

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

Name and Location of Facility: Garfield County Juvenile Detention Center
Enid, Oklahoma

Date of Visit: February 20, 2007

Oversight Reviewer: Dana S. Holden, Oversight Specialist

Focus of Visit: Unannounced Visit, 2007

Date: April 4, 2007

General Information

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit on February 20, 2007, to the Garfield County Juvenile Detention Center, located in Enid, Oklahoma. The purpose of the visit was to assess compliance with established responsibilities. The facility was certified by the Office of Juvenile Affairs (OJA) for eleven residents. On the day of the OJSO visit, the census was ten.

Persons Interviewed

- Entry interview and an exit conference with the facility director
- Five residents
- Three direct care staff members

Documentation Reviewed

- Personnel files of three direct care staff members
- Files on five residents
- Office of the Oklahoma State Fire Marshal inspection report, dated March 27, 2006
- Oklahoma State Department of Health inspection report, dated April 25, 2006
- OJA Office of Public Integrity monitoring report, dated March 31, 2006, and facility plan of correction

Areas Toured

- Entire facility

Overview

Interviews

The OJSO interviewed five residents. The interview questions pertained to the residents' perception of safety, detention program services, the rights of residents, discipline practices, and other detention care issues. The residents interviewed stated they felt safe at the facility and attributed those feelings to the staff. Two residents reported they were placed in room confinement for rule violations that did not meet criteria.

Three direct care staff members were interviewed. The interview questions pertained to the staff members' perceptions of program services, the rights of residents, discipline policies, and other detention program services. No concerns were identified from the staff interviews.

File Reviews

The OJSO reviewed the files on five residents. The OJSO noted:

- Documentation in one file did not indicate the resident participated in recreational activities.
- Documentation of medical consent/authorization was not contained in one file.

The OJSO reviewed the personnel files of three direct care staff members. The OJSO noted:

- Documentation to indicate the staff member had completed first aid training was not contained in one file.
- The required hours of annual training in 2006 were not documented for three employees.

Room Confinement/Room Restriction Documentation Reviews

The OJSO reviewed the room confinement logs, incident reports, daily journals, and bed check sheets on the five residents whose files were reviewed. The OJSO noted:

- Eight incidents of room confinement were documented for rule violations that did not meet criteria. The residents in these incidents were confined to their rooms for more than an hour.
- Eight incidents of room confinement were documented; however, incident reports were not issued.

Observational Tour

The OJSO conducted a tour of the facility. No concerns were noted from the observational tour. The OJA Office of Public Integrity monitoring report, dated March 31, 2006, cited five areas of concern. The facility had submitted a corrective action plan to the OJA to address the deficiencies.

Summary

On the day of the OJSO visit, the facility was clean and was well-maintained. The residents interviewed spoke favorably of the staff and stated that their needs were met at the facility. The OJSO is concerned that the facility's use of "administrative time-outs" will inappropriately circumvent the requirements for room confinement.

Findings

1. One file did not document that the resident participated in recreational activities. Office of Juvenile Affairs policy OAC 377:3-13-45, Program and services, (a), (4), Recreation, in part, states, "Written policy and procedure provide a recreation schedule that includes at least one hour of large muscle activity and one hour of structured recreational activities."
2. One file did not contain documentation to indicate consent/authorization of medical treatment. Office of Juvenile Affairs policy OAC 377:3-13-40, Records, (a), (16), states, "Facility staff shall complete a confidential record for each juvenile admitted to the facility and include, at the minimum . . . medical consent forms, court orders authorizing medical treatment, or documentation of request for medical consent."
3. Room confinement for more than an hour was documented for rule violations that did not meet criteria. Office of Juvenile Affairs policy OAC 377:3-13-44, Security and control, (c), (14), Room confinement, (A), states, "Room confinement is used with detained juveniles:
 - i. for self protection;
 - ii. to separate juveniles from fighting;
 - iii. to restrain juveniles in danger of inflicting harm to themselves or others;
 - iv. to restrain juveniles who have escaped or who are in the process of escaping;
 - v. to prevent destruction of property if reasonably related to (i) through (iv); and
 - vi. stop behavior that incites other juveniles which jeopardizes the safety of staff and residents of the facility and is reasonably related to (i) through (iv).
4. Reports were not prepared for eight incidents of restraints or room confinement. Office of Juvenile Affairs policy OAC 377:3-13-44, Security and control, (c), (8), Physical force, (F), states, "A written report is prepared following all uses of force and submitted to the facility administrator by the end of the shift."
5. One file did not contain documentation to indicate the staff member had completed first aid training. Office of Juvenile Affairs policy OAC 377:3-13-43, Staff requirements, (a), General provisions, (8), Staff training, (E), in part, states, "Within 90 days after employment, all direct-care staff shall have successfully completed first aid training from an instructor certified by the American Red Cross or its equivalent."

6. Three files did not contain documentation to indicate the staff members had completed the required number of training hours in 2006. Office of Juvenile Affairs policy OAC 377:3-13-43, Staff requirements, (a), General provisions, (8), Staff training, (G), in part, states, "Full-time direct care staff and administrators shall obtain at least 24 clock hours of training per employment year."

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