gender non-conforming, or transgender pat down searches in a respectful manner and in the least intrusive manner possible.

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VI. STAFF INTERACTION WHILE YOUTH IN ROOM CONFINEMENT OR ISOLATION

- A. The Head Group Supervisor (HGS) or designee must be notified immediately after it is safe to do so.
- B. The HGS will notify the Superintendent/designee immediately or as soon as possible.
- C. A supervisory staff member will have face to face contact with the youth during each shift.
- D. The Superintendent/designee will visit the youth daily while the youth is on room confinement or isolation.
- E. Nursing staff will conduct visits to youth as necessary, but not less than twice per day. If a youth enters room confinement or isolation when a nurse is not on duty, the youth will be evaluated on the next shift when a nurse is present, but never more than twenty-four (24) hours after the start of confinement.
- F. Youth will be evaluated by the facility's psychiatrist as needed.
- G. A mental health counselor will conduct visits to the youth as necessary, but not less than twice per day. Visits will be documented on the Confinement Observation and Check Form (Attachment B). Mental health staff shall assist the youth in identifying alternative behaviors and develop a therapeutic plan with the Group Supervisor Staff and the youth to assist the youth join normal scheduled programming.
 - 1. On days without mental health staff at the facility, case managers and/or group supervisors will provide these visits.

VII. RELEASE FROM CONFINEMENT OR ISOLATION

- A. Youth will be subjected to confinement only for the minimum time required to address the unwanted behavior and to ensure the youth no longer poses a risk to the safety or programming to self or others.
- B. Each facility shall establish a procedure to have a release from confinement or isolation decision made by multiple staff. The outcome of the meeting and justifications for decisions to continue or suspend room confinement shall be documented in Tyler Supervision or on a form created for this purpose.

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VIII. LGBTQ YOUTH

- A. LGBTQ youth must not be put into room confinement or isolation solely because of their status as an LGBTQ youth.
- B. LGBTQ youth may be placed in confinement for the same reasons as any youth and afforded the same items under the environment and safety section.

IX. DOCUMENTATION

- A. Standard documentation for confinement includes the following:
 - 1. Create a Confinement Log on the Bookings page of Tyler Supervision;
 - 2. Complete Confinement and Observation Check Form (Attachment B)
- B. Additional documentation if applicable:
 - 1. Complete Injury Body Chart completed by medical staff (Attachment A);
 - 2. Documentation of any referrals made to medical or mental health; if necessary
- C. All forms must be complete and accurate with all required signatures.
- D. Documentation shall include the events that led up to the confinement in concrete details.
- E. Failure to properly document use of cool off, room confinement, or isolation may result in disciplinary action.

X. REPORTING REQUIREMENTS

- A. The Superintendent will ensure that the facility accurately reports instances of confinement monthly to the Social Services Chief or designee. The minimum required is on the Confinement Monthly Report.
 - 1. See the following chart for what is reportable on this document.
- B. The Superintendent will ensure that the facility includes a detailed report (word document) on any instance of confinement that lasts longer than 72 hours with the Monthly Report Form to the Social Services Chief or designee.
- C. The Superintendent shall ensure accurate data reporting for PbS purposes and in the monthly Superintendent Report to the Deputy Administrator.

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Reporting Guideline Chart

Separation Type	Reporting Criteria
Cool Off – when youth elect to place themselves in a room for purposes of behavior management or self-control and the youth are allowed to terminate at any time.	Reportable for confinement lasting fifteen (15) minutes or more per PbS. Document as an “Activity” (Cool Off) in Tyler Supervision.
Room Confinement – when a youth is placed in the room in which they normally sleep and is not permitted to leave the room of their own volition.	Reportable for any amount of time per NRS 63.505 Reportable for confinement lasting fifteen (15) minutes or more per PbS. Additional report required if time exceeded seventy-two (72) hours per NRS 63.505. Document on the “Bookings” page in Tyler Supervision: time in, time out, reason, related incident, and sleep hours if appropriate.
Isolation – when a youth is placed in a room other than the room in which they normally sleep and is not permitted to leave the room of their own volition.	Reportable for any amount of time per NRS 63.505 Reportable for isolation lasting fifteen (15) minutes or more per PbS. Additional report required if time exceed seventy-two (72) hours per NRS 63.505.e Document on the “Bookings” page in Tyler Supervision: time in, time out, reason, related incident, and sleep hours if appropriate.e
Suicide Risk Observation	Reportable for confinement lasting fifteen (15) minutes or more per PbS. Must be documented for annual quality assurance visits within medical/mental health file with appropriate logs. Document as a “Facility Suicide Risk” in Tyler Supervision.
Medical Separation	Reportable for confinement lasting fifteen (15) minutes or more per PbS. Must be documented for annual quality assurance visits within medical/mental health file. Document as a “Facility Medical Separation” in Tyler Supervision.
Administrative	Reportable for confinement lasting fifteen (15) minutes or more per PbS. Must be documented for annual quality assurance visits within medical/mental health file. Document as a “Facility Administrative Confinement” in Tyler Supervision.

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XI. PROCEDURES

- A. Each facility shall establish Standard Operating Procedures consistent with this policy including but not limited to:
1. Confinement or isolation release decision making;
 2. Security procedures prior to use of an area for cool off, confinement, or isolation;
 3. Staff responsibilities, including staff responsible for ensuring complete and accurate documentation, during a cool off, confinement, or isolation event;
 4. Facilitation of large muscle exercises for confinements lasting more than 24 hours;
 5. Staff or other individual engagement with youth during a period of cool off, confinement, or isolation;
 6. Staff responsibilities for ensuring accurate documentation in Tyler Supervision.