



**SAN MATEO COUNTY
PROBATION DEPARTMENT
INSTITUTIONS SERVICES MANUAL**

**ARTICLE 5
Classification and Separation
§1354/1354.5**

**Procedure
Separation**

PURPOSE AND SCOPE

This policy provides general guidance regarding the separation or room confinement of a youth.

1. In accordance with the listed provisions in the Policy Manual, the Juvenile Hall utilizes an alternative programming model for major rule violations. This model consists of the following components
2. Major rule violations shall be documented in an Incident Report. The report shall include a description of the alternative programming the youth has been given.
3. Per California Welfare and Institutions Code, Article 1, Section 208.3, room confinement shall not be used before other less restrictive options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth, ward, or staff.
4. If room confinement is deemed necessary, the youth shall be placed on Observation and Assessment ("OAA").
5. If a youth is placed on OAA and placed in his/her room for safety and security reasons following a rule violation, staff must conduct 15-minute wellness checks to evaluate if the youth is eligible to participate in the housing unit's scheduled programming or an alternative program. These checks are mandatory and shall be documented on the youth's individual Alternative Program Schedule. Staff shall communicate the status of any youth on OAA during shift exchanges and provide a summary on the Alternative Program Schedule. The following shift shall start a new Alternative Program Schedule.
6. Staff shall make every effort to counsel and deescalate the youth to limit the use of room confinement and provide opportunities to engage in alternative programming.

7. In instances where a youth may be confined to their room for more than four hours due to safety and security concerns, staff shall:
8. Notify the Institutions Services Manager Officer of the day (ISM-OD) of the situation. The ISM-OD shall assess the situation and check in with the youth to determine if room confinement must be continued. If the ISM-OD finds that room confinement must be extended beyond four hours for safety and security reasons, the ISM-OD shall note their finding in the Alternative Program Schedule and direct staff to continue to document the youth's behavior every 15 minutes.
9. Develop an individualized plan that includes the goals and objectives to be met in order to reintegrate the youth or ward to general population.
10. Obtain documented authorization by the facility director or his or her designee every four hours thereafter.
11. Staff will document the reasons for the room confinement and the basis for the extension, the date and time the youth was first placed in room confinement, and when they will eventually be released from confinement.
12. Restrictions on the use of room confinement are not intended to limit the use of single-person rooms for the housing of youth and do not apply to normal sleeping hours. In addition, restrictions on the use of room confinement do not apply during an emergency circumstance that requires a significant departure from normal operations, including a natural disaster or facility-wide threat that poses a substantial risk of harm to staff and youth.
13. At no time is room confinement used for the purposes of punishment, coercion, convenience, or retaliation by staff.
14. Room confinement shall not be used to the extent that it compromises the mental and physical health of the youth.
15. Room confinement does not apply when a youth is placed in a locked youth room to treat and protect against the spread of a communicable disease for the shortest amount of time required to reduce the risk of infection, with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for an illness.
16. Room confinement does not apply when a youth is placed in a locked youth room for required extended care after medical treatment with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for an illness.
17. This section does not apply to youth or wards in court holding facilities or adult facilities.

See Policy Manual on Separation for further information.