

**OKLAHOMA COMMISSION ON CHILDREN AND YOUTH
OFFICE OF JUVENILE SYSTEM OVERSIGHT**

Name of Facility: Cleveland County Regional Juvenile Detention Center

Dates of Visit: April 5 and April 11, 2006

Oversight Reviewers: Sara Vincent-Spain, Dana Holden, and Cliff A. Aldridge, Oversight Specialists

Purpose of Visit: Unannounced Visit

Date: July 18, 2006

General Information

The Office of Juvenile System Oversight (OJSO) conducted unannounced visits on April 5 and April 11, 2006, at the Cleveland County detention center in Norman. The purpose of the visits was to assess compliance with established responsibilities and facility policy and procedures. The detention center was certified by the Office of Juvenile Affairs (OJA) for twenty-six residents. The census was twenty-four on April 5 and twenty-two on April 11. The facility provides regional detention services to area counties.

Interviews Conducted

- Ten residents
- Four direct care staff members

Materials Reviewed

- Files on twelve residents
- Four personnel files
- Facility policy and procedures
- Most recent inspection reports by the Office of the Oklahoma State Fire Marshal and the Oklahoma State Department of Health
- Grievances and grievance log
- Room confinement log
- Room restriction log

Exit Conference

- Director, Oklahoma Commission on Children and Youth
- Programs Manager, OJSO
- Advocate Defender, OJA
- Division Administrator, Community Services, OJA
- Director of Public Integrity, OJA
- Executive Director, Cleveland County detention center

Areas Toured

- Entire facility

Overview

On April 17, 2006, the OJSO convened an exit conference to indicate the OJSO's findings and express concerns noted by the OJA. The issues identified were:

1. Documentation in resident files did not indicate medical screenings were completed on all juveniles admitted into the facility.
2. All resident files did not contain required admitting information.
3. Documentation did not indicate residents were being provided adequate outside recreational time.
4. The grievance procedure was not being followed according to policy.
5. Documentation did not indicate the grievance coordinator had reviewed the grievances.
6. Staff files documentation indicated mandatory training was not completed within required timeframes.
7. The facility needed cleaned and the clutter removed.
8. Reports were not on file for major incidents involving residents.
9. Residents had been placed on room confinement for minor rule violations.
10. Documentation indicated that residents remained in room confinement for more than three hours, without an administrative review to determine when return to the general juvenile population was appropriate and authorization obtained for continued confinement.
11. A written record was not maintained for documenting room restriction/confinement, to include authorization, observation, and time of release.
12. A central accounting log had not been established for receiving, storing, dispensing, administering, and distributing all medications and first aid supplies.
13. Responses to interview questions indicated juveniles were not provided explanations of their rights, facility rules, disciplinary procedures, and the grievance process upon admittance into the facility.
14. The sinks in four resident rooms did not have cold and hot running water.

Summary

On May 15, 2006, the OJSO received the facility's written notification of a plan of correction regarding the issues identified. (Attached.) The OJSO will monitor compliance progress on the next visit.

SVS-js

