

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

**MEMORANDUM**

**To:** Toni Godwin, Director  
Sac and Fox Nation Juvenile Detention Center

**From:** Cliff A. Aldridge, Oversight Specialist  
Office of Juvenile System Oversight

**Reviewers:** Cliff Aldridge and Lou Truitt, Program Supervisor of the National Resource Center for Youth Services (NRC) at the University of Oklahoma

**Subject:** 2005 Unannounced Oversight Visit

**Date:** September 13, 2005

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**General Information**

The Office of Juvenile System Oversight (OJSO) conducted an unannounced visit of the Sac and Fox Nation Juvenile Detention Center on March 31, 2005. The oversight team consisted of Cliff Aldridge and Lou Truitt. On April 8, 2005, Mr. Aldridge returned to the facility to complete the visit. The purpose of the oversight visit was to monitor compliance with established responsibilities and facility policy and procedures.

The facility is certified by the Office of Juvenile Affairs (OJA) until June 2006. The OJA contracted with the Lincoln County Board of Commissioners for twelve beds in the detention center and the County Commissioners, in turn, contracted with the Sac and Fox Nation for the actual operation of the facility. In addition, the Sac and Fox Nation had a memorandum of agreement with the law enforcement division of the United States Bureau of Indian Affairs to accept tribal children from in-state and out-of-state tribal courts.

**Persons Interviewed**

- An entry interview with the Director
- Director regarding disciplinary procedures and room confinement
- Four of the ten residents in the facility on the day of the visit
- Four direct care staff members
- Informal interview with the Medical Director
- Informal visits with residents during lunch
- School teacher
- An exit conference with the Director

## Documentation Reviewed

- Case records on two residents
- Personnel files of two direct care staff members
- Teacher's teaching certificate
- Agreement for Educational Services between the Stroud Public Schools and the Sac and Fox Nation Juvenile Facility
- Staff roster
- Resident Handbook
- Grievance log for December 2004 through February 2005
- Room restriction/confinement log for December 2004 through February 2005
- Clothing policy and practices
- OJA Requirements for Secure Juvenile Detention Centers
- OJA Office of Public Integrity's inspection report of April 20 and May 23, 2005
- Inspection report of June 17, 2004, by the Office of Environmental Health of the Oklahoma City Area Indian Health Service
- Inspection report of March 21, 2005, by the Oklahoma State Department of Health

## Areas Toured

- Residential pods and a sample of resident rooms
- Dining room during lunch
- Food preparation and storage areas
- Intake and sally port areas
- Educational area
- Indoor and outdoor recreational areas
- Control room
- Outside perimeter of the facility during a fire drill

## **Overview**

### Interviews

Four of the OJA detention residents were interviewed regarding the quality of life, their participation in detention programs, and their treatment by the staff. Overall, the residents felt safe and gave positive responses to questions regarding the staff and the facility. The residents each reported participation in educational and recreational services.

None of the residents interviewed reported having been restrained; however, three of the four talked about the use of lockdown in the dayroom or on the unit. They were confined to the pod dayroom but were allowed to go to their rooms. While they were confined, they were allowed to move about and read or play cards. One of them said that they were not allowed to watch television or go to recreation and that they had to eat their meals in the pod dayroom.

The number of reported occurrences of dayroom lockdown ranged from once to four or five times. One resident reported being put on lockdown for a whole week. The three residents who had been on lockdown were able to describe the reasons for being put on lockdown; however, they said that the staff members were inconsistent about giving them an opportunity to explain their behaviors prior to being confined to the unit. The offenses reported included threats toward another resident (twenty-four-hour lockdown) and passing a note with drug content (lockdown for several hours).

The sample of four direct care staff members included two from the morning shift and two from the evening shift. The staff appeared to be familiar with the facility's policies and procedures. All four of the staff interviewed reported sufficient training hours for their positions and current certification in the required areas. The staff members interviewed seemed to feel their jobs were important. Their responses indicated they worked to establish positive relationships with the residents. Two of the four staff members interviewed reported being allowed to isolate or lockdown juveniles who violated the rules.

The educational program was reviewed through an interview with the teacher, a review of the educational agreement with the Stroud public schools, and resident interviews. According to the teacher, the school district provides a teacher for nine months and the facility provides a teacher's assistant. The detention center funds the educational program for summer school. The students are taught basic subjects in the morning and physical education and art in the afternoon.

The teacher requests individualized education programs (IEPs), when applicable, to ensure compliance with state and federal regulations. The IEPs are received and sent by mail to and from sending and receiving schools. The school district evaluates the educational program, approves the text books, and certifies the academic transcripts when residents are discharged from the detention center and transfer to other schools. The teacher reported receiving new textbooks on a rotating basis and the use of computers and A Plus Learning software, as well. No concerns were identified from the review of the educational program.

The range of disciplinary procedures used by the facility for rule violations by the detention residents was reviewed in an interview with the Director. The Resident Handbook was also reviewed. The facility used a points and levels system that provided for incentives and loss of privileges. Program rules were described in the Resident Handbook. The range of discipline described included the use of room confinement for major rule violations.

In the same interview, the use of room restriction and confinement practices and the room confinement logs from December 2004 through February 2005 were reviewed. The logs indicated that no residents had been placed on room confinement. The Director reported the use of unit programming, in lieu of room confinement, in most instances. Unit programming consisted of placing a resident in the dayroom of a pod with access to his or her unlocked room. Residents on unit programming were isolated

from the general population but were allowed to move about the pod dayroom or the resident's room and were allowed to read, study, or play cards.

The Director indicated that the facility documented compliance with detention standards for room confinement standards when residents were locked in their rooms. Unit programming; however, was not documented. The Director reported that residents on unit programming were observed every fifteen minutes, were reviewed every three hours, and were returned to the general population when it could safely be done. Concerns with the use of unit programming are discussed below in the Conclusions section.

### Documentation Reviews

The case records were reviewed on two of the residents who were interviewed. Overall, the files were well organized and materials were easy to locate; however, in one of the files, the judicial order to detain did not include language authorizing medical care. Participation in daily recreational activities was not clear from the case record reviews. No other issues of concern were identified from the resident case record reviews.

The personnel files of two of the staff members were reviewed for compliance with detention certification standards. One of the files was complete for all of the items reviewed. The other file did not document pre-employment references or tuberculin testing, but was complete for all of the other items reviewed.

The Oklahoma State Department of Health's inspection report cited lime build-up on the outside of the ice machine and the floor under it.

The inspection by the Office of Environmental Health of the Oklahoma City Area Indian Health Service was conducted with a major emphasis on fire safety. The report made four recommendations, including training for maintenance personnel who handle hazardous materials, documentation of weekly inspections of the eyewash station, and storage of hazardous materials in a containment locker without storing incompatible materials together. The report identified that food was stored in the refrigerator in the medical evaluation area. It was unclear to the environmental surveyor whether the refrigerator was intended for food or for medication, but recommended that the unit be labeled for food only or for medication only.

The OJA Office of Public Integrity's (OPI) inspection report of April 20 and May 23, 2005, was reviewed subsequent to the OJSO visit. The OPI report listed eight findings. The findings included a change in the daily rate charged to other counties who contracted with the center that had not been authorized by the OJA, lime build-up on the ice machine noted above, a contradiction in whether or not the facility had escapes or escape attempts, and documentation of pre-employment physicals/tuberculin testing. The OPI findings also included the lack of training topics listed in the employee training records, inaccuracies in the utilization rates, and failure to list charges on the admission and discharge sheets from December 16, 2004, through April 20, 2005, on five of the

children admitted. The OPI report noted the facility's request to be licensed for the remainder of the facility's sixty beds that were not included in the OJA contract. The report cited a number of maintenance issues in five of the residential units that needed to be corrected in order to increase the number of licensed beds.

The agreement for educational services between the Stroud public schools and the facility provided for educational services to the residents for a nine-month school year, as indicated by the interview with the teacher. The contract included the teacher, materials, records, and teacher evaluation, in compliance with the Oklahoma State Department of Education and federal regulations.

The incident reports for December 2004 through February 2005 listed no suicides or attempted suicides. The Director reported one escape of a juvenile from the sally port prior to admission. The transporting deputy had not placed the juvenile in restraints.

Grievance records reflected twenty-nine grievances filed during the period of December 2004 through February 2005. All of them had been resolved or appealed within the appropriate time frames. One of the grievances had been appealed to the OJA Advocate General, but the response from the Advocate General had not been received.

#### Facility Tour

The facility appeared clean and well-maintained. Emergency procedures and equipment were in place. Medications and keys were secured. The documentation of dispensing of medication and key logs were current. Materials required to be posted were posted in areas accessible to the residents. The facility clothing policy was in place and reflected actual practices.

#### **Conclusions**

The OJSO team had significant concerns regarding the use of unit programming. While separating a resident from the general population to his or her dayroom appears to be more desirable than actual lockdown in room confinement for rule violations, there are concerns with the facility practices. The separation of a resident from the general population still constitutes a form of isolation or confinement that is regulated by detention certification standards.

Unit programming/unit confinement was not documented. Without documentation, it is impossible to determine if the use of unit confinement was the result of a major rule violation or if the confinement was made for the safety of the resident, the safety of others, or to ensure the security of the facility. Documentation is required to ensure that a juvenile is not held in room/unit confinement in excess of twenty-four hours without the opportunity of an administrative review by the administrator or designee who was not involved in the incident. Documentation is also needed to verify that the facility staff explained the reason for the restriction or confinement to the juvenile and gave the juvenile an opportunity to explain his or her behavior. Further, the detention standards

require that a written record be maintained on any juvenile placed in room restriction or confinement. The required documentation includes a log stating who authorized the action, names of persons observing the juvenile and times of observation, the person authorizing release, and the time of release.

On the day of the OJSO visit, the Sac and Fox Nation Juvenile Detention Center appeared to be secure, clean, and well-maintained. Administrative, direct care, and instructional staff appeared to have positive, helpful relationships with the residents.

## **Findings**

1. The order of detention in one file did not include language authorizing medical care [OJA policy OAC 377:3-13-40, (a), (16)].
2. The file of one staff member did not document three references or tuberculin testing, as required by detention standards [OJA policy OAC 377:3-13-43, (a), (7), (A), (iii) and OAC 377:3-13-43, (a), (5), (B)].
3. The facility used unit programming as an alternative to room confinement; however, unit confinement is still a form of isolation or separation from the general population and should be documented to ensure that the criteria is met and that the mandatory procedures are carried out [OJA policy OAC 377:3-13-44, (c), (13) and (14)].

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