

GENERAL DISTRIBUTION

**WEST VIRGINIA
DIVISION OF CORRECTIONS
& REHABILITATION**

NUMBER: 326.04

EFFECTIVE DATE: 24 March 2025

**SUBJECT: JUVENILE SPECIALIZED
HOUSING**

POLICY DIRECTIVE

PURPOSE:

To provide policy and procedure that protects the legal rights of juvenile residents and provide guidelines for the placement and housing of juvenile residents in specialized housing in order to maintain a secure and orderly environment.

REFERENCE:

CIYJ Outcome Measure Order 01, 08 through 11; ACA Expected Practices 4-JCF-3B-06 and 10, 4-JCF-3C-01 through 04, 3-JDF-3C-06 through 08, 3-JDF-3E-01 through 05; and Prison Rape and Elimination Act (PREA) §§115.342, 115.368, and 115.378.

RESPONSIBILITY:

No additional written instructions on this subject are required.

CANCELLATION:

Any previous written instruction on the subject including DCR Policy Directive 326.04, dated 15 November 2019.

APPLICABILITY:

All juvenile residential facilities within the Division of Corrections and Rehabilitation (DCR). This Policy is available for general distribution.

DEFINITIONS:

Behavioral Management Plan: Developed by a resident's treatment team and includes at a minimum:

- Expectations
- Goals and Objectives
- Timeframes

- Incentives
- Consequences

Room Confinement: The following procedure is followed for any juvenile placed in room confinement:

- Checked visually by staff at least every fifteen (15) minutes.
- Visited at least once each day by personnel from administrative, clinical, social work, religious, and/or medical units. As safety and security permit, actual entry into the room of confinement with the juvenile or removal of the juvenile from the room for the purpose of discussion or counseling constitutes a visit.
- Juveniles placed in room confinement are afforded living conditions and privileges approximating those available to the general juvenile population. Exceptions are justified by clear and substantiated evidence.
- A log is kept to record the following:
 - a. The name and title of the individual who authorized the confinement.
 - b. Name and title of persons visiting the juvenile.
 - c. Record of time checks.
 - d. The person authorizing release from confinement.
 - e. The time of release.

POLICY:

- I. Specialized housing is used for Bureau of Juvenile Services (BJS) residents who are separated from others due to medical necessity, sanctions, behavioral concerns, court order, or protective custody.
 - A. Residents will be housed appropriately based on the reason for the specialized housing.
 - B. Residents will be afforded the same privileges as the general population when appropriate. Any resident held in any type of specialized housing shall have:
 1. Daily access to a shower.
 2. Daily access to large muscle activity recreation (e.g., basketball, ping pong, volleyball, aerobic activity, walking, etc.) which is to be entered in the Offender Information System (OIS).
 3. A healthy diet similar to that being served to all facility residents, unless under specific suicide watch conditions.
 4. A full educational program.
 5. Daily access to medical and mental health staff. Such conversations/reviews shall be conducted face-to-face, not through the opening of a room/cell door. If a resident is exhibiting threatening or assaultive behavior, a review may be conducted through the door, however a face-to-face follow-up conversation/review by a nurse or mental health professional must be conducted as soon as possible and within

twenty-four (24) hours.

6. Access to a treatment staff person at least once daily. Any time a resident is involved in any activity, it must be entered into the activities section of specialized housing in OIS.
 7. All residents will be searched prior to placement in specialized housing.
 8. Any resident placed in any type of specialized housing is to be checked visually by staff randomly, but not more than fifteen (15) minutes between each check. All checks are to be documented on the Observation Sheet (**Attachment #1**), which is to be uploaded to OIS.
- C. For room confinement prior to a disciplinary hearing, room confinement due to a hearing sanction, and administrative segregation, all items will be removed from the resident's room including, but not limited to hygiene items, pencils, papers, and photos.
1. Removal of bedding except during sleeping hours will be specified in the Behavioral Management Plan.
 2. Items may be returned to the resident as incentives outlined in his/her Behavioral Management Plan.

II. Specialized Housing Types and Course of Action

A. Court Ordered Segregation - When a facility receives a court order requiring segregation of a resident, the Superintendent will be notified immediately, and the appropriate Specialized Housing dialog will be initiated in OIS.

B. Medical Isolation

1. When a medical or mental health professional determines that a resident needs to be segregated for medical or mental health reasons, the Superintendent will be notified immediately, and the reason entered in OIS.
2. Residents can only be medically segregated for the following reasons:
 - a. Mental health concerns. (BJS Protocol 410 will be followed for suicidal residents)
 - b. Medically necessary.
 - c. Refusal of medical intake screening (until compliant).

C. Protective Custody

1. Residents requiring protection from others may be placed in protective custody

until alternative permanent housing is found within the facility or as a result of a transfer. The resident's treatment team develops a special management plan to assure safety and continuous services and programming.

2. A resident may complete and submit a Resident Request for Protective Custody (**Attachment #2**) if he or she feels unsafe being around another resident or residents.
 - a. An incident report will be generated by the staff member receiving the protective custody request.
 - b. If approved by the Superintendent or designee, the resident will be placed in protective custody utilizing the appropriate Specialized Housing dialog in OIS.
 - c. If denied, the reason for the denial will be documented under interactions in OIS.
3. A resident can be recommended for protective custody if facility staff determines such a need is necessary.
 - a. Each facility's Chief of Security/Chief Correctional Officer or designee will compile an initial report with documentation to the Superintendent for specialized housing utilizing the appropriate Specialized Housing dialog in OIS.
 - b. The Superintendent will meet with the resident to discuss the reasons for the recommended protective custody.
 - c. If the Superintendent determines the necessity for protective custody, he/she will enter his/her recommendation in OIS within two (2) calendar days for the BJS Assistant Commissioner or designee's review.
 - d. The BJS Assistant Commissioner or designee will enter his/her final approval or denial in OIS within two (2) calendar days of notification from OIS that a recommendation has been submitted.
 - e. If approved, the basis for and the decision of the BJS Assistant Commissioner or designee is printed and given to the resident.
4. A resident can be placed in protective custody immediately if imminent danger warrants such action or an emergency PREA (Prison Rape Elimination Act) grievance is filed. The process listed above will then be started immediately after separation from the threat.
5. A resident may only be placed in protective custody (whether by choice or by staff) as a last resort if less restrictive measures are not adequate to keep the resident safe and only until an alternative means of keeping him/her safe can be arranged.

6. Continuation of specialized housing for protective custody will be based on a seventy-two (72) hour perpetual review by the Superintendent and his or her recommendation to the BJS Assistant Commissioner or designee for as long as the resident remains in specialized housing due to safety concerns.
7. Once the reason for protective custody has been removed or diminished, the Superintendent can remove the resident from protective custody.

D. Room Confinement Prior to Disciplinary Hearing

1. Any resident who commits a Category I offense who is physically aggressive with staff and/or residents and is not amenable to reasonable direction and control may be placed in room confinement prior to a hearing. This can only be approved by the Superintendent or designee, with immediate notification to the BJS Assistant Commissioner, Hearing Officer, and Superintendent (if approved by a designee).
2. Room confinement cannot exceed seventy-two (72) hours and for periods over twenty-four (24) hours must be reviewed and approved every twenty-four (24) hours by the Superintendent/designee.
3. The staff member initially authorizing the pre-hearing room confinement shall initiate a Pre-Hearing Room Confinement Report (**Attachment #1 to Policy Directive 325.07**) to document the approvals and notifications. The resident will receive a copy of the Notice of Charges/Receipt of Incident Report/Waivers within twenty-four (24) hours of the incident and the initial hearing shall be held no sooner than twenty-four (24) hours after notification is given to the resident.

E. Room Confinement as Disciplinary Hearing Sanction

1. Room confinement can result from a guilty finding of a Category I rule violation by the Hearing Officer for not more than five (5) days per offense.
2. A violent incident involving more than one (1) offense can incur up to ten (10) days of room confinement. However, at no time will a resident serve more than ten (10) consecutive days per occurrence. Notification to the BJS Assistant Commissioner must be made regarding any sanction imposed that exceeds five (5) days.
 - a. Residents placed on room confinement due to hearing sanctions of more than five (5) days will be placed on a Behavioral Management Plan which will be developed by the treatment team within two (2) calendar days and will remain in effect until the targeted goals have been completed by the resident. A copy of the plan will be provided to the resident.
 - b. The treatment team can petition the Superintendent to have a resident removed from room confinement when they feel the resident has completed the plan and is amenable to reasonable direction and control.

- c. If the resident is found guilty of a subsequent Category I offense, sanctions will be given, and the Behavioral Management Plan will be updated by the treatment team within twenty-four (24) hours.

F. Administrative Segregation

1. Administrative segregation is a treatment tool used for those residents demonstrating consistent negative behaviors who require segregation to maintain safety and security of the facility, staff and other residents while working on a specific Behavioral Management Plan. This can also include residents who have served room confinement for a Category I sanction and are still demonstrating violent and active aggression towards staff or other residents.
2. Staff can make a recommendation to the Superintendent for placing a resident on administrative segregation. The staff member making the recommendation will compile an initial report with documentation to the Superintendent or designee who shall determine if the resident is to be recommended for segregated housing utilizing the appropriate Specialized Housing dialogue in OIS.
3. The resident will be informed in writing of pending consideration for placement on administrative segregated housing. The Notice for Consideration for Administrative Segregation on OIS will be completed and uploaded to the Specialized Housing entity.
4. The resident shall be permitted to receive assistance from a staff representative, if requested.
5. The Superintendent or designee will meet with the resident to discuss the reasons for the recommended segregation.
6. If the Superintendent or designee recommends the necessity for segregated housing, he/she will enter his/her recommendation in OIS within two (2) calendar days for final approval by the BJS Assistant Commissioner or designee. The evidence and decision of the Assistant Commissioner or designee is printed and given to the resident.
7. Continuation of segregated housing for each resident will be based on a seven (7) day perpetual review by the Superintendent or designee and his or her recommendation to the BJS Assistant Commissioner or designee for as long as the resident remains in segregated housing due to administrative segregation.
8. Residents placed on specialized housing due to administrative segregation will be placed on a Behavioral Management Plan which will be developed by the treatment team within two (2) calendar days and will remain in effect until the targeted goals have been completed by the resident. A copy of the plan will be provided to the resident.

- a. This plan will be updated whenever the BJS Assistant Commissioner or designee gives approval for continuation of segregated housing.
 - b. The Superintendent can have a resident removed from specialized housing when they feel the resident has completed the plan and is amenable to reasonable direction and control. This will be documented in OIS.
9. If a facility does not have the means to house a resident in specialized housing, the Superintendent or designee can request to transfer the resident to a more secure facility through the BJS Chief of Operations.
- III. In addition to the above mentioned specialized housing, residents may be placed on room restriction.
- A. Timeout or room restriction is used for minor violations or a “cooling off” and is of short duration, so as to not restrict or deny program participation. Room restriction is not a sanction given by the Hearing Officer.
 - B. The resident is returned to the group when the negative behavior is under control.
 - C. While in timeout:
 1. The resident has the reason for the time out explained and is given the opportunity to explain his/her reasons for behavior.
 2. Staff contact is made and documented every fifteen (15) minutes. All checks are to be documented on the Observation Sheet (**Attachment #1**), which is uploaded to OIS.
 3. The resident participates in determining the end of the timeout.
 4. Timeout or room restriction cannot exceed sixty (60) minutes specified at the time of assignment.
- IV. All documents are to be uploaded to the resident’s record in OIS.

ATTACHMENT(S):

- #1 Observation Sheet
- #2 Request for Protective Custody

APPROVED SIGNATURE:  03/24/2025
William K. Marshall III, Commissioner Date

SPECIALIZED HOUSING OBSERVATION SHEET

Resident's Name: _____ (Last) (First) (MI) OID# _____

- Court Ordered Seg
 Medical Isolation
 Protective Custody
 Room Confinement
 Ad Seg

Unit: _____ Room Location: _____ Start Date and Time: _____

Specialized Housing Authorized by: _____
 (Print Name and Title)

Released from Specialized Housing Date and Time: _____

Authorization for Release from Specialized Housing by: _____
 (Print Name and Title)

Visual checks by staff at least every 15 minutes.

CODE FOR RESIDENT BEHAVIOR AND STAFF INTERVENTIONS

A. Self-Injurious Behavior	H. Crying	O. Eating Meal/Snack	V. With Mental Health
B. Assaultive Behavior	I. Oppositional/Defiant	P. Recreation	W. With Medical
C. Destructive Behavior	J. Cooperative/Compliant	Q. Toilet/Shower	X. With BJS Treatment
D. Suicidal Statements/Act	K. Yelling/Screaming	R. School	Y. With Superintendent
E. Calm/Relaxed	L. Incoherent	S. Self-Contained/Activity	Z. Visit - Outside Professional
F. Agitated/Frustrated	M. Sleeping	T. Social Activity/Program	Aa. Visit - Family
G. Quiet/Withdrawn	N. Medication Pass	U. Telephone/Tablet	Bb. Visit - Supreme Court

****Any staff initialing here must sign at bottom**

Time	Codes	Staff Initials		Time	Codes	Staff Initials		Time	Codes	Staff Initials		Time	Codes	Staff Initials

Staff Signature(s)/Date: _____

**Any signs of suspected injury or physical distress must be reported to the medical staff immediately.*

**Bureau of Juvenile Services
Resident Request for Protective Custody**

Part A: Request from Resident

Facility: _____ Date: _____

Reason for requesting protective custody:

Resident Signature: _____

Part B: Staff Response

Staff receiving request: _____ Date: _____

IR (if applicable): _____ Superintendent Decision: Approved Denied

Superintendent's Signature: _____ Date: _____

Offender notified of decision on Date: _____ Time: _____

Information entered and form uploaded to OIS:

Staff Signature: _____