

YOUTH SERVICES POLICY

Title: Establishment and Review of Secure Care Facility Standard Operating Procedures (SOPs)	Type: C. Field Operations Sub Type: 1. General Number: C.1.6
Page 1 of 4	
References: ACA Standards 2-CO-3A-01 (Administration of Correctional Agencies); 4-JCF-2A-01, 4-JCF-6A-08 and 4-JCF-6A-15 (Performance-Based Standards for Juvenile Correctional Facilities)	
STATUS: Approved	
Approved By: Otha "Curtis" Nelson, Jr., Deputy Secretary	Date of Approval: 02/27/2023

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To establish the fundamental components required in developing and implementing "Standard Operating Procedures" (SOPs) surrounding the day-to-day secure, safe and orderly functions of the YS Secure Care Centers for Youth; to provide for their review on an annual basis; and to ensure SOP oversight by Continuous Quality Improvement Services (CQIS).

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Chief of Operations, Youth Facilities Director - Statewide, Facility Directors, secure care facility employees, the contracted health care provider (CHP), interns, volunteers, visitors, youth and their parents/guardians.

Facility Directors are responsible for the distribution and communication of all new or revised SOPs to facility staff, the CHP, interns, volunteers, and when appropriate, visitors, youth and youths' parents/guardians, prior to implementation as outlined in Section VI below.

IV. DEFINITIONS:

Standard Operating Procedure (SOP) – A detailed explanation of how agency policy is to be implemented, including established or prescribed methods to be followed routinely for the performance of designated operations or in specific situations. The SOP communicates *who* shall perform the task, *what* process is necessary for the task, *where* the task will take place, *when* the task shall be performed, and *how* the person will execute the task.

V. POLICY:

It is the Deputy Secretary's policy that a facility SOP manual is in place to comply with YS Policy and programs for operating and maintaining secure care facilities, their satellites and operations, and that all SOPs in that manual are reviewed annually.

It shall be incumbent upon the Facility Director to ensure that revisions to facility SOPs are communicated to the Youth Facilities Director - Statewide prior to submittal to the CQIS Administrative Program Director/designee for review and approval.

It shall be the responsibility of CQIS to ensure that the required specifics noted in Section VI below are incorporated into facility SOPs submitted prior to approval.

VI. PROCEDURES:

A. Facility SOPs shall be established and provide detailed instructions for implementation based on YS Policy requirements. Facility SOPs shall cover, at a minimum, the following in accordance with the "American Correctional Association Performance-Based Standards for Juvenile Correctional Facilities":

1. Control Center operations;
2. Control of contraband and unauthorized items;
3. Emergency and safety procedures;
4. Escapes, riots, hunger strikes, disturbances and taking of hostages;
5. Flammable, toxic and caustic control;
6. Key control;
7. Perimeter control and surveillance;
8. Permanent log maintenance;
9. Physical plant inspections;
10. Rounds and inspection;
11. Security;
12. Security equipment;
13. Tool control;
14. Use of interventions;
15. Youth accountability; and
16. Youth transport.

- B. Facility Directors shall ensure that the following specifics are incorporated into each facility SOP.
 - 1. *Who* is expected to implement the procedure;
 - 2. *What* process is necessary to complete the procedure;
 - 3. *Where* will the procedure take place;
 - 4. *When* will the procedure be performed; and
 - 5. *How* will the person responsible execute the procedure.

- C. New or revised facility SOPs and all attachments shall be submitted via email to CQIS, along with a strikethrough of the current approved SOP highlighting revisions being made, utilizing the “Facility SOP Central Office Review Form” [see Attachment C.1.6 (a)].

All SOPs, once adopted, shall be reviewed on an annual calendar year basis by the Facility Director/designee. For those SOPs that do not require revision, the Facility shall transmit to CQIS the “Facility SOP Central Office Review Form” with the wording “No revisions required” in the Facility Comments section and the “Annual Review Date” updated to indicate that the review was completed. The annual review due date for each adopted SOP shall be the date assigned by the Facility in Section VI.G below.

- D. Following review, CQIS shall return the SOP and the “Central Office Review Form” to the Facility Director/designee, indicating “Approved” or “Needs Revisions”, within thirty (30) days of receipt from the facility. If an SOP requires revision, the Facility shall have ten (10) business days from the receipt of the revision to update the SOP database and inform CQIS that the revisions have been made.

In the event an extension is needed by CQIS in order to complete an SOP review, notice shall be provided to the Facility Director/designee.

- E. If required revisions are noted, the Facility Director/designee shall notify CQIS when revisions have been completed in the facility SOP database. CQIS shall review the revisions in the facility SOP database and forward a revised “Facility SOP Central Office Review Form”, indicating the SOP has been “Approved” and is ready for distribution to the Facility Director/designee.

- F. Facility SOPs shall not be implemented without approval from CQIS. Approval shall consist of the “Facility SOP Central Office Review Form” with the “Approved” section filled out by Central Office personnel. The “Next Annual Review Date” shall be one year from the CO approval date.

- G. Facility SOPs shall be post-dated 30 days from the CO approval date to allow for the distribution and communication at all facility levels.

- H. Approved facility SOPs shall be disseminated as follows:
 - 1. The Facility Director/designee shall communicate SOP revisions to Section Heads during the Director's regularly scheduled weekly meeting.
 - 2. Section Heads shall communicate SOPs' revisions to their supervisors, who shall in turn communicate revisions to line-staff.
 - 3. SOPs applicable to youth shall become part of the Direct Admission orientation curriculum. Copies shall also be maintained in each housing unit and made available to youth at all times.
 - 4. Approved SOPs applicable to visitors shall be posted in the visitation area at all times.
 - 5. Approved SOPs applicable to the CHP shall be disseminated to the Medical Director for communication to the CHP staff.
 - 6. Approved SOPs applicable to volunteers shall be communicated to all volunteers through the Volunteer Services Coordinator.
 - 7. Approved SOPs applicable to parents/guardians shall be communicated to the youth's parents/guardians.
- I. Facility SOPs shall be accessible to all employees at all times through a manual and electronic format.
- J. Facility staff shall be thoroughly familiar with facility SOPs concerning their areas of responsibility.
- K. Facility Directors shall ensure there is a process in place for SOP review, revision or development by facility staff at all times. Facility SOP updates shall be made by facility staff to incorporate YS Policy revisions as they are approved throughout the year.

All approved facility SOPs, as well as those archived, shall be maintained in the facility SOP database in Lotus Notes, with a hard copy placed in a manual for possible disciplinary/litigation purposes.

Previous Regulation/Policy Number: C.1.6

Previous Effective Date: 02/22/2022

Attachments/References: C.1.6 (a) SOP Review Form.February 2023.doc

**FACILITY STANDARD OPERATING PROCEDURES (SOPS)
CENTRAL OFFICE REVIEW FORM**

ACY/ACY-SM

BCCY/BCCY-WF

SCY/SCYC

SOP# and Title:

Submitted by:

Received by CQIS on:

Reviewed by:

Facility Comments if applicable:

Central Office Comments if applicable:

SOP Needs Revisions CQIS Staff/Title: _____ Date: _____

SOP Approved CQIS Staff/Title: _____ Date: _____

c: SOP file @ Central Office
 Facility SOP file