

Room Confinement (Title 15, Section 1354.5)

626.1 PURPOSE:

To establish guidelines for removing youth from the regular programming in Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) pursuant to Welfare and Institution Code Section 208.3 and Title 15, Section 1354.5.

626.2 DEFINITIONS:

Room Confinement: The placement of a youth in a locked sleeping room or cell with minimal or no contact with persons other than correctional facility staff and attorneys. Room confinement does not include the confinement of a youth in a single-person room or a cell for brief periods of time for required institutional operations.

Self-Paced Participation: The youth's option and decision regarding the frequency and duration to participate in regular programming at their discretion.

626.3 GUIDELINES:

- A. In order to have the youth on room confinement rejoin the group in the shortest duration possible, staff may use refocusing options to gradually reintegrate the youth into regular programming with the goal.
- B. Room confinement does not apply during normal sleeping hours.
- C. Room confinement shall not be used before other less restrictive options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff.
- D. Youth may be placed on room confinement when they pose an immediate and substantial risk of harm to others, themselves or the security of the facility.
- E. The youth may be held in room confinement only for the minimum time required to address the risk.
- F. Consideration shall be given to the nature of the violation and the youth's cognitive ability so as to not create additional conflict or non-compliance.
- G. Room confinement shall not be used for the purposes of discipline, punishment, coercion, convenience, or retaliation by staff.
- H. While a youth is in room confinement, staff must provide the youth with meals and fluids in the room on the same schedule as other youth in the program. If there are safety concerns, the youth may be placed on paper spoon status.
- I. At the discretion of a shift supervisor, staff may allow the youth a supervised visit or phone call to help the youth regain self-control.
- J. Staff may collaborate with parents to assist the youth to regain self-control and reassess their goals.
- K. Room confinement does not apply to youth in court holding facilities or adult facilities.

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- L. Nothing in room confinement shall be construed to conflict with any law providing greater or additional protections to youth.
- M. Room confinement does not apply during extraordinary emergency circumstances that requires a significant departure from normal institutional operations, including natural disasters or facility-wide threat that poses an imminent and substantial risk of harm to multiple staff or youth. This exception shall apply for the shortest amount of time needed to address this imminent and substantial risk of harm.
- N. Room confinement does not apply when a youth is placed in a locked cell or sleeping room to treat and protect against the spread of a communicable disease for the shortest amount of time required to reduce the risk of infection, with the written approval of a licensed physician or nurse practitioner, when a youth is not required to be in an infirmary for an illness.
- O. Room confinement does not apply when a youth is placed in a locked cell or sleeping room for required extended care after medical treatment with the written approval of a licensed physician or nurse practitioner when a youth is not required to be in an infirmary for an illness.
- P. Youth will remain in room confinement until they are no longer a safety risk unless it compromises the mental and physical health of the youth.
- Q. Any staff member who observes or suspects the existence of behavioral issues/special needs may refer a youth to the MDT.

626.4 RESPONSIBILITIES:

- I. Probation Corrections Officers (PCO) shall:
 - A. When implementing room confinement:
 - 1. Consider other less-restrictive options unless doing so would compromise the safety and/or security of youth or staff.
 - 2. Identify the safety concern(s) demonstrated by the youth that justifies room confinement.
 - 3. Notify a PCSI immediately to obtain authorization for the room confinement.
 - (a) If a PCSI or their designee is unavailable to sign the Room Confinement Contract, document which PCSI/designee was notified and the time of notification on the Room Confinement Contract (Attachment A).
 - B. Begin to develop a Room Confinement Contract (Attachment A) within the first fifteen (15) minutes including the following:
 - 1. Include the objectives and goals the youth must meet in order to return to regular programming.
 - 2. Have the youth sign the Room Confinement Contract (Attachment A) acknowledging the objectives and goals.

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- (a) If the youth refuses to sign, write "refused to sign" on the signature line.
 3. Sign the Room Confinement Contract.
 - C. Conduct reviews every thirty (30) minutes.
 1. Counsel the youth and determine if the youth's behavior justifies continued room confinement, or determine if the youth meets the expected objectives and goals to return to regular programming.
 2. Document the reviews in CE and on the Room Confinement Contract (Attachment A).
 - D. Before removing a youth from room confinement, debrief the goals and objectives achieved during room confinement with the youth and identify what the expected behavior is while participating in regular programming before.
 - E. Document the date and time a youth returns to regular programming.
 - F. Collaborate with educational staff to ensure a school folder is offered to the youth.
 - G. For youth on self-paced participation:
 1. Document the reason the youth is requesting to stay or return to the room in Caseload Explorer (CE) and notify a Probation Corrections Supervisor I (PCSI).
 2. Encourage the youth rejoin the group and document in CE every thirty (30) minutes.
 3. Allow the youth to return to return to regular programming when requested.
 4. Shall refer youth to the Multi-Disciplinary Team (MDT) after 48 consecutive hours of non-participation in unit programming.
- II. Probation Corrections Supervisor I (PCSI):
- A. Determine if the behavior demonstrated by the youth is a safety and/or security concern that warrants room confinement.
 - B. If it is determined the youth is a safety concern, provide authorization for the use of room confinement within the first fifteen (15) minutes and sign the Room Confinement Contract (Attachment A) if available.
 - C. Notify the Watch Commander when room confinement is being implemented.
 - D. Assess and authorize, as applicable, the continued use of room confinement every two (2) hours and document the justification on the Room Confinement Contract (Attachment A) for the duration of the room confinement.
 - E. May authorize the use of room confinement up to four (4) hours.
 - F. Collect the completed original Room Confinement Contracts (Attachment A) from the units during their shift.
 1. Make one (1) copy of the contract and place in the youth's file.

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2. Scan the contract into CE and place the original in the Room Confinement Contract binder in the Watch Commander's office.
- G. When room confinement extends beyond four (4) hours:
 1. Notify the WC, FAST, and Medical Services.
- III. Watch Commander (WC)/Probation Corrections Supervisor II (PCSII):
 - A. At four (4) hours review and sign the Room Confinement Contract (Attachment A) and provide authorization for the use of continued room confinement up to eight (8) hours when appropriate.
 - B. When room confinement extends beyond four (4) hours:
 1. Assess the need for continued room confinement.
 2. Notify the Division Director and provide justification.
 3. Consult with FAST and Medical Services for evaluation to determine if room confinement is compromising the physical and/or mental health of the youth.
 - C. Maintain a room confinement binder with original room confinement contracts in the Watch Commander's office.
 - D. Obtain authorization from a Division Director/designee at eight (8) hours for room confinement and document who was notified on the Room Confinement Contract.
- IV. Forensic Adolescent Service Team (FAST):
 - A. If a youth is not returning to regular programming at four (4) hours of room confinement:
 1. FAST staff shall evaluate and document if room confinement compromises the mental health of the youth.
 2. Document the date and time of the evaluation on the Room Confinement Contract (Attachment A) and sign.
 3. Review the youth's health record to determine if any mental health contraindication or accommodations exist and document in the youth's health record.
 - (a) Notify the WC immediately if any contraindications/accommodations exists.
 - B. Complete a face-to-face evaluation every four (4) hours and document in the health record.
 1. Include significant mental health findings, clinician's name/signature, and the date and the time of review/evaluation.
- V. Correctional Nurse I/II:
 - A. If a youth is not returning to the regular programming at four (4) hours of room confinement:

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1. Medical staff shall evaluate and document if room confinement compromises the physical or mental health of the youth.
 2. Document the date and time of the evaluation on the Room Confinement Contract (Attachment A) and sign.
 3. Review the youth's health record to determine if any physical or mental health contraindication or accommodations exist and document in the youth's health record.
 - (a) Notify the WC immediately if any contraindications/accommodations exists.
- B. Complete a face-to-face evaluation of the youth every four (4) hours when room confinement is extended beyond four (4) hours and document in the youth's health record.
1. Include significant health findings, nurse's name/signature, and the date and the time of the contact.
- VI. Division Director II or designee:
- A. Assess the need for continued room confinement after the initial eight (8) hours and every four (4) thereafter and provide authorization as appropriate.