

Security Standards

Standard 8-5-1

- ▶ (a) **Written policy, procedure, and practice provide that there is sufficient space** for a twenty-four (24) hour control center for monitoring and coordinating the following facility systems:
 - (1) **Internal security system.**
 - (2) **External security system.**
 - (3) Communications **system.**
 - (4) Safety **alarms and detection** system.
 - (5) **Other mechanical and electrical systems.**
- ▶ (b) The control center provides staff access to a washbasin and toilet **or plans exist for staff to access a nearby washbasin and toilet.**
- ▶ Comment: An electronic communication system is not to be used as a substitute for staff supervision.
- ▶ Suggested document(s): Photograph of control center area; Facility floor plan; Facility or control center floor plan; Photograph of restroom

Standard 8-5-2

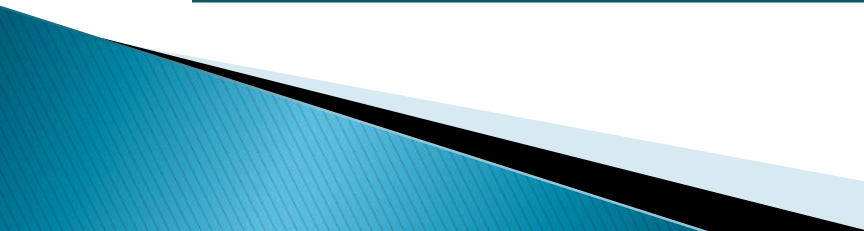
- ▶ (a) **Written policy, procedure, and practice provide that** the facility's perimeter is controlled by appropriate means to:
 - (1) **ensure** that juveniles remain within the perimeter; and
 - (2) prevent access by the general public without proper authorization.
- ▶ (b) **Pedestrians and vehicles enter and leave at designated points within the perimeter.**
- ▶ Comment: Perimeter security reflects the facility's needs based on size and the degree of security required. Perimeter surveillance can be maintained through mechanical surveillance devices (for example, electronic, pressure, or sound-detection systems), mobile patrols, or some combination of these techniques. All areas adjacent to the perimeter are visible under all conditions.
- ▶ Suggested document(s): Photographs of secure perimeter; Facility floor plans; Photographs of designated entry and exit points; Documentation of perimeter security

Standard 8-5-3

- ▶ (a) Written policy, procedure, and practice provide that there is a manual containing all **emergency preparedness policies and** procedures to **ensure** the facility's security, with detailed instructions for implementing these procedures. **Such situations may include, but are not limited to, the following:**
 - (1) **Severe weather.**
 - (2) **Natural disasters.**
 - (3) **Escapes.**
 - (4) **Riots.**
 - (5) **Hunger strikes.**
 - (6) **Disturbances.**
 - (7) **The taking of hostages.**
- ▶ (b) **The plan covers the following:**
 - (1) **The identification of key personnel and their specific responsibilities during an emergency or disaster situation.**
 - (2) **Mutual aid agreements with other agencies or departments.**
 - (3) **Transportation to predetermined evacuation sites.**
 - (4) **Notification to families.**
 - (5) **Any special arrangements necessary for youth with disabilities.**
 - (6) **Immediate release of youth from locked areas in case of an emergency, with clearly delineated responsibilities for unlocking doors.**
- ▶ (c) **All facility staff are trained in the implementation of the written emergency plans.**
- ▶ (d) The **emergency** manual is available to all staff, and staff is required to review the manual at least annually. The emergency manual is reviewed at least annually and updated, when necessary.
- ▶ (e) **A critical incident report shall be completed for all emergency response incidents.**

(f) This is a Mandatory Standard

Standard 8-5-3 Continued

- ▶ Comment 1: Centers should coordinate with emergency response procedures with other agencies housed in the same location, such as the courts or probation.
 - ▶ Comment 2: Emergency preparedness policies and procedures should support the emergency evacuation plans outlined in the fire evacuation policies, located in the Safety Section of these standards.
 - ▶ Comment 3: The manual contains information on physical plant inspection, juvenile counts, chemical agent control, contraband, key control, tool and equipment control, as well as emergency procedures. The plans should designate the personnel who are to implement the procedures; when and which authorities and media should be notified; how the problem should be contained; and the procedures to be followed after the incident is quelled.
 - ▶ Suggested document(s): Emergency Manual; Directors memo indicating locations of manual; Training records; Annual training agenda; Documentation of staff annual review; Incident report
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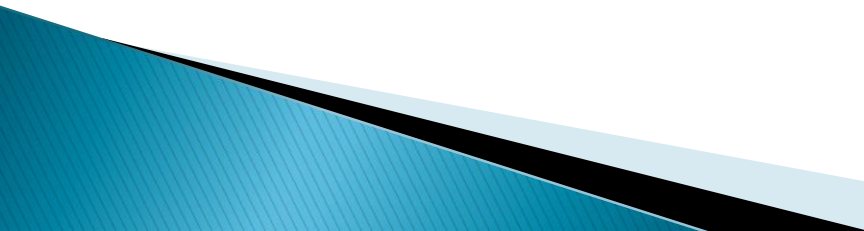
Standard 8-5-4

- ▶ Written policy, procedure, and practice provide that direct supervision staff is posted in or immediately adjacent to juvenile living quarters to permit staff to have personal contact and to observe, hear, and respond promptly.
- ▶ Comment: The presence of staff can help to prevent juvenile misbehavior and avoid disturbances.
- ▶ Suggested document(s): Floor plans of living units and their relationship to staff offices; Daily shift report

Standard 8-5-5

- ▶ (a) **Written policy, procedure, and practice provide that job descriptions** for each position in the facility.
- ▶ (b) There are written operational shift assignments **or post orders** that state the duties and responsibilities for each shift assignment and **post** in the facility.
- ▶ (c) The shift assignments and posts are reviewed at least annually and updated, **if necessary**.
- ▶ Comment: A written shift assignment or post order is prepared for each job at the facility and specifies what the job entails and the procedures to be followed to carry out the assignment. This written description provides for continuity in the event of personnel changes. The description is available to all employees.
- ▶ Suggested document(s): Written job descriptions for each position in the facility; Organizational chart; Daily shift report; Written shift/dorm assignments; Documentation of annual staff review

Standard 8-5-6

- ▶ Written policy, procedure, and practice provide that no juvenile or group of juveniles is given control or authority over other juveniles.
 - ▶ Comment: Although many programs use forms of group accountability, they clearly describe the difference between accountability and giving individual juveniles control over other juveniles.
 - ▶ Suggested document(s): Rule Book
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Standard 8-5-7

- ▶ Written policy, procedure, and practice provide that **detention staff on each housing unit, on each shift:**
- ▶ (1) **maintain** a permanent log; and
- ▶ (2) prepare shift reports that record:
 - (A) routine information;
 - (B) emergency situations; and
 - (C) unusual incidents.
- ▶ Comment: Adequate supervision of juveniles requires a formal written reporting system of detailed records of pertinent information regarding individual juveniles and groups of juveniles.
- ▶ Suggested document(s): Copy of dorm logs; Daily shift report; Copy of incident report; Unit log sheets from each shift

Standard 8-5-8

- ▶ Written policy, procedure, and practice **provide:**
- ▶ (1) supervisory level staff:
 - (A) conduct a daily inspection **of all areas of the facility**, including areas occupied by juveniles and **unoccupied areas; and**
 - (B) submit a daily written report to their supervisor; and
- ▶ (2) **the facility administrator, or designee, and a second intermediate-level or higher-level supervisory staff conduct and document visits to the facility's living areas at least weekly to:**
 - (A) **encourage informal contact with staff and juveniles;**
 - (B) **provide guidance to staff; and**
 - (C) **informally observe the living and working conditions.**
- ▶ Suggested document(s): Daily inspection report; Daily report to supervisor; Unit log sheets documenting weekly visits

Standard 8-5-9

- ▶ (a) Written policy, procedure, and practice provide that the facility has an accountability system for physically counting juveniles and maintains a daily population report on every juvenile in the facility. The daily population report includes the following information:
 - ▶ (1) Number of juveniles in the facility on a given day.
 - ▶ (2) Names of juveniles.
 - ▶ (3) Identifying numbers.
 - ▶ (4) Housing assignments.
 - ▶ (5) Date and type of admission.
 - ▶ (6) Number of releases.
 - ▶ (7) Number of accumulated days of stay per juvenile recorded.
- ▶ (b) The facility's formal count is taken and recorded daily at midnight.
- ▶ (c) There is at least one (1) census count or formal count taken per shift, each day.

Standard 8-5-9 Continued

- ▶ Comment: A “Formal Count” is defined as: a physical count of the juveniles taken daily by staff, at a designated time, at least once every 24 hour, where juveniles are counted at a specific location, such as in their assigned cell. A “Census Count” is defined as: an informal count made frequently by staff, at irregular intervals to ensure that all juveniles are present and in their assigned location. Counts are scheduled so that they do not conflict with activity programs and normal operating procedures. The staff member responsible for maintaining the master count record has up-to-the-minute information regarding all juvenile housing moves, work assignment changes, hospital admissions, and so forth. All juveniles in legal custody are accounted for in the master count and all temporary absences are explained in writing.
- ▶ Suggested document(s): Daily population report with the 7 required pieces of information for two consecutive days; Midnight count documentation for two consecutive days; Count documentation for two consecutive days

Standard 8-5-10

- ▶ Written policy, procedure, and practice provide that staff:
- ▶ (1) control and supervise all individual and group juvenile movements to and from:
 - (A) living units;
 - (B) programs;
 - (C) work assignments; and
 - (D) court; and
- ▶ (2) maintain a daily report on juvenile movement.
- ▶ Comment: Best Practice: Indicates there is as least a 1:8 ratio of unit staff to juveniles during the hours that youth are awake, and at least a 1:16 ratio of unit staff to juveniles during the hours that youth are asleep. At least 2 staff are on duty at all times in the facility.
- ▶ Suggested document(s): Unit log sheets tracking juvenile movement; Copy of control log

Standard 8-5-11

- ▶ (a) Written policy, procedure, and practice provide that there are guidelines to govern the transportation of juveniles:
 - (1) outside the facility;
 - (2) from one (1) jurisdiction to another; and
 - (3) to court.
- ▶ (b) Staff may use restraint equipment during transports to prevent injury or escape. Staff do not use belly belts or chains or leg restraints on pregnant girls. Staff do not handcuff youth together during transportation or restrain youth to the vehicle, other than a seatbelt.
- ▶ (c) The guidelines are available to all personnel involved in transporting juveniles.
- ▶ (d) Staff involved in transporting juveniles are required to be aware of and review the guidelines at least annually.

Standard 8-5-11 Continued

- ▶ Comment 1: Best Practice: Indicates that there is at least 2 staff involved in the transportation of juveniles.
- ▶ Comment 2: Transportation procedures should describe the process necessary to obtain authorization for exception to the guidelines for special transportation circumstances.
- ▶ Suggested document(s): Transportation logs; Transportation order/approval; Transportation guidelines; Photograph of restraint equipment; Training agenda; Documentation of the location of the guidelines for staff access; Documentation of staff annual review

Standard 8-5-12

- ▶ (a) Written policy, procedure, and practice provide a system to govern the control and distribution of all security equipment, including mechanical and chemical restraint equipment and supplies and radios.
- ▶ (b) Security equipment is stored in a secure but readily accessible location outside of the juvenile housing areas.
- ▶ (c) The accountability system provides for, but is not limited to, the following:
 - (1) Restraint equipment is stored and issued in a manner that its location can be easily determined upon immediate notice.
 - (2) A log is maintained to record each restraint device, including mechanical, chemical, and radios.
 - (3) A log is maintained to record the name of the employee possessing the equipment.
 - (4) The restraint logs are reviewed at least quarterly by a designated individual.
 - (5) Restraint equipment is maintained in operable conditions or is removed from the inventory.
 - (6) Corrective action is initiated, when necessary.

Standard 8-5-12 Continued

- ▶ Comment 1: When staff is permitted to use their own security equipment, this information is also included in the daily log.
- ▶
- ▶ Comment 2: A written or electronic record detailing who receives restraint equipment and the equipment they receive is necessary to establish responsibility and accountability for its use.
- ▶
- ▶ Suggested document(s): Facility floor plan; Photograph of control area; Photograph of shadow board feature; Inventory log; Restraint usage logs with daily inventory check-in and check-out records; Documentation of restraint log review for two consecutive quarters; Inspection records; Documentation of corrective action

Standard 8-5-13

- ▶ **Policy, procedure and practice prohibit the use of all types of electronic restraints, such as tasers or electric shocking devices, within the juvenile detention facility.**
- ▶ Suggested document(s): Employee manual

Standard 8-5-14

- ▶ (a) Written policy, procedure, and practice prohibit the use of mechanical restraints for punishment, discipline, or treatment.
- ▶ (b) Mechanical restraints may be used:
 - ▶ (1) when the juvenile is a danger to himself, herself, or others; or
 - ▶ (2) during de-escalation when other techniques were attempted and not successful.
- ▶ (c) Mechanical restraints may be applied only with the approval of the facility administrator or designee, and continued use must be reviewed by such staff every fifteen (15) minutes.
- ▶ (d) Staff must remove the mechanical restraints:
 - ▶ (1) at the earliest possible time;
 - ▶ (2) when the juvenile is no longer a danger to himself or herself or others; and
 - ▶ (3) no longer than two (2) hours after application of the restraints.

Standard 8-5-14 Continued

- ▶ Comment 1: Mechanical restraints are approved professionally manufactures mechanical devices to aid in the restraint of a person's bodily movement, such as metal handcuffs, leg shackles, and belly chain or belt.
- ▶ Comment 2: Instruments of restraint are only used as a precaution against escape during transfer; for medical reasons by the direction of the medical authority; to prevent injury to self or others; or to prevent property damage; and are not applied for more time than is absolutely necessary.
- ▶ Comment 3: In the event that re-application is necessary after the initial two hours, the facility administrator or designee should be notified and mental health staff should be notified for assessment and intervention as necessary.
- ▶ Suggested document(s): Incident report; Use of force report; Control logs; Documentation of approval; Documentation of continued use review; Documentation showing time of restraint application and time of restraint removal

Standard 8-5-15

- ▶ (a) Written policy, procedures, and practice provide the level of authority, access, and conditions required for the availability, control, and use of chemical agents and equipment. **The use of chemical agents, including pepper spray, tear gas, and mace, is prohibited, except by law enforcement or specifically trained staff in emergency situations.** Authorization from the facility administrator or designee shall be obtained prior to use of a chemical agents by staff.
- ▶ (b) The accountability system for chemical agents should include, at a minimum, the following:
 - (1) **Personnel using chemical agents to control juveniles submit written reports to the facility administrator or designee no later than the conclusion of the tour of duty.**
 - (2) **All persons contaminated in an incident involving the use of a chemical agent must receive an immediate decontamination, medical assessment, and treatment.**
 - (3) **Chemical agents and equipment related to its use are inventoried at least monthly to determine their condition and expiration dates.**
 - (4) **If chemical agents are issued as duty equipment and carried during the shift, canisters must be weighed at the time issued and when returned, as well as after each use, to account for the chemical agent.**
- ▶ (c) **A critical incident report shall be completed following all incidents involving the use of chemical agents.**
- ▶ (d) This is a mandatory standard

Standard 8-5-15 Continued

- ▶ Comment 1: The use of chemical agents is discouraged by the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) and by the Indiana Juvenile Detention Association (IJDA).
- ▶ Comment 2: Based on an analysis of the physical plant and the size and profile of the juvenile population, designated staff determines what chemical agents and other security devices the facility needs. Written policies and procedures specify the level of authority required for access to and use of security devices. All instances involving the use of force and/or chemical agents are documented to establish the identity of the personnel and juveniles involved and to describe the nature of the incident.
- ▶ Suggested document(s): Staff training records; Documentation of authorization obtained prior to use; Control logs; Written report of chemical agent use; Documentation of decontamination, medical assessment, and treatment; Inventory logs of chemical agents of two consecutive months; Inventory logs with pre and post-shift measurements

Standard 8-5-16

- ▶ (a) Written policies, procedures, and practice provide that if any type of four (4) or five (5) point restraints, with arms, head, and legs secured to a fixed object, is used with a juvenile, advance approval must be obtained from the facility administrator or designee.
- ▶ (b) Four (4) or five (5) point restraints must only be used as a behavioral health intervention of "last resort" and only when:
 - (1) the intervention is necessary to ensure the physical safety of the juvenile; and
 - (2) other less restrictive interventions have been tried and found to be ineffective; or
 - (3) a juvenile's resistance to less restrictive intervention is reasonably anticipated.
- ▶ (c) A juvenile should never be restrained face-down, hog-tied, or in a spread-eagle manner, and no restraint should be placed around the juvenile's neck.
- ▶ (d) Restraints may only be applied by staff trained in their use.

Standard 8-5-16 Continued

- ▶ (e) The health care authority or designee must be notified as soon as possible and no later than fifteen (15) minutes after restraint application to:
 - (1) assess the juvenile's medical and mental health condition; and
 - (2) advise whether the juvenile should be referred to a medical or mental health unit or facility for emergency treatment.

- ▶ (f) When a juvenile is restrained in a four (4) or five (5) point position, the following minimum procedures will be followed:
 - (1) Direct visual observations by staff must be continuous.
 - (2) Medical or health-trained staff must visually monitor the juvenile's condition, at least every fifteen (15) minutes.
 - (3) Restraint procedures are in accordance with guidelines approved by the designated health care authority and the mental health care authority.
 - (4) Four (4) or five (5) point restraint of a juvenile must be ended at the earliest possible time. If the restraint is necessary beyond one (1) hour, a medical therapeutic restraint order must be obtained from a qualified mental health professional.

- ▶ (g) A critical incident report shall be completed for all incidents involving a four (4) or five (5) point restraint of a juvenile.

- ▶ (h) This is a mandatory standard.

Standard 8-5-16 Continued

- ▶ Comment 1: Best Practice: Indicates that in the event that a four/five point restraint of a juvenile is necessary, that the incident be video/digitally recorded and reviewed by the facility administrator as soon after the event as possible. When possible, the use of 4/5 point restraint should be used or continued when ordered by a Mental Health Professional.
- ▶ Comment 2: Four/five point restraints, such as a restraint chair, are used only in extreme instances and only when other types of restraints have proven to be ineffective. Restraint guidelines should include consideration of an individual's physical condition, such as body weight.
- ▶ Suggested document(s): Documentation of advanced approval; Record of restraint usage with the reasons and methods employed prior to the use of restraint; Procedure; Restraint record with description of position; Restraint record; Training record of staff utilizing restraint; Documentation of notification; Documentation of mental health assessment and referral decision; Critical incident report

Standard 8-5-17

- ▶ (a) Written policy, procedure, and practice provide that the **use of physical force or physical restraint is not used as a means of punishment or reprisal toward a juvenile and includes the following:**
 - (1) **Staff uses the minimal degree of force necessary to maintain the custody, control, safety, and security of the facility, juvenile, or situation.**
 - (2) **The use of physical force is restricted to instances of:**
 - (A) **self-protection from imminent threat of harm;**
 - (B) **protection of others from imminent threat of harm;**
 - (C) **prevention of self-inflicted injury;**
 - (D) **protection of property; and**
 - (E) **prevention of escapes;**
 - **and then only the amount of force necessary to regain or maintain control and only as a last resort.**
 - (3) **Facility staff shall receive regular training in the areas of:**
 - (A) **conflict resolution;**
 - (B) **de-escalation; and**
 - (C) **crisis intervention;**
 - **to ensure staff has the necessary skills to reduce the need for the use of physical force.**
 - (4) **Facility staff receive regular training on the approved use of physical force techniques to ensure appropriate application.**

Standard 8-5-17 Continued

- (5) For all use of physical force incidents, on-duty staff shall ensure that health care staff is contacted as soon as possible so that the juvenile's physical and emotional condition can be assessed and any injuries treated. If health care staff is not on-duty at the time of the use of physical force, health-trained on-duty staff shall:
 - (A) contact the on-call health care staff as soon as possible following the use of force; and
 - (B) provide the health care staff with detailed information regarding any injuries or complaints by the juvenile.
 - (6) Health care staff shall assess the juvenile's injuries or complaints, or both, and determine whether the juvenile needs to be seen immediately or can be seen during the next scheduled sick-call. In the event that a juvenile is injured and contact cannot be made with health care staff, on-duty staff will follow established procedures to obtain necessary medical evaluation and treatment.
 - (7) A written report is prepared following all uses of physical force by each staff involved in the incident, prior to the end of the shift, and submitted to facility administrator for review.
- (b) This is a mandatory standard.

Standard 8-5-17 Continued

- ▶ Comment 1: De-escalation techniques should be used as the first level of intervention and use of physical force only used when other techniques are unsuccessful.
- ▶ Comment 2: Physical restraint is the professionally trained restraint techniques the use a person's physical exertion to completely or partially constrains another person's body movement without the use of mechanical or chemical restraints.
- ▶ Suggested document(s): Use of Force training curriculum; Staff training records showing required topics covered; Written report; Written report showing health care contacted after use of force; Documentation of health care assessment after use of force; Written report; Documentation of facility administrator review

Standard 8-5-18

- ▶ (a) All **significant** incidents, including, but not limited to, the **nonroutine** use of restraint equipment and the use of physical force, are reported in writing **prior to the end of the shift**, dated, and signed by the staff person reporting the incident.
- ▶ (b) **A copy of** the report is placed in the juvenile's case record and is reviewed by the facility administrator, **or designee**, and the parent agency on **the next business day**.
- ▶ Comment: A written record of such incidents is available for administrative review. These reports also can be used to assess training needs; in counseling of staff about the proper handling of serious behavior incidents; and in providing information for the parent agency. The report includes the actions taken by the person in charge at the time of the incident.
- ▶ Suggested document(s): Written report that is dated and signed; Distribution list of written report; Documentation of review; Copy of youth file

Standard 8-5-19

- ▶ (a) Written policy, procedures, and practice provide for searches of:
 - (1) juveniles;
 - (2) the facility; and
 - (3) visitors;

in accordance with applicable law to control contraband and provide for its disposition.

- ▶ (b) The facility posts search policies at the facility's:
 - (1) entrance;
 - (2) intake or admissions area; and
 - (3) visiting areas.

- ▶ (c) The procedures are made available to staff and juveniles. Staff is required to be knowledgeable of the procedures and review procedures at least annually. The procedures are reviewed annually and updated, if necessary.

8-5- 19 Continued

- ▶ Comment: The facility's search plans and procedures may include, but are not limited to, the following:
 - 1. Unannounced and irregularly timed searches of juveniles, rooms, and juvenile work areas
 - 2. Inspection of all vehicular traffic and supplies coming into the facility
 - 3. Use of metal detectors at gates and at entrances into housing units
 - 4. Complete search and inspection of each room prior to occupancy by a new juvenile
 - 5. Avoidance of unnecessary force, embarrassment, or indignity to the juvenile
 - 6. Staff training in effective search and other techniques instead of body searches, whenever feasible
 - 7. Conduct of searches only as necessary to control contraband or to recover missing or stolen property

- ▶ Suggested document(s): Facility search plan; Photograph of postings in required areas; Documentation of procedures being distributed to staff and juveniles; Documentation of staff annual review; Documentation of annual review

Standard 8-5-20

- ▶ (a) Written policy, procedure, and practice **provide** that strip searches and visual inspection of juvenile private body cavities be conducted on a reasonable belief that the juvenile is carrying contraband or other prohibited material.
- ▶ (b) **Strip searches must be conducted by trained personnel of the same gender as the person being searched.**
- ▶ (c) **Staff shall conduct strip searches and visual body cavity searches with youth individually and in a private setting.**
- ▶ Comment: Best Practice: Indicates that strip searches and visual inspections of juvenile private body cavities be conducted by 2 staff of the same gender as the person being searched. If both staff are not of the same gender, the same gender staff will perform the search/visual inspection and the other gender staff will remain nearby, in hearing range of the search/visual inspection. A strip search is inclusive of the oral cavity.
- ▶ Suggested document(s): Inspection report; Training record of staff named in the inspection report; Copy of intake description form

Standard 8-5-21

- ▶ (a) Written policy, procedure, and practice **provide** that manual or instrument inspection of body cavities **be** conducted only when there is:
 - **(1) a risk to the security of the facility; and**
 - **(2) a reasonable belief that the juvenile is carrying contraband or other prohibited material.**
- ▶ (b) **The facility administrator and designated health care authority should be notified prior to a body cavity search, when possible, or as soon as possible following the search.**
- ▶ (c) **Only a health care practitioner may conduct physical body cavity searches (i.e., searches involving physical intrusion into a body cavity for the purpose of discovering a concealed object). Any body cavity inspection is completed in private.**
- ▶ (d) **If the health care practitioner is not of the same gender as the juvenile, a facility staff member of the same gender must be present.**
- ▶ (e) **Staff shall notify parents or guardians if a youth is subjected to a physical cavity search.**
- ▶ Comment: It is recommended that observations and/or x-ray be obtained in lieu of a manual or instrument inspection.
- ▶ Suggested document(s): Investigation report; Health record entry; Body Cavity Search Report; Documentation of contact with guardian

Standard 8-5-22

- ▶ Written policies, procedures, and practice provide that physical evidence obtained in connection with a violation of law is preserved and controlled until law enforcement is available to take control of the item or items. Minor rule violations are exempt. The written policies, procedures, and practices address the following:
 - (1) Chain of custody.
 - (2) Evidence handling.
 - (3) Location and storage requirements.
 - (4) Disposal of evidence not transferred to law enforcement.
- ▶ Comment: Strict accountability of physical evidence collected in connection with a crime must be established to preserve the integrity of the disciplinary and/or legal process. Minor rule violations are exempt from the procedural requirements of evidence control, preservation, and disposition.
- ▶ Suggested document(s): Incident report; Evidence storage inventory log; Photograph of evidence storage space; Copy of chain of custody form

Standard 8-5-23

- ▶ (a) Written policy, procedure, and practice **provide** a system to govern the control and use of keys.

- ▶ (b) **There is an accountability system that provides for, but is not limited to, the following:**
 - (1) **Keys are issued from a central location.**
 - (2) **Keys are stored so that their presence or absence can be easily determined.**
 - (3) **A log is maintained to record the following:**
 - (A) **The number of each key.**
 - (B) **The location of the lock.**
 - (C) **The number of keys to that lock.**
 - (D) **The names of all employees possessing the key.**
 - (4) **Emergency keys are checked at least quarterly to make sure that they function properly.**
 - (5) **Fire and emergency keys shall be labeled for easy identification of what door or doors each key opens.**

- ▶ (c) This is a mandatory standard.

- ▶ Comment: The facility may use a “pass-on” key process in various units/department where staff logs the transfer of the keys from one person to another. The facility maintains at least one duplicate key for each lock. Juveniles do not possess keys other than those to living quarters or work assignments, when appropriate.

- ▶ Suggested document(s): Facility floor plan; Photograph of key storage area; Key inventory log; Key review records for two consecutive quarters; Photograph of key labeling; Emergency key audit

Standard 8-5-24

- ▶ (a) Written policy, procedure, and practice provide a system to govern the control and use of tools, **including** culinary and medical equipment. **Provisions are made for checking tools and utensils in and out based on their level of risk. Provisions are also in place to control their use at all times.**
- ▶ (b) This is a mandatory standard.
- ▶ Suggested document(s): Inventory and usage logs for tools, culinary, and medical equipment

Standard 8-5-25

- ▶ (a) Written policy, procedure, and practice provide a system that governs the use and security of facility vehicles. **The distribution of keys and the responsibility for certain vehicles may be assigned to different staff, but one (1) person is responsible for the vehicle motor pool.**
- ▶ (b) **Facility vehicles are issued only to licensed drivers and are subject to the following requirements:**
 - (1) **Safety inspections are conducted at least annually by qualified individuals.**
 - (2) **Routine maintenance is conducted according to an established schedule.**
 - (3) **Mechanical and safety defects are promptly reported and repaired.**
 - (4) **Facility staff understands and are familiar with the circumstances under which they may use personal vehicles for official use and the associated liability requirements.**
- ▶ Comment: Written policies and procedures state the condition under which juveniles may drive vehicles; facility maintenance may perform safety inspections.
- ▶ Suggested document(s): Written job description for staff member overseeing the motor pool; Organizational chart; Vehicle log; Copies of drivers' licenses; Safety inspection; Credentials of qualified individual; Vehicle maintenance schedule; Vehicle maintenance records; Staff training or policy acknowledgement

Standard 8-5-26

- ▶ **Written policy, procedure, and practice provide that** service personnel, other than facility staff, perform work in the facility only under direct and continuous supervision of facility staff in those areas permitting contact with juveniles.
- ▶ Comment: To preclude passage of contraband and to avoid any unnecessary contact of juveniles with outsiders, no repair or service personnel or vendors should function in juvenile detention facilities unsupervised.
- ▶ Suggested document(s): Unit log sheet; Control logs

Standard 8-5-27

- ▶ Written policy, procedure, and practice provide that firearms are not permitted in the facility except:
 - (1) in emergency situations; and
 - (2) **only by law enforcement.**
- ▶ Comment 1: Best Practice: Indicates that specifically designed weapon lockboxes are available in sally port areas, for the purpose of securing weapons.
- ▶ Comment 2: No person, including law enforcement personnel, is in routine possession of firearms within the confines of a facility. A system for the temporary safe storage (or checking) of such equipment is required.
- ▶ Suggested document(s): Photograph of firearm storage container or safe

Standard 8-5-28

- ▶ (a) Written policy, procedure, and practice provide that the facility administrator defines "critical incidents" in writing and that a documented debriefing is conducted after such incidents. The debriefing process includes coordination and feedback about the incident with designated staff and the juvenile or juveniles involved in the incident and occurs as soon as possible after the incident. Staff notifies the parents of critical incidents no later than the next business day.
- ▶ (b) The debriefing includes, but is not limited to, the following:
 - (1) A review of staff and juveniles' actions during the incident.
 - (2) A review of the incident's impact on staff and juveniles.
 - (3) A review of corrective actions taken and still needed.
 - (4) A review of available video/digital recordings of the incident.
 - (5) Plans for improvement to avoid similar incidents.
- ▶ (c) All related documents and recordings of critical incidents will be preserved for an established period of time.
- ▶ (d) The department's division of youth services shall be:
 - (1) notified regarding all critical incidents; and
 - (2) provided a copy of the critical incident report and debriefing report

Standard 8-5-28 Continued

- ▶ Comment 1: A “critical incident” is any event or situation that seriously disrupts the routine operation of the facility, such as escape; serious injury to a visitor, or staff; serious injury to a juvenile, which is also reported to Child Protective Services; death; sexual misconduct; fire; riot; natural disaster; or serious criminal act. While debriefings should occur as soon as possible, some information may not be available until later. All staff impacted by a critical incident should be included in the debriefings and referred to appropriate services to mitigate the stress associated with the events. All critical incidents should be reviewed by the administration, security, and health services. A two week follow up debriefing should occur to review the validity and appropriateness of all policies, plans, and information used during the critical incident and immediately after.
- ▶ Comment 2: The Indiana Department of Correction is the state agency responsible of inspecting detention facilities for compliance with the state detention standards and shall be notified on all critical incidents.
- ▶ Suggested document(s): Documentation of parent notification; Minutes of debriefing sessions; Procedure establishing the period of time; Critical incident report within the established period of time