# Pennington County Sheriff's Office



# **WSDJSC** Policies

For public access

**Updated 3/25/2020** 

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# JSC 1.10: Establishing the Facility and Delineating Its Mission

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** 12-01-2013 **Revised:** 06-01-2015

**Approved by:** Sheriff Kevin Thom

**Reference:** ACA 3-JDF-1A-01, 03, 04, 04-1, 05, 27, SDCL 26-7A-23 and SDCL 24-11-4.1

Classification: Public

#### I. Policy

A. The facility is established to provide physical secure and staff secure detention for juvenile(s) who are accused, adjudicated, given a disposition, and/or awaiting transfer to another facility.

#### **II.** Definitions

A. N/A

### **III. General Information**

- A. Under the authority of South Dakota statutes, the WSDJSC Joint Powers Agreement provides for the establishment and operational funding of the facility. The WSDJSC Joint Powers Advisory Board contracts with Pennington County through the Pennington County Sheriff's Office for operation and management of the facility.
- B. The facility is not a post-trial treatment facility.

- A. The Commander shall develop and manage all phases of operations according to the parameters set by law.
- B. The Sheriff shall hold meetings at least annually with the Administration of the facility.
  - 1. Programs will be evaluated in terms of the objectives, cost, and contribution to the facility's mission.
  - 2. The written mission statement shall be reviewed to ensure it describes the philosophy, mission, and goals of the facility.

# **JSC 1.20: Coordination with Community Agencies**

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** 11-01-2013 **Revised:** 06-01-2015

**Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1A-12, 14, 20, SDCL 26-12-13

Classification: Public

# I. Policy

A. The Commander shall coordinate planning efforts with community-related groups; service providers; other departments; divisions; city, county, state, tribal and federal agencies; as well as private organizations to assist in providing necessary services.

## **II.** Definitions

A. **WSDJSC Joint Powers Advisory Board:** Consists of a representative of each Joint Powers Partner county appointed by their County Commissions and the Pennington County Sheriff.

#### **III.** General Information

A. N/A

- A. The WSDJSC Joint Powers Advisory Board will serve as an Advisory Board to the facility.
  - 1. The Board will assist the Commander by advising, recommending, and supporting programs, policies, and procedures in the best interest of the juveniles supervised by the facility.
- B. The facility will participate in state and regional planning organizations, interagency councils, and other community organizations.
- C. Staff will attend regular meetings and case conferences with Court Services, the Courts, and law enforcement to develop and maintain interagency policies and procedures.
- D. The Commander shall ensure codified law is complied with according to the provisions of the Interstate Compact on juveniles.
- E. Staff members are encouraged to apply for membership in related professional organizations to enable them to stay abreast of developments in the field and to upgrade their skills through participation in workshops and conferences.

# **JSC 1.30: Establishing of Commander**

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** January 19, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1A-11, 15, 16

Classification: Public

# I. Policy

A. The facility and its programs are managed by a Commander to whom all staff are responsible.

#### **II.** Definitions

A. N/A

## **III. General Information**

- A. A job description exists identifying the qualifications, authority, and responsibilities of the Commander.
- B. The Commander is appointed by the Pennington County Sheriff.

# **IV. Procedural Guidelines**

A. N/A

# JSC 1.40: Roles of Consultants, Contract Employees and Other Agencies' Employees

**Chapter:** Administration, Organization and Management

**Order No:** 

**Effective:** January 19, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1A-19, 34

Classification: Public

# I. Policy

A. The duties and responsibilities of consultants, contractors, or service personnel who provide a service to the facility are clearly specified in a contract or other time of agreement.

#### II. Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. The Commander, or designee, will ensure all people working in the facility, who are not expressly employed by the facility, shall have a working agreement.
  - 1. Contract providers shall have a formal, detailed contract specifying their duties.
  - 2. Service providers shall have an agreement stating the work to be done.
  - 3. All contracts and agreement shall include to whom the provider is responsible and shall designate the Commander as the final authority.
- B. Contract providers may be allowed to proceed through the facility under minimal staff supervision and direction.
  - 1. All contract providers will abide by the policies and procedures of the facility when they are in the facility.
  - 2. All contract providers will comply with guidelines on confidentiality.
- C. Service providers shall be under constant supervision from staff in those areas permitting contact with juveniles.
  - 1. Individual service providers shall be accountable for any and all tools of materials they bring into the facility.

- 2. At no time are any service providers to have access to or handle facility keys.
- 3. All service providers will abide by facility policies and procedures when they are in the facility.
- 4. All service providers will comply with guidelines on confidentiality.

# JSC 1.50: Organizational Staffing Chart

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** January 19. 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1A-18

Classification: Public

# I. Policy

A. An organizational staffing chart will be maintained for the facility reflecting the grouping of similar functions, services, activities, lines of authority; and orderly channels of communication.

## **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

## IV. Procedural Guidelines

A. The Commander, or designee, is responsible for constructing, maintaining, and annually reviewing the organizational chart.

# **JSC 1.60: Communications**

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** November 1, 2013 **Revised:** June 1, 2015

**Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1A-13, 20, 23, 24, 25, 26, 27

Classification: Public

# I. Policy

A. Facility staff will achieve efficient and consistent operations through following established channels of communication.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. The Commander will meet with the Joint Powers Advisory board at least annually to address budget, discuss policy, ensure compliance to policy, and implement programs.
- B. Staff in supervisory roles and key roles will attend monthly meetings with the Commander.
  - 1. Support staff will take minutes of the meetings and distribute them to all staff.
  - 2. Correctional staff will communicate information to juveniles through publications, postings or direct communication.
- C. Staff will participate in the formulation of policies, procedures, and programs by attending staff meetings, communicating with the Commander, and utilizing the Suggestions for Improvement process.
- D. Staff will participate in regular meetings and case conferences with the staff of probation agencies, shelter facilities, the court, and law enforcement to ensure appropriate use of the facility.
- E. The Commander will annually notify the court of the extent and availability of services and programs of the facility.
- F. The Commander will respond to requests for information about facility programs and specific cases, consistent with confidentiality statutes.

G.	The Commander will provide advice and information regarding relevant legislation and court decisions.					

# **JSC 1.70: Establishment and Maintenance of Manuals**

**Chapter:** Administration, Organization and Management

Order No:

Effective: January 19, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-1A-21, 22, 3-JDF-3A-01

Classification: Public

# I. Policy

A. A facility manual will be established to disseminate policies, procedures, and rules. This manual shall address the facility's purpose and goals.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. The Commander, or designees, will maintain, update, and annually review all facility policies and procedures.
  - 1. Prior to implementation of any change in policy or procedure, staff, volunteers, and, when appropriate, the juveniles will be notified.
  - 2. The manual will be made accessible to staff and the public and is to be used as a training tool for all new staff during the orientation period.
  - 3. The Security/Control portion is published under separate cover and is not releasable or accessible outside for the facility unless approved by the Pennington County Sheriff.

# **JSC 1.80: Facility Program Reporting and Review**

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** January 19, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1A-10, 28, 29

Classification: Public

# I. Policy

A. The facility will make available constructive programming designed to help juveniles function effectively. Program effectiveness will be monitored regularly by the Commander and reported to the Sheriff.

## **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. The Commander will meet with staff annually to develop and review goals and create measurable objectives.
  - 1. The Commander, or designed, will routinely monitor facility operations and programs through inspections and reviews to ensure progress toward goals and compliance with policy and procedure.
- B. The Commander will provide a written report to the Sheriff on a monthly basis. The report will include:
  - 1. Budget status
  - 2. Major incidents
  - 3. Major developments in each department (administrative, correctional, programs and support staff, volunteer status, etc.)
  - 4. Population data
  - 5. Any change in space requirement and/or programming goals
  - 6. Staff and juvenile morale
  - 7. Major problems and plans for resolution

# JSC 1.90: Legal Assistance for Administration and Staff

**Chapter:** Administration, Organization and Management

Order No:

**Revised:** January 19, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1A-32, 3-JDF-1C-01

Classification: Public

# I. Policy

A. The Commander and staff will have access to qualified legal assistance as needed in the performance of their duties.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. An attorney is available for advice, consultation, or representation to the Commander and staff for any legal actions against the administration or Staff, interpretation/clarification of court decisions, and interpretation/clarification of juvenile rights and issues.

- A. Staff may request work-related legal assistance through verbal or written communication with the Commander or the Sheriff.
  - 1. All requests must be accompanied with background information and supporting documents to explain the need for assistance.
  - 2. Should substantial evidence indicate the staff member's conduct was negligent, illegal, or intentionally outside their scope of authority, legal representation may be denied.

# **JSC 1.100: Public Information**

**Chapter:** Administration, Organization and Management

Order No:

**Effective:** January 19, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1A-30, 31, 31-1

Classification: Public

# I. Policy

A. The facility will maintain interaction with the public and the media to communicate the facility's goals and objectives and to foster community involvement and commitment.

## II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

- A. As directed by the Sheriff, the Commander shall be the designated Public Information Officer and is responsible for the following:
  - 1. Written Communication.
    - The Commander will do the initial review of all official correspondence from legislative bodies, courts, law enforcement agencies, and representatives of the news media.
    - b. The Commander will prepare responses to media requests within a reasonable period.

#### 2. Verbal Communication.

a. Visits from the news media will be handled through the Commander.

This may entail:

- 1) Media access to program areas of the facility
- 2) Preservation of juvenile's individual rights of privacy
- 3) Portraying a factual picture of the facility

- 4) Ensuring that representatives of the news media are aware of security restrictions
- b. News released on legislation or government policy affecting detention purposes or the function of the facility are the responsibility of the Commander, as well as comments on daily operations.
- B. After hours requests for access by the media will be referred to the Shift Supervisor.
  - 1. The Shift Supervisor will contact the Commander for direction.
  - 2. News media personnel have access to the public areas of the building during business hours.
  - 3. Access beyond the public areas must be coordinated with and authorized by the Commander.
- C. The Commander is responsible for maintaining the following standard of communication:
  - 1. Public statements should agree with the facility policies and be confined to areas of direct responsibility.
  - 2. Juveniles may not be interviewed or photographed for news coverage connected with their charges, but may be interviewed or photographed for news coverage of facility programs.
    - a. Consent must be given by the juvenile and the appropriate custodian.
  - 3. Information on juveniles or their charges will not be given to the media of public.
- D. The Commander is responsible for tours conducted of the facility according to the following specific procedures:
  - 1. Prior approval will be issued by the Commander
  - 2. A designated staff person will conduct approved tours
  - 3. Tours will be limited to a schedule with the least amount of interference to the operation of the facility and ensures confidentiality of juveniles.
  - 4. Essential elements of requests for tours include specific time/date, purpose of tour, and identification of all participants.
- E. Staff approved by the Commander may participate in informational programs for the general public to improve the community's understanding of the mission, goals, and programs of the facility.
  - 1. Additional purposes include providing a channel for community input, recruiting volunteers, and developing community support.

# **JSC 2.10: Fiscal Control**

**Chapter:** Fiscal Management

Order No:

**Effective:** December 1, 2013 **Revised:** June 1, 2015

**Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1B-01, 03, 04, 08, 10, 11, 12, 13, 16

Classification: Public

# I. Policy

A. The Pennington County Sheriff has authority over all the facility's fiscal matters.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. N/A

#### IV. Procedural Guidelines

#### A. Fiscal Control:

- 1. The Commander coordinates with the Administrative Assistant to manage fiscal matters.
- 2. The Administrative Assistant is responsible for the following functions:
  - a. Coordinates facility purchases through use of purchase orders and facility issued credit cards.
  - b. Issues vouchers as a means to pay approved expenses incurred by the facility.
    - 1) Vouchers are reviewed and approved by the Commander and Sheriff before submission to the County Auditor.
  - c. Monthly verifies expense and revenue accounts balance with the Auditor's report and submits a report to the Commander and Sheriff.
  - d. Monthly prepares bills for other agencies for services rendered.
  - e. Maintains a petty cash fund and balances it monthly.
  - f. Follows Pennington County accounting procedures developed for the collection, safeguarding, and disbursement of monies.

- g. Maintains a listing of filled and vacated positions and ensures that all payroll positions are authorized in the budget.
- h. Completes payroll based on timekeeping records and provides payroll related reports to the Commander and Sheriff on a monthly basis.
  - 1) Payroll is reviewed and approved by the Commander and Sheriff before submission to the County Auditor.

# B. Cash Management:

- 1. The Administrative Assistant will place collected funds in the administrative safe until processed for deposit and turned over to the Pennington County Treasurer.
  - a. Funds are deposited utilizing an accounting system established by the Pennington County Auditor.
- 2. The Administrative Assistant provides a monthly report to the Commander and Sheriff of all monies collected and disbursed.

#### C. Per Diem Rates:

1. The per diem rates are established by the WSDJSC Joint Powers advisory Board. All Joint Powers member counties are charged an equal rate.

# D. Monitoring and Auditing:

- 1. The Commander monitors the facility's fiscal activities on a monthly basis and provides reports to the Sheriff.
- 2. Pennington County ensures an independent audit is conducted annually by the South Dakota department of Legislative Audit.

# **JSC 2.20: Budget Preparation**

**Chapter:** Fiscal Management

Order No:

**Effective:** December 1, 2013 **Revised:** June 1, 2015

**Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1B-05, 06, 07

Classification: Public

# I. Policy

A. The Commander will prepare budget requests for funds to maintain the facility's daily operations; finance capital projects; and support long-range objectives, program development and staff requirements.

# **II.** Definitions

A. N/A

#### III. General Information

A. N/A

#### IV. Procedural Guidelines

## A. Budget Preparation

- 1. The Commander will develop the facility's budget request at the direction of the Pennington county Sheriff.
  - a. The Commander will solicit input from staff concerning equipment, supplies, personnel, and other items needed to perform operations.
  - b. The Commander will participate in budget deliberations with the Sheriff and the WSDJSC Joint Powers Advisory Board.
  - c. Once the budget is approved, the Commander will brief management staff on the budget and amounts allocated to each department.

# **JSC 2.30: Juvenile Fund Accounts**

**Chapter:** Fiscal Management

Order No:

**Effective:** December 18, 1995 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1B-19, 21, 3-JDG-5A-16

Classification: Public

# I. Policy

A. The personal funds of a juvenile held by the facility shall be logged on their Personal Property Form and stored in a secure location.

#### **II.** Definitions

A. **Personal Property Form:** Form on which includes all personal property belonging to a juvenile.

#### **III.** General Information

A. N/A

- A. All money received/possessed by a juvenile will be handled per the procedure outline in Policy 5.30.
- B. Financial transactions between juveniles, juveniles and staff, and juveniles and volunteers must be approved by the Commander.

# **JSC 2.40: Inventory**

**Chapter:** Fiscal Management

Order No:

**Revised:** December 18, 1995 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1B-14

Classification: Public

# I. Policy

A. Accountability for all facility property, supplies and other assets shall be provided through the use of regular inventories.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. The Administrative Assistant will request a county identification number/sticker for the Pennington County Auditor's office for all equipment and furniture valued at more than \$5000.00 and will list it on the equipment/furniture inventory sheet.
- B. On an annual basis, designated staff will complete a physical inventory of all equipment and furniture listed on the equipment/furniture inventory sheet.
- C. A physical inventory of all supplies will be done on an annual basis by designated staff and the results reported to the Commander.

# **JSC 2.50: Purchasing**

**Chapter:** Fiscal Management

Order No:

**Revised:** December 18, 1995 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1B-15 **Classification:** Public

# I. Policy

A. A purchasing process shall be maintained for bidder selection to encourage the participation of qualified competitive bidders who are able to meet the requirement for supplies, equipment, or services.

## **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. The Commander, or designee, assesses the need for furniture, equipment, and supplies.
- B. The Commander will request bids on all items costing in excess of \$15,000.00, if not already covered under an existing government bid.
  - 1. The Commander will write the specifications for the item needed, obtain approval from the Pennington County Sheriff and Pennington County Commission, and submit the bid specifications to the Pennington County Auditor's office.
  - 2. The Auditor will advertise for bids, and then open the sealed bids at a specified time with the Sheriff and/or Commander in attendance.
  - 3. The Sheriff will present the bids with a recommendation to the County Commissioners.

# **JSC 2.60: Insurance Coverage**

**Chapter:** Fiscal Management

Order No:

**Revised:** December 18, 1995 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1B-17 **Classification:** Public

# I. Policy

A. The facility shall provide institutional insurance coverage to the employees while they are on duty.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. Insurance coverage should include at a minimum the following:
  - 1. Workers compensation
  - 2. Civil liability for employees
  - 3. Liability for official vehicles
  - 4. Public employees blanket bond

- A. Staff will report all accidents or incidents to the commander, or designee, using current forms.
  - 1. Reports will be completed prior to the end of shift by staff involved and be routed to arrive in Administration the first business day following the injury.
  - 2. This applies to all injuries or damages, real, imagined, or alleged, and regardless of the factual basis for the claim.

# JSC 3.10: Training, Planning and Supervision

**Chapter:** Training and Staff Development

Order No:

**Effective:** January 5, 1996 **Revised:** March 22, 2017 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-1D-01, 02, 03

**Classification:** Public

# I. Policy

A. Staff training will be planned, coordinated, and implemented by a qualified employee at the supervisory level.

#### **II.** Definitions

A. N/A

#### III. General Information

- A. The Training Designee will be responsible for the necessary planning and coordinating of all training programs to meet new employee and annual training requirements for all categories or personnel.
- B. Training will be selected and planned to meet the needs of each staff member's respective job classifications and shall be pertinent to their work with juveniles.
- C. The facility's training plan is developed by the Training Designee, Training Committee and Commander based on current job related training needs.
- D. Training plans will be reviewed annually.

- A. The Training Committee will consist of facility staff and the Training Designee.
  - 1. Supervisors will send a recommendation to the Training Designee regarding new members when needed.
  - 2. Members will serve on the committee for a minimum of 2 years.
  - 3. All Field Training Officers (FTO's) will be part of the Training Committee.
  - 4. At a minimum, there will be one representative from a post and anon-post position.

- B. The committee will meet quarterly to examine progress of training, plan future training, and resolve reported problems.
  - 1. A written record of each meeting will be kept by the Training Designee and forwarded to the Commander.
- C. With assistance from the committee, the Training Designee develops and plans inhouse training sessions for each calendar year and conducts a formal evaluation of all in-service, pre-service, and specialized training programs.
- D. The Training Designee will submit an annual training plan to the Commander at the beginning of each year.
- E. At the end of the year, an annual report documenting all training accomplished for the year and assessment of training will be completed the Training Designee, or designee.
  - 1. The Training Committee will complete an annual training survey with all staff. It will include:
    - a. Staff feedback on training provided for the year.
    - b. Staff suggestions for training topics for upcoming year.

# **JSC 3.20: Staff Training**

**Chapter:** Training and Staff Development

Order No:

**Effective:** January 5, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1D-04, 05, 06, 07, 08, 09, 09-1, 10, 11, 12, 13, 3C-04, 4C-27, 35

Classification: Public

# I. Policy

A. All staff will be properly trained through scheduled training and staff development programs, to include mandatory training for all categories of personnel.

#### II. Definitions

- A. **Orientation Training:** Fundamental training provided to all new full-time employees prior to undertaking their assignments.
- B. **First Year Training:** Required training, in addition to orientation training, completed during the first year of employment.
- C. **Annual Training:** Required training completed each year after the first year of employment.

#### **III. General Information**

- A. Space and equipment shall be provided for training and staff development.
  - Staff required to attend training away from the facility and during off duty hours will be reimbursed for approved costs and compensated for time spent in training.
- B. The facility will maintain a training library with books and other training materials available to staff to complement staff training and professional development.

## C. Orientation training

- 1. All full-time employees will complete forty hours of orientation training prior to undertaking their assignments. It will include:
  - a. Facility purpose, mission, and goals
  - b. Policies and Procedures of the facility
  - c. Working conditions and regulations
  - d. Employees' rights and responsibilities

- e. Overview of the correctional field
- f. First Aid, Automated External Defibrillator, and Cardiopulmonary Resuscitation
- g. Detection and reporting of child neglect and abuse
- h. Sexual harassment, sexual abuse, and sexual assault prevention and intervention
- i. Standards of Conduct/Code of Ethics
- j. Emergency and fire procedures
- D. Clerical/Support staff with minimal or no juvenile contact
  - 1. Will receive sixteen hours of additional training during the first year of employment that will include:
    - a. Specialized training relative to job assignment
  - 2. Will receive sixteen hours of training annually after the first year of employment that will include:
    - a. First Aid, Automated External Defibrillator, and Cardiopulmonary Resuscitation
    - b. Sexual abuse and assault prevention and intervention
    - c. Standard of Conduct/Code of Ethics
    - d. Emergency and fire procedures
    - e. Specialized training relative to job assignment
- E. Support staff who have regular contact with juveniles
  - 1. Will receive forty hours of additional training during the first year of employment that will include:
    - a. Juvenile supervision and security
    - b. Rights and responsibilities of juveniles
    - c. Juvenile rules and regulations
    - d. Personal safety
    - e. Security procedures
    - f. Specialized training relative to job assignment

- 2. Will receive forty hours of training annually after the first year of employment that will include:
  - a. First Aid, Automated External Defibrillator, and Cardiopulmonary Resuscitation
  - b. Sexual abuse and assault prevention and intervention
  - c. Standard of Conduct / Code of Ethics
  - d. Emergency and fire procedures
  - e. Rights and responsibilities of juveniles
  - f. Personal safety
  - g. Security procedures
  - h. Specialized training relative to job assignment
- F. Juvenile supervision staff and professional specialist employees
  - 1. Will receive 120 hours of additional training during the first year of employment that will include:
    - a. Security and safety procedures
    - b. Emergency and fire procedures
    - c. Supervision of juveniles
    - d. Suicide prevention and intervention
    - e. Use-of-Force regulation and tactics
    - f. Rights and responsibilities of juveniles
    - g. Juvenile rules and regulations
    - h. Report writing
    - i. Key Control
    - j. Interpersonal relations
    - k. Communication skills
    - 1. Social/cultural lifestyles of the juvenile population
    - m. Crisis intervention / counseling techniques
    - n. Child / adolescent growth and development

- o. Mental health and mental illness awareness
- p. Recognizing and responding to medical emergencies
- q. Field training / on-the-job training completing position specific duties
- 2. Juvenile Supervision staff will receive forty hours of training annually after the first year of employment that will include:
  - a. First Aid, automated External Defibrillator, and Cardiopulmonary Resuscitation
  - b. Sexual abuse and assault prevention and intervention
  - c. Standard of Conduct / Code of Ethics
  - d. Emergency and fire procedures
  - e. Rights and responsibilities of juveniles
  - f. Supervision of juveniles
  - g. Personal safety and use of force regulations
  - h. Security and safety procedures
  - i. Suicide prevention and intervention
  - j. Mental health awareness
- 3. Professional specialist employees will receive forty hours of training annually after the first year of employment that will include:
  - a. First Aid, Automated External Defibrillator, and Cardiopulmonary Resuscitation
  - b. Sexual abuse and assault prevention and intervention
  - c. Standard of Conduct / Code of Ethics
  - d. Emergency and fire procedures
  - e. Rights and responsibilities of juveniles
  - f. Personal safety
  - g. Security and procedures
  - h. Suicide prevention and intervention
  - i. Topics related to professional service or job assignment
- G. Administrative and managerial staff

- 1. Will receive forty hours of additional training during the first year of employment that will include:
  - a. Topics relevant to job assignment
- 2. Will receive forty hours of training annually after the first year of employment that will include:
  - a. First Aid, automated External Defibrillator, and Cardiopulmonary Resuscitation
  - b. Sexual abuse and assault prevention and intervention
  - c. Stand of Conduct / Code of Ethics
  - d. Rights and responsibilities of juveniles
  - e. Topics related to job assignment
- H. All part-time staff, volunteers, and contract personal receive training appropriate to their assignments. Additional training should be conducted as needed.

- A. Training will be scheduled and coordinated by the Training Designee.
- B. Staff will be notified of time and place for required training.
- C. Upon completion staff will submit a training report or completion certificate to document attendance.
  - 1. The Training Designee will document the completed training in the staff member's training record.
- D. Staff will complete an evaluation of each training session and submit to the Training Designee.

# **JSC 4.10: Juvenile Files**

**Chapter:** Juvenile Records

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1A-06, 3-JDF-1E-01, 02, 04, 06, 07, 08, 5H-04

**Classification:** Public

## I. Policy

A. The facility will collect, record, and retain pertinent juvenile information relevant and necessary to provide required care and services to detained juveniles.

#### **II.** Definitions

A. **Master Record:** The compilation of all electronic and paper files, accessed, created and maintained related to a juvenile's admission to the facility.

#### **III.** General Information

- A. Paper files will be marked "confidential" and kept in secured areas and in locked file cabinets. Access will be controlled and supervised by authorized staff members.
- B. Electronic information is stored inside and secured data base.
  - 1. Authorized person will use a secure login and password to access information.
  - 2. Access level is determined by position and based on need to know information.
- C. All entries made into the master record, will include the date identification of the staff number making the entry.
- D. Records of juveniles being transferred to another facility will be provided within 72 hours of the transfer, as requested by receiving facility and as approved by the Commander.
- E. Retention, storage and destruction of records will be done in accordance with Chapter 1-27 of SDCL, SDCL 7-7-29, and the South Dakota Records Retention and Destruction Schedule.
- F. The master record shall contain the following information:
  - 1. Name, address and phone number
  - 2. Age, sex, place of birth and race
  - 3. Name, relationship, address and telephone number of parent or guardian

- 4. Height, weight, hair and eye color, identifying marks, scars, and tattoos
- 5. School, grade, employer, as applicable
- 6. Driver's License, Social Security, Medicaid, and Tribal identification number, as applicable
- 7. Inventory of personal belongings and cash
- 8. Initial intake information, including referral agency and authority to accept the juvenile
- 9. Record of court appearances
- 10. Court Service Officer, Juvenile Corrections Agent, Social Worker, attorney, and other approved professionals, as applicable
- 11. Medical or Mental Health needs
- 12. Medical consent Form
- 13. Personal Physician, as applicable
- 14. Signed Detainee Behavior Contract from the juvenile indicating an understanding and acceptance of the facilities rules and Detainee Handbook
- 15. Grievance and disciplinary record, as applicable
- 16. Case and social histories, as applicable
- 17. Individual program plan and reports on program involvement
- 18. Referrals to other agencies
- 19. Release information

- A. During the booking process, the Intake Officer will create the Booking Entry in the computerized record system, utilizing the Global Subject Entry.
  - 1. If a Global Subject does not exist, the Intake Officer will create a global Subject entry in the computerized record system.
- B. The Booking Officer will complete the Booking Entry, after the Intake Officer has completed the intake information and questionnaires.
  - 1. The Booking Officer will update the Global Subject information as needed.
- C. After completing the computerized records, the Booking Officer will create the Booking File and Pod File.

- 1. The Booking File will contain paperwork related to the legal custody and release of the juvenile. It will be kept in a locked drawer in the booking area. All papers will be filed in reverse chronological order. The Booking File will contain, as applicable:
  - a. Custody Authorization
  - b. Affidavit and Temporary Custody Directive
  - c. Detainers and court orders
  - d. Jail and Juvenile Services Center Administrative Record
  - e. Bureau of Prisons and United States Probation Acceptance and Program Plans
  - f. Court appearance information
  - g. Correspondence from holding authority
  - h. Release authorizations and pass agreements
  - i. Bond paperwork
  - j. Signed juvenile personal property receipts
- 2. The Pod File will contain paperwork related to and necessary for appropriate staff supervision in the housing unit. It will be kept in a locked drawer in the housing unit. The file will be divided into sections. Papers will be filed in reverse chronological order in the appropriate section. The Pod File will contain, as applicable:
  - a. Admission and release paperwork
    - 1) Admission Screen / Photo / Alert stamp
    - 2) Release checklist
  - b. Check in and Orientation paperwork
    - 1) Room and orientation checklists
    - 2) Behavior contract
    - 3) Personal inventory
  - c. Medical Paperwork
    - 1) Medical incident reports
    - 2) Expired medical plans / instructions / alerts
  - d. Mental Health Paperwork

- 1) Mental health incident reports
- 2) Expired mental health plans / programs
- e. Juvenile Rights paperwork
  - 1) Completed grievance forms
  - 2) Contact request forms
- f. Program materials
  - 1) Strategies of juvenile supervision information
  - 2) Program reports and certifications
  - 3) Drug and alcohol information
  - 4) In-house work program
  - 5) Expired school book consideration or pod education plans
- g. Behavior incentives
  - 1) Completed behavior exchange menus
  - 2) Haircut request forms
  - 3) Completed library check out forms
- h. Disciplinary paperwork
  - 1) Time out / privilege restriction sheets
  - 2) Major rule violation and special management paperwork
- D. As it is created as part of daily operations, paperwork and information will be added to the appropriate paper and/or electronic files by staff.
- E. Staff utilizing juvenile records (paper or electronic) will ensure information is not viewed by unauthorized persons and the record is secured upon completion.
- F. All paper and electronic files will be regularly reviewed by supervisory staff or designee to ensure files are accurate and properly maintained.
- G. Medical files will be created and maintained by medical staff.
  - 1. Medical files will include medical and mental health paperwork / information.
  - 2. Medical files will be kept in the medical office in a locked file drawer.

- 3. Access to medical files will be restricted to medical and mental health staff, administration, and persons approved by administration for the proper care of the juvenile.
- H. Education files will be created and maintained by the educational staff.
  - 1. Education file will include paper and electronic files. Information will include, as applicable: juvenile's grade level, enrolled school, attendance, educational assessments, individual education plans, assignments, progress reports, grades, and any other education records.
  - 2. Education files will be kept in the classrooms in a locked file drawer.
- I. Case Management file will include, as applicable: individual program plans, program completions, progress reports, and holding authority correspondence.
  - 1. Case management files will include, as applicable: individual program plans, program completions, progress reports, and holding authority correspondence.
  - 2. Case management files will be kept in the Case Manager's office in a locked file drawer.
- J. When a juvenile is released from the facility all paper records shall be scanned into the facility imaging system.
  - 1. At the time of release the Pod Officer will send the Pod File to booking.
  - 2. Upon release the Booking Officer will combine the Booking File and Pod File and place in the "to be Audited" drawer.
  - 3. Designated staff will audit the files and forward to assigned clerical to be scanned into the facility imaging system.
  - 4. After clerical staff receive confirmation the files have been successfully imaged, the files are destroyed by a shredding method.

# **JSC 4.20: Reporting Systems**

**Chapter:** Juvenile Records

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1E-03, 3-JDF-3A-03, 09

Classification: Public

# I. Policy

A. The facility shall maintain a reporting system for identifying various types of information regarding the juvenile population, locations, behaviors, activities, events, and unusual incidents.

## **II.** Definitions

- A. **Incident Report:** A written report documenting unusual incidents, events, or circumstances. It will include, but is not limited to the following:
  - 1. Any action that is a violation of South Dakota Codified Laws
  - 2. Behavior that violates facility major rules
  - 3. Conduct that jeopardizes the well-being of self or others
  - 4. Staff use of force or restraint
  - 5. Emergency situations
  - 6. Any situation that compromises or breeches the security of the facility
  - 7. Complaints from the public or other agencies
  - 8. Any incident that may be media-sensitive
  - 9. Other incidents as determined by the Commander
- B. **In House Report:** Lists the name, date of admission, holding authority, and charge of all juveniles currently in the facility.
- C. **Pod Roster:** Lists juvenile's name, current housing assignment, close watch status, any alerts, and behavior level.
- D. **Facility Roster:** Located in booking and displays the total juvenile population count and the exact location of each juvenile in custody.
- E. **Event Tracking:** The computerized record of past, present and future scheduled appointments and activities, outside of regular daily schedule. It includes court,

medical appointments, professional visits, personal visits, and other events as scheduled for an individual juvenile.

- F. **Facility Logs:** Continuous log utilized by staff to document / record noteworthy occurrences and unusual incidents to provide for communication between staff and serve as the permanent record of what has taken place within the facility.
  - 1. **Activity Log:** Includes, but not limited to, behavior observations, program participation, behavior scores, badge levels, rules violations, consequences, grievances, and other information related to a specific juvenile.
  - 2. **Corrections Officer Log:** Includes facility information, not specific to an individual juvenile.

#### **III.** General Information

#### A. N/A

#### IV. Procedural Guidelines

# A. Incident Reports

- 1. Staff involved in or witnessing an unusual incident of event will complete an Incident Report as soon as possible.
- 2. Incidents will be completed in the established format in the computerized records system.
  - a. Each report will be assigned an identification number.
- 3. After the report is completed, staff will save the report in the computerized records system.
  - a. Juvenile Incident Reports will merge into the juvenile's master record.
- 4. The Shift Supervisor will review the report to ensure the quality and accuracy.
  - a. Require staff to make corrections as needed.
  - b. Seal the report upon completion of the review.
- 5. If the report involves a juvenile, a copy is placed in the juvenile's file.

# B. In House Report

- 1. An In House Report is printed daily by staff.
- 2. Copies of the report will be accessible to the placing agency each working day.

# C. Pod Roster

- 1. Pod Rosters will be printed by the off-going shift supervisor and passed to the on-coming shift supervisor at shift change.
- 2. At the end of each shift, the off-going shift supervisor will verify the close watch status of the juveniles on the Pod Roster and distribute to the oncoming shift supervisor to distribute to assigned Pod Officers at shift briefing.
- 3. Staff will update the Pod rosters during the shift as needed.
- 4. Old Pod Rosters will be destroyed by staff at the end of each shift.

## D. Facility Roster

- 1. The booking officer will maintain the maser roster and immediately update when the current population or location of a juvenile changes.
- 2. The shift supervisor will ensure the master roster is updated and accurate at all times.

# E. Event Tracking

- 1. Staff the receive information are responsible for scheduling the event and will make the entry into the Event Tracking system. Each entry will include:
  - a. Activity type
  - b. Activity date and time
  - c. Location
  - d. Name of staff scheduling the event
  - e. Other pertinent information as needed to complete the event
- 2. The midnight shift supervisor will print a daily event / activity report at the beginning of each day and pass along to on-coming supervisor.
  - a. The report will include all events scheduled for the day.
  - b. Shift supervisor will utilize report to ensure scheduled events and appointments are completed.
- 3. As the events and appointments happen, staff will update the status in the computerized records system to show the event is in progress or has been completed.
  - a. Completed events will be a part of the juvenile's master record.

### F. Facility Logs: Activity or Corrections Officer

1. Each staff member will log all significant events during their shift.

- 2. Staff will enter information related to the activity or circumstances into the appropriate log. Each entry will include:
  - a. Entry type
  - b. Date and time
  - c. Name of staff entering the information
  - d. All pertinent information related to the entry
- 3. Entries will be made as timely to the event / activity as possible.
- 4. At least one staff member must complete a Behavior Observation entry for each juvenile on each shift.
- 5. Shift Supervisors will review the staff log entries for their shift, prior to the end of each shift to ensure accuracy and completeness.
- 6. The Commander, or designee, is responsible for reading the previous day's log.

# JSC 4.30: Confidentiality Policy – Release of Information

**Chapter:** Juvenile Records

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1E-05, 08, SDCL 26-7A-27, 26-7A-28 and 26-7A-29

Classification: Public

# I. Policy

A. Name, address, fingerprints, photograph, or other information concerning the identity of a juvenile is confidential and will be safeguarded against unauthorized access and improper disclosure.

#### **II.** Definitions

A. N/A

#### III. General Information

- A. In accordance with SDCL 26-7A-27, records concerning juveniles taken into temporary custody or placed at the facility may not be inspected by or disclosed to the public except:
  - 1. By order of the court
  - 2. If the court orders the juvenile to be held for criminal proceedings
  - 3. If there have been a criminal conviction and a pre-sentence investigation is being made on an application for probation
  - 4. If the juvenile or juvenile's parents or guardian authorize the release of records to a representative of the military for the purpose of enlistment.
- B. In accordance with SDCL 26-7A-28 and 26-7A-29 information concerning a juvenile may be released pursuant to a court order, to the person or party specifically authorized by order of the court.
  - 1. To persons or agencies that have a legitimate interest in the juvenile
  - 2. To the juvenile's parents, guardians, or custodian
  - 3. To the juvenile's attorney
- C. If the juvenile is an adjudicated delinquent offender, information can be released to:
  - 1. Courts

- 2. Law enforcement
- 3. Prosecuting attorneys
- 4. Court Services
- 5. Department of Social Services
- D. Information concerning any juvenile may be released to any correctional or detention facility.
- E. Law enforcement personnel will complete an Interview of WSDJSC Detainee form before speaking to a juvenile if the juvenile is suspected of committing an unlawful act.

- A. Person requesting information will provide:
  - 1. Juvenile's name
  - 2. Name and agency of requesting person
  - 3. Interest in the juvenile
  - 4. Specific information requested
  - 5. A copy of the court order when required
- B. The Commander, or designee, will review the request and determine the appropriateness and scope of information that may be released.
  - 1. If approved, the information may be provided verbally, written or electronically.
    - a. Any information provided will be documented in the computerized record keeping system.
  - 2. Notification will be provided to the requesting person if the request is denied.

# **JSC 5.10: Juvenile Intake**

**Chapter:** Intake, Admission and Release

Order No:

Effective: January 14, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-1A-09, 3-JDF-5A-01, 02, 04, 05, 06, 07, 08, 09, 10

Classification: Public

# I. Policy

A. Designated staff will complete an intake on all juveniles brought to the facility to determine need for detention.

#### II. Definitions

- A. **Affidavits:** Format provided for Law Enforcement, Court Services Officer, or State's Attorneys to request the continued temporary custody of a juvenile.
- B. **Intake Officer:** Court appointed personnel authorized to conduct intake hearings.
- C. **Temporary Custody Directive:** South Dakota Unified Judicial Form to record decision of Intake Officer.
- D. **Court Order:** Formal document signed by a judge ordering continued temporary custody in detention.
- E. **Risk Assessment Instrument (RAI):** Tool utilizing objective admission criteria to score a juvenile to determine need for secure detention, detention alternative or release.
- F. **Reception Center:** Non-secure area used to process juveniles being unconditionally released; released to a detention alternative; and not requiring secure detention.

#### **III. General Information**

- A. Decisions to continue temporary custody of a juvenile of accept a juvenile for detention will be made in accordance with pertinent sections of state law, Chapters 26-7A, 26-8B, 26-8C, and 26-12, and/or with agreements / contracts in place with the Federal Bureau of Prisons, United States Marshal Service, or other agencies.
- B. Decisions to detain will be based on protection of public, prevention of self-injury, ensuring the juvenile's attendance at subsequent court hearings, and transfer to other jurisdiction. Juveniles will be released to the least restrictive alternative.
- C. The Risk Assessment Instrument will be utilized to determine if the juvenile is processed in the Reception Center or secure booking area.

- D. The circumstances and reasons for all juveniles arriving at the facility will be clearly established.
- E. The Intake Officer has the authority and responsibility to order unconditional of conditional release of a juvenile.
  - 1. Intake Officers may provide referrals to juveniles and their parents for voluntary non-court services.
- F. Intake decisions will be independently reviewed to ensure decisions are made in the best interest of the juvenile.
- G. Juveniles not released will have a court hearing within 24 court hours of admission.
- H. If abuse or neglect is apparent or suspected during the intake process, see Policy 8.30.

- A. Intake Officers will assess juvenile for alertness / awareness and ensure no medical or mental health emergencies exist.
  - 1. If an emergent medical or mental health condition exists, the juvenile will not be accepted for admission until cleared by hospital medical staff.
- B. Intake Officers will make a determination if the juvenile is legally committed to facility and obtain proper documentation.
- C. If all paperwork is in order and no emergent medical / mental health issues exist the Intake Officer will accept custody of the juvenile by signed the custody authorization report.
- D. Staff will complete required searches before entry into the booking area.
  - 1. Staff will inventory personal property of the juvenile and the juvenile will sign acknowledging inventory is correct.
- E. Staff will escort the juvenile into the booking area and explain the intake and admission process.

# **JSC 5.20: Admission Procedure**

**Chapter:** Intake, Admission and Release

Order No:

Effective: January 14, 1996 Revised: June 27, 2019

**Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-5A-02, 11, 14, 15

Classification: Public

# I. Policy

A. Upon intake, juveniles will be admitted and oriented to the facility.

#### **II.** Definitions

A. N/A

#### **III. General Information**

- A. Juveniles will not be strip-searched unless the juvenile is a delinquent offender and there is reasonable suspicion. Per Policy 16.110
- B. Staff shall treat the juvenile in a professional manner, explaining each step of the admission procedure clearly before beginning the process.

- A. Intake Officer will:
  - 1. Enter juvenile into computerized system which automatically assigns a registration number.
  - 2. Complete classification instruments as required.
  - 3. Complete questionnaires
    - a. Suicide Prevention Screening (SSG)
    - b. Intake Health Questionnaire
    - c. Intake Observations
    - d. Parent / Legal Guardian Questionnaire and Expediter questionnaire
    - e. PREA Intake Assesment
  - 4. Based on information gathered from questionnaires, Intake Officer will update:
    - a. Close watch status according to Suicide screening Guide

- b. Alerts in the computerized record system added if needed
- 5. Initiate initial phone calls (2) completed and logged.
- 6. Review health questionnaire completed by the juvenile
- 7. Provide notification to court Expediter and States Attorney.

### B. Booking Officer will:

- 1. Ensure juvenile's photo and fingerprints are taken.
  - a. Fingerprints are taken the first time the juvenile is admitted to the facility on a delinquent charge, or as per legal mandates.
  - b. Photos of the juvenile are taken during the juvenile's first admission. An updated photo will be take every six months or if appearance has drastically changed from previous photo.
- 2. Update information necessary to process mail and visitation for the juvenile.
- 3. Update computerized record keeping system.

## C. Shower Process:

- 1. Prior to entry into the shower room, the juvenile will be provided facility clothing, hygiene packet, towel, and shower shoes.
- 2. The juvenile shall be instructed how to operate the shower.
- 3. The juvenile will present their street clothes to the correctional staff member upon exiting the shower room.
- 4. The staff member will confirm personal property inventory, search, and place all items in an assigned storage bag.
  - a. If clothing is soiled, it will be explained to the juvenile the clothing will be laundered.
- 5. After showering, the juvenile will receive the proper articles of bedding and shoes.
- 6. All of the articles issued will be documented within the juvenile's admission forms.

#### D. Orientation Process:

- 1. Juvenile will be given an orientation booklet.
- 2. Once the juvenile has been assigned a room and the assignment has been noted in the Roster Binder, a staff member shall review the handbook with the juvenile and answer any questions he or she may have.

- 3. Staff must explain the rules and possible penalties for breaking those rules.
- 4. Staff will stress the positive rewards of program participation and the privileges that can be earned by exhibiting acceptable behavior.
- 5. If a language barrier exists, the juvenile must receive written material in his or her language.
- 6. If there is a literacy problem, a staff member will assist the juvenile in understanding the material.
- 7. The juvenile shall sign and date a behavior contract confirming the orientation has been provided and the juvenile handbook is understood.
- 8. The juvenile shall sign and date a Prison Rape Elimination Act (PREA) agreement confirming the orientation has been provided, understood and documented.
- 9. Facility programs and services shall be made available to all juveniles once the orientation process is complete.
- 10. Staff will provide the juvenile an introduction to the pod, to include at a minimum:
  - a. The location of the request boxes to include medical, mental health, PREA reporting, grievance, contract request.
  - b. The location of the shower room respective to the juvenile's room.
  - c. The expectations surrounding the pod station.
  - d. The juvenile's assigned room to include the intercom systems, the alarm systems, and the water systems.
  - e. An explanation of the Activity Schedule and explain and/or demonstrate the expectations / methods of housekeeping to the juvenile.
- 11. The juvenile and the correctional staff member sign the Pod Orientation section of the Behavior Contract to document accomplishment.
- 12. Staff will document behavior observations during the admission and orientation process in the juvenile's record.

# **JSC 5.30: Personal Property**

**Chapter:** Intake, Admission and Release

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4B-11, 3-JDF-5A-02, 16

Classification: Public

# I. Policy

A. Juveniles will be allowed to retain a reasonable amount of personal property. All other personal property will be safely and securely stored for the juvenile until property is returned upon release from the facility.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. Authorized Personal Property
  - 1. Juveniles may retain or accumulate personal based on badge level including prescription eyewear, family pictures, legal documents, correspondence, personal hygiene items, and religious materials.
  - 2. Additional property may be retained with the approval of the Commander or designee.

- A. Storage of Personal Property
  - 1. During the Booking Process, the juvenile's personal property will be itemized on the juvenile's Property Form in the computer and the Booking Officer will print out three copies.
    - a. The juvenile and the Booking Officer will review and sign the property sheets.
    - b. One copy is placed with the juvenile's property and the other is kept in the juvenile's file.
    - c. The third copy will be given to the juvenile.
  - 2. After property is itemized, it is placed into a storage bag in the booking area.

- 3. All items deemed valuable by the Booking Officer will be placed in secure valuables packet and stored with the remainder of the juvenile's property.
- 4. Money in the possession of a juvenile at the time of admission, shall be taken by the admitting staff member, counted in front of the juvenile, and the total listed in the juvenile's personal property form.
  - a. Less than \$100.00 will be placed in his or her secure valuables packet, and secured in personal property bag.
  - b. \$100.00 to \$499.00 will be placed in the booking safe.
  - c. \$500.00 or more will be placed in the administration safe.
- 5. Heavily soiled personal clothing will be laundered so it is clean at the time of release.
  - a. When washed, all clothing is returned to the juvenile's storage bag.
- 6. Property that comes to the facility for a juvenile will be receipted and added to the juvenile's Property Form in the computer by the Shift Supervisor of designee.
  - a. The receiving officer will sign the duplicate receipt and place one copy in the juvenile's file and the other copy is given to the person bringing the property in.
- 7. The property form will be updated anytime juvenile property is released.
  - a. Two copies of the receipt will be printed and signed by the staff member accomplishing the release of property and the juvenile to whom the property belongs. One copy is put in the juvenile's file and other copy is given to the juvenile.
- 8. At release, the juvenile and releasing correctional staff shall review the Personal Property Form to ensure all personal property is returned.
  - a. Any personal property that is missing or not returned to the juvenile must be noted on the Personal Property Form and be documented in an Incident Report to be forwarded to the Commander.

### B. Storage of Dangerous Items

1. If there is a determination property cannot be safely stored in the property room, it will be stored appropriately and then returned to the person accepting custody of the juvenile after the release procedure is complete.

#### C. Confiscated Items

1. Any illegal items found during the admission process will be confiscated by the admitting staff and noted on the Admission Form.

- 2. If the arresting officer is still in the facility, confiscated items will be turned over to the officer for evidence or disposal.
- 3. If the officer has already left, staff will handle and store the items while maintaining chain of evidence for the item(s).

# D. Unclaimed Property

- 1. All unclaimed personal property will be kept for thirty days.
- 2. Efforts will be made to notify the juvenile or the juvenile's parent / legal guardian to pick up the property.
- 3. After thirty days, all unclaimed property will be transferred to the possession of the juvenile's original holding authority.
- 4. Receipts of transfer will be accomplished and a copy placed in the juvenile's file.
- 5. No unclaimed personal property will ever become the property of or be used by the facility or staff.

# **JSC 5.40: Releases – Permanent and Temporary**

**Chapter:** Intake, Admission and Release

Order No:

Effective: January 14, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom
Reference: 3-JDF-5H-02, 04, 06, 07

Classification: Public

### I. Policy

A. All permanent and temporary releases from facility custody will be authorized by the holding authority.

#### II. Definitions

- A. **Permanent Release:** Juvenile is released from the custody of the facility and is not scheduled to return.
- B. **Temporary Release:** Juvenile is released from the custody of the facility for a specific period of time as authorized by the holding authority and is scheduled to return. While out of the custody of the facility, juvenile is required to abide by conditions of temporary release.

### **III. General Information**

A. Releases may occur only after the proper paperwork / notification confirming a release has been obtained by the facility.

- A. Permanent Release
  - 1. Receive authorization for release from holding authority.
  - 2. Ensure identification of juvenile to be released.
  - 3. Complete release process in computerized record keeping system.
    - a. Verify releasing address for forwarding of mail and other correspondence.
  - 4. Return all personal property to juvenile, including medications.
    - a. Juvenile will initial by each item on property form to confirm its return.
    - b. Items considered dangerous will be released directly to a responsible adult.
    - c. Juvenile will sign the finalized release form.

- 5. Verify all issued facility items have been returned.
- 6. Verify identity of person accepting custody.
  - a. Government issued photo identification is required.
  - If person accepting custody does not have an ID then every effort will be made to verify their identity through our computerized system.
     Information such as social security number or date of birth may be in our system.
- 7. Have receiving person sign release form.

### B. Temporary Release

- 1. Receive authorization for temporary release from holding authority.
- 2. Ensure identification of juvenile to be released.
- 3. Have juvenile sign the temporary release / pass agreement form.
- 4. Have juvenile change in personal clothing.
  - a. Release personal property from computerized system.
- 5. Verify identity of person accepting custody.
  - a. Government issued photo identification is required.
  - If person accepting custody does not have identification then effort will be made to verify their identity through our computerized system.
     Information such as social security number or date of birth may be in our system.
- 6. Receiving person sign pass agreement.
- 7. Staff will document time of departure in the computerized record system.

# **JSC 6.10: Sanitation and Health Code Inspection**

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-01, 4B-02

Classification: Public

# I. Policy

A. The facility will comply with all applicable federal, state, local sanitation and health codes. Designated staff will complete weekly sanitation inspections of all areas of the facility.

## **II.** Definitions

A. N/A

#### **III.** General Information

A. An annual inspection will be completed by the State Health Department.

- A. The Commander, or designee, will be responsible for weekly sanitation and facility maintenance inspections.
- B. The weekly inspections shall ensure:
  - 1. All areas are clean and orderly.
  - 2. Lighting, ventilation, and heating equipment function properly.
  - 3. No fire, safety, or health hazards exist.
  - 4. All security equipment and devices perform properly.
  - 5. All toilets, baths, showers, sinks, and laundry facilities operate properly.
  - 6. All exterior grounds are free of trash and debris.
  - 7. All of the deficiencies noted in the previous week's report have been corrected or are on the maintenance schedule for correction.
- C. Deficiencies jeopardizing facility safety or security will be referred to the necessary persons for immediate action or correction. All other concerns will be reported to the appropriate personnel for routine maintenance.

D.	Upon completion of inspection, a report will be submitted to the Commander or designee, and inspection results will be documented in the computerized records system.

# **JSC 6.20: Potable Water Source and Supply**

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-03 Mand.

Classification: Public

# I. Policy

A. The facility will provide safe drinking water, approved by an independent, outside source to be in compliance with jurisdictional laws and regulations.

## **II.** Definitions

A. N/A

## **III. General Information**

A. The potable water source and supply is operated by Rapid City Water Department.

## **IV. Procedural Guidelines**

A. N/A

# JSC 6.30: Waste Disposal

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-04 Mand.

Classification: Public

# I. Policy

A. Liquid and solid waste from institutional operations will be collected, stored, and disposed of in accordance with all applicable statutes and regulations.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. All persons who participate in disposing of biohazard waste will be supplied with proper protective clothing appropriate for that task.

#### IV. Procedural Guidelines

#### A. Liquid Waste

1. Treatment of effluent and sewage will be managed by the City of Rapid City in compliance with the applicable requirements of the state regulating water pollution control and the Federal Environmental Protection Agency.

#### B. Solid Waste

- 1. Staff will collect and remove trash from the facility and deposit in the outside trash dumpster as necessary to maintain good sanitary conditions.
- 2. The dumpster will be emptied by a waste disposal company on a prearranged schedule that ensures prevention of odors and excess trash accumulation.

#### C. Medical Waste

- 1. Staff will place items contaminated with blood or potentially infectious body fluids in a labeled biohazard disposal bag.
- 2. Biohazard bags will be deposited in a secured, medical waste bin in the exam room.
  - a. All sharps will be disposed of in the container labeled for sharps located in the exam room.

3.	Medical waste containers in the exam room will be emptied / disposed of by a certified medical waste disposal company on a prearranged schedule.

# **JSC 6.40: Pest Vermin Control**

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4B-05

Classification: Public

# I. Policy

A. The facility will be free of any insects, rodents and vermin.

#### II. Definitions

A. N/A

#### **III. General Information**

A. Preventative pest control services will be provided quarterly by a licensed pest control company.

- A. Staff will ensure the condition of the facility is not conducive to harboring or breeding insects, rodents or vermin.
- B. Upon discovery of any insects, rodents or vermin in the facility, staff will initiate immediate action to correct the problem.
  - 1. The shift supervisor will determine the need to move juveniles from affected location, pending pest control services.
  - 2. Maintenance staff will be notified as soon as possible.
- C. Maintenance staff will assess the problem and determine necessary action to eliminate the insects, rodents or vermin.

# **GP 6.50: Housekeeping Plans**

**Chapter:** Sanitation and Hygiene

Order No:

Effective: February 7, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** s3-JDF-4B-06

Classification: Public

# I. Policy

A. Routine housekeeping will be completed by staff and juveniles to ensure a clean and sanitary facility.

#### II. Definitions

A. N/A

#### **General Information**

B. N/A

- A. Housekeeping plans shall be prepared as directed by the Lieutenant and shall require the following:
  - 1. A cleaning schedule
  - 2. Specific assignments of sanitary duties for juveniles
  - 3. Time schedule for completion of duties
  - 4. Waste disposal procedures that provide for proper collection, storage and disposal of all liquid and solid waste. (see Waste Disposal Policy 6.30)
  - 5. Instructions for acquisition use, storage of cleaning supplies and equipment.
- B. Sanitation of living area (Includes Room)
  - 1. Each juvenile shall be responsible for the cleanliness of their living area at least once in a 24 hour period.
  - 2. Cleaning materials and supplies shall be provided to the juvenile. Juvenile is responsible for the proper use and care of these articles.
  - 3. Cleaning activities will be supervised to ensure the work is performed properly and supplies are used appropriately.

- 4. Living areas will be checked daily by staff. If staff determines living area is not adequately cleaned, juvenile will be asked to clean area again.
- C. Juveniles should be given specific cleaning instructions for the following areas:
  - 1. Common Areas
    - a. Sink, counter tops and cabinets
    - b. Walls, floors, tables, chairs, doors and glass
    - c. Shower, walls and floor

#### 2. Rooms

- a. Walls, window, door, vent and floor
- b. Desk and chair
- c. Medium secure sink and toilet
- d. Bed and mattress

# JSC 6.60: Clothes and Hygiene Articles

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-07, 08, 10, 14

Classification: Public

# I. Policy

A. Clean clothing and items necessary to maintain personal hygiene will be provided to all juveniles.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. The facility will maintain an adequate supply of clothing / hygiene to ensure there is no delay in replacing items that are lost, destroyed, worn-out, or soiled.

- A. Upon admission, each juvenile will be issued pants, t-shirt, over-shirt, socks, undergarments, and hygiene items.
  - 1. Hygiene items will be replaced as needed on a weekly schedule or as determined necessary by the Shift Supervisor.
- B. Juveniles are provided clean clothing daily or more often as needed.
- C. Staff issuing clean clothing will account for replaced items.

# JSC 6.70: Bedding/Linen Issue

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-07, 08, 12

Classification: Public

# I. Policy

A. Clean bedding and linen will be provided to all juveniles.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. The facility will have an adequate supply of bedding / linen so there is no delay in replacing items.

- A. Upon admission, each juvenile will be issued one sheet, one mattress cover, and one blanket. A mattress with pillow will be provided in assigned room. Issuance of additional items for health or room temperature issues will be at the discretion of staff.
- B. Clean sheets will be provided weekly and blankets every two weeks or more often as needed.
- C. Staff issuing clean bedding and linen will account for replaced items.

# JSC 6.80: Showers

**Chapter:** Sanitation and Hygiene

Order No:

**Revised:** February 7, 1996 **Revised:** December 30, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-13, 14, 15

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

Classification: Public

# I. Policy

A. Showers will be provided daily and as needed. Articles necessary for maintaining proper personal hygiene are provided to all juveniles.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. Detainees are able to shower without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

- A. Showers will be completed during pod scheduled times or as needed.
- B. Staff will issue clean clothing, towels, and hygiene items.
- C. Staff will direct the juvenile to the assigned shower.
- D. Staff will instruct the juvenile to complete shower in 5 minutes.
- E. Upon completion, staff will verify each item is returned by the juvenile.
  - 1. Each item will be inspected to ensure it is in acceptable condition.

# **JSC 6.90: Personal Care**

**Chapter:** Sanitation and Hygiene

Order No:

**Effective:** February 7, 1996 **Revised:** January 17, 2017 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4B-14, 15

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

Classification: Public

# I. Policy

A. Juveniles will be provided required articles necessary for maintaining proper personal hygiene.

#### **II.** General Information

A. Detainees are able to perform bodily functions and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when viewing is incidental to routine cell checks.

- A. Correctional staff will issue and supervise the use of shaving supplies.
  - 1. Juveniles on active watch will have constant supervision while shaving.
  - 2. Upon completion of shaving, all items will be accounted for by staff.
- B. Feminine hygiene products are issued by correctional staff to juveniles as needed.
- C. The facility will contract with a state licensed cosmetologist or barber to provide haircut services on site.
  - 1. Haircuts are provided free of charge after a detainee's initial 60 day stay and every 60 days thereafter.

# **JSC 7.10: Correspondence**

**Chapter:** Communications

Order No:

**Revised:** May 8, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3D-02, 3-JDF-5G-02, 03, 04, 05, 07, 08, 09, 10

Classification: Public

# I. Policy

A. Juveniles have the right to communicate or correspond in writing with persons or organizations subject only to the limitations necessary to maintain facility order and security.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. The amount of incoming and outgoing mail is unlimited except when the facility provides postage.
- B. All incoming and outgoing mail (excluding legal correspondence) must be delivered by a professional mail carrier and will be processed with 24 hours of receipt.
- C. Mail is only read, censored, or rejected when based on legitimate facility interest of safety and security
- D. Juveniles are notified in writing if incoming or outgoing mail is withheld in part or in full.
- E. First class mail received after a juvenile has been released or transferred will be forwarded, unopened, to the juvenile's current address. If no forwarding address is available, the mail will be returned to sender.

#### IV. Procedural Guidelines

# A. Incoming mail

- 1. The date, recipient, and sender are recorded in the computerized record system by clerical staff and the mail is routed to correctional staff to deliver to detainees.
  - a. Mail deemed inappropriate or larger than letter-size is routed to the Case Manager for evaluation and the juvenile is notified of the interruption within 24 hours.

- 2. Correctional staff will distribute mail in the housing units and record delivery in the computerized record system.
- 3. A staff member will open and inspect personal mail in the presence of the juvenile.
  - a. Legal mail will be given to the juvenile unopened. The juvenile will open it in the presence of staff to verify it contains no items that could jeopardize safety or security.
- 4. Any contraband found in the mail will be confiscated. (See Policy 18.90)
- 5. Other items received in incoming mail are subject to approval by the Shift Supervisor.
  - a. A receipt will be provided for any cash, checks, or money orders. (Policy 2.30)
  - b. Stamps received will be placed in an envelope and routed to clerical staff. A receipt will be provided to the juvenile.
- 6. Upon completion of inspection, the mail is given to the juvenile.

## B. Outgoing Mail

- 1. Pencils, paper, and envelopes will be available to the juveniles for outgoing mail.
- 2. Juveniles will place a completed letter in an envelope and seal. The letters must be properly addressed and the juvenile will use WSDJSC as the return address.
  - a. A maximum of 2 sheets of paper will be allowed in each letter.
  - b. No additional writing is permitted on the envelope.
- 3. Juvenile will give the mail to the correctional staff.
- 4. Correctional staff will verify letter is properly addressed and appropriate size.
  - a. Mail not meeting the standard will be returned to the juvenile.
- 5. Correctional staff will record receipt of the outgoing mail in the computerized record system and route to clerical staff.
- 6. Clerical staff will apply appropriate postage.
  - a. The facility will provide postage for one personal letter for each juvenile each week.
  - b. Juveniles may send unlimited mail using their own postage. Postage is maintained in Administration and affixed to letters by clerical staff.

- c. Legal correspondence will be delivered at no charge.
- 7. The date, sender, and intended recipient are recorded in the computerized record system by clerical staff.
- 8. Upon completion, mail is routed to the professional mail carrier.

# **JSC 7.20:** Access to Publications

**Chapter:** Communications

Order No:

**Effective:** May 8, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-5G-06

Classification: Public

# I. Policy

A. Juveniles will have access to publications which may be monitored or restricted for facility safety and security.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. The facility will provide several publications to adequately stock the libraries with a variety of age and interest appropriate publications.
- B. Publications may be retained or refused if determined to contain content detrimental to facility order or not age appropriate for juveniles. Inappropriate content would include, but is not limited to:
  - 1. Encouraging criminal or sexual behavior.
  - 2. Advocating racial, religious, or national hatred.
  - 3. Advocating violence or disorder with the facility.
  - 4. Instructions for the manufacture of explosives, drugs, or other unlawful substances.

- A. Publications will be reviewed for appropriateness before being placed in the facility libraries.
- B. Approved publications will be evenly dispersed among the facility libraries and rotated throughout the facility to allow all juveniles equal access.
- C. Juveniles will have access to publications through facility library services. (Policy 10.30)

# JSC 7.30: Telephone

**Chapter:** Communications

Order No:

Effective: May 8, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-3D-01, 02, 3-JDF-5A-11, 3-JDF-5G-11

Classification: Public

# I. Policy

A. To maintain ties to the community and contact with attorneys, each juvenile shall have equal and adequate access to a telephone. Juveniles may make calls with a reasonable amount of privacy.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

#### A. Initial Phone Calls

- 1. During the admission process, a juvenile may make one call to parent/guardian and one call to their attorney or caseworker.
- 2. Intake staff will initiate phone call and log in computerized record system.
- 3. Juvenile is allowed to talk for ten minutes.

## B. Outgoing Calls

- 1. Juveniles will have access to a collect call phone in the housing units during approved times and will place calls by following the phone system instructions.
- 2. Juveniles may call their attorneys at no charge.
  - a. Juveniles who are unable to contact their attorney because the attorney's phone number has not been entered into the phone system will be instructed by correctional staff to list the attorney's name and phone number on a phone service request form.
  - b. Once the phone number has been verified as belonging to the juvenile's attorney, the Commander, or designee, will ensure the phone number is entered into the phone system.

# C. Incoming Calls

- 1. Juveniles are not allowed incoming calls except when approved by the Shift Supervisor.
  - a. The Shift Supervisor may approve incoming calls in extraordinary and time sensitive situations.
  - b. Juvenile will be moved to a location with access to facility business phone.

# **JSC 7.40: Juvenile Visiting**

**Chapter:** Communications

Order No:

**Revised:** May 9, 2011 **Revised:** April 22, 2015 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-2E-03, 04, 3D-01, 02, 5G-12, 13, 14, 15

Classification: Public

## I. Policy

A. Juveniles will be allowed personal and professional visits subject only to the limitations necessary to maintain facility order and security.

#### II. Definitions

- A. **Personal:** Visit from approved family members during scheduled visitation times.
- B. **Professional:** Visit from attorneys, counselors, case managers, and others providing professional services to the juvenile as approved by holding authority.
- C. **Noncontact:** Juvenile and visitors are separated by glass and voice communication is accomplished with phones and speakers. Used for juveniles who are a threat to others, present a serious escape risk, or require protection.
- D. **Special:** Visits made at least 24 hours in advance and approved by the Shift Supervisor if unable to participate in regular visitation times.
- E. **Skype:** a telecommunications application software that specializes in providing video chat and voice calls from computers, tablets and mobile devices via the Internet to other devices or telephones / smartphones.

#### III. General Information

- A. Personal visitation will be in the gym or other common areas with sufficient space for contact visiting and to permit informal communication with reasonable privacy.
- B. Professional visits will occur in conference rooms or other areas providing confidential and uninterrupted contact, subject only to safety and security limitations and availability of rooms.
- C. Visitation areas will be accessible by juveniles and visitors with disabilities.
- D. Parents, guardians, grandparents, siblings, juvenile's spouse, and biological children will be allowed to visit the juvenile in detention.
- E. Personal visitation will occur as scheduled for the juvenile's assigned housing unit.
- F. A maximum of 2 personal visitors will be allowed during visitation.

- G. Visitors under the age of 18 must be accompanied by an adult.
- H. If any items are exchanged between the personal visitor and the juvenile, the items must be routed through and approved by the supervisor. Professional visitors are to notify staff if any item is given to the juvenile during the visit.
- I. All visitors will be required to register, provide identification, and pass a metal detector screening before being allowed to visit.
  - 1. Visitors and their belongings may be searched by staff for safety or security reasons.
- J. A visit may be denied or terminated at any time by the supervisor for violations of visitation rules or safety and security concerns.
  - 1. The supervisor will inform the visitor and the juvenile of the reason for denying or terminating the visit and complete an Incident Report.
- K. A juvenile may refuse to meet with a visitor. If this happens, staff will document the refusal in the computerized record keep system.

#### IV. Procedural Guidelines

#### A. Personal Visitation

- 1. Visitor will arrive prior to scheduled start time to complete a visitor registration form.
- 2. Visitor will submit completed registration form and a photo ID to staff.
- 3. Staff will verify identification and ensure visitor is approved to visit.
- 4. Staff will enter visitor information into the computerized record system.
- 5. Visitors are required to remove all unnecessary personal belongings or excess clothing and secure in their vehicle or lockers provided.
- 6. Visitors will be screened for contraband and must successfully pass through metal detector.
  - a. Visitors not able to pass screening may be subject to further searchers or denial of visitation.
- 7. After being successfully screened, visitors will be directed to an area to wait pending the start of visitation.
- 8. Staff will escort visitors to the visitation area at the start of the visit.
  - a. Visitors and juveniles will be directed where to sit by staff.
  - b. Visitors and juveniles may briefly hug at the start and end of the visit, as long as staff can ensure contraband is not passed.

- 9. During visitation staff will be positioned in a location that allows adequate supervision, but still provide reasonable privacy for the visit.
- 10. Upon completion of the visit, staff will escort the visitors back to the main entrance.
  - a. Visitors will retrieve personal belongings and leave the facility.
- 11. Staff will document the end of visitation in the computerized record system.

## B. Professional Visits

- 1. Visitor will check in at the front entrance, or control room after business hours.
- 2. Visitor will provide a photo ID to staff and sign into the Professional Visitor Log.
- 3. Staff will verify identification and ensure professional is approved.
- 4. Staff will enter visitor information in to the computerized record system and provide professional visitor ID badge.
- 5. Visitors are required to remove all unnecessary personal belongings or excess clothing and secure in their vehicles or lockers provided.
  - a. Briefcases, laptops, or other items being brought in for the visit are subject to search for contraband.
- 6. Visitors must successfully pass metal detector.
  - a. If they are not able to pass screening, they may be subject to further searches or denial of visitation.
- 7. Supervisor will be notified of the visit and staff will direct the visitor to the assigned visitation area.
- 8. Staff will escort the juvenile to the location for the visit and instruct the visitor to not leave the juvenile unattended.
  - a. Staff will not directly supervise the visit, but will be available to monitor the visit.
- 9. Upon completion of the visit, staff will escort the juvenile. The visitor will return to the main entrance.
- 10. The visitor will sign out of the Professional Visitor Log, return visitor ID badge, retrieve personal belongings, and leave the facility.
- 11. Staff will document the end of the visitation in the computerized record system.

## C. Special Visits

- 1. Contact, non-contact or Skype visits may be authorized if the approved visitor is unable to attend or unable to participate in regular visitation.
- 2. The juvenile or visitor submits a request for a special visit to the Case Manager or Supervisor. Request will include:
  - a. The reasons the visitor cannot visit during regular visitation.
  - b. The dates and times for special visit.
- 3. Detainees in good standing who have been at the facility for at least 60 days may request a one-time special visit from a person of their choosing if:
  - a. Approved by the facility, the holding authority and/or parent/legal guardians.
- 4. Supervisor will evaluate circumstances of the request.
  - a. If approved, the Supervisor will set the date and time for the visit and document in the computerized record system.
  - b. The supervisor will notify staff of the date, time, location, and approved visitors for the special visit.
  - c. The supervisor will notify the visitor and juvenile of the status of the special visit request.
  - d. Special visits will last 25 minutes. If the visitor is coming from far away, an extended visitation may be authorized.

# JSC 8.10: Legal Rights of Juveniles

**Chapter:** Juvenile Rights

Order No:

Effective: May 8, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** ACA 3-JDF-3D-01, 02; Bureau of Prisons Statement of Work

Classification: Public

# I. Policy

A. Juveniles will be granted access to the courts, their attorneys, and authorized representatives, to include confidential contact by telephone, uncensored correspondence, and visits. Juveniles seeking judicial relief will not be met with reprisal or penalty.

#### **II.** Definitions

A. Legal Representative: Assigned or retained attorney; attorney of record.

#### **III.** General Information

A. N/A

- A. Staff will inform juveniles of the legal resources available. Staff will not engage in conversation that might be construed as legal advice.
- B. Staff will provide juveniles access to the telephones which may be used to contact their legal representative. See Policy 7.30.
  - 1. If the juvenile is unable to make contact, the parent/legal guardian will be asked to assume responsibility for the contact.
  - 2. Upon request of the juvenile to call their legal representative, staff will facilitate such contact as soon as possible.
- C. Staff will provide writing supplies and materials so juveniles may write to legal representatives and judges. See Policy 7.10.
- D. Staff will facilitate visits between the legal representatives and juveniles as requested by the legal representative, subject to operational demands. See Policies 7.30 and 7.40.

# **JSC 8.20: Rights of Juveniles in Detention**

**Chapter:** Juvenile Rights

Order No:

**Revised:** May 8, 1996 **Revised:** September 5,2019 **Approved by:** Sheriff Kevin Thom

**Reference:** ACA 3-JDF-3D-03, 04, 04-1, 06, 07; Bureau of Prisons Statement of Work

Classification: Public

# I. Policy

A. The rights of juveniles are recognized and protected while in detention.

#### II. Definitions

A. N/A

- A. Juveniles have the following rights:
  - 1. To be treated respectfully, impartially, fairly and to be addressed by name in a dignified manner.
  - 2. To be informed of the facility rules, procedures, and schedules.
  - 3. To be protected from personal abuse, corporal punishment, personal injury, disease, property damage, intimidation, and harassment.
  - 4. To be protected from sexual abuse and sexual harassment.
  - 5. To have equal access to all services and programs and not be subject to discrimination based on race, religion, national origin, sex, physical handicap, or political views.
  - 6. To participate in religions services and religious counseling on a volunteer basis, subject only to limitations necessary to maintain facility order and security. They will have access to clergy, spiritual advisors, publications, and related services that allow them to adhere to their religious practices.
  - 7. To nutritious meals, proper bedding, clean clothes, toilet facilities, daily showers, adequate lighting, proper ventilation, and an overall safe environment. Freedom in personal grooming and dress is allowed except when a valid interest justifies otherwise.
  - 8. To necessary medical, mental health and dental treatment.
  - 9. To visits with family and to send and receive uncensored correspondence, subject only to the limitations necessary to maintain order and security.

- 10. To call, write, and meet with their legal representative.
- 11. To indoor and outdoor recreational equipment and opportunities.
- 12. To not participate I uncompensated work assignments unless the work is related to housekeeping, maintenance of the facility, or personal hygiene.
- 13. Juveniles have the right to appeal any disciplinary action taken against them as a result of a rule violation. The juveniles have a right to a response to their appeal in accordance with the appeal procedures.

- A. All staff will receive training on the rights of juveniles and procedures for ensuring the rights are not violated.
  - 1. New staff will receive training on juveniles' rights and the grievance procedure during initial training.
  - 2. Existing staff will receive updated or refresher training related to the rights of juveniles as needed.
- B. Juveniles will be given a handbook that includes their rights and the grievance procedure.
- C. During the orientation process, staff will inform juveniles of their rights and explain how to file a grievance if they feel their rights have been violated. See Policy 8.50.

# JSC 8.30: Addressing and Reporting Abuse and Neglect

**Chapter:** Juvenile Rights

Order No:

Effective: May 8, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** ACA 3-JDF-3D-06-1, SDCL 26-8A-2, 26-8A-3, 26-8A-4, 26-8A-8, 26-8A-13,

26-8A-14

Classification: Public

# I. Policy

A. All suspected incidents of child abuse or neglect consistent with SDCL 26-8A-2 will be reported to law enforcement as required by SDCL 26-8A-3 and SDCL 26-8A-8.

## II. Definitions

A. N/A

#### **III.** General Information

A. Staff will adhere to SDCL 26-8A-4, requirement of mandatory reporting of reasonable cause to suspect a child has died as a result of abuse or neglect.

- A. All staff and volunteers will receive training on the indications of suspected child abuse or neglect and mandatory reporting laws.
- B. Upon reasonable cause to suspect abuse or neglect staff / volunteers will immediately report their concerns to the Shift Supervisor.
  - 1. Any failure to report on the part of a staff member will be thoroughly investigated. Disciplinary action up to and including termination may result if knowingly failure to report is proven.
- C. The Shift Supervisor will contact a Pennington County Sheriff's Deputy to respond and complete a formal report.
  - 1. The Shift Supervisor will request a response report be sent to the WSDJSC Commander.
  - 2. Involved staff members will submit an incident report.
    - a. The report will include the substance of how reasonable cause was formed and the specifics of the reporting to the responding deputy.
    - b. Any person making a good faith report of suspected abuse and/or neglect shall have immunity per SDCL 26-8A-14.

- c. All information related to the report of abuse or neglect will be kept confidential per SDCL 26-8A-13.
- D. After the report has been made, any investigation and determination of abuse or neglect will be the responsibility of law enforcement and the Department of Social Services.
- E. If a staff member or volunteer is suspected of the abuse or neglect, the WSDJSC Commander will be contacted immediately.
  - 1. The Commander will consult with the Sheriff regarding actions that may include, but are not limited to:
    - a. Having the juvenile examined by a physician.
    - b. Notifying the juvenile's parents/legal guardian
    - c. Notifying court of jurisdiction.
    - d. Promptly record/gather information associated with the allegation for permanent file at the facility.
    - e. Initiating suspension or termination of employment or volunteer status as necessary.

# JSC 8.40: Juvenile Access to News Media

**Chapter:** Juvenile Rights

Order No:

**Revised:** May 8, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** ACA 3-JDF-3D-05

Classification: Public

# I. Policy

A. Juveniles will have reasonable access to the general public through the media, subject only to the limitations necessary to maintain facility order and security and protect the juveniles' rights.

## II. Definitions

A. N/A

#### III. General Information

A. Juvenile confidentiality will be maintained at all times in accordance with SDCL 26-7A-27 and 26-7A-28.

- A. Requests to interview a juvenile will be submitted in writing to the Commander.
- B. Requesting media agency must provide written approval/consent from the juvenile's parent/guardian, attorney, or the Juvenile Judge.
- C. If approved by the Commander, assigned staff will facilitate the interview in a designated area away from other juveniles.
  - 1. Any approved audio or video recording equipment will only be used in the designated location during the interview.
- D. The juvenile may refuse to participate in or terminate the interview at any time.

# JSC 8.50: Grievance Procedure

**Chapter:** Juvenile Rights

Order No:

**Effective:** April 1, 1997 **Revised:** March 13, 2020 **Approved by:** Sheriff Kevin Thom

**Reference:** ACA 3-JDF-3D-08, Bureau of Prisons Statement of Work

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

Classification: Public

# I. Policy

A. A formal grievance process is available to all juveniles who believe their rights have been violated. All grievance will be handled without threats of reprisal to the juvenile who filed the grievance.

## **II.** Definitions

A. Grievance: a circumstance or action considered to be unjust; grounds for complaint.

#### **III. General Information**

A. N/A

- A. During the orientation process, juveniles will be informed of their rights and of the grievance procedure.
  - 1. Juveniles will be encouraged to resolve the complaint informally with the staff on duty whenever possible.
- B. Grievance forms will be available to the juveniles in all housing units.
  - 1. The juvenile will complete a grievance form, stating the specific nature of the complaint and which right was violated.
  - 2. Staff will assist the juvenile in completing grievance as needed.
- C. Completed grievances must be submitted within 5 days of the onset of condition(s) being grieved with the exception of the Prison Rape Elimination Act (PREA) related grievances that have no time limits for submission.
  - 1. Grievances will be placed in the locked confidential communication box.
  - 2. Grievances will be collected daily by the Corrections Lieutenant or designee.

- D. Detainees who believe they are in imminent danger of sexual abuse may submit an emergency grievance directly to the Shift Supervisor or another staff member.
- E. The Corrections Lieutenant, or designee, will review the contents of the grievance and initiate an investigation into the complaint.
  - 1. Immediate action will be taken to ensure the safety and well-being of the juvenile.
  - 2. PREA related grievances will be investigated as outlined in Policy 8.90 Response to Sexual Assault.
- F. All persons involved or having information relevant to the grievance will be interviewed or provide a written statement.
- G. After the investigation is completed, the Corrections Lieutenant, or designee, will determine if the information supports the grievance.
- H. The Corrections Lieutenant, or designee, will provide a written response to the juvenile within 5 days of receipt of the grievance.
  - 1. The response will include the reasons for the decision.
  - 2. If the grievance is substantiated, the actions taken to correct the situation will also be included in the response.
  - 3. The Commander will review the responses to all grievances.
  - 4. The original grievance will be placed in the juvenile's file and Administration will keep a copy on record.
  - 5. Detainees may not be disciplined for submitting a grievance unless demonstrated the grievance was made in bad faith.
- I. If not satisfied with the response, the juvenile may appeal the decision to the Commander in writing within 5 days of the response.
- J. The Commander will provide a written response to the appeal to the detainee upon completion of necessary investigation, but no later than 5 days after receipt of the appeal.

# **JSC 8.60: Zero Tolerance**

**Chapter:** Juvenile Rights

Order No:

**Effective:** July 11, 2016 **Revised:** March 13, 2020 **Approved by:** Sheriff Kevin Thom

Reference: Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

South Dakota Codified Law 22-22-7.6

ACA: 3-JDF-3D-06-2, 3-JDF-3D-06-3, 3-JDF-3D-06-4, 3-JDF-3D-06-6, 3-JDF-

06-7, 3-JDF-3D-06-8, 3-JDF-3D-06-9, 3-JDF-3D-06-10

Classification: Public

# I. Policy

A. The Western South Dakota Juvenile Services Center complies with the standards set forth in the Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part 115 in support of eliminating sexual abuse in confinement and maintaining a safe environment for detainees.

#### II. Definitions

- A. **JSC Interdisciplinary Treatment Team:** The team consists of Administration, Medical, Mental Health, Shift Supervisors, Case Managers, and a Spiritual Leader when needed. The team develops a special behavior management program plan which encourages self-discipline through behavior modification system of rewarding positive behavior.
- B. See Appendix I

- A. The Western South Dakota Juvenile Services Center maintains zero tolerance toward all forms of sexual abuse/harassment/misconduct.
- B. South Dakota Codified Law 22-22-7.6 specifies sexual acts between any person employed at a juvenile correctional facility and a detainee is a felony.
- C. All staff, volunteers and contractors having contact with detainees will be trained on the Prison Rape Elimination Act's standards.
  - 1. Each employee will receive refresher training every two years.
- D. All inmates will receive information explaining the facility's zero tolerance of sexual abuse/harassment/misconduct and ways of reporting upon intake and then a more comprehensive education within PREA standards time frame.

- 1. Education will be provided in formats accessible to all detainees (i.e., Spanish, etc.).
  - a. WSDJSC prohibits the use of detainee interpreters, readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety.
- 2. Posters and handbooks containing key information will be continuously available and visible for detainees.
- E. All detainees will be screened upon intake for risk of sexual victimization or sexual abusiveness within 24 hours of arrival at the facility.
  - 1. The screening information will be used to inform housing, bed, education, and program assignments with the goal of keeping separate those deemed high risk of being victimized from those at high risk of being sexually abusive.
  - 2. If further relevant information becomes available after the intake screen, a reassessment may be conducted.
- F. The Western South Dakota Juvenile Services Center provides detainees multiple methods for reporting sexual abuse/harassment/misconduct.
  - 1. Written letter, grievance, request, etc;
  - 2. Verbal;
  - 3. Anonymous reports;
  - 4. Contacting a rape crisis center;
  - 5. Third part reports; and/or,
  - 6. Calling the Tip Line or Help Line.
- G. Western South Dakota Juvenile Services Center staff may also privately report sexual abuse/harassment/misconduct.
- H. All reports or allegations of sexual abuse/harassment/misconduct are documented and investigated.
  - 1. If determined criminal in nature, the internal investigation immediately ceases and is turned over to law enforcement.
  - 2. All reasonable efforts will be made to protect detainees and staff who report or cooperate with the investigation of, sexual abuse/harassment/misconduct from retaliation by other detainees, staff or volunteers.
    - a. Detainees and staff will be monitored for retaliation.

- 3. Detainees will be notified of the outcome of the investigation.
  - a. The notification will be documented.
- I. Western South Dakota Juvenile Services Center will provide victims of sexual abuse access to outside victim advocacy and medical and mental health care, based on the current standard of care.
  - 1. Medical and mental health care will be provided to the victim, without financial cost to the victim.
- J. Detainees who make false reports will be subject to disciplinary action and possible criminal prosecution.
  - 1. Reports made in good faith will not be subject to disciplinary or criminal action.
- K. Detainees who are found guilty of violating this policy will be subject to disciplinary sanctions and criminal prosecution, if determined criminal in nature.
- L. Staff who are found guilty of violating this policy will be subject to disciplinary sanctions, up to and including termination of employment, and criminal prosecution if determined criminal in nature.
  - 1. Contractors and/or volunteers will be prohibited contact with detainees and be reported to relevant licensing bodies in addition to referral to law enforcement if deemed criminal in nature.
- M. An incident review will be conducted at the conclusion of every sexual abuse investigation unless the incident is determined to be unfounded.
  - 1. The review will occur within 30 days of the conclusion of the administrative investigation.
  - 2. The PREA Investigator and the JSC Interdisciplinary Treatment Team will participate in the incident review.
- N. Sexual abuse data will be kept, reviewed, and securely retained.
  - 1. Sexual abuse data will be made publicly available at least annually through the website of the Pennington County Sheriff's Office.
    - a. All personal identifiers will be removed.

A. N/A

# JSC 8.70: Admission Assessment

**Chapter:** Juvenile Rights

**Order No:** N/A

**Effective:** 

**Revised:** January 4, 2017 **Approved by:** Sheriff Kevin Thom

**Reference:** Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

ACA: 3-JDF-3D-06-3, 3-JDF-3D-06-6

Classification: Public

# I. Policy

A. Western South Dakota Juvenile Services Center complies with the standards set forth in the Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part 115 through screening detainees for risk of either sexual abusiveness or sexual vulnerability upon admission.

#### II. Definitions

A. See Appendix I

- A. All detainees will be screened for risk of sexual victimization or sexual abusiveness within 24 hours of admission to the facility.
  - 1. The screening information will be used to assist in determining housing, bed, work, education and program assignments with the goal of keeping separate those deemed high risk of being victimized from those at high risk of being sexually abusive.
  - 2. Detainees identified as risk for victimization or abusiveness will be assessed by mental health or qualified professional.
  - 3. Detainees will be reassessed every thirty days.
- B. The screening will include, but is not limited to:
  - 1. Whether the detainee has a mental, physical or developmental disability;
  - 2. Age;
  - 3. Physical build;
  - 4. Incarceration history;

- a. Prior history of institutional violence or sexual abuse
- 5. Criminal history;
  - a. Violent vs non-violent,
  - b. Sex offenses,
- 6. History of sexual victimization or abusiveness;
- 7. Whether the detainee is or is perceived to be gay, lesbian, bisexual, transgender or gender non-conforming;
- 8. Detainee's own perception of vulnerability; and,
- 9. Any other specific information about individual detainee that may indicate heightened needs for supervision, additional safety precautions, or separation from other detainees.
- C. Detainees may not be disciplined for refusing to answer any question on the screening.
- D. Western South Dakota Juvenile Services Center will implement appropriate controls on the dissemination within the facility in order to ensure any sensitive information is not exploited to the client's detriment by staff or other detainees.

A. N/A

# **JSC 8.80: Reporting**

**Chapter:** Juvenile Rights

Order No: N/A

Effective: 07-11-2016
Revised: March 13, 2020
Approved by: Sheriff Kevin Thom

**Reference**: Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

Classification: Public

# I. Policy

A. Western South Dakota Juvenile Services Center will provide multiple methods for detainees and staff to report sexual abuse/harassment/misconduct and/or retaliation in compliance with the Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part 115.

## **II.** Definitions

A. See Appendix I

- A. Facilities will accept multiple methods of reporting sexual abuse/harassment/misconduct and/or retaliation to include, but not limited to:
  - 1. Written letter, grievance, request, etc;
    - a. Detainees are provided access to tools necessary to make a written report if requested, including but not limited to: writing utensil, paper and envelope.
  - 2. Verbal reports;
    - a. All verbal reports are documented immediately by the person receiving the report.
  - 3. Anonymous reports;
  - 4. Contacting a rape crisis center,
  - 5. Third party reports; and/or,
  - 6. Tip Line.
- B. All staff members are required to report any knowledge, suspicion, or information they receive regarding any of the following:
  - 1. Any incident of sexual abuse/harassment/misconduct occurring in any facility;

- 2. Any act of retaliation against detainees or other staff who have reported such an incident; and/or,
- 3. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- C. Staff is prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.
- D. All reasonable efforts will be made to protect detainees and staff from retaliation for reporting or cooperating with the investigation of, sexual abuse/harassment/misconduct.
- E. Employees accused of sexual abuse/harassment/misconduct will be afforded their rights and due process in accordance with the Pennington County Employee Handbook, Garrity rules and other applicable laws.
- F. There is no time limit on reporting sexual abuse/harassment/misconduct.

- A. Report of Abuse occurring at another facility
  - 1. In the event an allegation is received that a detainee was sexually abused while confined at another facility, the Commander or designee notifies the head of the facility or appropriate investigative agency where the alleged abuse occurred.
    - a. Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation. The following information is documented:
      - 1) Date and time of calls to the agency and/or investigative agency;
      - 2) Name of person(s) spoken to regarding the allegation; and,
      - 3) The type of details related to the agency and investigative agency.
- B. Reporting of Abuse occurring at a Pennington County Facility.
  - 1. Upon receipt of any allegation a detainee has been sexually abused while in the facility's care, law enforcement is notified as soon as possible.
- C. Third Party Report of Abuse occurring at the Western South Dakota Juvenile Services Center.
  - 1. Upon notification from another agency that a detainee has reported abuse that allegedly occurred while in the custody of Western South Dakota Juvenile Services Center; the Commander or designee immediately reports the allegation to the Chief Deputy or Sheriff and ensures the allegation is investigated in accordance with Prison Rape Elimination Act (PREA) standards and investigated by law enforcement if criminal in nature.

- 2. Third parties, including fellow detainees, family members, attorneys, outside advocates and others, are permitted to assist filing reports, allegations, grievances and requests for administrative remedies relating to allegations of sexual abuse, and are permitted to file such requests on behalf of detainees.
- 3. If the allegation involves the Commander, or if the Commander is not available at the time of the allegation, the employee reports directly to the Chief Deputy or Sheriff.
- 4. Any and all reports or allegations received regarding sexual abuse or sexual harassment will be documented, regardless or outcome.

# JSC 8.90: Response to Sexual Assault

**Chapter:** Juvenile Rights

Order No:

**Effective:** July 11, 2016 **Revised:** January 07, 2020 **Approved by:** Sheriff Kevin Thom

**Reference:** Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

ACA: 3-JDF-3D-06-4

**Classification:** Public

# I. Policy

A. Western South Dakota Juvenile Services Center conducts an investigation whenever an allegation of sexual assault or abuse or threat of sexual assault is reported and provides appropriate medical and/or mental health treatment.

## **II.** Definitions

A. See Appendix I

- A. The Western South Dakota Juvenile Services Center requires mandatory training for staff, volunteers, and contractors to prevent, detect and respond to sexual assault/abuse/harassment/misconduct and/or retaliation.
- B. The Detainee Handbook contains the following information which is available to the inmates:
  - 1. Prevention/intervention of sexual assault;
  - 2. Self-protection;
  - 3. Reporting sexual abuse/assault; and,
  - 4. Treatment and counseling.
- C. Detainees who are victim of sexual assault/abuse/harassment/misconduct may report the incident to any JSC staff member, volunteer, third part or contractor.
- D. WSDJSC's response to any sexual abuse allegation is a coordinated effort among security, medical and mental health staff.
- E. All alleged acts of sexual assault are referred to law enforcement for investigation.
- F. Detainees who are victims of sexual assault are provided appropriate medical treatment and counseling.

#### A. Imminent Risk for Sexual Abuse

- 1. Upon learning a detainee is subject to substantial risk of imminent sexual abuse, immediate action will be taken to protect the detainee. This includes but is not limited to:
  - a. Ensuring the detainee is separated from potential abuse;
  - b. Conduct an administrative investigation;
  - c. Contacting law enforcement, if deemed necessary;
  - d. Provide medical/mental health care as necessary; and,
  - e. Monitor the detainee for conduct and retaliation.

## B. Sexual Abuse/Assault

- 1. Immediately upon receiving a report of sexual assault of a detainee, the person (security or non-security staff) receiving the report will immediately contact the Shift Supervisor.
- 2. The Shift Supervisor coordinates with Security Staff to immediately take measures ensuring the safety of the reported victim. The measures include, but are not limited to:
  - a. Ensuring the victim is separated from the assailant;
  - b. Separation from alleged staff abuser, if applicable;
  - c. Takes steps to immediately preserve any forensic evidence to include;
  - d. Preserving detainee clothing of the victim and alleged perpetrator,
  - e. Sealing off the vicinity where the assault took place, and
  - f. Not allowing the victim or alleged perpetrator to shower, brush teeth, change clothes, urinate, etc. and,
- 3. Notify the Pennington County Sheriff's Office Law Enforcement Division of the alleged sexual assault.
- C. The Pennington County Sheriff's Office Law Enforcement Division will provide direction on any further actions to take until the deputy or investigator arrives on the scene.
- D. The Shift Supervisor notifies the JSC Commander or designee; who notifies the Chief Deputy or Sheriff.

- 1. The Commander or designee, reports the allegations to the victim's parents, legal guardian, and legal representatives within 14 days of receiving the allegation.
  - a. The notification is documented.
- E. Arrangements are made by the deputy or investigator to have the detainee transferred to the Emergency Room at Rapid City Regional Hospital, when appropriate, for a forensic physical examination, collection of evidence, and/or any prophylactic treatment.
  - 1. This includes pregnancy testing and/or testing for sexually transmitted disease.
- F. The Western South Dakota Juvenile Services Center medical staff provides medical care, if needed, to the detainee prior to the detainee being transferred to Rapid City Regional Hospital.
  - 1. Any forensic evidence collected by medical staff is given to the investigator assigned to the case.
- G. The alleged perpetrator will be separated from general population, if applicable.
- H. If the alleged perpetrator is a staff member, the staff member will be separated from the victim pending further instruction from the Commander or designee.
- Medical and Mental Health offers timely and comprehensive services as appropriate; to include, but not limited to: follow up medical care, treatment plans, and referrals, if necessary.
- J. The JSC Interdisciplinary Treatment Team will determine if the victim can be housed at the Western South Dakota Juvenile Services Center or, if in the victim's best interest and safety, the detainee should be moved to another correctional facility.
  - 1. If it is the recommendation the detainee be moved to another facility, the Chief Deputy or Sheriff is to be contacted for final approval.
- K. All staff involved completes an Incident Report. The Shift Supervisor routes all reports to the JSC Commander for review prior to the end of shift.
- L. All case records and medical records associated with claims of sexual abuse are scanned into a records database system.
  - Medical records associated with the sexual assault are available only to the JSC Command Staff, medical staff and designated clerical staff who are assigned the responsibility of imaging and retrieving medical records or for the investigation and prosecution of a criminal case.

- M. Upon completion of the law enforcement investigation, the administrative investigation will begin per Policy JSC 8.90.
- N. Detainees and staff involved are monitored for retaliation per Policy JSC 8.60.

# **JSC 8.100: Investigations**

**Chapter:** Juvenile Rights

Order No:

**Effective:** July 11, 2016 **Revised:** January 17, 2017 **Approved by:** Sheriff Kevin Thom

Reference: Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

ACA: 3-JDF-3D-06-4

**Classification:** Public

## I. Policy

A. The Western South Dakota Juvenile Services Center will investigate any allegation of sexual abuse/harassment/misconduct in support of Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part 115.

#### II. Definitions

A. See Appendix I

- A. The Western South Dakota Juvenile Services Center will conduct administrative investigations of any allegation of sexual abuse/harassment/misconduct.
  - 1. Any allegation determined criminal in nature will be immediately referred to law enforcement.
    - a. The administrative investigation will cease until the criminal investigation is complete.
    - b. The facility will cooperate fully with outside agencies conducting investigations into reports of sexual abuse/harassment/misconduct.
- B. Staff conducting administrative investigations receives specialized training.
- C. All administrative investigations are completed in a prompt, thorough, and objective manner.
  - 1. Investigations will continue even if alleged victim and/or alleged perpetrator have left the facility.
- D. An investigator will use the "preponderance of evidence" in determining whether allegations of sexual abuse/harassment/misconduct are substantiated.

- E. The final report will include, at a minimum:
  - 1. An effort to determine whether staff actions or failures to act contributed;
  - 2. A description of the physical and testimonial evidence;
  - 3. Reasoning behind credibility assessments; and,
  - 4. The investigative facts and findings.
- F. All written reports are retained as long as alleged abuser is incarcerated or employed by the agency, plus five years.

- A. The investigator:
  - 1. Reviews any available electronic monitoring data;
  - 2. Any prior complaints and reports of sexual abuse/harassment/misconduct involving the alleged perpetrator(s);
  - 3. Interviews victim, alleged perpetrator(s), and witnesses;
  - 4. Determines if there is a preponderance of evidence to substantiate the allegation;
  - 5. Prepares the final report; and,
  - 6. Informs the victim(s) and perpetrator(s) of the outcome of the investigation.
    - a. If staff is involved, the notification will include whether the staff member has been fired and/or conviction status.
    - b. The notification is documented.

# Appendix I

# **Prison Rape Elimination Act Policies Definitions**

- A. **Administrative Investigation** Investigation conducted within the facility that determines whether a facility rule or policy, that may not be criminal in nature, was violated.
- B. **Aggressor** Any person committing sexual abuse/harassment/misconduct against another. The aggressor may be the same or different gender as the victim.
- C. **Consent** To give permission for something to happen.
- D. **Contracted Employees** Staff who are hired for a specific job providing service to the agency but are not considered general staff. Example- CBM Food Service
- E. **Contractor** Individual who provides a recurring service to the facility or agency which allows the individual access to inmates.
- F. **Exigent Circumstances** Any set of temporary or unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.
- G. Garrity Warning- Advisement of rights to employees during an internal investigation.
- H. **Gender Nonconforming** A person whose appearance or manner does not conform to traditional societal gender expectations.
- I. Intersex- A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.
- J. **Miranda Rights-** warning given to individuals prior to interrogation to protect the person from self-incrimination and to preserve the admissibility of their statement in criminal proceedings.
- K. **Pat Search-** Search conducted by confinement staff which staff runs their hands over the clothed body of an inmate to determine the existence of contraband.

- L. **Prison Rape Elimination Act of 2003 (PREA)-** Federal law passed in 2003 that aimed to curb sexual abuse/harassment/misconduct in detention settings by developing national standards that created zero tolerance toward sexual violence and made detention facilities more accountable.
- M. **Retaliation-** Any act of vengeance, covert or overt action, or threat of action taken against an individual in response to their claim of sexual abuse/harassment/misconduct or cooperation in the reporting or investigation of such, regardless of the disposition of the complaint. Examples include, but are not limited to:
  - 1. Unnecessary discipline;
  - 2. Verbal or physical intimidation or threats;
  - 3. Unnecessary changes in housing classification;
  - 4. Unnecessary changes in work or program assignments;
  - 5. Unjustified denials of privileges or services; and/or,
  - 6. Any action to compromise the victim or witness's safety including refusal or failure to protect.

#### N. Sexual Abuse-

- 1. Inmate on inmate sexual abuse includes the following if the victim does not or cannot consent, refuses, or is coerced by overt or implied threats of violence:
  - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and,
  - d. Any other intentional touching, either by directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

- 2. Staff on inmate sexual abuse includes any of the following:
  - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.
  - b. Contact between the mouth and the penis, vulva, or anus;
  - c. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
  - d. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire:
  - e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
  - f. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in (a)-(e) of this section;
  - g. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate; and,
  - h. Voyeurism by a staff member, contractor, or volunteer.

## O. Sexual Harassment-

- 1. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures or actions of a derogatory or offensive sexual nature by one inmate directed toward another; and,
- Repeated verbal comments or gestures of a sexual nature to an inmate by a staff
  member, contractor, or volunteer, including demeaning references to gender, sexually
  suggestive or derogatory comments about body or clothing, or obscene language or
  gestures.

- P. **Sexual Misconduct** All forms of sexual behavior prohibited by this policy regardless of whether it is consensual. Examples include, but are not limited to:
  - 1. Statements, comments or innuendo directly or indirectly concerning the actual or perceived sexual orientation of any person;
  - 2. Inmate or close relationships with another inmate defined as any relationship beyond the boundaries of a professional relationship;
  - 3. Intimate conversation or correspondence with an inmate; and/or,
  - 4. Creating an intimidating, hostile or offensive environment by engaging in or permitting sexually offensive behavior or language that is directed at or observable by others.
- Q. Sexual Violence- General term for all forms of sexual abuse/harassment/misconduct.
- R. **Staff** All direct employees of the Pennington County Jail, contracted employees, contractors, volunteers who have access to inmates.
- S. **Strip Search** Search of an individual that requires a person to remove or arrange some of all clothing so as to permit a visual inspection of the person's breasts, buttocks, or genitalia.
- T. **Substantiated Allegation** Outcome of an investigation in which the event was determined to have occurred.
- U. **Transgender-** A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned birth sex.
- V. **Unfounded Allegation** Outcome of an investigation in which the event was determined not to have occurred.
- W. **Unsubstantiated Allegation** Outcome of an investigation that provided insufficient evidence to make a final determination as to whether or not the event occurred.
- X. **Victim's Advocate-** A trained individual who provides emotional support to victims of sexual violence.

- Y. **Volunteer** Individual who donates time and effort on a recurring basis at a detainment facility.
- Z. **Voyeurism** An invasion of an inmate's privacy by a staff member, contractor, volunteer for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in their cell to perform bodily functions; requiring an inmate to expose their buttocks, genitals, or breasts; or taking images of all or part of an inmate's body or of an inmate performing bodily functions.
- AA. **Zero Tolerance** Policy of strict, uncompromising enforcement of rules/laws.

# **JSC 9.10: Behavior Management Program**

**Chapter:** Rules and Discipline

Order No:

**Revised:** April 1, 1997 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-DJDF-3C-01, 02, 03, 04

Classification: Public

# I. Policy

A. Information will be made available to both staff and juveniles at all times. Rules of conduct, sanctions, and procedures for rule violations are defined in writing and communicated to all juveniles and staff.

## **II.** Definitions

A. N/A

- A. The facility reward responsible behavior of individual juveniles through a badge system, which provides incentives and privileges for responsible behavior.
- B. Rules of conduct and the penalties that may be imposed when rules are broken are included in the WSDJSC Detainee Handbook, to be used as a guideline for both juveniles and staff (see policy 5.20)
- C. The following actions will never be used as a means of discipline or punishment:
  - 1. Corporal punishment
  - 2. Physical restraint
  - 3. Psychological intimidation
  - 4. Denial of regular meals
  - 5. Denial of medical care
  - 6. Denial of sufficient sleep
  - 7. Denial of sufficient exercise
  - 8. Denial of contact with parents/legal guardians
  - 9. Denial of legal assistance
- D. Discipline will never be administered in a way that would degrade or humiliate the offender, and will be proportionate to the seriousness of the misbehavior.

- A. Staff will receive sufficient training so they are thoroughly familiar with facility rules, the rationale for those rules, and the sanctions available.
  - 1. The facility training designee will schedule all applicable training.
- B. The Commander will review the policies related to juvenile rules and discipline annually to examine the existing practices and consider suggestions for revision.

# **JSC 9.20: Minor Rule Applications**

**Chapter:** Rules and Discipline

Order No:

**Effective:** April 1, 1997 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3C-05, 06, 07, 08

Classification: Public

# I. Policy

A. Staff and juveniles will work together to identify and correct minor problem behaviors. Realistic goals will be set and strategies implemented to meet that goal.

#### II. Definitions

A. N/A

#### **III.** General Information

A. There are written guidelines, as per the WSDJSC Staff Guide, for informally resolving minor juvenile misbehavior when circumstances dictate immediate and informal action.

- A. Minor Rule Violations
  - 1. Staff may exclude a juvenile from participation in an activity when their behavior is inappropriate.
    - **a.** This sanction may be imposed if the restricted participation is directly related to controlling the behavior presented.
    - **b.** Prior to their activity being restricted, a juvenile will have the reasons for the restriction explained and be given an opportunity to explain behavior leading to the restriction.
  - 2. If attempts at an informal resolution are unsuccessful, staff will complete a Time Out/Privilege Restriction Record Form.
    - **a.** Staff will read the rule violation to the juvenile and give them the opportunity to write any comments/concerns on the form before the sign it
    - **b.** One copy will go to the juvenile and one to their file.
  - 3. Correctional Staff may restrict a juvenile to their room as a sanction for a minor rule violation infraction, or as a "cooling off" period.

- **a.** The amount of time varies depending on the nature of the infraction and circumstances, but shall not exceed one hour without approval of a Shift Supervisor.
- **b.** This can be used as a "cooling off" period that is short in duration, 15-59 minutes, specified at the time of assignment.
- **c.** Prior to being restricted to their room, the juvenile will have the reasons for the restriction explained to them by staff and will have an opportunity to explain the behavior leading to the restriction.
- **d.** Anytime a juvenile is confined to their room as a result of committing a rule infraction, staff will initiate Active Close Watch (Policy 17.10).
- e. During room restriction, staff initiates contact with the juvenile and encourages the juvenile to assist in determining the end of the restriction period.

# **JSC 9.30: Major Rule Applications**

**Chapter:** Rules and Discipline

Order No:

Effective: April 1, 1997

Revised: January 16, 2017

Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-3C-09, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R Part

115

Classification: Public

# I. Policy

A. Staff will initiate immediate action for conduct and behavior that affects the safety of others of the security of the facility. Juveniles alleged to have violated major rules will be provided due process.

#### **II.** Definitions

- A. **Use of Separation:** Removal from general population that is involuntarily imposed and is in an area where the youth is without contact with other youth and unable to egress. The goal of separation is to safely return youth to general population as soon as possible.
- B. **Juvenile Service Center Interdisciplinary Treatment Team:** Team consisting of Administration, Medical, Mental Health, Shift Supervisor, Case Managers, and Spiritual Leader, when needed. The team develops a special behavior management program plan which encourages self-discipline through behavior modification system of rewarding positive behavior.

#### **III.** General Information

- A. Use of separation will only be used when all other crisis intervention techniques have failed and the juvenile presents a danger to themselves, other juveniles, or staff.
  - 1. Anytime a juvenile is confined to their room as a result of committing a rule violation, Active Close Watch requirements are initiated. (Policy 17.10)
- B. If a juvenile is alleged to have committed a criminal act, it may be referred to appropriate law enforcement officials for criminal investigation and prosecution consideration.

## IV. Procedural Guidelines

A. Major Rule Violations

- 1. When a juvenile has been charged with a major rule violation requiring confinement for the safety of juveniles, or to assure the security of the facility, the juvenile may be confined for a period up to 24 hours.
  - a. Any use of separation that requires continuance for a period longer than 24 hours is reviewed every 24 hours by the Juvenile Service Center Interdisciplinary Treatment team.
- 2. Staff will prepare an incident report when they have a reasonable belief that a juvenile has committed a major violation or facility rules or a considerable number of reportable minor violations. Supervisory review will include notifying law enforcement, if necessary.
- 3. Staff will provide the juvenile charged with a major violation of facility rules a written copy of the alleged rule violation(s) within 24 hours of the infraction(s).
- 4. Staff will provide the juvenile a written notification of the time and place of the hearing with an impartial hearing officer at least 24 hours in advance of the scheduled hearing.
  - **a.** A juvenile may consent in writing to a hearing being held within 24 hours of the infraction or may waive the appearance at the hearing in writing or through their behavior.
  - **b.** If a juvenile is excluded from a hearing, the reason will be documented by the hearing officer.
- 5. A hearing will be scheduled as soon as practical but no later than 7 days, excluding weekends and holidays, after the alleged violation.
  - **a.** The juvenile may also request the services of a staff member to assist them at the hearing and to question relevant witnesses.
  - **b.** A staff representative is appointed when it is apparent a juvenile is not capable of effectively collecting and presenting evidence on their own behalf.
- 6. The juvenile will be given an opportunity to make a statement and present documentary evidence at the hearings and can request witnesses on their behalf.
  - **a.** Reasons for denying such requests are provided by the hearing officer and are stated in writing.
- 7. The hearing officer will review the documentary evidence and information presented at the hearing to make a decision.
  - **a.** If substantiated, the hearing officer will impose appropriate sanctions. Confinement to room cannot exceed five days for any offense.

- 1) The detainee's mental capabilities and/or disabilities are taken into consideration when determining sanctions.
- **b.** If not substantiated, the disciplinary report is removed from the juvenile's files.
- 8. A written record of the decision made at the hearing is given to the juvenile and a copy will be maintained in Administration for six months.
  - **a.** A copy of the record will be kept in the juvenile's file and in the hearing officer's records.
- 9. Review of all disciplinary hearings and dispositions are conducted by the Commander, or designee, to assure conformity with policy and procedure.
- 10. Juveniles may appeal the decision of the hearing officer to the Commander, or designee.
  - **a.** Appeals must be made within 15 days of the receipt of the decision.
- 11. Appeals will be reviewed and decided by the Commander, or designee, with 30 days of receipt and the juvenile is promptly notified in writing of the result.

# **JSC 9.40: Special Management Program**

**Chapter:** Rules and Discipline

Order No:

**Effective:** April 8, 1996 **Revised:** February 17, 2017 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3E-01, 02, 03, 04, 05

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R Part

115

Classification: Public

# I. Policy

A. Western South Dakota Juvenile Services Center maintains safe, secure housing for detainees whose behavior, health or security needs require separation from general population.

#### II. Definitions

- A. **Administrative Segregation:** Separation from the general population based on a serious threat to property, self, staff, or other detainees.
- B. **JSC Interdisciplinary Treatment Team:** Team consisting of Administration, Medical, Mental Health, Shift Supervisor, Case Managers, and a Spiritual Leader when needed. The team develops special behavior management program plan which encourages self-discipline through behavior modification system of rewarding positive behavior.
- C. **Protective Custody:** Separation from the general population based on indications a need exists to provide protection from others.

### **III. General Information**

- A. Juveniles placed on an individualized special management plan, separate from the living unit, will have similar access to conditions of that living unit.
- B. Prior to room and/or privilege separation, the detainee will be explained the reason(s) for the separation.
  - 1. If separated for a rule violation(s), the detainee will be given an opportunity to explain the behavior leading up to the rule violation(s).
- C. Juveniles on an individualized special management program are visited at least once each day by administrative, mental health, or medical staff.
  - 1. This contact will be documented.

#### A. Behavior Health Plan

- 1. Upon identifying a need for an individualized special management plan, the Shift Supervisor will initiate a plan and notify Administration.
  - a. Placement on a plan will be reviewed within 24 hours.
- 2. The Interdisciplinary Treatment Team develops behavior plans for each special management juvenile and appropriate services and programs shall be provided.
- 3. The juvenile will be provided due process. See Policy 9.30.
- 4. The detainee's behavior plan will be reviewed as necessary.
  - a. Special Management Review forms are completed by staff and the juvenile.
- 5. Review forms are routed to the Commander, or designee. The Commander, or designee, will consider the initial reasons the juvenile was placed on the behavior plan, whether the reasons still exist, and whether continued programming is warranted.
  - a. If the review determines the juvenile is no longer a risk to the safety and security of the facility, or there is no longer a risk for the juveniles' safety; the juvenile is reclassified for general programming.
  - b. If the review determines the juvenile continues to be a risk to the safety and security of the facility, the juvenile will receive written notification of the reasons for continued special management.
- 6. All Special Management Review decisions are documented in the juvenile's record.

### B. Medical/Mental Health Pod Plan

- Individualized special management plan used if medical/mental health care requires separation from other detainees or restriction from regular programming.
- 2. Detainees will remain on the plan until cleared by Medical/Mental Health.

# C. Protective Custody

- 1. Individualized special management plan used when a detainee requires protective care.
- 2. Detainees may only be placed on protective custody:
  - a. On a case-by-case basis;
  - b. Only as a last resort;

- c. Not based on their sexual identity or status;
- 3. The reason for protective custody will be documented and why no alternate means can be arranged.
- 4. Detainees will be returned to regular programming upon detainee's request or when the multidisciplinary treatment team determines the use of separation is no longer required.
  - a. The Interdisciplinary Treatment Team will review the detainee's status at a minimum of every twenty-four hours.
- D. Juveniles on an individualized special management plan will be provided the following, subject only to limitations necessary for safety and security:
  - 1. Recreation/exercise;
  - 2. A daily shower;
  - 3. Phone calls to attorney and/or clergy; and,
  - 4. Room clean up
  - 5. Visitation;
  - 6. Uninterrupted mail services;
  - 7. Reading materials (legal and recreational);
  - 8. Basic personal hygiene items;
  - 9. Prescribed medications and continued medical services;
  - 10. Access to educational services;
  - 11. Religious counseling and materials;
  - 12. Access to mental health services;
  - 13. Regularly issued clothing and linen items;
  - 14. Regular meals/
- E. Denial of any of the above will be documented.
- F. Juvenile behavior and program participation while on an individualized special management plan will be recorded in the computerized record system.

# **JSC 10.10: Social Services Programs**

**Chapter:** Programs

Order No:

Effective: May 28, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-2E-04, 5B-01, 02, 03, 04, 05, 06

Classification: Public

## I. Policy

A. The facility will make available the professional services and appropriate resources to meet the identified social service needs of the juveniles.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. The following social service programs will be available to the juvenile population:
  - 1. Individual
  - 2. Group
  - 3. Family Counseling
  - 4. Drug and alcohol treatment
  - 5. Special offender treatment
- B. The social services programs will be supervised by qualified individuals trained in the social or behavioral sciences.
- C. There is confidential interview space available in or near all living units for counselors to meet with juveniles.
- D. The Commander, or designee, will assess and identify the collective social service needs of the juvenile population at least annually.

- A. To assist the juveniles with their personal problems and adjust to the facility, staff members will be immediately available.
- B. Staff will ensure safety of the juvenile and identify potential need for additional social service programs.

- C. Information will be forwarded to Medical, Mental Health, Case Mangers, or administration for referral.
  - 1. Special programs will be provided to meet the needs of juveniles with specific types of problems.
- D. Upon determining a need for additional social services, appropriate services are initiated.
  - 1. Social service personal and juvenile supervision staff will share relevant information and coordinate their efforts to provide the appropriate services to the juveniles.

# **JSC 10.20: Religious Programs**

**Chapter:** Programs

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-5F-01, 02, 03, 04, 05, 06

Classification: Public

## I. Policy

A. Juveniles will have the opportunity to participate in practices of the religious faith, limited only by threats to the safety of persons involved or that the activity disrupts order in the facility.

### **II.** Definitions

A. **Chaplain:** Volunteer clergy member that has physical access to all areas of the facility to minister to juveniles and staff.

#### **III.** General Information

- A. All worship services or religious activities shall be supervised by the Chaplain, Commander, or designee.
- B. Juveniles will have access to religious publications of their respective faiths, subject to review before entering the facility.
- C. Space will be made available for religious services.
  - 1. Attendance shall be voluntary, and all juveniles shall be advised for their right to attend worship services.
- D. A volunteer chaplain shall perform the following duties:
  - 1. Speak to juveniles when requested.
  - 2. Keep pastoral confidences intact while at the same time protecting the security of the facility, the safety of staff and juveniles.
  - 3. In cooperation with Administration, approves donations or equipment or materials for use in religious programs.
  - 4. Seeks additional pastoral assistance as needed.
  - 5. Maintains close relationships with religious resources in the community.

- A. Volunteer religious programs will be available as part of the juvenile program schedule.
  - 1. Attendance may be restricted due to unacceptable behavior,
- B. Religious volunteers are available to meet with juveniles individually.
- C. Juveniles requesting a specific religious advisor or to participate in a religious practice will submit a written request to Administration.
  - 1. Request forms are available in the housing units.
  - 2. Administration will evaluate requests and approve as deemed appropriate.
    - a. Parent/guardian and holding authority approval will be sought for requests outside of JSC Religious programs.
    - b. Requests will only be denied based on documented threats to the safety or persons involved or the orderly running of the facility.

# **JSC 10.30: Library**

**Chapter:** Programs

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-5D-01, 02, 03

Classification: Public

## I. Policy

A. Library services will be provided and available to all juveniles.

### II. Definitions

A. N/A

#### **III. General Information**

- A. Administration will designate a qualified person to coordinate and supervise library services.
- B. The in-house library will include general and specialized reading material to meet the educational, informational and recreational needs of juveniles.
- C. Materials will be recent and selected to serve the varying interests and reading abilities of the juveniles.
- D. Juveniles may request materials from the Rapid City Public Library.

- A. Reading materials will be reviewed for appropriateness before being placed in the JSC libraries (Policy 7.20)
- B. Juveniles will be allowed to check out items from the JSC libraries at designated times.
  - 1. Items checked out from the libraries will be logged by staff.
  - 2. Juveniles may keep checked out items in designated location in the housing unit per badge level.
  - 3. Juveniles are responsible for the condition of the item and may be held accountable if damaged or destroyed.
- C. Items will be returned to the library when the juvenile is finished.

condition will be removed from the library and replaced with new as needed.

# **JSC 10.40: Recreation and Exercise**

**Chapter:** Programs

Order No:

**Revised:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-2E-01, 02, 5E-01, 02, 03, 04

Classification: Public

## I. Policy

A. A recreation and activities program will be available to all juveniles.

#### **II.** Definitions

A. N/A

#### **III. General Information**

- A. The total combined activity area, outside of the living units, will provide at least 100 square feet per juvenile for recreational programs and leisure time activities.
- B. The gyms and outdoor exercise areas are sufficient to ensure each juvenile is offered at least one hour of access daily. Use of outdoor areas is subject to weather and juvenile classification.
- C. Recreational programs will be planned and coordinated by a qualified staff member.
- D. As part of the daily program schedule each juvenile will have the opportunity to participate in a minimum of one hour of large muscle exercise and one hour of structured leisure time activity daily.

### IV. Procedural Guidelines

### A. Physical Exercise

- 1. A physical education plan will be developed by the physical education teacher.
- 2. Juveniles will be required to participate in physical activity (unless restricted by medical staff) in the gym or outside exercise area as part of the daily schedule.
- 3. Staff will ensure the physical education plan is followed and the necessary equipment is available for the activity.
- 4. Staff will actively encourage juveniles to participate to the best of their ability in scheduled activities.
  - **a.** Staff may participate in the activity when there is additional staff present to provide supervision.

# B. Leisure Time Activities

- 1. Correctional staff will facilitate leisure time on the pods and keep juveniles engaged in scheduled constructive activities.
- C. Juveniles on a special management program or restricted from general population will be offered physical exericse and leisure time activities as part of their individual program plan.
  - 1. Access to physical exercise or other activities may be restricted or denied if the juvenile's behavior presents a danger to self or others.

# JSC 10.50: Educational Plan

**Chapter:** Programs

Order No:

**Effective:** May 28, 1996 **Revised:** November 19, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-2E-05, 5C-01, 01-1, 02, 03, 04, 04-1, 04-3, 04-4, 04-5, 04-6, 04-7, 04-8

Classification: Public

## I. Policy

A. A comprehensive education program, consistent with the needs of the juvenile population, is available to all juveniles.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. The Rapid City Area School (RCAS) system will provide oversight of the facility educational program.
- B. The education program will be developed by Administration and facility education staff, in conjunction with the Rapid City Area Schools and reviewed annually to measure effectiveness.
  - 1. The education schedule will permit juveniles to enter at any time and learn at their own pace, with an emphasis on individualized instruction.
  - 2. The education program at the Juvenile Services Center will utilize standardized grade-appropriate curriculum supported by appropriate materials, resources, and specialized equipment that meets educational standards.
  - 3. Academic and vocational programs in the community may be utilized for selected juveniles.
  - 4. Initial Student Information, assessments, and/or evaluation materials may be utilized to determine the need for remedial or special education services and to develop and implement an individual education plan in conjunction with RCAS or the student's home school.
- C. Adequate classroom space will be provided to meet the needs of the education program and will conform to local and state educational requirements.
- D. All juveniles under the age of 18 who do not have their diploma or General Education Development (GED) will be required to participate in the education program.

- 1. Educational programming will be available to juveniles 18 and older or who have their diploma or GED.
- E. A vocational program for long-term juveniles, which includes an evaluation of vocational needs.
  - 1. Coordination to provide instruction in functional social skills.
- F. Instructors will be licensed and certified by the state and required to provide:
  - 1. Outlines of the course work and individualized educational programs.
  - 2. An ongoing record of each juvenile's progress, while respecting their right to confidentiality.
  - 3. A communication link with public and private schools to provide continuity to a juvenile's education.

- A. Upon arrival, staff will identify the education status of the juvenile to identify enrollment, grade level, and home school.
- B. Education Staff will contact the home school to assign school work.
  - 1. If the juvenile is not enrolled, the holding authority/parent will be contacted to enroll them.
  - 2. An accurate record of the total number of juveniles receiving educational services.
- C. Juveniles will participate in educational programs.
  - 1. Education staff will explain classroom expectations and gather information to complete an Information Sheet.
  - 2. Education staff, in conjunction with student's home school, will review the student's educational records and assess their individual needs.
  - 3. Education staff will develop an education plan with the student's home school for the juvenile and provide school work.
    - a. A Special Education Teacher will work with juveniles having an Individual Education Plan from their home school.
    - b. Students meeting eligibility requirements may participate in the General Educational Development program.
  - 4. Education staff will assist juveniles with school work as needed.
  - 5. Juveniles are provided incentives for educational participation and formal recognition or accomplishments for both academic and vocational.

- 6. Juveniles may be removed from the school program for a period of time for disruptive behavior.
  - a. Juveniles restricted from classroom participation will continue to have access to education services.
- 7. Education Staff will communicate with the home school to provide updates and return completed school work.
- 8. Education staff will document juvenile education information in the computerized records system.
- D. Upon release, Education Staff will return all remaining school work to the home school and forward the education file to Administration for scanning as part of the juvenile record.

# **JSC 10.60: Community Release Programs**

**Chapter:** Programs

Order No:

**Revised:** April 1, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 

Classification: Public

## I. Policy

A. Eligible juveniles may be allowed unsupervised access to community for the purpose of employment, education, and/or treatment while in facility custody.

#### II. Definitions

A. N/A

### **III.** General Information

- A. Participation in the community release programs must be approved by the juvenile's holding authority.
- B. The juvenile must be classified to minimum security and have acceptable behavior history.
- C. The juvenile must be in custody a minimum of five consecutive days.
- D. Juveniles on work release will pay 25% of gross income to the facility to offset per diem cost by the holding authority.
  - 1. A portion of the juvenile's monthly income may also be collected to pay court ordered financial obligations.
  - 2. There will be no fee for the juvenile's on school or treatment release.

- A. Upon notification from the holding authority a juvenile is eligible for a community release program, the Case Manager will meet with the juvenile and provide a recommendation to the Commander or designee.
- B. If a juvenile is approved, the Case Manager will create a specific community release program plan, to include:
  - 1. The type of release program
  - 2. The dates and times the juvenile will be out of the facility

- 3. The location of the juvenile while out of the facility
- 4. Transportation arrangements
- 5. Other pertinent information as needed
- C. The Case Manager will review the program plan expectations and rules with the juvenile.
  - 1. Juveniles will sign an acknowledgement of the Release Program rules.
- D. The Case Manager will ensure clothing and other items needed for the release program are available to the juvenile.
  - 1. Items will be entered into the juvenile's property record and placed in designated storage location.
- E. The juvenile will provide a copy of their work, school, or treatment schedule.
- F. The Case Manager will verify the schedule with contact person at job, school, etc.
- G. The Case Manager or designee will enter dates and times the juvenile is to leave and return into the facility computerized record system.
- H. Staff will facilitate the juvenile's release from the facility at the required time and record in the computerized record system.
  - 1. The juvenile will be allowed to change into personal clothes or work uniform.
  - 2. The juvenile will only be allowed to take personal items as approved in the release program plan.
- I. Case Managers are designated staff will supervise the compliance of juveniles on the programs using a variety of methods including site visits and verification contacts.
- J. Juveniles will return to the facility at the time designated in the release plan.
- K. Upon return, juveniles will be searched and will change into facility issued clothing.
  - 1. Correctional Staff will inventory all personal items returning with the juvenile and secure in the proper storage locations.
  - 2. Only items approved in the release program plan will be allowed to be brought into the facility.
- L. Juveniles may be required to provide samples of their breath and/or urine for testing and analysis to determine program compliance.
- M. Juveniles not returning on time or abiding by program rules will be reviewed for continued eligibility in the program.
- N. The Case Manager will provide program participation reports to the holding authority.

# **JSC 10.70: Vocational Program**

**Chapter:** Programs

Order No:

**Effective:** April 1, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-5C-05, 06, 07, 08

Classification: Public

## I. Policy

A. Eligible juveniles may participate in work assignments within the facility and in the community to learn job and life skills consistent with the needs of the youthful population.

### II. Definitions

A. N/A

#### **III.** General Information

- A. Juvenile working conditions will comply with all federal and state regulations and statues pertaining to child labor.
- B. Juveniles are not required to participate in uncompensated work assignments unless the work is related to housekeeping, maintenance of the facility or grounds, or part of an approved community service program.
  - 1. Juveniles participating in vocational programs may receive compensation in the work of work experience/life skills and/or Behavior Exchange Points.
- C. Selections will be made consistent with security and supervision requirements and the needs of the facility.
- D. Juveniles will be approved by medical staff before participating in any work assignment.
- E. Juveniles with disabilities will be allowed to participate, subject only to limitations due to medical restrictions.
- F. Juveniles may be required to provide samples of their breath and/or urine for testing and analysis to determine program compliance.

- A. The Pre-Vocational and Community Support Staff or designee will post openings for work assignments in juvenile housing areas.
- B. Juveniles wishing to participate will submit an application for the work assignment.

- C. The Pre-Vocational and Community Support Staff or designee will review the application and interview the juvenile.
  - 1. Criteria used in the selection process includes:
    - **a.** Juvenile's desire to work
    - **b.** Behavior history/badge level
    - **c.** Security concerns
    - **d.** Medical conditions
    - e. Juvenile's age and ability to perform work assignment
- D. The Pre-Vocational and Community Support Staff or designee will make a recommendation for participation to the Commander, or designee.
- E. The Commander or designee will approve all work assignments.
- F. After approval, the Pre-Vocational and Community Support Staff will meet with the juveniles to review the expectations and responsibilities of the work assignment.
  - 1. Specific training necessary for the completion of the work assignment will be provided to the juvenile by the Pre-Vocational and Community Support Staff or designee prior to the start of the work assignment.
- G. The Pre-Vocational and Community Support Staff will create the work assignment schedule and notify the juvenile and other staff.
- H. The Pre-Vocational and Community Support Staff will create the in –house job sheet for documentation of the juvenile's participation and program score.
- I. At the designated start time, staff will facilitate the juvenile's access to the assigned work area, complete pat search, and issue required equipment.
- J. Staff will supervise the work performed by the juvenile in the work assignment to ensure compliance with facility rules and the desired quality of work is attained.
  - 1. Juveniles participating in work assignments not directly supervised by staff, will be checked periodically.
- K. Upon completion of the work assignment, staff will complete the in-house job sheet and facilitate the juvenile's return to assigned housing unit or program area.
  - 1. Staff will provide the appropriate program score(s) for the job completed by the juvenile and complete the in-house job sheet.
  - 2. Staff will complete a pat search before the juvenile will be allowed to return to a housing unit or program area.

- L. The Pre-Vocational and Community support staff will review daily scores and log entries related to the juvenile's participation.
  - 1. Juveniles committing rule violations or demonstrating poor work performance can be removed from the work assignment.
  - 2. Staff may suspend or cancel a work assignment based on security or behavior concerns, pending a review by the Pre-Vocational and Community Support Staff.

# **JSC 10.80: Home Detention**

**Chapter:** Programs

Order No:

**Revised:** October 1, 2012 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 

Classification: Public

## I. Policy

A. The Home Detention Program allows eligible juvenile to reside at an approved home within the community while under the supervision of the facility personnel.

#### II. Definitions

- A. **Electronic Monitor**: Monitor worn by juvenile to enhance supervision.
  - 1. Global Positioning Monitor: Reports the juvenile's location and movement
  - 2. Radio frequency Monitor: Provides notification when juvenile leaves designated location.
  - 3. Secure Continuous Remote Alcohol Monitor: Detects and reports alcohol use by the juvenile.
- B. **High Supervision**: Juvenile will wear ankle monitor. Staff will complete at least five face-to-face contacts per week.
- C. **Moderate Supervision**: Juvenile will wear ankle monitor. Staff will complete at least three face-to-face contacts per week.
- D. **Low Supervision**: Juvenile will wear ankle monitor. Staff will complete at least one face-to-face contact per week.
- E. **No Monitor**: Juvenile does not wear ankle monitor. Staff will complete face-to-face contacts as determined.

### **III. General Information**

- A. Home Detention is a community-based option for juveniles who would otherwise be held in the facility.
- B. Home Detention provides short-term levels of supervision sufficient to prevent the juvenile from committing new violations and fulfill the requirements of the court.
- C. The program is available to all Pennington County juveniles or Department of Corrections juveniles residing with Pennington County.

- D. The juvenile must be made eligible by the holding authority and be approved by Home Detention staff. Juveniles will not be allowed to participate if:
  - 1. Denied by juvenile judge
  - 2. Denied by holding authority
  - 3. Determined to be a flight risk or unlikely to appear at court
  - 4. There is a risk to the community or victim
  - 5. There is no home available with suitable adult supervision
  - 6. Behavior or statements indicate juvenile is unlikely to comply with program
- E. Adjudicated juveniles must pass a urine analysis test and pay the daily program fee before being placed on Home Detention.
- F. Any juvenile may be denied at the discretion of the Commander or designee.

- A. Program Entry
  - 1. Home Detention staff will complete an entry assessment on the juveniles.
    - **a.** Verify eligibility with holding authority
    - **b.** Identify potential risks if juvenile is placed on Home Detention.
    - **c.** Makes program recommendations to Home Detention supervisor.
  - 2. Home Detention supervisor will review recommendations and approve program placement.
  - 3. Home Detention staff will collect urine analysis sample for juvenile when required.
  - 4. Home Detention staff will interview parent/guardian/responsible adult and discuss program expectations.
    - a. If circumstances do not allow the juvenile to reside at home, the parent/guardian can authorize a substitute home for the Home Detention Program.
    - b. Parent/guardian/responsible adult must agree to abide by all conditions for the Home Detention Program.
  - 5. Home Detention staff will attach ankle monitor and activate monitoring software.

- 6. Home Detention staff, the juvenile, and parent/responsible adult will meet to review program expectations and rules.
- 7. Parent/responsible adult accepts physical custody of the juvenile.
- 8. Home Detention staff will update the juvenile's status and Home detention information in the computerized record keeping system.

# B. Successful Completion

- 1. Juvenile reaches end of sentence date or is released from the program by the holding authority.
- 2. Ankle monitor is returned in good working condition and Home Detention staff deactivates monitoring software,
- 3. Home Detention staff completes program documentation and releases juvenile from the computerized record keeping system.

# C. Return to Secure Detention (RTSD)

- 1. Upon determination a juvenile has violated program rules or is no longer eligible for the program, Home Detention staff will terminate the juvenile from the program and have them returned to the facility.
- 2. Home Detention staff will notify parent/responsible adult and shift supervisor the juvenile is returning to the facility.
- 3. Booking staff will complete the readmission process to the facility.
- 4. Ankle monitor is returned in good, working condition and Home detention staff deactivates monitoring software.
- 5. Home Detention staff will complete program documentation and Incident Report.
  - a. Juveniles will be provided written notification of the reasons for being returned and scheduled for a Due Process Hearing.
- 6. Court Expeditor and holding authority will be notified.

# D. Absent Without Approval or Escape From Home Detention

- 1. Upon determination a juvenile is not able to be located or has removed the monitor, the juvenile will be considered absent without approval or an escape from the program.
- 2. Home Detention staff will report the absent without approval or escape to law enforcement.

- 3. Home Detention staff will notify Administration, the holding authority and Court Expeditor of the absent without approval / escape.
- 4. Juvenile is released from the computerized record keeping system
- 5. Home Detention staff will attempt to retrieve monitoring equipment.
  - a. Lost or damaged equipment will be reported to law enforcement.
- 6. Home Detention staff will complete program documentation and Incident report.

### E. Electronic Monitoring

- 1. Home Detention staff will enter each juvenile and program requirements in the monitoring software.
- 2. Home Detention staff will regularly check the monitoring software to confirm the juvenile's status and program compliance.
- 3. The monitoring company will provide immediate notification to Home Detention Staff if the juvenile violates the conditions of the program or if the is a possible problem with the monitoring equipment.
  - a. Upon receiving notification, Home Detention staff will initiate necessary action to determine the cause of the notification and verify juvenile is still in compliance with the program rules.
- 4. Home Detention staff will regularly download information from Secure Continuous Remote Alcohol Monitors to determine if juvenile has consumed alcohol.

### F. Juvenile Contacts

- 1. Home Detention staff will complete random, unannounced face-to-face contacts with juveniles to ensure program compliance.
  - a. The number and frequency of contacts will be determined by the juveniles' supervision level.
- 2. Contacts may take place at the juvenile's residence, school, place of employment, or any other approved location for the juvenile.
  - a. At least one contact per week will be at the juvenile's residence and will include the parent/responsible adult.
- 3. In addition to required face-to-face contacts, Home Detention staff may also contact the juvenile's teachers, employers, or others involved in supervision of the juvenile to ensure program compliance.

### G. Urine Analysis and Breath Tests

- 1. To ensure program compliance, juveniles will submit to random and regular breath tests and urine analysis.
- 2. Home Detention staff will be trained in the proper use and collection procedure for completing breath tests and urine analysis.
  - a. Breath test machines and urine collecting / screening kits will be available to the Home Detention staff.
  - b. Breath test machines will be recalibrated regularly to ensure accuracy.
- 3. Home Detention staff may conduct a breath test at any contact with the juvenile in the community.
- 4. Home Detention staff will return the juvenile to the facility to complete a urine analysis.
  - a. Urine collection will be completed by a same gender staff member in accordance with facility collection procedures.
  - b. Instant urine analysis kits will be used to determine negative or presumptive positive for substances tested.
- 5. Juveniles testing positive for alcohol or drug use may be terminated from the program and the holding authority will be notified of the results.
  - a. Adjudicated juveniles will not be eligible for Home Detention until a negative urine analysis is completed.

### H. Home Detention Fee

- 1. All juveniles participating in the Home Detention program will be required to pay for the cost of participating in the program.
  - a. The amount owed will be the number of days in the program multiplied by the daily fee as ordered by the court.
- 2. Adjudicated juveniles will be required to pay in advance.
  - a. Home Detention staff will provide community service opportunities in lieu of payment for juveniles who cannot afford to pay.
  - b. Juveniles who cannot pay and cannot complete community service will not be eligible for the Home Detention Program.

# **JSC11.10: Food Service**

**Chapter:** Food Service

Order No:

**Revised:** January 3, 1996 **Revised:** November 19, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4A-01, 02, 03, 04, 05, 06, 07, 08, 09, 10, 11, 12, 13, 14

Classification: Public

## I. Policy

A. Meals served in the facility are nutritionally balanced, well-planned, prepared, and served in a manner meeting established governmental health and safety codes.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. The facility contracts with a food service company that ensures:
  - 1. A full-time staff member, experienced in food service management, supervises food service operations.
  - 2. A dietician reviews, at least annually, compliance with nationally recommended food allowances and provides a report to the Commander.
  - 3. Accurate records will be maintained of all meals served.
  - 4. Food service staff develops advanced, planned menus and substantially follows the schedule.
    - a. Menu planning will take into consideration the food flavor, texture, temperature, appearance, and palatability.
  - 5. Staff and juveniles will receive food prepared from the same menu.
  - 6. Special diets will be made available upon medical authorization or due to religious beliefs.
    - a. Special diet meals will be equivalent to the regular diet, in terms of nutritional adequacy, palatability, and variety as to the degree possible. Therapeutic diets are provided as prescribed by appropriate clinicians. Prescriptions for therapeutic diets should be specific and complete, furnished in writing to the food service manager, and rewritten annually, or more often, as clinically indicated.

- b. Special diets due to religious beliefs will be prepared in adherence to religious dietary laws.
- 7. Food services will comply with the applicable sanitation and health codes as promulgated by federal, state, and local authorities.
- 8. Shelf goods are maintained at 45 to 80 degrees Fahrenheit, refrigerated foods at 35 to 40 degrees Fahrenheit, and frozen foods at 0 degrees Fahrenheit or below.
- 9. Adequate health protection is provided to all persons working in food service and provides written verification to the facility indicating compliance with all state and local regulations regarding food service.
  - a. As per state and local laws and regulations, all food service personnel involved in the preparation of food will receive a pre-assignment medical examination and periodic reexamination to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils.
  - b. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet facilities.
  - c. Juveniles and other persons working in food service are monitored each day for health and cleanliness by the director of food service, or designee.
- 10. Three meals, of which two are hot, will be served at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast.
  - a. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met.
- 11. Weekly inspections of all food service areas will be conducted and a report provided to the Commander or designee.

- A. Meal Count and Service
  - 1. Assigned staff will provide meal order information to food service providers upon request.
    - **a.** Changes to the meal counts will be reported to food service providers by the Shift Supervisor or designee.
  - 2. Assigned staff will report to the Control Room Operator the total number and time meals/snacks delivered.
  - 3. Staff or assigned in-house workers will disperse meals to juveniles.
    - a. Staff members will supervise juveniles during meals.

- b. Staff members will ensure accountability of utensils and special diet requirements.
- 4. Assigned staff will report to the Control Room Operator the total number and time of meals/snacks served.
- 5. The control Room Operator will enter the total amount of meals/snacks delivered and service for breakfast, lunch, supper and snack in the computerized records system.
- 6. The total number of juveniles served for each meal/snack will also be documented on a separate meal accountability sheet.
- B. Staff will ensure food, including snacks, will not be withheld as a disciplinary measure.

# JSC 11.20: Wellness Policy: National School Lunch Program

**Chapter:** Food Service

Order No:

**Effective:** June 12, 2014 **Revised:** August 9, 2017 **Approved by:** Sheriff Kevin Thom **Reference:** 10.40, NSLP Guidelines

Classification: Public

## I. Policy

- A. The purpose of this policy is to improve personal health and fitness and encourage our juvenile detainees, through efforts and activities to by physically active, eat nutritious diets, get medical and mental health screenings, and make healthy choices daily.
- B. The Western South Dakota Juvenile Services Center is committed to leading by example in the positive development of lifestyle practices and activities, which support greater learning and individual wellness. As such, the agency sets forth its guidance and direction for teaching and implementing a wellness program, which gives the widest possible consideration to maintaining proper nutrition and healthy levels of physical activity.

### II. Definitions

A. N/A

### **III.** General Information

- A. The Western South Dakota Juvenile Services Center is an American Correctional association accredited facility, which requires the food service plan to provide for a single menu for juveniles. The facility contracts with a food service company (CBM) that ensures the meals served in the facility are nutritionally balanced, well-planned, prepared, and served in a manner meeting governmental health and safety codes. The food service staff (CBM) will develop advanced planned menus and substantially follow the schedule. Menu planning will take into consideration the food flavor, texture, temperature, appearance, and palatability. Special diets will be made available upon medical authorization or due to religious beliefs.
- B. The Western South Dakota Juvenile Services Center and CBM staff meets on a regular basis and discusses menu cycles, food production, and nutrition. CBM is also responsible for training staff on proper preparation techniques, recording necessary documentation, and nutrition guidelines found in the Standard Operating Procedures (SOP) and food service code.
- C. The Juvenile Service Center staff will be responsible for providing wellness awareness and education to promote and plan healthy activities.

### A. Nutrition, Education and Promotion

- 1. Nutrition education will be offered by the Western South Dakota Juvenile Services Center in an effort to provide the knowledge and skills to each juvenile detainee and to promote their health and nutrition education into their day whenever possible.
- 2. Participatory activities to increase knowledge of nutrition topics will include; Why we eat what we do, Underappreciated Digestive Tract, it's all about the calories, Super-Size Me (Movie), Hydration- You are what you drink, Not all Carbohydrates are created equal, Facts on Fiber, Protein –An Indispensable Nutrient, Fat Everywhere, Obesity & Health, Vitamins & Minerals, The Highs and Lows of Sodium and Potassium, What are the risks of Cardiovascular disease, Heart Healthy Lifestyle, Healthy Weight Management, Metabolic Syndrome and Type 2 Diabetes, Nutrition and Cancer Prevention, Prebiotics and Probiotics, Food Safety-It's in your Hands, Demystifying Food Labels, Facts and Functional Food, Organic or Conventional Your Choice, Sugar and Fats Fake or Real, Teens at Risk-Wasting away, Eating Disorders, The Future of Nutrition Science and Trends, and Creating your own Personal Nutrition Plan.

### B. Physical Activity, Physical Education and Promotion

- 1. The Western South Dakota Juvenile Service Center is committed to providing opportunities to develop the knowledge and skills for specific physical activities, maintain physical fitness, regularly participate in physical activity and receive education about the short- and long-term benefits of a physically active and healthy lifestyle. To achieve this, the Western South Dakota Juvenile Service Center offers:
  - a. A recreation and activities program that will be available to all juveniles
  - b. Recreational programs will be planned and coordinated by a qualified staff member and will meet the needs, interests, and abilities of the person.
  - c. As part of the daily program schedule each juvenile will have the opportunity to participate in a minimum of 1 hour of large muscle exercise and 1 hour of structured leisure time activity daily.
  - d. Wellness policy on PSCO website
  - e. Nutrition education information is promoted on the Juvenile pods, classrooms, physical education areas and all areas where food is served.

### C. Nutrition Standards

1. Life-long eating habits are greatly influenced by the types of foods and beverages available. Foods that meet the Dietary Guidelines for Americans (i.e. fruits, vegetables, low-fat dairy foods, and low-fat grain products) Menus have

- been certified at the Western South Dakota Juvenile Service Center location by the South Dakota Department of Education Child and Adult Nutrition Services.
- 2. Meals served in the Western South Dakota Juvenile Service Center are nutritionally balanced, well-planned, prepared, and served in a manner meeting established governmental health and safety codes.

### D. School Meal Program

- 1. The food services program will operate in accordance with the National School Lunch Act and the Child Nutrition Act of 1996 as amended and with applicable laws and regulations of the state of South Dakota. All locations will comply with USDA regulations and state policies.
- 2. A variety of nutritious food choices that are consistent with the federal government's Dietary Guidelines for Americans will be offered. For the purpose of this policy, "Dietary Guidelines for Americans" refers to the current set of recommendations of the federal government that are designed to help people choose diets that will meet nutrient requirements, promote health, support active lives, and reduce chronic disease risks.
- 3. Menus will be planned with input from dietary staff, direct-support personnel, and people receiving services, taking into consideration personal preferences.
- 4. People with special dietary needs (i.e. diabetes, PKU, etc) will be accommodated as required by USDA regulation.

### E. Other Agency Based Activities

- 1. All juveniles will undergo a health and wellness screening upon arrival to the Western South Dakota Juvenile Services Center, all health appraisal information will be collected to classify and respond to medical conditions. Juveniles will also receive a physical / mental appraisal within 7 days of admission; this appraisal is conducted by Medical Staff and a Qualified Mental Health Professional. A TB skin test is also mandatory for all kids in the juvenile center within 7 days of admission.
- 2. The Western South Dakota Juvenile Service Center will create an environment that provides consistent wellness messages, is conducive to healthy eating and physical activity, and contributes to forming healthy life long habits. The following are factors to accomplish this:
  - a. Professional Development
  - b. Ongoing professional development and education will be provided for food service personnel, direct-support staff, administration, and others.
  - c. Nutrition, physical fitness, and other health-related education will be provided for the Juvenile Services Center staff, and the juvenile detainees.

## 3. Eating environment

- a. Adequate space will be provided to eat meals in clean, safe, and pleasant surroundings and adequate time will be scheduled to eat, relax, and socialize.
- b. Consideration will be given for passing time, bathroom breaks, and socializing so as to allow for a minimum of twenty minutes for meals once seated.
- c. Safe drinking water and convenient access to facilities for hand washing and oral hygiene are also available.

# 4. Reinforcement/Incentives/Consequences

- a. Careful consideration will be given as to the messages sent to those receiving rewards or incentives.
- b. Alternatives to food (positive encouragement, small token of appreciation, certificates, etc.) will be used whenever possible for reinforcement.
- c. Behavioral intervention programs shall not result in the denial of a nutritionally adequate diet.

# F. Fundraising

1. The sale of food or beverages as a fundraiser will not take place at The Western South Dakota Juvenile Services Center.

# JSC 12.10: Facility Physician

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** December 7, 2015 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-01, 06, 11

Classification: Public

## I. Policy

A. The facility employs a physician to serve as the health authority.

#### **II.** Definitions

A. N/A

#### **III. General Information**

- A. Health care services will provide for the well-being of detainees and will not be compromised for security reasons. Health care services provided include:
  - 1. Medical services
  - 2. Dental services
  - 3. Mental health services
  - 4. Nursing care
  - 5. Personal hygiene services
  - 6. Dietary services
  - 7. Health education

- A. The Commander will work with the Facility Physician to ensure adequate space, equipment, supplies, and materials are provided for health care delivery.
- B. The Commander will work with the Facility Physician to ensure any treatment administered to juveniles by health care personnel other than a physician, dentist, psychologist, optometrist, podiatrist, or other independent provider must be understanding or direct orders or protocols from authorized personnel.
  - 1. Nurse practitioners and physicians' assistants may practice within the limits of applicable laws and regulations.
  - 2. Final medical judgment rests with the Facility Physician.

- C. The Facility Physician will immediately report any conditions that pose a danger to staff or juvenile health and safety.
- D. The Facility Physician, as the designated Health Authority, has the responsibility to:
  - 1. Establish a mission statement defining the scope of health care services.
  - 2. Develop mechanisms, including written agreements, when necessary, to assure the scope of services is provided and properly monitored.
  - 3. Develop the facility's operational health policies and procedures.
  - 4. Identify the type of health care providers needed to provide the determined scope of services.
  - 5. Establish systems for the coordination of care among multidisciplinary health care providers.
  - 6. Develop a quality management program.
  - 7. Make decisions about the deployment of health resources and the day-to-day operations of the health services program.

# **JSC 12.20: Monitoring Medical Services**

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-03, 05

Classification: Public

## I. Policy

A. The facility ensures high level health care is delivered to juveniles.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. The Commander, Medical Director, Nurse Practitioner, and the Nurse assigned to the Juvenile Service Center will meet at least quarterly to address the effectiveness of the health care system.
  - 1. The Nurse will provide the following information at each quarterly meeting.
    - a. The number of detained juveniles who received a health screening by the Medical Staff.
    - b. The number of juveniles who received complete health appraisals by Medical Staff.
    - c. The number of Tuberculosis (TB) and Human Immunodeficiency Virus (HIV) tests administered and the total number of positive results. (South Dakota Department of Health or private healthcare providers conduct all HIV tests within the facility and results of these tests are confidential; therefore, the number of positive results are counted by those individuals who voluntarily give the information).
    - d. The number of specialist referrals.
    - e. The number of dental procedures performed.
    - f. The number of juveniles seen on sick call by the Nurse.
    - g. The number of juveniles seen by the Medical Director.

- h. The number of hospital transfers.
- i. The number of off-site transports for care.
- j. Infection control issues.
- k. The Commander will ensure minutes are taken at the meeting and kept on file.
- 2. The Commander will ensure minutes are taken at the meeting and kept on file.
- B. The Commander, Medical Director, Nurse Practitioner and Nurse will annually review the facility's medical program and policies, personnel requirements, and access to health care staff and services.
  - 1. The review will be documented, dated, and signed by each reviewer.
  - 2. The Nurse will prepare an annual report compiling the quarterly report information for the year.

# **JSC 12.30: Medical Staffing Levels**

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-17

Classification: Public

## I. Policy

A. Health Services are available to juveniles at all times.

#### **II.** Definitions

A. N/A

### **III. General Information**

A. N/A

- A. The Commander, or designee, will manage the correctional staffing schedule to ensure there is a state certified Medication Administration, Certified Pulmonary Resuscitation (CPR), First Aid trained staff member on each shift to coordinate the health delivery service in the facility when Licensed Medical Staff are not on site.
  - 1. This JSC staff member is under joint supervision of the Medical Director and the Commander.
  - 2. Medical treatment rendered by a CPR First Aid certified staff member is within the scope of the capabilities of their training. In the event a higher level of medical treatment is necessary, detainees are to be transferred to the appropriate care facility. (See Policy 12.50 Medical Emergency).
- B. The Nurse Practitioner will manage the medical staffing schedule to ensure licensed medical staff are available to the facility on a 24 hour 7 day per week basis.

## JSC 12.40: Sick Call & Non-Emergency Medical Assistance

**Chapter:** Medical

Order No:

**Effective:** April 1, 1997 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-07, 08, 09, 29

Classification: Public

## I. Policy

A. The facility provides juveniles with access to health care.

#### II. Definitions

A. **Sick Call**: The procedure through which each juvenile reports and receives appropriate medical services for nonemergency illness or injury.

### **III. General Information**

- A. Juveniles will be provided with information on seeking medical care orally and in writing upon arrival to the facility.
- B. Sick Call request forms are accessible to all detainees in their living unit.

- A. Medically trained personnel will monitor and respond daily to medical complaints.
- B. Medical Staff will review all Sick Call requests and respond to each according to appropriate triage standards.
  - 1. Sick Call rounds are conducted a minimum of three days per week.
  - 2. Sick Call rounds are conducted in the medical exam room or in the living units; whichever is most appropriate for the required exam and care.
    - a. All health care encounters are private and conducted in a manner designed to encourage the patient's subsequent use of health services.
- C. Staff will instruct juveniles having medical care complaints to use the established grievance procedure.
  - 1. The Medical Director or designee is available weekly to respond to juveniles' complaints regarding service they did or did not receive from other medical staff.

## JSC 12.50: Life Threatening Medical Emergency Care

**Chapter:** Medical

Order No:

**Effective:** April 1, 1997 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-04, 15

Classification: Public

## I. Policy

A. Juveniles experiencing life threatening symptoms will be provided with medical emergency care.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. During life threatening emergencies, Medical Staff, Mental Health Staff or Shift Supervisor or designee will contact the community emergency dispatch center (911) to respond.
- B. The Shift Supervisor or designee will notify the Commander of the incident.
- C. The Shift Supervisor will make arrangements for security during transport by the ambulance personnel.
  - 1. A staff member will accompany any juvenile transported for hospitalization or emergency treatment.
  - 2. Juveniles are transported to the Emergency Department of the appropriate hospital for all emergencies that cannot be handled within the facility. If emergency evacuation is deemed medically necessary, the (9-9) 911 system and ambulatory services will be utilized.
- D. If a juvenile is admitted to the hospital, the Commander or designee is notified.
  - 1. A staff member will stay with the juvenile until further direction is received. The Shift Supervisor will make any necessary arrangements for security.
  - 2. The Commander or designee will notify the Medical Director and the juvenile's designated parent or guardian with appropriate information regarding the juvenile's medical condition.

- 3. The Shift Supervisor will contact the juvenile's holding authority to inform them of the medical emergency or hospitalization.
- 4. The Medical Staff will monitor the juvenile's condition daily and keep the Commander updated on the juvenile's medical condition.

## **JSC 12.60: Medical Staff Qualifications**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-10, 12

Classification: Public

## I. Policy

A. The facility medical care will be provided by qualified health care personnel.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. The Commander will work with the Medical Director to ensure all appropriate licensure, certification, or registration requirements applying to health care services for juveniles will be met.
  - 1. Verification of current credentials will be on file in the facility.
  - 2. The specific duties of qualified medical personnel are governed by written job descriptions approved by the Commander and Medical Director.

## JSC 12.70: Basic Medical Equipment

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-06, 28

Classification: Public

## I. Policy

A. The facility provides adequate basic medical equipment for detainee medical services.

#### **II.** Definitions

A. N/A

## **III. General Information**

A. N/A

- A. The Medical Director approves all medical equipment including the contents, location, and periodic inspection of all first aid kits.
  - 1. The Nurse or designee will do a monthly inventory of all first aid kits in the facility and restock as needed.

## JSC 12.80: Juvenile Counseling and Crisis Intervention

**Chapter:** Juvenile Rights

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-5B-04, 05, 06, 3-JDF-4C-16

Classification: Public

## I. Policy

A. Professional staff are available within the facility and community to provide crisis intervention and counseling to juveniles upon request.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

#### A. Crisis Intervention

- A Mental Health Caseworker is available to provide short term counseling to juveniles. These sessions are for the purpose of one to one counseling and are not intended to be used for the purpose of a psychological evaluation and/or indepth therapy. At a minimum, the mental health professionals will meet the educational and license/certification criteria by their respective professional disciplines.
- 2. The following guidelines are to be used to determine when to call a mental health professional.
  - a. Juveniles who are dealing with crisis, display ongoing depressed behavior, or have expressed thoughts of suicide, and the staff identifies the juvenile is in need of specialized professional assistance.
  - b. The juvenile attempts suicide or commits an act of self-harm.
- 3. Staff will notify the Shift Supervisor of the above noted behaviors. The Shift Supervisor will contact a Mental Health Professional.
- 4. After a session, the Mental Health professional will provide the necessary information to the Shift Supervisor to ensure the juvenile is adequately supervised.

5. Anytime the Mental Health Professional engages with a juvenile, they will complete documentation of the interaction within the facility computerized record system. Additionally, the Mental Health Professional will contact the Shift Supervisor with any immediate concerns.

## B. Juvenile Requests for Counseling

- 1. Juveniles wishing to meet with the JSC Mental Health Professional are requested to complete a Mental Health Request Form. The Mental Health Professional, or designee, gathers and reviews such requests daily, excluding holidays.
- 2. Emergency Requests will be provided to the Shift Supervisor for action.

## **JSC 12.90: Medical Treatment Protocol**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-11 **Classification:** Public

## I. Policy

A. A Standing Orders Guidebook approved by the Medical Director will be available to direct staff in the treatment of common medical illnesses for which over the counter medications and stock supplies may be used.

## **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. Staff will follow protocols in the Standing Orders Guide Book for the treatment of the common medical illnesses.
  - 1. This Guide Book is maintained within the facility Medical Office.
- B. Upon juvenile request, Staff are authorized to provide over the counter drugs within the guidelines established by the Facility Physician. These guidelines are available within each housing unit.
- C. Staff will call Medical Staff for approval prior to giving any medication other than over the counter drugs.

## **JSC 12.100: Medication Administration**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-18, 19, 20

Classification: Public

## I. Policy

A. The facility prepares and administers medication as ordered by a licensed health care provider in accordance with appropriate Federal and State Law requirements.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

#### A. General Guidelines

- 1. All medication administered at the facility is either:
  - a. Approved or prescribed by a licensed health care provider.
    - 1) If outside licensed health care provider, then prescription is verified through the prescribing pharmacy.
- 2. Medication will be administered or distributed in a timely manner according to licensed health care provider's orders.
- 3. Medication is only used from legibly labeled bottle or packages that meet time specifications for expiration and anticipated treatment protocol duration.
- 4. The taking of medication by a juvenile is voluntary unless court ordered.
- 5. Medical staff will approve and manage all medication.

## B. Labeling Requirements

- 1. In accordance with state law, labeling of medication received from a community pharmacist and administered at the facility includes:
  - a. Name medication is prescribed for

- b. Pharmacy name and address
- c. Prescription Number
- d. Date ordered
- e. Drug name
- f. Practitioner's name
- g. Instructions for use

## C. Previous Medication/Personal medication

- 1. The day of admission or as soon as possible, the Medical Director or Nurse Practitioner is notified as to the prescription and pertinent history.
- 2. The Medical Director or Nurse Practitioner will review all controlled medications and evaluate the medical necessity for the use of the controlled medication.
  - a. The Medical Director or Nurse Practitioner may contact the prescribing Physician (with the juvenile present if at all possible and with a signed release of information) to enlist their help with the juvenile's treatment.
- 3. The Medical Director or Nurse Practitioner will provide a written order.
  - a. If the Medical Director or Nurse Practitioner is not available to provide a written order, a verbal order may be taken by a Medical Staff qualified to take such verbal orders and the verbal order must be signed by the Medical Director within 72 hours.
- 4. When a juvenile has a previously diagnosed condition, Medical Staff evaluates, provides necessary education, and medication as indicated to the juvenile.
- 5. The Medical Staff will cooperate and coordinate with security, mental health, programs, and all other support systems to ensure a more comprehensive plan of care for those juveniles who may have special needs.

## D. Medication Accountability

- 1. When medication is received/released from/to the parent/guardian or outside agency, a "Medication Received/Released" form will be completed.
- 2. Prescription medications that are administered are recorded on the juvenile's Medication Administration Record.
- 3. All Schedule II, III, IV, and V medications shall be inventoried each scheduled administration by the Unlicensed Assistive Personnel or Medical Staff via the Controlled Substance Medication Administration Record.

- 4. The completed Controlled Substance Medication Administration Records are kept on file in Medical until all medications are administered, disposed of due to abandonment of 30 days or more, or returned to the parent/guardian or responsible person.
- 5. Current Controlled Substance Medication Administration Records are kept onsite. When completed, Controlled Substance Medication Administration Records and the Medication Received/Released Forms are kept on file for five years at the facility. Copies of such records are scanned into the WSDJSC imaged record system.
- 6. Any discrepancy in controlled substance medication count is reported to the Nurse or Shift Supervisor immediately.
  - a. An error must be documented within an Incident Report.
- 7. The Nurse or Shift Supervisor investigates and makes every reasonable effort to reconcile all reported discrepancies.
  - a. Irreconcilable discrepancies are documented and forwarded by the Nurse Supervisor or Shift Supervisor to the Commander in an Incident Report.
- 8. A determination is made by the Commander regarding notification of law enforcement and/or any other actions to be taken.

## E. Training and Dispensing of Medication

- 1. Nurses administer and supervise medication administration appropriate with their license.
- 2. After receiving certification as outlined by the South Dakota State Board of Nursing guidelines for Unlicensed Assistive Personnel (outlined in SDCL 36-9), staff may pass out medications.
- 3. Medication Pass will occur on a schedule as established by facility operations.
- 4. Prescription medications are dispensed as prescribed by the health care provider and recorded in the Medication Administration Record.

## F. Ordering Prescription Medications

- 1. Written medication orders are obtained from the Medical Director or other licensed health care provider.
- 2. In the event a verbal order is necessary, such an order must be received by Medical Staff qualified to receive such verbal orders from health care providers and will be documented accordingly.
- 3. All orders are countersigned by the Medical Director/Dentist within 72 hours.

## G. Stop Order

- 1. Time periods are required for all medications.
- 2. Prescribing physician will re-evaluate a prescription prior to its renewal.

### H. Storage

- 1. Medications are stored in secured areas.
- 2. All medications requiring refrigeration shall be kept in a refrigeration unit specified only for medications.
  - a. The refrigeration unit will be maintained at the temperature of 34-40 degrees Fahrenheit and monitored by the Medical Staff.
    - 1) Time, date, temperature and staff member name will be recorded on the refrigeration monitoring sheet.
- 3. Medications listed in Schedules II, III, IV and V are stored under double lock. Alternatively, Schedule II, III, IV and V medications may be distributed with other medications in the medication cart, although must be kept separate from other medications in a locked box within the medication cart.
- 4. The medication cart is to be locked at all times when cart is not in use and when staff is not with the cart.
  - a. The access key to the controlled medications is not the same key that allows access to the other medications in the cart.
  - b. The nurse, or designee on duty, maintains possession of the key to controlled medications.
    - Back up keys to all medication storage areas, including those for controlled medications, are available to medically trained supervisors or designee on duty.

## I. Juvenile Release and Continuity of Care

- Prescribed medications are released with the juvenile for continuity of care purposes. If necessary, the juvenile will be referred to the prescribing physician or community-based provider in order to continue on their prescribed medication.
- 2. The amount of medication released and/or the referral for continued care will be documented in the juvenile's medical record.

## J. Disposal of Medications

1. Medication will be secured in the medication room. Controlled substances will be stored in a double locked area separate from other medications. Medical Staff will inventory all surplus medications and dispose of those which have been kept 30 days or longer.

- 2. A medications destruction form must be completed and signed by two medical staff. All medication destruction forms will be filed in the Medical Office.
- 3. Destruction of medication will be in such a manner that retrieval would be impossible. All forms of medication are incinerated.

#### K. Juvenile Refusal

- 1. The juvenile has the right to refuse medication.
- The juvenile is asked to sign a Medical Refusal form after medical staff or trained Unlicensed Assistive Personnel has explained the possible consequences for their decision to discontinue use of the prescribed medication. If a juvenile refuses to sign, Medical Staff will document the refusal by having two staff members witness.
- 3. Medical Staff will notify the Medical Director and Nurse Practitioner. This notification will be documented in the computerized records system. The Nurse Practitioner will determine the necessity of notifying the juvenile's parent/legal guardian and the Holding Authority.

## L. Syringes and Needle Count

Medical Staff secures the access and prevents unauthorized use of needles and syringes. These items are kept locked in the medical area. Each item is signed out when used and noted on the inventory. Weekly inventories are conducted by medical staff on all sharps located in medical exam room (syringes and needles). Monthly inventories are conducted by Medical Staff on all Sharps located in the medical stock supply area (syringes and needles). Incident reports shall be completed on all discrepancies by the end of the scheduled shift that discrepancies were identified. Such reports will be forwarded to the Commander. The report will specify the reason for the discrepancies and steps taken to ensure no like discrepancies occur.

# JSC 12.110: Formulary

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-18

Classification: Public

## I. Policy

A. The facility properly manages use of pharmaceuticals by utilizing a formulary as approved by the Medical Director.

## **II.** Definitions

A. N/A

## **III. General Information**

A. N/A

- A. The Medical Director will approve any variation from the formulary.
- B. When necessary, Medical staff will send a Non-Formulary Request Form to the Medical Director for review and approval.
  - 1. Stop dates are provided for all medication including psychotropic agents.

## **JSC 12.120: Refusal of Life Sustaining Medication**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** ACA 3 **Classification:** Public

## I. Policy

A. Upon refusal of life sustaining medication by a juvenile, staff will follow informed consent standards of the community for examinations, treatments, and procedures.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. If a juvenile refuses to take medication, the Medical Staff must assess whether or not the juvenile is suicidal or psychotic and whether or not stopping the medication may be potentially life threatening. The following medications may be potentially life threatening to the individual if stopped.
  - 1. Anticonvulsants
  - 2. Hypertensive medications
  - 3. Diabetic medication
  - 4. Anticoagulants
  - 5. Other medication deemed necessary by the Medical Director
- B. The juvenile is asked to sign a Medical Refusal form after Medical Staff or trained Unlicensed Assistive Personnel has explained the possible consequences for their decision to discontinue use of the prescribed medication. If a juvenile refuses to sign, Medical Staff will document the refusal by having two staff members witness.
- C. If a juvenile is refusing life sustaining medication, the Medical Director or Nurse Practitioner will be notified. Upon refusal, Medical Staff will notify the juvenile's parent/legal guardian, prescribing health care provider and Holding Authority. If the juvenile is suicidal / psychotic, a mental evaluation and/or observation will be instituted.

- D. A juvenile refusing life sustaining medication is evaluated daily by the Medical Staff assessing the medical condition as ordered by the Medical Director or Nurse Practitioner. The juvenile is seen the next clinic day or sooner if condition warrants.
- E. Refer to Informed Consent Policy 12.250 for procedure required for court ordered medical/surgical treatment in accordance with SDCL 26-7A-42.

## JSC 12.130: Forensics

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 

Classification: Public

## I. Policy

A. Medical staff will not participate in the collection of evidence or conduct intrusive examinations, psychological profiles or similar procedures.

#### II. Definitions

A. N/A

#### **III.** General Information

#### A. Collection of Forensic Material

- The arresting agency, the prosecution, or defense attorney are responsible for coordinating with outside medical personnel for the collection of forensic specimens.
- 2. The facility requires the Holding Authority to issue a furlough regarding the transport of any juvenile for the purpose of evidence collection. If investigating agency requests to transport any juvenile for the purpose of evidence collection, the Holding Authority must approve the transport.

## B. Forced Blood Draws

1. Medical staff will not participate in forced blood draws.

#### IV. Procedural Guidelines

A. N/A

## JSC 12.140: Intra System Transfer Health Screening

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-23 **Classification:** Public

## I. Policy

A. All intra system transfers will receive a health screening by health trained personnel or qualified health care person immediately upon arrival at the facility.

#### **II.** Definitions

A. **Intra system transfer**: Individuals transferred to/from City/County Alcohol & Drug Programs, Western South Dakota Juvenile Services Center and the Pennington County Jail.

#### **III.** General Information

A. All findings are recorded in a format approved by the Medical Director.

- A. Immediately upon admittance to the booking area, health trained staff will conduct a preliminary health screening (Policy 12.150) to include:
  - 1. If juvenile is being treated for medical, dental or mental problems.
  - 2. If juvenile is on medication.
  - 3. If juvenile has a current medical, dental or mental health complaint.
  - 4. The juvenile will be observed for:
    - a. General appearance and behavior.
    - b. Physical deformities.
    - c. Evidence of abuse and/or trauma.
- B. If a juvenile has a medical condition requiring evaluation before admission, the juvenile will be referred to an appropriate health care facility.
- C. The Correctional Staff will notify Medical Staff of a medical emergency or concern. The juvenile will be referred to the emergency room for emergency treatment if Medical Staff are unavailable.

- D. Identified dispositions may include:
  - 1. General population.
  - 2. General population with referral to health care services.
  - 3. Emergency treatment.
- E. Medical Staff reviews all dispositions and records all findings in a format approved by the Medical Director.

## JSC 12.150: Health Screening and Appraisals

**Chapter:** Juvenile Rights

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-21, 22, 24, 30, 5A-02

Classification: Public

## I. Policy

A. Juveniles will undergo a health screening upon arrival to the facility and health appraisal information will be collected to classify and respond to medical conditions.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. Visual Observation Before Custody Acceptance/Admission Processing:
  - 1. The officer visually observes juveniles for the following:
    - a. Behavior, which includes state of consciousness, mental status, appearance, conduct, tremor, and sweating.
    - b. Body deformities, ease of movement, etc.
    - c. Condition of skin, including trauma markings, bruises, lesions, jaundice, rashes and infestations, and needle marks or other indications of drug abuse.
    - d. Obvious pain or bleeding or other symptoms suggesting need for emergency service.
    - e. Visible signs of trauma or illness, including signs of abuse or neglect (See Policy 5.10), or self-mutilation requiring immediate emergency or doctor's care.
    - f. Appearance of being under the influence of alcohol or any mood altering substance.
    - g. Any visible signs of alcohol or drug withdrawal symptoms.

- h. Behavior suggest the risk of suicide.
- i. Risk of assault to staff or other juveniles.
- 2. Any juvenile who is unconscious or semiconscious, experiencing severe/uncontrolled bleeding or otherwise urgently in need of medical attention will be refused admission into the facility until such time as medical clearance can be obtained from a health care facility or physician.
- 3. All juveniles will be assessed for use of intoxicants (alcohol and/or drugs). Juveniles who appear to be under the influence of alcohol will be tested using a Preliminary Breath Test (PBT) and other evaluation methods listed below. Juveniles who appear to be under the influence of drugs will be monitored through assessment of pupil dilation, blood pressure, pulse and responsiveness.
- 4. Juveniles may be refused initial admission if any of the following conditions are present:
  - a. Pupils dilated or constricted and unresponsive to light
  - b. Pulse greater than 120 per minute
  - c. Blood pressure diastolic 110 or greater, systolic 190 or greater or less than 80
  - d. Unresponsiveness
- 5. Juveniles will be taken to the emergency room for further evaluation.
- 6. Juveniles that exhibit any of the above conditions after admission will be referred to facility or community health care services for further evaluation.

#### B. Continued Assessment/Initial Health Screening

- 1. Health trained staff will complete the medical screening section of the Custody Authorization and complete the medical questionnaires in the facility computerized database.
  - a. Current illness and health problems, including venereal diseases and other infectious diseases.
  - b. Dental problems
  - c. Mental health problems
  - d. Use of alcohol and other drugs, including types of drugs used and mode of use, amounts of use, frequency of use, date and time of last use and history of any problems that may have occurred after ceasing (i.e. convulsions)
  - e. Past and present treatment or hospitalization for mental disturbance or suicide

- f. Possibility of pregnancy, pregnancy management, or current gynecology problems
- g. Other health problems in which a juvenile has been seen by a physician
- 2. Juveniles will be provided the Juvenile Initial Health Questionnaire for completion. Staff will provide assistance as necessary to the juvenile. Health trained staff will review the form for any immediate healthcare needs, take necessary action, and route the form to Medical.
- 3. All completed questionnaires in the facility computerized database and additional forms will be review by the facility's nurse.
- 4. If a new juvenile refuses to be evaluated and/or treated, the Commander or designee will be notified.

## C. Special Needs Juveniles:

- 1. Medical and Mental Health Staff will review all initial screenings. Juveniles who appear to be in need of special services will have an additional evaluation by Medical Staff and/or Mental Health Staff.
- 2. Conditions which may require additional evaluation and development of a treatment plan include the following:
  - a. Chronically ill or those with communicable diseases
  - b. Physical disabilities
  - c. Terminally ill
  - d. Juveniles with special mental health needs
  - e. Suicidal juveniles
  - f. Juveniles having a breathalyzer test result of .250 or greater.
  - g. Pregnant juveniles
  - h. Juveniles needing prosthesis
  - i. Seizures
- 3. Treatment plans will be developed by medical as needed and distributed to corrections/program staff.

## D. Health Appraisal

- 1. Juveniles receive a physical/mental appraisal within 7 days of admission. This appraisal is conducted by Medical Staff.
- 2. The physical/mental health appraisal includes the following:

- a. A review of the screening results; the collection of additional data to complete the medical, dental and mental health histories.
- b. Laboratory and/or diagnostic tests as deemed necessary by the health authority to detect communicable diseases including:
  - 1) sexually transmitted diseases
  - 2) tuberculosis
  - 3) additional tests as determined by the medical staff and health authority
- c. Recording of height, weight, pulse, blood pressure, temperature and respirations.
- d. A physical examination including comments about mental status and dental screening
- e. A review of the significant finding of the health assessment and test, and identification of problems by a physician
- f. Initiation of the appropriate treatment and therapy.
- g. History of hospitalization and/or taking of medications for physical or mental disorder.
- 3. Juveniles identified by Medical Staff to be suffering from a serious physical disability, mental disorder, or developmental disability are referred for care as deemed appropriate. Medical Staff maintains a list of referral sources and protocol for referrals. See Policy 12.240.
- 4. When appropriate, additional investigation should be carried out regarding the abuse of alcohol or other drugs, including:
  - a. Type of substance abuse
  - b. Mode of use
  - c. Amount and frequency of use
  - d. Date and time of last use
  - e. Current or previous treatment for chemical use
  - f. Current or past health problems related to abuse such as
    - 1) Hepatitis
    - 2) Seizures
    - 3) Traumatic injuries

- 4) Infections
- 5) Liver diseases
- 5. The procedures and forms used for collecting the health assessment data are approved by the Medical Director.
- 6. Re-admitted juveniles who have received a health assessment within the previous three months are not required to receive an additional assessment. The prior results are reviewed and tests, examinations, etc. are updated as necessary.

#### E. Medical Preventative Maintenance

- 1. This includes education and medical services (such as inoculation and immunization) provided to take advance measures against disease and instruction in self-care for chronic conditions.
- 2. Self-care is defined as care for a condition which can be treated by the juvenile and may include "over-the-counter" type medications.
- 3. Subjects for health education may include:
  - a. Personal hygiene and nutrition
  - b. Communicable diseases
  - c. Effects of smoking
  - d. Dental hygiene
  - e. Chemical Abuse
  - f. Fetal alcohol syndrome
  - g. Liver Disease
  - h. Physical fitness
  - i. Chronic diseases

## F. Continuity of Care

- 1. Each juvenile receives individual care as his medical needs dictate.
- 2. Pre-admission appointments for medical treatment are covered in Policy 12.180.
- 3. Medical records are obtained via:
  - a. Release of Information signed by the parent/legal guardian.
  - b. Court Order.

- 4. At the time of release, if needed the juvenile is given a list of medication and physicians to continue medical care.
- 5. If needed, the juvenile is referred to a specialist as required while detained.

## **JSC 12.160: Dental Care and Screening**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-25, 26

Classification: Public

## I. Policy

A. Dental care is provided to each juvenile under the direction and supervision of a licensed dentist.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

## A. Regular Dental Care

- 1. Upon admission, dental screening is part of the preliminary health screening.
  - a. If indicated, dental examinations will occur within 7 days of admission by a dentist with appropriate licensure.
  - b. Medical Staff will review and provide the juvenile's dental history to the facility dentist.
- 2. A dental screening and hygiene service is completed within fourteen days of admission. The dental screening is completed as part of the 7 day appraisal.
- 3. Dental services are available weekly. The Medical Staff coordinates and determines who will be seen based on evaluations.
- 4. Dental hygiene: All juveniles will receive fluoride toothpaste and a toothbrush. Dental health education is provided as needed.
- 5. Dental treatment occurs when the health of the juvenile would otherwise be adversely affected.

## B. Emergency/Urgent Treatment

1. Dental care is available for juveniles experiencing acute dental problems such as severe pain, infection, gum and broken dental prosthesis necessary to maintain nutritional intake. The juvenile will be transported to an outside facility if the condition warrants and as deemed necessary by a health care provider.

## JSC 12.170: Personal Health Care Provider

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-02

Classification: Public

## I. Policy

A. The facility provides juveniles with access to private health care providers.

#### **II.** Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. Personal Health Care Provider
  - 1. A juvenile may request to see their personal physician or dentist via a sick call request to medical services. All requests for personal physician or dentist visits are referred to Medical Staff.
  - 2. Upon approval of the request, Medical Staff fills out an Outside Medical Appointment sheet with the following information:
    - a. Juvenile's name
    - b. Date and time of appointment
    - c. Medical complaint
    - d. Current medication
    - e. Allergies
  - 3. Medical Staff places the Outside Medical Appointment Sheet into an envelope on which is written the following information:
    - a. Juvenile's name
    - b. The physician/dentist appointment
    - c. Business address

- d. The date and time of the appointment
- 4. The appointment is also typed in to the juvenile's computer file and the envelope is placed in the "Outside" appointment book in Booking.
- 5. The juvenile is informed an appointment has been made, but for security reasons, the date and time is not made known to the juvenile.
- 6. If the personal Physician/Dentist wishes to consult with the Medical Director or Nurse Practitioner regarding the juvenile's care, the Medical Staff will provide the name and telephone number of the Medical Director or Nurse Practitioner.
- 7. The parent/legal guardian or Holding Authority is responsible for all expenses.
- 8. Denial of a request for a juvenile's personal physician/dentist is returned to the juvenile clearly specifying the reasons for the denial.
  - a. Denials may be grieved to either the Medical Director, Nurse Practitioner or Commander.

### B. Prosthetic Devices (artificial limbs, crutches, canes)

- 1. The Shift Supervisor or designee notifies Medical Staff when a juvenile is admitted or is returned from the hospital with a prosthetic device and consideration is given to the following:
  - a. Devices are provided as deemed necessary to maintain health. Prosthetic devices deemed a safety and security hazard will be substituted with an alternative therapy as discussed with the prescribing health care provider. This includes, but is not limited to ace bandages and metal splints.
  - b. Inspection of the device and a review the juvenile's file occurs to determine whether or not the device itself or the juvenile's history and behavior pose any security risk.
  - c. Medical Staff will evaluate the juvenile's medical need for the device. If the Medical Staff recommend the device remain with the juvenile every effort is made to follow their recommendation. The Shift Supervisor determines appropriate housing assignment at that time.
  - d. If the Medical Staff, by consultation with ordering physician, decides the juvenile's health is not jeopardized by the removal of the device during confinement, the device is removed, tagged and stored in the juvenile's personal property bag.

## C. Eyeglasses/Contact Lens

1. If eyeglasses are broken, an Incident Report is written describing how the eyeglasses were broken (e.g. daily living, recreation). This report is forwarded to Medical Staff for review and coordination of the repair of the eyeglasses.

- 2. The parent or guardian is responsible for the expense of the repair of the eyeglasses, unless determined otherwise by the Commander due to the circumstances of the specific incident.
- 3. Saline solution for contact lenses is available through medical.
- 4. Personal eye care products must be approved by Medical Staff.

## JSC 12.180: Transfer for Needed Care

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-26, 33

Classification: Public

## I. Policy

A. Juveniles requiring medical services, beyond the resources of the facility, will be transported, in a timely manner, to a facility that can provide such care.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. When Medical Staff have determined outside health care services are necessary, such as an outside medical appointment or prescription medication, the Medical Staff will make arrangement for such services to be obtained.
- B. Medical staff will make reasonable effort to notify of the need and obtain parental consent prior to treatment, appointment or prescription medications. Lack of parental consent does not abrogate authority to treat for the protection, well-being or safety of the juvenile. (SDCL 26-7A-42)
- C. All non-emergent arrangements are entered into the facility computerized records system under appointments.
- D. Medical staff will coordinate with security personnel in determining appropriate transportation and necessary security precautions.
- E. An Outside Appointment form will be sent with the transporting staff.
- F. All juveniles will be transported in a manner that is safe and secure, yet does not endanger the juvenile's health or medical condition.
- G. The Shift Supervisor will assign Staff to transport the juvenile to the designated appointment.
- H. Staff will remain in contact with the Shift Supervisor via hand held radio and/or cell phone to inform them of any unexpected events.

I.	The health care providers will sign the doctor's treatment sheet with the assessment and orders for continued care. The transporting officer will return the papers and relay any pertinent information to Medical Staff and the Shift Supervisor.

## JSC 12.190: Pre-Transport Health Appraisal

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-48

Classification: Public

## I. Policy

A. Medical history records will be provided to other facilities upon transfer of the juvenile.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. Medical Staff reviews each juvenile's medical file and prepares the transport information sheet to include, at a minimum, health conditions, active treatments and allergies.
- B. Confidentiality of the health information will be maintained.
- C. Determination of suitability for travel will be based on medical evaluation, with particular attention given to communicable disease clearance.
- D. Written instructions regarding medication or health interventions that may be required en route for transporting officers will be provided.
- E. Specific precautions to be taken by the transporting officer, including universal precautions and the use of masks and/or gloves will be detailed by Medical Staff.

## **JSC 12.200: Medical Restraints**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-33-1, 44

Classification: Public

### I. Policy

A. The use of medical/psychiatric restraints will be limited to the level appropriate for the general public.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

## A. Medical/Psychiatric Restraints

- 1. The use of the four/five point restraints requires approval from the Commander, or designee, and direction of the Shift Supervisor. (See JSC Implementation Instruction 18.130)
- 2. The use of medical/psychiatric restraints will only be approved under the following circumstances:
  - a. The juvenile poses an imminent or immediate threat to self or others.
  - b. All less restrictive or intrusive measures have been employed or have been judged by the treating physician or psychiatrist to be inadequate.

## B. Monitoring

- 1. Juveniles who are restrained are continuously observed until assessment is completed by Medical Staff (an on-site evaluation by Medical Staff will occur within 60 minutes of application of the restraints). Medical Staff will provide a recommendation for continuance or immediate release of the restraints, based on the juvenile's medical and mental health status. Medical Staff will document assessment.
- 2. Following the initial medical assessment, juveniles are visually observed at least every 5 minutes by Correctional Staff to ensure their safety and the prompt

- removal of the restraints at the soonest possible time. The documentation of the visual observation is recorded by assigned staff member.
- 3. The Shift Supervisor will assess the juvenile's condition and review the restraint observation form at least every 20 minutes to ensure the removal of the restraints at the soonest possible time.
- 4. If the behavior continues for more than one (1) hour, the Commander or designee will be notified. The Commander or designee will conduct an on-site evaluation and assessment within 2 hours of initial use of restraints to consult with Medical to determine need to transfer to a medical/mental health unit and to initiate contacts to affect such a transfer if necessary.

## C. Pharmacological

- 1. Use of medication to restrain a juvenile is done only in a life threatening situation and only when ordered by the courts or attending physician as part of the health care treatment regimen.
- 2. Under no circumstances is a stimulant, tranquilizer, or psychotropic drug to be administered for purposes of program management and control or for purposes of experimentation and research.

## D. Reports

- 1. An Incident Report will be competed on all situations requiring the use of medical restraints.
- 2. Incident Reports must be completed by all staff involved in the incident and forwarded to the Shift Supervisor before the end of the shift.

## **JSC 12.210: Health Education**

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-34

Classification: Public

## I. Policy

A. The facility will provide a program of health education to juveniles regarding their individual needs.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. During the juvenile's 7 day physical, Medical Staff provide information to educate the juvenile on any common health alterations or conditions observed.
- B. Medical staff maintains a variety of educational health materials.
- C. If a juvenile is in need of education materials which are not readily available, the Medical Staff will make every effort to gather the information for the juvenile.
- D. Medical Staff will document education materials provided in the computerized records system.

## **JSC 12.220: Infectious Disease**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-36, 37, 38

Classification: Public

## I. Policy

A. The facility will address the potential for infectious disease through education, treatment, and prevention strategies.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. Juveniles with an infectious disease will be housed according to the care, precautions, and instruction deemed necessary by the medical staff. Standard precautions will be followed in all cases of infectious disease. The need for and type of isolation will be determined by Medical Staff.
- B. Infectious disease testing will be done upon juvenile request and/or as deemed necessary by Medical Staff. Testing is available for employees through Community Health, Department of Health or their primary physician.

#### IV. Procedural Guidelines

#### A. Education and Prevention

- 1. Infectious Disease education to include prevention, disease process, diagnosis, treatment, follow up and standard precaution education materials are available to juveniles and/or staff from Medical in the form of written material, direct conversation with medical staff or an appropriate healthcare professional.
- 2. Medical Fact Sheets are available to juveniles.
- 3. All staff receive education on infectious diseases and standard precautions during the orientation process. All staff will be offered the Hepatitis B vaccination series upon hire. Documentation of vaccinations and/or refusals to receive the vaccinations will be kept in each staff's medical file.

#### B. Transfer

1. Transporters and the receiving facility must be provided with necessary information for continuation of medical care of the juvenile and provide safety

for juvenile and correctional staff. The medical information will be provided on the Juvenile Transfer Sheet.

#### C. Release

1. All juveniles with infectious disease will be referred to their family physician, Community Health Center, Department of Health and/or any resource as deemed necessary by a practitioner and/or medical staff.

## D. Reporting

- 1. The rules of health care provider/patient confidentiality must be followed. Further information disclosure will be based on the applicable laws.
- 2. Medical staff may consult local, regional or state health departments for guidance in preventing and controlling any infectious disease not subject to mandatory disease reporting in South Dakota.

## E. Monitoring and Review

1. A multi-disciplinary committee meets at least quarterly to review and discuss communicable disease and infection control activities. See Policy 12.20.

## F. In-House Work Program Juveniles

1. A review of accepted standard operating procedures for all tasks and work areas is mandatory for all juvenile workers, with effective monitoring of work practices. The facility coordinator will monitor the procedures being used by juveniles to ensure the procedures are being used in an acceptable manner.

#### G. Maintenance

- 1. Gloves are used for all trash collection and cleaning up any body fluids and cell cleaning where body fluids can be involved.
- 2. Staff oversee the pod orderly tasks to ensure they are completed.

## H. Kitchen

- 1. The collection of used utensils, dishes, trays and garbage disposal is done utilizing gloves.
- 2. Food service staff oversees compliance with the use of gloves and cleaning supplies.

## I. Laundry

1. Gloves are to be worn at all times when encountering soiled linens.

2. Laundry that is soiled with blood and body fluids from a known contagious disease source, or parasites, will be placed in a water soluble laundry bag to be placed directly into the wash tubs.

## J. Tuberculosis Management

1. Tuberculosis (TB) is an airborne disease that can spread by droplet dissemination such as coughing or sneezing. Confirmed cases will demonstrate positive sputum. Confirmed cases will be reported to the South Dakota Department of Heath mandatory reporting regulation.

## 2. Screening and Testing

- a. An initial medical screening for any history of and/or current symptoms of tuberculosis is completed on all juveniles by medically trained staff during the intake and booking process.
- b. Any juvenile presenting with the following unexplained symptoms with a duration of greater than 3 weeks will result in transfer to a medical facility for evaluation or as directed by the Medical Staff or designee:
  - 1) Fatigue
  - 2) Productive cough
  - 3) Loss of appetite/rapid weight loss
  - 4) Low grade fever
- c. While waiting for availability of transport, the juvenile is to be provided with a particulate mask, placed on medical isolation and housed in a single holding cell. If juvenile refuses to comply with use of the mask, any staff encountering the juvenile must wear the particulate mask as a preventative measure.
- d. All juveniles will receive a tuberculin skin test at the time of their 7 day physical and all staff will be screened upon hire and annually as a condition of employment unless verification is obtained from another source that the testing had been completed within the previous year. If there is a history of tuberculosis or if the juvenile/staff has a history of a prior positive skin test a chest x-ray will be required for verification individual is infection free. NOTE: BOP juveniles receive screening within five days.
- e. Refusal to participate in TB screening will result in the following actions:
  - 1) Juvenile will be isolated from general population until risk is assessed.
  - 2) Staff refusals will be addressed by the Commander or designee.

f. The Medical Staff or designee will be notified of all positive test results. The Medical Staff or designee will then give directives regarding follow-up which may include chest x-ray, further lab testing and initiation of medication. All confirmed respiratory tuberculosis cases will be reported to the Department of Health per state regulations.

## 3. Special Housing

a. Confirmed respiratory tuberculosis (AFB sputum positive), who have been adequately treated with an approved medication regimen for a period of two weeks or longer will not require isolation. Juveniles diagnosed with respiratory tuberculosis that have not been treated with an approved medication regimen, has been non-compliant with medication regimen or has been on the medication regimen for less than 2 weeks will be transported for evaluation. Prior to returning to the facility the juvenile must be medically cleared by a practitioner.

#### 4. Release

a. All juveniles who are released prior to the reading of the TB test will be referred to their local health department for follow-up reading. All juveniles currently on a Tuberculosis medication regimen will be referred to their local health department for follow up and monitoring.

## K. Methicillin Resistant Staphylococcal Aureus (MRSA) Management

1. Methicillin Resistant Staphylococcus Aureus (MRSA) infection is caused by Staphylococcus Aureus bacteria and is often called "staph". MRSA infection can be fatal.

## 2. Screening, Diagnosis and Surveillance

- a. All juveniles undergoing intake medical screening will be carefully evaluated for skin infections. Any noted skin infections or wounds will be reported to medical for further evaluation. Health care providers will also evaluate juveniles for skin infections at physical examinations or medical evaluations for other conditions. Correctional officers will routinely refer juveniles with visible or reported sores or wounds or juveniles who self-report "boils", "lumps", "sore bumps" or "spider bites".
- b. All bacterial cultures should be reviewed in a timely manner to detect new MRSA infections. To prevent transmission to other persons, juveniles with MRSA infection will be removed from responsibilities in the food services, laundry and any situations that might bring the wound or wound drainage into contact with other persons or personal items.
- c. All positive MRSA testing will be documented and tracked in the computerized records system.

d. Correctional Staff experiencing draining skin infections and any confirmed MRSA infections will report such to their supervisors. Supervisors will refer Correctional Staff with possible skin infections to their health care provider. The degree of work restriction for employees who have active lesions is dependent on the location of the lesion and the work site of the infected employee. Staff with MRSA infection on the hand/wrist or face will be restricted from food handling, healthcare or laundry until they have received a release to work from their personal healthcare provider. Staff with lesions at sites other than the hand/wrist or face may continue to work in that area if the lesion is covered and drainage is contained.

## 3. Diagnosis

a. Correctional health care providers will consider MRSA infection in the differential diagnosis for all juveniles presenting with skin and soft tissue infections or other clinical presentations consistent with staphylococcal infection. Physical assessment will include full assessment of the wound. All draining lesions should be considered MRSA unless proven otherwise. All juveniles with skin and soft tissue infections with clinical presentations consistent with staphylococcal infection will be referred for evaluation and treatment by a practitioner. Wound cultures will be considered if wound drainage is available. Blood cultures should be considered if there are signs of systemic infection. Sputum cultures and chest x-rays will be considered if MRSA pneumonia is suspected.

## 4. Special Housing

a. Juvenile housing will be determined by Medical Staff.

#### 5. Decontamination

- a. Common equipment or items must be cleaned and disinfected thoroughly after each use with an effective EPA-approved disinfectant detergent, in accordance with the manufacturer's instructions.
  - 1) Linen and laundry must be placed in a water soluble bag for transport to laundry to prevent exposure and contamination of clothing and avoid transfer of micro-organisms to other juveniles or staff and the overall environment.
  - 2) Dishes, glasses and eating utensils. There are no special precautions needed. The combination of water and detergents used in institutional dishwashers is sufficient to decontaminate these items.
  - 3) Environmental surfaces. All washable (non-porous) surfaces of bathrooms and living areas should be cleaned routinely including during cell occupancy with an effective EPA-approved disinfectant detergent, in accordance with the manufacturer's instructions. When

- a juvenile has been released, moved to another cell, or no longer has MRSA complete decontamination of the cell will be completed.
- 4) Shared equipment or any other surface exposed to sweat should be disinfected daily.

#### 6. Transfers

a. Juveniles with contagious MRSA infections absolutely requiring transfer should have draining wounds dressed with bandages that adequately contain the drainage. Transporters and the receiving facility must be provided with necessary information for continuation of medical care of the juvenile.

#### 7. Release

- a. Juveniles with MRSA infections and scheduled for release should:
  - 1) Be given enough antibiotics to complete treatment.
  - 2) Referred to follow-up with outside medical facility/practitioner.

#### L. Hepatitis A Management

- 1. Hepatitis A, (formerly known as infectious hepatitis), is an acute infectious disease of the liver caused by the Hepatitis A virus. Hepatitis A does not have a chronic stage and does not cause permanent liver damage. The virus spreads by the fecal-oral route and infections often occur in conditions of poor sanitation and overcrowding. Hepatitis A can be transmitted by the parenteral route but very rarely by blood and blood products. Food-borne outbreaks are not uncommon. Symptoms include:
  - a. Yellowing of the skin
  - b. Extreme fatigue
  - c. Nausea
  - d. Lack of appetite

#### 2. Screening

 Juveniles will be screened for any observable or reported symptoms upon intake. Any observed or reported symptoms will be reported to medical. Juveniles will be placed in a single holding cell until evaluated by medical and further directives received.

#### 3. Housing

a. Special housing should be considered for juveniles who:

- 1) Are incontinent
- 2) Exhibit inability or refusal to comply with directives regarding Body Substance Isolation precautions and good hand washing.
- 3) or as directed by the Medical Director.

#### 4. Other Considerations

- a. Juvenile must be restricted from food service status until symptoms are resolved if applicable.
- b. Soiled laundry and clothing must be placed in a water soluble bag for transport to laundry.
- c. Standard precautions including contact precautions must be maintained.

## M. Hepatitis B Management

1. Hepatitis B (HBV) is a virus spread through blood and body fluids. It is most commonly transmitted through sexual contact, but can also be transmitted through percutaneous exposure such as tattooing, body piercing, and intravenous drug use. Chronic infection is often progressive and patient can be unaware they are infected and still have the capability of infecting others. Persons with chronic HBV have an increased risk for developing cirrhosis and liver failure.

## 2. Screening and Testing

- a. Initial screening for symptoms of Hepatitis or reported history of positive testing will be completed upon intake. Further screening will be completed during the 7 day physical and upon inmate request.
- b. All juveniles with symptoms of HBV and a history of intravenous drug use, jaundice or hepatitis should be considered high-risk and referred to the facility physician or practitioner for evaluation, testing and treatment as deemed necessary.

## 3. Special Housing

- a. There is no segregation of juveniles between those who may be negative opposed to those who test positive as long as they are asymptomatic.
- b. Those individuals who test positive and show symptoms with open wounds or body fluid drainage will maintain independent housing from other juveniles for their safety and/or on the recommendation of the physician.

#### 4. Decontamination

a. A review of accepted standard operating procedures for all housekeeping is mandatory for all juveniles, with effective monitoring of housekeeping.

b. Whenever open wounds, drainage from wounds, fluids containing blood are present, trained staff complete decontamination of the area with EPA approved disinfectant as indicated.

## N. Hepatitis C Management

1. Hepatitis C (HCV) is a viral infection and has become one of the most common causes of chronic liver disease. Exposure to infected blood by transfusion or intravenous drug abuse accounts for a significant portion of HCV transmission; about 40% of patients have acquired the infection "sporadically" without any identifiable parenteral source. Sexual transmission of HCV occurs, but is much less frequent and is presumed to account for only a small fraction of cases.

## 2. Screening and Testing

- a. Initial screening for symptoms of or positive testing for Hepatitis will be completed upon intake.
- b. Juveniles who have experienced intravenous drug use or blood transfusions and are symptomatic of jaundice, hepatitis, or chronic liver disease will be referred to Medical Staff for evaluation, testing, and treatment if deemed necessary.

## 3. Special Housing

- a. Juveniles who show no symptoms and have no open draining wounds will not require segregation from other juveniles.
- b. If body fluids or open drainage is present, the juveniles will be maintained in independent housing from other juveniles.

## O. Human Immunodeficiency Virus (HIV)

- Juveniles who are at risk for HIV infection or those whom are sero-positive with HIV will be treated professionally and confidentially. Standard precautions will be observed to prevent potential exposure to human immune deficiency virus. HIV virus is transmitted by parental exposure to blood, blood-contain body fluids, and blood products. Symptoms include:
  - a. Persistent fever
  - b. Weight loss
  - c. Night sweats
  - d. Chronic diarrhea
  - e. Swollen lymph nodes
  - f. Extreme fatigue

- g. Recurrent pneumonia
- h. Oral candidiasis (thrush)
- i. Purple skin lesions.

## 2. Screening and Testing

a. Screening will be completed upon intake and at the 7 day physical assessing for prior diagnosis or symptoms of HIV.

#### 3. Treatment

a. Juveniles needing treatment for HIV will be referred to an appropriate healthcare provider.

#### 4. Housing

- a. There is no segregation of juveniles between those who may be negative opposed to those who test positive as long as they are asymptomatic.
- b. For their safety and/or on the recommendation of a physician, those individuals who test positive and are showing symptoms of AIDS/ARC maintain independent housing from other juveniles.

#### 5. Decontamination

- a. A review of accepted standard operating procedures for all housekeeping is mandatory for all juveniles, with effective monitoring of housekeeping.
- b. Whenever open wounds, drainage from wounds, fluids containing blood are present, trained staff is to be notified for complete decontamination of the area with EPA approved disinfectant as indicated.

## P. Other Sexually Transmitted Diseases (STD)

 Sexually transmitted diseases are infections transmitted by participating in unprotected sexual activity. The causes of STDs are bacteria, parasites and viruses. Parasitic and bacterial infections can be treated with antibiotics. Viral infections do not have a cure although sometimes medication can keep the disease under control. Categories of STDs:

#### a. Viral

- 1) Acquired Immune Deficiency Syndrome (AIDS)
- 2) Genital Herpes/HSV
- 3) Genital HPV infection
- 4) Viral Hepatitis (A,B,C,D,E)

#### b. Bacterial

- 1) Chancroid
- 2) Chlamydia
- 3) Syphilis

#### c. Parasitic

1) Trichomoniasis

## 2. Screening and Treatment

- a. An initial medical screening for any history of and/or current symptoms of an STD is completed on all juveniles by medically trained staff during the intake and upon any reports or assessment noted during the 7 day physical.
- b. Any juvenile reporting current symptoms of an STD or reporting recent exposure to an STD will be followed up by Medical Staff. Medical Staff will arrange for juvenile to be evaluated and treated by the facility physician or an outside practitioner.

## Q. Lice, Crabs, and Scabies

- 1. Medical staff will follow Standing Nursing Protocol approved by the Medical Director to treat parasitic infestations.
- 2. Medical staff will contact the Medical Director/Nurse Practitioner or designee for directives if a juvenile presents with pre-existing conditions such as: pregnancy, open sores, respiratory ailments, or allergies.
- 3. If the parasites are discovered after the juvenile has been housed, the juvenile's cell and bunk will be decontaminated with an approved insecticide prior to further housing of juveniles in the cell.
- 4. If the juvenile has been housed in a cell with other juveniles, staff assess the other juvenile to ensure the cellmate is not also infected. If infected, staff will treat accordingly.
- 5. Juvenile linen and clothing will be placed in a water soluble plastic laundry bag and taken to the laundry room.
- 6. The juvenile will be issued a fresh set of linen and clothing.

# JSC 12.230: Occupational Viral Hepatitis/HIV Post-Exposure Prophylaxis

**Chapter:** Medical

Order No:

**Effective:** May 9, 2011 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-37, 38

**Classification:** Public

## I. Policy

A. The facility provides a process for anti-viral chemoprophylaxis for staff occupationally exposed to viral hepatitis/HIV.

#### **II.** Definitions

A. N/A

#### III. General Information

A. In keeping with the Public Health Service recommendations, combination antiviral chemoprophylaxis may be recommended, offered, or discouraged based on the severity of the occupational exposure incident, as outlined in this policy.

#### IV. Procedural Guidelines

- A. Employees receive training regarding the risks and prevention of occupational Viral Hepatitis/HIV transmission and the criteria for post-exposure antiviral chemoprophylaxis.
- B. Employees occupationally exposed to Viral Hepatitis/HIV or suspected Viral Hepatitis/HIV body fluids will be directed to the Rapid City Regional Hospital Emergency Department. Determinations regarding treatment will be done by the Emergency Department Physician.

#### C. If an exposure occurs:

- 1. The affected person shall wash or rinse the site of the exposure immediately.
- 2. The affected person shall notify the supervisor immediately.
- D. The supervisor shall report the incident to Medical Staff, the Commander or designee and complete an Incident Report.
- E. The affected person shall report to the Rapid City Regional Hospital Emergency Department.

- F. Continuation of treatment and follow-up care and testing shall be at the direction of the treating physician at Rapid City Regional Hospital Emergency Department.
- G. Any exposure incident reported more than 24 hours after the incident shall be reviewed by Medical Staff and consultation with the Medical Director of Infection Control or designee, at Rapid City Regional Hospital shall occur. Antiviral Chemoprophylaxis eligibility will be determined on a case-by-case basis.
- H. An employee who sustains an occupational exposure incident, whether or not they are taking antiviral chemoprophylaxis, shall be counseled concerning the risk of Viral Hepatitis/HIV transmission during the post-exposure incident follow-up period.
- I. The employee has the right to decline Antiviral Chemoprophylaxis. Declining to take recommended medications shall not impact other treatment or benefits to which the employee may be otherwise entitled to.

# JSC 12.240: Special Medical Procedures/Special Needs Juveniles

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** July 17, 2017

**Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-30, 31, 32

Classification: Public

## I. Policy

A. The facility evaluates juveniles for pre-existing conditions and special needs.

#### II. Definitions

A. N/A

#### **III. General Information**

- A. The Medical Staff and Security Staff reserve the right to refuse entry of an individual into the facility if the individual's condition requires treatment or evaluation at a health care facility, for injuries, chemical withdrawal, or previous medical condition. Incident Reports will be completed concerning refusal of a juvenile by the evaluating personnel.
- B. Juveniles having a special need which requires close medical supervision and care will have a special needs treatment plan developed.

#### IV. Procedural Guidelines

- A. All juveniles are evaluated upon admission for pre-existing medical conditions.
- B. Individual personal care plans are developed for each juvenile depending upon their special needs. These may include:
  - 1. The chronically ill
  - 2. Those with communicable diseases
  - 3. The physically handicapped
  - 4. The terminally ill
  - 5. The developmentally disabled
  - 6. The severely mentally ill
  - 7. Those prone for withdrawal from alcohol or drug abuse
  - 8. Those pregnant

- C. The Commander or designee and the Medical Director or designee consult prior to taking action regarding special needs juveniles. Immediate action, in the areas identified below, may occur to provide the health care plan which meets the juvenile's needs. Consultation to review the appropriateness of such action must occur within 72 hours of implementation. Consultation involves: medical, mental health, and security staff.
  - 1. Housing: Classification is done to best meet the needs of the individual.
  - 2. Medication as needed.
  - 3. Special equipment as needed.
  - 4. Special diets as needed. Therapeutic diets are provided as prescribed by appropriate clinicians. Prescriptions for therapeutic diets should be specific and complete, furnished in writing to the food service manager, and rewritten annually, or more often, as clinically indicated.
  - 5. Program assignment.
  - 6. Clean-up assignment limitations.
  - 7. Disciplinary measures.
  - 8. Transfers in or out of the facility.
- D. Medical Staff or Mental Health Staff will notify the Commander or designee of any juvenile whose condition requires a level of care beyond the range of services available in the facility.
- E. All staff involved in a transfer for services will complete an Incident Report. The Shift Supervisor will route all reports to the Commander for review prior to the end of the shift.
- F. Diabetes-specific response:
  - 1. The Medical Director will direct the diet and medication of all diabetics.
  - 2. Glucometer readings will be performed as prescribed and will be documented on the diabetic flow sheet.
    - a. If the juvenile complains of the following symptoms and cannot accomplish self-administration to obtain a glucometer reading, the Staff will immediately notify Medical Staff to obtain further directions.
      - 1) Shaking
      - 2) Fast heartbeat
      - 3) Sweating

- 4) Nervousness
- 5) Dizziness
- 6) Impaired vision
- 7) Irritability
- b. If the reading is below 70 mg/dl contact medical staff and treat immediately per medical direction. The following are examples of good choices to treat low blood glucose. Each contains approximately 15 grams of carbohydrate.
  - 1) Milk (skim preferred) 1 cup
  - 2) Apple juice ½ cup
  - 3) Non-diet pop ½ cup
- c. 15/15 Rule: Fifteen minutes after you treat the low blood sugar, test blood glucose again. If it is still less than 70mg/dl, have another 15 grams of carbohydrates. Test blood glucose again in 15 minutes and continue to treat until juvenile is above 70 mg/dl. If it will be more than an hour before the next meal or snack, have an additional snack containing carbohydrate and protein. (i.e. half a sandwich and one piece of fruit or one carton of juice).
- 3. Insulin will be administered as per Medical Director Orders and documented on the diabetic flow sheet.
  - a. Same gender staff will take all juveniles to the examination room for self-administration of insulin.
  - b. If available, insulin pens will be used. Insulin syringes will be taken from JSC stock (adhere to Policies 14.150 and 14.270).
- G. Seizures-specific response:
  - 1. The Medical Director will direct the diet and medication.
  - 2. Seizure Activity Present
    - a. Protect person from injuring themselves utilizing Cardio Pulmonary Resuscitation /First Aid skills.
    - b. Notify Medical Staff.
    - c. If seizure lasts longer than five minutes, call ambulance for transport to the Emergency Room.
- H. Alcohol Detoxification-specific response.

## 1. Admission to the facility:

- a. Shift Supervisor or designee performs a Preliminary Breath Test (PBT).
- b. Any detainee with a BPT reading above .000 will be placed on Alcohol Detoxification protocol. Medical staff will be notified as needed based on the protocol.

#### 2. Treatment

- a. The Medical Director will direct the diet and medication.
- b. Staff will monitor juvenile and follow Detox Protocol Check Sheet. (See Attachment A.)
- c. Upon completion, the Detox Protocol Check Sheet will be routed to Medical for review and placement in juvenile's medical record.

## I. Drug Withdrawal-specific response.

- 1. Obtain as much information as possible during the intake process.
- 2. Monitor juvenile and accomplish Detox Protocol Check Sheet (negate Personal Breath Test readings).
- 3. Contact Medical Staff for direction as to care.

#### J. Mental Health

- 1. During the admission process, the Intake Officer will evaluate each juvenile for possible signs of significant mental illness or mental retardation that may complicate the adaptation to detention.
- 2. Pending a review from the Medical Staff or Mental Health Staff, the Shift Supervisor may decide to have the juvenile housed in locked status with approval from the Commander, depending on the severity of the juvenile's condition.
- 3. Medical Staff and Mental Health Staff will review the screening section of all newly admitted juveniles in order to ascertain mental status information. Mental Health Staff will conduct a follow-up visit with each juvenile whose record reveals a history of mental illness or mental retardation.
- 4. If staff believes the juvenile's mental condition is a threat to himself or others, the Commander will be contacted to initiate the transfer process to a higher level of care facility.

## JSC 12.250: Informed Consent

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-42, 45

Classification: Public

## I. Policy

A. All examinations, treatments and procedures affected by informed consent laws within the community are likewise observed for juvenile care.

#### II. Definitions

A. N/A

#### **III.** General Information

A. Health care is rendered against a juvenile's will only in accordance with SDCL 26-7A-42.

## IV. Procedural Guidelines

- A. Medical Staff accomplishes prompt notification of juveniles' parents/guardians and the holding authority in case of serious illness, surgery, injury or death. Inability to obtain parental consent and/or refusal of medical treatment by a juvenile will be reported to the Commander or designee immediately.
- B. The Commander, Medical Staff or Nurse Practitioner will assess necessity of treatment. If deemed necessary by the Medical Director, the Commander will obtain a court order for treatment. The Commander will make reasonable effort in accordance with SDCL 26-7A-42 to contact parents/guardian.

# JSC 12.260: Death in Facility

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-45 **Classification:** Public

## I. Policy

A. In the case of death in the facility, prompt notification to parents/guardians and responsible agencies will occur.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

#### A. Notification

- 1. A deceased person in or on the grounds of JSC and of any person in JSC custody regardless of location will be cause for the Shift Supervisor to immediately notify the following:
  - a. Commander or designee
  - b. Sheriff/Chief Deputy for law enforcement and coroner response
  - c. Medical Director, Nurse Practitioner and Medical Staff

## B. Preservation of the Scene

- 1. In the event the death is suspected to be of unnatural causes (i.e. suicide, homicide), the Shift Supervisor establishes a secure perimeter and assigns a staff member to monitor/limit movement into and out of that secure perimeter to preserve all evidence.
- 2. The Shift Supervisor coordinates with law enforcement to ensure all witnesses are identified.
- 3. Staff will be made available to assist law enforcement and the coroner.

#### C. Follow-up

#### 1. The Commander will:

- a. Notify the parent/legal guardian.
- b. Notify the Holding Authority and agencies with legal detainers pending.
- c. Direct the Shift Supervisor to inventory all property of the deceased and place in secure storage.
- d. Direct the Booking Officer to complete release procedures.
- 2. All staff involved will submit a written report to the Commander before departing the facility.

## D. De-Briefing

1. Upon clearance by the investigating authority, the Commander ensures a debriefing is held with all staff directly involved.

#### E. Review

- 1. An independent mortality review will be conducted.
- 2. The following may participate in the mortality review:
  - a. Sheriff
  - b. Commander
  - c. Medical Director
  - d. Other persons as deemed appropriate
- 3. A complete review of the juvenile's medical file will be conducted.
- 4. Documentation of the review will be made and kept in the juvenile's file. Release of this information will be at the discretion of the Sheriff and the Commander.
- 5. If deemed necessary, a post-mortem examination may be requested.

# JSC 12.270: Notification of Parent/Legal Guardian Medical/Mental Illness

**Chapter:** Medical

Order No:

**Effective:** April 1, 1997 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-45 **Classification:** Public

## I. Policy

A. Parent/guardian will be notified of any serious injury or illness, including mental illness.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

- A. During the admission process, staff will obtain emergency contact information for parent/legal guardian.
- B. Medical Staff, or in the absence of Medical Staff, the Shift Supervisor, will make reasonable efforts to contact a juvenile's parent/legal guardian when any outside medical attention is determined to be necessary. If necessary, law enforcement will be requested to make contact or leave a note at the residence to have the parent call the facility immediately for information regarding their child. The following information will be released:
  - 1. The nature of the illness or injury.
  - 2. The name and phone number of the treating physician/facility, if parent/guardian have no preference. (This information may be withheld if releasing it may cause security problems).
  - 3. The name and location of the hospital (This information may be withheld if releasing it may cause security problems).
  - 4. Any visitation restrictions while the juvenile is receiving medical attention outside the facility.

- 5. Release of additional information including, but not limited to, specific to the event surrounding the illness or injury, specific treatment or lack thereof, or specific causation for the illness or injury, will be delayed until authorization of the Commander or designee.
- C. The Shift Supervisor or designee will contact the juvenile's assigned Holding Authority to inform of an outside medical/mental health appointment.
- D. The Medical Staff or the Shift Supervisor, dependent upon who accomplishes the actual notification, will record all information surrounding notifications in the computerized records system.

## **JSC 12.280: Medical Records**

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-24, 46, 47

Classification: Public

#### I. Policy

A. The facility will maintain medical records in compliance with Health Insurance Portability and Accountability Act (HIPAA) regulations.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

A. Medical Staff will establish and maintain juvenile records according to a set format in order to organize and preserve information and to protect the security and confidentiality of information in compliance with Health Insurance Portability and Accountability Act (HIPAA) regulations. Health care records are available to, and are used for documentation by, all health care practitioners. Reasonable access is provided as determined by the Commander and records are released according to preestablished guidelines, including state and federal laws. Active health records are maintained separately from confinement records.

#### B. Medical File Contents

- 1. Each document in the medical file indicates the legible signature and title of each documenter. All information recorded on medical forms is done in black or blue ink.
- 2. The health record file (paper and/or electronic) is complete and contains the following items filed in a uniform manner.
- 3. Identifying Information includes but not limited to:
  - a. Receiving screening and health assessment forms
  - b. 7 day physical/ health appraisal data form
  - c. Medical treatment consent.

- d. Release of Information form
- e. Medical Records from outside agencies
- f. Immunization records, if any
- 4. Health Care Provider includes but not limited to:
  - a. Medical treatment sheet
  - b. Verbal orders
  - c. Physician's Progress notes
  - d. Prescriptions
  - e. Outside medical appointment sheets
  - f. Refusal of Medical Treatment forms
  - g. Outside medical health discharge summaries
- 5. Dental Care includes but not limited to:
  - a. Dental screening/hygiene service
- 6. Nursing Care includes but not limited to:
  - a. Nursing Plan of Care
  - b. Nursing Treatment Sheets
- 7. Outside Medical Care includes but not limited to:
  - a. Laboratory reports
  - b. X-ray reports
- 8. Mental Health includes but not limited to:
  - a. Mental health reports
  - b. Outside mental health discharge summaries
- 9. Sick Call includes but not limited to:
  - a. Juvenile sick call reports
  - b. Incident reports
- 10. Miscellaneous includes but not limited to:
  - a. Medication sheets

- b. Diet sheets
- c. Refusal forms: Medication and Special Diets

## C. Physician's Orders

- 1. Only licensed nurses may receive a physician's or Nurse Practitioner's order. The Medical Director or Nurse Practitioner signs verbal orders within 72 hours. Orders are placed in the juvenile's medical file.
- 2. Only a licensed nurse may transcribe a physician's order. A nurse's signature by the order noting the order has been transcribed is necessary.

## D. Confidentiality of Medical Records

- 1. Medical records are kept in locked file drawers in the medical office.
- 2. Access to health records is controlled by the Health Authority and the Commander.
- 3. These records remain confidential as per SDCL 26-7A-29.

#### E. Release of Medical Records

- 1. Medical records are released per SDCL 26-7A-29 upon receipt of court order.
- 2. Medical Staff document the release or transfer of any medical record.

## F. Transfer of Medical Records to Other Facilities

- 1. Transfer of medical records to other facilities occurs per SDCL 26-7A-29.
- 2. A medical transfer form accompanies a juvenile when transported to another facility in order to facilitate continuity of care. Information release does not require a release of information form or court order.

## G. Records Retention

1. Records are maintained in inactive files for ten (10) years.

## JSC 12.290: Food Refusal

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-30 **Classification:** Public

## I. Policy

A. Upon a juvenile's refusal to eat or initiation of a fast, Medical staff will monitor their medical and psychological well-being.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

- A. Monitoring Juvenile Eating Habits
  - 1. Correctional Staff monitor juveniles to determine if they exhibit a change in normal eating patterns (i.e. hunger strikes, skipping meals because of depression, fasting, etc.).
  - 2. Staff notifies Medical Staff and the Shift Supervisor in the event a juvenile has not eaten for three (3) consecutive meals.

## B. Meal Watch

- 1. Medical Staff will review the situation and initiate a meal watch on a juvenile by implementing a meal watch plan.
- 2. Documentation of fluid intake is captured on the meal watch plan.
- 3. Medical staff will:
  - a. Check the status of juveniles on meal watch daily to re-evaluate the need for a continued watch.
  - b. Obtain baseline weight and vital signs.
  - c. Check and document weight and vital signs, skin turgor and mucus membranes. Record all data in the juvenile's medical record.

#### C. Notification

- 1. The Commander or designee is notified immediately when a juvenile is placed on a meal watch.
- 2. The Medical Director or Nurse Practitioner is notified immediately if a meal watch is implemented on a diabetic juvenile. The Medical Director or Nurse Practitioner's orders will be followed.
- 3. For non-diabetic juveniles, the Medical Director is notified if the meal watch lasts longer than three (3) days. The Medical Director or Nurse Practitioner's orders will be followed.
- 4. Daily reports of the juvenile's medical condition and food or fluid intakes are given to the Commander and the Medical Director or Nurse Practitioner by medical staff.
- 5. If the juvenile is on a religious fast, consultation with a religious representative is made by the Commander or designee.

#### D. Action

1. The Medical Director or Nurse Practitioner will conduct a personal evaluation within 7 days of the meal watch form implementation and provide direction as to any specific treatment to maintain the juvenile's health.

## JSC 12.300: Female Health Care Issues

**Chapter:** Medical

Order No:

**Revised:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-21-1, 5B-07

Classification: Public

## I. Policy

A. Juveniles who are pregnant will be provided with health care, comprehensive counseling, and assistance.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

A. If a juvenile states at the time of booking she may be pregnant, has recently delivered an infant, or has reproductive health issues, this information will be forwarded to the Medical Staff.

#### B. Pregnancy Testing

- 1. Juvenile who believes they may be pregnant are required to submit a sick call to Medical Staff.
- 2. Medical staff will visit with the juvenile to determine if it is necessary to perform a pregnancy test per standing protocol.
- 3. Upon verification of pregnancy, Medical Staff will set the juvenile up with prenatal appointments as directed by the Medical Director or designee.

#### C. Reproductive Health Medications

1. Juveniles currently taking birth control will be allowed to continue with their prescription while incarcerated. The facility will not provide juveniles with birth control unless prescribed by a physician for the medical purposes of hormonal control.

#### D. Pregnancy Management

- 1. Pregnant juveniles will be provided with special health care counseling concerning their unborn child, regular examinations and treatment, and such dietary supplements as determined/ordered by the Medical Director or Nurse Practitioner.
- 2. The medical file will reflect the care provided and the outcome of each pregnancy, if carried to term while detained.
- 3. If deemed a high-risk pregnancy, the Medical Director or Nurse Practitioner may refer the juvenile to a specialist to obtain medical care for the juvenile and her unborn child.
- 4. Juveniles who are pregnant and diagnosed as chemically addicted will be closely monitored by the Medical Staff and the Medical Director or Nurse Practitioner for withdrawal symptoms and given proper treatment providing for the safety of the juvenile and her unborn child. As per SDCL, such juveniles will be reported to the appropriate agency.
- 5. The use of restraints on female offenders during active labor and the delivery of a child is prohibited. Any deviation from the prohibition requires approval by, and guidance on, methodology from the medical authority and is based on documented serious security risks. The medical authority provides guidance on the use of restraints on pregnant offenders prior to active labor and delivery.

## E. Postpartum Issues

- 1. Juveniles who deliver while in custody will continue to receive medical treatment as deemed necessary by the Medical Director or Nurse Practitioner.
- 2. Juveniles will not be permitted to bring their newborn child back into the facility. The Commander may allow special visitation. However, any special visitation between the newborn child and the juvenile will be closely supervised by staff and only authorized if the juvenile's behavior warrants.
- 3. Medical Staff will notify the Holding Authority of the need to evaluate and/or assist the juvenile in finding temporary placement for the child.

## JSC 12.310: Sexual Assault and Protection from Harm

**Chapter:** Medical

Order No:

**Effective:** May 20, 1996 **Revised:** January 5, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3D-06, 06-1, 2, 3, 4, 5, 6, 7, 8, 9, 10

Classification: Public

## I. Policy

A. The facility maintains zero tolerance for sexual abuse, assault and or misconduct.

#### **II.** Definitions

A. N/A

#### **III. General Information**

- A. The facility maintains a zero-tolerance policy for juvenile-to-juvenile, staff-to-juvenile, and juvenile-to-staff sexual abuse/assault and/or misconduct. Sexual conduct between staff and juveniles, volunteers or contract personnel and juveniles, regardless of consensual status, is prohibited and subject to administrative and criminal sanctions.
- B. The facility requires mandatory training for staff, volunteers, and contract employees to prevent and respond to sexual abuse/assault and/or misconduct. All staff, volunteers and contract employees are trained in the appropriate steps to take if a juvenile reports an incident of sexual abuse/assault/misconduct.
- C. Any juvenile, who may be a victim of sexual abuse/assault/misconduct, may report the incident to any staff member, volunteer or contract employee. All alleged acts of sexual abuse/assault/misconduct will be documented and referred to law enforcement for investigation. Juveniles who are victims of sexual abuse/assault/misconduct will be provided appropriate medical treatment and counseling.

#### IV. Procedural Guidelines

#### A. Orientation

- 1. All newly booked juveniles will receive a face to face orientation at admission and upon arrival to the assigned housing unit by staff on duty. The orientation will include the facility's zero tolerance policy on sexual abuse/assault/misconduct.
- 2. The Juvenile Handbook contains the following information which is available to the juveniles:
  - a. Prevention/intervention of sexual assault

- b. Self-protection
- c. Reporting sexual abuse/assault
- d. Treatment and counseling
- 3. Staff, volunteers, and contract employees receive training on the WSDJSC's zero tolerance policy for juvenile-to-juvenile, staff-to-juvenile, and juvenile-to-staff sexual abuse/assault and/or misconduct and the Prison Rape Elimination Act (PREA).

## B. Discovery

- 1. A staff member who has been informed by a juvenile that they have been a victim of sexual assault will notify the Shift Supervisor, who will notify the Commander or designee.
- 2. The Commander or designee will notify the Pennington County Sheriff's Office Law Enforcement Division of the alleged sexual assault.
- 3. Arrangements will be made to have the juvenile transferred to the Rapid City Regional Hospital Emergency Room, for a physical examination and collection of evidence upon direction of the investigator. The investigator will determine if it is appropriate for the juvenile to be transferred to the emergency room based on factors to include, but not limited to, the length of time between the assault and when it is reported, if the juvenile has showered and other factors the investigation deems appropriate.

#### C. Preservation of Evidence

1. Immediately upon receiving a report of sexual assault of a juvenile, the person receiving the report is to immediately contact the Shift Supervisor. The Shift Supervisor will take steps to immediately preserve any forensic evidence to include preserving inmate clothing of the victim and alleged perpetrator, sealing off the vicinity where the assault took place, and not allowing the victim or alleged perpetrator to shower. The Shift Supervisor will contact an investigator who will provide direction on any further actions to take until the investigator arrives on the scene.

#### D. Medical Care of the Juvenile

- 1. Medical Staff will make every effort to ensure the health encounter with the juvenile is private.
- 2. Juveniles are transferred to the Emergency Department at Rapid City Regional Hospital where medical staff will conduct appropriate exams, collect forensic evidence for law enforcement, and provide care identified as necessary.

3. When the juvenile returns to the facility, arrangements will be made for the juvenile to receive counseling for crisis intervention and follow up by Medical Staff per discharge summary from Rapid City Regional Hospital.

## E. Housing

- 1. Upon any report of juvenile-to-juvenile, staff-to-juvenile, and juvenile-to-staff sexual abuse/assault and/or misconduct, the Shift Supervisor will contact the Commander or designee for direction in reassigning housing in order to keep the victim separated from the assailant.
- 2. Upon admission of a juvenile identified as at risk for sexual victimization or predatory tendencies (assaultive behavior), special housing assignment will be evaluated and services/treatment will be provided by Mental Health and Medical Staff as deemed necessary. The juvenile will be closely monitored as per any special programs implemented.

#### F. Sexual Assault Records

 All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation finding, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule.

## **JSC 13.10: Volunteer Program**

**Chapter:** Citizen Involvement and Volunteers

Order No:

Effective: January 3, 1996
Revised: June 27, 2019

**Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1G-01, 02, 03, 04, 05, 06, 07, 08, 09

Classification: Public

## I. Policy

A. The facility maintains a volunteer program for the benefit of juveniles.

#### **II.** Definitions

A. N/A

## **III. General Information**

- A. The volunteer program is available to generate a variety of services for juveniles during confinement.
- B. The volunteer program permits increased personal contact for the juveniles, broadens community resources for the facility, and increases public awareness of juvenile detention.
- C. The facility seeks volunteers from all cultural and socioeconomic area of the community.
- D. The facility seeks voluntary material good donations from community resources in addition to direct service volunteers.
- E. Eligible volunteers must be 21 years of age and be considered a person of good character.
- F. Relatives or guardians of a juvenile may not serve as a direct service volunteer when the juvenile is a resident of the facility.
- G. Facility employees cannot be volunteers.

#### IV. Procedural Guidelines

- A. The Commander designates a Volunteer Coordinator to oversee the volunteer programs.
- B. Prospective volunteers complete a volunteer application and a waiver for a background investigation.

- C. Prospective volunteers are interviewed by the Volunteer Coordinator to determine the volunteer position most suited to them.
- D. The Volunteer Coordinator requests the background investigation results from the Pennington County Sheriff's Office Law Enforcement Division.
- E. The Commander approves or denies the volunteer applicant based upon review of the application, background investigation, and recommendation of the Volunteer Coordinator.
- F. Upon approval, the Volunteer Coordinator completes an orientation to the facility and issues an identification card for the volunteer to wear every time they enter the facility.
  - 1. The volunteer agrees in writing to abide by facility policies including maintaining confidentiality of juvenile information.
  - 2. The volunteer is trained in the Prison Rape Elimination Act (PREA) Standards and their responsibility to report any suspected incidents of sexual harassment and/or abuse.
  - 3. The volunteer is notified to share any suggestions concerning the volunteer services program with the Volunteer Coordinator, Programs Lieutenant or Commander.
  - 4. Volunteers who wish to offer professional services must provide certificates or licensure indicating qualifications.
  - 5. Volunteers are given training specific to the task or program they will are assigned.
- G. The Volunteer Coordinator creates a volunteer file and notifies staff of the new volunteer.
- H. Upon entry to the facility, volunteers will secure their belongings in the lockers and sign in on the log.
  - 1. The Control Room Operator or clerical staff will verify the volunteer is wearing their identification badge and they are on the current volunteer roster.
- I. The Control Room Operator or clerical staff will notify the Shift Supervisor of the volunteer's arrival. The Shift Supervisor or designee will facilitate the beginning of their volunteer activity.
  - 1. A volunteer program may be cancelled or terminated at the discretion of the Shift Supervisor if necessary for the safety and security of the facility or the volunteer.
- J. Upon exit of the facility, volunteers will sign out of the log and report anything of concern regarding the juveniles to the Shift Supervisor or the Volunteer Coordinator.

- K. The Volunteer Coordinator will maintain contact with the volunteers to ensure program success.
  - 1. The Volunteer Coordinator will keep the Programs Lieutenant and Commander apprised of current volunteer information and changes to services.
- L. The Volunteer Coordinator will send a monthly report listing volunteers to the Pennington County Sheriff's Office Human Resources Manager.

# JSC 14.10: Administrative Information System

**Chapter:** Administrative Information and Research

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-1F-01, 02, 03, 04, 05, 06, 07, 08

Policy Classification: Public

#### I.

A. The facility utilizes an organized system of information storage, retrieval and review for overall research and decision-making capacity relating to both juvenile and operational needs.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. The facility as well as the other divisions of the Pennington County Sheriff's Office support, engage, and use research activities relevant to its programs, services and operations.
- B. The facility shall make every effort to collaborate with juvenile justice and service agencies in information gathering, exchange, and standardization.
- C. All research conducted must comply with professional and scientific ethics in addition to county, state, and federal guidelines for the use and dissemination of findings.
- D. The effectiveness of the information system as it relates to facility management is evaluated annually.

#### IV. Procedural Guidelines

#### A. Research Requests

- 1. All proposals to conduct research utilizing the facility or facility information will be submitted in writing to the Commander.
- 2. Applications to conduct research shall include the following information:
  - a. Purpose of the research
  - b. A summary of the goals of the study and the justification for the research
  - c. Names, addresses, and telephone numbers of the principal researcher and all research staff

- d. An endorsement by a recognized research organization, such as a university, college, private foundation, consulting firm, or public agency certifying the research proposal is for valid scientific, educational, or other public purposes
- e. The facility resources and personnel possibly needed for the study
- f. The sampling procedures for selecting juvenile subjects or juvenile records for the research, as well as criteria to be used for sample selection
- g. Procedures for data collection and copies of research instruments to be used, including interview schedules, questionnaires, data collection forms, and tests
- h. The security procedures to be followed to protect the privacy of participants and the confidentiality of the information
- i. Details of compensation
- 3. The Commander will review the proposal with the Sheriff.
- 4. Upon approval, a written agreement will be completed between the researcher and the facility, authorizing specific access, use of data, and ensuring confidentiality.

#### B. Conduct of Research

- 1. The principal researcher shall maintain adequate records enabling the Commander to ascertain the status of a study at any time.
- 2. Any data collected during the course of the research shall be used only as agreed to by the subjects prior to the beginning of the study.
- 3. Access to research data identifying juveniles shall be limited to research staff collecting and evaluating the data and to the Commander or designee.
- 4. A staff member shall be assigned to monitor the project to ensure confidentiality.
- 5. No juvenile or staff member shall receive compensation or payment of any kind in connection with a research study without the written permission of the Sheriff.

## C. Juvenile Participation

- 1. It shall be made clear to all juveniles and parents/guardians their participation in the research is not required and shall in no way affect the terms or length of detention.
  - a. Juveniles will not be allowed to participate in medical, pharmaceutical, or cosmetic research of any kind.

- 2. The principal researcher shall explain the study and its justification to all potential subjects.
- 3. An easily understood written summary shall be prepared and a copy given to each potential subject.
- 4. The researcher shall obtain signed permission form from juveniles, parents/guardians, and staff scheduled to participate in the research.

## D. Follow-up Reports

- 1. A summary of the content of the study, shall be provided to the Commander immediately following the facility phase of any research.
- 2. Upon completion of the project, a copy of any final report shall be provided to the Commander and approved prior to dissemination.
- 3. Confidentiality of any identifying juvenile information must be maintained in all reports.

## E. Violations of Research Regulations

- 1. Permission to conduct the current study and any further research may be discontinued for any violations of these regulations or of other parent agency regulations in the course of the research.
- 2. Violators of these regulations may be subject to civil or criminal liability.

# JSC 15.10: Emergency Communication and Response – General Provisions

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3B-07 **Classification:** Public

## I. Policy

A. The facility communications system will allow staff to communicate internally and with external community resources.

B.

#### II. Definitions

A. N/A

## **III. General Information**

- A. During an emergency situation, the highest ranking staff member on duty shall have authority for decisions made affecting the facility.
- B. Authorized radio codes for INTERNAL USE during an emergency is as followed:
  - 1. Code 100 RED: Imminent Danger Immediate Response Necessary
    - a. Officer Needs Assistance Safety Situation
    - b. Disturbance Physical Altercation
    - c. Escape Physical Secure
  - 2. Code 100 ORANGE: Danger Evaluation/Response Necessary
    - a. Bomb Threat
    - b. Hostage Situation
    - c. Riot
    - d. Tornado Warning
  - 3. Code 100 BLUE: Life Threatening Medical Emergency
    - a. Medical Emergency

- b. Suicide
- 4. Code 100 WHITE: Physical Plant Emergency
  - a. Fire
  - b. Gas Leak

- A. When staff encounters an emergency, they immediately make the appropriate radio signal/code announcement and state their location or the location of the threat.
  - 1. The Control Room Operator will acknowledge the radio announcement and ensure the Shift Supervisor received the radio transmission, or provide such notification.
- B. In an emergency, all nonessential communication will cease.
- C. In the event of partial or total loss of phone, radio, and intercom communications, staff aware of an emergency will maintain the safety and security of the juveniles.
  - 1. The most readily available person will be designated as a runner to begin emergency notifications and procedures.
- D. The Shift Supervisor:
  - 1. Responds to all emergencies.
  - 2. Determines the need for additional staff.
  - 3. Directs appropriate staff to respond and requests external community resources as appropriate.
  - 4. If necessary, directs total facility lockdown.
  - 5. Coordinates notification to Administration as soon as possible.
- E. All staff stand by for further instructions or until "all clear" is announced by Shift Supervisor.

## **JSC 15.20: Evacuation Procedures**

**Chapter:** Safety and Emergency Procedures

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-10 Mand.

3-JDF-3B-12 Mand.

**Classification:** Public

## I. Policy

A. In the event it is necessary to evacuate the facility, safety will take precedence over security. Reasonable effort will be made by staff to prevent escapes during an evacuation.

#### **II.** Definitions

- A. **Primary Assembly Points**: The closest assembly point in all housing and program areas.
- B. **Secondary Assembly Points**: A secondary location to be utilized if the primary assembly point is unsafe.
- C. **Outside Assembly Points**: The areas outside of the secure perimeter of the building to which people may be evacuated, if the primary or secondary areas become unsafe.

## **III. General Information**

- A. The facility evacuation plan is approved by the Rapid City Fire Department.
- B. Specific evacuation routes showing primary, secondary, and outside assembly points are posted in each area of the facility.
- C. Exit signs and directional arrows are utilized for traffic flow.
- D. Staff are trained in the location of building floor plans.
- E. Gang release of all cells in the physical secure housing units can be activated by the Control Room Operator.
- F. Correctional Officers possess keys to all cells in the housing units and can manually unlock cells to release detainees if the power-operated locks fail.

- A. Correction Officers/Staff Affected Areas
  - 1. Initiate immediate action to ensure safety.

- 2. Make the appropriate emergency radio code announcement.
- 3. Complete a head count.
- 4. Staff in the housing units will gather the following items:
  - a. Special program plans
  - b. First aid kit
  - c. Extra radio batteries
  - d. Pod rosters
- 5. Assemble all juveniles at the appropriate primary or secondary assembly point.
- 6. Complete a head count and notify the Supervisor the evacuation has been completed.
- B. The Shift Supervisor or highest ranking authority will:
  - 1. Acknowledge the emergency radio code.
  - 2. Determine the need for evacuation and notify staff.
  - 3. Designate staff to escort all visitors from the building
  - 4. Direct staff to facilitate movement of juvenile(s) to safe areas.
    - a. Issue emergency keys per policy 16.30.
  - 5. If it is deemed necessary to evacuate to an outside assembly point, the Shift Supervisor will request assistance from law enforcement.
    - a. Notify the Commander.
    - b. If the emergency required transfer of operations to an off-site location, Administration will direct operations.
    - c. If time allows, the Supervisor will direct staff to use restraining devices.
  - 6. Instruct control room operator to complete head counts.
  - 7. Supervisor will initiate additional emergency procedures.
- C. Correction Officers/Staff Non-affected Areas
  - 1. Account for all assigned juveniles and assemble in primary assembly point. Prepare to evacuate.
  - 2. Standby for specific orders from the Shift Supervisor

3. Staff, not involved in direct supervision, receiving any emergency code will secure work areas and await Shift Supervisor direction to aid in juvenile evacuation.

## D. Medical Response

- 1. If evacuating to an offsite location, staff will retrieve medications and Medication Administration Records.
- 2. Following evacuation to safe areas, staff provides basic first aid as needed.
- 3. Further medical treatment will be coordinated by the Shift Supervisor or highest ranking staff member present.

## E. Follow-up - After the Emergency

- 1. The Shift Supervisor will initiate a search of the affected areas and will initiate actions to remedy any deficiencies.
- 2. A pat search of detainees will be completed as needed.
- 3. A lockdown of the housing unit will occur and a facility count will be completed.
- 4. Staff will complete Incident Reports.
- 5. Return to normal operations will be directed by the Shift Supervisor upon the determination the building is safe and secure.

# JSC 15.30: Fire Emergency

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-01 Mand.

Classification: Public

## I. Policy

A. The facility maintains an adequate detection and suppression, and alert system for fire emergencies.

#### **II.** Definitions

A. **Life Safety Panel**: Located in the Control Room. The system monitors smoke and fire problems throughout the facility. Smoke can be detected, located, enunciated, controlled, and removed via the interaction of electronics equipment and air handling system.

#### **III.** General Information

A. Firefighting equipment and personnel are available to the facility through the local fire department.

- A. When there is a fire alarm, the Control Room Operator will:
  - 1. Check the Life Safety Panel to verify the location of the alarm.
  - 2. Silence the alarm by pushing the alarm silence button once to ensure clear radio communications. (Allow time for the signal to cycle).
  - 3. Alert staff in affected areas and request a status report.
  - 4. Contact the Shift Supervisor to verify they are aware of the alarm and are responding to the alarm location.
  - 5. Dial 9-9-911 to verify Fire Department response.
  - 6. Log the incident in the computerized records system.
- B. When the alarm sounds, staff will cease movements and radio communications.
- C. The Shift Supervisor will check the area where the alarm was detected. If there is no smoke or fire to report, the Supervisor will:

- 1. Complete a walk-through with the Fire Department to ensure no threat.
- 2. Announce "All Clear" and direct staff return to normal operations.

## D. Discovery of Smoke/Fire

- 1. If the fire alarm has not sounded, staff in the affected area will immediately call a Code 100 White (See Policy 15.10) and state location and the source of the fire/smoke.
- 2. The Control Room Operator will verify the Shift Supervisor has knowledge of the fire and dial 9-9-911 to request Fire Department response.
- 3. The Shift Supervisor will respond to the location identified, assess the situation, and initiate evacuation per Policy 15.20, as deemed necessary.
- 4. The Shift Supervisor or designee will contact the Commander.
- E. Containment of an internal fire may begin once life safety evacuation needs are satisfied.
  - 1. The Shift Supervisor will make the decision if it is safe or feasible for staff to attempt containment.
- F. Once the fire is extinguished, the Shift Supervisor will secure the area in order for fire officials to conduct an investigation, if necessary.
- G. Once the area has been designated safe by the fire department, the Shift Supervisor will initiate follow-up as per Policy 15.20.
- H. The Commander shall review the fire plan annually, revise and update as needed.

## JSC 15.40: Fire Drills

**Chapter:** Safety and Emergency Procedures

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-10 Mand.

Classification: Public

## I. Policy

A. Monthly fire drills will be conducted in all occupied areas of the facility to ensure preparedness in the event of a fire.

#### II. Definitions

A. N/A

#### **III.** General Information

A. Fire drills should include evacuation of all juveniles except when there is clear and convincing evidence that facility security is jeopardized.

- A. The Shift Supervisor will coordinate the monthly fire drill.
  - 1. Dispatch and the R.C. Fire Department will be notified prior to sounding the alarm to prevent unnecessary response.
  - 2. Prior notification to JSC staff shall be limited to increase effectiveness.
- B. The Shift Supervisor will determine the fire drill location and initiate the drill.
- C. Staff will account for assigned juveniles.
  - 1. Staff in the housing units will gather the following items:
    - a. Special program plans
    - b. First aid kit
    - c. Extra radio batteries
    - d. Pod rosters
- D. The Shift Supervisor will direct the Control Room Operator to initiate a facility head count.
- E. The Shift Supervisor will direct movement to secondary assembly points, as needed.

- F. Upon satisfactory completion of the drill, the Shift Supervisor will announce an "All Clear" and normal operations will resume.
  - 1. Any deficiencies noted during the drill will be corrected by the Shift Supervisor.
- G. The Shift Supervisor will document the drill in the computerized record system and complete a fire drill reporting form.
- H. The Fire Safety Officer and Commander will review the Fire Drill Reporting forms.

# JSC 15.50: Fire Prevention and Equipment Testing

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-2A-03 Mand., 3B-01 Mand., 3B-02 Mand., 3B-04 Mand.

Classification: Public

## I. Policy

A. All facility fire prevention systems will be tested routinely as required to comply with fire safety codes.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. The facility adheres to all applicable fire safety codes and has in place the equipment and procedures required in the event of a fire emergency.
- B. Juveniles, staff, and visitors are provided with a safe environment through the effective use of fire prevention and safety inspections.
- C. A fire alarm system and automatic detection system is present in all areas of the facility.
  - 1. Fire alarms are transmitted to the Control Room. An audible alarm will be sounded to alert staff of an emergency.
  - 2. Smoke detectors are located throughout the building and provide an early warning within the detainee living quarters.
- D. The facility maintains compliance with state and local exit requirements, fire system inspections and quarterly tests, annual fire authority inspections, and locations of fire equipment in the facility.
- E. Emergency lighting is available to provide sufficient exit area lights.
- F. Fire extinguishers are placed throughout the facility and are kept current in maintenance and testing.
  - 1. The location of each fire extinguisher is noticeably displayed.
  - 2. Every extinguisher will have a current valid inspection tag attached showing last maintenance of recharging date.

- 3. Discharged fire extinguishers shall be immediately replaced and recharged.
- 4. Testing is performed annually by an extinguisher service company.
- G. "PULL" fire alarms are located:
  - 1. Control Room
  - 2. Main Entrance
  - 3. Staff Secure work station
  - 4. Administration Hallway
  - 5. Receiving Area

- A. Annually, the Fire Safety Officer will contact the Rapid City Fire Department to complete the yearly fire safety inspection of the facility.
  - 1. Any corrections that need to be addressed are done in a reasonable amount of time.
  - 2. When corrections are made, the inspector will be notified to re-evaluate the problem.
- B. Annually, the Building Technician will contact Buildings and Grounds or an independent contractor to complete the yearly inspection of the fire sprinkler system.
  - 1. Any corrections that need to be addressed are done in a reasonable amount of time.
  - 2. When corrections are made, the inspector will be notified to re-evaluate the problem.
- C. Quarterly, Buildings and Grounds will complete a test of the fire detection/alarm system.
- D. The fire safety officer, who has been trained in safety and fire prevention, will conduct a comprehensive and thorough weekly inspection.
  - 1. The officer will use a checklist that has been composed and approved by the local Fire Department or Marshal.
- E. Located throughout the facility, trash receptacles are monitored by staff to reduce the possibility of fire. Trash receptacles shall:
  - 1. Be constructed of fireproof material
  - 2. Be readily accessible

- 3. Be emptied and cleaned at least daily
- 4. Be separate from special containers for flammable liquids and/or rags used with such.
- F. The facility has been designated as a smoke-free building.
  - 1. Staff members are not permitted to carry lighters, matches, cigarettes, cigars, pipes or tobacco while on duty.
  - 2. The designated smoking area is outside of the building.

# JSC 15.60: Control and Use of Flammable, Toxic and Caustic Materials

**Chapter:** Safety and Emergency Procedures

Order No:

Effective: January 14, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-3B-03 Mand., 3B-05 Mand.

Classification: Public

## I. Policy

A. To limit the unrestricted access by juveniles, strict control of procurement, storage and inventory of all flammable liquids, toxic and caustic materials will be maintained.

#### II. Definitions

- A. **Flashpoint**: The minimum temperature at which a liquid will give off sufficient vapors to form an ignitable mixture with the air near the surface of the liquid or in the container used.
- B. Flammable Liquid: A substance with a flash point below 100 degrees Fahrenheit.
- C. **Combustible Liquid**: A substance with a flashpoint at or above 100 degrees Fahrenheit.
- D. **Toxic Material**: A substance, through chemical reaction or mixture, capable to injure or cause harm to the body by entry through the skin, digestive tract, or respiratory tract.
- E. **Caustic Material**: A substance capable of destroying or eating away by chemical reaction.
- F. **Material Safety Data Sheet**: A document required by government regulation for all hazardous chemical substances produced or sold in the United States.

## **III. General Information**

- A. All flammable, toxic, and caustic substances will be approved by the Commander or designee before entering the facility.
- B. All chemicals will be stored in secured, designated locations.
  - 1. Each storage location will have an inventory list that includes chemical name, brief description, and quantity.
  - 2. Each storage location inventory will be checked and all chemicals accounted for at times designated for each location.

- C. Flammable liquids, toxic, and caustic materials will be kept in locked storage areas outside of juvenile living areas.
- D. Cleaning solutions used by the juveniles for routine housekeeping will be in diluted concentrations and not classified as toxic, caustic or flammable.
- E. The use and control of chemicals not classified as flammable, toxic, or caustic, but having warning labels such as "keep out of reach of children" or "harmful if swallowed" will be monitored by staff.
- F. A Material Safety Data Sheets will be available for all flammable, toxic, or caustic materials in the facility.
  - 1. The master Material Safety Data Sheet Binder will be in the Control Room and will contain a Material Safety Data Sheet for all required chemicals in the facility.
  - 2. Material Safety Data Sheets will also be kept in each area the chemicals are stored and used.
  - 3. Material Safety Data Sheets will be updated anytime a chemical is added to or deleted from the facility inventory. The Material Safety Data Sheet binders will be reviewed annually by the Building Technician.
- G. A master list of all flammable, toxic, and caustic materials stored in the facility will be maintained.
- H. All chemicals will be kept in original containers whenever possible.
  - 1. When chemicals are placed in a secondary container, it will be clearly labeled to identify the contents.
- I. The control and use of flammable, toxic, and caustic chemicals will be reviewed annually by the Commander or designee, Fire Safety Officer, and Building Technician.
- J. Facility Furnishings are purchased after a safety evaluation is completed considering flammable and toxicity characteristics.
  - 1. When replacing furnishings or materials, every effort will be made to replace a hazardous material with one less hazardous.

- A. Adding an Approved Chemical
  - 1. Staff requesting to add a chemical will submit a Chemical Control sheet to the Commander or designee and include;
    - a. Chemical name

- b. Intended use / need for chemical
- c. Storage location
- d. Material Safety Data Sheet for requested chemical
- 2. If approved, the Commander or designee will forward the Chemical Control sheet to designated staff to complete the request.
- 3. Designated staff will add the Material Safety Data Sheet to the master Material Safety Data Sheet binder in the Control Room and other affected Material Safety Data Sheet locations.
- 4. Designated staff will update posted inventory lists and inventory sheets in designated storage location.
- 5. After Material Safety Data Sheets and inventories have been updated, the chemical may be brought into the facility.

## B. Deleting An Approved Chemical

- 1. Staff requesting to delete a chemical will submit a Chemical Control sheet to the Commander or designee and include;
  - a. Chemical name
  - b. Reason for deleting
  - c. Affected storage location
- 2. If approved, the Commander or designee will forward the Chemical Control sheet to designated staff to complete the request.
- 3. Designated staff will remove the Material Safety Data Sheet from the master Material Safety Data Sheet binder in the Control Room and other affected Material Safety Data Sheet locations.
- 4. Designated staff will update posted inventory lists and inventory sheets in designated storage location.
- 5. After Material Safety Data Sheets and inventories have been updated, the chemical may be removed from the facility.

## C. Temporary Chemical Approval

- 1. When a chemical is being brought into the facility temporarily to complete a specific task, staff or service provider will complete a Job Sheet at the entrance to the facility and provide;
  - a. Chemical name
  - b. Quantity

- c. Location chemical will be used
- d. Material Safety Data Sheet for chemical entering the facility
- 2. Original Job Sheet remains at the entrance.
  - a. Copy and Material Safety Data Sheet must stay with the chemical.
- 3. Staff bringing in chemical or escorting service provider will ensure chemical is accounted for and secured away from juveniles at all times while in the facility.
- 4. Upon completion of the task, the chemical will be removed from the facility by the staff or service provider.
- 5. At the facility exit, staff will complete the original Job Sheet, verifying all chemicals that entered the facility for the project have been removed from the facility.

## D. Storage of Chemicals

- 1. All approved chemicals will be kept in secured, designated storage locations.
  - a. Flammable and combustible chemicals will be stored in a vented, flame resistant cabinet.
- 2. Staff will routinely check all storage locations and verify all chemicals are accounted for according to location inventory list.
  - a. Locations in housing units will be checked at least once per shift.
  - b. Locations outside of the housing units in areas accessible by juveniles will be checked at least once every 24 hours.
  - c. The Flammable Cabinet, Paint Cabinet, and main Chemical Storage Area will be checked at least once every week.
- 3. Staff discovering a missing chemical will secure the location and notify the Shift Supervisor.
  - a. Shift Supervisor will initiate a search of the immediate area and determine the last time the chemical was accounted for.
  - b. If the chemical cannot be accounted, the Commander or designee will be notified and determine action necessary to ensure chemical is not in a juvenile's possession.

## E. Use of Chemicals

- 1. As needed, staff will remove chemicals from storage locations.
  - a. Sign out / in logs will be completed in locations that have logs.

- b. Chemicals will not be removed from areas if there is no sign out/ in log for the storage location.
- 2. Staff accessing the chemical will be responsible for the chemical while in use and for returning it to the storage location upon completion.
- 3. Chemicals classified as flammable, toxic, and caustic will be controlled by staff at all times and will not be introduced into areas when juveniles are present.
  - a. Juveniles participating in an in-house work program, may be allowed to use flammable, toxic, or caustic chemicals under direct staff supervision as needed for the assignment.
- 4. Staff will issue diluted chemicals to juveniles for regular cleaning tasks at designated cleaning times.
  - a. Staff will explain the purpose and use of each cleaner.
  - b. Juveniles will be allowed to use diluted cleaners without direct staff supervision.
  - c. Staff will check the quantity of the chemical when issuing the chemical to and receiving the chemical from the juvenile to ensure appropriate use by the juvenile.

# JSC 15.70: Bomb Threat

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-11 Mand.

**Classification:** Restricted

## I. Policy

A. When a bomb threat is received, necessary action will be taken to determine the validity of the threat and to ensure the safety of all people in the facility in the event of discovery or a bomb or an explosion.

## JSC 15.80: Riotous Disturbance

**Chapter:** Safety and Emergency Procedures

**Order No:** 

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-29, 3B-11 Mand.

**Classification:** Public

## I. Policy

A. To maintain security and ensure safety of all people in the facility, immediate action will be taken to control disturbances involving multiple juveniles or riotous situations.

## II. Definitions

A. N/A

## **III. General Information**

- A. In any instance of institutional unrest, quick action is taken to control an incident before it escalates. Signs of an impending disturbance or riot activity may include:
  - 1. Significant changes in juvenile behavior/patterns
  - 2. Sharp increase in rule violations/or request for protective custody
  - 3. Large increase in juvenile grievances
  - 4. Juvenile avoidance of contact with employees
  - 5. Sudden reduction in visitation
  - 6. Testing or challenging authority
  - 7. Discovery of contraband items that could be used as weapons
- B. Although any of the above are not necessarily indicative of a planned disturbance/activity, they can be signs of institutional unrest and must be reported to the Commander for analysis and action to avoid any unnecessary problems.
- C. If a situation escalates and a large number of juveniles become involved in the incident, immediate action must be taken by staff to control the situation.

## IV. Procedural Guidelines

A. When a staff member identifies a situation which could escalate into a major disturbance, the staff member will call for assistance.

- B. The staff member immediately places a physical barrier between him/her and the detainees and notifies the Control Room Operator of a "Code 100 Orange".
  - 1. The Control Room Operator will ensure the Shift Supervisor is aware of the Code 100 Orange and the location of the incident.
- C. Staff will order the juveniles to return to rooms and isolate the individuals involved in the situation.
- D. The Shift Supervisor determines if a total facility lockdown is necessary.
- E. The Shift Supervisor will determine if the situation can be handled internally.
- F. The Shift Supervisor or designee notifies Dispatch of the situation and requests assistance as needed.
- G. The Shift Supervisor notifies the Commander or designee.
- H. The Shift Supervisor isolates the area to prevent other residents from joining in, to restrict movement, and to prevent any juveniles from escaping.
- I. Until relieved by Sheriff's Office Command staff, the Shift Supervisor orders a security perimeter be maintained around the incident, securing possible escape routes or inadvertent access to the scene.
  - 1. All responding law enforcement units will follow the directives of the Shift Supervisor or senior facility staff member until the Sheriff's Office Command staff arrives.
  - 2. Facility policy regarding firearms remains in effect until the Sheriff, Chief Deputy, or designee direct otherwise.
  - 3. Staff will continue to maintain facility security in the non-affected areas.
- J. Upon conclusion of the disturbance, staff will conduct juvenile head counts.
- K. First-aid and medical treatment are given to any person injured.
- L. Juveniles participating in the disturbance will be strip searched and placed in segregation.
- M. A thorough search is conducted of all rooms and areas involved in the disturbance.
- N. Incident reports will be completed prior to the completion of shift.
- O. The Commander will determine the return to normal operations.
- P. In the event of a riot, other serious disturbance, protest demonstration, etc. outside of the facility, the Shift Supervisor will assess the situation and ensure:
  - 1. Implement lockdown as necessary.

- 2. Notify the Commander.
- 3. Notify law enforcement authorities as needed.
- 4. Ensure the building perimeter is secure.
- 5. As needed, arrange for the accommodation of any visitors in the building who are unable to depart.
- 6. Contact any staff member escorting juveniles outside the building to remain at their destination until further notice.

# JSC 15.90: Duress Alarm Response

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-11 Mand.

Classification: Public

## I. Policy

A. Facility issued radios are equipped with a duress alarm.

#### II. Definitions

A. N/A

#### **III. General Information**

A. N/A

- A. Staff needing emergency response will press the duress alarm button on their radio.
- B. Upon receiving a duress alarm, the Control Room Operator will identify which radio is sending the duress signal.
- C. The Control Room Operator will call the individual by radio and state, "(call sign), JSC 90, you are generating a signal 40."
- D. If there is no response, the Control Room Operator will repeat the call.
- E. If there is no response to the second call, the Control Room Operator will immediately notify the Shift Supervisor with the location of the duress alarm.
- F. The Shift Supervisor or designee will review the situation and take appropriate action.
- G. In the event the Shift Supervisor's duress alarm is activated, the Control Room Operator will communicate with an available staff member.
- H. In the event an officer's duress alarm is accidentally activated, the officer will immediately call the Control Room and state "JSC90, (call sign), I am code four."
  - 1. Any other response of statement will be responded to as a genuine duress situation.
- I. The Security Lieutenant or designee will ensure testing and documentation of duress alarms is completed monthly.

	1.	Problems will be reported to the Commander along with a plan of action to correct the problem.

# JSC 15.100: Emergency Facility Lockdown

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

Reference:

Classification: Public

## I. Policy

A. The facility may be locked down at unscheduled times to ensure safety and security due to operational demands or emergency situations.

#### **II.** Definitions

A. N/A

## **III. General Information**

A. An entire facility lockdown will be authorized only by the Shift Supervisor, Commander or designee.

- A. The Shift Supervisor will announce the lockdown.
- B. Staff will account for all juveniles and secure them in their rooms.
- C. Staff will continue with visual checks as required.
- D. Staff will stand by for further instructions from their Supervisor.
- E. When the situation allows, the Shift Supervisor orders the return to normal operation.

# **JSC 15.110: Emergency Power**

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 

Classification: Public

## I. Policy

A. The facility emergency generator will maintain essential lights, security, and communication systems in the event of commercial power failure.

## **II.** Definitions

- A. **Emergency Power Generator:** Back-up power source that will automatically activate within three (3) seconds to restore power to the essential facility systems.
- B. **Power Failure:** The complete or partial loss of facility electrical power.
- C. **Emergency Lighting:** Some light fixtures in all housing units and movement corridors are equipped with emergency ballast or bulbs that will provide light in the event of total power failure.
- D. **Run Test:** Generator is started and ran for designated time period. Facility power is not switched to the generator.
- E. Load Test: Generator is started and building power is switched to the generator.

## **III. General Information**

- A. Routine maintenance of the facility generator will be the responsibility of Pennington County Buildings and Grounds personnel.
  - 1. The generator is run tested every week to ensure it is functioning and fluid levels are appropriate.
  - 2. The generator is load tested quarterly to ensure it will switch over properly and able to maintain essential facility systems.
- B. All Correctional staff will carry a flashlight on their duty belt. Additional flashlights will be kept in the control room to be issued as needed in the event of power failure.
  - 1. Correctional Staff will regularly check their flashlight to ensure it is working properly.
  - 2. Control Room Operators will regularly check Control Room flashlights to ensure all are working properly.

- A. If there is power failure in the facility, the Shift Supervisor announces over the radio that all movement ceases and confirms Control Room radio operation.
- B. All staff account for assigned detainees, secure their areas, and stand by for further directions from their shift supervisor.
- C. The Control Room Operator initiates a status check of all staff during the power outage.
- D. The Shift Supervisor will assess the level of the outage and facility systems affected
  - 1. Regular programs will be terminated and facility lock down initiated as needed to maintain safety and security.
  - 2. Emergency keys will be distributed if the electronic door control system is not functioning.
- E. The Shift Supervisor will notify the Commander, or designee.
- F. The Shift Supervisor will notify Buildings and Grounds if the generator runs for more than one hour.
  - 1. If the emergency generator fails to start, Pennington County Buildings and Grounds will be contacted for response.
- G. When commercial power is restored, a total facility head count is conducted and verified by the Shift Supervisor.

# **JSC 15.120: Escape**

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3B-13 **Classification:** Public

## I. Policy

A. In the event of an escape, immediate action will be taken to return the juvenile to custody.

#### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. Upon discovery of an escape, staff will call a "Code 100 Red" on the radio.
- B. Staff will direct all other juveniles to return to their rooms and do a head count.
- C. The Shift Supervisor will direct the Control Room Operator to stop all movement into and out of the area.
- D. The Shift Supervisor will respond and gather pertinent information and notify Pennington County Dispatch (excluding juveniles under the holding authority of the United States Probation Office) and be prepared to provide:
  - 1. Name, Date of Birth, and Description
  - 2. Charge
  - 3. Time of Escape
  - 4. Direction of Travel and Mode of Transportation
- E. The Shift Supervisor will notify the Commander or designee.
- F. The Shift Supervisor will notify the holding authority and parent/legal guardian.
  - 1. If the holding authority is the Bureau of Prisons, the United States Marshal Service will also be notified.

- G. Staff will complete search of area to determine safety or security concerns.
  - 1. Necessary corrective action will be taken prior to return to normal operations.
- H. Staff will complete incident reports prior to the end of the shift.
- I. If the escape occurs during a transport, the transporting staff will notify Pennington County Dispatch directly and then contact the Shift Supervisor for further direction.
- J. If the juvenile has not be located within 8 hours, staff will release the juvenile in the computerized records system.

# JSC 15.130: Hostage Plan

**Chapter:** Safety and Emergency Procedures

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-28, 29, 3B-11

Classification: Public

## I. Policy

A. In a hostage situation, staff will maintain safety and security of the facility and request assistance from the Rapid City Pennington county Special Response Team.

#### II. Definitions

- A. **Hostage**: Any person held against their will by another person for the purpose of escape, monetary gain or any reason which may place a person in danger of losing life or suffering serious bodily injury.
- B. **Special Response Team**: Local law enforcement personnel trained in emergency response techniques and tactics.

## **III. General Information**

- A. Hostage negotiations are conducted by the Special Response Team.
- B. Negotiations for the release of hostages will be conducted in the same manner for all persons, regardless of rank.
- C. No juvenile will be released from the facility in an effort to free a hostage or to protect a hostage or to protect a hostage from grievous bodily harm.

- A. The staff member discovering a hostage situation will immediately notify the Shift Supervisor directly or by telephone.
- B. Staff will not enter the area where the hostage is being held.
- C. Staff will not negotiate with or attempt to subdue the hostage taker.
- D. The Shift Supervisor will assess the hostage situation either by phone or visually by the camera system.
  - 1. In the event the Shift Supervisor is taken hostage, the next available in command will assume the responsibilities of the Shift Supervisor until relieved by the Lieutenant, Commander, or Sheriff's Office Command Staff.

- E. Upon verification, the Shift Supervisor or designee will instruct the Control Room Operator to Announce "Code 100 Orange" and the location.
- F. The Shift Supervisor or designee will order a facility lockdown and notify the Commander, or designee.
- G. The Shift Supervisor or designee will notify Pennington County Dispatch and provide the following information if available:
  - 1. Locations of the incident
  - 2. Number of suspects
  - 3. Number of hostages
  - 4. Any injuries reported
  - 5. Weapons involved
  - 6. Demands of hostage taker
- H. The Shift Supervisor or designee will remain in charge of the incident until relieved by the Commander or designee or Command Staff for the Special Response Team.
- I. Responding Law Enforcement officers will be briefed by the Shift Supervisor and directed to assist in maintaining perimeter security.
  - 1. Facility policy regarding weapons entering the facility remains in effect until the Sheriff, Chief Deputy, or their designee, direct otherwise.
- J. The Special Response Team Command Staff will assume supervision of the incident upon arrival.
  - 1. Shift Supervisor will be available to the Special Response Team to provide information and assistance.
- K. Staff will be assigned to complete visual checks of the juveniles in non- affected areas.
- L. Sheriff's Office Command Staff will determine and implement the appropriate plan of action to resolve the hostage situation.
- M. After the hostage situation has been resolved, the following will be done:
  - 1. All injured persons will receive immediate medical attention.
  - 2. Hostage takers are strip searched, issued new clothing, and placed on special management.
  - 3. All affected locations will be searched for contraband and damage.
  - 4. The Commander or designee will ensure that the facility is safe before ordering the return to normal operations.

N	•	Staff involved in the incident will complete an incident report prior to leaving the facility.

# JSC 15.140: Emergency Medical Plan

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-4C-27 Mand.

Classification: Public

## I. Policy

A. Staff will be trained to respond to health-related situations within a four minute response time.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. All staff are trained in basic first aid and cardio pulmonary resuscitation and automated electronic defibrillation.
- B. The facility utilizes local health care facilities for emergency care. Paramedic service is available through the 9-9-911 system.

- A. Upon determining need for medical response, staff will announce a "Code 100 Blue".
- B. Staff will direct other juveniles away from the emergency.
- C. Staff will initiate care according to the staff's ability and training.
- D. The Shift Supervisor will respond and determine the need for emergency medical transport.
  - 1. If on-site, medical staff will also respond.
- E. If necessary, the Shift Supervisor or designee will contact Dispatch for emergency medical response.
- F. The Shift Supervisor will designate staff to meet emergency medical personnel and escort them to the location of the emergency.
- G. If a juvenile is transported by emergency medical services, the Shift Supervisor notifies the Commander or designee immediately.

- 1. The Shift Supervisor will determine appropriate use of restraints as needed.
- 2. The Shift Supervisor will designate staff to accompany the juvenile or contact the Pennington County Sheriff's Office Law Enforcement Division to provide supervision.
- H. The Shift Supervisor will notify the Holding Authority and the parent/legal guardian.
- I. Staff will complete incident reports prior to the completion of their shift.
- J. If a juvenile is admitted to the hospital, the Commander or designee will determine the continued need for custody.
- K. Medical Staff will keep the Commander updated on the juvenile's medical condition while hospitalized.

# JSC 15.150: Tornado Warning

**Chapter:** Safety and Emergency Procedures

Order No:

**Revised:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-11 Mand.

Classification: Public

## I. Policy

A. In the event of a tornado warning, immediate action will initiated for the safety and security of all persons in the facility.

#### II. Definitions

- A. **Tornado Watch**: Issued by the National Weather Service indicates conditions are favorable for the development of a tornado or severe weather in and close to the watch area.
- B. **Tornado Warning**: Issued by the National Weather Service when a tornado is indicated by radar or has been sighted in the warning area.

## **III. General Information**

A. Pennington County Dispatch will notify the WSDJSC control room of weather related watches and warnings issued by the National Weather Service.

- A. Upon receiving notification of a tornado warning, the Control Room Operator will announce a Code 100 Orange and notify the shift supervisor and the Arise Youth Center Staff.
- B. Correctional staff in the booking, medium security, and maximum security areas will complete a head count and return all juveniles to their assigned room.
- C. Correctional staff in the minimum security areas will complete a head count and move all juveniles to the interior corridor near classroom 6.
  - 1. Juveniles will sit on the floor with backs to the wall.
- D. Correctional staff will stay with assigned juveniles and await further instructions of the Shift Supervisor.
- E. The Shift Supervisor or designee will notify all visitors of the tornado warning.
  - 1. Visitors will be directed to the classroom 6 corridor to wait during the tornado warning or they may leave the building if they so desire.

- F. The Control Room Operator will notify all additional personnel in the building of the tornado warning.
- G. The Shift Supervisor will notify the Commander or designee of the current status at the facility.
- H. The facility will remain in emergency status until an "All Clear" is given.
  - 1. All programming and juvenile movement will be stopped.
  - 2. No new visitors will be allowed into the building.
  - 3. Meals, transports, and other events will be delayed until "All Clear" is given.
- I. The Control Room Operator will notify the Shift Supervisor and Arise staff when the warning has expired or been cancelled by the National Weather Service.
- J. Upon notification of the warning expiring or being cancelled, the Shift Supervisor or designee will inspect the facility for damage or any condition jeopardizing safety or security.
- K. The Shift Supervisor will announce an "All Clear" when it has been determined it is safe to resume normal programs and operations.

# JSC 15.160: Gas Leak Procedures

**Chapter:** Safety and Emergency Procedures

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3B-11 Mand.

Classification: Public

# I. Policy

A. Persistent, strong odor of natural gas or identified gas leaks may be cause for immediate evacuation of affected areas of the facility.

#### **II.** Definitions

A. N/A

#### **III.** General Information

A. N/A

- A. Staff detecting a strong gas odor or a gas leak will immediately contact the Shift Supervisor.
- B. The Shift Supervisor will respond to the area and determine appropriate action.
- C. If unable to identify the source of gas odor or if area is determined to be unsafe the Shift Supervisor will initiate evacuation of affected areas per policy 15.20.
  - 1. The Shift Supervisor will notify the fire department, Buildings and Grounds, and the Commander.
- D. Return to normal operations will only happen after the problem has been corrected and the area determined safe by the fire department and maintenance personnel.

# JSC 16.10: Radio Usage

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-02 **Classification:** Public

# I. Policy

A. The facility has a radio communications system to allow for communication between the control room and staff supervising juveniles and with external resources.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. All staff supervising juveniles will be assigned a portable radio equipped with a duress button
- B. The Control Room has radio capability to directly contact the Pennington County Dispatch.

- A. Designated staff will be assigned portable radios based on post assignment.
- B. Staff will complete a radio check with the Control Room Operator at the beginning of their shift.
  - 1. The Control Room Operator will verify the radio is functioning properly.
- C. Staff will utilize radios to communicate with the Control Room Operator and other staff for facility operations.
- D. Prior to transmitting, staff will verify radio channel is clear.
- E. All radio transmissions will be professional, brief, and to the point.
- F. Staff will be responsible for proper care and use of their assigned radio.
  - 1. Staff will monitor battery level and replace as needed.
  - 2. Radio failure or function problems will be reported promptly to the Shift Supervisor.

# **JSC 16.20: Control Room**

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-02

Classification: Public

# I. Policy

A. The facility maintains a 24 hour control center for monitoring and controlling the facility's security, safety and communications system.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. All staff assigned to work in the Control Room will receive training to accomplish duties as outlined in the Control Room Operator Post Order.
- B. Doors to the Control Center shall remain locked at all times and no unauthorized staff shall be permitted inside.
  - 1. Access to the Control Room will be limited based on operational needs.

- A. At the beginning of each shift, the Control Room Operator will check all systems to ensure proper function to include:
  - 1. Life safety and fire detection panel
  - 2. Weather alert system
  - 3. Water shut-off and sprinkler cutoffs
  - 4. Radio communications
  - 5. Cameras and Digital Video Monitoring system
  - 6. Generator panel
  - 7. Door control system
  - 8. Automated External Defibrillator

- B. The Control Room Operator will document the results of the systems check in the computerized records system.
- C. The Control Room Operator will monitor the facility cameras and notify the shift supervisor of any observed problems.
- D. The Control Room Operator monitors all radio communications in the facility.
  - 1. At the beginning of each shift, the Control Room Operator will complete a radio check per policy 16.10.
- E. The Control Room Operator will monitor and control all movement in the secure area of the facility.
  - 1. The Control Room Operator must establish identification of all people requesting access to or from the secured areas via the camera or intercom.
  - 2. If a person's identity is unknown, the Control Room Operator will notify the Shift Supervisor for verification prior to allowing access.
  - 3. The Control Room Operator monitors the door control system to ensure the secure perimeter is maintained.
  - 4. The Control Room Operator will not override door interlocks unless authorized by the Shift Supervisor.
- F. The Control Room Operator will monitor the life safety panel.
  - 1. When an alarm sounds from the life safety panel, the Control Room Operator will verify alarm location and silence the alarm system.
    - a. The Control Room Operator will initiate the appropriate emergency procedure.

# JSC 16.30: Use of Official Vehicles

**Chapter:** Security and Control

Order No:

**Effective:** August 21, 1998 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-24, 25

Classification: Public

# I. Policy

A. The facility will provide vehicles for official use.

#### **II.** Definitions

A. N/A

# **III. General Information**

- A. Facility vehicles are covered under the insurance policy of the county.
- B. Only county employees and approved volunteers may drive facility vehicles.
- C. Staff will abide by all traffic rules and regulations while using vehicle for official duties.
- D. Facility vehicle keys will be kept in the locked key control system when not in use.

- A. Upon the need to use a facility vehicle, staff will check out vehicle keys from the key control system.
- B. Prior to driving the vehicle, staff will verify the vehicle has adequate fuel, tires appear to be properly inflated, and there are no other problems that would create unsafe driving conditions.
  - 1. If a juvenile is to be transported in the vehicle, staff will complete an inspection of the vehicle for contraband.
- C. When transporting juveniles, staff will complete the vehicle mileage log at the beginning and end of the transport.
- D. Upon exiting the vehicle, staff will ensure the windows are closed and doors locked at all times when a facility vehicle is not in use.
- E. Upon completing the transport, staff will return the vehicle to designated parking location and return keys to the key control system.

- F. Monthly inspections of all vehicles will be completed and routed to the Commander or designee to ensure vehicles and equipment are in good working condition.
  - 1. Required maintenance will be coordinated with the Pennington County Fleet Manager.
- G. Any staff or volunteer involved in an accident while driving a facility vehicle shall immediately report the accident to law enforcement and the shift supervisor.
  - 1. Shift Supervisor will notify the Commander or designee.
  - 2. Staff involved will complete an Incident Report upon return to the facility.
- H. Use of Personal Vehicle for Official Business
  - 1. Occasionally, staff may be required or permitted by the Commander or designee to use personal vehicles for official reasons.
  - 2. In such instances, the guidelines established in the Pennington County Policy Manual shall be followed.

# JSC 16.40: Key Control

**Chapter:** Security and Control

Order No:

**Effective:** April 1, 1997 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-22

Classification: Public

# I. Policy

A. All facility keys will be identified, controlled, and secured at all times.

#### II. Definitions

- A. **Key Watcher Control System**: Computerized system that verifies the identity of staff member retrieving any operational key sets. All operational key sets are stored and monitored by this system.
- B. **Operational Keys**: Key sets assembled for each post or specific assignment as designated.
- C. **Emergency Keys**: Key sets that are used only for emergency procedures or training situations.
- D. **Security Access Cards**: Plastic cards with magnetic, encoded strip used in computerized door security systems in designated county buildings.

#### **III.** General Information

A. N/A

- A. New employees will be given an access code for the Key Watcher Control System allowing them access to designated keys sets.
- B. Staff will retrieve keys from the Key Watcher Control System at the beginning of their shift according to their duty assignment and return them at the conclusion of their shift.
- C. If a key set is not returned at the designated time, the Key Watcher will show an alarm and the Shift Supervisor will need to locate keys and cancel the alarm.
- D. Facility keys are never to be handled by detainees or unauthorized persons under any circumstances.
  - 1. Keys are secured or carried on the staff member's person at all times.

- 2. Staff will not refer to key access information in the presence of juveniles.
- 3. Keys will not be taken from the facility without prior approval from the Commander or designee.
- 4. Facility keys are not to be duplicated without the approval of the Commander or designee.
- 5. Staff will ensure that keys and locks function properly.
  - a. Staff members will report any malfunctioning locks or broken keys to the shift supervisor and complete a maintenance task.
- 6. Exterior door keys will not be carried inside the secure perimeter except in emergency situations with approval of the Commander or designee.
- 7. In the event of maintenance or other non-emergency need to introduce exterior door keys into the secure perimeter, prior approval must be obtained from the Commander or designee.
- E. The Commander or designee will maintain the master key cabinet.
  - 1. The master key cabinet will contain all master keys and spare keys, excluding exterior secure perimeter keys.
  - 2. Each key in the key cabinet will be marked and numbered. A key index will be maintained in the key cabinet.
    - a. All facility keys and key sets will be listed in this index.
  - 3. The key cabinet will be kept locked at all times and access is restricted to only staff designated by the Commander.
  - 4. Secure perimeter key masters and spares will be secured within the facility safe.
- F. Emergency keys will be kept on the key control board in the Control Room and will only be issued in emergency situations or for training purposes.
  - 1. The issuance of emergency key sets must be authorized by the Shift Supervisor. Emergency keys taken from the Control Room must be signed out on the Emergency Key Control Sheet.
  - 2. Additional emergency key sets are kept in the administration safe and at the Pennington County Dispatch Center.
- G. Security Access Cards are issued to staff after their orientation training is completed.
  - 1. These access cards will be marked with an identifying number and that number will be assigned to the designated staff. Staff will be responsible for the access cards issued to them.

- H. If any keys are lost or misplaced, the staff member will immediately report the loss to the Shift Supervisor stating when the loss was discovered, circumstances surrounding the loss, and the key's identification.
  - 1. The Shift Supervisor will direct operations/movements cease, initiate an immediate search, and ensure precautions are taken in accordance to the type of key lost.
  - 2. The Commander will be notified of the loss of keys.
  - 3. Operations will resume only at the direction of the Commander or designee.
  - 4. A written report will be submitted to the Commander prior to the end of the shift.

# **JSC 16.50: Tool Control**

**Chapter:** Security and Control

Order No:

**Effective:** August 20, 1998 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-23

Classification: Public

# I. Policy

A. All facility tools will be identified, controlled, and secured at all times.

#### II. Definitions

- A. **Maintenance Tools**: Any equipment that can be useful to juveniles, either in effecting an escape or causing a death or serious injury; for example, hammers, wrenches, screwdrivers, scissors, files, shovels, rakes, industrial brooms, etc.
- B. **Medical Tools**: Any medical equipment, including needles that can be useful to juveniles, either in effecting an escape or causing a death or serious injury.
- C. **Food Service Tools**: Any edged or pointed utensil used in cooking or eating.

#### **III.** General Information

- A. All facility tools are inventoried, marked, and stored in an identified controlled location.
- B. Staff will routinely verify tools are properly accounted for within their identified storage locations.

- A. Staff access to facility tools
  - 1. Staff removing tools will complete sign in/out sheets where applicable.
  - 2. Staff will maintain control of tools at all times while checked out.
  - 3. Staff will return tools to designated locations and complete sign in/out sheets where applicable.
- B. Approval of permanent facility tools
  - 1. A Tool Control Sheet will be submitted to the Commander or designee.
    - a. The request will include the tool, the basis of request, and proposed storage location.

- b. Upon approval, the new tool will be added to the tool inventory for the storage location.
- c. All tools will be marked with "WSDJSC".
- 2. The Building Technician is responsible for auditing/developing tool inventories, storage, and security of the facilities tools.

# C. Approval of temporary tools

- 1. Staff will check in temporary tools upon entrance to the facility utilizing a Maintenance Job Sheet.
  - a. All tools will be listed individually.
  - b. The original completed Maintenance Job Sheet will remain at the entrance and the copy will remain with the tools at all times.
- 2. Staff or service providers will maintain control of tools at all times.
- 3. Staff will check out temporary tools upon departure from the facility utilizing the original Maintenance Job Sheet.
  - a. Original Maintenance Job Sheets will be routed to Administration.

# D. Missing and damaged tools

- 1. Upon discovery of a missing tool, the Shift Supervisor will be immediately notified.
- 2. The Shift Supervisor will initiate an immediate and thorough investigation to determine the likelihood of a missing or unaccounted for tool being in a juvenile's possession.
  - a. If any reasonable possibility exists that missing tools are in detainee possession, thorough and immediate action will be taken to locate the missing item.
  - b. Activities to locate the item, e.g. room searches, area searches, searches of persons, etc. will be conducted in accordance with current policy.
  - c. If missing tool is not located, the Commander will be notified.
- 3. Damaged tools remain in their designated locations and reported to Maintenance Staff.
  - a. If the tool must be removed for safety or security reasons, it will be placed in a secure location pending Maintenance response.
- 4. An incident report will be submitted to the Commander.

# **JSC 16.60: Perimeter Security**

**Chapter:** Security and Control

Order No:

**Revised:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-2G-02, 3-JDF-3A-29

Classification: Public

# I. Policy

A. The facility's perimeter will be controlled by appropriate means to provide that juveniles remain within the perimeter and to prevent unauthorized access by the general public.

## II. Definitions

A. N/A

#### **III.** General Information

A. Firearms are not permitted in the facility except in emergency situations.

- A. Entrance and exit into the perimeter will be monitored and controlled at all times by the Control Room Operator.
  - 1. All persons entering the facility will provide proper identification and be subject to screening procedures. See Policy 9.40.
    - a. Staff will request Law Enforcement place firearms in the secured vault prior to entry.
  - 2. All persons exiting the facility will be identified and approval for release verified.
- B. A Perimeter check will be completed by the Shift Supervisor or designee on each shift.
  - 1. A perimeter check will include but is not limited to:
    - a. Supervisors must ensure all doors, windows, locking devices, and equipment are in good working condition and areas juveniles/visitors have access to, are free of contraband.
    - b. If there is an issue that creates a possible security risk, the Supervisor will direct operations to maintain security until the issues is resolved.

- c. If necessary, the Supervisor will ensure information is passed on to the Building Technician.
- d. The results of the facility's perimeter check are recorded in the Guard 1 Pipe Data System and/or in the computerized records system.
- C. Prior to using the outside recreation yard(s), the Supervisor or designee will check the integrity of the security fence and ensure the yard(s) are free of contraband.

# **JSC 16.70: Shift Assignments**

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-04, 05, 06

Classification: Public

# I. Policy

A. The facility will have shift assignments stating the duties and responsibilities of each assigned position.

#### **II.** Definitions

A. N/A

#### **III.** General Information

- A. Shift Assignment Logs will designate assigned posts. Post Orders shall state the duties and responsibilities of each post.
- B. Prior to assuming a new position, all personnel must read the appropriate Post Order, sign and date it.
- C. Post Orders are reviewed at least annually and updated as needed. Staff members are encouraged to submit any changes that have occurred.
- D. Copies of Post Orders are available to all staff.

- A. The Shift Supervisor will complete the Shift Assignment Log and assign staff to their post at the beginning of each shift.
  - 1. Supervisors will ensure staff have received and signed appropriate post orders before staff are assigned to a specific post.
- B. Staff will initial the shift assignment log acknowledging their shift assignment.
- C. Staff will participate in shift briefing to prepare for assuming post duties.
- D. Staff will complete shift change with off going officer prior to accepting post.

# JSC 16.80: Juvenile Supervision

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** February 17, 2017 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-04, 07, 08, 14

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

115

Classification: Public

# I. Policy

A. Staff will supervise juveniles in a manner ensuring safe and orderly operations.

## **II.** Definitions

A. N/A

#### **III.** General Information

- A. Staff to juvenile ratio will be maintained as follows:
  - 1. Regular Programming:
    - a. The Shift Supervisor has the authority to increase the juvenile to staff ratio in each housing unit based on facility needs.
  - 2. Lockdown Tours: A minimum of one staff member per classification unit.
- B. Under no circumstances will any juvenile or group of juveniles be given authority over any other juvenile or group of juveniles.
- C. There will be at least one male and one female on duty for each shift.
- D. Staff will be located in or immediately adjacent to juvenile living areas to permit them to hear and respond promptly to emergency situations.
  - 1. Staff will announce their presence when entering a housing unit of the opposite sex.
- E. Staff will know the location of all juveniles assigned to the housing unit they are supervising.
- F. The Shift Supervisor will conduct post checks during each shift to maintain facility security, ensure proper supervision of staff/detainees; to include identifying and deterring staff sexual abuse/harassment/misconduct, and to ensure proper operation of the facility.

#### IV. Procedural Guidelines

## A. Shift Supervision

- 1. Upon entering the pod, the Shift Supervisor:
  - a. Speaks with staff and detainees and addresses any concerns;
  - b. Assesses the pod for any security, safety, PREA related issues, and/or sanitation issues that need to be corrected.
  - c. Staff is prohibited from alerting other staff members that these checks are occurring, unless such announcement is related to the legitimate operational function of the facility.

# B. Supervision of juveniles in their rooms

- 1. Staff will be assigned to conduct visual checks on all juveniles while in their rooms.
- 2. Staff will complete checks as determined by their watch status.
- 3. Staff will verify the doors are secured for juveniles housed in physical secure areas.
  - a. Pod door control will be maintained by the Control Room Operator during lockdown tours.
- 4. Staff will utilize the door alarm/indicator system for juveniles housed in minimum secure.
  - a. All exit doors are required to be in the "armed" alarm mode at all times, unless being under direct control of a staff member.
  - b. When juveniles are required to be in their room i.e. lockdown, time-out etc., the door needs to be in the "armed" alarm mode.

# C. Program Supervision

- 1. Staff will position themselves to allow for maximum supervision of all juveniles during programs.
- 2. Staff will change position frequently so that "blind spots" can be observed.
- 3. Staff will encourage juveniles to participate while maintaining supervision of the entire group.
- 4. Staff must be alert and watch for juveniles isolating into pairs or groups for inappropriate reasons, i.e. sexual contact, assault, exchange/use of contraband, etc.

- 5. Staff will make reoccurring checks of classrooms and programs if unavailable to provide constant supervision.
  - a. At a minimum, one check per hour at irregular intervals will be completed.
  - b. Deviations from the one per hour due to operational limitations must be approved by the Shift Supervisor and communicated to teaching/program staff.
  - c. All classroom/program security checks will be communicated to the Control Room Operator.

# D. Movement Supervision

- 1. Staff will control and direct all movement of juveniles.
- 2. Upon entry/exit from a room, Staff will verify the door is secured and no other person is present inside rooms where direct supervision will not be maintained.
- 3. Juveniles will be instructed on staff expectations and procedures to follow before each movement.
- 4. Group movements will begin with a head count before departure and end with a head count upon arrival at the destination.
- 5. Staff members will position themselves during movement to allow for maximum supervision of juveniles.
- 6. All movement outside of the housing units will be communicated to the Control Room Operator.

#### E. Professional Visitors

- 1. Staff will escort the juvenile to the respective conference room.
- 2. Staff will brief the visiting professional of their responsibility not to leave the juvenile unattended under any circumstances.
- 3. Staff will instruct the visitor to contact staff upon completion of the visit.

# **JSC 16.90: Facility Count**

**Chapter:** Security and Control

Order No:

**Revised:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-13

Classification: Public

# I. Policy

A. Formal and informal counts will be completed to ensure accountability of all juveniles.

#### **II.** Definitions

- A. **Formal count**: Scheduled facility count completed at least once each shift or counts completed during emergency situations and recorded in the computerized records system.
- B. **Informal count**: Random counts completed by staff to account for all assigned juveniles.

#### III. General Information

A. During a formal count, all movement of juveniles will cease until the count is completed.

- A. At the beginning of each shift, the on-coming staff and off-going staff will complete a count of all juveniles assigned to their post.
  - 1. This count will include juveniles in the facility and juveniles temporarily not in the facility.
  - 2. To account for juveniles in the facility, staff must visually observe their presence.
- B. Staff will relay the formal count of their post to the Control Room Operator.
- C. The Control Room Operator will total the counts from all posts and compare to the facility roster in Booking.
  - 1. If the count is off, the Control Room Operator will notify the Shift Supervisor.
  - 2. The Control Room Operator enters the total facility count in the computerized records system.

- D. During an emergency, the Shift Supervisor will direct the Control Room Operator to complete a formal count.
- E. Staff will complete informal counts often to ensure all juveniles are accounted for while juveniles are engaged in daily activities.
  - 1. Staff will complete informal counts when juveniles are moved from one area to another.
  - 2. These counts are reported only when a juvenile is missing.

# JSC 16.100: Transfer and Transportation of Juveniles Outside the Facility

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-15, 24

Classification: Public

# I. Policy

A. To ensure the security and safety of juveniles during transfers, proper safeguards will be used at all times by the staff members responsible for transportation.

#### II. Definitions

A. N/A

#### **III.** General Information

- A. Juveniles will not be transported in personal vehicles.
- B. Facility owned vehicles will be properly licensed according to state law.
- C. The number of passengers will not exceed the number of seats.
- D. Juveniles are not permitted to drive facility or staff vehicles.
- E. Juveniles will wear facility clothing.
  - 1. The juvenile will be allowed to wear their own clothing to jury trial, when transported by other agencies, or while on work release.
- F. All hearings, appointments, and transportation times are communicated only among staff and other authorized persons. Security sensitive information will not be provided to the juvenile.

- A. Shift Supervisor or designee will identify if a transport will be done by facility staff or law enforcement.
  - 1. If law enforcement is needed to transport, notification will be communicated to the PCSO transport division.
- B. Assigned staff will search vehicle and ensure it is ready for transport.
- C. Staff assigned to transport will utilize a hand-held radio specific for transporting.

- D. Staff will pat search the juvenile and scan with hand held metal detector.
  - 1. Juveniles will only be allowed to take items as approved by the Shift Supervisor.
- E. Staff will apply restraints if required by juvenile classification.
  - 1. Restraints will be applied as per Policy 16.130.
  - 2. Juveniles should never be restrained to each other or any part of the vehicle during vehicle transport.
- F. Staff will escort juvenile to vehicle.
  - 1. If the vehicle has been equipped for secure transport, the juvenile will sit in the backseat.
  - 2. In a vehicle without a security screen, the juvenile will sit in the backseat and additional staff members will sit directly behind the driver.
  - 3. Juveniles will be seated in a manner that provides best supervision.
  - 4. Staff will ensure seatbelts are secured.
  - 5. Vehicle doors will be locked during transport and when unattended.
- G. Upon departure, staff will initiate contact with:
  - 1. Pennington County Dispatch if juvenile is classified to medium or maximum security.
  - 2. Facility Control Room if juvenile is classified to minimum security.
- H. Radio communication will include number of juveniles, gender, starting mileage and destination.
- I. Upon arrival at destination, staff will initiate radio communication to provide ending mileage and arrival.
- J. Restraints will remain secured at all times unless approved by the Shift Supervisor.
- K. Staff will maintain direct supervision of the juvenile at all times unless the nature of the appointment requires privacy.
  - 1. While in the community with a juvenile, staff will make every attempt to be discreet and avoid drawing attention in order to maintain confidentiality.
  - 2. Juvenile will not be allowed to make phone calls or otherwise contact family members or others during transport.
- L. Staff will initiate radio communication upon departure with the number of juveniles, gender, starting mileage and destination.

- M. Upon arrival at the facility, staff will initiate radio communication to provide ending mileage and arrival.
- N. Staff will pat search the juvenile and scan with hand held metal detector.
  - 1. Strip searches will occur if warranted as Per Policy 16.110.
- O. Staff will ensure all pertinent information related to the transport are relayed and documented.

# JSC 16.110: Search of Locations and Juveniles

**Chapter:** Security and Control

Order No:

**Revised:** May 28, 1996 **Revised:** December 19, 2016 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-19, 20, 21, 31

Prison Rape Elimination Act of 2003, National PREA Standards, 28 C.F.R. Part

113.315(e)

Classification: Public

# I. Policy

A. Staff will conduct searches of the facility and juveniles to control contraband and ensure safety and security.

#### **II.** Definitions

- A. **Contraband**: Any property or object which has not been provided or approved by the facility or any approved item which has been altered or changed or misused.
- B. **Pat Search**: A thorough search of a clothed person using the hands to detect the presence of an object on a person in their clothing. All Pat Searches are conducted by same gender staff member.
- C. **Strip Search**: A search requiring complete removal of all clothing which includes a visual inspection of the body conducted by same gender staff member.
- D. **Reasonable Belief**: Facts and circumstances based upon observations or information that would lead a reasonable correctional officer to believe that the person to be searched was concealing contraband.

## **III.** General Information

- A. Manual or instrument inspection of the body cavity will be completed only by health care personnel and when authorized by the Commander.
- B. Juveniles will be informed of the search process before being searched.
- C. The juvenile will not be touched any more than is necessary to conduct a comprehensive search.
- D. Strip searches will be performed by a trained staff member of the same gender and will be conducted in an area that ensures privacy.
- E. Strip searches will be routinely conducted on all medium and maximum security juveniles who have been out of direct sight of staff while out of the building.

- F. Strip searches may be completed if there is reasonable belief the juvenile has contraband, per the approval of the Shift Supervisor.
  - 1. Reasonable Belief may be supported by one or more of the following:
    - a. Current offense for which they have been brought in on:
      - 1) All felony charges
      - 2) Misdemeanor drug charges
      - 3) All crimes of violence
    - b. Recent arrests for weapons or drugs
    - c. Conduct of individual that would indicate they are concealing something
    - d. Items felt during pat-down or indicated during metal detector search
    - e. Information from a reliable source
  - 2. Strip searches based on reasonable belief will be documented in an incident report.
  - 3. Detainees will not be strip searched based solely to determine genital status.

- A. Walk Through Metal Detection Search
  - 1. Staff will instruct person to remove all unnecessary items and place in secured location.
  - 2. Staff will instruct person to slowly walk through metal detector.
    - a. Staff will be in position to observe the person and ensure no contraband is passed outside the metal detector.
  - 3. If the detector alarms staff will instruct the person to return through the metal detector and attempt to determine the source of the alarm.
    - a. No person may enter the facility without successfully passing metal detection.
- B. Hand Held Metal Detector Search
  - 1. Staff will direct the person to stand with feet apart and arms out to the side.
  - 2. Staff will pass the detector along the surface of the front, back, and sides of the body.
- C. Pat Search

- 1. Staff will pat search when a juvenile is entering the facility or anytime a reasonable suspicion exists that a juvenile has contraband.
- 2. Staff will instruct the juvenile to remove all jewelry and extra clothing.
  - a. Staff will search items for contraband and place in a secured location.
- 3. Staff will ensure all items are removed from pockets.
- 4. Staff will direct the juvenile to stand with feet apart and arms out to the side facing staff.
- 5. Staff will examine the hair, ears, nose and mouth for contraband.
- 6. The juvenile will be directed to turn around facing away from staff.
- 7. Staff will pat search the upper torso, neck, shirt, arms, hands, back and chest.
  - a. For females, the bra will be checked for contraband.
- 8. Staff will pat search the lower torso, hips, buttocks, groin area, pants, legs, and socks.
  - a. The juvenile will be directed to lift their feet to allow for inspection.
- 9. Cross gender and transgender pat searches are conducted the same as above. (Refer to Operational Memorandum 16.110-How to Conduct Pat Search)
  - a. Cross gender pat searches are only conducted in exigent circumstances and will be documented.
  - b. Transgender or intersex detainees identified upon intake will be asked their preference in who conducts pat searches.

# D. Strip Search

- 1. Staff will explain the strip search process to the juvenile.
- 2. Staff will instruct the juvenile to remove each article of clothing and hand to staff for inspection.
- 3. Staff will direct the juvenile to stand with feet apart and arms out to the side facing staff.
- 4. Staff will instruct juvenile to run their fingers through their hair.
- 5. Staff will examine the ears, nose and mouth for contraband.
- 6. Staff will examine the front torso including arms, armpits and hands.
  - a. If the juvenile is obese, they will be instructed to lift skin folds to visually inspect.

- b. If the juvenile has large breasts they will be instructed to lift their breast to visually inspect.
- 7. Staff will examine the lower torso including genital area, legs and feet.
  - a. Detainees with male genitalia will be instructed to lift their genitalia to visually inspect.
- 8. The juvenile will be directed to turn around facing away from staff.
- 9. Staff will examine the back torso including neck and back.
- 10. Staff will examine the lower torso including buttocks, legs and feet.
  - a. The juvenile will be instructed to squat and bend forward to visually inspect.
- 11. Staff will provide new clothing to the juvenile.

#### E. Location Searches

- 1. Staff will complete unannounced room searches for damage and contraband.
  - a. Staff will start at one specific place in the room and systematically work around the room from top to bottom.
  - b. The search will include the door, walls, ceiling, floor, lights, sink, desk, toilet, mattress, wall hanger, window, mirror, vent, electrical outlets, intercom, chairs, and juvenile issued items.
  - c. At the completion of the search, staff will leave the room in the condition it was found.
  - d. If juveniles are not present, they will be given notice of any confiscated articles.
  - e. All damage will be documented.
- 2. Staff will complete searches of other areas for damage and contraband on a frequent basis.

## F. Control of Contraband

- 1. Staff discovering contraband will remove the contraband from the juvenile or area.
- 2. Staff will submit the contraband and an incident report to the Shift Supervisor.
- 3. If the contraband is of such size or shape it cannot be attached to the Incident Report Form, the contraband will be stored in an area designated by the Shift Supervisor until actions are complete.

- 4. All contraband will be disposed of outside the secure perimeter and in a manner specified by the Commander.
- 5. If the contraband is suspected of being evidence of a crime, staff will secure the area and notify the Pennington County Sheriff's Office Law Enforcement Division.

# **JSC 16.120: Facility Inspections**

**Chapter:** Security and Control

Order No:

**Effective:** May 28, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-10, 12

3-JDF-3B-08

Classification: Public

# I. Policy

A. The facility will be inspected routinely to ensure all areas are maintained appropriately and all systems are operational.

# II. Definitions

A. N/A

#### **III.** General Information

- A. The following types of inspections are to be completed by staff members:
  - 1. Supervisor's Shift Inspection and Perimeter Check
  - 2. Weekly Zone Checks (Safety, Security, and Sanitation)
  - 3. Weekly Fire Inspection

- A. Supervisor's Shift Inspection and Perimeter Check
  - 1. The Shift Supervisor or designee will complete a shift inspection and perimeter check during each shift to ensure proper security and cleanliness standards are maintained in the following areas:
    - a. Main Entrance
    - b. Server Room
      - 1) Verify temperature and report to the Control Room for documentation.
    - c. Kitchen
    - d. Receiving Area
    - e. Laundry Room

- f. Juvenile Restroom Near Classroom 6
- g. Home Detention Office
- h. Classroom 6
- i. Minimum Secure Pods
- j. Minimum Yard
- k. Shelter Unit
- 1. Classroom 7 and 8
- m. Reception Center
- n. Medium/Minimum Secure Gym
- o. Medium Commons including Visitor Booths, Library, Conference Room, Supervisors Office, and Staff Restroom
- p. Medium Secure Pods
- q. Storage Above Timeout
- r. Medium Timeout
- s. Medium Yard
- t. Storage Room Near Medium Yard
- u. Juvenile Restroom Near Classroom 1 and 2
- v. Classroom 1 and 2
- w. Teacher's Office and Restroom
- x. Classroom 3
- y. Maximum Commons including Visitor Booths, Conference Room, Storage Room, Timeout, and Staff Restroom
- z. Maximum Secure Pods
- aa. Maximum Secure Gym
- bb. Special Management Unit and Outside Emergency Exit
- cc. Stairwell
- dd. Classroom 4 and 5
- ee. Upper Offices, Restroom, and Storage Areas

- ff. Elevator and Elevator Closet
  - 1) Ensure emergency elevator key is in place.
- gg. Control Room
- hh. Booking, Garage, and Sally Ports
  - 1) Verify all tools accounted for in maintenance storage area.
- ii. Medical Exam Room, Office, Medication Cart, and Restroom
- jj. Administrative Offices, Break Room, Locker Rooms, and Training Room
- kk. Mechanical Room and Maintenance Office
- 2. Perimeter check locations will be recorded in the Pipe data system.
- 3. If any problems/concerns are identified during the perimeter check, it will be documented in the computerized record system and necessary action will be taken.

#### B. Zone Checks

- 1. Designed staff will complete a weekly zone check to ensure the sanitation and hygiene standards are being maintained throughout the facility, all areas are safe, and equipment is operational.
- 2. The building will be inspected by zones:
  - a. Zone 1 includes Minimum Secure areas and the Reception Center.
  - b. Zone 2 includes Administrative, Support and Kitchen areas.
  - c. Zone 3 includes Booking, Garage, and the Control Room.
  - d. Zone 4 includes Medium Secure areas.
  - e. Zone 5 includes Maximum Secure areas.
- 3. Staff will document findings on the WSDJSC Safety and Security Check form and route it to the Security Lieutenant upon completion.
  - a. Any deficiencies will be corrected immediately if possible or problems or concerns that cannot be fixed will be reported to Maintenance staff.
  - b. Deficiencies that jeopardize safety or security will be reported to the Commander.

# **JSC 16.130:** Levels of Force

**Chapter:** Security and Control

Order No:

**Effective:** July 16, 1996 **Revised:** October 10, 2018 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-16, 16-2, 17, 18, 27, 30, SDCL 22-18-2

Classification: Public

# I. Policy

A. The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes. Application of force will be as a last resort and in accordance with SDCL 22-18-2.

# II. Definitions

- A. **Force** (**Control**): The actions staff take to stop potentially dangerous and unlawful behavior, to protect self or another from injury or death, to protect juveniles from injuring themselves, or in the protecting of property from damage.
- B. **Force** (**Resistance**): The actions a juvenile takes to attempt to evade staff attempts of control.
- C. **SDCL 22-18-2**: South Dakota Codified Law: Justifiable force used by public officer in performance of duty--Assistance or direction of officer. To use or attempt to use or offer to use force or violence upon or toward the person of another is not unlawful if necessarily committed by a public officer in the performance of any legal duty or by any other person assisting the public officer or acting by the public officer's direction.

# **III. General Information**

- A. Staff members are trained in appropriate use of force techniques and when to apply them.
- B. Physical force or restraint is never justified as a means of punishment, torment, or retaliation.
- C. Only the degree of force necessary to overcome resistance will be employed.
- D. JSC is oriented toward safe, non-harmful behavior management following the Non-Violent Crisis Intervention model.
  - 1. Preventative and therapeutic physical techniques will be followed but may not be suitable in all circumstances. Decisions to depart from the model will be based on a reasonable belief the out of control juvenile is not safely manageable using the Non-Violent Crisis Intervention model.

- E. Physical force may be applied under the following conditions:
  - 1. To prevent or halt unlawful violence to persons or property.
  - 2. To prevent or halt the commission of any other offense.
  - 3. To prevent or halt an individual from harming him/herself.
  - 4. To preserve the peace.
  - 5. To maintain order.
  - 6. To prevent or halt an interference with the unlawful possession of contraband.
- F. Use of force should not be implemented until adequate staff is available.
  - 1. Availability of adequate staff will reduce the potential injury that could occur to the juvenile or staff.
  - 2. If force is required, the Shift Supervisor may request assistance from available facility staff or Law Enforcement.
- G. Handcuffs, leg irons, and belly chains are authorized for use to ensure security during routine transports and when moving juveniles from one location to another for disciplinary reasons.
  - 1. Other use of handcuffs, leg irons, and belly chains must be approved by the Shift Supervisor.
  - 2. Flex Cuffs are available for use during emergencies.
  - 3. Staff will only utilize facility provided restraint equipment.
- H. Staff will not use restraints on pregnant juveniles during labor or delivery.
- I. Force and restraints are intended to be used only as control measures, only when necessary and only for as long as necessary to assure safety and security. The levels of response are as follows:
  - 1. Staff presence
  - 2. Verbal communication
    - a. Voice commands and other verbal communications used by staff when addressing or communicating with juveniles.
      - 1) Are to be temperate and tactful.
    - b. Staff must give clear instructions to the juvenile.
  - 3. Control & Restraint
    - a. Physical force techniques in which the staff has been trained

- 1) Unapproved techniques (holds, strikes, or throws) will not be used unless self or others are in immediate and unavoidable danger of death or serious bodily harm.
- b. Approved restraint equipment (other than used for routine transportation) may be authorized by the Shift Supervisor as a control measure under the following circumstances:
  - 1) When all other reasonable methods have failed to control the situation.
  - 2) When the person is uncontrollably violent toward self, others, or property.
- c. If there is an immediate and urgent need to restrain a juvenile who is uncontrollably violent to self, others, or property; any officer may decide when to apply restraints.
- d. The officer must then report this to the Shift Supervisor as soon as the situation is stabilized.
- e. Approved restraint equipment includes:
  - 1) Handcuffs
  - 2) Leg Irons
  - 3) Belly Chains
  - 4) Four or Five Point Restraints (Policy 16.150)
- 4. Advanced Chemical Agents
  - a. Oleoresin Capsicum (OC) Aerosol Defense Spray may be used when appropriate in attempting to control and restrain inmates. See Policy 16.140
- 5. Taser
  - a. A Taser weapon may be used to control inmates displaying aggressive behavior and to reduce potential injuries to staff, inmates and visitors. See Policy 16.160
- J. All persons injured in an incident will receive immediate medical examination and treatment.

## IV. Procedural Guidelines

A. Staff will assess the threat level and need for applying physical force considering the following.

- 1. Physical retreat is not possible or appropriate.
- 2. Verbal communication has failed to control the situation.
- 3. Continued action by the juvenile would reasonably result in violence to others or to property and/or result in an unsafe environment for other juveniles.
- 4. The juvenile has the apparent ability and opportunity to place others or property in jeopardy.
- 5. Continued out-of-control behavior, assaultive/aggressive behavior, or disruptive behavior could reasonably result in riotous behavior by other juveniles.
- B. Staff will call a "Code 100 Red" to initiate emergency response, before applying force as circumstance allow.
  - 1. Staff will not engage in physical restraint techniques before assistance arrives.
- C. Staff will apply force at the level necessary until the situation is controlled.
- D. Staff will apply handcuffs and leg irons as needed to secure the juvenile.
  - 1. Handcuffs and leg irons will be applied with space left to allow for proper circulation and will be double locked to prevent tightening.
  - 2. Handcuffs and leg irons will be removed as soon as possible.
  - 3. Juveniles will not be left unattended when in handcuffs and/or leg irons.
- E. Staff will monitor the juvenile at all times while in handcuffs and leg irons.
  - 1. Immediate intervention will be made upon any indications of medical distress.
- F. Juveniles injured as a result of the use of force or restraint will be given all reasonable assistance and medical examination treatment as soon as it is practical and safe to do so.
- G. All staff involved in use of force (other than routine transport) will complete an incident report prior to the end of their shift.
- H. The Commander will be immediately notified of any injuries to staff or detainee resulting from restraint or use-of-force.
- I. Allegations of the use of undue force will be investigated as directed by the Commander.

# JSC 16.140: Use of Oleoresin Aerosol Defense Spray

**Chapter:** Security and Control

Order No:

**Effective:** January 14, 1996 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom **Reference:** 3-JDF-3A-26, 27, 28

Classification: Public

# I. Policy

A. The use of Oleoresin Capsicum (OC) spray is authorized to control juveniles displaying aggressive behavior and to reduce the potential of injury to staff, juveniles, and visitors.

## **II.** Definitions

A. N/A

#### **III.** General Information

- A. All correctional staff receives training on the use of OC spray and in the treatment of juveniles exposed to Oleoresin Capsicum.
- B. Trained staff are authorized to use OC spray under the following conditions:
  - 1. When a juvenile exhibits violent or potentially violent behavior that threatens the safety of others.
    - a. After attempts to subdue the juvenile utilizing Nonviolent Crisis Intervention techniques have not been or appear unlikely to be effective.
  - 2. When it is unsafe for staff to approach a juvenile in order to implement Nonviolent Crisis Intervention techniques.
  - 3. To disperse unruly or rioting crowds threatening the safety and security of the facility, juveniles, staff or visitors.
  - 4. To defend oneself or another from physical harm or possibly death.
  - 5. After sufficient warning of its intentional use has been given to the juvenile and then only if the juvenile continues the aggressive or threatening behavior towards staff or others.

#### C. Sanctions for unauthorized use

1. All application of OC spray will reviewed to ensure compliance with policy.

2. Unauthorized use will result in immediate suspension pending investigation and possible termination.

- A. Staff will give the juvenile a verbal order to stop the threatening behavior before application of OC spray.
  - 1. Verbal warnings will always precede the use of OC spray except when the situation presents an imminent danger of physical harm or death to oneself or others.
- B. When application is justified, staff will attempt to spray the juvenile in the area of the forehead and eyes from a distance of at least 3 feet but no more than 10 feet.
- C. Once OC spray has been applied, staff will give verbal commands necessary to minimize subsequent injury.
- D. Upon compliant behavior, the juvenile will be reassured that decontamination is forthcoming as rapidly as possible
  - 1. Restraints will be applied if necessary.
  - 2. Regardless of restraints, the person will be placed in an upright position to avoid possible asphyxiation.
- E. Staff will assist with decontamination.
  - 1. Staff will arrange for fresh air, a shower, and change of clothes once the juvenile is fully compliant and no remaining risk to staff is evident.
  - 2. All body parts exposed to OC spray will be thoroughly rinsed with water. Assistance in flushing eyes may be required.
- F. Any juvenile exposed to OC spray will be monitored until symptoms disappear to ensure medical attention is provided if necessary.
  - 1. Physical effects of exposure to OC spray include: tearing, involuntary closing of eyes, burning/redness of skin, coughing, gagging, shortness of breath, or loss of motor skills/muscle coordination.
  - 2. Medical treatment should be obtained if:
    - a. Juvenile shows symptoms for more than 30 minutes after decontamination.
    - b. More than slight reddening of skin occurs.
    - c. Juvenile complains of inordinate pain or requests medical care after decontamination.

- d. If there is a known history of respiratory illness, allergies or asthma.
- G. After the use of OC spray, staff involved in the incident will immediately report to the supervisor verbally all circumstances involving the use.
- H. Once situation is under control, the Shift Supervisor will notify the Commander.
- I. Each staff person(s) involved will complete an Incident Report in the prior to the end of the shift, that will include
  - 1. Written accounts from all staff involved in the incident.
  - 2. Medical treatment reports if medical attention is required.
- J. The Shift Supervisor will review all reports for accuracy.
- K. The Security Lieutenant will review all use of OC spray to ensure appropriateness of use and compliance with policy.

# **JSC 16.150: Four or Five Point Restraints**

**Chapter:** Security and Control

Order No:

**Effective:** July 7, 1996 **Revised:** January 21, 2016 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-3A-16, 16-1, 16-2, 17, 27, 4C-33-1

Classification: Public

# I. Policy

A. The use of four or five point restraints is for juveniles who are displaying uncontrollably violent behavior. The four or five point restraints are provided to prevent a juvenile from injuring themselves or others.

### **II.** Definitions

- A. **Restraint Chair:** A four point restraint that secures the arms and legs while juvenile is restrained in a sitting position.
- B. **Restraint Board:** A five point restraint that secures the arms, legs, and head while juvenile is restrained face up, lying on the back.

#### **III. General Information**

- A. The restraint chair or board is authorized to be used only as a control measure when absolutely necessary and never as a form or punishment.
- B. The restraint chair or board will only be authorized under the following circumstances:
  - 1. When all other reasonable methods have proven ineffective.
  - 2. When the person is uncontrollably violent toward self, others, or property.
- C. Medical staff does not participate in restraint of juveniles except for monitoring their health status.
- D. All juveniles who are restrained are provided nursing care, diet, and hygiene needs.
- E. Use of the restraint chair or board is prohibited on female juveniles during active labor or delivery of a child.

#### IV. Procedural Guidelines

- A. The Shift Supervisor may initiate use of the restraint chair or board if there is imminent danger.
  - 1. The Shift Supervisor shall notify the Commander or designee at the soonest possible time for any use of the restraint chair or board.

- B. Upon approval to restrain a juvenile in the restraint chair or board, the Shift Supervisor will direct staff to place juvenile in the restraint board or chair and notify medical staff.
  - 1. If juvenile is violently banging head, helmet will be used.
  - 2. If juvenile is spitting, spit mask will be used.
- C. Upon placing the juvenile in the restraint chair or board, the Shift Supervisor will assign staff to directly observe juvenile until medical staff conducts an assessment.
  - 1. After hours, medical on-call will conduct an on-site assessment as soon as possible.
  - 2. Medical staff will assess the juvenile's medical condition and may recommend the restraints be discontinued in order to protect the health of the juvenile.
- D. After the medical assessment, correctional staff will visually observe the juvenile every 5 minutes to ensure their safety and the prompt removal of the restraints at the soonest possible time.
  - 1. Staff observations will be recorded.
- E. If the juvenile is extremely self-destructive or uncontrollable, the Shift Supervisor assigns correctional staff to continually monitor the juvenile.
- F. The Shift Supervisor will assess the juvenile's condition every 20 minutes to ensure the removal of the restraints at the soonest possible time.
- G. If the juvenile's condition worsens, the Shift Supervisor will contact the Commander or designee immediately.
- H. If the out of control behavior continues for more than 2 hours, the Shift Supervisor will notify the Commander or designee.
  - The Commander, or designee, will conduct an on-site assessment and notify the Medical Director or designee to assess the juvenile's medical and mental health condition and advise whether, on the basis of serious danger to self or others, the juvenile should be placed in a medical/mental health unit for emergency involuntary treatment.
- I. A written report by all officers, medical, and mental health staff involved will be completed no later than the conclusion of shift. The report will include the following:
  - 1. The events and juvenile's behavior leading to the use of the restraint
  - 2. The contact with the Commander or designee for approval
  - 3. Detailed observations from staff regarding the inmate's behavior.
  - 4. Nursing care, diet and hygiene care given

- 5. The visits and/or assessments by the Commander or designee, medical staff, and Medical Director.
- 6. The resolution of the incident (removal of restraints and/or transfer for higher level of care).

# JSC 16.160: Use of an Electronic Control Device (Taser)

**Chapter:** Security and Control

**Order No:** 2018 - 04 **Effective:** 6-28-2018 **Revised:** 6-28-2018

**Approved by:** Sheriff Kevin Thom **Reference:** ACA: 3-JDF-26, 27,28,30

Classification: Public

#### I. POLICY

A. The use of a Taser weapon is authorized to control detainees displaying aggressive behavior and to reduce potential injury to staff, detainees, and visitors.

#### II. DEFINITIONS

A. **Taser:** Taser X26 or X26P Electronic Control Device

#### III. GENERAL INFORMATION

- A. Only trained staff is authorized to use the Taser on detainees under the following conditions:
  - 1. When a detainee exhibits violent or potentially violent behavior that threatens the safety of others.
    - a) After attempts to subdue the detainee by other means have been, or will likely be ineffective.
    - b) There is reasonable expectation that it will be unsafe for Officers to approach within contact range of the detainee.
  - 2. To control unruly or rioting crowds threatening the safety and security of the facility, detainees, staff or visitors.
  - 3. To defend oneself or another from physical harm.
  - 4. To prevent damage to the facility.
  - 5. The use of the Taser on late-term pregnant females is to be avoided if possible to prevent possible complications from a secondary injury or fall.
- B. Whenever practical, prior to discharging the Taser, the staff person will warn the detainee that if the detainee does not comply with the Officer's direction the Taser will be used.

- C. Probes are not to be removed if the shaft is so deep as to prevent probe from hanging loosely or the probe is imbedded in the head/face, groin or woman's breast.
  - 1. Medical staff will need to assess these situations and determine if the probes can be removed by medical staff or if the detainee is to be transported to a medical facility.
  - 2. Probes may be removed by trained personnel.
- D. The Taser is to be worn by:
  - 1. The Shift Supervisor on all shifts
  - 2. The Security Lieutenant or their designee.
- E. The Taser(s) and cartridges are stored in the Supervisors Office in a locked drawer.
- F. Daily, the Shift Supervisor will inventory all items relating to the Taser.
  - 1. Any Discrepancies will be immediately reported to the Security Lieutenant and JSC Commander.
- G. Staff authorized to use the Taser will be recertified according to Taser International's recommendation and guidelines.

#### IV. PROCEDURES

- A. Verbal commands will be given to the detainee(s).
- B. If the detainee fails to follow commands resulting in the use of the Taser; the supervisor will clearly state, "Taser clear" indicating that the use of the Taser is imminent.
- C. During a successful shock, available staff, following the direction of the Shift Supervisor or designee, will immediately respond to the detainee to gain control and restraint.
- D. The responding staff will escort the detainee to a secure location after successful submission.
- E. Medical staff, when available will respond to the incident to evaluate the detainee and remove the probes.
  - 1. Authorized staff are to wear rubber gloves when removing the probes from the skin.
  - 2. Instant sanitizing gel or spray is to be administered to each puncture site and a band-aid applied.
  - 3. Medical personnel or the Shift Supervisor will make a determination if the detainee is to be transported to a medical facility for follow-up medical evaluation.
  - 4. Attention is to be given to potential of secondary injuries the detainee may have received from falling after being incapacitated by the Taser.

- F. The Shift Supervisor or their designee will take photos of the probe site.
- G. The Shift Supervisor or designee will collect the air cartridges probes and AFIDs from the scene and place them in an evidence envelope.
- H. The Shift Supervisor will download the following detailed information utilizing the ECD data port.
  - 1. Date
  - 2. Time
  - 3. Number of times the Taser was activated.
  - 4. Length of time the Taser was activated.
- I. Each person(s) involved will complete an Incident Report in the designated record management system prior to the end of the shift.
  - 1. The report will include the following:
    - a. Written accounts from all staff involved in the incident.
    - b. Medical treatment reports if medical attention is required
  - 2. The Shift Supervisor will review all reports for accuracy.
  - 3. The Security Lieutenant will review the reports for accuracy and follow-up information and make notification to the JSC Commander.
- J. The Shift Supervisor will complete an Evidence Form.
- K. The Shift Supervisor will attach the following items:
  - 1. An Evidence Form
  - 2. A copy of the incident report
  - 3. The Evidence Envelope
  - 4. The Taser Data Port download
  - 5. Place it in the Security Lieutenant's Office

# JSC 17.10: Prevention

**Chapter:** Suicide Response

Order No:

Effective: July 16, 1996
Revised: October 1, 2012
Approved by: Sheriff Kevin Thom

**Reference:** 3-JDF-4C-16, 3-JDF-4C-35, 3-JDF-5B-05

**Classification:** Public

# I. Policy

A. Qualified Mental Health Services will be provided for juveniles entering the facility. A written suicide prevention program (approved by a qualified medical or mental health professional) will be available and trained to all staff supervising juveniles.

### II. Definitions

A. N/A

#### **III.** General Information

A. Levels of Supervision (all levels are documented in a records management system and/or an Incident Report):

#### 1. Routine Watch

- a. At a minimum, this level of prevention will be provided for all juveniles.
- b. A minimum of thirty minute room checks will be conducted on all juveniles.

#### 2. Close Watch

- a. This level is for juveniles whose behavior indicates emotional instability or who have been identified as a possible risk to harm themselves.
- b. Anytime the juvenile is in a room, room checks will be conducted at a minimum of 5 times hourly at staggered intervals not to exceed 12 minutes between checks.
- c. Weekly contact will occur by a Mental Health Caseworker with all juveniles on Close Watch.
- d. Juvenile's eyeglasses must be given to the officer during night lockdown.
- e. A juvenile will use a razor only under direct staff observation.
- f. Program participation will continue to be available, unless otherwise directed by the Shift Supervisor or Mental Health Caseworker.

g. The Correctional Staff will document in the facility computerized records system both the start and removal date/time of a Close Watch.

#### 5-Minute Watch

- a. This level of supervision is for a juvenile who has been removed from general population and the daily activity schedule.
- b. Room checks will be accomplished every 5 minutes and the juvenile's behavior and activities will be recorded within the records management system.
- c. If it is a matter of threats of self-harm or expression of suicide ideation, the juvenile will be placed on Constant Watch and appropriate actions will be taken.
- d. If it is not a matter of threats of self-harm or an expression of suicide ideation, the Shift Supervisor, or designee, will determine when the situation has de-escalated, the juvenile has regained control of their behavior, and they may be returned to general population and programming.

#### 4. Constant Watch

- a. This level is for a juvenile who has made threats of self-harm or expressions of suicide; or is actively engaged in acts of self-harm or has stated they have a specific suicide plan.
- b. Staff will observe the juvenile on a continuous, uninterrupted basis. Physical restraint will occur if necessary to prevent injury.
- c. When determined necessary, the juvenile will be moved to any available room which increases observation ability.
- d. When the Mental Health Caseworker is present, the Shift Supervisor will notify the Mental Health Caseworker.
- e. The Mental Health Caseworker will assess the situation and advise the Commander, or designee, as to what direction should be taken with the juvenile.
- f. The facility Commander, or designee, will be the determining authority of when a mental hold/transfer will occur and will make transportation arrangements.
- g. When the Mental Health Caseworker is not present, the Shift Supervisor will notify the Commander, or designee, with the details of the case.
- h. The Commander, or designee, will determine the need for the presence of a Mental Health Caseworker.

- i. Direction will be provided to the Shift Supervisor as to what action should be taken with this juvenile.
- B. A Rescue Tool is readily available in each housing subsection of the building.

#### IV. Procedural Guidelines

- A. At admission, the Shift Supervisor or designee will complete a suicide screening on each juvenile.
- B. Any juvenile identified by the suicide screening and/or any juvenile identified as prior Close Watch status will be placed on Close Watch and reviewed by the Mental Health Caseworker.
  - 1. The level of supervision will be captured in the facility records management system and communicated to staff.
- C. Shift Supervisors will ensure their staff members know and verify the watch supervision status of every juvenile.
  - 1. Correctional staff will not assume a post or accept direct supervision of any juvenile unless they are certain of their watch supervision status.
  - 2. Staff will observe and monitor juveniles for signs of suicidal ideations.
  - 3. Any noticed changes in a juvenile's behavior will be documented and acted upon.
  - 4. All suicidal talk and/or expression of suicide ideation will be taken seriously and will be reported to a Shift Supervisor immediately.
- D. Specific Mental Health Program Plans may be implemented to assist in the management of high risk juveniles.
  - 1. Such plans may involve specific housing classification and/or restrictions, specific activity restrictions, specific guidelines for interactions with the juvenile, specific items allowed in the juvenile's possession, use of suicide resistant garments and/or bedding, and/or use of physical restraints (see Policy 18.130).
  - 2. No Mental Health Program Plan may be terminated without review and recommendation of a Mental Health Caseworker.
    - a. Removal of a suicide resistance garment requires utilization of the SPS (Suicide Probability Scale) evaluation by a Mental Health Caseworker.
  - 3. The Mental Health Caseworker will provide a recommendation to the Commander, or designee, regarding juvenile status and specific needs.

- 4. The Commander, or designee, will be the determining authority of when a Mental Health Program Plan is modified, when a juvenile will be returned to general population, or when a mental hold/transfer will occur.
- E. Reassessments will be conducted by the Mental Health Caseworker.
  - 1. The Mental Health Caseworker's recommendation for changes in watch status will be reviewed by the Shift Supervisor and the Commander, or designee.

# JSC 17.20: Intervention

**Chapter:** Suicide Response

Order No:

**Revised:** October 1, 2012 **Revised:** October 1, 2012 **Approved by:** Sheriff Kevin Thom

**Reference:** 3-JDF-4C-35, 3-JDF-5B-05

Classification: Public

# I. Policy

A. In the event of a suicide or suicide attempt, a written suicide intervention program (approved by a qualified medical or mental health professional) will be available and trained to all staff supervising juveniles.

### II. Definitions

A. N/A

#### **III.** General Information

A. N/A

#### IV. Procedural Guidelines

- A. Staff discovering a suicide attempt, will immediately notify the Control Room Operator via portable radio announcing "Code 100 Blue" and the location.
  - 1. The Control Room Operator will verify the Shift Supervisor is responding immediately to the location.
- B. Once assistance arrives staff will intervene and First Aid will be administered immediately.
- C. If necessary, the Supervisor will call or assign a staff to call for an ambulance. (See JSC Policy 14.60)
  - 1. If no further outside medical attention is necessary, the Supervisor will escort the juvenile to booking until medical and mental health staff can evaluate them.
- D. If the juvenile is directed to be transported to outside medical treatment, the Shift Supervisor will place the juvenile on constant observation until they are transported.
- E. All involved staff will complete an incident report describing the events and actions surrounding a suicide or suicide attempt.
  - 1. Reports will be submitted to the Commander, or designee, before the end of the shift.

- F. The Commander, or designee, will contact parents/guardian, the State's Attorney's Office and Holding Authority.
- G. The Commander, or designee, will determine if the Pennington County Sheriff's Office Law Enforcement Division will be contacted to directly transport the juvenile to the Rapid City Regional Hospital Psychiatric Unit, or if the Mental Health Caseworker will be contacted to evaluate the juvenile for psychiatric hospitalization.
- H. If medical staff is unavailable, a copy of the incident report will be made available following their return.
- I. If a Mental Health Caseworker is called, the Mental Health Caseworker will review with the Commander, or designee, the juvenile's mental condition and determine if an involuntary psychiatric hospitalization is to be requested through the State's Attorney's Office.
- J. As soon as possible after a serious suicide attempt or suicide attempt is completed, the Commander, or designee, will convene an evaluation meeting for those staff members involved.
- K. A CISD (Critical Incident Stress Debriefing) will be conducted.
- L. Incident Reports and the evaluation will be made available to the Sheriff and Chief Deputy.