

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

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

**Date of Visit:** June 21, 2010

**Oversight Reviewer:** Janice Sharp, Oversight Specialist

**Focus of Visit:** Unannounced Visit, 2010

**Date:** July 29, 2010

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### **Introduction**

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit on June 21, 2010, at the Garfield County Juvenile Detention Center, located in Enid, Oklahoma. The purpose of the visit was to assess compliance with established responsibilities and facility policy and procedures. The Office of Juvenile Affairs (OJA) contracted with the Garfield County Board of Commissioners for operation of the detention center. The facility was certified by the OJA for ten detention program residents and one sanction program resident. On the day of the OJSO visit, the census was six male residents and four female residents, for a total of ten residents.

### **Interviews Conducted**

- Informal entry interviews on June 21, 2010, with the administrative assistant and the program manager
- Four residents
- Two direct care staff members
- Exit conference on July 14, 2010, with the executive director, the program manager, and the administrative assistant

### **Documents Reviewed**

- Personnel files and training records for two direct care staff
- Four resident files
- Office of the Oklahoma State Fire Marshal report dated February 16, 2010
- Oklahoma State Department of Health Food Inspection report dated March 5, 2010
- OJA Office of Public Integrity (OPI) monitoring report dated July 8, 2009
- Facility room confinement and room restriction logs for January 1, 2010, through June 20, 2010

- Facility grievance log and grievances for July 1, 2009, through June 20, 2010
- Prescription medication logs regarding one resident
- Resident handbook
- List of residents
- Staff roster
- Previous OJSO report dated June 25, 2009, regarding the OJSO visit of May 26, 2009

## **Findings**

### Resident Interviews

The OJSO interviewed four residents. The interview questions pertained to the residents' perceptions of safety, detention program services, resident rights, discipline practices, and other detention program issues. Each interviewee could name the OJA caseworker to whom his/her case was assigned, and each interviewee reported having been contacted by his/her OJA caseworker subsequent to the juvenile's placement at the facility. The four interviewees reported that they attended summer school at the facility, and each named the school subjects they were studying. Each interviewee stated that he/she felt safe at the facility; none of the interviewees had any suggestions for making the facility safer for the residents, as the interviewees indicated that the facility was already safe. Each interviewee responded "no" to the questions inquiring if he/she had been physically restrained for inappropriate behavior, placed on room confinement for a major rule violation, or assigned room restriction for an infraction of a rule at the facility. None of the four interviewees reported having knowledge of any resident who had been assaulted or mistreated by a staff member at the facility, and none of the interviewees reported having been cursed at or having witnessed other residents having been cursed at by staff at the facility. All four interviewees stated that they received plenty to eat and that second helpings of food were allowed. When asked about the quality of the food, two interviewees stated that the food was good, and the other two interviewees stated that they liked the food served on the weekdays better than the food served on the weekends. The four interviewees reported that they received outdoor recreation at least once a day, weather permitting; two interviewees stated that sometimes the residents were allowed outdoors for recreation three and four times a day. All four interviewees indicated they understood the grievance procedures; one interviewee stated that he/she had filed a grievance but that he/she did not know the outcome yet. The OJSO reviewed the grievance log and did not find an entry to verify that a grievance form had been issued to the resident for him/her to file a grievance.

The four interviewees made positive statements about the staff and reported positive interactions between the residents and the staff at the facility. No concerns were noted from the resident interviews.

## Staff Interviews

Two direct care staff members were interviewed. The interview questions pertained to the staff members' perceptions of detention program services, resident rights, discipline practices, and other detention program issues. Each interviewee reported current first aid training and cardiopulmonary resuscitation (CPR) certification. Both interviewees reported that staff members received written guidelines on the use of force, and both interviewees demonstrated knowledge of the circumstances in which physical force could be used. The two interviewees described appropriate procedures if a resident's behavior should cause the need to use mechanical restraints. Neither interviewee reported having witnessed a staff member or resident having been injured at the facility. Both interviewees demonstrated knowledge of frequency of room checks for residents on standard observation and non-standard observation. Both interviewees reported that grievance forms were accessible to the residents. When asked to describe the types of punishment that residents could receive for rule infractions, the responses provided by both interviewees were appropriate forms of punishment. One interviewee stated that recreation was provided twice a day, and the other interviewee stated that recreation was provided almost every day. The examples of the recreation allowed were kickball, basketball, physical training, volleyball, and toss football.

Both interviewees made positive comments regarding the detention program and how it benefitted the residents. No concerns were noted from the staff interviews.

## Resident File Review

The OJSO reviewed four resident files for compliance with OJA detention standards. The OJSO noted that one resident file contained a medical request form in which the resident had requested dental care on Tuesday, and, according to the documentation, the OJA worker assigned to the resident's case was notified of the request on Sunday, via an electronic message from the facility. No other concerns were noted from the resident file review.

## Staff File Review

The personnel files and training records of two direct care staff were reviewed for compliance with OJA detention standards. Documentation in both files reviewed indicated that first aid training and cardiopulmonary resuscitation had not been completed within ninety days of hire. No other concerns were noted from the personnel file and training record review.

## Room Confinement Log Review

The OJSO reviewed the room confinement log for January 1 through June 20, 2010. Five instances of room confinement were documented for this time period. No concerns were noted from the room confinement log review.

### Room Restriction Log Review

The OJSO reviewed the room restriction log for January 1 through June 20, 2010. The OJSO noted that four instances of room restriction documented did not record the time of release on the log. No other concerns were noted from the room restriction log review.

### Mechanical Restraint Log

The OJSO requested to review the mechanical restraint log and corresponding incident reports for January 1 through June 20, 2010. The OJSO was advised that no instances of mechanical restraint use had occurred during that time period.

### Resident Grievance Log Review

The OJSO requested to review the grievance log and corresponding grievances for July 1, 2009, through June 20, 2010. Five grievances had been filed by residents for the time period of July 1 through December 31, 2009; no grievances had been filed by residents in 2010.

The OJSO noted that the grievance forms were not pre-numbered; instead, the grievances were tracked through the grievance process by the resident file numbers. Of the five grievances filed from July 1 through December 31, 2009, the OJSO noted: Two grievances were filed by one resident; two grievances were filed by a second resident; and one grievance was filed by a third resident. The two grievances filed by the first resident documented the same date and time as to when the grievances were filed. No other concerns were noted from the grievance file review.

### Prescription Medication Log

The OJSO reviewed the prescription medication logs regarding one resident. The OJSO noted that the end-of-day pill count for one medication was not documented every day the medicine was administered in a two-month period. Also, the end-of-day pill count documented was incorrect in two instances in a two-month period; a notation regarding one of the instances of incorrect pill counts was made on the log two days after the error occurred.

### Inspection Reports Review

The OJSO reviewed the most recent reports by the OJA OPI, the health department, and the fire marshal's office. The deficiencies cited in the OJA OPI report were:

#### Section 3 - Institutional Operations

No centralized room restriction log; seven room confinements were not logged by staff members.

#### Section 4 – Grievance Requirements

Six grievances did not document the resident's signature to indicate the resident accepted the resolution.

#### Section 5 – Personnel Records

Five personnel records did not contain the required three references or documented telephone interviews. One personnel record did not contain documentation of a high school diploma or GED. Three personnel records did not contain documentation of orientation training. Three personnel records did not contain documentation of first aid training. One personnel record reflected the first aid training was not completed within ninety days of hire. Three personnel files did not contain documentation of CPR training. One personnel record reflected CPR training was not completed within ninety days of hire.

#### Section 9 – Facility Tour

Rooms 9 and 10 had issues with the water coming out of the faucets. The water pressure limited the water to a trickle.

The facility submitted a correction action plan to the OJA, and the OJA approved the plan. No deficiencies were noted in the health department report. The deficiency listed on the fire marshal's report stated that the facility needed to replace all damaged, stained, or missing ceiling tiles.

### **Violations**

1. The two personnel files reviewed did not document that first aid training had been completed within ninety days of hire. The copy of the documented certification card did not indicate the expiration date. OJA policy, OAC 377:3-13-43, (a), (8), Staff training, (E), in part, states, "Within 90 days of employment, by a detention facility, all direct-care staff shall have successfully completed a specific course of instruction in first aid . . . . There shall be a certificate or card issued to the employee . . . . The . . . first aid course of instruction . . . shall be updated within the employee's third year of employment and each succeeding three-year increment."
2. The two personnel files reviewed did not document that cardiopulmonary resuscitation had been completed within ninety days of hire. The copy of the documented certification card did not indicate the expiration date. OJA policy, OAC 377:3-13-43, (a), (8), Staff training, (F), in part, states, "Within 90 days of employment by a detention facility, all direct-care staff shall be certified in [sic] have successfully completed a specific course of instruction in cardiopulmonary resuscitation (CPR) . . . . There shall be a certificate or card issued to the employee . . . . The . . . CPR course of instruction . . . shall be updated on an annual basis."
3. Four instances of room restriction documented for the time period reviewed did not record the time of release. OJA policy, OAC 377:3-13-44, Security and control, (c), (15), Procedure for room confinement or room restriction, (E), states, "A written record shall be maintained on any juvenile placed in room restriction or confinement. It includes a log stating . . . the time of release."

## **Exit Conference**

The OJSO conducted an exit conference on July 14, 2010, to discuss its findings from the oversight visit with the executive director, the program director, and the administrative assistant. The OJSO provided a facility exit checklist form identifying the files that had been reviewed and the areas of concern/violations that had been noted from the visit. Each item listed on the exit checklist form was discussed, and the OJSO left a copy of the completed exit checklist form with the executive director.

Three areas of concern were addressed and resolved during the exit conference. The areas of concern were regarding documentation that appeared to indicate the facility had not been timely in notifying an OJA worker of a resident's request for dental care; inconsistent and inaccurate recording of the number of pills remaining in a supply of medicine for a resident; and the use of grievance forms that were not pre-numbered, and, therefore, a grievance could not be tracked by the grievance number through the grievance system.

The OJSO commends the staff on their documenting skills when recording the reasons for confinement on the room confinement log. When staff documented "inciteful behavior" as the reason for the room confinement of a resident, staff also described the inciteful behavior. An example of the documentation was: "Inciteful behaviors: physical assault and threats of violence."

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