



**SANTA CLARA COUNTY  
JUVENILE JUSTICE COMMISSION  
INSPECTION REPORT**

**JUVENILE HALL**

**April 2016**

**I. INTRODUCTION**

The Santa Clara Juvenile Justice Commission (JJC) is established in Division 2, Part 2, Chapter 2, Article 2, of the California State Welfare and Institutions, (W& I) Code. One of the charges of the JJC is...“(T)o inquire into the administration of justice in a broad sense, including but not limited to, operations of the Juvenile Court, Probation Department, Social Services Agency and any other agencies involved with juvenile justice or dependency.” (See W&I Code 229 and Bylaws of the Juvenile Justice Commission of Santa Clara County). The JJC conducted its annual inspection of the Santa Clara County Juvenile Hall (JH) from January 2016 through March 2016, in accordance with Welfare and Institutions Code Section 229 and Title 15 of the California Code of Regulation, Minimum Standards for Juvenile Facilities.

The JJC conducts inspections of Juvenile Hall at least annually, and inspection reports for prior years are available online at: [http://www.scsccourt.org/court\\_divisions/juvenile/jjc/jjc\\_home.shtml](http://www.scsccourt.org/court_divisions/juvenile/jjc/jjc_home.shtml)

The annual inspection found the Probation Department continues to maintain an orderly and safe custodial placement for youth awaiting court, serving court-ordered Juvenile Hall time, or awaiting transition to placement, while bringing together services for the youth and their families during and after incarceration.

Members of the JJC inspection team conducted interviews with the managers from Juvenile Hall, Medical Services, Behavioral Health (including Mental Health and Alcohol & Drug Services), Facilities Management, the Chaplaincy, Quality Assurance and the Osborne School to obtain an overview of policies, procedures, and programs. The inspection team held informal interviews and conversations with youth, living unit staff members, school staff and medical personnel.

The physical facilities were toured, including the kitchen, food supply storage areas and cafeteria.

**II. POPULATION**

Many factors affect the population of Juvenile Hall. Two of these are juvenile arrests and county population. There are currently seven units open in the facility. The facility is well within its Board Rated Capacity (BRC) of 390 youth, and there is no indication of overcrowding. According to statistics provided by the Probation Department, there were 90 youth in custody as of March 31, 2016. Of this number the following were:

**Table: Population**

<b>Metric</b>	<b>Demographic</b>
81	male
9	female
0	awaiting placement
4	on the waitlist for William F. James Ranch
9 or 10%	Black
9 or 10%	Caucasian
66 or 73%	Hispanic
3 or 3%	Asian
3 or 3%	categorized as "Other"

The JJC believes the continued reduction (33 percent for the last two years) in the overall number of youth in Juvenile Hall is due to the efforts of probation staff, elected officials, outside partners and consultants, and the court in their continuing successful efforts to foster alternative placements and to divert youth from Juvenile Hall.

However, in spite of more than decade long effort of systems changes, programs and reforms, youth of color remain over represented in the juvenile justice system in Santa Clara County. Data reveals that minority youth (especially African American and Latino youth) in the county enter Juvenile Hall, juvenile probation, secure detention facilities, and the courts at rates five and two times higher than their percentage of the total population, respectively.

### **III. STAFFING**

The current Juvenile Hall staffing includes the following budgeted positions: 186 of which two group counselors positions are currently vacant; 18 supervising group counselors with no vacancies; three probation managers and one deputy chief also with no vacancies. There are 19 extra help group counselors and 15 extra help core trained.

Shift-relief staff (those not assigned to a specific unit) is used to cover assignments for vacant positions. Shift relief staff may be assigned to work in units where vacancies exist; however, they must be assigned within their regularly assigned shift. Staffing shortages are managed via the use of the shift-relief method followed by the use of extra help staff and finally the use of overtime.

## **IV. FACILITY**

Commissioners toured the facility, including living units, grounds and exercise areas. Juvenile Hall was constructed in 1966. The facility has undergone several remodels, first in 1989, then in the 1990s when the Alpha Wing was added, and in 2005, when the Beta Wing was constructed.

As part of the inspection process, commissioners reviewed the inspection reports for 2015, which included the Santa Clara Public Health Department and Board of State and Community Corrections, which found the facility in compliance with Title 15 requirements. There were no reports provided to the JJC from the Santa Clara County Fire Marshall or the Santa Clara County Fleet and Facilities, which are required yearly. The commission, therefore, was unable to assess the state of fire prevention or determine if there were any structural issues at the Juvenile Hall.

The Juvenile Hall has been undergoing a beautification process over the last few years ranging from the re-painting of living units, hallways and parts of the medical facility. The population decrease over the last few years has resulted in the closure and the restructure of some of the living units.

The inspection found the boys and girls living units to be clean and well-maintained with the exception of the graffiti on the doors to the individual living units. This has been a constant issue and the Juvenile Hall has worked to eliminate the problem. The population decrease at Juvenile Hall has closed a number of units; there are currently seven living units being utilized.

### **Gymnasium and Grounds**

Commissioners toured the gymnasium and outside grounds. The gymnasium is maintained very well, but the roof has developed multiple leaks that remain unresolved as of our inspection. We were not provided any completion date regarding this problem. As part of the Juvenile Hall beautification process, the lawn had been reseeded and the remaining grounds have undergone landscape improvement for the last two years which has greatly improved the appearance of the facility. Youth will be able to enjoy the outdoor activities in the area including the development of a vegetable garden that has been a dormant project for some years.

### **Control Area**

Cameras in all living units, hallways and grounds are constantly monitored by the Control Desk. As the JJC has been reporting in four previous annual inspection reports, the cameras and equipment are at least a decade old and are not totally reliable. The layout of the Control Room has been “cobbled together” to allow staff to monitor living area and hallway activities. The air conditioning continues to be totally inadequate which means that room temperature is 4 to 5 degrees higher than the rest of the facility and very uncomfortable for the employees who work in the room. The commission has made numerous previous recommendations to allocate funds to improve this vital function, which have received agreement and support from the Probation Department and assurances that funds would be made available to address the issue. However, county administrative processes have slowed the progress and as of the date of this report there is nothing in place to solve this ongoing issue.

### **Food Service and Kitchen**

The inspection team toured the kitchen and dining area of the facility on January 20, 2016. The team met with the food program manager and supervisor. At the time of the inspection, the facility appeared as it had in previous years: functioning, but outdated and in need of remodeling. The team found that the prep areas were clean and organized. Storage temperatures were up to standard and these units were clean and well-kept. The team was informed that the facility was to undergo remodeling within three weeks. Some changes have been made to accommodate the upcoming construction plans, including shifts towards more transportable foods and the use of disposable trays and bowls. The youth will temporarily dine in their units during the time of the remodeling.

On February 23, 2016, the inspection team conducted a follow-up inspection at the temporary facility from which food will be prepared during construction (about 6 months). The team found that the facility, though smaller, was clean and well-functioning. It appeared as though the staff had made a smooth transition and has been making good use of the smaller facility. The kitchen staff prepare meals that are placed on disposable trays. These trays are then stacked into heat-preserving transport containers and brought to the facility where they are distributed to the various units. Overall there were no issues with food transport.

## **V. YOUTH ADMISSIONS**

Commissioners toured the admissions and intake area of Juvenile Hall and reviewed the processes that are used during the admissions and intake process. The Juvenile Hall staff reported that there have been no significant changes to processes in the last year. Based on our review, and that fact that there have been no significant changes, our review and last year's inspection report, it was concluded that the process conforms to Title 15 standards.

Police Admissions is the point of entry for all detained youth brought to the facility. The youth are photographed, and interviewed as the intake and screening staff initiated the admissions paperwork. Staff is called to examine and clear all youth if the intake staff notes signs of injury or the youth appears to be under the influence. If necessary, the youth will be transported by the arresting police agency to Valley Medical Center for treatment before being returned for admission to Juvenile Hall.

To be in compliance with the Federal Prison Rape Elimination Act of 2003 (PREA), one change made to the admissions process in the last year is that now all youth receive a brochure and verbal description of the law. This includes the Juvenile Hall "no tolerance" policy regarding sexual abuse and sexual harassment, as well as what to do if faced with abuse and harassment. All written information is provided in English, Spanish, and Vietnamese. Youth sign an acknowledgement form specific to PREA, which must be completed whether a youth is admitted or released. The information is repeated once a youth is assigned to a living unit where the youth also view a PREA video. Several of the JJC commissioners reviewed this video.

### **Classification**

The classification process has not changed since the previous year. Youth are referred to a screening probation officer to determine if they will be admitted to Juvenile Hall or cited and released to a parent(s) or guardian(s). To assist in this determination, the screener uses a Risk Assessment Instrument (RAI). The RAI is a list of factors: the current charges, criminal history, a

youth's age and maturity, family stability, community ties, and any mitigating factors. These factors are assigned points to assess risk to self, others and the community if a youth is released. The screening officer has the authority to override the RAI score to admit or release.

If the decision is made to detain a youth, the screening probation officer returns the youth to the admissions counselor who determines the youth's classification and housing unit placement based on several factors, such as age and severity of offense. All procedures are in compliance with the requirements of Title 15. The youth's medical and mental health history may assist in the unit placement decision. Notice will be given to the appropriate staff if the youth is a suicide or escape risk or exhibits combative behavior. The majority of male youth are initially placed in the Assessment and Orientation unit (A&O) and then reassigned to general living units after a week. Since so few girls are admitted to Juvenile Hall, they are directly assigned to the girls living unit.

### **Orientation**

The orientation process has not changed since the last inspection and meets the Title 15 requirements. Printed materials and an orientation video in English, Spanish and Vietnamese are provided, which explain Juvenile Hall rules and regulations, the youth's rights and the grievance and appeal process. The PREA orientation is also provided to the youth at this time.

All youth receive a medical/dental and mental health assessment upon admission to the units. The male youth assigned to A&O will receive presentations from the chaplain, food services and education, and be given information about various programs available in Juvenile Hall. The newly admitted female youth will either meet as a group or one-on-one to receive this same information.

## **VI. PROGRAMS**

Juvenile Hall Programs are all planned and monitored by a committee of counselors who plan all the daily, weekly, monthly and special occasion events. The program committee is overseen by a supervising group counselor.

### **Multi-Agency Assessment Center (MAAC)**

MAAC assesses youth who are in custody beyond 72 hours. The MAAC counselor assesses each youth for program needs so that the appropriate referrals may be made to the contracted Community Based Organizations (CBOs). The MAAC provides services to assist youth with their social reintegration into their programs to address their social, physical, behavioral, psychological, and emotional needs while in Juvenile Hall. Federal Juvenile Justice Crime Prevention Act (JJCPA) funding supports the contracts with CBOs, one supervising group counselor, and two group counselors. One group counselor oversees the assessment services and CBOs referrals to the programs in Juvenile Hall. A second counselor assigned to the unit, but not funded by JJCPA, works with the volunteers and program providers in Juvenile Hall.

### **PREA Assessment**

A new assessment tool, the PREA Vulnerability Assessment has been implemented in Juvenile Hall to comply with PREA. This law requires an eight-hour training of all probation and administrative staff. All volunteers and contracted service providers require a two-hour training course. The youth in Juvenile Hall receive an initial orientation during the intake process with regards to "zero

tolerance” for sexual harassment while in custody. The youth also view a video and receive brochures on sexual harassment and inappropriate sexual contact once they are admitted into their housing units. A process also has been put into place to enable a youth to confidentially report any sexual harassment or inappropriate contact by staff or other youth while living in Juvenile Hall. Youth are allowed to use a confidential phone in the medical clinic which directly dials to the YWCA Rape Crisis Hotline. Almost all staff has been trained. Posters are up in the units giving directions on the reporting of abuse. As a result of these services, youth have responded by fewer behavior incidents in all of the units. All new admits receive a PREA workshop which is held every Wednesday from 1:30 to 2:30 p.m. The workshops are facilitated by staff from the YWCA Rape Crisis Center.

### **Community Based Organizations (CBOs)**

CBOs provide interactive, bi-weekly workshops for youth in Juvenile Hall. The organizations are usually present five days per week and provide workshops from 3:30 to 5:00 p.m. Starting at 5:00 p.m., they are then be available for one-on-one individual counseling sessions in 15-minute increments. CBOs are scheduled to provide services in different units on different days. The CBOs invoice the Probation Department for their counseling services.

The programs offered by the CBOs are focused on improving outcomes for justice-involved youth. However, the Probation Department is just beginning to assess these programs for effectiveness. The commission recommends that the Juvenile Hall Quality Assurance Team expand their efficacy evaluation methods to include the CBO programs. CBOs working in Juvenile Hall, include:

- **Asian American Recovery Services (AARS):** This agency provides individual counseling, referrals, anger-management modules, aftercare services and substance-abuse prevention education. AARS is the only program offered at JH with staff currently trained to use the best practices model: Seven Challenges. The goal is to offer this program throughout the county.
- **Fresh Lifelines for Youth (FLY):** This program provides legal education, mentoring and leadership programs to support youth in all units to become responsible citizens.
- **California Youth Outreach (CYO):** This program provides workshops that help youth with anger management, suggests alternatives to gang involvement, develops life skills, etc. CYO also works with the County’s Restorative Justice Program. Currently this is offered in four units.
- **Family and Children’s Services (FCS):** This provider focuses on crisis intervention, therapy needs and dating violence.
- **Catholic Charities:** This provider works with families and youth who have been impacted by incarceration. Services include case management, gang violence prevention, food pantry, clothes closet, youth groups, school advocacy, placement services, and other daily needs support.

### **Volunteer Programs at Juvenile Hall**

A variety of programs are provided in Juvenile Hall by community volunteers or other programs. These include: Alcoholics Anonymous, Al-Ateen/Al-Anon, Catalyst for Youth (providing arts, gardening, fashion and design activities), choir, The Beat Within (writings and artwork by the youth), Freedom Readers, Catalyst Art, Flower Programs, Furry Friends, Aztec Dance, Girl Scouts,

hair care, The Art of Yoga, Chess King Corporation, Narcotics Anonymous, Planned Parenthood, Bible study, Positive Pathways (focusing with the female population on sexual victimization), Akoma Arts Drumming, and Reading Enrichment.

### **Juvenile Hall Special Programs**

Juvenile Hall has a wide variety of special programming offered throughout the year, including activities like: Hot August Nights Car Show, Fourth of July Decorating Contest, December Holiday Decorating Contest, Santa Claus visits, Black History Month, Cinco de Mayo, and a pizza night provided by the Public Defender's Office and Alternate Defender's Office.

### **Valley Medical Center**

The VMC nursing staff provides health-related classes as its staff members and nursing interns are available. Classes include: Asthma Management, Sleep and Health Realization, Dangers of Methamphetamines and Pot, Sexually Transmitted Diseases, Diabetes, Self-Esteem Building, Dental Health, Pregnancy in Teens, and Girls' Talk.

### **Monthly Calendar**

Each month a calendar is prepared that lists all the above programs with assigned units, which demonstrates the wealth of programming opportunities available in Juvenile Hall. The commission commends the staff for continuing to offer such an array of programs even with the decrease in population.

### **Justice-Engaged Youth Education Partnership**

The partnership between the Santa Clara Office of Education, San Jose Unified School District, and East Side Union School District allows for school districts to track which of their students are detained in JH. School social workers are stationed in Juvenile Hall's MAAC two days a week to quickly facilitate school re-enrollment within 72 hours of a youth being released from JH.

### **Animal Assisted Activity**

This program includes visits by certified, trained canines and their volunteer dog handlers. The project is provided in the Juvenile Hall security units. Participating youth benefit from the eight-week program consisting of 90-minute sessions in which they enjoy interaction with the animals. The program is data driven and examines the effects of youths' well-being such as, empathy, love, and joy. Comparisons are made to the effects of negative emotions such as, anger, hostility, and depression.

### **Juvenile Hall Garden**

In February, 2016, the Probation Department, in partnership with volunteer groups Veggilution and Master Gardeners of Santa Clara County, resurrected a dormant and overgrown garden area at Juvenile Hall by planting a variety of vegetables. The youth from B1 and B3 are tending the garden with assistance and advice from the volunteers. In late March, the garden's first fruits were harvested and eagerly consumed by the youth gardeners.

### **Probation Terminated on Release (PTOR) Reentry Program**

On January 22, 2016, commissioners met with the manager and senior group counselor responsible

for the PTOR Reentry Program. This new program was begun in early 2015, when a JH supervisor and senior group counselor identified the need to provide services to youth who were being dismissed from probation on their release.

The goal of this program is to provide youth, who will be dismissed from probation when they are released, with a plan and services to help them succeed in the community. This begins while the youth is in Juvenile Hall. The senior group counselor, whom is responsible for the program, meets with the youth as soon as the court orders PTOR. He or she asks youth, “What it is they want/need to succeed on release?” The focus is on what is working or not working for the youth. Short-term goals and personal/professional interests are reviewed. Youth are informed that services are voluntary and it is up to them if they choose to participate in the program.

- **Identification.** It takes approximately 30 days to gather all the documents the youth is going to need. The Probation Department gathers the birth certificate, social security card, immunization records, California Drivers Licenses/Identification Cards, and school transcripts. If there are outstanding DMV issues, the youth is taken to traffic court to try and get them resolved or fines/fees reduced. As persons are often asked for two photo ID’s, the Probation Department also provides an ID which is valid for 6 months.
- **Multi-Disciplinary Team meeting (MDT).** If a youth does wish to engage in the services, a MDT is arranged with the youth’s parents, the City of San Jose, the County Office of Education (COE), Behavior Health Department, JH counselor, probation officer, and any CBO or individual whom the youth wants to invite and who will be part of the release plan. During this meeting, the needs of the youth are reviewed and each participant leaves the meeting with follow-up tasks. If a City of San Jose or CBO mentor is assigned, they will begin meeting with the youth while they are still in JH.
- **Job readiness.** Before release, the youth will receive help writing a resume and doing mock interviews. Twenty copies of their resume will be included in their release binder. Clothing that’s appropriate for job interviews is also provided. The binder will include an education plan and transcripts, or work plan, along with bus passes/tokens, information about future medical appointments, and a Resource Guide. COE also includes school supplies.
- **Medical and housing support.** Before release, the youth is provided with medications and referrals for appointments as necessary. If the youth is homeless, he or she can arrange for a Post Office Box affiliated with a downtown church. A new feature of the program is the ability for the counselor to see the youth once they are released from JH, facilitating the youth getting to necessary appointments or providing for or arranging other services.

The PTOR Reentry Program is also beginning to track post-release recidivism results, although due to the short time the program has been in effect, no results are available.

## **VII. BEHAVIOR MANAGEMENT**

Three principal goals dictate the best-practices model for the current behavior management schema in Juvenile Hall:

1. Improve the behavior of youth in JH through relationships with staff.
2. Increase safety for both staff and youth.
3. Promote prosocial behavior of youth



Title 15 requires that the Juvenile Hall administrator develop written policies and procedures for the discipline of youth that shall promote acceptable behavior. Such discipline shall be imposed at the least restrictive level, which promotes the desired behavior and shall not include corporal punishment, group punishment, physical or psychological degradation, or deprivation of specified basic needs and rights.

Title 15 also requires that the written policies and procedures for the administration of discipline shall include, among other things, provisions for handling youth rule violations informally with counseling or imposition of a youth penalty or segregation for a period not to exceed 24 hours. Discipline is to be accompanied by written documentation, and a policy review and appeal to a supervisor. Major rule violations, including any violation that results in segregation for 24 hours or more, or extension of time already in custody, shall be documented and include the following:

- Written notice of violation prior to a hearing.
- Hearing by a person who is not a party to the incident.
- Provision for the youth to be heard, and to present evidence and testimony.
- Provision for an administrative review.

### **Behavior Modification Programs**

Currently in Juvenile Hall there are four-tier, or level, programs utilized to moderate youth behavior. They focus on providing privileges for positive behaviors and restrictions for unacceptable behaviors. They include:

- A generalized **Tier Program** where youth are categorized on a level system with specific privileges attached to each level. This program is offered in unit B5 only.
- The **STAR Program** is used within the two security units now B1 and B3. The STAR Program consists of a four-level behavior modification system:
  - Level 1. Specialized Program:** Youth who have received no sanctions are eligible for this level. This level allows for the most privileges, but only permits a maximum of six youth per unit to be so classified at any time.
  - Level 2. Transitions Program:** Youth who have received no more than two youth sanctions within a seven-day period may remain at this level.
  - Level 3. Addjustment Program:** This is the starting level for all new admits. Youth who receive no more than two youth sanctions within a seven-day period may be promoted to the Transitions Program level. However, youth who receive more than three minor and/or two major sanctions within a seven day period will be demoted to the Re-Focus Program level.
  - Level 4. Re-Focus Program:** This is the tier for youth who are unsuccessful in the other STAR levels. An Incident Report (IR) is required for all youth on this level. Depending on the seriousness of the violation, the youth may be placed on Level 1 or a more restrictive Level 2. Youth in this program tier are re-evaluated on a daily basis based on behavior and attitude, with the Unit Group Counselor determining if the youth is ready for promotion.
- The **Transition Housing Unit** is in the B4 Unit, which houses youth with special mental health needs. Mental Health staff have an active role in checking in with youth during the day. This program is incentive based and focuses on a token economy system in which the youth is allowed to earn daily points. The youth are able to purchase items with their points

such as snack and hygiene items.

- **PRIDE or Personal Responsibility in Discovering Excellence.** PRIDE was introduced in May 2015. It is currently being used in G-1, the Girls Unit, and B7. It is a best-practices model incorporating cognitive behavioral therapy options. Its focus is to improve outcomes for youth. It focuses on the 4 C's. Communication skills such as addressing elders with the appropriate title (Mr. Mrs. Etc.), no profanity, and being respectful to others. Cooperation is emphasized as youth are encouraged to follow instructions in school and in programming. Concentration is rewarded, such as ignoring inappropriate behavior in others and obeying Juvenile Hall rules. Their community reminds youth to keep their space clear, neat, and safe. Rewards for these four areas of emphasis is a token economy where "Behavior Bucks" buy a special reward, hygiene products, or perhaps a special movie, or trip to the gym. For transgressions, youth might provide a public apology or prepare a learning letter about more acceptable behavioral responses.

### **Brief Intervention Tools (BITs)**

Using BITs cognitive tools, youth can lessen the time in their rooms when being disciplined by working with a counselor through a BITs exercise. For example, one BITs tool focuses on "Overcoming Thinking Traps." Youth are encouraged to write down the negative and positive consequences of their behavior. They are asked to document an alternative thought they may have used to stop their disruptive behavior. An example of an alternative thought is: "I can't let his problem become my problem;" or "It is not worth it." Another BITs tool is "Decision-Making." Youth are encouraged to chart out how they are doing in certain life arenas such as friends, education, or family. They identify, with their counselor, areas they wish to focus on to improve their outcomes in JH and in the justice system. BITs are used throughout JH but particularly in B1 and B3.

### **Timeout**

A Timeout can be appropriate as determined by a counselor, or a Timeout may be self-requested by the youth. In either case, the youth is moved from the unit to a room in Boys/Girls Receiving where they remain for a period of one to two hours, after which time they return to their unit. While in the receiving area, unit staff must meet with the youth and provide counseling. In some cases, depending on the judgment of the counselor, the temperament of the youth, and the rapport between them, mechanical restraints may not be used during the transfer out of or back to their unit. The continued use of self-requested Timeouts as an effective and constructive behavior modification technique should be commended and encouraged.

## **VIII. MEDICAL SERVICES**

The medical director has worked in Juvenile Hall for the past seven years and is a Stanford University Pediatrics and Adolescent Medicine assistant professor. The nurse manager has worked in Juvenile Hall for more than 10 years. There have been no staffing or coverage changes during 2015. The staffing coverage is shown in the table below.

**Table: Medical Services Staffing**

Staff	Availability					
	Mon - Fri			Weekends & Holidays		
	AM (Day)	PM	Night	AM (Day)	PM	Night
Medical Director	1					
Nurse Manager	1					
Registered Nurse	2	2	1	2	2	1
Licensed Vocational Nurse	1	0.5				

Every youth admitted into Juvenile Hall receives a two-step nursing exam. The first exam checks the youth in the Receiving Area for communicable diseases (e.g., TB or flu). Once the youth has been cleared for admission, a record check is conducted to see if they have a previous admission into JH and/or a medical history at Valley Medical Center (VMC). Due to the incompatibility of the medical records system at Juvenile Hall with the system at VMC, this inquiry is “read only” which just allows for reading the youth’s VMC medical record, if one exists. Worse, any additional electronic medical information created while at Juvenile Hall cannot be added to the VMC record. This incompatibility is due to be resolved during 2016, when the Custody Health System (all of adult and juvenile facilities) will be added to HealthLink (a.k.a Epic).

Once a youth has showered, they are given a head-to-toe examination, which includes hearing and vision exams, a substance abuse inquiry, and identification of any history of suicide and/or surgery. These examinations currently take place in the clinic, but for males directly admitted into B2, the Intake and Assessment Unit, they will soon be examined in the B2 Unit Examination Room, which is yet to be activated. Although it was scheduled to “go live” in February 2015, the room is still lacking a computer and screen. The director of Custody Health is assisting in acquiring this equipment.

Although Title 15 requires no more than 96 hours, the Juvenile Hall medical director conducts a full physical examination within 24 hours (or the Monday following a weekend admission, i.e., 72 hours max.). This includes a more thorough medical history inquiry, including currency of immunizations, and substance abuse history.

Stanford University medical students and medical residents continue to rotate through the clinic. The clinic also utilizes supervised San Jose State University and San Francisco State University nursing students in the clinic to provide health education on such topics as dating violence, oral hygiene, and nutrition.

Incoming medical interviews continue to reveal that more than 80 percent of the youth admitted to Juvenile Hall have had no regular (or in some cases, any) contact with a health system. This means that the juvenile justice system frequently becomes the entry point of medical intervention for these youth. Looking more broadly, the opportunity to provide a positive longer-term medical outcome

should not be squandered.

To this end, the Medical Clinic suggests an opportunity to provide some limited medical services to those justice-involved youth not in Juvenile Hall, but who return periodically to the Juvenile Court. Although logistics and security issues would need to be identified and addressed, the chance to provide healthcare to a population who may not otherwise receive it is an opportunity worth exploring.

Ensuring that youth leaving Juvenile Hall receive appropriate follow-up care in the community remains a challenge. Parental support and involvement in the medical needs of youth continue to be a concern to Juvenile Hall medical staff. It remains difficult to initially obtain medical history and subsequent follow-through from parents for various reasons, including a lack of pediatric medical records, interest, poverty, and cooperation.

In response, the medical staff suggests that more emphasis be placed on using available health information technologies to address the disparities in health outcomes for all justice-involved youth. Implementing integrated electronic health records, patient portals, and other tools currently available for other county Health and Hospital Services agency (HHS) patients would be of potentially great value both for youth who re-appear at Juvenile Hall as well as the much larger number of non-custody youth in the probation system.

Although *non-custody* youth make up more than 75 percent of the total youth in the probation system, regular medical care is not a part of the youth's monitoring program. Integrated electronic health records shared across all county agencies and accessible to youth and their guardians would enable more coordinated care.

The commission recommends that the county's Probation Department and HHS together develop an implementation plan to provide continued health-care information for all justice-involved youth.

### **Electronic Health Records**

A significant continuing challenge for the clinic over the past several years has been the incompatibility between the medical record system in use at Juvenile Hall and Epic, the system in use within the county's HHS. In 2015, the County Board of Supervisors approved a project to integrate Custody Health Services, including the Main Jail, Elmwood Jail, Juvenile Hall, and James Ranch into the county's health system. At present, the timetable for full implementation of Epic into Juvenile Hall establishes November 2016, as the "go live" date. The county has established Juvenile Hall and the Ranch as the first Custody Health facilities to go live, using them as the "trial test group" for the project test. Progress should continue to be monitored during 2016.

### **Mandated Reporting**

Clinic staff members are required to report injuries to youth, which appear or were reported to have occurred during their arrest. In 2015, none were reported.

### **Pregnancy**

During 2015, seven pregnant girls were admitted into Juvenile Hall. They were referred to the Public Health Department's Nurse Family Partnership (NFP) program. The program works to support girls in decisions they make regarding their pregnancies. If they decide to keep their babies, they receive an incentive for participating in Public Health Nurse visits and will receive support with needs, such as childcare or returning to school. The program continues to follow the babies and mothers for three years beyond the mother's Juvenile Hall stay. During 2015, all of the pregnant girls in Juvenile Hall elected to participate.

### **Dental Services**

During 2015, 383 youth were seen in the Dental Exam Room in the clinic area. A probation officer is stationed in the clinic Monday through Friday from 8 a.m. to 5 p.m. The probation officer scans and does pat-down searches of all youth following dental exams to detect and recover sharp instruments that might have been taken from the examination room. The dental care provided at Juvenile Hall can be the first experience of dental care and hygiene for many youth.

Following a yearlong HHS vetting process, one dentist began volunteering in January 2015 to provide exams, teeth cleanings, and oral hygiene instruction to youth. Another full-time dentist, who is allocated from Adult Custody Health services, provides more comprehensive care to juvenile facilities one day per week.

### **Vision Screening**

Although there are no ophthalmologists on the staff, a rudimentary vision screening is conducted in the clinic area upon admission.

### **Hearing (Audiology) Screening**

Although there are no audiologists on the staff, a rudimentary hearing screening is conducted in the clinic area upon admission.

### **Accreditation**

The Juvenile Custody Health Services Clinic is accredited through August 2017. This accreditation is by the Institute for Medical Quality (IMQ), a subsidiary of the California Medical Association. The IMQ has recognized the quality management program of the Custody Health Services, Juvenile Facilities, as outstanding with recognition for high quality patient education programs, excellent dental care, and thorough medical documentation. Medical health services provided to youth in the juvenile facilities were found to be appropriate and to be in compliance with the Environmental Health, Nutritional and Medical/Mental health evaluation, as required by Title 15.

### **General Pediatric Services**

While a youth stays in Juvenile Hall the clinic staff members perform general pediatric services. Besides a physical examination upon admission these services include: treatment for acute and chronic health issues, medication administration, medical emergency response, pre- and post-operative nursing care, contraceptive counseling, communicable-disease screening, and neurological, orthopedic, dermatology, dental, audiology, and optometry interventions. The 2015 clinic activities summary (including data for 2014 for comparison) is below:

**Table: Medical Services Activities for 2014 and 2015**

<b>Activity</b>	<b>2014</b>	<b>2015</b>
Admit physical exams	1475	1228
Clinic visits	2477	2200
RN sick call visits	5298	3806
Sexually Transmitted Disease screenings	1082	817
HIV oral quick instant test screening	No data available	64
Other VMC appointment	No data available	203
Flu vaccine administrations	554	243
Dental clinic visits	383	382
Eye clinic visits	30	34

### **Medication Distribution**

A significant number of the youth in Juvenile Hall receive medication. Securely maintaining and correctly tracking the delivery of this medication is a key responsibility of the medical clinic. The Pyxis Medstation® automated medication management system helps provide this capability and has been in use since 2014. According to the Nurse Manager, use of this system provides medication delivery accuracy, staff accountability, and patient safety.

### **Nutrition**

Prior to their arrival at Juvenile Hall, many youth have not received nutritionally balanced or healthy diets. To properly address this, and to remain in compliance with Title 15 requirements, the medical staff together with the Custody Department and Food Services Department continues to examine and oversee the food services at Juvenile Hall. The double tray protocol is continuing for those so identified by the medical clinic.

### **Strategic Plan**

The Juvenile Hall clinic staff members have been involved in a strategic-planning process to improve the quality of services and the training opportunities for staff. A series of periodic surveys and trainings continue to improve communication among clinic staff and improve overall patient and work-life quality.

## **IX. Behavioral Health**

The most significant change in Drug and Alcohol Services is its continuing merger with Mental Health Services over the past year. In December 2014, a new director was hired to lead the

combined department now known as Behavioral Health Services. There has always been a significant overlap in clients treated particularly in Juvenile Hall as many youth with mental health diagnoses also have a co-occurring problem with drug and alcohol abuse. The Mental Health Service Act (MHSA) funding would allow payment for those dual diagnosed youth through Medical especially after the youth is returned to the community. Staff are being co-trained in assessment and treatment services. A new trauma-informed treatment mode, Seeking Safety, will be introduced to staff in February 2016.

### **Staffing**

Nineteen clinical positions are assigned to Juvenile Hall. The staff is generally available to youth Monday through Saturday from 8 a.m. to 9 p.m. At least one clinical staff is available on-call over holidays, late nights and on Sunday. Staff speak Spanish, Vietnamese, and Cambodian. Nine positions are held by licensed/credentialed marriage and family counselors or social workers. The department also has two clinical interns who are provided stipends during the academic year (September through May). A psychiatrist is available five days per week and a psychologist and two interns available four days per week. A multidisciplinary team coordinator is jointly funded by the Behavioral Health Department and the Probation Department with Juvenile Justice Crime Prevention Act funds.

### **Screenings**

Mental Health Department staff screen all youth admitted into Juvenile Hall within the first 72 hours and usually within the first 24 hours. The screening includes an interview with the youth, a review of past services, and an electronic evaluation called the Massachusetts Youth Screening Instrument (MAYSI-2). Any must-know safety concern information is reported to probation staff, and may be also used to refer a youth to services in the community after release. The Mental Health Department does provide some group-based service, but most treatment is provided individually. About 72 percent of youth in JH are assigned a therapist who will see a youth about once per week or more. Youth are seen up to once per day if they are on a “safety watch.” Youth considered high-risk after their evaluation might have a probation counselor assigned them individually. Therapists are also assigned to the Mental Health or the Transitions Unit, which is B4 and check in with youth there daily. In B-2 or the A&O unit, youth are seen in the orientation unit itself. The average caseload for a therapist is 12 youth. There are also two resource positions assigned to the unit, and they provide referrals to community agencies for all probation youth.

### **Programs and Services**

Three other clinicians are assigned to the Progress Achieved through Hope and Holistic Services (PATH2s) Court to work with youth in most cases in the community. This court works with youth and families who have co-occurring disorders such as mental health diagnosis and a drug problem. The census for this program has been as high as 65 youth, but currently stands at 40. In 2015, 36 youth were tracked as to court outcomes: 10 youth received a Certificate of Participation, 21 graduated from the program and five youth were unsuccessful. This program is a best-practices model.

The county also contracts with Peace-It-Together to provide sex offender and sexual abuse group and individual treatment for up to 45 youth per year. Through funding by the Probation

Department, MHD personnel participate.

There are currently two interns providing psychological services in the Boy's Security Units, with the groups lasting 8-10 weeks. An average of four boys are in each group. The psychology interns also help lead a canine assisted therapy group for the youth in the security units.

HHS has been implementing an electronic record system. Unicare, the system already in use, is being redesigned so that the departments can meet the new federal mandates. Clinical staff may use their computers to take case notes and update charts. Administrative staff update youth charts twice a day and those notes are then printed out and filed.

Youth behavioral "Watches" are tracked via an Excel spreadsheet. A youth might be placed on a 15- or 5-minute watch. Other youth may have an individual counselor assigned throughout their stay in Juvenile Hall. The watch census averages 8 youth per day. The data tracking system is simplistic and does not allow staff to make trending and strategic decisions.

Two Behavioral Health Department staff and a supervisor are assigned to the Competency Development Program. They work with youth clients to help the court's effort to determine a minor's competency to stand trial. During 2015, three of the seven clients referred to the program are still active receiving competency services; their competency has not yet been determined. Of the remaining four, two were restored, one was not, and the other youth was dismissed from the program.

## **X. CHAPLAINCY SERVICES**

Probation contracts with two organizations for chaplaincy services: Correctional Institutions Chaplaincy of Santa Clara County (CIC) and the Catholic Dioceses in San Jose.

Commissioners met with the CIC chaplain, who has served the youth in JH for the past eight years. This chaplain, a Baptist minister, is responsible for the management of services for Protestants and other world religions at JH, and also oversees all general religious activities, including:

- If a youth requests religious assistance for a religion outside his ministry, the chaplain will link the youth with the appropriate minister or cleric. He utilizes 100 volunteers, 35 of whom are active. The volunteers who are not active on a weekly basis are used for special tasks, such as, the celebration of non-Christian religious holidays. All volunteers receive ongoing training, especially those who do individual pastoral counseling.
- Sunday services are held only twice a month due to the lack of volunteers on Sunday mornings though Protestant Bible study classes available in all units Monday through Thursday.
- Special programs for Christmas, Easter and the end of Summer were enjoyed by all units. For B1 and B3 units, services are held in each unit.
- Individual counseling is available for Juvenile Hall youth, but the decrease in population has led to a lower chance of developing a long-term relationship and the use of BITs and Guides by the Juvenile Hall counselors has decreased the time available for religious counseling. All participation by the youth is voluntary.



- The chaplain presents an orientation concerning religious activities once a week in the A&O Unit for the boys. A separate orientation for the girls in G1 is held bi-monthly. At that time, he solicits interest from the youth concerning the level of services in which they want to participate.

Another minister, who is a member of the Mayor’s Gang Violence Prevention Task Force, volunteers to work with youth who are involved in gangs:

- Hope for the Future is a program that works for permanent change in the mindset for youth housed in one of the security units included what the “Hope Dealers” indicate was real talk about self-esteem building and life skills with the goal of a permanent change for the youth who are housed for significantly long periods of time.
- The previously offered programs, STREAM and Lions and Lambs, were not offered in the last year.
- Heart and Soul, a gender-specific program for girls was offered, and will be again this next year.

The chaplain reported holding a total of 131 Protestant religious sessions since January 2015. In these sessions, a total of 187 male youth and 41 female youth participated. The most utilized service used (77 youth) was pastoral counseling.

Visiting priests, seminarians, deacons and volunteers provide religious activities for Catholic youth in Juvenile Hall:

- One person oversees services at all adult and juvenile custody facilities in Santa Clara County. No one person is available for direct services to the youth as is provided by CIC.
- Catholic Bible study is available to all youth three days a week. A volunteer, seminarian or priest performs Communion or Mass three days a week and pastoral care and counseling are offered to youth in all units.
- Once a week a volunteer works with youth who have requested sacramental preparation for baptism or first communion.

The Catholic and Protestant services comply with Title 15 standards.

## **XI. EDUCATION**

The Osborne School is one of six Court and Community Schools operated by the Santa Clara County Office of Education (SCCOE).

### **Enrollment**

During the 2014-2015 school year, the Osborne School served an average of 95 students in grades six through twelve, with the majority of students in grades 10-12. Average class size is 10-15 students. The average stay of students in the program ranges 20-23 days. However, this does not include nearly 30 percent of the Juvenile Hall population who may remain there for a year or more.

### **Staffing**

The Osborne School staff consists of:

**Table: Education Staffing**

<b>Number</b>	<b>Position</b>
8	Alternative Education Department (AED) teachers
3	Special Education teachers
1	AED para-educator
2	Office Coordinators
8	Academic counselors
1	Program specialist
1	Principal
1	Assessment staff member
1	Resource specialist
1	Custodian

### **Screening and testing**

Along with screening within 48 hours of admission by probation, medical personnel, and mental health staff, a youth will undergo an educational screen by the SCCOE assessment technician. This process helps gather necessary educational and demographic data and is used to plan the student's curriculum. As part of the process, a individualized student plan titled My Action Plan (MAP) is developed, that enables staff to conduct a one-on-one meeting with students to establish behavior and academic expectations. The MAP's are also referred to as an Individualized Learning Plan (ILP). Students are also presented with an orientation of the curriculum, grading guidelines, accumulation of credits, class credits, class scheduling, and behavioral expectations while at Osborne School.

Students enrolled at Osborne during 2014-2015, were given the following assessments:

- The state mandated California High School Exit Exam (CAHSEE). The last testing cycle ended in May of 2015 as the test has been suspended by the state.
- Students are also administered formative assessments in English Language Learners (ELL) and Math and Science to help determine overall skill, and alignment to proposed strategies and adapted text materials. Students are given this test annually if they are incarcerated for extended periods of time at Juvenile Hall. The average English Language Arts (ELA) and Math and Science scores for the past three years indicate that grade 10-12 students are about five years below grade-level, while grade 8-9 students about four years below grade level.
- For the 2014-2015 school year, Osborne assessment technicians administered the California English Language Development Test (CELDT) test to more than 150 students.

Fortunately, there are also students who have completed high school or the requirements for high school and would otherwise have no additional educational opportunities. SCCOE and Osborne School have instituted the ability to take college-level courses and to open up to incarcerated youth the possibility of getting a higher education.

Until recently, the Osborne school offered after-school tutoring. But due to new programs introduced by the Probation Department, unfortunately tutoring has been reduced to only one program per week in English Language Arts. Given the grade-level issues discussed above, the JJC encourages the Probation Department to reconsider selecting another time slot in order to allow youth to take advantage of tutoring programs. Also the school is losing federal funding available for tutoring.

### **Goals**

The commissioners reviewed the County Office of Education 2015-16 Local Control and Accountability Plan (LCAP) and Local Educational Agency Plan, which are to provide details on the local educational goals and objectives and required to achieve outcomes, including each school district's described goals and specific actions to achieve these goals pursuant to the Education Codes. They are updated annually. The Osborne school has developed 13 goals for the year.

The commissioners also requested the annual education review required by Title 15 Section 1370(a), which was not supplied, but the number of reviews done by the SCCOE and the Osborne staff for probation shows their intent to follow appropriate guidelines.

Besides the addition of college-level instruction as positive changes for education in the last year, the movement of those youth held for extended periods of time from units B8 and B9 to units B1 and B3 respectively, has allowed the youth to now have two classes, held at the same period of time in two separate classrooms, instead of one class being held in an open-air gallery above the common area. Also the merging of two units of general population youth allows the teachers better access for the education of students with special education needs.

## **XII. POLICIES AND PROCEDURES**

Commissioners met with the Juvenile Probation quality assurance manager to review the Juvenile Hall Policy and Procedures Manual (P&P), to inquire as to how often the manual is updated, and to learn more about the implementation of the latest revisions.

### **P&P**

Last year, the manual went online within Juvenile Hall and can be easily accessed at any computer terminal by probation staff. In addition to being online, hard copies of the manual have been placed in all living units. The JJC reviewed one hard-copy manual and found 10 of the 85 individual Policies & Procedures to be missing from this specific manual. In addition, three sections (5.01, 5.03, and 5.04) include references to the use of OC (Oleoresin Capsicum) spray, commonly known as "pepper spray," even though its use was eliminated in September of 2015. These three policies should be updated appropriately.

The commission found the P&P to be adequate and comprehensive. It is the “how-to manual” and serves as a guidepost for all operations at Juvenile Hall. The manual sets out, in detail, every function of the facility. It is a mandate which all staff must follow. It also serves as a training tool, which establishes rules and standards for every situation, thus, guiding staff in the safe-keeping and care of all Juvenile Hall youth while they are housed in the facility. The establishment of the manual is specifically addressed in Title 15, which mandates that the Juvenile Hall administrator develop written policies and procedures to promote and guide, among other goals, acceptable behavior and discipline of youth and staff. All Probation Department staff members, extra-help and part-time staff are required to attest that they have read, understand, and will abide by all the mandates contained therein. The manual can be revised and updated as needed, however, it is mandated by the state that it be reviewed annually. The commissioners received a statement from the deputy chief of probation that the P&P had been reviewed in 2015.

The revision process is straight-forward whereby the Quality Assurance/Policy & Procedures team in Juvenile Hall review the manual for appropriate revisions. All revisions are reviewed by Juvenile Hall management prior to final review and sign-off by the deputy chief and chief probation officer.

The commissioners found that there exists no mechanism to ensure consistency or currency between the online and hard-copy versions of the P&P that are distributed throughout the facility. A tracking mechanism should be employed to ensure consistency and currency between the online and hard-copy versions.

Incident reports are written by Juvenile Hall counselors on issues that occur within the units. These incident reports can range from a referral of a youth to the medical clinic or a request for mental health services to incidents that can lead to a youth being placed in a “Control Program.” These incidents might include injuries, fights, or suicide gestures. Staff involved in the incident write a computer report that is reviewed and approved by a Juvenile Hall supervisor before the end of that shift.

Use of BITs therapy units allows the staff to counsel the youth and try to ascertain the reason for the wrongful behavior and have the youth think through more positive ways to respond to the situation. The successful response by the youth to this intervention may precipitate a reduction in the proposed discipline. The Incident Reports are subsequently reviewed by the Juvenile Hall manager and ultimately by the deputy chief of Facilities. Decisions about which behavior level on which the youth is placed is often based on the final disposition of the Incident Report.

During the previous year, there had been a pilot program to allow the use of OC (Oleoresin Capsicum) spray during room extractions when a minor was requested to leave his or her room because of disruptive behavior. This pilot ended with the spray never being used, but room extractions recorded as incidents. During the last year, there were six times that the staff prepared for room removal of a minor by force as opposed to four the previous year, but three of those instances were resolved with the minor voluntarily complying.

The commission regularly reviews Incident Reports. The goal of this review is multi-purposed with

a focus on the more serious incidents to observe if there are any trends, and to deal with the concerns of parents and Juvenile Hall staff.

For the period of January 2015 through December 2015, the JJC regularly reviewed Incident Reports and found them to be informative, having been reviewed and signed by the appropriate staff and handled in a manner appropriate to the policies in place at the time.

### **Appeals**

As required by Title 15 Juvenile Hall has an Appeal Policy that allows youth who have received discipline the right to a due process review. They are advised of this right, and forms to challenge the discipline are available in each unit. This process includes the right to respond, the right to an informal hearing, and notification of the decision. The basis of an appeal can include:

- Reasonable disciplinary methods and conditions of program removal
- Limits on the length of sanction/restrictions
- Counseling when removed from program
- Due process
- Administrative review

Commissioners reviewed 82 appeals over the last calendar year. The number of appeals has decreased by more than half from the previous year, and it appears this decrease cannot be solely attributed to the reduction in the number of youth in Juvenile Hall, but should also be attributed to the use of learning alternatives as opposed to pure sanctions.

### **Grievances**

The basis for a grievance is any inappropriate or inadequate conditions that occur in Juvenile Hall. Such inadequate or inappropriate conditions include, but are not limited to, conditions relating to: behavior or actions of the staff or volunteer, conditions of confinement, healthcare services, education services, classification decisions, program participation and services, telephone usage, mail or visiting procedures, food, clothing, bedding, and hygiene. The right to file a grievance is also explained to the youth and forms are available in each unit. No reprisal from a filing of a grievance is allowed and the grievance can be handled confidentially. These grievances are handled at the lowest staff level within 48 hours.

Commissioners reviewed 78 grievances for the 2015 calendar year, which was an increase of 11 from the previous year. Nearly a majority of the grievances were from the youth in one unit and were about a specific problem with the facilities such as “the phone is broken.” These issues appear to have been handled appropriately.

## **XIII. DOCUMENTS REVIEWED**

Documents and inspection reports from multiple sources were requested and were reviewed during the Juvenile Hall 2016 Inspection. They included:

- Policies and Procedures Manual from the Probation Department
- 2014-2015 Annual Report for Osborne School

- Incident Reports 2014-2015
- Santa Clara County Probation Department Population data 3/31/16
- Juvenile Justice Commission’s Inspection Report for Juvenile Hall, March 2015
- Annual Facilities Inspection Report: 2015 conducted by Superior Court
- “Juvenile Hall New Admit Orientation”
- “Juvenile Hall Parent/Guardian Orientation Information” (Small Booklet-Probation Dept.)
- “Juvenile Hall Detention Facility” (Brochure)
- “A Newcomer Asks” Brochure Information, listing Community Based Organizations
- Federal Prison Rape Elimination Act of 2003 (PREA) video
- List of Factors Considered in Admit/Release Decision
- Risk Assessment Instrument Guidelines (December 2015)
- “Clean Slate” card in lobby, re: tattoo removal
- Newcomer Workshop-card in lobby by Narcotics Anonymous
- California Code of Regulations (CCR) Minimum Standards for Juvenile Facilities (July 2007, Title 15)
- Juvenile Hall Visitation Information and Application
- Project Analysis, “Improving Behavior & Mental Health of Male Juvenile Offenders in a Locked Correctional Facility through Animal-Assisted Activity” (Dog Therapy in B8 & B9)
- Log Sheets: One-on-One, 5-Min Safety Check, 15-Min Safety Check, Safety Check, Unit Log
- PRIDE Program Youth Manual
- PTOR Re-Entry Plan Checklist

#### **XIV. COMMENDATIONS**

The Commission commends the following:

1. **Behavior Management:** The JH staff’s continued use of self-requested Time Outs as an effective and constructive behavior modification technique should be commended and encouraged.
2. **Education:** The COE and Probation Department on collaborating to relocate students to create to separate classrooms instead of one class being held in an open-air gallery above the common area.
3. **Facilities:** The JH on moving forward with kitchen remodeling plans.
4. **Medical Services:** The county for its project to integrate with JH electronic health-record system with the county’s electronic health-record system.
5. **Programs:**
  - a. Continuing to offer an array of programs even with the decrease in population.
  - b. The new Probation Terminated On Release (PTOR) Reentry Program now also allows youth to been seen in the community by a counselor once they are released from JH, which facilitates youth getting to necessary appointments and arranging other services. The Commission commends the JH staff for seeing a

problem, and proposing and carrying out a thoughtful and practical solution.

- c. Restarting a garden project for youth in B1 and B3.

## **XV. RECOMMENDATIONS**

The Commission recommends the following:

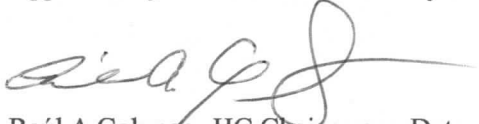
1. **Behavior Management:** As in 2015, it is recommended that the Probation Department create ongoing evaluation methods for Behavior Management and for Community Based Organization programs.
2. **Education:** The Probation Department consider alternate times for services to allow youth to take advantage of tutoring programs.
3. **Facilities:**
  - a. The commission requests that the Santa Clara County Fire Marshall or the Santa Clara County Fleet and Facilities reports be forward to the JJC within the next 90 days.
  - b. As in 2015, it is recommended that funds be allocated in 2016 to correct the issues identified by the JJC and Probation Department to correct and upgrade the identified equipment, heating and air conditioning issues in the Control Room.
4. **Health and Hospital System:**
  - a. The Health and Hospital Services agency (HHS) investigate the opportunity to provide some limited medical services to those justice-involved youth not in Juvenile Hall but who return periodically to the Juvenile Court.
  - b. The Probation Department and HHS together develop a plan to implement available appropriate health information technology tools and patient-accessible online portals for all justice-involved youth.
  - c. As in 2015, it is recommended that the HHS re-examine the potential benefits of independently funded data collection and analysis programs related to juvenile medical data.
  - d. Complete the B2 unit examination room within 90 days.
5. **Policies and Procedures:**
  - a. Sections 5.01, 5.03, & 5.04 be revised to eliminate references to the use of OC (Oleoresin Capsicum) spray, commonly known as “pepper spray.”
  - b. A tracking mechanism be employed to ensure consistency and currency between the online and hard-copy versions of the Manual.
6. **Grievances:** Probation Department assigns tracking numbers to the Appeals submitted by youth to coordinate them with the Incident Report so that those reviewing the Appeals and Incident Reports can understand the totality of the incident.
7. **Education:** The SCCOE in cooperation with Probation create written policies or procedures for the Osborne School.

## **XVI. SUMMARY**

The Juvenile Justice Commission has completed its annual inspection of the Juvenile Hall. Responses were provided to the recommendations contained in the 2015-2016. Report and reviewed. Juvenile Hall residents

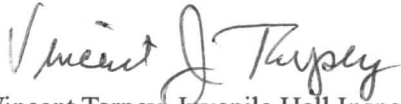
are well supervised in a safe and secure environment. The Santa Clara County Juvenile Justice Commission found, that based on this inspection, the Santa Clara County Juvenile Hall is in compliance with the provisions in "Minimum Standards of Juvenile Hall Facilities" in Title 15, Crime Prevention and Corrections.

Approved by the Santa Clara County Juvenile Justice Commission.



Raúl A Colunga, JJC Chairperson Date

5/3/16



Vincent Tarpey, Juvenile Hall Inspection Chair

5/3/16