



**JUVENILE JUSTICE COMMISSION ANNUAL INSPECTION
JUVENILE HALLS AND CAMPS
HILLCREST JUVENILE HALL
2024- 2025**

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FACILITY NAME: Hillcrest Juvenile Hall - San Mateo County Youth Services Center

FACILITY TYPE: Juvenile Hall

FACILITY CAPACITY: Maximum 180 youth

FACILITY ADDRESS: 222 Paul Scannell Drive San Mateo, CA. 94402

FACILITY PHONE NUMBER: 650-312-5200

FACILITY MANAGERS: Ivonne Bustos, Superintendent and Moniay Wade, Deputy Chief

CORRECTIONAL HEALTH: Pam Isaac, RN, Charge Nurse

BEHAVIORAL HEALTH & RECOVERY SERVICES: Regina Moreno, Clinical Services Manager

EDUCATIONAL EVALUATION: September 23, 2025 and October 6, 2025

INSPECTION DATES: July 21– 24, 2025

PREVIOUS INSPECTION DATES: August 12-13, August 28, 2024

INSPECTION TEAM: Commissioners Johanna Rasmussen, Asteris Ling, Paul Bocanegra, Shakeel Ali

BSCC REPRESENTATIVE: Craigus Thompson

PENDING INVESTIGATION(S)

The issuance of this annual inspection report was postponed due to ongoing investigations involving matters discussed in this report. When the Commission learned that the investigations were not expected to be completed until the next inspection cycle, it determined that further delay was unwarranted and proceeded with the issuance of the report. The findings of the investigation(s) will be included in the 2025-2026 Hillcrest Juvenile Hall Annual Inspection Report.



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OPERATIONAL CHANGES SINCE THE PRIOR INSPECTION

The appointments of Ivonne Bustos to Superintendent of Hillcrest Juvenile Hall and the Secure Youth Treatment Facility (SYTF), and Moniay Wade to Deputy Chief, have contributed to meaningful improvements in facility operations and communication. Youth reported generally improved conditions and noted Mr. Wade’s availability, responsiveness, and follow through as contributing to those improvements. The Commission also notes greater operational flexibility, an increased focus on recruitment and hiring, and efforts to address longstanding staffing and operational challenges. Both leaders have demonstrated strong knowledge of youth needs, thoughtful leadership, and a sustained commitment to the well being and care of youth within the facility.

PRESSING CONCERNS

Strip Searches and Systemic Oversight Concerns

While in the gym on the afternoon of Saturday, February 15, 2025, Institutional Services Manager (ISM), Carmen Ramirez, who was in charge at the time of the incident, informed male youth on the Forest 3 housing unit that they would be strip searched. Youth reported being taunted with statements such as, “*we’re going old school.*” This was particularly alarming given San Mateo County’s documented history of institutional abuse. Eleven male youth were then taken into the bathroom one by one and strip searched by two male staff. One male youth youth The female youth was excluded from the incident. No contraband was found. The Office of Youth and Community Restoration (OYCR) investigated this incident and determined that the Probation Department lacked the individualized reasonable suspicion and legally required documentation necessary to conduct the searches. This incident caused harm and trauma to youth, undermined confidence in the County’s juvenile justice system, and exposed the County to substantial legal liability.

During inspection interviews, the Commission questioned ISM Carmen Ramirez regarding the training and corrective action she received following this incident. Ms. Ramirez reported that she had not received any training related to the incident. More troubling, she stated that she had not even been informed that her actions were improper and had been found to have violated the rights of the youth involved.



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It should also be noted that the Probation Department did not include these documents among the records and documentation routinely provided for inspection review. These documents were only produced after the inspection team questioned their absence from the files and specifically requested them. Had the Commission not independently become aware of this incident, it may have gone unreported within the inspection process. This raises additional concerns regarding the completeness of records provided for inspection review, disclosure practices, and the reliability of information relied upon in oversight processes.

Following this incident, the Probation Department invested in a full body scanner to reduce reliance on strip searches and align departmental practice with the Chief Probation Officer's prior representation that the practice had been discontinued. The investment reflects a shift away from correctional practices that can be degrading, traumatic, and harmful to youth toward less intrusive, trauma informed screening technologies that better protect youth dignity, rights, and wellbeing while maintaining the safety and security of the facility. The Probation Department reports that staff training on the operation of the body scanner is underway, with full implementation anticipated by the end of 2025.

PREA Compliance and Independent Reporting

The Probation Department is expected to begin implementing compliance with the Prison Rape Elimination Act (PREA) in 2025. Prior to this commitment, the facility had not fully implemented PREA standards, policies, procedures, staff training, or reporting mechanisms designed to prevent, detect, and respond to sexual abuse, sexual harassment, and related misconduct in custodial settings.

At the time of the inspection, the PREA hotline routed to a voicemail system monitored by Probation staff, raising significant concerns regarding the independence, confidentiality, accessibility, and overall integrity of the reporting process. A reporting mechanism intended to allow youth to safely disclose sexual abuse, sexual harassment, retaliation, or staff misconduct should operate independently from the agency responsible for facility operations, staff supervision, and internal oversight.

Given the heightened vulnerability of incarcerated youth, particularly within a county with a documented history of abuse, the absence of full PREA implementation and an independent reporting mechanism is profoundly concerning. PREA compliance is not simply an administrative obligation or procedural framework. It is a fundamental safeguard intended to protect youth from abuse, strengthen institutional accountability, ensure access to safe and confidential reporting pathways, promote trust in reporting systems, and reduce the risk of harm in custodial environments.



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Dental Care, Medical Screening, and Delayed Treatment Concerns

Youth in custody are entirely dependent on the County for healthcare. Best practices support timely dental, vision, and hearing screenings upon admission for all youth, along with ongoing access to necessary care throughout detention. During this inspection period, youth experiencing broken teeth, dental infections, prolonged pain, hot and cold sensitivity, and significant discomfort waited up to six weeks to see a dentist. Delays in treatment impaired their ability to eat, sleep, and concentrate in school, and exacerbated existing mental health conditions. The Commission has repeatedly raised concerns regarding youths' timely access to dental and vision care over the past four years and continues to recommend expanding dental access, including emergency dental services and increasing dental visits from once to twice monthly. Despite these repeated recommendations, youth continued to experience delays, unnecessary pain, and inadequate care while in County custody. The Office of Youth and Community Restoration (OYCR) is currently working with the Probation Department to improve timely access to dental care. While the Commission appreciates these efforts, it remains deeply concerned by the longstanding delays in care, lack of corrective action, and the resulting risks to youth wellbeing, County liability, and public accountability.

Chronic Staffing Shortages

Chronic staffing shortages and continued reliance on overtime affect the consistent delivery of developmentally appropriate, trauma informed therapeutic programming. Probation staff reported that staffing limitations prevent use of existing resources, including the Multi Sensory Deescalation Room, which has remained unused since opening on November 9, 2023. BHRS and contracted service providers similarly reported that staffing levels impede their ability to deliver contracted mental health services and programming.

Staff Training Deficiencies

Staff have not received adequate training on strip search prohibitions, the Youth Bill of Rights, educational rights, due process protections, or transition planning requirements. The absence of training in these areas increases the risk of continued violations that can cause significant harm to youth, undermine their rights and protections, and negatively impact their educational, legal, and rehabilitative outcomes.



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Classification and Housing

The facility does a poor job classifying and housing youths. The facility has multiple unused housing units that sit vacant while the majority of youths detained in the juvenile hall are housed in the Forest 3 unit. Several youths we interviewed reported feeling uncomfortable with their current housing assignment(s). Gender, age, and length of commitment time were the primary sources of their concern and discomfort.

Food & Nutrition

The food being provided by the Sheriff's Department under the current Food Services Contract continues to be extremely costly and of very poor quality. The Commission recommends terminating the food services contract for the third consecutive year in a row and going back to preparing daily meals in the state of the art kitchen at the juvenile hall.

Adverse Childhood Experiences (ACEs)

Youth are not being screened for Adverse Childhood Experiences (ACEs). Screening, documenting, and appropriately sharing ACEs scores with relevant institutional staff can support more effective behavior management, individualized interventions, and identification of therapeutic and rehabilitative needs. This information can also strengthen Multi-Disciplinary Team (MDT) treatment planning and assist the court in identifying appropriate programs and services for youth and their families.

Gender Classification and Housing

Youth of different genders are housed together on the same housing units. While the facility's low population presents operational challenges, housing decisions must continue to prioritize safety, privacy, dignity, trauma informed care, and access to gender responsive programming and services. The Commission recommends the development of a clear plan to ensure appropriate housing options and supports for youth of all genders.

Gender Specific Programming

The facility lacks sufficient gender responsive programming tailored to the unique needs, experiences, and developmental needs of youth. Youth should have access to programming, interventions, and services that are gender responsive, culturally relevant, and designed to support their rehabilitative, therapeutic, educational, and prosocial development.



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Equitable Language Services

Grievance forms and legal notices mailed to parents are issued only in English, creating language access barriers for Spanish speaking families, who make up a significant portion of the population. Spanish speaking parents also report limited or ineffective communication with their child's probation officer.

Lack of Comprehensive Reentry Services

Reentry planning and supports for youth remain limited and insufficient. While programs such as Phoenix, FLY, and Stay FLY are available, they primarily provide basic supports and minimal supervision, as reflected in poor recidivism outcomes. Youth reported limited reentry preparation and inadequate planning for successful return to their communities. Effective reentry requires robust, individualized support that addresses the issues that lead to the youth's system involvement, education, employment, housing, substance abuse treatment, physical and mental health, family engagement, and continuity of care to reduce recidivism, promote long term stability, and improve public safety.

Increased Adult Court Filings and Transfers to County Jail

The increase in adult charge filings for incidents occurring within Juvenile Hall, combined with the temporary booking and housing of youth age 18 and older at the County Jail, raises significant concerns regarding youth safety, rehabilitation, legal compliance, and public policy. The use of the County Jail presents compliance concerns under the federal Juvenile Justice and Delinquency Prevention Act (JJDP), which requires separation between youth and adults and prohibits sight and sound contact.

Facility Repairs and Maintenance

Individual cell safety mirrors are so heavily scratched that they are functionally useless for safety and observation purposes and require replacement. The mirrors have remained in this condition since before the pandemic, when the facility population was near capacity.



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RECOMMENDATIONS AND FINDINGS

The following findings and recommendations are organized by category. Each category contains detailed findings, supporting information, and corresponding recommendations. Recommendations are intended to address identified concerns, strengthen systems and operations, improve outcomes for youth and families, and promote public safety.

THE COMMISSION REQUESTS THE PROBATION DEPARTMENT PROVIDE A WRITTEN RESPONSE ADDRESSING EACH OF THE RECOMMENDATIONS CONTAINED IN THIS INSPECTION REPORT WITHIN 45 DAYS OF OFFICIAL RECEIPT OF REPORT.

PRIOR RECOMMENDATIONS

	YES	NO	N/A	COMMENTS
Implemented	X	☐	☐	● Employee Retention and Recruitment Select 4/10 and 3/12 shifts returned in 2025. The Commission had advocated for the return of these shifts to aid in recruitment and retention and promote work life balance among staff. ● Therapeutic Programming: Substance Abuse Prevention and Education: Substance Addiction Education Society provided youth with an alcohol, drug, and addiction education program during this inspection period. ● Facility and Maintenance ○ Service lockers with missing keys ○ Sign-in book was moved to a private location to preserve youth confidentiality.



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				○ Chairs were added to main lobby of the Youth Services Center to accommodate visitors after hours.
In Progress	X	☐	☐	● Eye Exams and Glasses: Wait has been reduced to 4-6 weeks from 52+ weeks. ● Facilities: Mental Health Therapy Room: A space has been identified and cleaned out for use as a designated mental health therapy room. ● Education: Provide Career Technical Education
No Action	X	☐	☐	Health and Safety ● Terminate the food services contract with the San Mateo County Sheriff Department - Maple Correctional Facility ● Provide emergency dental care and treatment to youth ● Provide timely ongoing dental care and treatment ● Replace athletic shoes with durable alternative ● Provide culturally appropriate hygiene products Training: Policies and Procedures ● Provide ISM¹ and Group Supervisor training on: ○ Youth Bill of Rights ○ Educational Rights of Youth in Detention ○ Adverse Childhood Experiences (ACEs) ○ Adolescent Mental Health First Aid ○ Trauma Informed-Deescalation Techniques Therapeutic Programming and Treatment ● Provide Substance Abuse Treatment ● Therapeutically design the mental health therapy room ● Provide parenting classes to youth with children ● Provide equitable language services

¹ ISM: Institutional Services Manager: Responsible for supervising the Group Supervisors and managing assigned housing unit.



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				● Screen youth for Adverse Childhood Experiences (ACEs) ● Ensure equitable language access ● Ensure access to religious and spiritual resources Program Evaluation ● Evaluate the effectiveness of contracted programs and services ● Collect and distribute recidivism and outcome data ● Conduct Exit Surveys with youths and families to assist in the evaluation of programs and services. Reentry and Transition Services ● Provide comprehensive reentry and transition services ● Evaluate the Phoenix Program for effectiveness and viability. Facility Repair and Maintenance ● Housing Units ○ Remove carpeting ○ Install laminate flooring in each housing unit ○ Fix Showers in F3: Water does not get hot ○ Service Air Conditioning System(s) ○ Paint the interior of each housing unit ○ Replace furniture in Day Room ● Individual Cells: ○ Paint ○ Install institutional shelving ○ Replace safety mirrors ○ Replace foam mattresses ● Outdoor Recreation ○ Install tables in the outdoor recreation area ○ Replace basketball and soccer nets
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				○ Paint lines on the basketball courts ● Gymnasium ○ Paint interior ○ Clean and maintain flooring: ○ Bleachers: clean and service ● Alternatives to Incarceration-EMP: Enable electronic monitoring for out of county youth.
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DATA, DEMOGRAPHICS AND STATISTICS

	YES	NO	N/A	COMMENTS						
Total Number of Bookings and Releases	X	☐	☐	Table key: B= Bookings R= Releases						
					2024 2025 B	2024 2025 R	2023 2024 B	2023 2024 R	2022 2023 B	2022 2023 R
				Jul	24	18	24	18	27	26
				Aug	10	23	26	24	22	17
				Sept	14	11	18	22	23	21
				Oct	30	25	33	21	20	12
				Nov	23	23	14	15	23	19
				Dec	3	11	31	24	17	17
				Jan	17	11	28	25	16	19
				Feb	19	19	20	22	17	11
				Mar	28	16	23	22	27	23



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				<table><tr><td>Apr</td><td>14</td><td>16</td><td>14</td><td>19</td><td>26</td><td>27</td></tr><tr><td>May</td><td>23</td><td>21</td><td>24</td><td>22</td><td>30</td><td>35</td></tr><tr><td>Jun</td><td>26</td><td>28</td><td>18</td><td>23</td><td>22</td><td>32</td></tr><tr><td>Total</td><td>231</td><td>222</td><td>273</td><td>257</td><td>270</td><td>259</td></tr><tr><td>Change</td><td>-15%</td><td>-14%</td><td>+1%</td><td>-1%</td><td>+1%</td><td>-1%</td></tr></table>	Apr	14	16	14	19	26	27	May	23	21	24	22	30	35	Jun	26	28	18	23	22	32	Total	231	222	273	257	270	259	Change	-15%	-14%	+1%	-1%	+1%	-1%
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Bookings: Unduplicated Youth	X	☐	☐	<table><tr><td colspan="2">2024 - 2025</td><td colspan="2">Change</td><td colspan="2">2023 - 2024</td></tr><tr><td colspan="2">176</td><td colspan="2">-8%</td><td colspan="2">191</td></tr></table>			2024 - 2025		Change		2023 - 2024		176		-8%		191																						
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Bookings: Out of County Youth	X	☐	☐	<table><tr><td>2024-2025</td><td>Change</td><td>2023-2024</td><td>2022-2023</td><td>2021-2022</td></tr><tr><td>48</td><td>-8%</td><td>52</td><td>61</td><td>45</td></tr></table>			2024-2025	Change	2023-2024	2022-2023	2021-2022	48	-8%	52	61	45																							
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Bookings: New Entries to the Juvenile Justice System	X	☐	☐	<table><tr><td colspan="5">First Time Entries to Juvenile Justice System</td></tr><tr><td></td><td>2024-2025</td><td>Change</td><td>2023-2024</td><td>2022-2023</td></tr><tr><td>New Entries</td><td>129</td><td>-32%</td><td>191</td><td>149</td></tr></table>			First Time Entries to Juvenile Justice System						2024-2025	Change	2023-2024	2022-2023	New Entries	129	-32%	191	149																		
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Daily Population	X	☐	☐	<table> <tr> <th>Month</th><th>2024 2025</th><th>Gender Breakdown</th><th>2023 2024</th><th>Gender Breakdown</th></tr> <tr><td>Jul</td><td>26</td><td>24M – 2F</td><td>24</td><td>24M – 2F</td></tr> <tr><td>Aug</td><td>23</td><td>21M – 2F</td><td>19</td><td>18M – 1F</td></tr> <tr><td>Sep</td><td>17</td><td>15M – 2F</td><td>18</td><td>16M – 2F</td></tr> <tr><td>Oct</td><td>21</td><td>20M – 1F</td><td>20</td><td>18M – 2F</td></tr> <tr><td>Nov</td><td>25</td><td>25M – 0F</td><td>27</td><td>25M – 2F</td></tr> <tr><td>Dec</td><td>18</td><td>17M – 1F</td><td>29</td><td>28M – 1F</td></tr> <tr><td>Jan</td><td>20</td><td>19M – 1F</td><td>31</td><td>30M – 1F</td></tr> <tr><td>Feb</td><td>22</td><td>21M – 1F</td><td>37</td><td>33M – 4F</td></tr> <tr><td>Mar</td><td>29</td><td>27M – 2F</td><td>30</td><td>27M – 3F</td></tr> <tr><td>Apr</td><td>36</td><td>33M – 3F</td><td>28</td><td>25M – 3F</td></tr> <tr><td>May</td><td>29</td><td>27M – 2F</td><td>29</td><td>25M – 4F</td></tr> <tr><td>Jun</td><td>31</td><td>29M – 2F</td><td>23</td><td>22M – 1F</td></tr> <tr> <td>Average</td><td>25</td><td>23M – 2F</td><td>26</td><td>24M – 2F</td></tr> </table> Key: M= Male F=Female	Month	2024 2025	Gender Breakdown	2023 2024	Gender Breakdown	Jul	26	24M – 2F	24	24M – 2F	Aug	23	21M – 2F	19	18M – 1F	Sep	17	15M – 2F	18	16M – 2F	Oct	21	20M – 1F	20	18M – 2F	Nov	25	25M – 0F	27	25M – 2F	Dec	18	17M – 1F	29	28M – 1F	Jan	20	19M – 1F	31	30M – 1F	Feb	22	21M – 1F	37	33M – 4F	Mar	29	27M – 2F	30	27M – 3F	Apr	36	33M – 3F	28	25M – 3F	May	29	27M – 2F	29	25M – 4F	Jun	31	29M – 2F	23	22M – 1F	Average	25	23M – 2F	26	24M – 2F
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Length of Incarceration: Average and Median	X	☐	☐			
				Inspection Period	Average	Median
				2024-2025	25 days	24 days
				2023-2024	27 days	9 days
				2022-2023	25 days	6 days

Incarcerated Youth: City of Residence	X	☐	☐				
				Top 5 Cities			
				City	2024-2025	2023 -2024	2022-2023
				Redwood City	38	55	76
				San Mateo	25	54	86
				East Palo Alto	25	36	58
				Daly City	20	25	14
				San Bruno	—	16	21
				South San Francisco	18	12	16



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Incarcerated Youth: From an Outside County- Out of County Youth	☐	X	☐	Top 5 Counties			
				2024-2025	2023-2024	2022-2023	2021-2022
				San Francisco	San Francisco	Santa Clara	San Francisco
				Alameda	Alameda	San Francisco	Contra Costa
				Contra Costa	Contra Costa	Contra Costa	Santa Clara
				Solano	Santa Clara	Alameda	Sacramento
				Santa Clara	Solano	Sonoma	Sonoma
Incarcerated Youth: Racial Data	X	☐	☐	Racial Data			
				Race	2024-2025	2023- 2024	2022-2023
				Hispanic	134 – 58%	189 – 69%	75%
				Black	29 – 13%	37 – 14%	11%
				White	7 – 3%	25 – 9%	6%
				Pacific Islander	5 – 2%	4 – 2%	4%
				Native American	–	–	2%
				Asian	8 – 4%	5 – 2%	2%
				Middle Eastern	–	4 – 2%	–
				Other - Unknown	9 – 4%	9 – 3%	1%
				Total Bookings	231	273	270



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Incarcerated Youth: Age	X	☐	☐	Average Age			
				Age	2024–2025	2023–2024	2022–2023 ²
				12	1	1	-
				13	8	6	-
				14	13	31	-
				15	25	50	-
				16	43	66	-
				17	56	68	-
				18	10	23	-
				19	13	9	-
				20	0	18	-
				21	0	1	-
				Average	16.1	16.3	16.6

² A detailed breakdown was not provided for this period.



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Serious Incident Reports: Deaths, Suicide Attempts, Suicidal Statements & Self-Mutilation		2024-2025	Change	2023-2024	2022-2023	2021-2022
	Deaths	0	0	0	0	0
	Suicide Attempts	1	– 66%	3	0	1
	Suicidal Statements	5	– 20%	6	4	6
	Self-Mutilation	12	– 29%	17	4	16
	There were no escapes or fires reported during this inspection period.					

Serious Incident Reports: Including Use of Force		2024-2025	Change	2023-2024	2022-2023	2021-2022
	Reportable Incidents and Informationals	262	– 1%	265	193	136
	New Charges Filed	18	+80%	10	1	3
	Major Disturbance: Youth Injured by Staff	0	0	0	0	0
	Major Disturbance: Involving Multiple Youth	4	0	4	0	1
	Assaults Between Youth	19	– 5%	20	7	5
	Number of Youths Involved in Assaults	37	– 5%	39	6	10



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	Use of Force: Incidents Involving Mechanical Restraints	37	+12%	33	13	15
	Use of Force: Mechanical Restraints Used Per Youth	21	– 9%	23	14	11
	Assault on Staff by Youth	2	+100%	1	1	0
	Threats to Staff	16	+280%	5	2	3
	Staff Injuries: Responding to Incidents	1	– 67%	3	2	3
	Youth on Special Program (OAA)	73	+18%	62	31	25
	Property Destruction	0	–100%	1	3	0
	Safety Room Placements	0	–100%	1	0	2
Out of Home Placements	X	☐	☐	The Department reported that there were no youths in placement during this inspection period.		



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Juvenile Arrest Data	☐	X	☐	Juvenile arrest data is critical to delinquency prevention planning in San Mateo County. Comprehensive juvenile arrest data is currently not publicly available. Access to juvenile arrest data is necessary to: ● Pinpoint delinquency prevention efforts ● Identify grant opportunities and potential funding sources ● Identify crime trends throughout the county ● Define, identify, track, and reduce recidivism ● Measure effectiveness of current programs ● Track outcomes of programs/services To support effective oversight and prevention efforts, juvenile arrest data should include the following information: ● Name of the law enforcement agency making the arrest ● City where the arrest occurred ● City or county where the youth resides ● Law violations associated with each arrest ● Data on school related arrests ● Total number of juvenile arrests ● Number of arrests resulting in juvenile hall booking																				
EMP: Electronic Monitoring Program	☐	X	☐	<table><tr><td></td><td>2024- 2025</td><td>2023- 2024</td><td>2022- 2023</td></tr><tr><td>Total Participants</td><td>90</td><td>115</td><td>94</td></tr><tr><td>Out of County Youth</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Average length of time on EMP</td><td>48 days</td><td>49 days</td><td>69 days</td></tr><tr><td>Median Length Of Time on EMP</td><td>45 days</td><td>43 days</td><td>44 days</td></tr></table>		2024- 2025	2023- 2024	2022- 2023	Total Participants	90	115	94	Out of County Youth	0	0	0	Average length of time on EMP	48 days	49 days	69 days	Median Length Of Time on EMP	45 days	43 days	44 days
	2024- 2025	2023- 2024	2022- 2023																					
Total Participants	90	115	94																					
Out of County Youth	0	0	0																					
Average length of time on EMP	48 days	49 days	69 days																					
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Probation Completion and Outcomes	☐	X	☐	Probation Outcomes		
				2024-2025	Successfully Completed Probation	Probation Terminated Unsuccessfully
				Totals	107	Not Provided
				Data regarding outcomes and unsatisfactory completions is incomplete.		
Juvenile Probation Annual Budget: Probation Services and Institutions	☐	X	☐			
Recommendation	Racial Data: Racial data for incarcerated youth is currently incomplete and collected inconsistently. Accurate and comprehensive racial data collection is essential to ensure transparency, accountability, and the ability to meaningfully analyze patterns of system involvement and outcomes. The Commission recommends that the Probation Department strengthen its data collection practices by: ● Collecting racial data for all youth booked into each facility. ● Update intake forms to include: ○ a category for “Multi-Racial”. ○ Add a “Declined to State” category to distinguish cases in which the question was asked and the youth chose not to respond. ○ Separate “Unknown” and “Other” categories as they capture distinct types of information.					



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	New Probation and Law Violations - Track all new alleged probation and/or law violations originating from Juvenile Hall and the Secure Youth Treatment Facility (SYTF) and develop restorative justice alternatives to prevent youth from incurring adult charges or being pushed further into the criminal justice system, and/or booked into the county jail. Juvenile Arrest Data - The Commission recommends that Probation Department compile and distribute comprehensive juvenile arrest data for San Mateo County on their website to make it accessible to the public.
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DOCUMENT REVIEW				
REVIEWED	YES	NO	N/A	COMMENTS
Board of State and Community Corrections (BSCC) Inspection Report(s)	X	☐	☐	Comprehensive Biennial Inspection Craigus Thompson: 916-597-4610 Report dated May 23, 2025 (March 3-6, 2025 visit) Title 15 §1321 Adequate Staffing Requirement Interviews with staff revealed staffing continues to be a challenge. Facility Policy Changes - Suicide Prevention Plan - Separation - Room Confinement



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			Title 15, Section 1360 — Searches – Strip Searches “We reviewed the search/strip search logs for January and February 2025 at the YSC JH. Review of policy and procedure and review of documentation provided revealed compliance with this regulation. However, technical assistance was provided regarding having articulable facts and reasonable suspicion to strip search each youth prior to conducting a strip search.” Article 5 Section 1360.2 Strip Searches (e) Based on a pattern and practice of the searches we reviewed between January 1, 2025 through March 3, 2025, the facility has documented, overall met the requirements of this section and is in compliance. However, we identified a strip search involving multiple youths in February 2025 where, although there was reasonable suspicion to conduct a search for contraband, reasonable suspicion was not documented for each individual that was searched. We recommended that facility leadership take steps to ensure that staff articulate and document reasonable suspicion for each youth subjected to strip search. Following the inspection, we were notified that the facility has ordered a body scanner to assist with detecting contraband and that all staff will be trained on policy and practice related to strip searches. Please send verification that training has been provided once it is complete. We will continue to review this issue in upcoming inspections. Unannounced Inspections Craigus Thompson: 916-597-4610 Report dated: October 29, 2024 (October 15, 2024 visit).
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				Notes: An Exit Briefing with your staff was held on Wednesday, presented an inspection overview and discussed technical assistance and best practice recommendations. Title 15 §1329: Suicide Prevention Plan • Reviewed compliance with suicide prevention policies. • Confirmed intake suicide screening procedures. • Confirmed staff training requirements. • Confirmed referral procedures to mental health staff. • Confirmed documentation requirements. The report indicates four youth were placed on mental health observation requiring safety checks every ten minutes. Title 15 §1355.2 Institutional Case Plans Notes: 2(b): “It should be noted technical assistance was provided during the previous inspections with regards to youth case plan goals and objectives being individualized. Review of the youth case plans revealed youth goals and objectives were individualized for each youth’s criminogenic needs”.
County of San Mateo: Building/ Facility Safety Inspection	X	☐	☐	Inspection Conducted on February 20, 2025 Brae Hunter, SMC ADA Coordinator Human Resources Department 650-647-9930 or 650-599-1151 Notes • Staircase: Safety striping needed on outdoor interior stairs located between the Youth Services Center and the Juvenile Hall. Admissions: • Store chemicals in a secure location
Fire Safety	X	☐	☐	Inspection was conducted on 04/22/25



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				By: Austin Seely: Report is pending San Mateo County - Cal Fire 650-477-0327
County Office of Education: 3rd Party Educational Evaluation	X	☐	☐	Dr. Jen Izant Gonzales, Senior Director, Alternative Education Santa Cruz County Office of Education 831-466-5739
San Mateo County Environmental Health	X	☐	☐	Inspection was conducted on March 19, 2025 Aris Veloso, Environmental Health Specialist 650-372-6200
Nutritional Health Evaluation	X	☐	☐	Conducted on March 19, 2025 Joanne Jarin and Yuma Argo 650-372-6200 SMC Environmental Health Specialists
Food Services: Juvenile Menu Analysis for T15	X	☐	☐	Inspection was conducted on June 24, 2025 Denise Chu, 650-599-7340 Dietitian, Correctional Health
Medical /Mental Health Evaluation	X	☐	☐	Conducted on April 22, 2025 Chia Chen Lee Notes: This report incorrectly states that an on-call dentist is available 24/7. <i>This information is not accurate.</i> Dental floss was also recommended for all youth.
Juvenile Justice Commission Annual Inspection Reports	X	☐	☐	Inspection reports are available on the JJDPC website www.smcgov.org/probation/jidpc-inspection-reports
Juvenile Court Judge Inspection	X	☐	☐	Conducted on December 4, 2024 The Honorable Susan I. Etezadi



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				Presiding Judge, San Mateo County Juvenile Court
Probation Chief Annual letter to BSCC	X	☐	☐	John Keene, Chief of Probation Letter dated: February 19, 2025
San Mateo County Safety Review	X	☐	☐	ADA Coordinator Human Resources Department 650-647-9930 / 650-599-1151
Annual Security Review	X	☐	☐	Superintendent: Ivonne Bustos: Date February 25, 2025
Civil Legal Reporting: Actions ³	☐	☐	X	No civil legal actions were reported for this inspection period.
Workplace Violence Prevention Plan (SB 553) – 2023	X	☐	☐	Under California Labor Code section 6401.9, employers must establish, implement, and maintain a Workplace Violence Prevention Plan that includes protections against employee retaliation, procedures for reporting and responding to workplace violence incidents, and emergency response protocols. The County maintains a plan in compliance with this requirement.
Strip Searches: Documents and Records	☐	X	☐	The inspection team was not provided with the incident reports, records, or documentation related to the February 15, 2025 unlawful strip search incident involving eleven youth. These

³ Board of State and Community Corrections, Title 15, Article 4, §1340; Welfare and Institutions Code, §209, 210 & 885.



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				documents were excluded and produced only after the inspection team questioned why they were absent from the files and specifically requested them. Had the Commission not independently become aware of this incident, it would not have been disclosed during the inspection process and likely would have gone unreported. This raises serious concerns regarding disclosure practices, the completeness of records provided for inspection review, and the integrity of the inspection process.
Natural Disaster: Fire Drill Logs	X	☐	☐	2024: 7/30, 8/23, 10/17, 11/2, 12/20 2025: 1/23/25, 2/28, 3/28, 5/30, 6/28
Natural Disaster: Wildfire Evacuation Plan and Procedures	X	☐	☐	Mutual Aid agreements with local jurisdictions are in place should the facility and/or area need to be evacuated.
Air Quality Indoors/Outdoors	X	☐	☐	Ventilation system was installed in 2021.
Medical, Dental, Mental Health Care Request Forms	X	☐	☐	Request forms for medical, dental and mental health care services are available on the housing units.
Transportation Log	☐	X	☐	The transportation log was not made available to the inspection team for review.
Youth Handbook: Juvenile Hall	X	☐	☐	



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Handbook: Parent/Guardian	☐	X	☐	The team was not provided a copy of the current parent handbook.
Educational Handbook	☐	X	☐	Youths and families should be receiving an Educational Handbook produced by the County Office of Education, as required by California Code of Regulations, Title 5, Division 1, Chapter 7.5 (Court Schools), Section 1180–1186. The Educational Handbook has been unavailable for at least 5 years.
Intake and Admission Forms	X	☐	☐	The intake and assessment packet covers medical history, mental health, family relations, education, employment, substance use/abuse, gang involvement, insight, and future goals.
Institutional Case Plan	☐	X	☐	Institutional Case Plans (ICP) are created for youth who are incarcerated for 30 Days or more. We did not have the opportunity to review a sample ICP during our inspection.
Ohio Youth Assessment System (OYAS)	X	☐	☐	The Probation Department introduced the OYAS in November 2022 as part of its assessment process.
Probation Website: Juvenile Services & Institutions Division	☐	X	☐	- Update and maintain the Juvenile Services and Institutions Division portions of the website, including a prominent English/Spanish language option, to ensure information is accurate and that parents and family members can readily access information and links provided. - Provide all PREA information and data on the Probation Department's website. When a facility has no data to report, that data point is important to share with the public, even if it is not mandated by law.



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Other: San Mateo County Grand Jury Report	Civil Grand Jury Report: <i>Vacant, Valuable, and Vulnerable: Reimagining San Mateo County's Youth Services Facilities</i> The following report was issued by the San Mateo County Civil Grand Jury during this inspection period. The Commission reviewed the report and provided written comments to the Board of Supervisors on its findings. The report can be viewed at: https://sanmateo.courts.ca.gov/system/files/grand-jury/vacant-valuable-and-vulnerable-reimagining-san-mateo-countys-youth-services-facilities.pdf
Recommendations	Probation Department Website The Probation Department's website should be regularly updated and include a prominent English/Spanish language toggle to ensure parents, guardians, and members of the public can readily access timely, accurate, and accessible information regarding: ● General Information ● Visiting and Telephone Information and Policies ● Contact Information for: ○ Juvenile Hall, SYTF, and the Probation Services ○ School Department ○ Correctional Health: Medical and Dental Services Behavioral Health & Recovery Services ○ Private Defender Program ● Provide all PREA information and data on the Probation Department's website. When a facility has no data to report, that data point is important to share with the public, even if it is not mandated by law.

POLICIES & PROCEDURES				
	YES	NO	N/A	COMMENTS



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Policy and Procedure Manual Juvenile Hall	X	☐	☐	The Policy and Procedure Manual was updated in 2023. There are also policies under development.
Facility Rules	X	☐	☐	
Has the Policy and Procedure Manual been updated to reflect current laws and regulations?	X	X	☐	Some policies are still under development
Implementation of Court Orders	X	☐	☐	Court orders are generally conveyed to the Probation Department through a standardized form completed by the Court Officer, who is a probation employee. The Court Officer handwrites information onto the form and the minute order are typically entered into Odyssey within 24 hours. The original form is placed in the youth's physical file. Court orders are also communicated verbally to staff, and notifications involving system partners are conveyed either verbally or via email.
Release: Deportation ICE Cooperation/ Notification Policies	X	☐	☐	
Notifications: Juvenile Justice Commission	X	X	☐	The Commission was not consistently notified of serious incidents, legal action, and important changes as agreed upon.
Use of Force Policy	X	☐	☐	The facility does not use OC Spray, the WRAP, or Tasers.



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Anti-Harassment & Bullying Policies	X	☐	☐	
Safety Check Logs	X	☐	☐	Staff checks each cell every 15 minutes. Each cell has an individualized barcode that is scanned during each safety check. Group Supervisors must sign off on late safety checks.
Institutions Overtime: Probation Officer Training:	☐	X	☐	Adult probation officers routinely work overtime shifts within the facility. The Commission was unable to determine what training, if any, these officers receive before working directly with youth. Because the law, mission, and legislative intent of the juvenile and adult probation systems differ significantly, the Commission seeks clarification regarding the eligibility and training requirements for staff working with incarcerated youth at this facility.
Youth Movements Within the Facility	X	☐	☐	Youths are required to walk with their hands behind their backs whenever they are moving through the facility. This policy is unique to San Mateo County, as neighboring counties require youths to keep their arms at their sides. This policy: • Undermines Rehabilitation Goals by creating a punitive environment that can create resentment rather than encouraging personal growth or accountability. • Psychological Harm: Forcing youth to adopt submissive postures can be degrading and psychologically damaging. It reinforces a sense of powerlessness and humiliation, which can exacerbate mental health issues and trigger traumatic memories that can hinder their emotional recovery. • Result in Negative Behavior: This policy may foster



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				defiance or rebellion in youth who feel they are being unfairly treated and can create adversarial relationships between staff and juveniles. • Erode Trust: between youth and staff—which is critical for successful rehabilitation. • Reduce Recidivism: Rehabilitation programs that focus on respect, accountability, and emotional safety have proven to be far more effective in reducing recidivism than punitive or degrading measures.
Step Program: Behavioral Modification System	X	☐	☐	Step: 0 • No Privileges Step 1 Restrictions • No MP3 Player • No weekly snacks or special food allowed • Use of individual ethnically appropriate hygiene products is prohibited. • Restricted recreational activities • Goes in cell 30 minutes early each night. Step 2 Privileges • Use of assigned MP3 Player • Receives 2 weekly snacks and has access to additional or special foods • Allowed to access to individual ethnically appropriate hygiene products (not provided by facility) • Can participate in special programming with staff member. • Can serve as a helper on the housing unit It should be noted that:



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				• The Forest 3 Unit has been without MP3 players for over a year without explanation. • The MP3 players were intended to be used as a therapeutic tool for youth and not a privilege that could be taken away unless they violate the use contract. • The use of ethnically appropriate hygiene products are protected under the Youth Bill of Rights and are not considered to be a privilege that can be taken away as a form of punishment.
Room Confinement Policy	☐	X	☐	New policy was referenced in BSCC targeted inspection report. Policy was not included in document review.
Personal Items: Allowed in cells	X	☐	☐	Clothing, personal hygiene, educational books and materials, tablets, MP3 players, photos, drawings, magazines, letters, pencils, journals, and paper are allowed in cells. Hardcover books and any item(s) that exceeds the approved limits are stored at staff desk on the housing unit.
Voting Rights: Written Voting Policy	☐	X	☐	Policy Requirements:Elections Code Section 2105.7: State and local juvenile detention facilities have an affirmative duty to ensure the following: • Identify every eligible voter in the facility • Provide voter registration application (paper or online) to each eligible person. • Assist every eligible voter to register unless the person declines this assistance. • Paper registrations: assist in returning the completed form(s) to the county elections official.



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Admissions Youth Orientation & General Information Packet	X	☐	☐	We recommend the following items be added: • Youth Bill of Rights • How to request religious services and materials. • The name and contact information for the youth's Attorney Probation Officer, and the name of the Group Supervisor who is assigned to write their child's behavioral summary and court reports.
Visiting Policies	X	☐	☐	• Youth are afforded two regular in-person visits each week and one Zoom visit. • Zoom visits are scheduled each week on Wednesdays. • Appointments are required to visit. • Visitors must call admissions a day in advance to obtain an appointment to visit. • Visitors must show an ID to visit • All in-person visitors must arrive at least 10 minutes prior to their scheduled visit. Visitors who arrive after this time will have their visits cancelled. • Visitors must pass a background screening.
Audio and Video Recording: Storage	X	☐	☐	Video recordings are stored on a server for 1+ years. It is unclear which employees have access to the recordings or what the criteria is for approved review.
Telephone Policy and Approval Procedures	X	☐	☐	• The telephone policy is currently being updated to include extended family members, consistent with the Youth Bill of Rights. • The Court, Probation Officer, and the Superintendent of the facility may approve individuals to be added to a youth's approved telephone call list.



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Tablet Policy	☐	X	☐	We were not provided with a policy related to tablet use. Tablets were implemented at the facility in 2024.
Desktop and Laptop Computer Policy	X	☐	☐	Reviewed item. Policy under development and not available.
Internet Policy	X	☐	☐	Reviewed item. Policy under development and not available.
Physical Mail Policy	X	☐	☐	No changes from previous inspection.
Electronic Mail Policy	☐	X	☐	A policy is needed. The Youth Bill of Rights affords youth the use of electronic mail if they have access to a computer and internet.
MP3 Player Policy	X	☐	☐	The MP3 policy was drafted by youth with the assistance of staff and Commission members. The MP3 players are intended to serve as therapeutic tools to help reduce sensory deprivation during extended periods of locked confinement, and reduce stress and anxiety, elevate mood, and assist in the treatment of insomnia. You have access to their MP3 Players 24/7 unless they have violated the terms of use contract.
Wrap Around Services: Turning Point Program	☐	☐	X	None of the children or parents we spoke to had been offered Wrap Around Services.
Approved Magazine & Books List	X	☐	☐	
Recommendations	Electronic Monitoring Program ● Provide EMP to Out of County youth as an alternative to incarceration.			



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Visiting

- Revise the visiting policy to increase the number of youth permitted to visit at each time slot. Bringing back the tables that were removed from the visiting room will reduce the need to turn visitors away.
- The Commission also recommends revisiting the current appointment and late arrival policies. Neighboring counties, such as San Francisco, allow all visitors who arrive during visiting hours and do not require appointments. Given common barriers such as work schedules, traffic, transportation challenges, and childcare responsibilities, visiting policies should prioritize flexibility and accessibility. Strengthening these policies will help ensure that parents and guardians are able to maintain meaningful connections with youth and that families are supported whenever opportunities for visitation arise.

Intake Forms

- Add a section on the intake form to document a youth's religious or spiritual beliefs. This will help staff meet the religious and spiritual needs of every youth.

Orientation Packet for Youth

- Include a copy of the Youth Bill of Rights in the youth orientation packets

Orientation Packet for Parents/Guardians

- Include a copy of the Youth Bill of Rights
- General contact information for the Juvenile Hall
- Name and contact information for the youth's Probation Officer, Attorney, Behavioral Health and Recovery Services, Correctional Health, and Hillcrest School.



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DUE PROCESS				
REVIEWED	YES	NO	N/A	COMMENTS
Grievance Forms	X	☐	☐	English grievance forms are available in Admissions and at on the housing units.
Grievance Logs	X	☐	☐	Every grievance filed during this inspection period was reviewed. The majority of grievances general categories: • Improper Strip Searches • Youth Bill of Rights violations • Lack of dental care • Food related issues • Temperature issues on housing unit and in cells • Cold water in showers • Staff subjectively deducting behavior points resulting in a loss of privileges. • Questionable Staff Interactions
Grievance Process	X	☐	☐	Process: • Multiple youth filed grievances regarding the conduct of ISM Ramirez during the Saturday, February strip search incident. Those same grievances, including appeals were reviewed and decided by ISM Ramirez. Allowing the staff member who is the subject of a grievance to investigate, review, or determine its outcome represents a clear conflict of interest, raises serious due process concerns, and undermines the integrity of the grievance process. • Forms, appeals, instructions, and related materials should also be available in Spanish and other commonly spoken languages to ensure meaningful



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				access for youth.
Grievance: Appeals	X	X	☐	Not all of the documentation was made available to the team.
Grievance Trends	X	☐	☐	A youth reported a female teacher had made a racist comment. Others were related to the substandard food.
Superintendent Review	X	☐	☐	The Superintendent reviews grievances every Tuesday.
Recommendations	Grievance Process and Forms • Ensure grievance forms, appeal forms, instructions, and related materials are available in Spanish and other commonly spoken languages to support meaningful access to the grievance process. • Establish an independent grievance review process that prohibits staff from reviewing, investigating, or deciding grievances involving their own conduct. Grievances, appeals, and allegations of staff misconduct should be reviewed by a neutral party to prevent conflicts of interest, protect due process, and preserve the integrity of the grievance system.			

SEXUAL ABUSE PREVENTION				
	YES	NO	N/A	COMMENTS
Are there established reporting protocols for youth and staff?	X	☐	☐	
Do youth have access to all of the following	☐	X	☐	• Youth must ask staff to use the phone. • It is unclear if you know how the procedures for sending a confidential letter outside of the facility.



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Confidential Reporting sources: • Telephone • In-person • Tablet • Mail • Other				• Youth are assigned tablets that require staff to input the youth’s approved contacts. The tablets have not been programmed with OYCR, BSCC, Ombudsmen, the Commission, PREA and other reporting agencies or their attorney’s phone numbers. • Youth with laptops can also make a confidential report online.
Strip Searches: Sustained Complaints and Investigations	X	☐	☐	On February 15, 2025, eleven youth housed on the Forest 3 unit were subjected to unlawful strip searches authorized by ISM Carmen Ramirez. Youth reported being taunted during the searches, including staff statements such as, “we are going old school.” This language is particularly alarming given San Mateo County’s documented history of institutional abuse within its juvenile system. No contraband was found. Following a full investigation, the Office of Youth and Community Restoration (OYCR) determined that the Probation Department lacked the individualized reasonable suspicion required by law to conduct the searches⁴. The incident caused harm and trauma to youth, undermined confidence in the County’s juvenile justice system, and exposed the County to substantial legal liability. The substantiated failures reflected in this incident are troubling and raise serious questions about the departmental culture that allowed such an incident to occur.

⁴ See attachments for OYCR Complaint Closure Letter.



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				During inspection process, five months later, the inspection team interviewed ISM Carmen Ramirez. When asked about the training and corrective measures the department had taken following this incident, she explained that she had not received any training and was not even aware that OYCR had her actions to be improper and to have violated the rights of the youth involved. It should also be noted that the Probation Department failed to include any of the documents and records surrounding the incident that are routinely provided as part of inspection process. These documents were only produced after the inspection team questioned their absence from the files and specifically requested them. Had the Commission not independently become aware of this incident, it would have been missed in the inspection process, which raises additional concerns regarding accountability, transparency and disclosure. Following this incident, the Probation Department invested in a full body scanner to bring departmental practice back into alignment with the Chief Probation Officer’s prior representation that strip searches had been discontinued. The investment reflects a shift away from correctional practices that can be degrading, traumatic, and harmful to youth, toward less intrusive, trauma informed screening technologies that better protect the dignity, rights, and well being of youth while maintaining the safety and security of the facility. The department reports that staff training on the operation of the body scanner is in progress, with full implementation anticipated by the end of 2025.
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				Important Update: In May 2026, the Commission was informed that the ISM who supervised these strip searches was promoted to Assistant Superintendent, a newly created position within Institutions responsible for ensuring facility compliance and supervising Institutional Service Managers and the staff under their direction. While outside the inspection period, this development poses it's own set of questions.
Prison Rape Elimination Act (PREA) Reporting	☐	X	☐	At the time of inspection, the PREA hotline was routed to a voicemail system monitored by Probation staff. This arrangement raises significant concerns regarding the independence, confidentiality, accessibility, and overall integrity of the reporting process. Youth must have access to an independent, confidential, and accessible reporting mechanism for sexual abuse, sexual harassment, retaliation, staff misconduct, and other rights violations that does not require them to gothrough facility staff to obtain access, place a call, or submit a report. The Probation Department is expected to begin implementing Prison Rape Elimination Act (PREA) standards and compliance measures by the end of 2025. Given the heightened vulnerability of incarcerated youth, particularly in a county with a documented history of abuse and substantiated misconduct, the need for full PREA implementation cannot be overstated. PREA provides essential protections intended to safeguard youth from abuse, strengthen accountability, ensure access to safe and confidential reporting pathways, promote trust in reporting systems, and reduce the risk of harm in custodial environments.



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Are youth free to make confidential telephone calls without the assistance of staff?	☐	X	☐	Youth must ask staff to make confidential calls. It is critically important to add an additional layer of anonymity and security to the reporting process. Confidence in the reporting process is key to preventing abuse.
Security Cameras	X	☐	☐	Additional security cameras were installed throughout the facility throughout this inspection period.
Youth Education: Classes or Videos	☐	X	☐	None were conducted during this inspection period.
Reporting: Posters and Notices:	X	☐	☐	Posters are posted in the visiting room in English and in Spanish.
Staff Training	☐	X	☐	Information on trainings, course syllabus, or general information of the trainings provided to staff by classification were not provided. Class syllabus Records were not provided
Recommendations	Strip Searches - Prohibit strip searches absent legally required individualized reasonable suspicion and ensure all searches comply with constitutional requirements, state law, departmental policy, and youth rights protections. - Develop and implement clear written protocols governing authorization, documentation, supervisory review, execution, and post incident reporting of all strip searches. Protocols should explicitly prohibit unit wide, group, retaliatory, punitive, or convenience based strip searches. - Require contemporaneous documentation for every strip search, including the individualized factual basis for reasonable suspicion, authorizing supervisor,			



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	staff involved, youth impacted, contraband recovered, and supervisory review findings. ● Implement a formal tracking and review system for all strip searches, body scanner utilization, searches yielding contraband, complaints, grievances, and policy violations. Data should be routinely analyzed for patterns, trends, staff involvement, unit specific concerns, and compliance deficiencies. ● Provide mandatory training to all staff, supervisors, managers, contractors, and service providers regarding youth constitutional rights, lawful search practices, individualized reasonable suspicion standards, trauma informed approaches, de escalation, professional conduct, and less intrusive search alternatives. ● Require immediate corrective action, retraining, and documented supervisory follow up whenever unlawful searches, rights violations, or policy breaches are identified. Staff should be informed when investigations substantiate misconduct or rights violations involving their conduct. ● Expand and prioritize use of less intrusive search technologies, including body scanners, to reduce reliance on strip searches while maintaining facility safety and security. ● Ensure all facility leadership, including personnel responsible for compliance, oversight, and staff supervision receive comprehensive and ongoing training regarding youth rights, legal standards, professional conduct, supervisory responsibilities, and accountability requirements. PREA Compliance and Independent Reporting Concerns ● Achieve and maintain full PREA compliance, including implementation of all required policies, procedures, screening, reporting, investigative, documentation, corrective action, and auditing requirements.
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| | <ul style="list-style-type: none">● Establish an independent, confidential PREA hotline and reporting mechanism that is not monitored, accessed, screened, or controlled by Probation staff.● Provide youth with multiple independent avenues for reporting sexual abuse, harassment, misconduct, and retaliation, including access to external hotlines, victim advocates, legal representatives, and oversight entities.● Develop clear written protocols governing how PREA reports are received, documented, triaged, investigated, referred, monitored, and resolved, including timelines, supervisory review, confidentiality protections, retaliation monitoring, and chain of custody requirements.● Implement a formal system for tracking all PREA complaints, allegations, hotline contacts, investigations, findings, substantiation outcomes, corrective actions, and follow up measures. Tracking should include trend analysis, repeat concerns, staff involvement, location data, and retaliation monitoring.● Establish regular internal and external oversight review of PREA reporting data, investigative outcomes, corrective actions, and compliance trends to ensure accountability, transparency, and continuous improvement.● Provide comprehensive PREA training to all staff, supervisors, contractors, volunteers, and service providers. Training should include youth rights, professional boundaries, mandatory reporting obligations, recognizing grooming and abuse indicators, retaliation prevention, trauma informed response, and PREA reporting and investigation requirements.● Provide all youth with regular, developmentally appropriate PREA education regarding their rights, reporting options, confidentiality, protections against retaliation, and available support resources.● Conduct routine PREA audits, compliance reviews, and quality assurance monitoring to ensure reporting integrity, staff accountability, and sustained compliance with PREA standards. |
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YOUTH BILL OF RIGHTS				
	YES	NO	N/A	COMMENTS
Are youth provided a copy of the Youth Bill of Rights during the admissions process?	☐	X	☐	
Are copies of the Youth Bill of Rights posted in a visible location on the housing unit(s) or commons areas?	X	☐	☐	
Have staff been trained on the Youth Bill of Rights?	☐	X	☐	Staff reported that they “know about” the Youth Bill of Rights, but have not received any training or guidance on it.
Youth Bill of Rights: WIC Section 224.70 It is the policy of the state that all youth confined in a juvenile facility shall have the following rights, which are established by existing law and regulations)	☐	☐	X	
a) To live in a safe, healthy, and clean environment conducive to treatment, positive youth development, and healing and where they are treated with dignity and respect.	X	☐	☐	W&I Code 224.71 • Youth report that they feel respected by the majority of staff at this facility.



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b) To be free from physical, sexual, emotional, or other abuse, or corporal punishment.	☐	X	☐	There was one male group supervisor that the youth reported made them feel uncomfortable. The team conveyed this information to the Assist Deputy Chief of Probation for further Investigation.
c) To receive adequate and healthy meals and snacks, clean water at any time, timely access to toilets, access to daily showers, sufficient personal hygiene items, clean bedding, and clean clothing in good repair, including clean undergarments on a daily basis, and new underwear that fits. Clothing, grooming, and hygiene products shall be adequate and respect the child's culture, ethnicity, and gender identity and expression.	☐	X	☐	Youth reported: • The food being served at this facility tastes terrible. • Being hungry throughout the day. • The majority of food served at each meal is uneaten, and thrown in the trash. • The facility does not provide ethnically appropriate hygiene products to youth. It should be noted that very few if any, youth are overweight or obese.
d) To receive adequate, appropriate, timely medical, reproductive, dental, vision, and mental health services provided by qualified professionals and consistent with current professional standards of care.	☐	X	☐	Dental Care: Youth did not receive adequate and timely dental care during this inspection period. Prescription Eyeglasses: Youth wait 4-6 weeks to see an ophthalmologist and receive prescription pair of eyeglasses. While this represents an marked improvement from prior inspections, where youth were made to wait over a year in some cases, the delay still hinders their ability to fully participate in their education, rehabilitation, and is negatively impacting their self esteem.



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e) To refuse the administration of psychotropic and other medications consistent with applicable law or unless immediately necessary for the preservation of life or the prevention of serious bodily harm.	X	☐	☐	
f) To not be searched for the purpose of harassment or humiliation, a form of discipline or punishment, or to verify the youth's gender. To searches that preserve the privacy and dignity of the person and to have access to a written search policy at any time, including the policy on who may perform searches.	☐	X	☐	On Saturday, February 15, 2025, over the President's Holiday weekend, eleven youth were strip searched in a single incident at the direction of the ISM on duty. OYCR investigated and substantiated the youth's grievances, finding that the Department lacked individualized reasonable suspicion and the legally required documentation, rendering the searches unlawful. No contraband was found.
g) To maintain frequent and continuing contact with parents, guardians, siblings, children, and extended family members, through visits, telephone calls, and mail. Youth may be provided with access to computer technology and the internet for maintaining relationships with family as an alternative, but not as a replacement for in-person visiting.	X	☐	☐	The Probation Department's policy on electronic communications (email) appears to conflict with language OYCR's issued on the Youth Bill of Rights, which state that youth may use electronic communication if they have access to a computer or other technology to do so.



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h) To make and receive confidential telephone calls, send and receive confidential mail, and have confidential visits with attorneys and their authorized representatives, ombudspersons, including the Division of the Ombudsperson of the Office of Youth and Community Restoration, and other advocates, holders of public office, state and federal court personnel, and legal service organizations.	☐	X	☐	Confidential professional visits with CASAs and advocates are not being honored. Youth are required to discuss sensitive and confidential matters in the presence of staff, other youth, and their visitors. These visits are also subject to video and audio recording, raising serious concerns regarding privacy, confidentiality, and meaningful access to advocacy and support.
i) To have fair and equal access to all available access to services, housing, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnicity, ancestry, national origin, language, color, religion, sex, sexual orientation, gender identity, gender expression, mental or physical disability, immigration status, or HIV status.	X	☐	☐	
j) To have daily opportunities for age-appropriate physical exercise and recreation, including time spent outdoors and access to leisure reading, letter writing, and entertainment.	X	☐	☐	The current policy prohibits youth from going outside when temperatures exceed 90 degrees. There have been no reported incidents of heat related illness or injury at this facility. This policy should be revised to ensure compliance with Title 15.



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k) To contact attorneys, ombudspersons, including the Division of the Ombudsperson of the Office of Youth and Community Restoration, and other advocates, and representatives of state or local agencies, regarding conditions of confinement or violations of rights, and to be free from retaliation for making these contacts or complaints.	☐	X	☐	- Youth have contact with their attorney's. However, contact with members of their legal team (social worker, investigator, advocate) are not consistently honored in a confidential setting. - Essentials tools such as laptops are often prohibited from entering the visiting room. - Youths do not have consistent confidential access to reporting agencies they are legally allowed to contact under this section.
l) To exercise the religious or spiritual practice of their choice and to participate in or refuse to participate in religious services and activities.	☐	X	☐	Religious books, materials, and studies on the housing unit(s) are limited to the Christian faith.
m) To not be deprived of any of the following as a disciplinary measure: food, contact with parents, guardians, family, or attorneys, sleep, exercise, education, bedding, clothing, access to religious services, a daily shower, clean water, a toilet, hygiene products, medical services, reading material, or the right to send and receive mail; to not be subject to room confinement as a disciplinary measure; to access written	X	☐	☐	



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disciplinary policies, including the right to be informed of accusations against them, have an opportunity to be heard, present evidence and testimony, and their right to appeal disciplinary decisions.				
n) To receive a rigorous, quality education that complies with state law, and the abilities of students and prepares them for high school graduation, career entry, and postsecondary education; to attend appropriate level school classes and vocational training; to have access to postsecondary academic and career technical education courses and programs; to have access to computer technology and the internet for the purposes of education and to continue to receive educational services while on disciplinary or medical status; and to have access to information about the educational options available to youth.	☐	X	☐	Institutional Service Managers and Group Supervisors I–III must receive formal training on the educational rights of youth in detention and the legal obligations of the facility to ensure uninterrupted access to education. During this inspection period, the Commission received reports that educational opportunities were threatened or restricted as a form of punishment. Such practices are inconsistent with the legal protections afforded to youth in detention. There is a Memorandum of Understanding (MOU) between the Probation Department and the County Office of Education states that school staff are responsible for managing student behavior during instructional time unless there is an immediate safety concern. Routine probation intervention during classroom instruction undermines the authority of educational staff, disrupts learning, and conflicts with the terms of the MOU. The facility must establish clear guidelines and parameters for institutions staff and supervisors



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				when making decisions or imposing discipline that could impact a youth's access to education. These guidelines should ensure that disciplinary practices do not interfere with a youth's right to participate fully in classroom instruction and educational programming.
o) To information about their rights as parents, including available parental support, reunification advocacy, and opportunities to maintain or develop a connection with their children; to access educational information or programming about pregnancy, infant care, parenting, and breastfeeding, and childhood development; to proper prenatal care, diet, vitamins, nutrition, and medical treatment; to counseling for pregnant and postpartum youth; to not be restrained by the use of leg irons, waist chains, or handcuffs behind the body while pregnant or in recovery after delivery; to not be restrained during a medical emergency, labor, delivery, or recovery unless deemed necessary for their safety and security, and to	☐	X	☐	Information is not being provided to youth who have or are expecting children.



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have restraints removed when a medical professional determines removal is medically necessary; and to access written policies about pregnant, postpartum, and lactating youth.				
p) To attend all court hearings pertaining to them.	X	☐	☐	
q) To have counsel and a prompt probable cause hearing when detained on probation violations.	X	☐	☐	
r) To make at least two free telephone calls within an hour after initially being placed in a juvenile facility following an arrest.	X	☐	☐	
Recommendations	The Department must ensure full compliance with the Youth Bill of Rights, address the violations and related issues identified above, and implement comprehensive staff training to ensure consistent compliance and staff proficiency.			

APPEARANCE OF YOUTH				
	YES	NO	N/A	COMMENTS



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Appearance	X	☐	☐	
Personal Hygiene	X	☐	☐	Youths are given the the opportunity to shower everyday.
Clothing	X	☐	☐	Several youths requested tank tops. Youth are not typically allowed to go shirtless, yet the current clothing options are limited and the facility's air conditioning rarely works properly. Youth said the heat and lack of appropriate clothing make large muscle activities, sleep, and daily living uncomfortable when the weather is warm. Tank tops would help youth stay more comfortable in hot weather and provide added warmth during colder months while maintaining appropriate dress and institutional standards. Several neighboring juvenile halls already issue tank tops as standard clothing. We believe San Mateo County should as well.
Athletic Shoes	☐	X	☐	The athletic shoes continue to be a problem. For the fourth inspection in a row, youth reported that the shoes are of such poor quality that they wear out within 45 days. Youth reported foot pain, inadequate support, and knee and ankle issues that can interfere with participation in PE and large muscle activities. The Commission once again urges the Probation Department to provide youth with adequate athletic shoes. Continuing to purchase a product that quickly fails, causes discomfort, and undermines physical activity is not a sound use of public funds.



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Nails	X	☐	☐	
Hair Cuts	X	☐	☐	The facility contracts with a barber who donates their time and talent to cut the youth's hair every month.
Skin	X	X	☐	Youth continue to report dry and itchy skin and scalps, irritation, bumps, and other forms of discomfort from the hygiene products provided by the facility. Issues related to these products have been documented for decades and continue to result in multiple visits to the medical clinic each year..
Shaving	X	☐	☐	The current razors are poor quality and can irritate the skin. Introducing electric razors will alleviate these issues and reduce the amount of hazardous and plastic waste being produced by this facility.
Feminine Hygiene	X	☐	☐	The Commission recommends providing pads that correspond with a youth's menstrual flow (light, normal, heavy). Tampons that account for menstrual flow are already provided.

INTERVIEWS

YOUTH INTERVIEWS

	YES	NO	N/A	COMMENTS
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Do you have any immediate needs, general questions, or concerns?	☐	X	☐	Adequate food and hunger was the predominant concern, followed by dental care, and the amount of time they were required to be locked inside their cells. main concern mentioned when asked this question.
Describe the meals and snacks.	X	☐	☐	For the fourth year in a row concerns persist regarding food quality, texture, temperature, and ongoing hunger. The youth described the food as follows: • “Terrible” and “Gross” • Temperature issues where food is either cold inside or burnt to a crisp. Youth identified the following meals and foods as palatable: • French toast, green salad, hamburger, and cold cereal. When asked what food cannot be eaten: • Oatmeal, cold slaw, broccoli, oatmeal, meatballs, most of the chicken, and ravioli and pastas, and rice dishes. When asked which food they wished they had access to they said: • grapes, melons, strawberries, peaches, plums, mangos, cesar salad, and mexican food. Condiments such a hot sauce, soy sauce, and seasonings were also requested. • The snacks that were available on the housing units were remnants from prior meals that didn’t get eaten. • Each meal arrives in two containers. A brown hot tray and a blue cold tray and costs the county approximately \$90 per child, or \$270.00 per day.



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				- Many of have a prescription from correctional health that allows them to receive “double trays” at a cost of \$540 per child, per day. - Most of the trays are dumped in their entirety into the trash cans and not eaten.
Are you getting enough to eat?	☐	X	☐	100% of youth reported that they did not consistently get enough to eat.
Do you feel you are getting enough rest and sleep?	X	X	☐	Correctional Health requires youth to document sleep disturbances in a sleep journal for at least two weeks before they are eligible to receive treatment and support for chronic sleep disturbances. Some youth reported taking sleep medication, while others reported no difficulty sleeping.
Have you seen a doctor, nurse, dental, or behavioral health staff?	X	☐	☐	Youth reported long delays in receiving dental care and reduced access to mental health services. General healthcare was rated very positively, and no concerns were reported. The wait time for eyeglasses was reported to be 4 to 6 weeks.
Did you go through orientation when you arrived at the facility?	X	☐	☐	
Do you know the rules at this facility and understand the consequences for not following them?	X	☐	☐	



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Has the juvenile court process been explained to you in a way you understand?	X	☐	☐	
Has the Youth Bill of Rights been explained to you in a way that you understand	X	☐	☐	Information is provided by the Commission through OYCR posters, brochures, and pamphlets.
Do you know what a grievance is and how to file one if needed?	X	☐	☐	
Do you have an IEP	X	☐	☐	Almost all youth reported having an IEP.
Have you received any of the following assessments? ● mental health ● substance abuse ● educational	X	☐	☐	One youth had received a substance abuse assessment. No treatment was provided.
Have you been offered any therapeutic aids from BHRS?	X	☐	☐	Therapeutic tools include stress balls, weighted blankets, writing journals, and sleep journals.
How many hours do you spend locked in your cell on an average day?	X	☐	☐	Youth spent approximately 12 to 14 hours per day locked in their cells.



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Emergency Call Lights	X	☐	☐	Youths are familiar with the call light system.
Have you participated in natural disaster drills or been instructed on what to do in an emergency?	X	☐	☐	Youth reported participating in routine fire drills.
Describe a typical day at the facility.	A typical day begins around 7:30 a.m. and ends around 8:30 p.m., although youth assigned to Step 0 and Step 1 are required to return to their cells 30 minutes earlier than other youth on the unit. On weekdays, youth attend school, and court is held mornings and afternoons. Large Muscle Activity is offered in the afternoon, followed by showers, dinner, and evening programming. On weekends, youth complete chores on the housing unit chores after breakfast, followed by open recreation. Christian church services and Catholic prayer services are offered on Sunday mornings. Visiting occurs Saturday through Thursday, and professional visits take place every day.			
What programs do you look forward to participating in most?	Popular Programming • Cooking Class • Career Technical Education • Education: Hillcrest School • Large Muscle Exercise (LME)			
What programs or activities help you reflect on the thinking patterns and behaviors that brought you into the criminal justice system?	• Mental Health Therapy • Cooking • Mentors and CASA's • MP3 players- Music Therapy • Increased Physical Activity helps release stress and improve sleep.			



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Recommendations	Athletic Shoes: Provide youth with durable, properly fitted athletic shoes with adequate orthopedic support, and discontinue the purchase of low quality footwear that quickly fails, causes discomfort, or interferes with participation in physical activity. Dental Care: See Correctional Health for additional information.
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STAFF INTERVIEWS				
QUESTIONS	YES	NO	N/A	COMMENTS
Group Supervisor	X	☐	☐	
Institutional Services Manager (ISM)	X	☐	☐	
Probation Officer	☐	X	☐	
Behavioral Summary or Court Reports	X	☐	☐	Court reports are assigned to housing unit staff by Group Supervisor IIIs. Without standardized outcome measures and evidence based performance metrics, Probation cannot meaningfully assess youth therapeutic progress and outcomes, or make informed, data driven decisions regarding the effectiveness of existing programming, treatment, and services. This is also critical for court reporting purposes, as the absence of objective measures and evidence based assessments of youth progress leaves court reports heavily dependent on subjective observations and individual staff opinions influenced by varying levels of training, experience, professional judgment, and personal bias.



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Do you have the tools, training, and staffing needed to perform your duties?	☐	X	☐	Chronic lack of staffing was the common areas of concern. Training: Conduct mandatory training for all staff on laws governing strip searches, the Youth Bill of Rights, educational rights, and transition planning requirements.
Do you have any ideas or suggestions on how to improve operations of this facility?	X	☐	☐	• Expand reentry services • More funding for staff to create programs. • Allow group supervisors to attend and participate in MDT meetings
How is critical information communicated to staff and service partners? i.e.. BHRS, school, attorney.	X	☐	☐	• Most information is exchanged verbally • Court orders and minute orders are written and entered into the computer system. • Probation, BHRS, SMCOE, Correctional Health, and the Courts, all use different systems.
Protocol for identifying youth with cognitive or developmental disabilities?	☐	X	☐	Probation, BHRS, Correctional Health, and SMCOE operate without individual or coordinated protocols for identifying youth with developmental disabilities. No clear process exists for communicating concerns across agencies, coordinating follow up, or ensuring appropriate services, supports, and accommodations.
Has staff been trained on the Youth Bill of Rights	☐	X	☐	Formal training has not been provided.



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Are the individual therapeutic goals tracked and measured against actual outcomes?	☐	X	☐	There are no systems in place that can capture data to accurately measure a youth's progress and the effectiveness of programming, treatment, and the services being provided to them.
Serious Incident Support	X	☐	☐	Support services are available to staff. There are no stigmas attached to utilizing supportive services.
Promotion Process: Qualifications	X	☐	☐	• Annual performance reviews cover attendance, training, creating programs, meeting annual goals, and standards. • Group Supervisor II & III positions require a 4-year degree.
Recommendations	Staff Training: Conduct emergency mandatory training for all staff on laws governing strip searches, the Youth Bill of Rights, educational rights, and transition planning requirements Disability Identification, Accommodations and Services: Develop an MOU and coordinated procedures with partner agencies to ensure youth with developmental disabilities are identified, properly supported while in custody, and connected to Regional Center services upon reentry to the community. Standardized Measures for Court Reporting: Establish standardized methods for evaluating therapeutic progress and program effectiveness to improve the accuracy, consistency, and objectivity of court reporting and reduce reliance on subjective assessments and individual staff interpretation.			



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	Data Driven Program Evaluation: Establish data driven, evidence based methods for evaluating the effectiveness of existing programming, treatment, and services and whether they are producing any meaningful improvements in youth outcomes and public safety.
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CORRECTIONAL HEALTH				
	YES	NO	N/A	COMMENTS
Correctional Health Funding	X	☐	☐	Medical and Dental Care are covered under in the annual Correctional Health Budget.
Electronic Medical Records System	X	☐	☐	The County of San Mateo has implemented a new electronic health records system in 2025.
Emergency Medical Care	X	☐	☐	• Nurses triage care • Youth are transported to San Mateo Medical Center to receive care. • Youths are examined and treated by a Nurse Practitioner, Physician's Assistant, and/or medical doctor.
Routine Medical Care	X	☐	☐	• Nurses provide majority of care. • Hours of Operation: 6:00 am - 10:00 pm • Youth see a nurse within 12 hours and a physical exam within 96 hours of arrival. • Probation is responsible medical, dental, & BHRS referrals • Dr. Natasha, MD is at facility for 4 hours every Wednesday • NP Shaula Kauffman has clinic on Wednesday • Psychiatrist: Dr Bashiri is on site every Tuesday. • BHRS uses the Avatar Electronic Health Records System



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				• Medical staff use EPIC Electronic Health Records System • Nursing staff can access Avatar and view progress notes • Psychiatrist RX's are written in EPIC. • CAIR is also utilized for vaccines, etc. • Cal Aim is expected to be online 12/2025.
Emergency Dental Care	☐	X	☐	Emergency dental care is not being provided in a timely manner. Several youth have gone months with broken teeth, and youth requiring root canals have not received necessary treatment. Youth experiencing oral infections and significant tooth pain have reported waiting over a month to see a dentist. The lack of timely dental care raises serious concerns about the humane treatment and health needs of youth in custody. An on-call emergency dentist needs to be identified and contracted with to provide emergency dental services and treatment to youth.
Routine Dental Care	X	☐	☐	There is a dentist that visits the facility approximately once per month. This is insufficient to meet the dental needs of youth at this facility and should be increased to at least every other week.
Orthodontic Care	X	☐	☐	Orthodontics: Youth who come into the facility wearing orthodontic braces are transported to and from their orthodontist to receive care. Medi-Cal covers up to 50% of the cost of orthodontics. The youth's parents are otherwise responsible for the costs of orthodontic services and care.
Vision and Eyeglasses	X	☐	☐	The current wait to see an eyedocotor and obtain a pair of prescription eyeglasses has gone down from 1+ years in 2022, to up to 4-6 weeks in 2025.



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Audiology	X	☐	☐	Correctional Health conducts hearing screenings on as as needed basis..
Pharmacy Services	X	☐	☐	- Pharmacy services are provided by the San Mateo County Medical Center. Prescriptions are sent electronically - Parents/Guardians are allowed to bring their child's prescription medication(s) to the facility, when applicable. 7-Day Rule: If a child has been off of medication for 7 days or more, the medication must be prescribed by a doctor, prior to dispensing the medication. - Medications can be delivered to the facility daily.
Medication logs, labeling and storage	X	☐	☐	All medication is logged, labeled, and stored in a secure location.
Continuum of Care: Medication	X	☐	☐	Youth can receive up to a 30 day supply of medication at release.
Diagnostic Testing & Laboratory Services	X	☐	☐	The facility provides medical screenings and testing. 26 youths received testing in 2024. (current for 2025)
Medical Equipment	X	☐	☐	Medical equipment is provided by the San Mateo Medical Center. This typically consists of: Wheelchairs, crutches, knee braces, orthopedic boots, splints, etc.
Drug and Alcohol Screenings	X	☐	☐	Youth are pre-screened by the arresting agency before booking. Institutions staff screen youth during the admissions process. BHRS performs drug and alcohol assessments upon request.



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Substance Abuse: Withdrawal Protocols	X	☐	☐	Youth who are actively experiencing withdrawal from opioids or alcohol are treated according to established protocols, which include close monitoring and the administration of medications to manage withdrawal symptoms.
Substance Abuse Treatment Services	☐	X	☐	The San Mateo County does not have a single inpatient or residential substance abuse treatment bed for its youth..
Reproductive Health Care and Education	X	☐	☐	The medical staff provide reproductive health care, STI/STD and HIV education, testing, and treatment. Condoms and other birth control methods are available upon request.
Prenatal Care	X	☐	☐	Pregnant youths receive prenatal care and supportive services.
Immunizations: Administration, Records and Consent	X	☐	☐	Immunizations are provided to youth. Parental consent is required for youth under 18.
Communicable Disease Protocols and Notifications	X	☐	☐	
Recommendations	Mandatory Healthcare Screenings: Ensure all youth receive timely dental, medical, vision, and hearing screenings upon admission, prompt follow up care, and ongoing access to necessary treatment throughout detention, including emergency and specialty services. Dental Care: Establish clear timelines, protocols, and oversight mechanisms for routine, urgent, and emergency dental care to prevent prolonged pain, untreated infections, and delayed treatment.			



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	Tracking and Accountability: Implement a system to track healthcare referrals, appointment requests, treatment timelines, delays, missed appointments, and unresolved medical, dental, vision, and hearing needs to strengthen oversight and accountability. Staff Training and Reporting: Train staff to recognize, document, and promptly respond to youth health concerns, pain complaints, dental emergencies, vision impairments, and hearing issues. Oversight and Quality Assurance: Conduct regular audits and multidisciplinary reviews of healthcare access, treatment delays, unresolved complaints, and outcomes to ensure compliance with legal requirements, timely responsiveness, and continuity of care.
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MEALS AND NUTRITION				
	YES	NO	N/A	COMMENTS
Food Services Contract	X	☐	☐	San Mateo County Sheriff's Department's Maple Street Correctional Facility.
Cost of Food Services	X	☐	☐	The cost of each individual meal was \$89.94 in FY 2023. The county paid \$1,705,714.36 to feed an average of 27 youth per day.
Subsidized Meals	X	☐	☐	The facility's food costs are offset by funding provided by federal and state school based breakfast and lunch programs.
Food Service Preparation and Meal Service	X	☐	☐	The Sheriff's Department Dietary Services staff deliver pre made single serving meals in reusable plastic containers to Juvenile Hall twice daily, seven days a week. Each meal costs roughly \$90 per youth. Meals arrive in two containers, one for



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				hot food and one for cold food.. Probation staff are responsible for refrigerating, heating, and distributing daily meals and snacks. Youth eat their meals at the tables in the housing units. Kitchen Helpers are identified by staff and assist with clearing and wiping down the tables after meals. Dietary staff collects and cleans the food containers
Are meals heated and cooled properly?	X	☐	☐	Youths reported receiving cold, undercooked entrees, raw meat, and overcooked or burnt food on multiple occasions.
What time are meals and snacks served?	X	☐	☐	● Breakfast: 8:00 am ● Lunch: 12:30 pm ● Dinner: 4:30 pm ● Snacks: 10:25 am & 8:30 pm
Are staff present and supervising during meals?	X	☐	☐	Staff are present on the unit during mealtime. There were no choking-related incidents reported during this inspection time.
Time youth are allotted to eat	X	☐	☐	Youth are allotted approximately 15-20 minutes to eat.
Are youth allowed to speak during meals?	X	☐	☐	
Are meal servings ample?	X	X	☐	Technically, the meals are calorically sufficient according to the federally established school lunch program guidelines. However, due to the food's poor quality, texture, and taste, the youth consume limited portions of each meal, which, in turn, reduces their caloric intake and causes them to go hungry..



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Are the meal servings nutritious?	X	☐	☐	Meals meet established nutritional guidelines for state and federal food programs. However, many opportunities exist to improve the nutritional quality of each meal. The Commission recommends eliminating canned fruits and frozen vegetables, whenever possible and substituting them with a variety of fresh fruits, vegetables, and salads. Offering additional protein sources like nuts and seeds are also recommended.
Are the meals appetizing?	☐	X	☐	No. There is consensus among youth, institutions staff, and dietary staff at the Sheriff's Department that the food is awful. Many of the issues with food quality and texture stem from the process in which the meals are provided to the facility. Meals are prepared and packaged in advance, stored, delivered, and then reheated before serving them the following day. - Youth consistently report that San Mateo County's food is the worst. - Lunch on the day of our inspection consisted: The menus reviewed show need for improvement: Removal of Otameal, Cold Slaw 2x in one day, burnt broccoli, bologna and cheese sandwiches, chicken patties. Need more fresh seasonal fruit (grapes, berries, watermelon, plums, peaches and regular green salad.
Beverages	X	☐	☐	Regular and lactose-free milk are provided with meals.
Are meal menus posted in the dayroom?	X	☐	☐	



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Are snacks provided?	X	☐	☐	Snacks are provided twice a day, at 10:25 am & 8:30 pm Youths describe snacks as "small" and "not enough". Snacks meet nutritional federal school lunch guidelines.
Is food available outside of designated meal and snack times?	X	☐	☐	Fruit is provided through the food services contract with the San Mateo County Jail. Fruit typically consists of apples, bananas, or oranges.
Other Food Related Programs	X	☐	☐	- College Students: Each youth participating in the Project Change college program receives a monthly \$150 food stipend. Snacks are kept in the school building. Each youth must consume their snacks during the school day while inside the school building. - The Step Program: A behaviorally based incentive program that is utilized by staff at this facility. Youth who have maintained their Step 2 points and status for the week are given 2 extra snacks each Sunday.
Is there a protocol for youth who miss meals due to court and/or unforeseen events?	☐	X	☐	Meals are saved and reheated for youth for when they return. Extra meals are ordered daily to cover accidents and new admissions. Staff can also call the county jail to request additional meals.
Foodborne Illness: Incidents	☐	X	☐	No incidents of foodborne illness were reported during this inspection period.



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Comments	In the Spring of 2021, the food services program at the facility ended. Probation entered into a MOU ⁵ with the Sheriff's Department to prepare meals at the Maple Street Correctional Facility (county jail). Since this time, food quality has been a persistent problem resulting in countless grievances. Research has shown that a child's brain development, physical growth, and overall well-being depend on adequate nutrition. Hunger, poor nutrition, and food insecurity can cause physical discomfort, create preventable toxic stress, and contribute to long-term health disparities.
Recommendations	Food Service Contract • Terminate the current Food Services contract with the San Mateo County Sheriff's Department. • Move Dietary Services back up to the juvenile hall to prepare meals onsite daily for less than the 1,7 million dollars a year. • Eliminate canned fruits and frozen vegetables, whenever possible and substitute them with fresh fruits, vegetables, and salads. • Offer additional sources of protein to offset hunger. • Maintain a consistent supply of hot sauce and seasoning

BEHAVIORAL HEALTH AND RECOVERY SERVICES				
	YES	NO	N/A	COMMENTS
Mental Health Services	☐	X	☐	When staffing allows the following services are available to youth: Individual trauma focused Cognitive Behavioral Treatment, Dialectical Behavior Therapy, Eye Movement Desensitization & Reprocessing (EMDR), family therapy, art therapy, crisis intervention, emergency services, psychotropic medication management, sleep health and insomnia treatment.

⁵ MOU: Memorandum of Understanding



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				Services are based upon the real time needs of the youth and their families.
Caseload Ratios: Clinicians	X	☐	☐	Current caseload ratios were unavailable due to staffing fluctuations.
Psychotropic Medications	X	☐	☐	Parents/Guardians can bring in their children's medication(s) and provide it to Correctional Health.
Mental Health Screenings and Assessments	X	☐	☐	A member of the BHRS team screens every youth when they enter the facility. Assessments are done on a case by case basis.
Translation Services: Clients and Families?	X	☐	☐	Most clinicians speak Spanish. Translation services for other languages, including Tongan, are provided through a contracted interpretation service.
Does BHRS conduct court ordered mental health evaluations?	☐	X	☐	Doctors that are assigned through the courts perform formal evaluations.
Psychiatric Emergencies and Hospitalizations	X	☐	☐	Youths experiencing a psychiatric emergency are transported by ambulance to the San Mateo County Medical Center.
Self-Harm Protocols	X	☐	☐	



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Family Therapy	X	☐	☐	Provided by court order.
Is the BHRS team at this facility fully staffed?	☐	X	☐	
Are staffing levels adequate to meet the level of care clients need?	☐	X	☐	No, the team is short one part time clinician.
Vacant Positions	X	☐	☐	There are numerous vacant positions
What are the biggest challenges for BHRS staff at this facility?	X	☐	☐	Probation staff need more training on trauma-informed practices and issues surrounding teen mental health.
How can BHRS services be improved?	X	☐	☐	Having a fully staffed team is key to offering a variety of high-quality services to clients and their families.
How might the facility strengthen its mental and behavioral health treatment and service delivery?	• Having a designated therapeutically designed mental health space to provide services in. • Probation Staffing: Probation staff shortages impact the delivery of mental health services as two staff members must be on the unit in order for a clinician to come onto the unit to provide services.			
Recommendations	Adequate Staffing: Maintain adequate staffing to meet the mental health needs of youths and their families. Therapeutically Design the Designated Mental Health Space: We recommend the Probation Department allocate \$3,500 dollars to therapeutically design, furnish, and equip the dedicated Mental Health Space identified on Pine 4 housing unit.			



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	Therapeutically Design the Designated Mental Health Space We recommend the Probation Department allocate \$3,500 dollars to therapeutically design, furnish, and equip the dedicated mental health apace identified on Pine 4 housing unit. Training Assistance: Assist the Probation Department in developing training for all staff who interact with youth in the following areas: ● Providing trauma-informed care to vulnerable youth populations. ● Managing youth with mental health needs. ● Impacts of trauma and abuse on the developing brain ● Adverse Childhood Experiences ● Identifying youth with cognitive and developmental differences. ● Effective communication skills
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REHABILITATIVE AND THERAPEUTIC PROGRAMMING AND SERVICES				
	YES	NO	N/A	COMMENTS
Programming Schedules	☐	X	☐	Programming schedules were not provided.
High School and Post-Secondary Education	X	☐	☐	● High School Weekly Schedule: Monday, Tuesday, Thursday & Fridays: 8:45 am - 2:40 pm. Wednesdays: 9:00 am - 12:30 pm.. ● School Year: School is offered year round school with seasonal breaks of 1-2 weeks in length. ● College Courses: Online college classes are available each fall, spring and summer semesters. College students complete college programming in a computer lab inside the school building.



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Career Technical Education Vocational Training	X	☐	☐	A CTE course was offered during this inspection period. The course included modules in dental assisting, automotive, and building and construction, along with OSHA safety certification. Youth were highly engaged and expressed appreciation for the opportunity. Staff reported plans to offer quarterly CTE sessions next year, with selected youth participating on a rotating basis.
Daily Exercise: Large Muscle Activity - LMA	X	☐	☐	Youth traditionally receive one hour of LMA conducted by institution staff after school.
Indoor RecreationI	X	☐	☐	Board games, video game console, television capable of streaming movies, educational content, and sporting events, a bookcase with paperback books, and a ping pong table.
Outdoor Recreation	X	☐	☐	The outdoor recreation space is a highlight of the facility and critical to promoting physical activity, outdoor programming, and access to fresh air and sunlight. The area includes a running track, basketball courts, soccer field, and turf field used for soccer, kickball, and flag football. There is currently no outdoor seating Basketball and soccer nets need to be replaced.
Mental Health Services	X	☐	☐	Please see BHRS section above
Multisensory De-escalation, Calming and Art Therapy Room	☐	X	☐	Youths have not had access to this room since they attended the “Grand Opening” public event on November 9, 2023. Staff reported “we forget we have it because we don’t have the staffing to use it”.



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Substance Abuse: Treatment Assessments	X	☐	☐	BHRS is responsible for conducting assessments. Identifying a treatment need through an assessment does not ensure that appropriate substance use services will be provided, raising concerns regarding access to recommended care.
Substance Abuse: Treatment	☐	X	☐	The facility does not provide substance use treatment, and no inpatient placement options exist for youth in San Mateo County, which does not maintain a single county operated or contracted inpatient substance use treatment bed for youth or a contract for inpatient substance use treatment services.
Substance Abuse: Prevention and Education	X	☐	☐	The Commission referred the Addiction Education Society to provide its six session, science based addiction education curriculum focused on brain development, addiction, risk factors, and healthy decision making regarding substance use.
Victim Impact and Awareness	X	☐	☐	Victim Impact and Awareness classes are available online by court order; however, youth reported that the classes lack depth and that the online format limits meaningful participation. In person group sessions on the housing units would likely provide a more therapeutic, engaging, and impactful opportunity to build victim empathy, accountability, and understanding of the impact of crime on victims, families, and communities.
Parenting Classes: For Youth With or Expecting Children	☐	X	☐	
FLY Law Program	X	☐	☐	FLY volunteers facilitate the same 12 week curriculum on youth rights and the law for individuals detained in the



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				Juvenile Hall. The curriculum repeats up to three times per year.
Mind Body Awareness	X	☐	☐	Weekly mindfulness meditation workshops and one-on-one coaching.
Success Centers	X	☐	☐	The program was listed as offering weekly job readiness, life skills, and computer literacy classes. However, none of the youth interviewed had participated in the program or were aware of its existence.
The Beat Within	X	☐	☐	A weekly volunteer facilitated writing activity in which youth are asked to write at least one paragraph on one of four preselected topics. Writings are incorporated into a bi-monthly magazine featuring submissions from program participants incarcerated in juvenile halls and prisons throughout the state.
Art of Yoga	X	☐	☐	Weekly Yoga Class
Airballin' : De Andre Drake	X	☐	☐	Weekly art and airbrushing classes
Therapeutic Beat Making, LLC.	X	☐	☐	A weekly program led by Elliot Gann, Psy.D., that uses hip hop and electronic music production (beat making) and DJ'ing as therapeutic and educational interventions to help participants to express themselves and gain new skills.
Tattoo Removal Program	X	☐	☐	In 2023, the Commission identified and arranged for two programs to provide free tattoo removal services to youth both inside and outside of the facility. New Skin can provide services within the Juvenile Hall, and the San Mateo County



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				Sheriff's Office can provide services through the Redwood City PAL Center. Despite these arrangements, the Probation Department has yet to implement either service pathway.
Religious Programming	X	☐	☐	The facility offers Christian religious services; however, youth who practice other religions or spiritual traditions do not have access to the services, religious texts, prayer materials, and spiritual resources needed to meaningfully practice their faith or beliefs.
Unscheduled Activity	X	☐	☐	Youth have 60+ minutes of unscheduled activity each day.
Family Engagement	X	☐	☐	Visiting - Youth are permitted two hours per week. - Approved visitors may visit either in person or by Zoom, subject to availability. - All non professional visitors must schedule visits no later than 8:00 p.m. the evening before the requested visitation time slot. Visitors who have not been formally approved, or who are determined to present a security concern, are restricted to non contact visits through glass. Additional in person or Zoom visits may be authorized by court order or approved by the youth's Deputy Probation Officer or the Superintendent. Telephone Calls: Youth are generally permitted to make phone calls 4 days a week. Days 1-3 are 10-minute calls. Day 4 is a 20-minute phone call. Phone calls are limited to approved individuals.



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Music Therapy: MP3 Program	X	☐	☐	
Suited for Success	X	☐	☐	The Commission launched the Suited for Success Court Clothing Program in 2021. Since then, the program has provided more than 200 suits to system impacted youth. Participation is open to all youth who wish to participate. Each participant receives a suit, dress shirt, and tie to keep. The program promotes dignity, confidence, and equity by ensuring youth have access to professional attire for court appearances while in custody, and for job interviews, homecoming, graduation, and other formal events upon release. Many youth report that this is the first time they have owned or worn a suit. Commissioner Rasmussen coordinates the program, which also includes dry cleaning services.
Phoenix Reentry Program	X	☐	☐	Pre-Release: Phoenix Prep Program. Approximately 8 youths participated in this program during this inspection period. Youth outcomes and recidivism data for this program are needed. Data should be tracked and measured for efficacy.
Fresh Lifelines For Youth: ReentryProgram Youth 12-18	X	☐	☐	Youth are provided 4 hours of support during the first month following release from the Juvenile Hall, followed by 1 hour monthly check ins for up to 9 to 12 months. The program also offers one quarterly community activity, such as bowling, for up to 4 youth.
Fresh Lifelines For Youth: Stay FLY Reentry Program 18-25	X	☐	☐	Youth are provided case management for nine months and invited to attend quarterly community activities.



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Contracted Services and RFP Process	X	☐	☐	Traditional approaches to delivering programming and treatment are no longer sustainable in a facility with a low and fluctuating population and high acuity youth requiring complex, individualized, trauma informed, culturally and gender responsive therapeutic interventions. More flexible contracting and procurement models are needed to secure qualified providers, fill existing gaps in programming and treatment services, and deliver timely, responsive care.
Recommendations	RFP Process: Reform the RFP process to remove barriers for qualified providers, expand the provider pool, and improve access to specialized therapeutic services. Fee for Service Contracting: A fee for service contracting model may provide greater flexibility to procure targeted services aligned with the identified needs of youth. Strong coordination, monitoring, and quality assurance measures will be necessary to ensure service quality and accountability. Substance Abuse Treatment Assessments: Develop accountability measures to ensure assessments do not end with identification of need, but lead to timely referral, connection, access, and delivery of recommended substance use treatment services. Victim Impact and Awareness: Replace online Victim Impact and Awareness classes with in person group sessions focused on victim empathy, accountability, and understanding the emotional, physical, and financial impact of crime on victims, families, and communities. Tattoo Removal Services: Implement the free tattoo removal service partnerships previously identified and arranged by the Commission to ensure youth have access to services both inside and outside of the facility.			



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	Religious and Spiritual Access: Ensure youth are afforded reasonable access to religious services, materials, and spiritual resources consistent with their faith traditions and spiritual beliefs. ReEntry Services: Provide comprehensive, evidence based reentry services. Current programming, models, and contracted services are woefully inadequate, as demonstrated by existing recidivism outcomes. Outdoor Recreation • Sport Equipment: The nets on all of the basketball hoops and soccer goals have needed replacement for years. • Seating: There is no permanent seating in the space. Youth currently sit on the cement or artificial turf. Adding permanent seating such as heat resistant picnic tables will provide much needed seating, support outdoor programming, and expand opportunities for youth engagement outside the housing units.
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PROBATION SERVICES				
	YES	NO	N/A	COMMENTS
Probation Officers	X	☐	☐	Youth without an assigned probation officer are assigned one before their detention hearing. Caseloads are not specialized and include juveniles and adults, Secure Track, Electronic Monitoring, Wraparound, and general supervision. The department does not have a dedicated officer for foster or unhoused youth.
Caseload Ratios	☐	X	☐	The inspection team was unable to obtain this information.



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Services Provided to outh in Custody	X	☐	☐	Probation officers are responsible for approving visitors and callers, communicating with families, and attending meetings, including educational transition planning. They coordinate services, assessments, release and reentry planning, communicate with system partners and service providers, prepare behavioral summaries and court reports, make formal recommendations, and supervise youth upon release. They also ensure youth have reasonable access to the services, supports, and resources needed to comply with the terms and conditions of probation.
Pre Adjudication Services	☐	X	☐	Youth experiencing their first pre adjudication detention in Juvenile Hall are not eligible to receive therapeutic or supportive services from the Probation Department upon release.
Reentry Support: Basic Needs	☐	X	☐	There is no standardized system, dedicated resources, or contracts in place to assist youth with basic needs upon release, such as transportation to school, court ordered appointments, and mental health therapy.
Electronic Monitoring Program -EMP	X	☐	☐	Youths are monitored by admissions staff. Probation officers track compliance and report the information to the court.
Community Care Program	X	☐	☐	Youth may be court ordered to participate in the Community Care Program post adjudication. Weekend participants are tasked with landscaping and cleanup projects on county owned property surrounding the Juvenile Hall and along Paul Scannell Drive. Transportation is not provided, and the lack of public transportation options creates significant barriers for youth and their families.
Comments	Many youth enter the juvenile justice system with unresolved trauma, untreated mental			



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	health needs, and unmet basic support needs, which youth and families often lack the resources to address. Adjudication can take months, during which youth are often not eligible for these services and supports. Providing services based on youth needs rather than case status would support timely intervention, address underlying needs, reduce recidivism, and strengthen public safety outcomes.
Recommendations	Caseload: Establish specialized probation caseloads, including dedicated expertise for high need populations, to ensure youth are matched with officers based on need, training, and experience. Pre Adjudication Services: Provide pre adjudication services and basic needs supports to youth and families during the critical period in which they are not otherwise eligible services. Reentry Support-Basic Needs: There is no standardized system, dedicated resources, or contracts in place to assist youth with basic needs upon release, such as transportation to school, court ordered appointments, and mental health therapy.

LOCKED CONFINEMENT				
	YES	NO	N/A	COMMENTS
Daily Locked Confinement				During this inspection period, youth spent between 12.5 and 14.5 hours per day locked in their cells.
Confinement Schedule	X	☐	☐	Youth are locked in their cells:: • From 8:00-8:30 pm to 7:30–8:00 am each day. • From 5:00 - 6:00 pm each day to provide breaks for staff.



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				When transitioning from movements and activities.
Conditions Increasing Locked	X	☐	☐	Additional locked confinement occurs due to staffing shortages, shift changes, medical emergencies, and security incidents and codes ⁶ .
Recommendations	Reduce Periods of Locked Confinement - Ensure adequate staffing to manage routine schedules and foreseeable events without unnecessarily confining youth to their cells. - Extend the programming day to 9:00 p.m. and			

TRAUMA INFORMED CARE				
	YES	NO	N/A	COMMENTS
Are youths screened for Adverse Childhood Experiences (ACE)?	☐	X	☐	
Are staff trained on Adverse Childhood Experiences (ACE)?	☐	X	☐	Staff report a lack of training on complex childhood trauma and child development. The need for training in these areas has been repeatedly identified by staff and remains among the top requests across inspection cycles.

⁶A “code” is an emergency radio call requesting immediate staff assistance in response to a safety threat. During a code, youth are required to lie face down with their hands behind their backs, remain silent, and await staff instruction. Once the situation is resolved, youth are returned to their cells while staff attend to the involved youth and document the incident. This process can take anywhere from minutes to hours.



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Housing Unit Assignments	☐	X	☐	Youth of different genders may be housed together on the same units, raising considerations related to privacy, safety, and gender responsive care.
Gender-Responsive Programming	☐	X	☐	
Rape Trauma Services	☐	X	☐	Discontinued in 2021
Trauma-Informed Care: Staff Training	X	X	☐	Adult probation officers work overtime in the facility and it is unclear if they have received training on how to provide trauma informed care to incarcerated youth. Additionally, staff have requested additional training on impacts of complex trauma on child development.
Recommendations	Adverse Childhood Experiences (ACE) ○ Screening: Ensure youth are screened for Adverse Childhood Experiences (ACEs) and that results are used to guide individualized treatment, supports, and trauma informed interventions. ○ Staff Training: Provide ongoing, evidence based training for all staff who interact with youth inside the facility on complex childhood trauma, child and adolescent development, and trauma informed practices aligned with current research and best practices. Housing Unit Assignments: Provide separate housing for youth of different genders to support privacy, safety, trauma informed care, and gender responsive programming and services.			



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	Gender-Responsive Programming: Develop and implement gender responsive, trauma informed programming and services tailored to the unique needs of youth of different genders.
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CULTURALLY AND LINGUISTICALLY APPROPRIATE				
	YES	NO	N/A	COMMENTS
Equitable Language Services	☐	X	☐	Grievance forms and legal notices mailed to parents are issued only in English, creating language access barriers for Spanish speaking families, who make up a significant portion of the population. Spanish speaking parents also report limited or ineffective communication with their child’s probation officer.
Meals and Food	☐	X	☐	The inability to access culturally appropriate nutrition and dietary services is a form of social inequity. Meal planning and preparation should be viewed through a culturally competent lens.
Personal Care and Grooming	☐	X	☐	Ethnically appropriate hygiene products are not being provided. It is unclear if hair cuts are being offered on a consistent basis or if hair braiding is even being offered at all.
Books and Reading Materials	X	☐	☐	Increase the availability of age appropriate books and reading materials across multiple formats, languages, and reading levels, to support literacy development and youth with learning challenges.
Observances	X	X	☐	The facility celebrated Cinco de Mayo with Mexican food, music, and a car show. However, the discontinuation of Asian American and Pacific Islander Heritage Month programming raises concerns regarding the consistent recognition and celebration of the diverse



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				cultures represented within the youth population.
Recommendations	• Equitable Language Services ○ Offer grievance forms in Spanish ○ Provide all court related and legal notices in English and Spanish ○ Ensure parents can effectively communicate with their Probation Officers • Meals: Ensure dietary services meal planning and dietary services are culturally competent and responsive to the cultural, religious, and dietary needs of youth. • Personal Care and Grooming: Ensure access to culturally appropriate hygiene products and hair care services as required by the California Youth Bill of Rights. Books and Materials: Expand access to culturally and linguistically appropriate books and reading materials across multiple formats, languages, and reading levels, including graphic novels, illustrated texts, and multilingual audiobooks. • Observances: Provide consistent, culturally responsive programming that recognizes and celebrates the diverse cultures, identities, and cultural and heritage observances represented within the facility.			

LGBTQI+

REVIEWED	YES	NO	N/A	COMMENTS
Classification and Housing Unit Assignments	☐	X	☐	
Clothing and Hygiene	X	☐	☐	



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Institutional Forms: Gender Neutral Language	X	☐	☐	
Gender Neutral Restrooms and Showers	X	☐	☐	
LGBTQ Inclusive Healthcare	X	☐	☐	Provided by Correctional Health
LGBTQ Inclusive Literature and Media	X	☐	☐	
Celebrations & Observances	☐	X	☐	

TECHNOLOGY				
	YES	NO	N/A	COMMENTS
Tablets				Legal Research: The California Department of Corrections utilizes law library kiosks to provide access to online legal materials and legal research. The Commission recommends exploring whether similar access could be integrated into the contracted services currently being provided by Orijin on the tablets.
Desktop Computers	X	☐	☐	The programming rooms on Forest 2 had one desktop computer and two on Forest 3



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Internet Services and Security	X	☐	☐	Probation Department - Comcast provides internet services to the facility. - Software limits youth access to websites. - Youth who are participating in college courses require alternative software as it blocks links provided by their professors to access the content and videos for course assignments, projects, and adequate prepare for exams. School Department - The County Office of Education administers their own separate internet system(s) and software programs. The software is designed for high school students and youth under 18. - During this inspection period, it came to light that the SMCOE system had been compromised for over a year without being detected.
Telephones	X	☐	☐	There is one cordless telephone available in each housing unit to make confidential telephone calls.
MP3 Equipment	X	☐	☐	MP3's are not consistently made available to youth. Forest 3 had been without them for almost a year. The MP3 devices, headphones, and charging stations were donated by members of the commission and are stored in office directly behind the staff desk on each unit.
TV, Audio and Video Equipment	X	☐	☐	The housing units have a television, DVD player, speakers, and video game consoles that have been donated by community based organizations.



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Fitness Trackers: Running Program	X	☐	☐	At the request of ISM Ramirez, members of the Commission purchased fitness trackers, running shoes, and water bottles to support a youth running program. The program has since been discontinued, and the whereabouts of the fitness trackers and water bottles are unaccounted for.
Recommendations				Technology Inventory: Establish and maintain an inventory tracking system for all technology and equipment to ensure accountability, functionality, and

PHYSICAL INSPECTION

FACILITY INTERIOR AND EXTERIOR

	YES	NO	N/A	COMMENTS
Facility Utilization	X	☐	☐	• The Elm housing units are not currently open. • The multi-sensory de-escalation room and the facility's designated mental health unit remain closed. • Multiple offices in the administrative building, kitchen area, and school building are not being utilized.
Landscaping and Gardens	X	☐	☐	The "Garden Program" program involves youth maintaining the facility's interior landscaping, an activity that appears closely tied to routine facility maintenance rather than solely enrichment or therapeutic programming.
Outdoor Lighting	☐	☐	X	Inspection occurred in daylight.



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Fencing and Gates	X	☐	☐	
Walkways, Pavement, and Concrete	X	☐	☐	No issues noted
Gutters, Roof, and Drains	X	☐	☐	
Exterior Paint and Windows	X	☐	☐	
Recreation Equipment	X	☐	☐	The nets on the basketball hoops and soccer goal nets are damaged beyond repair and need to be replaced.
Outdoor Seating	☐	X	☐	
Recommendations	Outdoor Recreation Space General: Maximize use of the outdoor recreation space to support physical activity, outdoor programming, and access to fresh air and sunlight. Recreation Equipment: Replace the basketball hoop and soccer goal nets. Seating: Install heat resistant seating such as picnic tables to provide much needed seating, outdoor programming, and expand opportunities for youth outside of their housing units. Landscaping: Ensure youth participation in the garden program is paired with identifiable educational, therapeutic, vocational, or other youth centered benefits.			



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ADMINISTRATION BUILDING				
	YES	NO	N/A	COMMENTS
Lobby: Carpet and Furnishings	X	☐	☐	Furniture was clean and in good condition.
Lobby: Restrooms	X	☐	☐	The restroom in the lobby is very clean, in good working order, and equipped with adequate supplies.
Lobby: Reception Desk	X	☐	☐	The main lobby of the Juvenile Hall is not staffed. There is a telephone on the main desk that visitors use to call into Admissions to ask for assistance.
Lobby: Doors and Lighting	X	☐	☐	Lighting is dim, which can give visitors the impression that the building is closed.
Lobby Signage and Notifications	X	☐	☐	OYCR Youth Bill of Rights pamphlets are available in English and Spanish. The posters on the back wall are outdated (10+ years old). A television is affixed to the wall that displays information in a continuous loop. The date and time need to be reset on the television..
Lobby: Lockers	X	☐	☐	There is a bank of 24 lockers in the lobby. Lockers are clean and easy to operate.
Visiting Room: Conference Room	☐	X	☐	The team did not access this room.



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Visiting Room: Main	X	☐	☐	The room contains four small visiting tables, one larger table with plastic chairs, and a table with games donated by the Commission. Despite demand for family visitation, the room is underutilized. The space should be maximized to expand family engagement and visitation opportunities.
Visiting Room: Family	X	☐	☐	There is a room adjacent to the main visiting room that is used for family visiting and youth with children. The room was cluttered and disorganized, and the furnishings were sparse, institutional, and not appropriate for a family centered space.
Confidential Visiting Rooms	X	☐	☐	
Visiting Room: Restrooms	X	☐	☐	The gender neutral restrooms were closed.
Visiting Room: Water Fountain	X	☐	☐	The water temperature is lukewarm and the unit operates with excessive noise. We recommend having Public Works inspect and service the unit to ensure it is functioning properly.
Visiting Room: Temperature	X	☐	☐	The room was hot as the air conditioning systems at the Youth Services Center does not consistently function properly.
Admissions: Bathroom	X	☐	☐	



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Admissions: Shower	X	☐	☐	
Admissions: Holding Cells	X	☐	☐	
Admissions: Legal / Professional Visiting Rooms	X	☐	☐	The rooms are furnished with a table and chairs that are clean and functional.
Admissions: Law Enforcement Entrance	X	☐	☐	
Hallway(s)	X	☐	☐	The main hallway is decorated with artwork created by the youth. We recommend relocating the artwork to the visiting room or main lobby where it can be meaningfully experienced by youth, families, and visitors, rather than remaining in a restricted area primarily viewed by staff and authorized personnel.
Medical and Dental Offices	X	☐	☐	Very clean and well organized.
Signage and Notices	X	☐	☐	1. There are sexual abuse prevention posters and various Ombudsmen and Youth Bill of Rights posters on the wall.
Administration: Conference Rooms	☐	X	☐	The team was not provided access to this room.
Control Room	☐	X	☐	The team was not provided access to this room.



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Recommendations	How to Help Your Child After Arrest Parent Handbook: The original Board of Supervisors funded printing maintained by the Probation Department is nearly exhausted. The handbook is currently being updated in English and Spanish, and additional Board of Supervisors funding will be needed to support printing of the revised edition upon completion. Administrative Building-Air Conditioning Service the air conditioning system and verify settings to ensure proper operation throughout the building. Administrative Hallway Move the youth artwork from the restricted area to the visiting room or main lobby to ensure it is experienced by youth, families, and visitors, not just staff and authorized service providers. Visiting Rooms ● Main Visiting Room: Increase visitation capacity through additional tables and seating to allow more simultaneous visits and improve access for families whose schedules are constrained by work, childcare, transportation, and other family obligations. ● Family Visiting Room: Clean and organize the family visiting room and provide more appropriate furnishings for a family centered space. ● Water Fountain: Have Public Works inspect and service the water fountain to address the temperature and excessive noise issues. Lobby- Juvenile Hall ● Keep lights on on during business hours ● Remove or replace outdated posters notices on back wall by lockers.
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INTERIOR OF LOCKED FACILITY

HOUSING UNIT

	YES	NO	N/A	COMMENTS
General Description	X	☐	☐	The housing units are prison like in design, with two tiers of cells positioned along the perimeter. A central common area with steel tables and stools serves as the primary space for meals, programming, and group activities. The units contain common showers, kitchenette, a programming room, utility closet, a water fountain, and a ping pong table. A shared staff office and pay room adjoin the Forest 2 and Forest 3 housing units. Laundry is stored in shared hampers in the common area. Portable ovens and refrigerators are located at the entrance of each unit. Each unit has an adjoining concrete patio with a basketball hoop.
General Condition and Cleanliness	X	☐	☐	The housing units are showing signs of age and wear. The carpeting is heavily soiled, paint is peeling, and the overall condition of the units reflects ongoing maintenance and cleanliness concerns, with Forest 3 exhibiting a more advanced state of deterioration.
Notifications and Signage	X	☐	☐	Meal calendars and programming schedules were missing from both units.
Program Rooms	X	☐	☐	Programming Rooms need to be updated and have additional lightning. The rooms lack any natural sunlight.



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Dining Tables	X	☐	☐	Youth eat their meals sitting at steel tables with built in stools that are bolted to the floor.
Common Room Furniture	X	☐	☐	San Mateo County stands alone among Bay Area juvenile detention facilities in its continued use of exclusively hard plastic institutional furnishings. The furnishings create a harsh, prison like environment, offer little physical comfort, and are fundamentally inconsistent with Title 15's emphasis on normalized, trauma informed, and developmentally appropriate environments..
Flooring and Carpets	X	☐	☐	The carpeting on both housing units is heavily stained and damaged beyond repair, with Forest 3 in a more advanced state of filth and deterioration. Years of preparing and eating meals on the housing units have taken a toll on the carpeting. Long delays and the project's continued stagnation in procurement continue to subject youth to unsanitary conditions, as they are required to lie face down on the carpeting during codes. This presents clear health and safety concerns. The project is not slated to begin until late 2027.
Walls and Stairways	X	☐	☐	The walls have peeling paint, scuffing, and visible signs of wear. The concrete stairways are heavily soiled and in need of pressure washing.
Windows, Doors, and Lighting	X	☐	☐	Windows needs cleaning, Doors need painting, Main doors inside both housing units need repainting.
Showers	X	☐	☐	The showers are in need of a professional power washing. Showers number 3 & 4 need the water temperature adjusted.



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				They do not get hot enough.
Indoor Recreation	X	☐	☐	Ping pong tables, board games, puzzles, knitting, reading, and drawing activities are available on the housing units. Bookcases containing donated paperback books are located on each housing unit.
Portable Food Service Equipment	X	☐	☐	- There is a refrigerator and portable oven/warming equipment located near the entrance of each housing unit. The ovens are dirty and need to be deep cleaned. - Condiments, utensils, and napkins are stored in portable multi-drawer plastic filing cabinets.
Kitchenette	X	☐	☐	The kitchen has a full size refrigerator, sink, microwave, countertop, and cabinets storage cabinets.
Drinking Water	X	☐	☐	A water fountain and an Igloo water cooler provide drinking water to youth.
First Aid, Emergency, and Evacuation Supplies:	X	☐	☐	Kept in the staff office behind the staff desk.
Fire Extinguishers and Alarms	X	☐	☐	Fire extinguishers are kept in the back offices behind the staff desk. All systems are hard wired.
Security Cameras	X	☐	☐	Staff reported that all cameras were operational at the time of our inspection..



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Temperature and Air Circulation	X	☐	☐	The heating and air conditioning systems are controlled remotely and appear to be improperly set or not functioning properly. The door to the adjacent patio is typically open, allowing for additional air circulation. The housing units had a noticeable burnt food odor..
Utility Closet	X	☐	☐	Cleaning supplies, including cleaners, mops, brooms, sponges, and rags, are stored in a room with a wash basin. A locked metal gate separates and secures the rear storage area.
Recommendations	Carpet and Flooring: Request the Board of Supervisors prioritize project to expedite the removal of the carpeting and installation of laminate flooring on the Forest 2 and Forest 3 housing units to address ongoing unsanitary conditions and serious health, safety, and liability concerns. Furnishings: Replace existing hard plastic dayroom furnishings with modern institutional furnishings that align with Title 15’s emphasis on normalized, trauma informed, and developmentally appropriate environments. The Commission recommends that Probation visit the San Francisco JJC to see how its housing units successfully balance these principles with facility safety and security needs. Paint: Repair walls and paint the interior of each housing units Program Rooms: Improve lighting in both programming rooms to address inadequate illumination and support a more suitable environment for programming, education, and therapeutic activities. Showers: ○ Water does not get hot in the front showers on F3 ○ Professionally power washshowers.			



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INDIVIDUAL CELLS				
	YES	NO	N/A	COMMENTS
General Description	X	☐	☐	Youth are currently housed individually in both single and double occupancy cells. The cells are constructed of white cement walls and gray concrete floors. Beds are built into the wall and consist of metal slabs fitted with foam mattresses. A stainless steel combination toilet/sink unit is located near the entrance of each cell, and a small desk and stool are affixed to the wall and floor. Each cell contains an obscured window but lacks built in shelving or designated personal storage. Each housing unit also includes a specialized ventilation cell used for quarantine purposes and an ADA compliant cell.
Cell Doors	X	☐	☐	The metal cell door includes a meal slot and a narrow rectangular viewing window that allows visibility into the cell. Youth may temporarily cover the window with a paper notice stating they are using the restroom or with a piece of fabric while using the toilet. A barcode affixed to each cell door is scanned by staff every 15 minutes during safety checks. Each cell is equipped with an emergency call light. Nonemergency calls are addressed during these routine checks.
Toilet Sink Combination	X	☐	☐	Each cell contains a stainless steel toilet/sink combination unit, with the sink mounted directly above the toilet.



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Toilet Sink Combination	X	☐	☐	Each cell contains a stainless steel toilet/sink combination unit, with the sink mounted directly above the toilet.
Beds	X	☐	☐	The beds are standard institutional metal beds attached to the wall. The institutional foam mattresses are unusually thin, measuring only approximately 4 to 5 inches thick, and are covered in a plastic type material. When tested, the hard base of the bed could be felt through the mattress. The Commission continues to urge the Probation Department to invest in mattresses that provide adequate cushioning and support to protect youths' backs and bodies from the hard bed surface. Mattress related back pain has consistently been among the most common medical complaints reported by youth. Each youth is issued a pillow, along with standard institutional sheets and blankets.
Desk	X	☐	☐	The desk is cemented to the wall, and the stool is bolted to the concrete floor. The fixed spacing between the desk and stool is awkward for some youth, requiring them to lean forward in order to use the desk
Personal Storage	☐	X	☐	Individual cells lack designated personal storage, requiring youth to store clothing and personal belongings on beds, floors, window sills, and atop the combined toilet/sink unit. Probation reported that the shelving units (pictured here) were ordered in 2022; however, there is currently no estimated timeline for their delivery or installation.



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Safety Mirror	X	☐	☐	Replace the safety mirrors in the cells. The mirrors are heavily scratched, damaged beyond repair, and nonfunctional, preventing youth from seeing their reflection. Despite serving a substantially larger youth population before the pandemic, the mirrors have never been replaced.
Lighting and Windows	X	☐	☐	
Temperature: Room	X	☐	☐	Youth report that the cells are excessively hot in the summer and cold in the winter. The air conditioning system does not appear to be functioning properly. This appears to be a facility wide issue affecting the broader Youth Services Center, not just the Juvenile Hall.
Air Circulation	X	☐	☐	Unable to test the air circulation for any meaningful length of time with the door closed.
Other: Pencils	X	☐	☐	Short institutional pencils (golf pencils) are issued to each youth and stored in labeled Ziploc bags posted behind the staff desk. Youth must return their pencils by 8:00 p.m. each evening..
Recommendations	Personal Storage: Expedite the procurement process to allow for the timely installation of institutional of the shelving in each cell that has been stuck in procurement for 4+years. Safety Mirrors: Replace mirrors that are scratched, damaged beyond repair.			



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	Mattresses: 4”- 5” foam mattresses are insufficient and should be replaced or doubled to provide adequate orthopedic support. Painting: Interior of cells and cell doors need to be painted.
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SCHOOL BUILDING				
REVIEWED	YES	NO	N/A	COMMENTS
Administrative Offices	X	☐	☐	
Counseling Office	X	☐	☐	The room’s bright, colorful setting creates an engaging environment that encourages learning and student engagement.
Classrooms	X	☐	☐	Please refer to the <u>2025 JJDCP Educational Evaluation Report</u>
Computer Lab	X	☐	☐	High School students did not have access to the computer lab during this inspection period. It was serving as a general learning space for college students up until May of 2025. College students now participate in online classes on their housing unit.
Multi-Purpose Room	X	☐	☐	This large, fully furnished classroom contains substantial open floor area, natural light, and sufficient space to support classroom instruction, workstations, and project based learning. Although not in use during the inspection, this underutilized space would be well suited as a dedicated learning space for our college students. The space could support a science lab, art stations, credit recovery, tutoring, parenting classes, and student support services, including alternative testing and behavioral



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				intervention site for special education students. It is also an ideal meetings space for Individualized Education Program (IEP), Transition Planning, Multi Disciplinary Team (MDT) meetings, and parent teacher conferences.
Main Library	X	☐	☐	The librarian manages the library and has a budget for books and materials. Youth have intermittent access to the library.
Gymnasium	X	☐	☐	The gymnasium contains a basketball court, portable volleyball nets, bleachers, a water fountain, and an enclosed exercise room with carpeted flooring. Nearly 20 years old, the gymnasium is showing visible signs of age and wear. The walls exhibit peeling paint, heavy scuffing, and accumulated dirt. Gymnasium flooring requires specialized care and routine maintenance to preserve its finish, safety, performance, and longevity. The bleachers also require routine cleaning and maintenance to preserve their condition, functionality, and lifespan.
Recommendations	Multi Purpose Room: The Commission recommends utilizing this underused multi purpose room as a dedicated learning and student support space for high school and college students, science and art instruction, credit recovery, tutoring, parenting classes, an alternative testing site, behavioral interventions for special education students, and meetings including IEPs, transition planning, MDTs, and parent teacher conferences. Law Library: Youth do not currently have access to a law library. The Commission recommends adding the following resources to the main library: <i>Thomson Reuters California Juvenile Courts Practice & Procedure</i>, <i>Seiser & Kumli on California Juvenile Courts Practice & Procedure</i>, the <i>California Welfare & Institutions Code</i>, <i>California Penal Code</i>, <i>California Education Code</i>, <i>California Vehicle Code</i>, Nolo Press guides on immigration, family law, and legal research, legal dictionaries, and <i>The Evolution of the</i>			



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	<i>Juvenile Court: Race, Politics, and the Criminalizing of Juvenile Justice</i> by Professor Barry C. Feld. Gymnasium: ○ Walls: The interior walls need to be cleaned and thoroughly painted. ○ Flooring: The gymnasium flooring requires care and maintenance to preserve its finish, safety, performance, and longevity ○ Bleachers: Professional cleaning and Properly cleaned and maintained.
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KITCHEN AND DINING HALL

	YES	NO	N/A	COMMENTS
Kitchen	X	☐	☐	The facility houses a large, state of the art commercial kitchen designed for institutional scale meal production. The kitchen contains an extensive collection of commercial grade appliances, equipment, and infrastructure, including industrial stoves, ovens, mixers, dishwashing systems, food preparation stations, refrigeration and freezer units, dry storage, stainless steel workspaces, and other specialized culinary equipment necessary to support high volume, on site fresh meal preparation and service.
Food Storage	☐	☐	X	The kitchen predominantly stores prepared meals for probation staff. Staff order their meals online and the Sheriff's Department delivers them to the facility, where they are stored in the kitchen. Meals are provided free of charge as an employee benefit, as staff are not allowed to leave the facility for meal breaks. It is important to note that the meals provided to staff far exceed those provided to the children and youth in the facility in terms of quality, portion size, preparation, and meal selection.



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Offices	☐	☐	X	There are several unused offices adjoining the kitchen that were previously occupied by dietary and nutrition staff.
Dining Hall	X	☐	☐	Youths eat their meals in the housing units. The dining hall is adjacent to the commercial kitchen, and is currently being used as a multi-purpose room. The room has floor-to-ceiling windows that provide natural light, and is equipped with a large screen, audio /video equipment, a podium, and stacks of plastic chairs. The space also includes at least two restrooms. The space is used as a multi-pupose room to host Christian church services on Sunday mornings, intermittent Career Technical Education courses, and other special programming and facility events.
Restrooms	X	☐	☐	There are two sets of restrooms in located in the Dining Hall
Comments	The facility features a state of the art commercial kitchen that once prepared fresh meals for up to 180 youth each day, yet it has remained unused for four years. Despite serious concerns regarding the quality, selection, and adequacy of meals provided by the Sheriff's Department via the Maguire Correctional Facility, the continued use of portable ovens, and tens of thousands of dollars in floor damage caused by meal preparation on housing units, the County spends over \$1.7 million annually to feed an average daily population of approximately 30 youth.			



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**Signatures of San Mateo County Juvenile Justice Commissioners who conducted this inspection
and preparing this report**

A handwritten signature in blue ink, appearing to be "JR" followed by a stylized flourish.

Johanna Rasmussen

Date: May 18, 2026

A handwritten signature in blue ink, appearing to be "Paul Bocanegra" in a cursive script.

Paul Bocanegra

Date: May 18, 2026

Shakeel Ali

Shakeel Ali

Date: May 18, 2026

Asteris Ling

Asteris Ling

Date: May 18, 2026



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ATTACHMENTS

1. OYCR Notice of Complaint Closure: Strip Search Complaint Substantiated
2. Title 15: §1360 Searches
3. Search Authorization Form: Juvenile Hall
4. PREA Standards for Juvenile Facilities
5. Institutions Policies: Youth Grievances, Incident Reports, Youth Discipline and Due Process Policies



Office of Youth and Community Restoration

Ombudsperson Division
California Health & Human Services Agency

Johanna Rasmussen
Commissioner & JJDPC Chair
Juvenile Justice Delinquency Prevention Commission

April 30, 2025

Re: Notice of Complaint Closure
Via email: johannasmcjustice@gmail.com

Dear Commissioner Rasmussen,

On February 18, 2025, you submitted a complaint to the OYCR Ombudsperson in relation to strip searches. Specifically, you alleged that multiple youth within the San Mateo County Youth Services Center were strip-searched on February 15, 2025.

Allegation: Youth were strip-searched without individualized reasonable suspicion.

Finding: Substantiated

On February 18, 2025, the OYCR Ombudsperson sent the San Mateo County Probation Department a notification letter that we were conducting an impartial investigation regarding the above allegation. This letter requested the following records:

- San Mateo County's strip search policies and procedures
- Any incident reports leading to a strip search on February 15, 2025
- Records relating to any strip searches on February 15, 2025, including records reflecting the specific and articulable facts supporting the search of each youth who was strip searched.
- Grievances submitted by any youth relating to searches on February 15, 2025, including any response to those grievances.

On February 27, 2025, we received the requested records and conducted a comprehensive review. These records confirmed one youth received a modified strip-search and the remaining 11 youth were strip-searched. Based on this information, we initiated an unannounced investigative site visit on March 20, 2025, to speak with youth involved in this incident. We interviewed a total of 10 youth. Then, our office conducted a thorough analysis of relevant laws

OYCR Ombudsperson
1215 O Street, MS-08
Sacramento, CA 95814

Helpline: 1 (844) 402-1880
Email: OYCRombuds@chhs.ca.gov
Website: www.oycr.ca.gov

and statutes pertaining to strip searches and triaged this information with youth interviews and our records review.

Based on our investigation, we determined that while the Department had reason to suspect drugs may have been on the unit and to take steps to search for them, there was not individualized reasonable suspicion sufficient to support the strip search of each youth, per the department's own policy. While current California laws authorize facility administrators to utilize strip-searches, the law requires individualized reasonable suspicion to be documented (CA Penal Code § 4030-4031). Per our review of relevant records, we determined that these strip searches were conducted despite individualized reasonable suspicion not being documented, as required by state law and county policy.

We recognize the proactive steps the Probation Department has taken after February 15, 2025, to implement alternative contraband search methods, including the use of K-9 units for room searches and unit searches of indoor and outdoor common areas.

On April 7, 2025, we sent the San Mateo County Probation Department a closure letter notifying them of our findings, our investigation, and we made the following recommendations:

- The Probation Department should review and adhere to their own policy of documenting individualized reasonable suspicion whenever a strip search is conducted.
- The department should document clearly “the reasons less intrusive methods of searching were not used or were insufficient.”
- We recommended the department conduct a thorough review of internal San Mateo Probation department strip search policy, and to address two items in particular:
 - Amend language on page 59-60 that says “staff shall respect youth preference regarding the gender of the staff member who conducts any search of the youth” so that new language specifies which strip searches require staff of the same sex as the youth being searched (Penal Code § 4030; Penal Code § 4031).
 - On page 18, the definition of strip search “includes monitoring a youth while the youth is showering or changing clothes and the youth’s underclothing, buttocks, genitalia, or female breasts are visible to the monitoring member.” This is also a strip search which also requires individualized reasonable suspicion. A reason must be documented and the staff member conducting the search must be documented to respect youth’s right to privacy from unreasonable searches.

- We recommended staff be more intentional about managing group communication dynamics.

This matter has been closed. If you have any questions, please feel free to contact the Ombudsperson Division at (844) 402-1880 or me at Brayan.Pelayo@chhs.ca.gov

Regards,



Brayan Pelayo
Ombudsperson Liaison
Ombudsperson Division, Office of Youth and Community Restoration
California Health and Human Services Agency

Title 15

§ 1360. Searches.

The facility administrator shall develop and implement written policies and procedures governing

the search of youth, the facility, and visitors. Policies and procedures shall provide that:

(a) Searches shall be conducted to ensure the safety and security of the facility, public, visitors youth, and staff.

(b) Searches shall be conducted in a manner that preserves the privacy and dignity of the person being searched, and shall not be conducted for harassment or as a form of discipline or punishment.

(c) Strip searches and visual or physical body cavity searches shall comply with Penal Code Section 4030.

(d) Physical body cavity searches shall only be conducted by a medical professional.

(e) Any youth held after a detention hearing shall only be strip searched with prior approval of a supervisor when there is reasonable suspicion based on specific and articulable facts to believe that youth is concealing contraband. The reasonable suspicion shall be documented.

(f) Searches of transgender and intersex youth shall comply with Section 1352.5.

(g) Cross-gender pat-down searches and strip searches are prohibited except in exigent circumstances or when conducted by a medical professional. Such searches must be justified and documented in writing.

Note: Authority cited: Sections 210 and 885, Welfare and Institutions Code. Reference: Section 209, Welfare and Institutions Code.



Youth Services Center Search Authorization Form

Name of youth:

Date:

To be completed by Admissions staff

A youth shall only be strip-searched if one or more of the following are true (check all that apply):

- ☐ This youth is charged with, being held on, or convicted of a felony.
- ☐ This youth is charged with, being held on, or convicted of a misdemeanor charge involving violence, weapons, or drugs.
- ☐ This youth is currently on probation with search and seizure orders.
- ☐ There is a reasonable suspicion that this youth is concealing drugs, contraband, or a weapon.

Staff must obtain the signature of an ISM prior to conducting a strip search.

To be completed by ISM-OD

Describe the specific and articulable facts and circumstances upon which the reasonable suspicion determination was made:

Type of search authorized: ☐ Visual search ☐ Clothing

search Incident Report generated? ☐ Yes ☐ No

ISM signature:

Date:

To be completed by Admissions staff

Time:

AM/PM

Date:

Place:

Staff name:

Staff sex: ☐ Male ☐ Female

Results of search, including a list of any items removed from the person searched:

Staff signature:

Reference: San Mateo County Probation Department, Institutions Division, Policy and Procedure Manual

N:\Inst Units Folders\Admissions\Forms\Search Authorization Form.docx

01-01-2019

PRISON RAPE ELIMINATION ACT



JUVENILE FACILITY STANDARDS

United States Department of Justice Final Rule

**National Standards to Prevent,
Detect, and Respond to Prison Rape
Under the Prison Rape Elimination Act (PREA)**

**28 C.F.R. Part 115
Docket No. OAG-131
RIN 1105-AB34
May 17, 2012**

PRISON RAPE ELIMINATION ACT NATIONAL STANDARDS – JUVENILES

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§ 115.5 General definitions.

For purposes of this part, the term—

Agency means the unit of a State, local, corporate, or nonprofit authority, or of the Department of Justice, with direct responsibility for the operation of any facility that confines inmates, detainees, or residents, including the implementation of policy as set by the governing, corporate, or nonprofit authority.

Agency head means the principal official of an agency.

Community confinement facility means a community treatment center, halfway house, restitution center, mental health facility, alcohol or drug rehabilitation center, or other community correctional facility (including residential re-entry centers), other than a juvenile facility, in which individuals reside as part of a term of imprisonment or as a condition of pre-trial release or post-release supervision, while participating in gainful employment, employment search efforts, community service, vocational training, treatment, educational programs, or similar facility-approved programs during nonresidential hours.

Contractor means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency.

Detainee means any person detained in a lockup, regardless of adjudication status.

Direct staff supervision means that security staff are in the same room with, and within reasonable hearing distance of, the resident or inmate.

Employee means a person who works directly for the agency or facility.

Exigent circumstances means any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.

Facility means a place, institution, building (or part thereof), set of buildings, structure, or area (whether or not enclosing a building or set of buildings) that is used by an agency for the confinement of individuals.

Facility head means the principal official of a facility.

Full compliance means compliance with all material requirements of each standard except for *de minimis* violations, or discrete and temporary violations during otherwise sustained periods of compliance.

Gender nonconforming means a person whose appearance or manner does not conform to traditional societal gender expectations.

Inmate means any person incarcerated or detained in a prison or jail.

Intersex means a person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

Jail means a confinement facility of a Federal, State, or local law enforcement agency whose primary use is to hold persons pending adjudication of criminal charges, persons committed to confinement after adjudication of criminal charges for sentences of one year or less, or persons adjudicated guilty who are awaiting transfer to a correctional facility.

Juvenile means any person under the age of 18, unless under adult court supervision and confined or detained in a prison or jail.

Juvenile facility means a facility primarily used for the confinement of juveniles pursuant to the juvenile justice system or criminal justice system.

Law enforcement staff means employees responsible for the supervision and control of detainees in lockups.

Lockup means a facility that contains holding cells, cell blocks, or other secure enclosures that are:

- (1) Under the control of a law enforcement, court, or custodial officer; and
- (2) Primarily used for the temporary confinement of individuals who have recently been arrested, detained, or are being transferred to or from a court, jail, prison, or other agency.

Medical practitioner means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A “qualified medical practitioner” refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

Mental health practitioner means a mental health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice. A “qualified mental health practitioner” refers to such a professional who has also successfully completed specialized training for treating sexual abuse victims.

Pat-down search means a running of the hands over the clothed body of an inmate, detainee, or resident by an employee to determine whether the individual possesses contraband.

Prison means an institution under Federal or State jurisdiction whose primary use is for the confinement of individuals convicted of a serious crime, usually in excess of one year in length, or a felony.

Resident means any person confined or detained in a juvenile facility or in a community confinement facility.

Secure juvenile facility means a juvenile facility in which the movements and activities of individual residents may be restricted or subject to control through the use of physical barriers or intensive staff supervision. A facility that allows residents access to the community to achieve treatment or correctional objectives, such as through educational or employment programs, typically will not be considered to be a secure juvenile facility.

Security staff means employees primarily responsible for the supervision and control of inmates, detainees, or residents in housing units, recreational areas, dining areas, and other program areas of the facility.

Staff means employees.

Strip search means a search that requires a person to remove or arrange some or all clothing so as to permit a visual inspection of the person's breasts, buttocks, or genitalia.

Transgender means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

Substantiated allegation means an allegation that was investigated and determined to have occurred.

Unfounded allegation means an allegation that was investigated and determined not to have occurred.

Unsubstantiated allegation means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

Volunteer means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

Youthful inmate means any person under the age of 18 who is under adult court supervision and incarcerated or detained in a prison or jail.

Youthful detainee means any person under the age of 18 who is under adult court supervision and detained in a lockup.

§ 115.6 Definitions related to sexual abuse.

For purposes of this part, the term—

Sexual abuse includes—

- (1) Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and
- (2) Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer.

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;
- (7) Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

Sexual harassment includes—

- (1) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward another; and
- (2) Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Standards for Juvenile Facilities

Prevention Planning

§ 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.

- (a) An agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.
- (b) An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.
- (c) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

§ 115.312 Contracting with other entities for the confinement of residents.

- (a) A public agency that contracts for the confinement of its residents with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.
- (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

§ 115.313 Supervision and monitoring.

- (a) The agency shall ensure that each facility it operates shall develop, implement, and document a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:
 - (1) Generally accepted juvenile detention and correctional/secure residential practices;
 - (2) Any judicial findings of inadequacy;
 - (3) Any findings of inadequacy from Federal investigative agencies;
 - (4) Any findings of inadequacy from internal or external oversight bodies;
 - (5) All components of the facility's physical plant (including "blind spots" or areas where staff or residents may be isolated);
 - (6) The composition of the resident population;

- (7) The number and placement of supervisory staff;
 - (8) Institution programs occurring on a particular shift;
 - (9) Any applicable State or local laws, regulations, or standards;
 - (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
 - (11) Any other relevant factors.
- (b) The agency shall comply with the staffing plan except during limited and discrete exigent circumstances, and shall fully document deviations from the plan during such circumstances.
- (c) Each secure juvenile facility shall maintain staff ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances, which shall be fully documented. Only security staff shall be included in these ratios. Any facility that, as of the date of publication of this final rule, is not already obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph shall have until October 1, 2017, to achieve compliance.
- (d) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.311, the agency shall assess, determine, and document whether adjustments are needed to:
- (1) The staffing plan established pursuant to paragraph (a) of this section;
 - (2) Prevailing staffing patterns;
 - (3) The facility's deployment of video monitoring systems and other monitoring technologies; and
 - (4) The resources the facility has available to commit to ensure adherence to the staffing plan.
- (e) Each secure facility shall implement a policy and practice of having intermediate-level or higher level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each secure facility shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

§ 115.314 Reserved.

§ 115.315 Limits to cross-gender viewing and searches.

(a) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

(b) The agency shall not conduct cross-gender pat-down searches except in exigent circumstances.

(c) The facility shall document and justify all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches.

(d) The facility shall implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering a resident housing unit. In facilities (such as group homes) that do not contain discrete housing units, staff of the opposite gender shall be required to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

(e) The facility shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

(f) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

§ 115.316 Residents with disabilities and residents who are limited English proficient.

(a) The agency shall take appropriate steps to ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with residents who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities, including residents who have intellectual disabilities, limited reading

skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

(b) The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

(c) The agency shall not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under § 115.364, or the investigation of the resident's allegations.

§ 115.317 Hiring and promotion decisions.

(a) The agency shall not hire or promote anyone who may have contact with residents, and shall not enlist the services of any contractor who may have contact with residents, who—

(1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);

(2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or

(3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

(b) The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

(c) Before hiring new employees who may have contact with residents, the agency shall:

(1) Perform a criminal background records check;

(2) Consult any child abuse registry maintained by the State or locality in which the employee would work; and

(3) Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

(d) The agency shall also perform a criminal background records check, and consult applicable child abuse registries, before enlisting the services of any contractor who may have contact with residents.

(e) The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees.

(f) The agency shall also ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

(g) Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

(h) Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

§ 115.318 Upgrades to facilities and technologies.

(a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse.

(b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect residents from sexual abuse.

Responsive Planning

§ 115.321 Evidence protocol and forensic medical examinations.

(a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

(b) The protocol shall be developmentally appropriate for youth and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

(c) The agency shall offer all residents who experience sexual abuse access to forensic medical examinations whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.

(d) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

(e) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

(f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

(g) The requirements of paragraphs (a) through (f) of this section shall also apply to:

(1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in juvenile facilities; and

(2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in juvenile facilities.

(h) For the purposes of this standard, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

§ 115.322 Policies to ensure referrals of allegations for investigations.

(a) The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

(b) The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.

(c) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.

(d) Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in juvenile facilities shall have in place a policy governing the conduct of such investigations.

(e) Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in juvenile facilities shall have in place a policy governing the conduct of such investigations.

Training and Education

§ 115.331 Employee training.

(a) The agency shall train all employees who may have contact with residents on:

(1) Its zero-tolerance policy for sexual abuse and sexual harassment;

(2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;

(3) Residents' right to be free from sexual abuse and sexual harassment;

(4) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;

(5) The dynamics of sexual abuse and sexual harassment in juvenile facilities;

(6) The common reactions of juvenile victims of sexual abuse and sexual harassment;

(7) How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents;

(8) How to avoid inappropriate relationships with residents;

(9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and

(10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;

(11) Relevant laws regarding the applicable age of consent.

(b) Such training shall be tailored to the unique needs and attributes of residents of juvenile facilities and to the gender of the residents at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa.

(c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

(d) The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

§ 115.332 Volunteer and contractor training.

(a) The agency shall ensure that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

(b) The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents, but all volunteers and contractors who have contact with residents shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

(c) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

§ 115.333 Resident education.

(a) During the intake process, residents shall receive information explaining, in an age appropriate fashion, the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

(b) Within 10 days of intake, the agency shall provide comprehensive age-appropriate education to residents either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

(c) Current residents who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility.

(d) The agency shall provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills.

(e) The agency shall maintain documentation of resident participation in these education sessions.

(f) In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats.

§ 115.334 Specialized training: Investigations.

(a) In addition to the general training provided to all employees pursuant to § 115.331, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.

(b) Specialized training shall include techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

(d) Any State entity or Department of Justice component that investigates sexual abuse in juvenile confinement settings shall provide such training to its agents and investigators who conduct such investigations.

§ 115.335 Specialized training: Medical and mental health care.

(a) The agency shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in:

(1) How to detect and assess signs of sexual abuse and sexual harassment;

(2) How to preserve physical evidence of sexual abuse;

(3) How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and

- (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
- (b) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.
- (c) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.
- (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.331 or for contractors and volunteers under § 115.332, depending upon the practitioner's status at the agency.

Screening for Risk of Sexual Victimization and Abusiveness

§ 115.341 Obtaining information from residents.

- (a) Within 72 hours of the resident's arrival at the facility and periodically throughout a resident's confinement, the agency shall obtain and use information about each resident's personal history and behavior to reduce the risk of sexual abuse by or upon a resident.
- (b) Such assessments shall be conducted using an objective screening instrument.
- (c) At a minimum, the agency shall attempt to ascertain information about:
 - (1) Prior sexual victimization or abusiveness;
 - (2) Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse;
 - (3) Current charges and offense history;
 - (4) Age;
 - (5) Level of emotional and cognitive development;
 - (6) Physical size and stature;
 - (7) Mental illness or mental disabilities;
 - (8) Intellectual or developmental disabilities;
 - (9) Physical disabilities;
 - (10) The resident's own perception of vulnerability; and
 - (11) Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

(d) This information shall be ascertained through conversations with the resident during the intake process and medical and mental health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files.

(e) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents.

§ 115.342 Placement of residents in housing, bed, program, education, and work assignments.

(a) The agency shall use all information obtained pursuant to § 115.341 and subsequently to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse.

(b) Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged. During any period of isolation, agencies shall not deny residents daily large-muscle exercise and any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible.

(c) Lesbian, gay, bisexual, transgender, or intersex residents shall not be placed in particular housing, bed, or other assignments solely on the basis of such identification or status, nor shall agencies consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive.

(d) In deciding whether to assign a transgender or intersex resident to a facility for male or female residents, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems.

(e) Placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety experienced by the resident.

(f) A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration.

(g) Transgender and intersex residents shall be given the opportunity to shower separately from other residents.

(h) If a resident is isolated pursuant to paragraph (b) of this section, the facility shall clearly document:

(1) The basis for the facility's concern for the resident's safety; and

(2) The reason why no alternative means of separation can be arranged.

(i) Every 30 days, the facility shall afford each resident described in paragraph (h) of this section a review to determine whether there is a continuing need for separation from the general population.

§ 115.343 Reserved.

Reporting

§ 115.351 Resident reporting.

(a) The agency shall provide multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

(b) The agency shall also provide at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials, allowing the resident to remain anonymous upon request. Residents detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

(c) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

(d) The facility shall provide residents with access to tools necessary to make a written report.

(e) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of residents.

§ 115.352 Exhaustion of administrative remedies.

(a) An agency shall be exempt from this standard if it does not have administrative procedures to address resident grievances regarding sexual abuse.

(b)(1) The agency shall not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.

(2) The agency may apply otherwise-applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse.

(3) The agency shall not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

(4) Nothing in this section shall restrict the agency's ability to defend against a lawsuit filed by a resident on the ground that the applicable statute of limitations has expired.

(c) The agency shall ensure that—

(1) A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and

(2) Such grievance is not referred to a staff member who is the subject of the complaint.

(d)(1) The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.

(2) Computation of the 90-day time period shall not include time consumed by residents in preparing any administrative appeal.

(3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the resident in writing of any such extension and provide a date by which a decision will be made.

(4) At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.

(e)(1) Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.

(2) If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.

(3) If the resident declines to have the request processed on his or her behalf, the agency shall document the resident's decision.

(4) A parent or legal guardian of a juvenile shall be allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile. Such a grievance shall not be conditioned upon the juvenile agreeing to have the request filed on his or her behalf.

(f)(1) The agency shall establish procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse.

(2) After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

(g) The agency may discipline a resident for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the resident filed the grievance in bad faith.

§ 115.353 Resident access to outside support services and legal representation.

(a) The facility shall provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.

(b) The facility shall inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

(c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

(d) The facility shall also provide residents with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians.

§ 115.354 Third-party reporting.

The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a resident.

Official Response Following a Resident Report

§ 115.361 Staff and agency reporting duties.

- (a) The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- (b) The agency shall also require all staff to comply with any applicable mandatory child abuse reporting laws.
- (c) Apart from reporting to designated supervisors or officials and designated State or local services agencies, staff shall be prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.
- (d)(1) Medical and mental health practitioners shall be required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section, as well as to the designated State or local services agency where required by mandatory reporting laws.
- (2) Such practitioners shall be required to inform residents at the initiation of services of their duty to report and the limitations of confidentiality.
- (e)(1) Upon receiving any allegation of sexual abuse, the facility head or his or her designee shall promptly report the allegation to the appropriate agency office and to the alleged victim's parents or legal guardians, unless the facility has official documentation showing the parents or legal guardians should not be notified.
- (2) If the alleged victim is under the guardianship of the child welfare system, the report shall be made to the alleged victim's caseworker instead of the parents or legal guardians.
- (3) If a juvenile court retains jurisdiction over the alleged victim, the facility head or designee shall also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation.
- (f) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

§ 115.362 Agency protection duties.

When an agency learns that a resident is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the resident.

§ 115.363 Reporting to other confinement facilities.

(a) Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and shall also notify the appropriate investigative agency.

(b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

(c) The agency shall document that it has provided such notification.

(d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

§ 115.364 Staff first responder duties.

(a) Upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report shall be required to:

(1) Separate the alleged victim and abuser;

(2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;

(3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and

(4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

(b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

§ 115.365 Coordinated response.

The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

§ 115.366 Preservation of ability to protect residents from contact with abusers.

(a) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

(b) Nothing in this standard shall restrict the entering into or renewal of agreements that govern:

(1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.372 and 115.376; or

(2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

§ 115.367 Agency protection against retaliation.

(a) The agency shall establish a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff and shall designate which staff members or departments are charged with monitoring retaliation.

(b) The agency shall employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

(c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct or treatment of residents or staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

(d) In the case of residents, such monitoring shall also include periodic status checks.

(e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

(f) An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

§ 115.368 Post-allegation protective custody.

Any use of segregated housing to protect a resident who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.342.

Investigations

§ 115.371 Criminal and administrative agency investigations.

(a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

(b) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations involving juvenile victims pursuant to § 115.334.

(c) Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

(d) The agency shall not terminate an investigation solely because the source of the allegation recants the allegation.

(e) When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

(f) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as resident or staff. No agency shall require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

(g) Administrative investigations:

(1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and

(2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

(h) Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

(i) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

(j) The agency shall retain all written reports referenced in paragraphs (g) and (h) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention.

(k) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

(l) Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

(m) When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

§ 115.372 Evidentiary standard for administrative investigations.

The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§ 115.373 Reporting to residents.

(a) Following an investigation into a resident's allegation of sexual abuse suffered in an agency facility, the agency shall inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

(b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the resident.

(c) Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency shall subsequently inform the resident (unless the agency has determined that the allegation is unfounded) whenever:

(1) The staff member is no longer posted within the resident's unit;

(2) The staff member is no longer employed at the facility;

- (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
- (d) Following a resident's allegation that he or she has been sexually abused by another resident, the agency shall subsequently inform the alleged victim whenever:
 - (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
 - (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- (e) All such notifications or attempted notifications shall be documented.
- (f) An agency's obligation to report under this standard shall terminate if the resident is released from the agency's custody.

Discipline

§ 115.376 Disciplinary sanctions for staff.

- (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.
- (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
- (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
- (d) All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

§ 115.377 Corrective action for contractors and volunteers.

- (a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

(b) The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

§ 115.378 Interventions and disciplinary sanctions for residents.

(a) A resident may be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

(b) Any disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. In the event a disciplinary sanction results in the isolation of a resident, agencies shall not deny the resident daily large-muscle exercise or access to any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible.

(c) The disciplinary process shall consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

(d) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer the offending resident participation in such interventions. The agency may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition to access to general programming or education.

(e) The agency may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

(f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

(g) An agency may, in its discretion, prohibit all sexual activity between residents and may discipline residents for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

Medical and Mental Care

§ 115.381 Medical and mental health screenings; history of sexual abuse.

(a) If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

(b) If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

(c) Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

(d) Medical and mental health practitioners shall obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

§ 115.382 Access to emergency medical and mental health services.

(a) Resident victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

(b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim pursuant to § 115.362 and shall immediately notify the appropriate medical and mental health practitioners.

(c) Resident victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

(d) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

§ 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers.

(a) The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

- (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.
- (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.
- (d) Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.
- (e) If pregnancy results from conduct specified in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
- (f) Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.
- (g) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
- (h) The facility shall attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Data Collection and Review

§ 115.386 Sexual abuse incident reviews.

- (a) The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.
- (b) Such review shall ordinarily occur within 30 days of the conclusion of the investigation.
- (c) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.
- (d) The review team shall:
 - (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
 - (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or, gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;

- (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- (4) Assess the adequacy of staffing levels in that area during different shifts;
- (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.
- (e) The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

§ 115.387 Data collection.

- (a) The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.
- (b) The agency shall aggregate the incident-based sexual abuse data at least annually.
- (c) The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- (d) The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
- (e) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents.
- (f) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

§ 115.388 Data review for corrective action.

- (a) The agency shall review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including:
 - (1) Identifying problem areas;
 - (2) Taking corrective action on an ongoing basis; and

(3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

(b) Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

(c) The agency's report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.

(d) The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

§ 115.389 Data storage, publication, and destruction.

(a) The agency shall ensure that data collected pursuant to § 115.387 are securely retained.

(b) The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.

(c) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.

(d) The agency shall maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of its initial collection unless Federal, State, or local law requires otherwise.

Audits

§ 115.393 Audits of standards.

The agency shall conduct audits pursuant to §§ 115.401–405.

Auditing and Corrective Action

§ 115.401 Frequency and scope of audits.

(a) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.

(b) During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

(c) The Department of Justice may send a recommendation to an agency for an expedited audit if the Department has reason to believe that a particular facility may be experiencing problems relating to sexual abuse. The recommendation may also include referrals to resources that may assist the agency with PREA-related issues.

(d) The Department of Justice shall develop and issue an audit instrument that will provide guidance on the conduct of and contents of the audit.

(e) The agency shall bear the burden of demonstrating compliance with the standards.

(f) The auditor shall review all relevant agency-wide policies, procedures, reports, internal and external audits, and accreditations for each facility type.

(g) The audits shall review, at a minimum, a sampling of relevant documents and other records and information for the most recent one-year period.

(h) The auditor shall have access to, and shall observe, all areas of the audited facilities.

(i) The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

(j) The auditor shall retain and preserve all documentation (including, e.g., video tapes and interview notes) relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.

(k) The auditor shall interview a representative sample of inmates, residents, and detainees, and of staff, supervisors, and administrators.

(l) The auditor shall review a sampling of any available videotapes and other electronically available data (e.g., Watchtour) that may be relevant to the provisions being audited.

(m) The auditor shall be permitted to conduct private interviews with inmates, residents, and detainees.

(n) Inmates, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

(o) Auditors shall attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.

§ 115.402 Auditor qualifications.

(a) An audit shall be conducted by:

- (1) A member of a correctional monitoring body that is not part of, or under the authority of, the agency (but may be part of, or authorized by, the relevant State or local government);
 - (2) A member of an auditing entity such as an inspector general's or ombudsperson's office that is external to the agency; or
 - (3) Other outside individuals with relevant experience.
- (b) All auditors shall be certified by the Department of Justice. The Department of Justice shall develop and issue procedures regarding the certification process, which shall include training requirements.
 - (c) No audit may be conducted by an auditor who has received financial compensation from the agency being audited (except for compensation received for conducting prior PREA audits) within the three years prior to the agency's retention of the auditor.
 - (d) The agency shall not employ, contract with, or otherwise financially compensate the auditor for three years subsequent to the agency's retention of the auditor, with the exception of contracting for subsequent PREA audits.

§ 115.403 Audit contents and findings.

- (a) Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.
- (b) Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards.
- (c) For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings: Exceeds Standard (substantially exceeds requirement of standard); Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period); Does Not Meet Standard (requires corrective action). The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.
- (d) Audit reports shall describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility, and shall include recommendations for any required corrective action.
- (e) Auditors shall redact any personally identifiable inmate or staff information from their reports, but shall provide such information to the agency upon request, and may provide such information to the Department of Justice.
- (f) The agency shall ensure that the auditor's final report is published on the agency's website if it has one, or is otherwise made readily available to the public.

§ 115.404 Audit corrective action plan.

- (a) A finding of “Does Not Meet Standard” with one or more standards shall trigger a 180-day corrective action period.
- (b) The auditor and the agency shall jointly develop a corrective action plan to achieve compliance.
- (c) The auditor shall take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies and procedures or re-inspecting portions of a facility.
- (d) After the 180-day corrective action period ends, the auditor shall issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action.
- (e) If the agency does not achieve compliance with each standard, it may (at its discretion and cost) request a subsequent audit once it believes that it has achieved compliance.

§ 115.405 Audit appeals.

- (a) An agency may lodge an appeal with the Department of Justice regarding any specific audit finding that it believes to be incorrect. Such appeal must be lodged within 90 days of the auditor’s final determination.
- (b) If the Department determines that the agency has stated good cause for a re-evaluation, the agency may commission a re-audit by an auditor mutually agreed upon by the Department and the agency. The agency shall bear the costs of this re-audit.
- (c) The findings of the re-audit shall be considered final.

State Compliance

§ 115.501 State determination and certification of full compliance.

- (a) In determining pursuant to 42 U.S.C. 15607(c)(2) whether the State is in full compliance with the PREA standards, the Governor shall consider the results of the most recent agency audits.
- (b) The Governor’s certification shall apply to all facilities in the State under the operational control of the State’s executive branch, including facilities operated by private entities on behalf of the State’s executive branch.

San Mateo County Probation Department

Institutions Division Policy Manual



YSC-Juvenile Hall
June 2023



SAN MATEO COUNTY PROBATION DEPARTMENT INSTITUTIONS SERVICES MANUAL

ARTICLE 5 Classification and Separation §1361

Topic Youth Grievances

Policy The purpose of this policy is to establish a process by which youth may file grievances and receive a formal review regarding the conditions of their confinement (15 CCR 1361).

All youth shall be provided with a grievance process for resolving complaints arising from matters and conditions of confinement with at least one level of appeal. There shall be no time limit on filing grievances.

Youth will receive information about the grievance procedure during the intake/orientation process. Information will also be contained in the youth handbook. Information regarding the grievance process will be provided to youth in the language they understand.

The information will include (15 CCR 1361):

1. A grievance form, free access, and instructions for registering a grievance.
2. Instructions for resolving the grievance at the lowest appropriate staff level.
3. The appeal process to the next level of review.
4. Written reasons for denial of a grievance at each level of review.
5. A provision of required time frames for responses.
6. A provision for resolving questions of jurisdiction within the juvenile facilities.
7. Consequences for abusing the grievance system.
8. A provision for confidential filing or delivery to any supervisory detention staff.

1361.1 GRIEVANCE PROCEDURES

Institution Services Managers (ISM) shall ensure that Grievance Forms are readily available on each unit and that grievance procedures are posted nearby.

Staff shall attempt to informally resolve all complaints at the lowest level. All attempts to resolve a youth complaint shall be documented in the youth's file. If there is no resolution at this level, the youth may file a grievance and place in the unit grievance box

A youth may help another youth prepare a grievance. Staff members may take reasonable steps to help the youth prepare a grievance if requested. A translator shall be provided as needed or

requested by the youth.

The initial review and response to grievances shall occur within three business days; however, grievances related to health, security or safety issues must be addressed immediately.

In the case of a grievance about health, mental health, food, or education services, the ISM shall forward the grievance to the appropriate manager in those departments.

1361.2 EXCEPTION TO INITIAL GRIEVANCE FILING

Youth may request to submit the grievance directly to a lead staff, Institution Services Manager/Officer of the Day (ISM/OD) or the Superintendent or deposit the grievance in a locked box within their housing unit.

A parent/guardian may also mail a grievance/complaint via the United States Postal Service to the Superintendent, submit it directly to a supervisor, or deposit the grievance in a locked grievance box located in the visitation area. All parent/guardian complaints shall be handled in the same manner as a youth grievance.

1361.3 TIMELY RESOLUTION OF GRIEVANCES

Upon receiving a completed youth grievance form, the supervisor shall ensure that the grievance is properly investigated. Every attempt shall be made to resolve the youth's grievance in a timely manner. The ISM/OD shall forward the grievance to the manager in charge of the department or service area the youth is grieving.

Findings relating to the investigation will be forwarded to the (ISM/OD). Any appeals shall be forwarded to the Superintendent as the final level of appeal.

Grievances related to health and safety issues shall be addressed, immediately. A review and initial response to other grievances shall be provided to the youth within three business days (15 CCR 1361).

Resolution of all grievances should occur within 10 business days unless additional time is necessary. Youth shall be notified of any delay (15 CCR 1361).

The Superintendent shall maintain all resolved youth grievances in the grievance log. The Superintendent shall periodically review the log to ensure that grievances are being handled properly and in a timely manner. The review shall also help identify any training issues or if any policy or procedure changes are warranted.

A copy of each grievance should be filed in the youth's Unit file and maintained throughout the youth's period of detention.

1361.4 GRIEVANCES RELATED TO SEXUAL ABUSE

Youth may submit a grievance regarding an allegation of sexual abuse at any time.

1. Third parties, including fellow youth, staff members, family members, attorneys, and outside advocates, are permitted to assist youth in filing such grievances and to file such grievances on behalf of youth. Staff members who receive a grievance filed by a third

- party, other than a parent or legal guardian, on behalf of a youth shall inquire whether the youth wish to have the grievance processed and shall document the youth's decision and may condition the processing of the grievance on the youth's consent. Staff members who receive a grievance filed by a parent or legal guardian of a youth shall process the grievance with or without the consent of the youth.
2. Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint.
 3. Grievances involving an allegation of sexual abuse or sexual harassment shall immediately be forwarded to the Superintendent. In all reports involving allegations of sexual abuse staff shall follow the department's Prison Rape Elimination Act (PREA) policy.

1361.4.1 EMERGENCY GRIEVANCES RELATED TO SEXUAL ABUSE

Youth who believe they are, or any other youth is, at substantial risk of imminent sexual abuse may file an emergency grievance with any ISM-OD. The ISM-OD shall determine whether immediate action is reasonably necessary to protect the youth and shall provide an initial response within 48 hours.

The ISM-OD shall refer the grievance to the Superintendent or the authorized designee, who will investigate and issue a final decision within five calendar days.

The initial response and final decision shall be documented and shall include a determination whether the youth is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.352).

1361.5 TRAINING

The Superintendent shall ensure that all staff receive training regarding all aspects of this policy and the grievance process.

See Procedures Manual on Youth Grievances for further information



SAN MATEO COUNTY PROBATION DEPARTMENT INSTITUTIONS SERVICES MANUAL

ARTICLE 5 Classification and Separation §1362

Topic	Reporting of Incidents
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Policy	It is the policy of the San Mateo County Probation Department - Juvenile Facilities that staff shall act with promptness and efficiency in the preparation and processing of all incident reports.
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Written reports relating to any incident resulting in death, serious physical injury or harm, use of force, or endangerment to staff, youth, or a visitor; an escape; a major disturbance; a facility emergency; or an unsafe condition at the facility shall be submitted to the Institution Services Manager/Officer of the Day (ISM/OD) as soon as practicable, but no later than the end of the shift unless additional time is necessary and authorized by the ISM/OD. (CCR 1362).

The purpose of these reports is to document incidents at the facility, refresh the staff's memory, and provide sufficient information for a follow-up investigation and successful prosecution or a disciplinary proceeding. Report writing is the subject of substantial formal and on-the-job training.

The incident report, write-up, or informational report shall be forwarded to the Administrative Secretary and shall be maintained in accordance with the department's retention schedule.

All staff involved or witness to an incident shall complete an Incident Report prior to the end of their shift, unless a delay in reporting is approved by an ISM/OD. Reports shall include the date and time of the incident, the name(s) of the youth involved, the location of the incident, the type of incident (assault on staff, use of force, etc.), staff and youth witnesses, and a complete description of the incident. If the documented incident could lead to youth discipline, staff shall indicate the disposition of the incident on the Incident Report and notify the youth(s) of their appeal rights. The staff will ensure any youth involved are medically cleared and Mental Health staff notified to check in with the youth. Staff and youth should be debriefed at the end of every incident. The reporting staff shall sign and date the report.

1362.1 AMENDED REPORTS

Reports that have been approved by an ISM/OD and submitted to Admissions for filing and distribution shall not be modified or altered except by way of a supplemental report. Reviewed reports that have not yet been submitted to Admissions may be corrected or modified by the authoring employee only with the knowledge and authorization of the reviewing supervisor. Reviewing ISM/OD should not alter reports. When modifications are required, these should be the responsibility of the authoring employee.

1362.2 REQUIRED REPORTING

Incident reports generally serve as an in-house documentation of occurrences in the facility and to initiate, document, and support the youth disciplinary process. The Department shall establish a filing system that differentiates between incident reports, crime reports, and disciplinary actions. This policy does not require the duplication of information on two different forms. Where both exist, cross-referencing facilitates retrieval of one or both.

Incidents that shall be documented using the appropriate approved report include:

1. Non-criminal incidents of rule violations by youth.
2. Attempted suicide or suicidal ideation by a youth (15 CCR 1329).
3. Non-criminal breaches of security or evidence of an escape attempt.
4. Non-criminal security threats, including intelligence related to juvenile facilities activities.
5. Significant incidents related to medical issues, health, or safety in the juvenile facilities.
6. Discovery of contraband in the possession of youth or their housing areas.
7. Detaining or handcuffing any youth at the facility.
8. Traffic collisions involving facility vehicles.
9. Risk management incidents, including injuries to youth and lost or damaged property.
10. Accidental injuries of staff, youth, or the public.
11. Use of Force.
12. Deaths.
13. Unusual occurrences.

1362.2.1 DEATHS

All deaths shall be investigated, and a report completed by a trained professional. All involved staff, with the assistance of the ISM/OD, shall complete an incident report listing the manner of death and to gather information, including statements of youth and staff who were in the area when the death occurred.

Reporting of youth deaths will be handled in accordance with the Reporting In-Custody Deaths Policy. See Procedure Manual on Reporting In-Custody Deaths for further information.

1362.2.2 INJURY OR DAMAGE BY DEPARTMENT PERSONNEL

Reports shall be completed if an injury occurs that is a result of an act of an employee. Reports shall be completed if there is damage to facility property or equipment.

1362.2.3 CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of self-initiated activity, and becomes aware of any activity where a crime has occurred, the employee is required to document the activity in a crime report. The fact that a victim does not desire prosecution is not an exception to documentation.

1362.2.4 USE OF FORCE AND PHYSICAL RESTRAINTS

Reports related to the use of force or physical restraint shall be made in accordance with the Use of Force and Restraints policies.

- comply or to otherwise bring the refusal before a judge (Penal Code § 298.1).
4. The judge at the youth's next court appearance.
 5. The youth's attorney, parent/guardian, or custodian.

Should the court order the use of force in obtaining a biological sample from a non-compliant youth, the On-Duty Officer of the Day shall be present to supervise and document the use of force. A video recording shall be made any time force is used to obtain a biological sample (15 CCR 13) The recording should be part of the youth's Admission's file and shall be retained by the Department for the length of time required by statute. Probation staff shall only use reasonable force to obtain compliance with laws regarding the collection of DNA specimens, samples, and impressions.

See Procedures Manual on Biological Samples for further information

1363.2 DOCUMENTATION RELATED TO FORCE

The On-Duty Officer of the Day shall prepare prior written authorization for the use of any force (Penal Code § 298.1). The written authorization shall include information that the youth was asked to provide the requisite specimen, sample, or impression and refused, as well as the related court order authorizing the force.

Efforts to secure voluntary compliance shall be documented and shall include an advisement of the legal obligation to provide the biological sample, and the consequences of refusal (15 CCR 1363).

The Superintendent shall prepare a report to the Board of State and Community Corrections in the event of any use of force necessary to obtain compliance with Penal Code Section 298. The report shall include: the type of force used, the efforts to obtain voluntary compliance, and whether medical attention was needed by the youth or other persons as a result of the reasonable use of force.

1363.3 BLOOD SAMPLES

A blood sample should only be obtained under this policy when (Penal Code § 295; Penal Code § 298):

1. The California DOJ requests a blood sample and the subject consents.
2. A court orders a blood sample following a refusal.

The withdrawal of blood may only be performed in a medically approved manner by health care providers trained and qualified to draw blood. A California DOJ collection kit shall be used for this purpose (Penal Code § 298).



SAN MATEO COUNTY PROBATION DEPARTMENT INSTITUTIONS SERVICES MANUAL

ARTICLE 7

Discipline

§1390

Topic	Youth Discipline
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Policy	This policy addresses the application of youth rules and disciplinary sanctions for youth who fail to comply with facility rules. It is the goal of this facility to promote acceptable behavior through the use of positive interventions and supports.
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Youth discipline shall be imposed at the least restrictive level required to achieve the desired behavior. Discipline shall not include corporal punishment, group punishment, physical or psychological degradation.

1390. DISCIPLINE

The Superintendent or authorized designee shall develop and implement written policies and procedures for the discipline of youth that shall promote acceptable behavior; including the use of positive behavior interventions and supports. Deprivation of the following is not permitted as a form of discipline:

- a. bed and bedding.
- b. daily shower, access to drinking fountain, toilet and personal hygiene items, and clean clothing.
- c. full nutrition.
- d. contact with parent or attorney.
- e. exercise.
- f. medical services and counseling.
- g. religious services.
- h. clean and sanitary living conditions.
- i. the right to send and receive mail.
- j. education.; and,
- k. rehabilitative programming.

The Superintendent or authorized designee shall establish rules of conduct and disciplinary penalties to guide the conduct of youth. Such rules and penalties shall include both major violations and minor violations, be stated simply and affirmatively, and be made available to all youth.

Provision shall be made available to provide accessible information to youth with disabilities, limited English proficiency, or limited literacy.

1390.1 DUE PROCESS

Youth who are subject to discipline as a result of rule violations shall be afforded the procedural due process required by federal and state law. All youth will be made aware of the rules of conduct for which they will be held accountable, as well as any defined penalties for rule violations. Staff will not engage in arbitrary actions against youth. All disciplinary actions will follow clearly established procedures. All disciplinary sanctions will be fairly and consistently applied.

Institution staff shall issue a Disciplinary Due Process Ticket for all minor rule violations, documenting the violation and consequences. All Due Process Tickets shall be issued in a timely manner and reviewed by the lead Institution staff.

Institution staff shall issue an Incident Report for all major rule violations documenting the violation and consequences. Incidents Reports shall be issued in a timely manner and approved by the Institutions Services Manager or Office of the Day (ISM/OD)

A youth may choose to appeal a disciplinary action through the grievance process by submitting a signed and dated Grievance Form to any person or placing it in the grievance box on the youth's unit.

To ensure due process, Institution staff shall make reasonable accommodations for youth with disabilities, limited English proficiency or literacy, consistent with the Youth Grievances Policy.

The process for a youth accused of a major rule violation includes (15 CCR 1391):

- a. A fair hearing in which the discovering Institution staff member or investigating ISM/OD presents factual evidence supporting the rule violation and the disciplinary action.
- b. Advance written notice to the youth of the disciplinary hearing, to allow the youth time to prepare a defense.
- c. Assignment of a neutral hearing officer.
- d. The limited right to call witnesses and/or present evidence on the youth's behalf.
- e. The assistance of a staff member upon request of the youth.
- f. The appointment of a staff member to serve as an assistant or representative in cases where the youth may be incapable of self-representation.
- g. A formal written decision that shows the evidence considered by the hearing officer, the reasons for any sanctions, and an explanation of the appeal process in a Disciplinary Due Process Hearing Report.
- h. Reasonable sanctions for violating rules that relate to the severity of the violation.
- i. The opportunity to appeal the finding.
- j. All major disciplinary actions shall be reviewed at the Superintendent level to ensure proper rules and procedures were followed. This review shall occur once discipline or alternative programming is carried out.

1390.2 YOUTH RULES AND SANCTIONS

The Superintendent or the authorized designee is responsible for ensuring that youth rules and disciplinary sanctions are developed, distributed, reviewed annually, and revised as needed. Administration of discipline shall use trauma-informed approaches and positive behavior interventions (15 CCR 1391).

Youth cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in a detention facility. Therefore, a current list of recognized infractions that are generally prohibited should be accessible to all youth. Youth rules shall be translated into the languages that are understood by the youth (see the Youth Orientation Policy).

Disciplinary procedures governing youth rule violations should address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing and post-hearing disciplinary actions, prehearing and post-hearing removal from general population, and prehearing and post-hearing separation from other youth.

1390.3 MINOR RULE VIOLATIONS

Institution staff are authorized to recommend informal discipline for minor violations.

Minor rule violations generally include those that do not have an impact on the safety, security, or efficiency or operation of the facility and its personnel, staff, and/or youth. Minor rule violations may result in informal counseling, advising the youth of expected behavior, and/or a “cooling off” time away from other youth for a maximum of 30 minutes, all of which are not considered discipline. Minor rule violations also may result in disciplinary actions such as loss of privileges, loss of behavior points, and/or alternative programming such as completing a book report, essay, art project or other constructive activity separate from the group.

Any staff member imposing informal discipline should issue a Disciplinary Due Process Ticket and document the information in the Youth Log.

A youth may request that an Institution staff review the imposed sanction. The Institution staff should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

See Procedures Manual on Alternative Program for further information.

1390.4 MULTIPLE MINOR RULE VIOLATIONS

Institution staff may initiate an incident report listing the major rule violations if a youth is charged with three or more minor rule violations within a 30-day period. Copies of all minor rule violations will be attached to the major rule violation report. The Superintendent or the authorized designee shall assign the staff responsible to conduct the hearing according to the applicable procedures.

1390.5 MAJOR RULE VIOLATIONS

Major rule violations are considered a threat to the safety, security, operation or efficiency of the juvenile facilities, its staff members, youth, or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including notification of an ISM or authorized designee as soon as practicable. The institution staff shall assess the situation and initiate any emergency action, if necessary, and notify the ISM or the authorized designee.

Major rule violations may result in loss of privileges, loss of behavior points, alternative programming or room confinement if other less restrictive options have been attempted and exhausted or attempting those options poses a threat to the safety and security of the youth, ward, or staff.

The staff member who learned of the rule violation shall write and submit a disciplinary report, along with all relevant evidence, to the appropriate ISM or authorized designee prior to the end of the shift.

1390.6 PREHEARING SEPARATION

Youth who are accused of a major rule violation may be removed from the general population of youth with the ISM or authorized designee approval, if there is a threat to safety or security of other youth, staff members, or visitors.

The Chief Probation Officer or the authorized designee shall, within four hours including weekends and holidays, review the status of any youth in prehearing separation to determine whether continued separation from the general population is appropriate (Welfare and Institutions Code § 208.3).

1390.7 INVESTIGATIONS

Investigations involving major rule violations should be initiated within 24 hours of the initial report and completed in sufficient time for the youth to have a disciplinary hearing and as soon as practicable when the youth has been removed from the general population. If additional time is needed, the investigating Institution staff will request more time in writing from the ISM or authorized designee. The youth will be notified in writing of the delay.

If, upon completion of the investigation, the investigating lead staff finds insufficient evidence to support a major rule violation, the investigating lead staff may discuss alternative sanctions with the On-Duty Officer of the Day, including handling the incident as a minor violation or recommending that charges be removed. Such alternatives shall be documented in the youth's file.

If the investigating lead staff determines that sufficient evidence exists to support a major rule violation, the investigating lead staff will act as the hearing coordinator and will be responsible for:

- a. Reviewing all reports for accuracy and completeness.
- b. Overseeing or conducting any required additional investigation.
- c. Determining the final charges.

- d. Making preliminary decisions about the appointment of a staff member to act as an assistant to the youth.
- e. Identifying any witnesses who may be called to the hearing.

1390.8 NOTIFICATIONS

A youth charged with a major rule violation shall be given a written description of the incident and the rules violated before a disciplinary hearing (15 CCR 1391).

Unless waived in writing by the youth, hearings may not be held in less than 24 hours from the time of notification.

If the youth has been removed from the general population, written notice shall be given no later than two hours after the removal from the general population of youth.

1390.9 HEARINGS

The Superintendent shall appoint at least one hearing officer to preside and conduct disciplinary hearings of major rule violations. The hearing officer should be a qualified ISM or authorized designee who will have the responsibility and authority to rule on charges of youth rule violations. The hearing officer shall also have the power to impose sanctions. The hearing officer shall not investigate nor preside over any youth disciplinary hearing on cases where the hearing officer was a witness or was directly involved in the incident that generated the complaint.

Youth charged with major rule violations are entitled to be present at a hearing unless waived in writing or excluded because their behavior poses a threat to facility safety, security, and order. Institution Staff shall inform the hearing officer when any youth is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Superintendent.

Hearings may be postponed or continued for a reasonable period for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Superintendent.

The hearing officer shall disclose to the accused youth all witnesses who will be participating in the hearing. Youth have no right to cross-examine witnesses. However, the accused youth may be permitted to suggest questions that the hearing officer, in the hearing officer's discretion, may ask.

1390.10 EVIDENCE

Accused youth have the right to make a statement, present evidence, and call witnesses at the hearing. Requests for witnesses shall be submitted in writing by the youth no later than 12 hours before the scheduled start of the hearing. The written request must include a brief summary of what the witness is expected to say.

The hearing officer may deny the request when it is determined that allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, or when the

witness's information is not relevant or would be unnecessarily duplicative or is otherwise unnecessary. The reason for denying a youth's request for witness testimony shall be documented in the hearing report. The reason for denial of any documents requested by the youth shall also be documented in the hearing record.

A witness's signed written statement may be submitted by the youth as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason for exclusion when any written statement is not considered.

Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused youth prior to the hearing.

1390.11 CONFIDENTIAL INFORMANTS

If information from any confidential informant is to be presented at the hearing, information establishing the reliability and credibility of the informant shall be provided to the hearing officer prior to the hearing. The hearing officer shall review such information to determine whether the informant is reliable and credible.

1390.12 STAFF ASSISTANCE

Upon the request of the youth, a staff member shall assist the youth at a disciplinary hearing. A staff member shall be assigned to assist a youth who is incapable of self-representation at a disciplinary hearing due to literacy, developmental disabilities, language barriers, or mental status (15 CCR 1391). The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the youth to fulfill the assistant's obligations. In these cases, the youth does not have a right to select a person to assist in the youth's disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Youth discipline is an administrative and not a judicial process. Youth do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution as there is no double jeopardy defense for an administrative process.

1390.13 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence presented during the disciplinary hearing.

The disciplinary process shall consider whether a youth's mental disabilities or mental illness contributed to the youth's behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.378(c)).

1390.14 REPORT OF FINDINGS

The hearing officer shall write a report regarding the decision and detailing the evidence and the reasons for the disciplinary action. A copy of the report shall be provided to the youth. All

documentation related to the disciplinary process shall be retained and a copy should be placed in the youth's file.

If it is determined that the youth's charge is not sustained at the end of the disciplinary hearing, the documentation shall be removed from the youth's file but otherwise maintained in accordance with records retention requirements.

All disciplinary hearing reports and dispositions shall be reviewed by the Superintendent or the authorized designee as soon as practicable after the final disposition.

1390.15 DISCIPLINARY APPEALS

Youth wishing to appeal the decision of the hearing officer must do so in writing within five (5) days of the decision. All appeals will be forwarded to the Superintendent or the authorized designee for review.

Only appeals based on the following will be considered:

- a. The disciplinary process or procedures were not followed.
- b. There was insufficient evidence to support the hearing officer's decision.
- c. The discipline imposed was not proportionate to the violation committed.

A final disposition shall be rendered as soon as practicable if the youth's appeal is granted, or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final, and the result of the appeal shall be provided to the youth in writing.

Superintendent

A final disposition shall be rendered as soon as practicable if the youth's appeal is granted, or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final, and the result of the appeal shall be provided to the youth in writing.

1390.16 LIMITATIONS ON DISCIPLINARY ACTIONS

The U.S. and California constitutions expressly prohibit all cruel or unusual punishment. Additionally, the following limitations exist (15 CCR 1390; 15 CCR 1391; 15 CCR 1371):

1. In no case shall any youth or group of youth be delegated the authority to punish any other youth or group of youth.
2. In no case shall a safety room be used for disciplinary purposes.
3. In no case shall any restraint device be used for disciplinary purposes.
4. Food or access to drinking fountain shall not be withheld as a disciplinary measure.
5. Correspondence privileges shall not be withheld as a disciplinary measure.
6. In no case shall access to the courts and/or legal counsel be suspended as a disciplinary

measure.

7. No youth may be deprived of the implements necessary to maintain an acceptable level of personal hygiene, including but not limited to a daily shower, access to a drinking fountain, a toilet, personal hygiene items, and clean clothing.
8. Discipline may be imposed for sexual activity between youth. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.378(g)).
9. No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.378(e)).
10. No youth may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.378(f)).
11. No confinement in excess of four (4) hours inside their room and without an opportunity for at least one (1) hour of exercise daily outside of the immediate living quarters may be imposed unless the Superintendent or the authorized designee determines and documents that this opportunity will jeopardize the physical safety of the youth or others or the security of the facility.
12. No youth may be subject to a substantial change in heating, lighting, or ventilation or dirty and unsanitary living conditions.
13. No youth may be subject to restrictions on clean clothing, bed and bedding, the use of hygienic facilities, or reading or writing materials as a disciplinary measure.
14. Restrictions shall not be placed a youth's living conditions.
15. Restrictions shall not be placed on medical and dental care as a disciplinary measure.
16. Restrictions shall not be placed on a youth's access to government officials as a disciplinary measure.
17. Restrictions shall not be placed on a youth's access to grievance proceedings as a disciplinary measure.
18. No youth may be prohibited from contact with the youth's parents or guardian as a disciplinary measure.
19. No youth may be deprived of education, rehabilitative programming, mental health counseling, or religious services as a disciplinary measure.

20. In no case shall any youth be subjected to corporal punishment or physical or psychological degradation.

Discipline shall not include group punishment, where a group of uninvolved youth are denied programming or treatment due to the actions of one or more youth except when the safety and security of the unit and/or facility may be in jeopardy. Necessary measures to maintain the safety and security of the facility and youth shall not be considered group punishment. Denial of special privileges that are not programming or treatment is not considered group punishment.

Exceptions must be justified in writing and approved by the Superintendent and must be consistent with the applicable disciplinary disposition.

The discipline of youth should promote acceptable behavior. Generally, discipline should be imposed at the least restrictive level which promotes desired behavior (15 CCR 1390).

1390.17 GUIDELINES FOR DISCIPLINARY SANCTIONS

Any Institution Staff, teacher, Institution Services Manager, or Superintendent may impose discipline using trauma-informed approaches and positive behavior interventions. Special consideration should be given to youth with disabilities, limited literacy and English language learners.

Institution Staff are prohibited from delegating the responsibility for discipline to any youth, volunteer, or support staff person.

The sanctions imposed for rule violations can include counseling, loss of certain privileges or "points" associated with a rewards-based behavior management system and restitution for damaging property. To the extent that therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse are available, the facility shall consider whether to require a youth being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.378(d)).

Discipline shall be commensurate with the nature and circumstances of the offense committed, the youth's disciplinary history, and the sanctions imposed for comparable offenses by other youth with similar histories (28 CFR 115.378(b)).

Youth shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the youth engaged in youth-on-youth sexual abuse or following a criminal finding of guilt for youth-on-youth sexual abuse (28 CFR 115.378(a)).

The Chief Probation Officer or the authorized designee shall be responsible for developing and implementing a range of disciplinary sanctions for violations.

Violations that result in a removal from a camp or commitment program, but not a return to court, shall follow the due process provisions in this policy (15 CCR 1391).

1390.18 RECORDS

A record of all rule violations and sanctions will be made and maintained in accordance with the juvenile facilities' records retention schedule.

At a minimum, Disciplinary Due Process Tickets or incident reports are required for rule violations. The Institution Staff member who observed or detected the rule violation or who was charged with investigating a rule violation is responsible for completing the Disciplinary Due Process Ticket or incident report. The Disciplinary Due Process Ticket or incident report shall include, at a minimum:

- a. The date, time, and location of the incident.
- b. The specific rules violated.
- c. A written description of the incident.
- d. The identity of known participants in the incident.
- e. Identity of any witnesses to the incident.
- f. Description and disposition of any physical evidence.
- g. Action taken by staff, including any use of force.
- h. Name and signature of the reporting group supervisor.
- i. Date and time of the report.

The Institution Staff investigating the violation and preparing the prehearing details for major rule violations shall ensure that documentation in the rule violation report includes:

- a. Date and time that the explanation and the written copy of the complaint and appeal process were provided to the youth.
- b. The youth's response to the charges.
- c. The reasons for any sanctions.
- d. The identity of any staff or witnesses involved or requested by the youth.
- e. The findings of the hearing officer.
- f. The youth's appeal, if any.
- g. The appeal findings, if applicable.

1390.19 TRAINING

The Superintendent or the authorized designee is responsible for ensuring that a wide range of training and disciplinary tools are available to aid staff and that preprinted forms are available for documenting rule violations in a consistent and thorough manner (15 CCR 1322).

The Superintendent or the authorized designee is responsible for developing and delivering, or procuring, training for staff members who participate in the disciplinary hearing process. Training topics should include the legal significance of due process protections and the hearing officer's role in ensuring that those protections are provided (15 CCR 1322).